

**Question on notice for the Department of Families, Fairness and Housing (DFFH) on The Orange Door (TOD) and Integrated Reports and Information System (IRIS) (agreed to at public hearing)**

20 September 2024

**TOD**

**1. How will DFFH and TOD improve the quality of client identity points like CALD, LGBTIQA+ and disability status, particularly for people using family violence?<sup>1</sup>**

The Orange Door collects data for all children, young people and adults who are referred to the service. The Orange Door creates a unique 'person profile' for each individual victim survivor (including children and young people) and/or adult using family violence. Their person profile includes demographic information included in the referral as well as information provided via the engagement/assessment with the individual. The Orange Door brief interventions/connections to services will then be tailored based on the individual identified points such as CALD, LGBTIQA+, Disability status etc as well as their family violence risk and need.

FSV continues to work collaboratively with peak bodies and service partners to strengthen The Orange Door workforce capability in culturally responsive, skilled and integrated practice. Statewide operational guidance and training supports practitioners to recognise the intersectionality of family violence risk and how it is assessed.

In 2024 FSV introduced the LGBTIQA+ Inclusive Practice Program delivered by Rainbow Health which forms part of the required training for all Orange Door staff. The program consists of an E-learn, facilitated training module and HOW2 Communities of Practice to continuously improve practices and policies in The Orange Door. Practitioners working at The Orange Door apply an intersectional lens which considers a person's whole, multi-layered identity and life experience and involves reflecting on one's own bias to respond safely and appropriately in practice.

Over the first six months of Orange Door Induction training which practitioners complete, is training in wellbeing and safety of children and young people and family violence. *The Orange Door induction program for Practitioners Syllabus and Roles and Responsibilities* outlined in the Induction requirements and responsibilities of FSV, The Orange Door, Partner Agency and individual in completing the required training. The modules include:

- Strengthening Cultural Safety in The Orange Door (Aboriginal Cultural Safety training)
- Foundations of Culturally responsive practice (CALD training)
- Working with interpreter training
- True Colours eLearn – Introduction to LGBTIQA+ Inclusive Practice and Work with Pride facilitated module – LGBTIQA+ Affirmative Interpersonal Skills (LGBTIQA+ training)
- Working with clients in The Orange Door (working in an integrated way in The Orange Door with all clients including Children, Young Person, Families, Victim Survivors and Adults Using Family Violence).

**2. Can TOD data be disaggregated by client type, for example to differentiate between victim survivors and people using family violence?<sup>2</sup>**

The Orange Door data has been differentiated by client role (defined as the individual's primary presenting need) and supported by *Client roles statewide operational guidance (2022)*.

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<sup>1</sup> The TOD Annual Service Delivery Report 2022-23 notes the CRM 'has been enhanced to collect better and more nuanced information about a range of identifiers. Future enhancements are planned to align the CRM with revised LGBTIQA+ data collection standards. Although data quality around client identity is constantly improving, identifiers for Culturally and Linguistically Diverse, LGBTIQA+ and disability status are not yet reliable enough to report.' <https://www.vic.gov.au/orange-door-annual-service-delivery-report-2022-23/people-provided-response>

<sup>2</sup> The TOD Annual Service Delivery Report 2022-23 reports on several outputs. The results do not appear to distinguish between whether someone is a victim survivor or person using family violence.

**Table 1: Client roles in The Orange Door<sup>3</sup>**

Client role	Current, primary presenting need
Child/young person wellbeing	17 years or under, requiring wellbeing support
Victim survivor <sup>2</sup> child/young person	17 years or under, experiencing, which includes, witnessing/exposed to family violence
Young person using family violence	17 years or under, using family violence
Victim survivor adult	18 years or over, experiencing family violence
Parent/carer	person seeking support as a parent/carer <sup>4</sup> (no age limits)
Parent/carer victim survivor	parent/carer <sup>3</sup> of a young person using violence against them (no age limits)
Perpetrator <sup>4</sup>	18 years or over, using family violence
Predominant aggressor	18 years or over, using family violence who has been incorrectly identified as a victim survivor
Misidentified victim survivor adult	18 years or over who has been incorrectly identified as a perpetrator
Unborn	unborn child at any stage of gestation
Related party/other individual	any person that does not fit the above roles

**a. If so, will it be shared publicly to enable meaningful analysis?**

The Client role as well as other key data points in The Orange Door client journey have been shared with sector partners, stakeholders and peak bodies to support planning and system monitoring via The Orange Door Sector Report.

