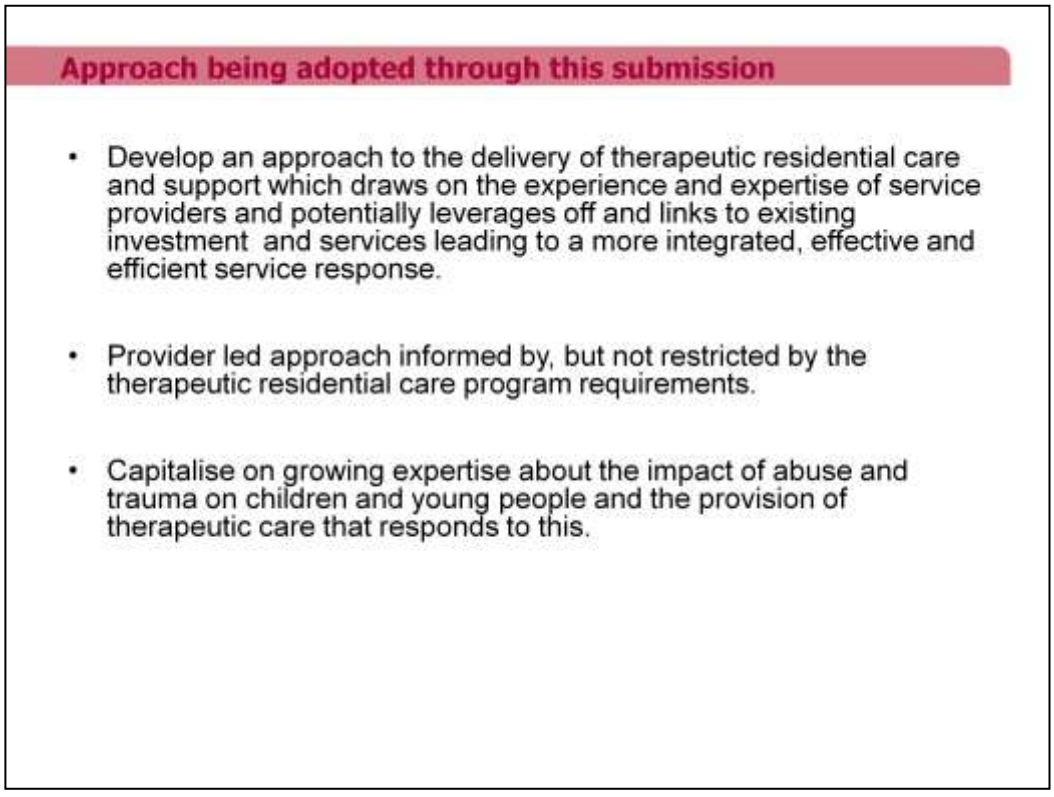
Therapeutic Outcomes Focussed Residential Care and Support Service





Information Session – 17 December 2014

1



Prospective providers should consider the program requirements attached to this submission as a guide only for shaping the proposed model(s). This is an opportunity to be flexible with the design and deliver creative services that best meet the needs of children in care.

The model of care and support

- Outline a model of therapeutic care and support that will most effectively ensure the safety and wellbeing of the children and young people. The model(s) implemented will be monitored through a focus on a range of outcomes being achieved by the children and young people, covering multiple areas of their life. These will be refined with the successful provider(s).
- The submission does not specify all of the inputs required in a prescriptive way, or set a specific unit price for the delivery of the service.
- Rather, the submission articulates the expectations and outcomes sought for children and young people and offers service providers the opportunity to develop a model that they believe best achieves these, informed by their own knowledge, experience and expertise, and the level of funding available.

The model of care and support

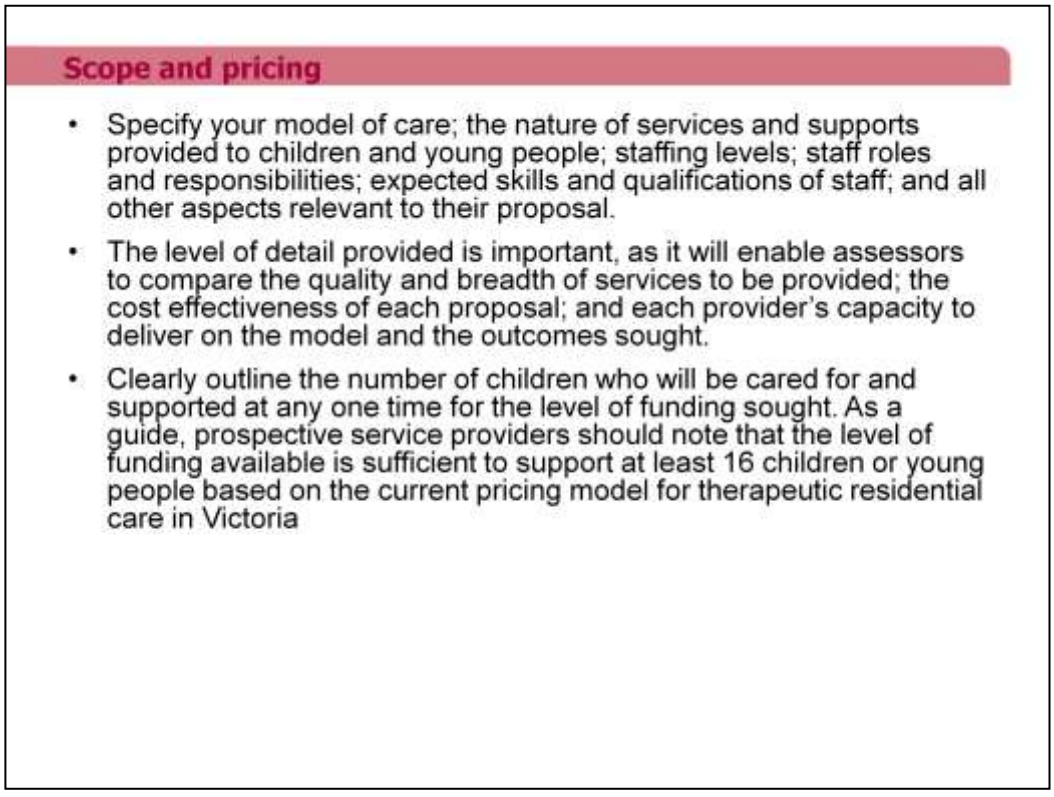
- Service efficiency is one factor that will be considered in assessing applications. However, this does not mean that the cheapest service will be preferred. Consistent with the key selection and the aims and intent of therapeutic residential care as outlined in the program requirements, assessment will focus predominantly on service effectiveness; a demonstrated understanding of the needs of the client group; an understanding of effective interventions for the client group; and many other factors.
- As a minimum the department expects that the service provider will be able to demonstrate how the children in their care:
  - Will be kept safe;
  - Will have their physical health, emotional health and social needs met;
  - Are engaged and participating in education and training;
  - Are supported to develop age appropriate life skills that are the building blocks for participation in adult life; and
  - Enjoy safe, healthy, supportive and positive relationships and connections with their family, culture, friends and community.
- An evaluation framework will be developed prior to service commencement

Who can submit?

- The submission process is open to all prospective service providers, including community service organisations, public and private providers operating in Victoria or any other jurisdiction. Submissions are welcome from individual organisations, consortia, partnerships, a lead provider or other arrangement as deemed appropriate whether or not there is current service agreement or registration.
- The successful provider(s) will be required to enter into a service agreement with the department. A service provider that holds a service agreement with the department to deliver out-of-home-care is required to apply for registration as an out-of-home-care provider under the Children, Youth and Families Act 2005.
- If a submission is successful by an unregistered provider, providers must apply for registration and must demonstrate capacity to comply with the Department of Human Services Standards via the self - assessment report and quality improvement plan and also undertake an independent review within 12 months of registration.

Scope and pricing

- Historically - allocations of funding for the provision of therapeutic residential care, have specified a base unit price per child and then applied a specific therapeutic care loading to purchase a number of defined inputs.
- This approach provides an opportunity to develop a model of therapeutic residential care from the ground up, and detail the price for delivering that service.
- You can submit for a portion, or all of the funding envelope. The level of funding sought will be determined by each potential submitter (up to $5.2 million)



There are two existing prices paid for therapeutic residential care placements in Victoria. RP2 therapeutic is priced at $248,185 per placement per annum; RP3 therapeutic is priced at $322,335 per placement per annum.

Funding and costs

The total funding available over a four year period with service commencement from 13 April 2015 – 12 April 2019.

14/15	15/16	16/17	17/18
$5.2 million*	$5.2 million	$5.2 million	$5.2 million
		TOTAL	$20.8 million

*pro rata effect for 2014/15

*Pro rata effect for 2014/15 dependent on date of commencement

Location of services

- The department's preference is that a portion of the funding available will be used to deliver a service in each of the department's four divisions. However, this is not mandatory and therefore consideration will be given to utilising the funds in a way that does not achieve this – should the quality of submissions received support this approach.
- In developing proposals, potential service providers need to be cognisant of the demand for services of this nature in various locations.

Service demand data

There are a number of available resources that may assist you in obtaining information in regards to demographics, population growth, out-of-home care demand and other useful data in order to develop proposals for service delivery.

Listed below are just a few of these sources:

- **Out-of-Home Care: A Five Year Plan**

  www.dhs.vic.gov.au

- **Report on Government Services 2014 -**
  www.pc.gov.au/research/recurring/report-on-government-services

