

**IN THE MATTER OF THE ROYAL COMMISSION
INTO FAMILY VIOLENCE**

STATEMENT OF ROCCO FONZI

Date of document: 3 August 2015
 Filed on behalf of: State of Victoria
 Prepared by:
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I, ROCCO FONZI, Director, Client Outcomes and Service Improvement, East Division, Department of Health and Human Services, SAY AS FOLLOWS:

1. I am the Director of the Client Outcomes and Service Improvement Branch (**COSI Branch**) of the East Division of the Department of Health and Human Services (**Department**). I have held this position since August 2014 and I report to the Deputy Secretary, East Division.
2. Between December 2012 and July 2014, I was the Director, Corporate Services, East Division. Between December 2010 and November 2012, I was the Acting Director, Program and Sector Support, Children, Youth and Families Division. Between August 2006 and November 2010, I was the Manager, Housing Policy, Housing and Community Building Division. I have otherwise undertaken various practitioner and management roles at the Department, including in child protection positions, since 1992.
3. I hold a Bachelor of Social Work from the University of Melbourne and a Master of Business Administration from the Melbourne Business School (University of Melbourne). I am also a graduate of the Australian Institute of Company Directors.
4. The key functions of the COSI Branch include, for the East Division:
 - 4.1 managing disability intake and assessment of the needs and eligibility of clients, as well as allocating and managing individual disability support packages;
 - 4.2 identifying and managing the placements of children into out-of-home care following their entrance into the child protection system;

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- 4.3 receiving and coordinating performance management and quality assurance information from service providers (both external and internal) in the disability and out-of-home care sectors, and developing quality improvement initiatives;
 - 4.4 receiving, investigating and responding to complaints in relation to disability, child protection, out-of-home care services and other services provided by the Department; and
 - 4.5 undertaking planning and providing strategic input into future service delivery.
5. More broadly, people with a disability and their families may access a range of Department-funded disability supports, which may be delivered by the Department or Department-funded community services, to help them actively participate in the community and reach their full potential. These supports consist of:
- 5.1 short-term supports – such as respite services, behaviour supports, case management and therapy; and
 - 5.2 ongoing supports – such as individual support packages and shared supported accommodation.
6. I have received a notice from the Royal Commission into Family Violence pursuant to s 17(1)(d) of the *Inquiries Act 2014* (Vic.) requiring me to attend to give evidence at the Royal Commission and to provide a written witness statement.

SCOPE OF STATEMENT

7. I understand that the Royal Commission has requested that I give evidence in relation to matters the subject of Module 17 (Diversity of experiences, community attitudes and structural impediments). In particular, the Royal Commission would like evidence about the Disability Family Violence Crisis Initiative (**Initiative**). In this statement, I provide information about:
- 7.1 the background to the establishment of the Initiative;
 - 7.2 the purpose and operation of the Initiative;
 - 7.3 the findings made by an independent evaluation of the Initiative; and
 - 7.4 possible future directions for the Initiative.

BACKGROUND TO THE ESTABLISHMENT OF THE INITIATIVE

8. In 2008, Women with Disabilities Victoria (**WDV**) published a report on the nature and extent of violence perpetrated against women with disabilities, *Building the evidence: a report on the policy and practice of family violence services responses to women with disabilities in Victoria*. According to the report, women with disabilities are particularly vulnerable to violence, especially when perpetrators are carers who are in a position of control and power. Women with disabilities are also at risk of violence from people with whom they share a house or residence, and it is not uncommon for women with disabilities to experience violence by more than one person in their lifetime and for the experience of violence to be a protracted and enduring feature in their lives.
9. In the family violence context, women are also particularly vulnerable in circumstances where they have the care of a child with disabilities. It may not be possible, for example, for women in these circumstances to relocate or seek refuge, particularly on an urgent basis, because of the care requirements of the child, or even simply because of the women's sense of responsibility for the child.
10. In August 2010, the Office of the Public Advocate (**OPA**) released a report, *Violence Against People with Cognitive Impairments*, which highlighted that the response of service providers, including in the disability and family violence sectors, was not well co-ordinated and was based on different understandings of violence and disability. The OPA made a number of recommendations aimed at enhancing cross-sectoral collaboration, which included recommendation six that the State government allocate funds to enhance family violence services for people with disabilities who require additional support, such as personal assistance.
11. As a result, in March 2011, the Department hosted a Disability, Family Violence and Sexual Assault Forum to discuss the issues highlighted in the OPA report and to identify the necessary actions to improve outcomes for women and children with disabilities.
12. The establishment of the Initiative followed. It began as a State-wide pilot in December 2011, whereby two disability intake workers in the Department's East Division client support services were allocated the functions of a Disability Family Violence Liaison Officer as part of their intake role. They assisted family violence and disability professionals to assess and meet the needs of women and children with disabilities who were experiencing family violence. The functions were vested in one worker, the Disability Family Violence Liaison Officer, in December 2012.