**3. When a person using family violence is referred to TOD, is there practice or guidance notes, best practice or research on the best time and way to contact people to elicit more favourable engagement with services?**

The Orange Door has developed the *Adults using family violence risk assessment interim statewide practice direction (2023)* which outlines the process for undertaking a risk assessment, including safe, reasonable and appropriate engagement with the adult using family violence in an intake context aligned to Orange Door MARAM responsibilities. This engagement then informs the connection to services. Additionally, each of the 18 Orange Door sites has an Advanced Family Violence Practice Leader (Person Using Violence) as well as an Aboriginal Practice Leader which supports the staff risk assessment and engagement with adults who use family violence.

<sup>3</sup> Note footnotes in table refer to those contained within The Orange Door Client roles statewide operational guidance:

**Victim survivor:** This document will, at times, use the term 'victim survivor', but practitioners may prefer to use the term 'child, young person or adult experiencing family violence'. See MARAM Framework in Related Documents for further information on terminology.

**Parent/carer:** Under Child Youth and Families Act 2005 (CYFA), "parent", includes any person who has parental responsibility for a child. Parental responsibility in relation to a child, means all the duties, powers, responsibilities and authority which, by law or custom, parents have in relation to children. This definition therefore covers:

- biological parents
- stepparents
- foster parents
- adoptive parents
- persons appointed parental responsibility under legislation. Under CYFA care is defined as 'care, in relation to a child, means the daily care and control of the child, whether or not involving parental responsibility for the child'. Carer status refers to someone who has total or considerable responsibility for ongoing care and support of another person. The person may be a child, a partner, a parent, a relative or a friend. Carer status does not apply to people who are paid to provide care. See Child Youth and Families Act 2005 in Related Documents.

**Perpetrator:** This document will, at times, use the term 'perpetrator' but practitioners may prefer to use the term 'adult using family violence', see MARAM Framework in Related Documents for further information on terminology.

**a. If so, how could these practices be applied to undertaking qualitative research with people using family violence?**

Further exploration would need to be undertaken for how the practice of risk assessment in The Orange Door in an intake context could be better understood via qualitative research.

**4. How does DFFH ensure TOD networks are consistently and routinely sharing information with service providers, including MBCPs, so they can provide services and support that is informed by data collected by TOD?**

The Orange Door will share relevant information for risk assessment and management, and service delivery in line with relevant legislation which includes the Family Violence Information Sharing Scheme (FVISS), Child Information Sharing Scheme (CISS) and *Children, Youth and Families Act 2005* (CYFA).

The Orange Door has established guidance to support appropriate and timely gathering and sharing of information.

To enhance information sharing practice, as part of induction training, Orange Door practitioners are required to complete Information sharing in The Orange Door training in addition to DFFH Information Sharing eLearns.

**a. Has DFFH established time frames or key performance indicators for TOD networks on information sharing?**

Key performance indicators have not been specifically developed for The Orange Door and information sharing given the breadth and variability of the requests.

**5. What work has DFFH done to explore automatically or proactively sharing information and better promoting feedback loops between TOD networks, statutory and non-statutory service providers/organisations (for example, sharing information between TOD, service providers and Victoria Police about engagement levels with MBCPs or other programs or if risk levels change/incidents occur)?**

The Family Violence Information Sharing Scheme (FVISS)'s Ministerial Guidelines provides directions about proactive information sharing for the purposes of assessing and managing family violence risk. This should occur across all FVISS prescribed organisations, including Orange Door and statutory and non-statutory service providers, such as Child Protection, Victoria Police, specialist family violence services and perpetrator programs.

Each organisation has its own procedures that govern the processes and timelines for proactively sharing information, including with whom they share information on engagement with programs.

The Victorian Government is currently reviewing the FVISS Ministerial Guidelines in response to the recommendations from the Family Violence Reform Implementation Monitor's Five-Year Legislative Review of the FVISS, CIP and MARAM Framework. As part of this review, the Victorian Government is considering ways to strengthen content on proactive information sharing and other mechanisms to provide more guidance to promote proactive information sharing and to reinforce the importance of timely information sharing to Information Sharing Entities.

**6. How and when does TOD collect data on children and young people who use and/or experience family violence?**

**a. What opportunities are there for TOD to collect more accurate and reliable data on children and young people who use and/or experience family violence?**

The Orange Door assesses each child and young person individually and creates a case for each person as well as a client role – see response to question 2 which differentiates data on children and young people who use and/or experience family violence.