- **The Australian Bureau of Statistics**

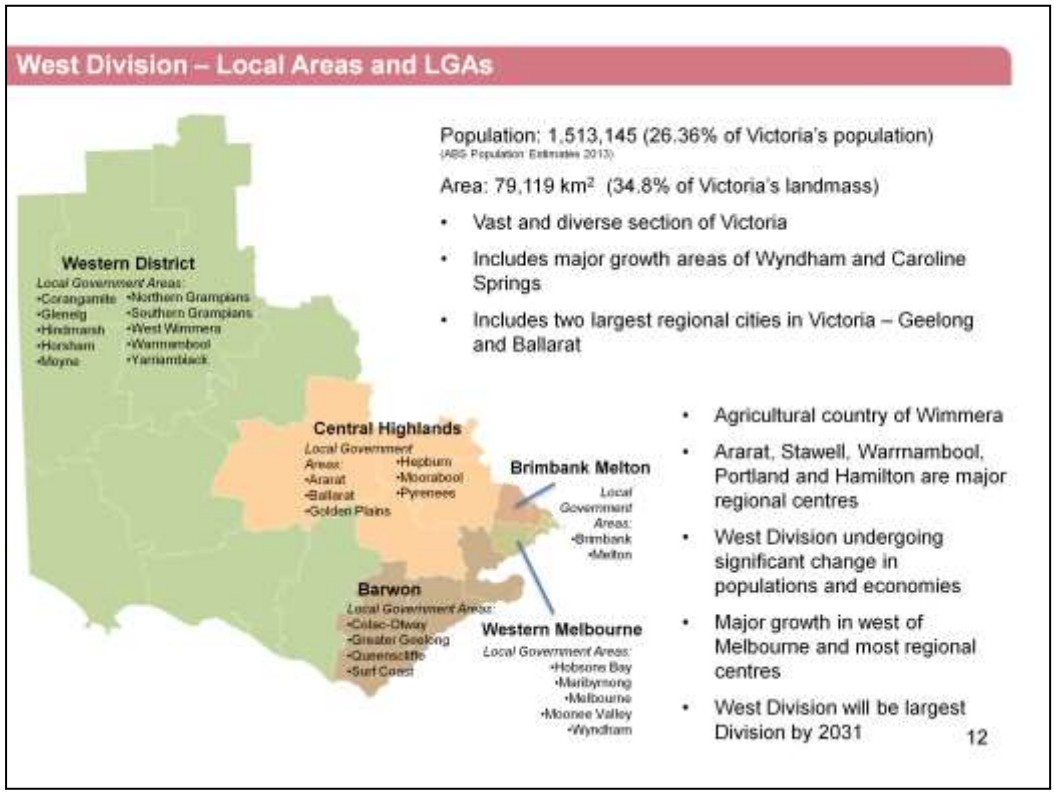
  www.abs.gov.au

Information Session - West Division

Sallie Rogers



Therapeutic Outcomes Focussed Residential Care and Support Services



- West Division covers vast and diverse parts of Victoria, from the Melbourne CBD and its western suburbs, including Footscray, Sunshine, Altona, Werribee, the major growth areas of Wyndham and Caroline Springs, and the metropolitan fringe towns of Melton and Bacchus Marsh.

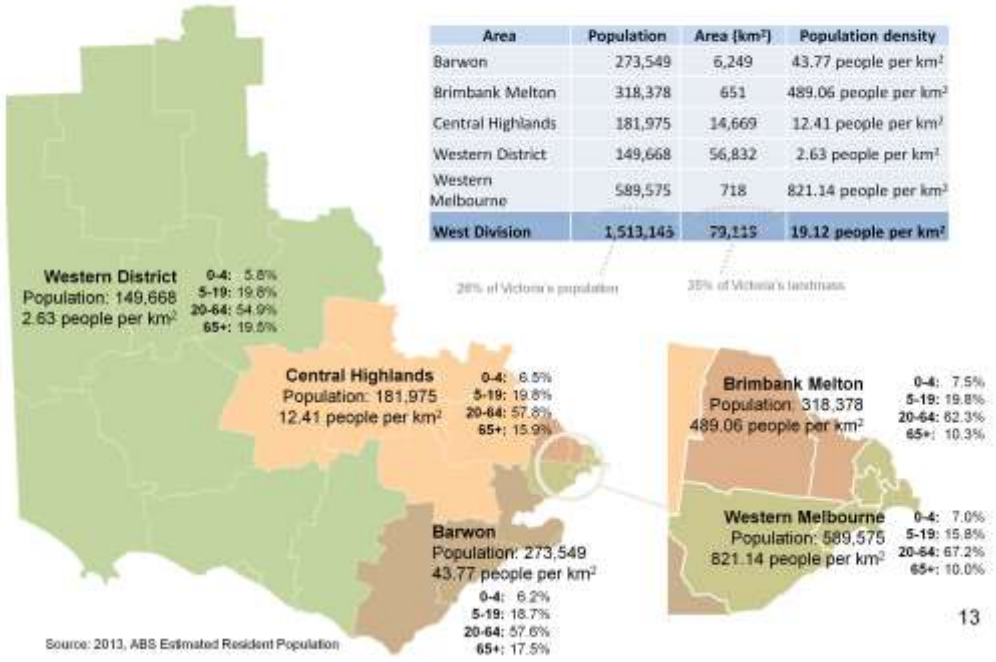
- It includes the two largest regional cities in Victoria: Geelong and Ballarat, as well as major coastal and lifestyle migration areas such as the Bellarine Peninsula and the Surf Coast, and the goldfields region of Daylesford and the Pyrenees.

- In the west is the agricultural country of the Wimmera, including the towns of Horsham and Nhill, and other major regional centres such as Ararat and Stawell. In the coastal and hinterland region of south west, is dairy and agricultural land and the major centres of Warrnambool, Portland and Hamilton.

- Like much of Victoria West Division is undergoing significant change in its populations and economies, with major growth and urbanisation occurring in the west of Melbourne and most regional centres, along with decreasing populations in many of the more remote and rural communties.

- West Division is fastest growing Division, will be the largest by 2031

West Division Population Overview 2013



Area	Population	Area (km²)	Population density
Barwon	273,549	6,249	43.77 people per km²
Brimbank Melton	318,378	651	489.06 people per km²
Central Highlands	181,975	14,669	12.41 people per km²
Western District	149,668	56,832	2.63 people per km²
Western Melbourne	589,575	718	821.14 people per km²
West Division	**1,513,145**	**79,119**	**19.12 people per km²**

28% of Victoria's population

35% of Victoria's landmass

Source: 2013, ABS Estimated Resident Population

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Key Characteristics of West Division Local Areas

BARWON

- Barwon is the largest and fastest growing region in Victoria outside the Melbourne metropolitan area.
- Geelong is second largest city in Victoria.

BRIMBANK-MELTON

- Has high cultural and linguistic diversity.
- Projected to have significant growth over the next 20 years.
- Suburbs in and around Sunshine, Deer Park, Ardeer, and Melton are among the most disadvantaged in Victoria.

CENTRAL HIGHLANDS

- Pyrenees (5) and Ararat (11) are both ranked in the eleven most disadvantaged LGAs in Victoria.
- Ballarat is the second largest regional city in Victoria.

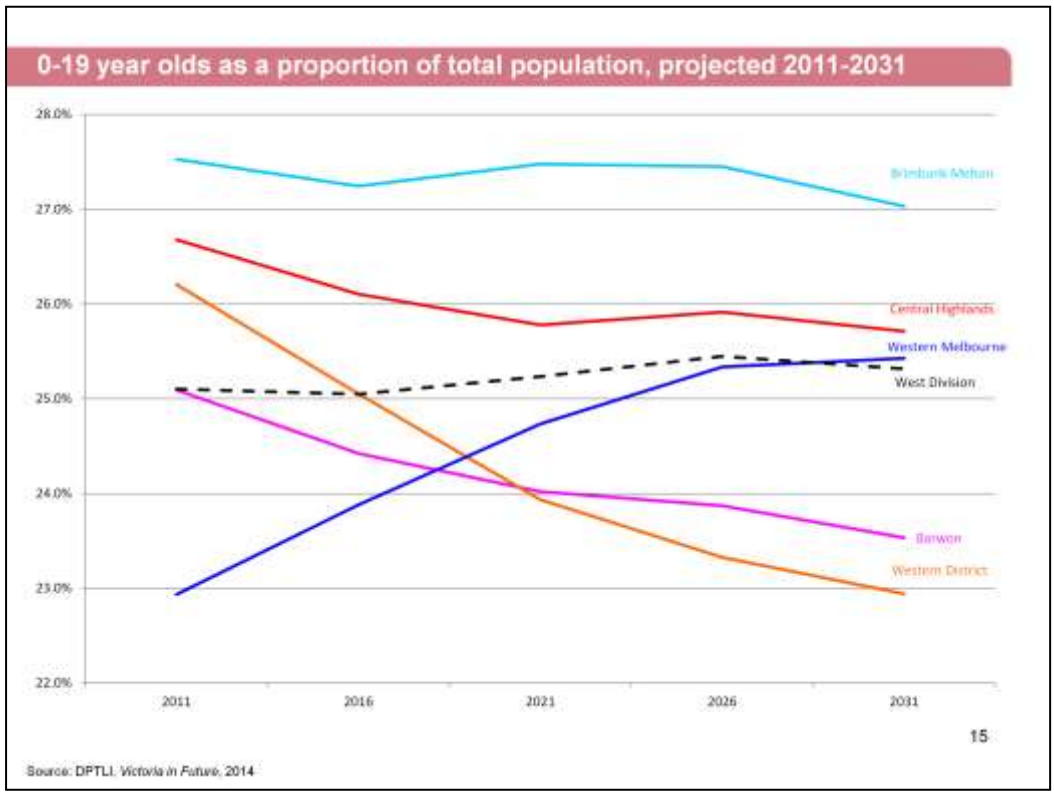
WESTERN DISTRICT

- Largest geographic area but lowest population in West Division.
- Strong industry and historical associations to agricultural and pastoral economies.
- Has highest % of Aboriginal people of the population in West Division (1.36%).

WESTERN MELBOURNE

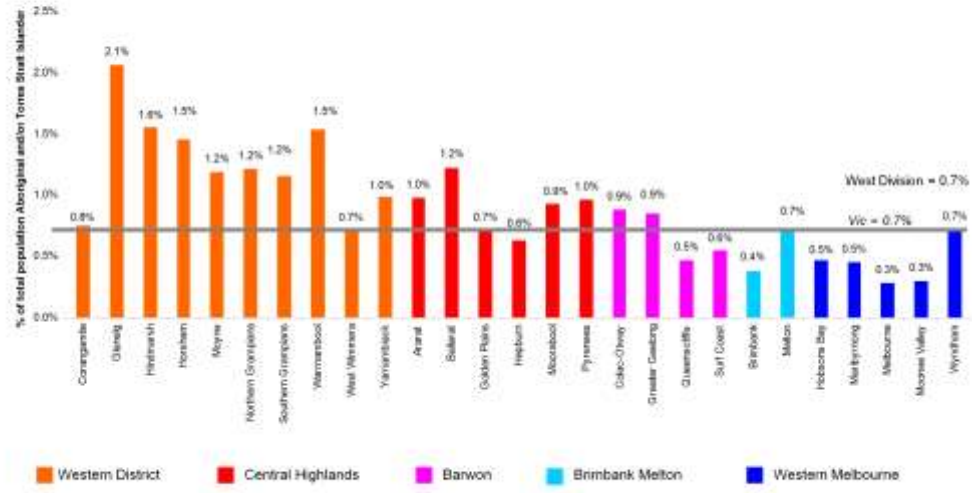
- Projected to have significant growth over the next 20 years.
- Footscray, Maidstone and Braybrook are among the 10% most disadvantage communities in the state.

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- Brimbank Melton has and is projected to consistently have a higher proportion of 0-19 year olds than the West Division average.
- Central Highlands has a higher proportion of 0-19 year olds now, but by 2031 the proportion is projected to be marginally higher than the West Division average.
- Western District currently has a higher proportion of 0-19 year olds than in West Division, but by 2031 is projected to have the lowest proportion and lowest number.
- Barwon currently has a similar proportion of 0-19 year olds as the West Division average but by 2031 is projected to drop below the West Division average.
- Western Melbourne has the lowest proportion of 0-19 years olds, but it will climb to have a similar proportion to that of the West Division by 2031.