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13. The Initiative was initially funded with \$250,000 under the Department's disability output for a 12-month pilot period from December 2011 to December 2012. In April 2013, the Department decided to recurrently fund the Initiative on an ongoing basis, following a positive independent evaluation that was undertaken towards the end of 2012 and reported in January 2013. I refer to the evaluation further below.

PURPOSE OF THE INITIATIVE

14. The Initiative is intended to ensure that women and children with disabilities from across Victoria have access to timely, appropriate and effective service responses to a family violence crisis. The primary aim of the Initiative is to provide immediate disability support, when required, to women with a disability who are experiencing family violence, or children with a disability who are experiencing family violence with their mother.
15. The Initiative is designed to:
- 15.1 complement existing specialist family violence services and supports;
 - 15.2 support the specific disability needs of women and their children to ensure their safety in an immediate to short-term timeframe; and
 - 15.3 be accessible across Victoria.

OPERATION OF THE INITIATIVE

Eligibility requirements

16. The *Disability and Family Violence Crisis Response Initiative Guidelines* (**Guidelines**) provide a guide to the operation of the Initiative (**Attachment RF-1**). There are three criteria that guide eligibility for the Initiative. A woman or her child must:
- 16.1 have been assessed as 'requiring immediate protection' and be supported by and referred by a specialist family violence service (the assessment must be made by a specialist family violence service using the Family Violence Common Risk Assessment Framework (**CRAF**));
 - 16.2 have a disability as defined by the *Disability Act 2006* (Vic.) (**Disability Act**);

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- 16.3 require specific disability-related support to either access a family violence crisis accommodation response or remain safely in the home or community.
17. In accordance with s 3 of the Disability Act, disability in relation to a person means:
- 17.1 a sensory, physical or neurological impairment or acquired brain injury or any combination thereof, which
- (a) is, or is likely to be, permanent; and
 - (b) causes a substantially reduced capacity in at least one of the areas of self-care, self-management, mobility or communication; and
 - (c) requires significant ongoing or long term episodic support; and
 - (d) is not related to ageing; or
- 17.2 an intellectual disability; or
- 17.3 a developmental delay.
18. The Guidelines note that the definition of disability does not include people who require support as a result of:
- 18.1 ageing;
 - 18.2 mental illness;
 - 18.3 drug and alcohol use;
 - 18.4 chronic health issues; or
 - 18.5 an injury or illness that has temporarily caused the need for support,
- unless there is a co-existing disability.
19. Eligibility for the Initiative is assessed using the CRAF and a supplementary questionnaire that is Appendix 2 to the Guidelines. The questionnaire was developed at the beginning of the Initiative and has since been revised. It contains a series of questions intended to assist workers to identify whether a woman and her child are eligible for assistance from the Initiative and, if so, what kinds of assistance might be required.

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20. Where it is not possible to immediately determine if a woman or her child has a disability, but it is probable and there is an urgent need to respond, funding may be provided for the crisis period for up to 12 weeks.
21. It should also be noted that the Guidelines explain the definition of 'family violence' and 'family member' in the *Family Violence Protection Act 2008* (Vic.), and further recognise that a relationship between a person with a disability and the person's carer may over time come to approximate the type of relationship that would exist between family members.

Funding, support provided and operation in practice

Funding

22. As currently structured, the funding for the Initiative falls into two broad components:
- 22.1 Firstly, there is funding to employ and resource a Disability Family Violence Liaison Officer in the Department's East Division, whose role is to coordinate the delivery of the Initiative and develop and broker relationships between the disability and family violence service sectors. For the 2014-2015 year, \$100,000 was allocated to the Liaison Officer role.
- 22.2 Secondly, there is funding for the packages of support provided to women and children under the Initiative, to address their immediate disability-related needs while longer-term accommodation and supports are explored. For the 2014-2015 year, \$150,000 was originally allocated to the support packages, although \$190,000 was actually expended (with the provision of additional funds provided by the Department during the year).
23. A detailed funding summary is provided at **Attachment RF-2**. The summary sets out the funds budgeted and actually expended for each financial year from December 2011 to June 2015. It should be noted that the Initiative commenced in December 2011, and the first year (for reporting purposes) consisted of only a six-month period.
24. The summary also sets out:
- 24.1 the total number of participants who have received support in each year;
- 24.2 the average amount (in financial terms) provided to each participant, and the duration of the support;
- 24.3 the number of 'secondary consultations' in each year (secondary consultations are consultations provided by the Liaison Officer to people

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who do not meet the eligibility criteria, but for whom the Liaison Officer is able to provide advice and assistance to help deal with an urgent need for financial or other support – an example might involve a mother of a child with Downs Syndrome who had successfully left a violent relationship, but needed some urgent assistance to pay for her car registration);

- 24.4 a breakdown of the types of participants (for example, their type of disability, type of support provided and the overall geographical spread of participants); and
 - 24.5 a breakdown of outcomes for participants after they have received support from the Initiative (for example, the number of participants who come to receive disability services case management or who are placed on the Disability Support Register).
25. In considering the funds budgeted and actually expended, it is important to emphasise that the number of participants, and the amounts provided to participants, have grown significantly since the inception of the Initiative. This is due largely to the time it often takes for a sector, and for individuals, to become better aware of the availability of a new measure like the Initiative. The steady growth is also a result of significant work undertaken by the Liaison Officer in promoting, explaining and encouraging the use of the Initiative to relevant community organisations and service providers, including in the family violence, disability and health sectors. The provision of a dedicated Liaison Officer role in promoting and administering the Initiative has been critical to its success to date. The Liaison Officer has also been responsible for monitoring and collecting relevant data in respect of the Initiative, some of which is provided in the summary at **Attachment RF-2**.