**b. What opportunities are there for TOD to conduct risk assessments for children and young people as well as adults (rather than subsuming them under an adult assessment)?**

Currently in The Orange Door Client Relationship Management (CRM) System risk assessments for each individual child or young person is recorded on their own case.

The Orange Door currently conducts risk assessments for children and young people aligned to the MARAM and Best Interest Case Practice Model (BICPM) framework and will update the guidance and training once the Children and Young People MARAM practice guidance is updated in 2025.

The Orange Door has partnered with the Centre for Excellence in Child and Family Welfare (CFECFW) to produce eight practice guides to support Orange Door practitioners to keep children and young people first and foremost in our service system responses by building greater practitioner confidence and capability on the following topics:

- Importance of engaging with children and young people
- Theoretical frameworks underpinning practice (BICPM, understanding trauma and impacts of trauma on children's behaviour, Maslow's Hierarchy of needs, intersectionality and systems theory)
- Engaging with children
- Engaging with young people
- Engaging with parents and carers about children and young people
- Understanding cumulative harm
- Understanding legislation that underpins practice
- Understanding consent.

In 2024, the CFECFW commenced the delivery of tailored and interactive sessions to all Orange Door sites on child and young person wellbeing. The tailored sessions support The Orange Door workforce to:

- Know how to engage effectively with children and young people to ensure their views and perspective can inform decisions affecting them
- Understand children's rights and can recognise existing or emerging concerns in relation to safety, wellbeing, developmental and/or cumulative harm
- Provide a service response that is timely and consistent with the best available evidence
- Understand that children and young people are vulnerable, and consistently prioritising their needs to safety and stability
- Work collaboratively with other professionals to ensure visibility and agency of children and young people no matter where they are in The Orange Door and broader service system.

**7) How does DFFH ensure TOD practitioners have sufficient understanding of:**

**a. sexual violence, how to recognise it and how to accurately and reliably collect and data on the use or experience of sexual violence?**

Where sexual violence is identified to have occurred, the person/ family is supported to receive a service response from a sexual assault service. Statewide operational guidance between The Orange Door and sexual assault support (including those delivered in Multidisciplinary Centres (MDCs)) provides guidance to practitioners on how to deliver coordinated services. The guidance provides information on:

- timely, appropriate client pathways, joined-up responses and therapeutic outcomes for victims of sexual assault and family violence
- clear and effective referral pathways and referral criteria

- a streamlined, client-centric approach to information sharing and secondary consultations that means victims do not need to repeat their story and prevent duplicative case planning by The Orange Door or sexual assault support services staff.

**b. elder abuse, how to recognise it and how to accurately and reliably collect and share data on the use or experience of elder abuse?**

Abuse to older people is included as family violence under the *Family Violence Protection Act 2008* (Vic) and the current MARAM Framework. Orange Door practitioners have access to the MARAM Elder Abuse eLearn on the Orange Door Learning Portal.

**c. children and young people's use of violence (for example, towards parents or siblings), how to recognise it and how to accurately and reliably collect and share data on the use or experience of children and young people's use of violence?**

Children and young people's use of family violence is currently assessed in the Orange Door using the MARAM Framework and Best Interest Case Practice Model (BICPM) and is included in The Orange Door induction training.

The Orange Door statewide operational guidance on *completion of assessments in The Orange Door (2019)* and *Practice Resource - Child and Young Person Wellbeing Assessments (2024)* provides guidance to practitioners when undertaking an assessment for children and young people, which includes children and young people's use of violence. The Orange Door child and young person wellbeing assessment is based on the child or young person's perspective as well as integrating information from pattern and history (of trauma experienced), service history and interventions, professional judgement and information gathering and sharing with external services.

Current *Service Plan Statewide Operational Guidance* details that practitioners in The Orange Door should seek opportunities, where appropriate and safe, to engage directly with a child or young person to assess their risk and needs and plan an appropriate service response.

The eight practice guides developed by the CFECFW supports The Orange Door practitioners to keep children and young people first and foremost in our service system responses and supports practitioners to identify concerns regarding children and young people's use or experience of family violence, and (see response 5b which outlines the eight practice guides content).

Practitioners in The Orange Door share relevant information for risk assessment and management in line with relevant legislation which includes the Family Violence Information Sharing Scheme (FVISS), Child Information Sharing Scheme (CISS) and *Children, Youth and Families Act 2005* (CYFA).