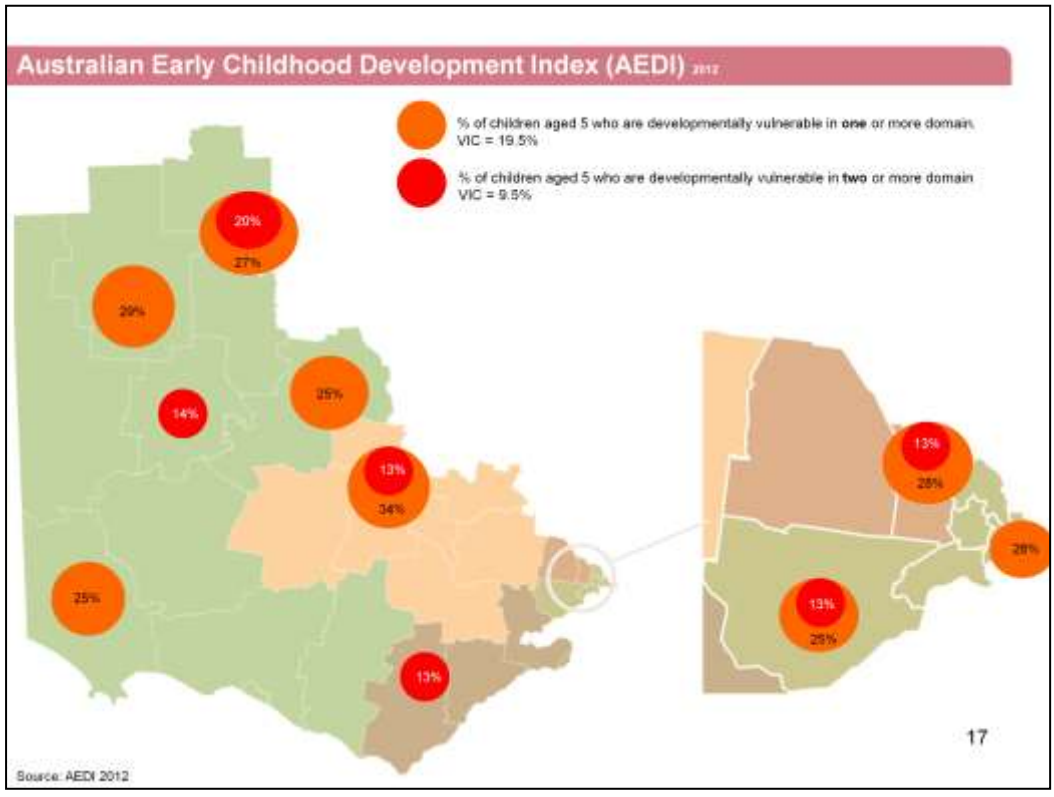
Proportion of Aboriginal and Torres Strait Islander People in West Division 2011



Glenelg, Hindmarsh, Horsham & Warrnambool have the highest proportion of Aboriginal and Torres Strait Islander people in West Division

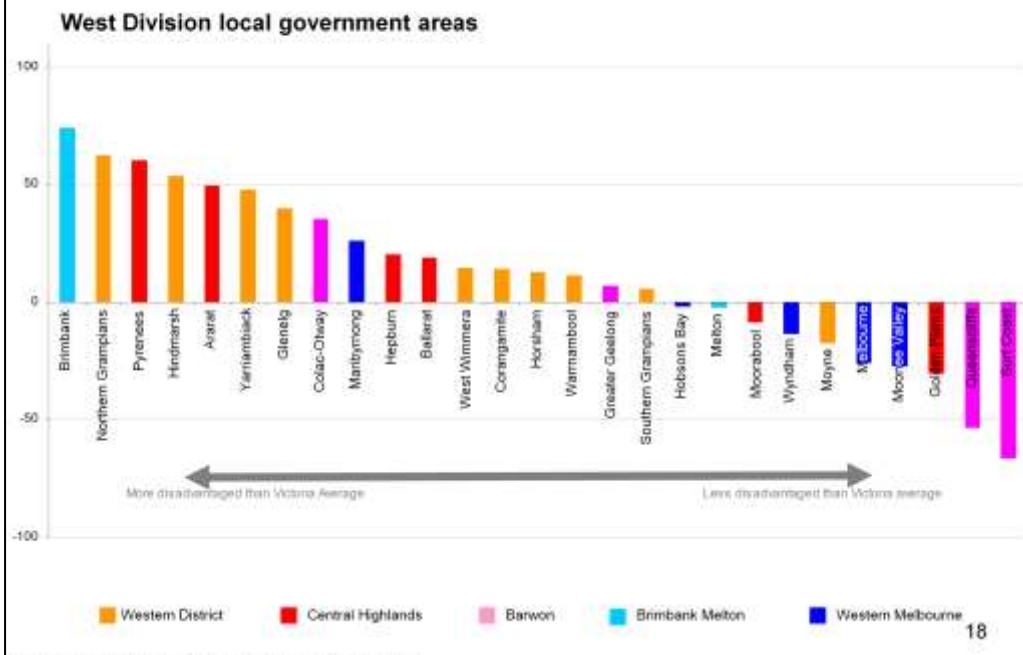
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Source: 2011 ABS Census



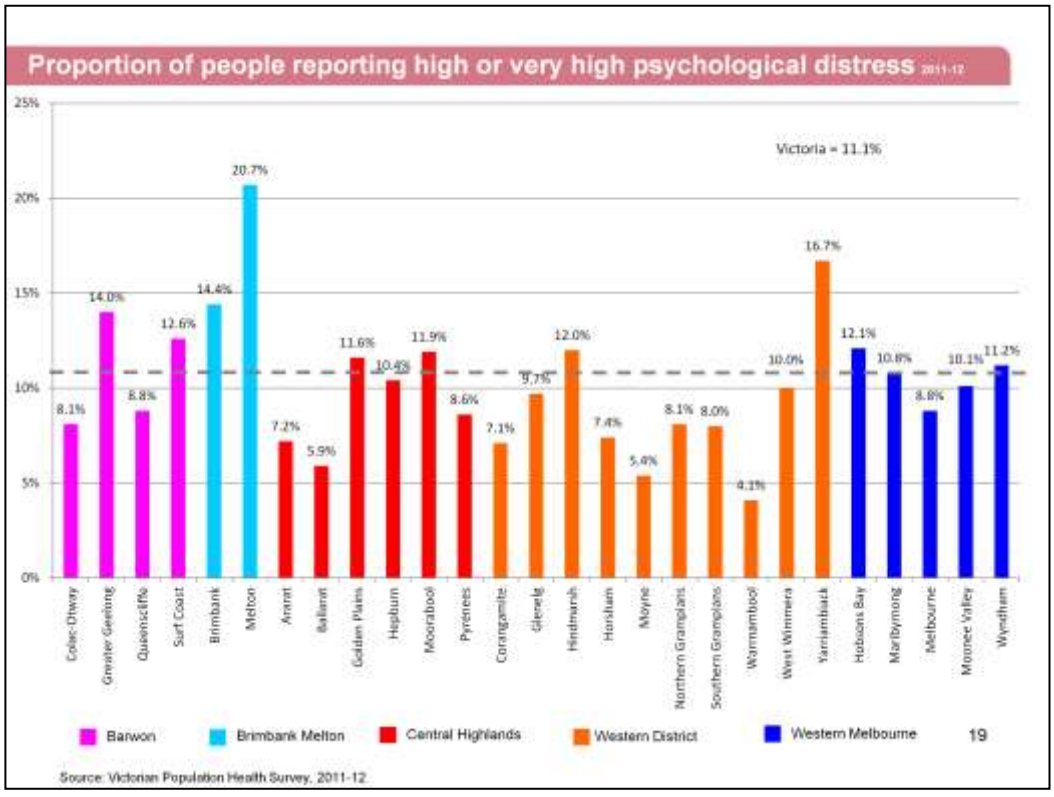
According to the Australian Early Development Index 2012 (AEDI), West Division has some of the highest areas of developmental vulnerability in the state. For instance, Yarriambiack Shire in the northern part of Western District has the highest level of vulnerability to two domains on the AEDI at 20%, and one of the highest levels of vulnerability in one domain. At 34% Pyrenees Shire has the highest levels of vulnerability in one domain.

Index of Relative Socio-Economic Disadvantage 2011



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Source: 2011 SEIFA Index of Relative Socio-Economic Disadvantage


Proportion of people reporting high or very high psychological distress 2011-12
Victoria = 11.1%
25%
20%
15%
10%
5%
0%
8.1%
14.0%
8.8%
12.6%
14.4%
20.7%
7.2%
5.9%
11.6%
10.4%
11.9%
8.6%
7.1%
9.7%
12.0%
7.4%
5.4%
8.1%
8.0%
4.3%
10.0%
16.7%
12.1%
10.8%
8.8%
10.1%
11.2%
Colac-Otway
Greater Geelong
Queenscliffe
Surf Coast
Brimbank
Melton
Ararat
Ballarat
Golden Plains
Hepburn
Moorabool
Pyrenees
Corangamite
Glenelg
Hindmarsh
Horsham
Moyne
Northern Grampians
Southern Grampians
Warrnambool
West Wimmera
Yarriambiack
Hobsons Bay
Maribyrnong
Melbourne
Moonee Valley
Wyndham
Barwon
Brimbank Melton
Central Highlands
Western District
Western Melbourne
19
Source: Victorian Population Health Survey, 2011-12