The Orange Door practitioners will have access to further MARAM training when the MARAM Children and Young People Practice Guidance is released which will include children and young people's use of family violence.

**8) How frequently do TOD practitioners receive training on identifying family violence, including elder abuse, sexual violence and children and young people's use of family violence?**

At a minimum, all practitioners in The Orange Door undertake MARAM Comprehensive Risk Assessment and Risk Management training as part of their induction. MARAM Comprehensive assists practitioners to assess risks and risk management to clients in the context of family violence. This includes sexual violence and elder abuse. Types of violence, including sexual assault and elder abuse are not delivered as separate topics in The Orange Door induction, but rather included within the training.

Induction training also includes a module on the Best Interests Case Practice Model (BIPCM), learning the foundations of child wellbeing assessment in Victoria. In 2025, Orange Door practitioners will have further training based on the MARAM Children and Young People Practice guides which will include children and young people's use of family violence.

Family Safety Victoria (FSV) has established a Learning Portal for practitioners in The Orange Door, which provides training including child and young person wellbeing and safety and family violence topics. Additional modules to support work in The Orange Door include MARAM elder abuse eLearn.

Each of the 18 Orange Door Networks have at least five Practice Leaders who provide practice support, reflective practice and training to The Orange Door staff on topics identified by their site.

In addition to the required training for practitioners during their Induction, practitioners or their manager can choose for a practitioner to recommence modules to support their practice and skill development.

**a) How frequently do TOD practitioners receive training and/or professional development on data collection practices?**

The Client Relationship Management system (CRM) training is provided to all staff during their induction. Team Leaders, Practice Leaders and FSV Leadership staff including Strategic Planning and Reporting Officer (SPARO) complete Systems Leadership training on advanced use of CRM and PowerBi for data analysis. Modules on Privacy and Information Sharing Refreshers further speak to data collection. Partner Agency Managers have been given read only access to the CRM and The Orange Door Sector Report and training on use of both is available to access on the Learning Portal for these roles.

**IRIS**

**The 2023-24 State Budget provided \$14.4 million over two years to develop a business case to replace IRIS and other critical department systems.**

**1. When is the business case expected to be finalised and what work has been undertaken to date?**

The business case is intended to be considered through the 2025-26 State Budget process, or in future budget rounds.

Work undertaken to date includes:

- Drafting of the business case
- Preparation of high-level business and technical requirements
- Stakeholder consultation
- Change management and implementation planning, and
- Consideration of legislative, policy, practice and compliance impacts.

**2. Will a contract be awarded to develop the business case, and if so, who holds the contract and what are the key timeframes for reporting?**

The business case is being developed by the Communities and Families Transformation Program (CFTP) within the Department of Families, Fairness and Housing (DFFH). The CFTP was established to drive the development of the business case and lead change across government and the sector to support the proposed technology replacement.

**3. Who is being consulted to develop the business case?**

To support the development of the business case, stakeholder groups were engaged across program areas, including, Child Protection, Youth Justice, Family Services, Family Violence, Sexual Assault, Youth Services, Forensic Disability, Complex Needs and Refugee Minor. Consultation across the sector included specialist service providers, Aboriginal Community Controlled Organisations and Peak Bodies.

**4. Which 'critical department systems' will the business case consider replacing along with IRIS?**



The other critical department system under consideration is the Integrated Client Case Management System (ICCMS). Alongside this, a number of ancillary systems have been identified that are proposed to be subsumed (re-designed into the new system) or integrated with the new system, pending funding and technical design decisions.

**5. When does DFFH expect IRIS and other critical department systems will be replaced?**

Timeframes have not yet been confirmed and are subject to government decision making.

**6. How will the new database support and improve data collection, extraction, linkage and analysis for research purposes?**

The proposed new technology systems will be designed to support increased data and analytics capabilities. This is expected to support improved data collection, extraction and linkage across the sector, and enable more integrated and client centred care and improve client outcomes. Any data use for research will need to be done in accordance with relevant ethical and legislative frameworks.

**7. How will the new database capture outcomes of interventions for people using family violence and their effectiveness?**

The design of the proposed new system will involve collaboration with key government and sector stakeholders, including the family violence and sexual assault sector. It is intended that any new technology system will enable greater understanding of the effectiveness of programs and interventions at the individual, program and system levels. The design of what this will look like has not yet started.

**8. Will the business case be publicly released or shared with relevant stakeholders?**

No, the business case is a cabinet in confidence document and will not be released publicly.