Preferred Service Location

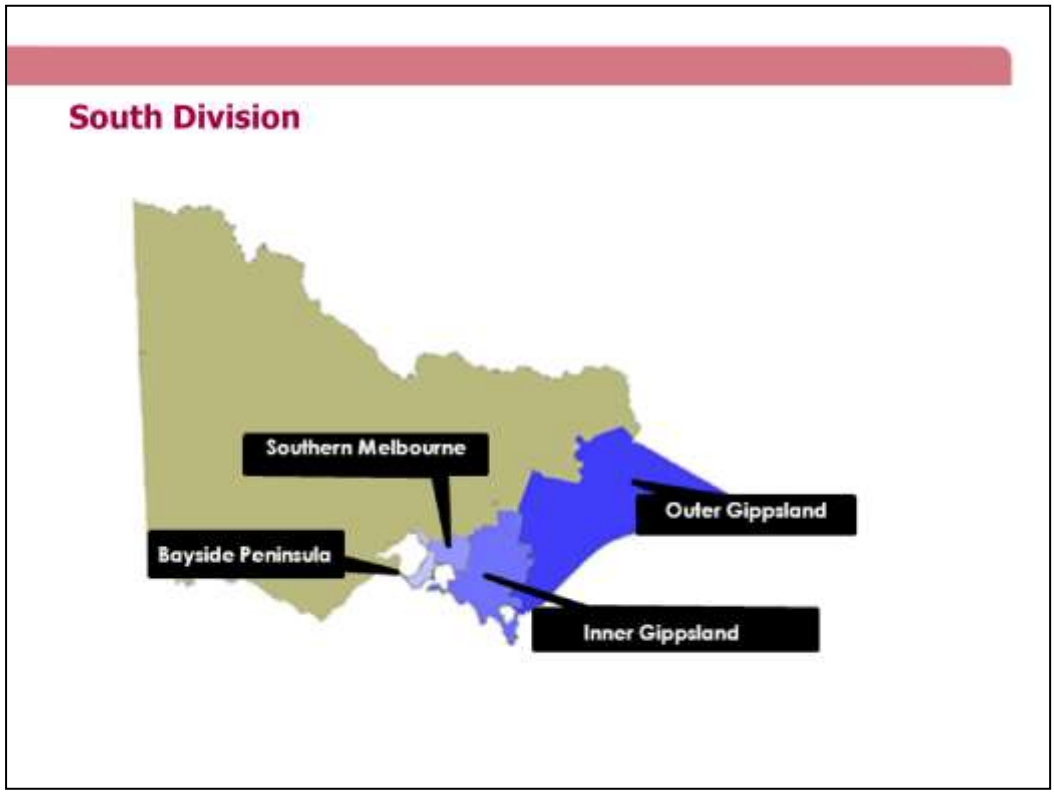
Wyndham/ Melton/ Bacchus Marsh areas

Therapeutic Outcomes Focussed Residential Care and Support Services Submission Information session

South Division

Claire Thorn – Manager, Strategic Planning and Service Development

Wednesday 17 December 2014



The South Division brings together the former Southern Metropolitan and Gippsland regions. Services are delivered across four Areas- Bayside Peninsula, Southern Melbourne, Inner Gippsland and Outer Gippsland with each area servicing between two and seven local government areas (LGAs). The Division includes extensive coastline, national parks and state forests. South Division has an estimated population of 1.6 million and spans some 44,267 km, from South Melbourne in the inner city to the rural town of Mallacoota located near the border with New South Wales, 515km east of Melbourne.

The scale of change in bringing the two regions together is significant. For example in geographical terms, Bayside Peninsula and Southern Melbourne Areas together will fit 14.3 times into the combined area of Inner Gippsland and Outer Gippsland Areas, yet approximately 83% of the population lives within the Bayside Peninsula and Southern Melbourne Areas.

Key characteristics for each Area

SOUTHERN MELBOURNE (population 513,116)
Second most disadvantaged community in Victoria
One of the fastest growing areas in Victoria, characterised by significant cultural diversity
Significant Aboriginal population in the City of Casey (1403)
BAYSIDE PENINSULA (population 864,246)
Some areas would be considered affluent, while other areas would be considered significantly disadvantaged.
The area is characterised as mainly residential and there is slow population growth
INNER GIPPSLAND (population 178,027)
One of the fastest growing rural areas in the state, particularly for the 65+ age group
The department's Secretary's project to improve the education and employment outcomes for Aboriginal people in the Latrobe Valley is located in Morwell
OUTER GIPPSLAND (population 89,400)
Largest geographic area within South Division but the lowest population
People of Aboriginal descent make up 2.1% of the population (East Gippsland 1353)

Distribution of units by Local Government Area

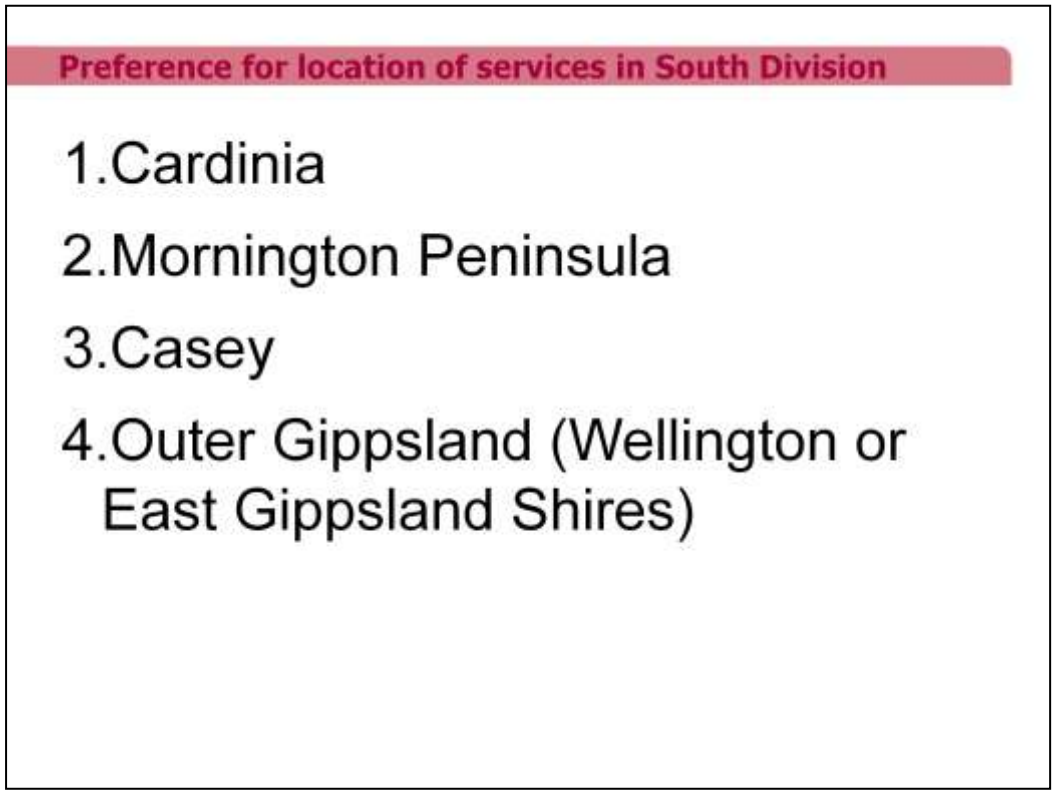
LGA / Area	No. units	No. TRC units
Bayside Peninsula		
Frankston	7	1
Glen Eira	2	-
Port Phillip	2	1
Bayside	1	1
Kingston	1	-
Mornington Peninsula	2	1
Stonnington	-	-
TOTAL	**15**	**4**
Southern Melbourne		
Greater Dandenong	6	3
Casey	4	1
Cardinia	0	-
TOTAL	**10**	**4**

7 OOHC providers are funded to provide residential care services across the four areas:

- Southern Melbourne - 3
- Bayside Peninsula - 4
- Inner Gippsland - 3
- Outer Gippsland - 2

Distribution of units by Local Government Area

LGA / Area	No. units	No. TRC units
Inner Gippsland		
Latrobe	7	2
Bass Coast	1	-
Baw Baw	-	-
South Gippsland	-	-
TOTAL	**8**	**2**
Outer Gippsland		
Wellington	-	-
East Gippsland	3	1
TOTAL	**3**	**1**

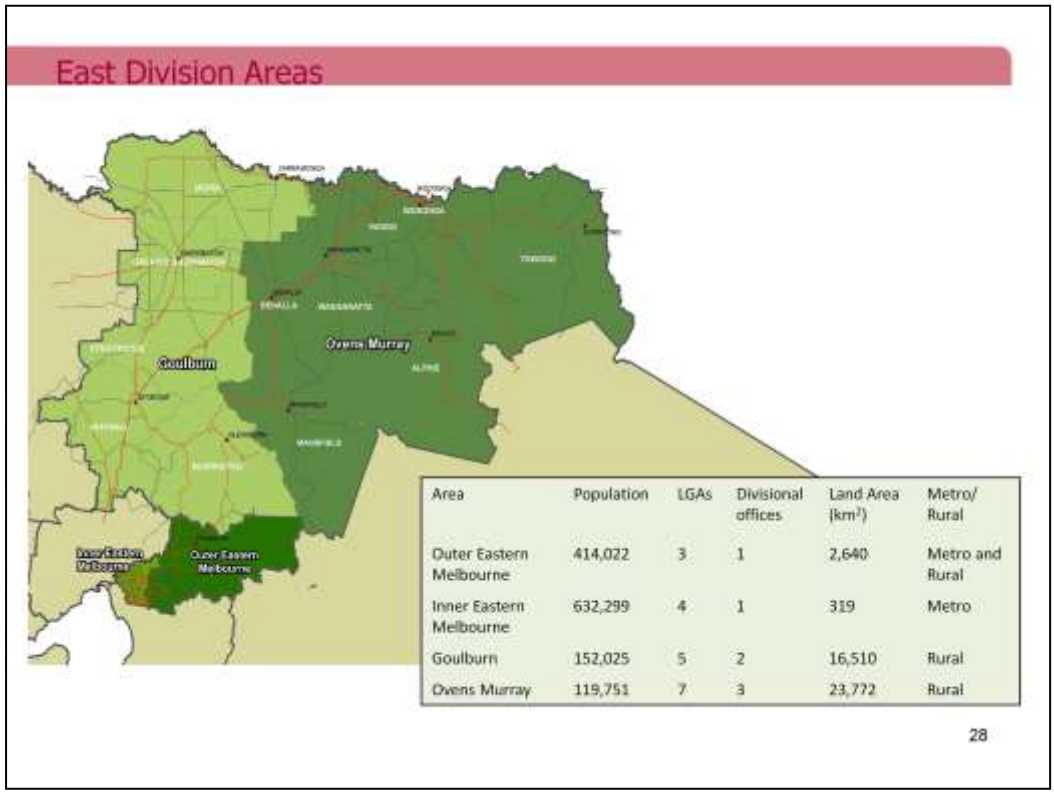


Reasons:

1. **Cardinia** – significant growth in population (25% over past 5 years) and demand with no resi units in the area.
2. **Mornington Peninsula** – slow increase in population (3.7%) but significant increase in demand with only 1 resi unit in the area.
3. **Casey** – significant increase in population (14.7%) and demand, but 4 resi units in area, 1 being TRC unit
4. **Outer Gippsland** – Reasonable increase in population (4.3%) but moderate increase in demand. Only 3 units in whole Area, 1 being TRC.

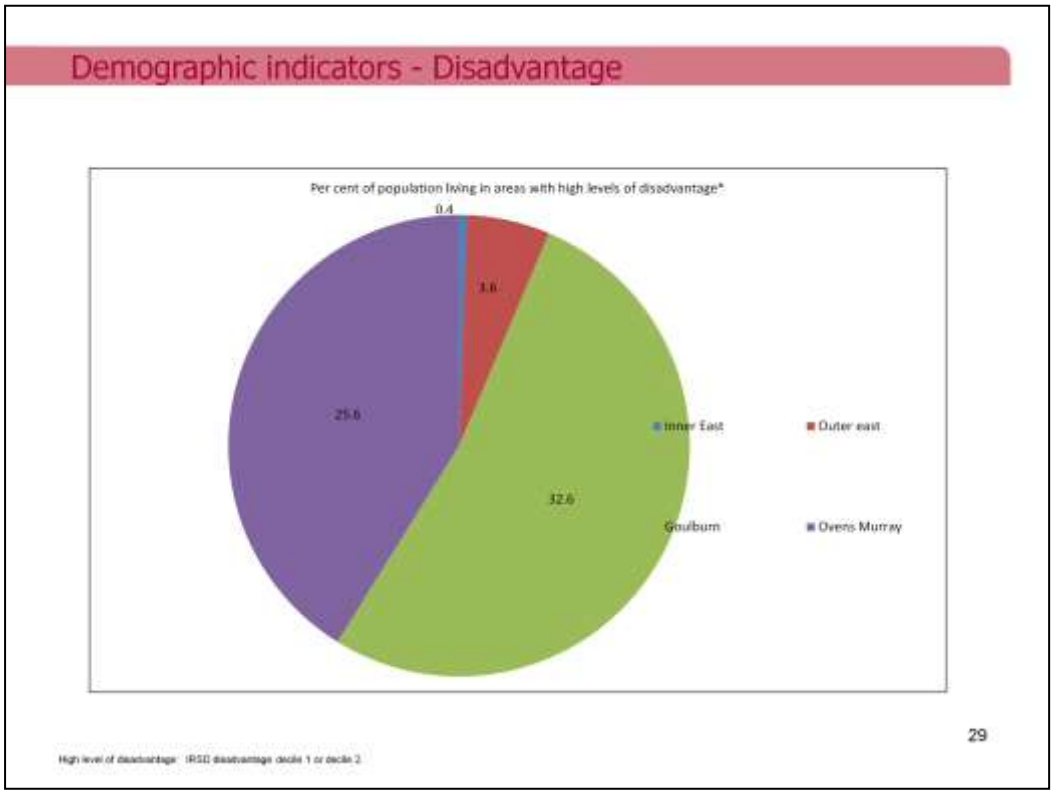
East Division

Therapeutic Outcomes Focused Care and Support Services Information session



Area	Population	LGAs	Divisional offices	Land Area (km²)	Metro/ Rural
Outer Eastern Melbourne	414,022	3	1	2,640	Metro and Rural
Inner Eastern Melbourne	632,299	4	1	319	Metro
Goulburn	152,025	5	2	16,510	Rural
Ovens Murray	119,751	7	3	23,772	Rural

- Services are delivered across four Areas:
  - Inner Eastern Melbourne
  - Outer Eastern Melbourne
  - Goulburn
  - Ovens Murray
- Each Area covering between 3 and 7 local government areas (LGAs).
- The Division has an estimated population of 1.34 million people.
- It spans some over 43,000 square kilometres, from Camberwell in the inner eastern suburbs of Melbourne to the rural town of Corryong near the border with New South Wales, 460 km north-east of Melbourne.
- Around 80 per cent of the division's population live in the Inner and Outer Eastern Melbourne Areas.
- The division has seven offices located in:
  - Ovens Murray Area – Wodonga, Wangaratta and Benalla
  - Goulburn Area - Shepparton and Seymour
  - Inner Eastern Melbourne Area - Box Hill
  - Outer Eastern Melbourne Area - Box Hill and Ringwood

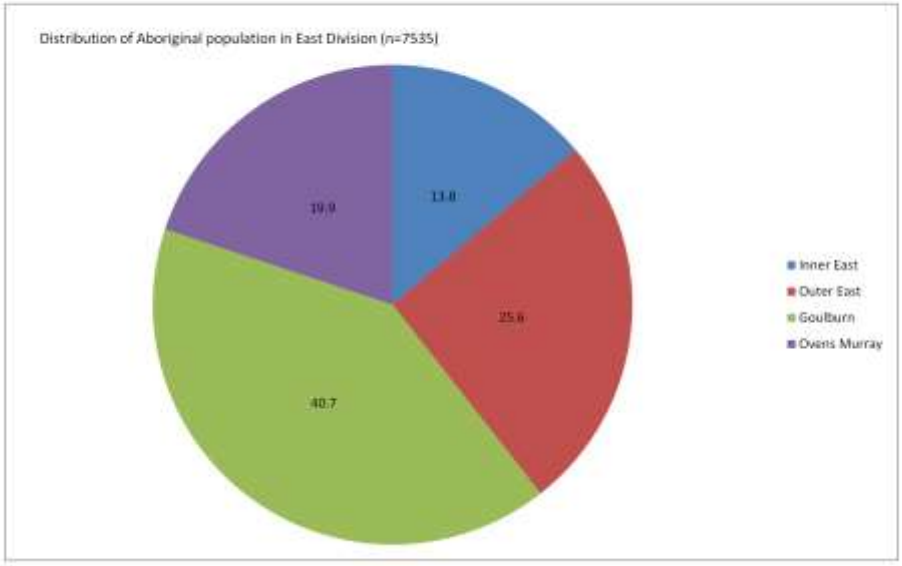


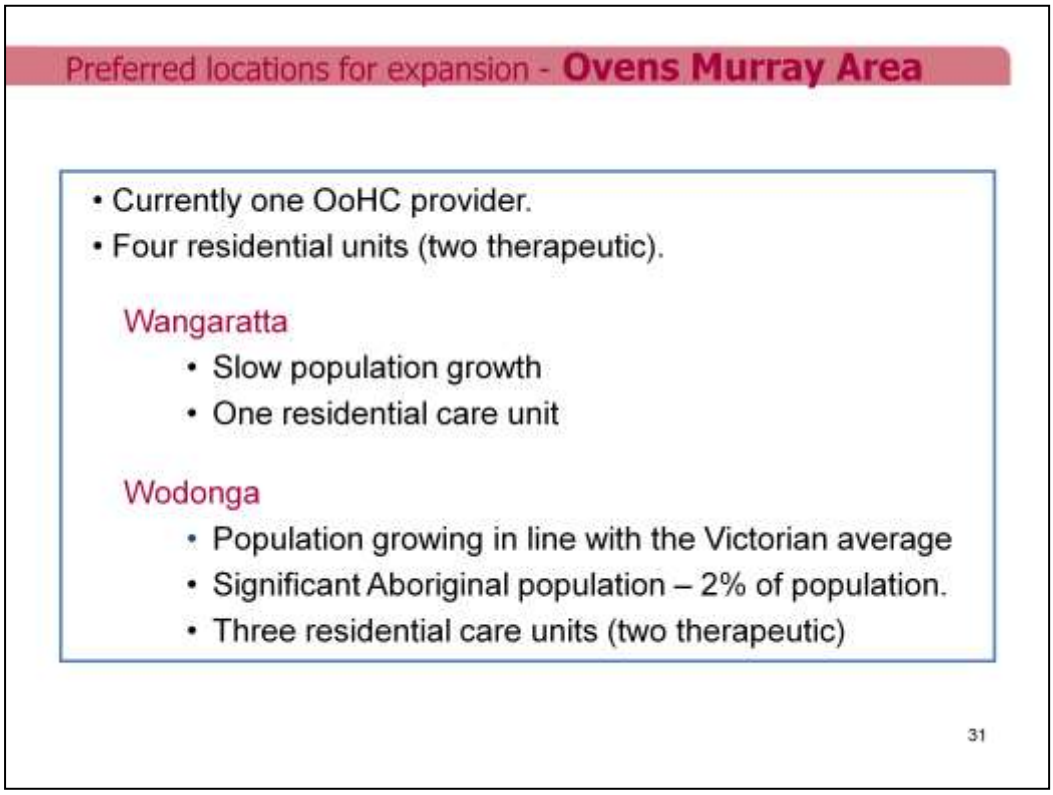
- Relatively high levels of disadvantage in rural areas of East Division compared to metropolitan areas.

- Goulburn area has the highest concentration of residents identifying as Aboriginal, especially around Shepparton - 40.7%

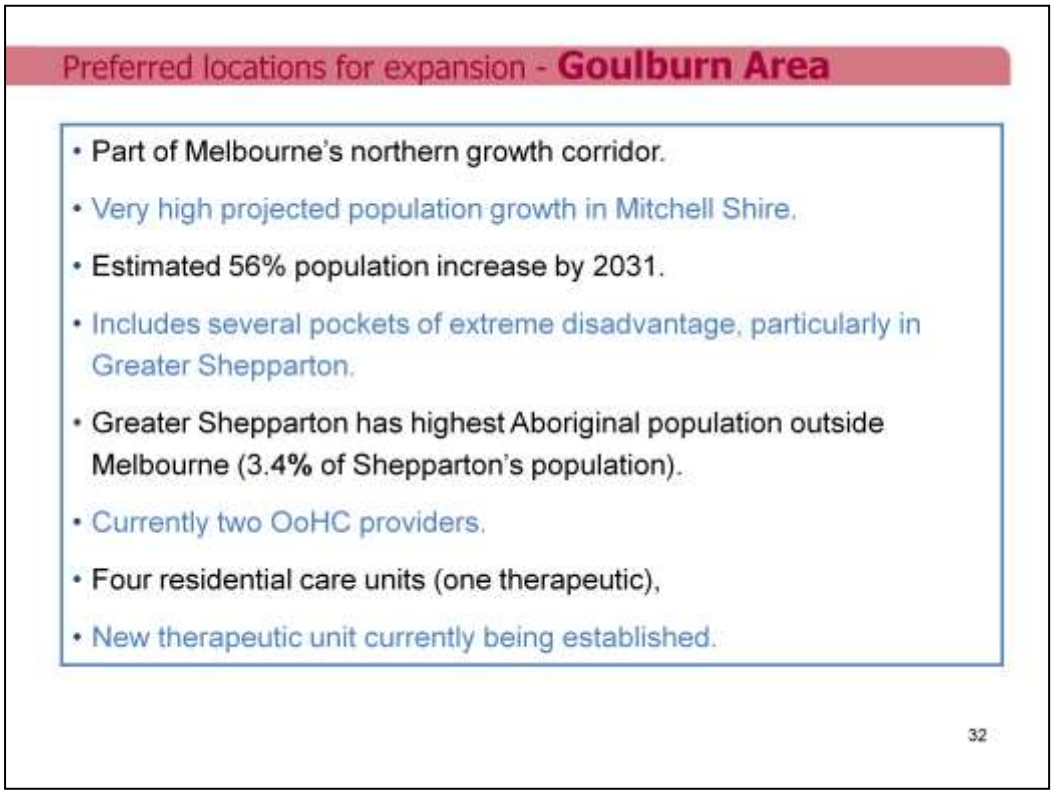
- A significant secondary Aboriginal population lives across Outer Eastern Melbourne Area, both in the rural township of Healesville and with growing numbers in the suburbs as well – 25.6%

Demographic indicators – Aboriginal population





- Ovens Murray is the rural Area that runs up to the New South Wales/Victoria border.
- The two largest local government areas in Ovens Murray Area are:
    - City of Wodonga
    - Wangaratta Rural City.
- Recent Victoria Police data reflects a rise in reports to police of family violence in both Wodonga and Wangaratta over the 12 months to June this year.
- Ovens Murray Area has the highest rates of OoHC in East Division, with limited capacity to meet demand.
- As such, it is East Division's priority area for expansion of therapeutic services, followed by Goulburn Area and Outer Eastern Melbourne Area.
- One provider



- Goulburn Area sits to the West of Ovens Murray, and also borders New South Wales to the north.

- Mitchell Shire, to the south of Goulburn Area, borders Melbourne's northern suburbs.

- Its major regional centres are Shepparton and Seymour

- Two OoHC providers

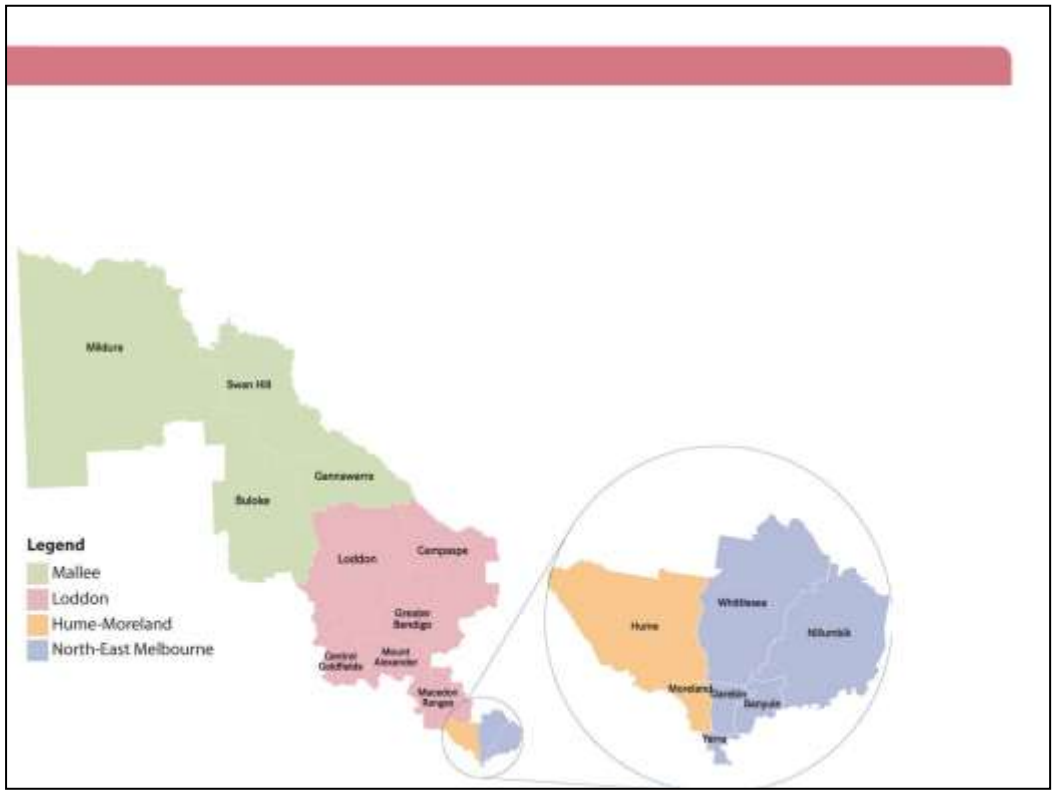


Outer Eastern Melbourne Area has a true urban/rural interface, with most of its population in the suburbs.

3 OoHC providers

Therapeutic Outcomes Focussed Residential Care & Support Services

- Peter Beaumont, Service Development
- North Division



North Division is comprised of the former Loddon Mallee Region and the northern component of the former North & West Metropolitan Region.

Estimated population of 1.2M, representing 22% of the Victorian population.

There are almost 11,000 Aboriginal people in the division, with 10 LGA's within the division having a higher than average population and high population count in Mildura, Swan Hill and Campaspe

5 LGA's within North Division are above the state average for population of people born outside Australian, and not speaking English as a first language at home, these are Darebin, Hume, Moreland, Whittlesea and Yarra

Areas:

NEMA, HMA, Loddon & Mallee, with the division extending from the CBD to Echuca, Swan Hill and Mildura.

Populations:

HMA - 335,693
NEMA - 579,533
Loddon - 221,741
Mallee - 92,352

Key Facts:

-Two growth corridors of Hume & Whittlesea

-76% of the divisional population resides in the northern metropolitan area of the division, with the rural population is concentrated in Bendigo, Mildura, Swan Hill and Echuca (ABS)

-lower year 12 completion rates at 41.9% for North Division compared to Victoria overall at 56.3%. Completion rates are notably lower for the Loddon and Mallee Areas (ABS)

-high rates of family violence incidents in Swan Hill, Mildura, Central Goldfields, and Hume (ABS)

-7 LGA's within North Division are above the state average rate of unemployment, these are Central Goldfields, Darebin, Hume, Loddon, Mildura, Moreland and Whittlesea.

-On the Social Economic Indicators for Areas Index the North Division has 13 of our 17 LGAs are rated as areas of relative social disadvantage (ABS, SEIFA Index 2011) and 4 suburbs or towns in the top 10 most disadvantaged.

We know that these are indicators, along with many others, than impact on personal and family security, standard of living and general wellbeing.

North Division Residential Service Locations		
Area	**Residential Services**	**TRC Services**
North East Melbourne *11 Residential Services*	- Reservoir x 3 - Thomastown x 1 - Ivanhoe x 2 - Diamond Creek x 1	- Reservoir x 2 - Eltham x 1 - Rosanna x 1 *+ Hurstbridge Farm*
Mallee *4 Residential Services*	- Mildura x 2 - Swan Hill x 1	- Mildura x 1
Hume Moreland *8 Residential Services*	- Pascoe Vale x 1 - Glenroy x 1 - Meadow Heights x 1 - Coburg x 2 - Fawkner x 1	- Fawkner x 1 - Meadow Heights x 1
Loddon *7 Residential Services*	- Bendigo x 5 - Echuca x 1	- Bendigo x 1

OoHC: Five Year Plan

"Evidence suggests that for many children, they are entering care from increasingly complex family environments, and this is subsequently impacting on their own needs and behaviours whilst in care."

"Some services are unavailable in some parts of the state, and overall service availability does not necessarily accord with demand or demographic factors"

Victorian Vulnerable Children – Our Shared Responsibility Strategy 2013–2022

"Children of parents with a disability or mental illness may be at greater risk of abuse and neglect where the parent (or parents) is not adequately supported through informal networks, family links

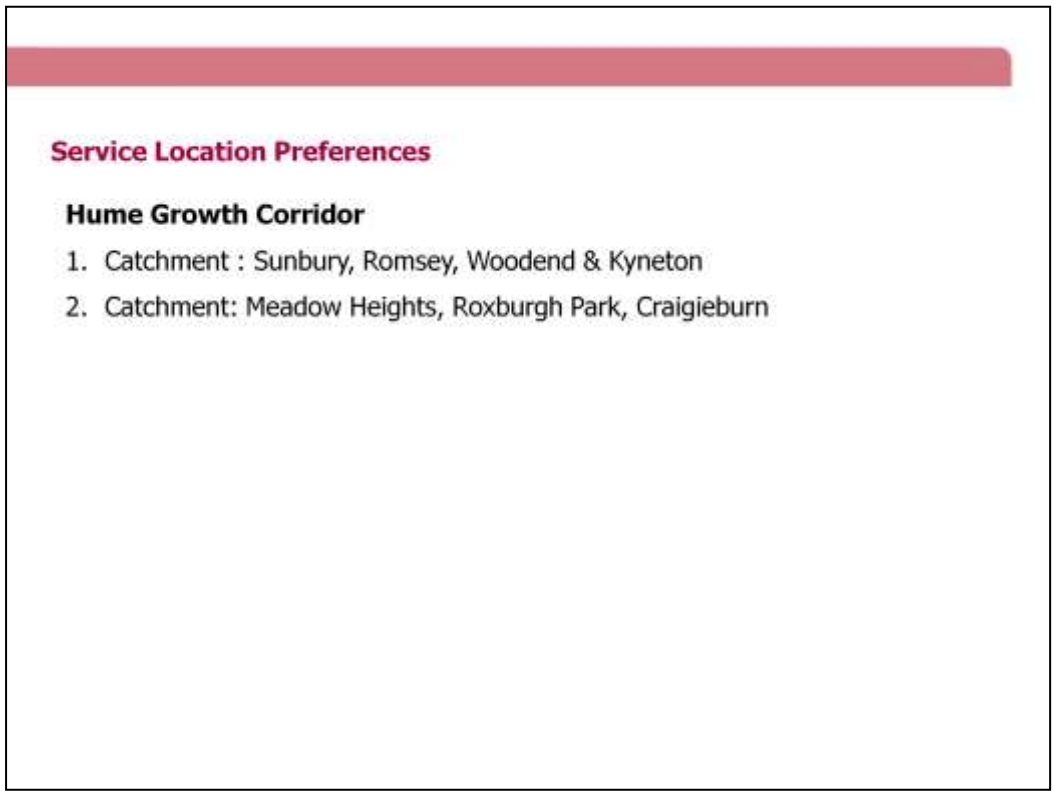
or through formal support. Having a child with a disability can also have a significant impact on the family's caring responsibilities, often placing strain on family relationships and affecting employment

and finances."

Chief Psychiatrist's Guideline - Priority access for out-of-home care (Aug 2011)

"These guidelines outline arrangements for mental health services to give preferential consideration to referral requests concerning infants, children and young people (to the age of 18) who are placed by

Child Protection into OoHC. It aims to establish a service response that ensures the most appropriate and timely assistance is provided to this cohort."



These catchments have been chosen to reflect population growth and maximise accessibility for young people within the metropolitan and fringe areas.

As a division we consider a range of factor to consider service demand and the allocation of resources.

Key Evaluation Criteria - 1

The service provider demonstrates a detailed, valid, responsive and flexible service delivery model tailored to the service requirements and client group.

Key aspects of evidence:

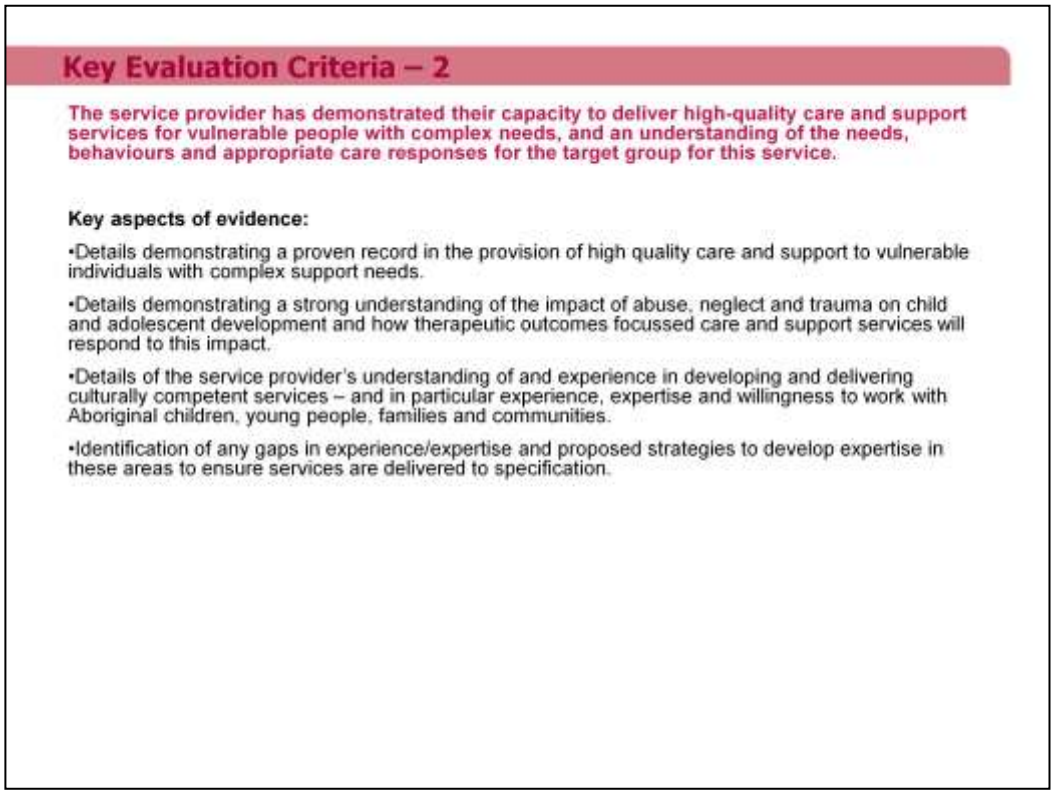
- Informed by the details, intent and aims of the program requirements document, potential providers must clearly outline all relevant aspects of their proposed service delivery model, including:
- The number of children and young people to be cared for within the funding sought.
- The proposed location(s) of the service(s).
- The proposed capital/accommodation arrangements and their cost.
- Their "theory-to-practice" knowledge and understanding of therapeutic residential care.
- The qualifications, experience and expertise of any key staff who will play a lead role in ensuring the "theory-to-practice" implementation of the proposed model and the culture and practice required to support its implementation.
- The level of staffing support and any other resources provided to support the safety and wellbeing of children and young people within the home at all times of the night and day.
- The nature and scope of any additional supports (if any) provided to promote achievement of the range of outcomes to be monitored (for example, any additional supports to ensure effective engagement in education).
- The nature and quantity of any additional supports (if any) to promote safety of children and young people who may be absent from the home and/or how their safety will be supported from within the existing "in-home" supports (for example, capacity to collect a child or young person from a train station late in the evening).
- Explanation of how the service provider will integrate with; leverage off; or collaborate with existing services they provide or which are provided by others in the local area to achieve positive outcomes

This criterion is weighted 4 (critical)

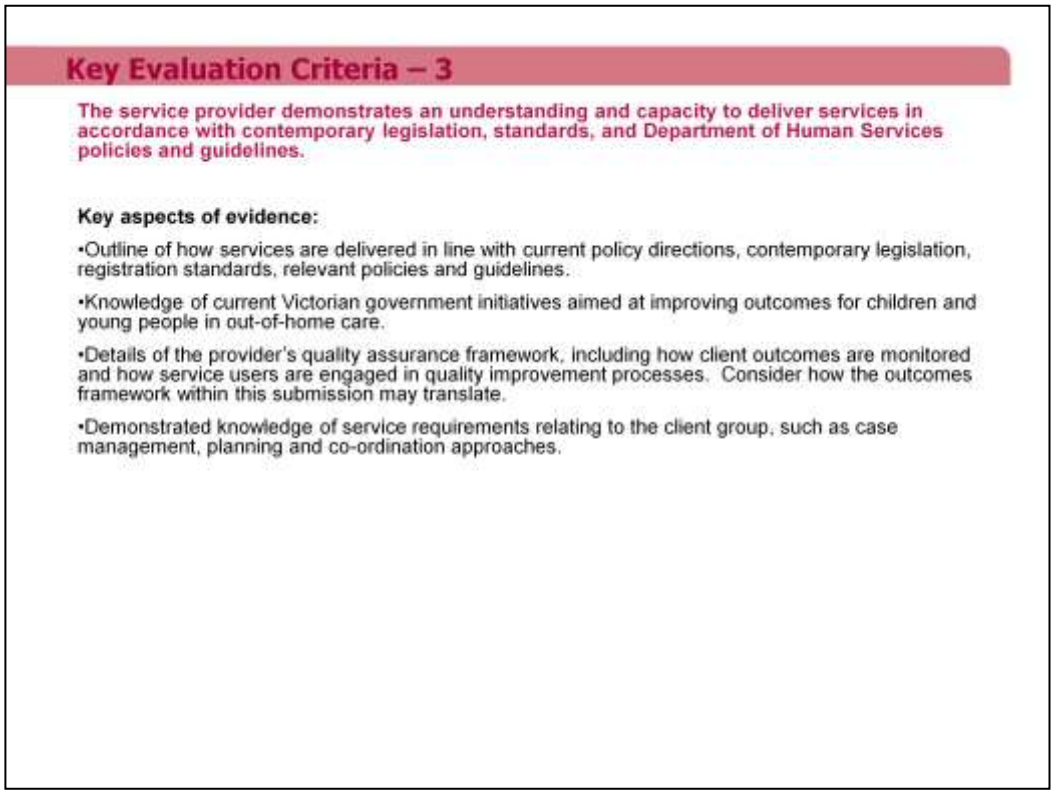
Key Evaluation Criteria – 1 (continued)

- An outline of how the service will support Aboriginal children and young people to maintain or develop connection to their culture, community and other Aboriginal people.
- An outline of how the service will engage with clients in the planning, development and delivery of the care and support provided.
- An explanation of how the service model will cope with the pragmatic realities of the Victorian out-of-home care system which will, from time to time, require service providers to provide care for children requiring an urgent placement and where more rigorous and longer term assessment and placement referral processes may not be possible.
- An outline of how the views of clients will be gathered and reported on to inform the quality and operations of the service.
- An outline of how the model will promote positive relationships between the child and their family, when this is in their best interests and consistent with their case plan.
- An outline of how the service will support children and young people to transition to alternative forms of care or transition to family when this is in their best interests and consistent with their case plan.
- An outline of how the service will prepare children and young people to transition to independent living, when this is in their best interests and consistent with their case plan.
- Details of an implementation/transition plan including establishing and promoting the services, timeframes and work plan.
- Any other aspects of the model which the service provider believes demonstrates its efficiency.
- Any other aspects of the model which the service provider believes demonstrates its effectiveness – gauged through its positive impact on outcomes achieved by the child or young person.

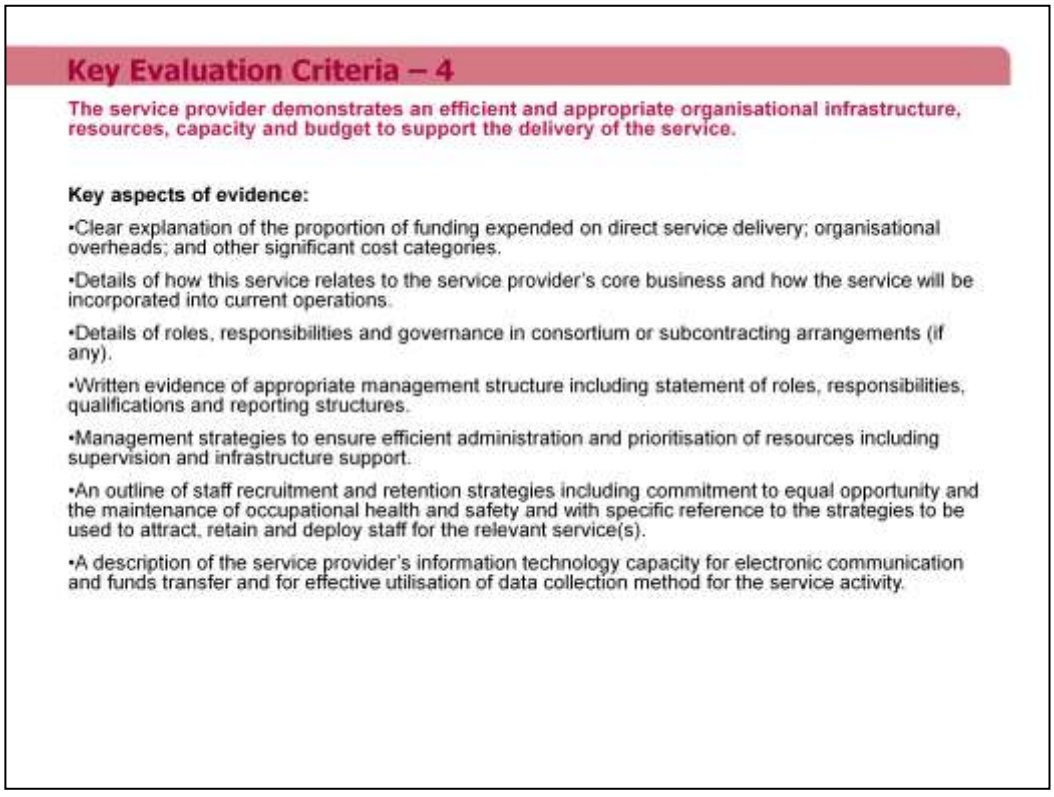
This criterion is weighted 4 (critical)



This criterion is weighted 3 (highly important)

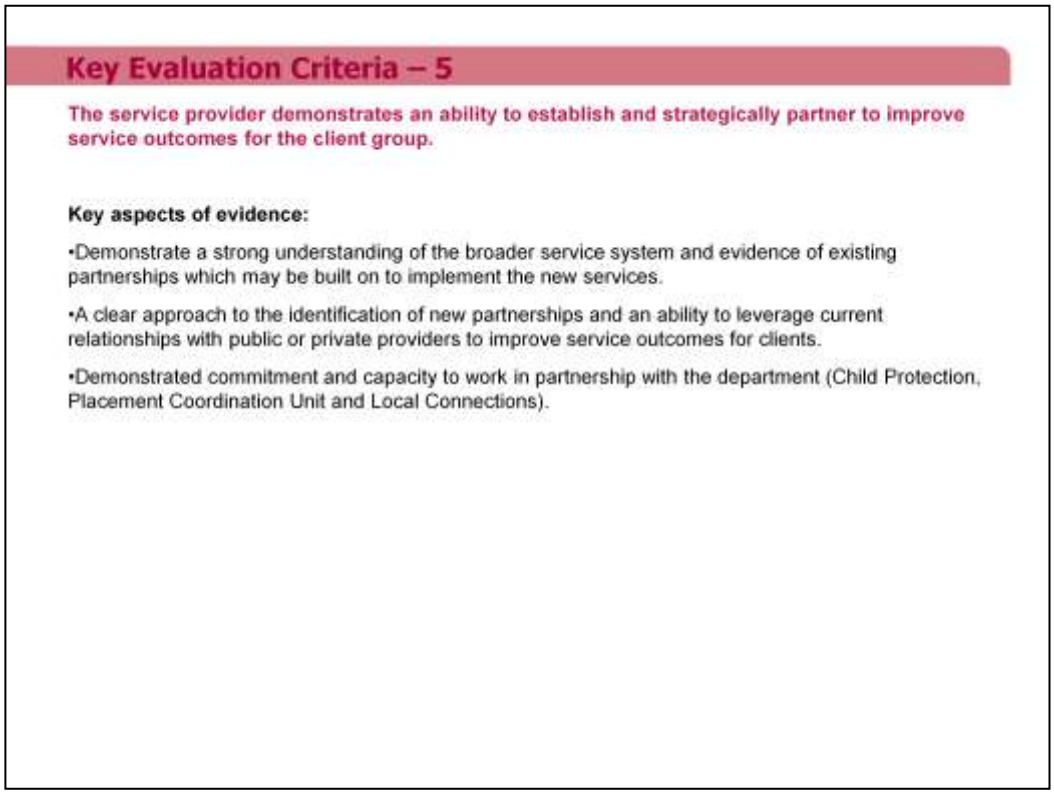


This criterion is weighted 2 (important)

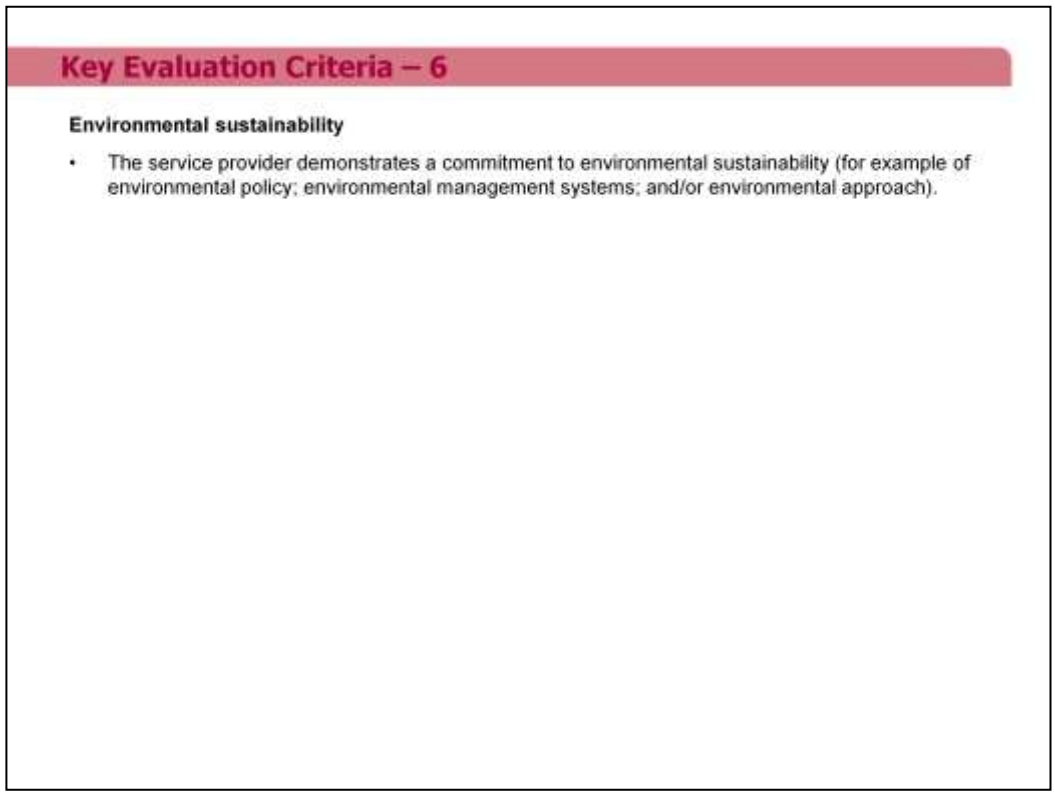


This criterion is weighted 3 (highly important)

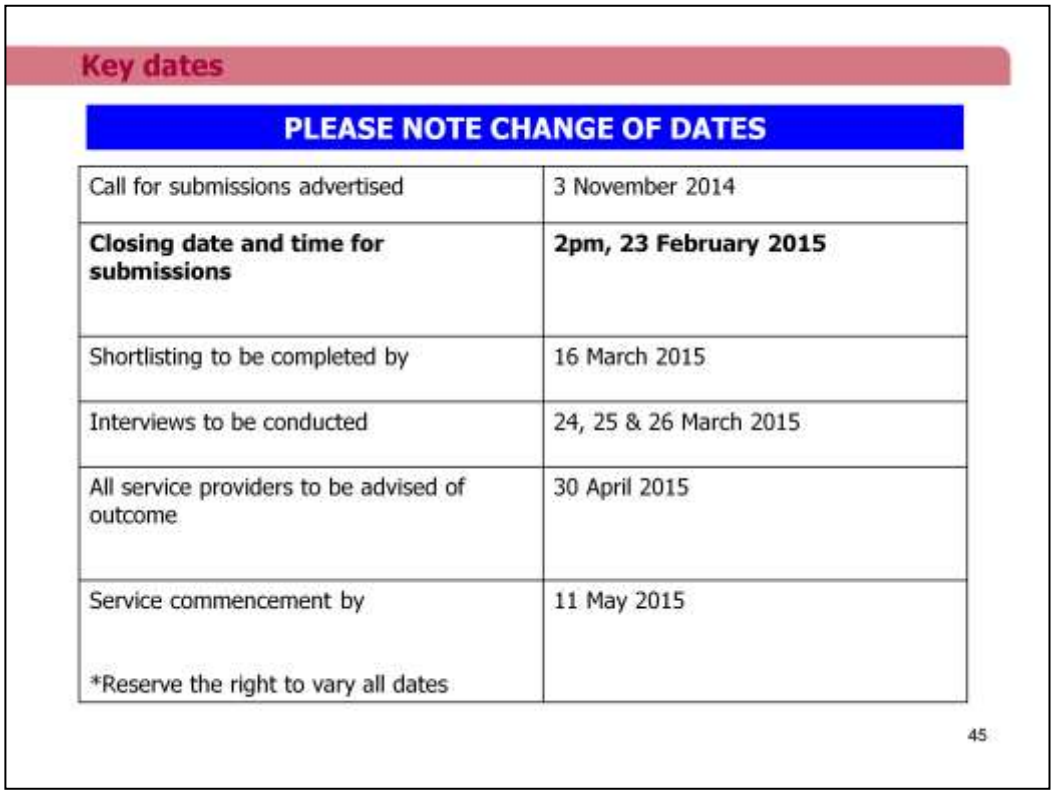
What proportion of funding is proposed to be expended on day to day care of the child or young person compared to the support component.



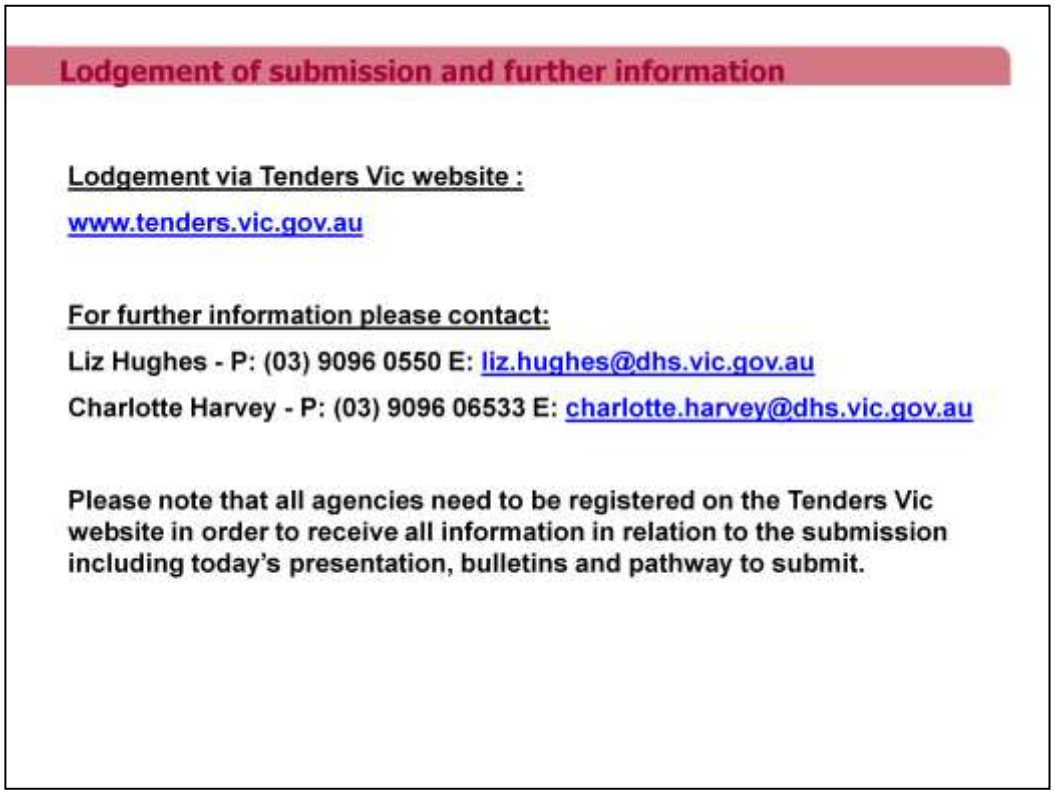
This criterion is weighted 3 (highly important)



This criterion is weighted 1 (desirable)



These dates are a guide only to projected timelines. The department will attempt to maintain this schedule, but reserves the right to vary all dates.



Providers need to ensure that they are registered on the Tenders Vic in order to ensure they have access to all of the necessary documentation in relation to this process and pathway to submit. Today's presentation will be uploaded onto the Tenders VIC website. Please note that as is the case with all information placed on the Tenders Vic website in relation to this submission, an email alert will be sent to the person who initially registered to access the site advising them that new information is available.