Support available for eligible participants

26. The short-term crisis funding made available by the Initiative is typically used for the following purposes:
- 26.1 attendant care support for disability-related needs, such as personal care, shopping assistance, meal preparation, or support to provide care for children;
 - 26.2 hire of equipment where necessary, or linkage with the State-wide disability equipment program where appropriate;


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- 26.3 urgent accommodation, with a particular focus on meeting the disability needs of the woman or child and where funding from other sources, such as the Housing Establishment Fund, is not available;
 - 26.4 Auslan or sign language interpretation assistance, in cases where the general Departmental interpreter service is not available; and
 - 26.5 transport costs related to disability (for example, taxi vouchers).
27. Short-term funds can be provided for up to 12 weeks to a maximum of \$9,000 per person. Requests for funds over \$9,000 are managed on a case-by-case basis. Generally speaking, the Initiative is intended to cover costs and financial assistance to meet disability support requirements, as they are affected and increased by family violence. Where the financial assistance required by a person is more directly related to family violence or homelessness (rather than the disability needs of the person), this is expected to be provided by the family violence or homelessness sectors.

Operation in practice

28. The Initiative generally operates as follows:
- 28.1 a woman will make contact with a State-wide family violence crisis service either within or outside business hours, or a specialist family violence outreach/case management service within business hours;
 - 28.2 if, in conducting a CRAF assessment, the family violence service worker suspects the woman or one of her children has a disability, they will complete a supplementary questionnaire for disability (see paragraph 19 above);
 - 28.3 on completion of the questionnaire, the family violence worker will determine if the Initiative is required – simultaneously, the family violence service will undertake safety planning and determine the most appropriate accommodation option;
 - 28.4 during business hours, the family violence worker will contact the Department's Disability Intake and Response service in the East Division and a request will be made to speak with the Disability and Family Violence Liaison Officer (who operates from the East Division), and the Liaison Officer will:

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- (a) confirm that the person appears likely to have a disability;
 - (b) assess the request against the Guidelines;
 - (c) approve or not approve the requested supports; and
 - (d) advise the family violence worker of the decision;
- 28.5 if support is required after hours, the family violence worker will contact Safe Steps (formerly known as the Women's Domestic Violence Crisis Service), which will assess the request against the Initiative's criteria and the Guidelines and:
- (a) if Safe Steps approves the application, it has authority to implement emergency supports required immediately; and
 - (b) on the next business day, contact will be made with the Liaison Officer at the East Division to discuss any further supports beyond those already implemented;
- 28.6 the Liaison Officer will then arrange to pay for the supports or reimburse Safe Steps for any emergency supports already provided by it;
- 28.7 if the person is an existing client of the Department's Disability Services and may have support needs beyond the 12-week period addressed by the Initiative, the Liaison Officer will make a referral to the Division within which the person resides for the Department to undertake further planning with the woman and/or her child;
- 28.8 if the person is not an existing client and is seeking disability supports beyond the 12-week period addressed by the Initiative, the Liaison Officer will contact the relevant Disability Services in the Division where the person usually resides and make a referral – the Disability Service in that Division will then work with the woman and/or her child to obtain necessary documentation to confirm access eligibility and undertake planning for the person's support needs beyond the 12-week period;
- 28.9 after the immediate crisis, the Department's Client Support Services is available to participate in future planning as required, including exploring the need for ongoing disability supports.
29. It is important to note that, if in the ordinary disability context a disability services worker comes to suspect family violence, then the worker is required to immediately

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refer their client to a family violence service. The Disability and Family Violence Liaison Officer in the East Division will only consider and accept requests for funding from the Initiative once:

- 29.1 an assessment has been made by an appropriate specialist family violence service, using the CRAF process;
 - 29.2 the assessment is that the woman and/or child requires immediate protection; and
 - 29.3 the family violence service has completed the supplementary questionnaire for disability in the Guidelines.
30. As at 30 June 2015, the Initiative has assisted 96 women with a disability (and women with children with a disability) to leave a perpetrator of family violence, through the provision of personal care supports, hiring equipment and other supports. Almost two thirds of individuals and families accessing the Initiative have been women with a disability, and just over one third have been children with a disability. The vast majority of women and children accessing the Initiative have sought supports related to their cognitive disability – that is, an intellectual disability, autism or acquired brain injury.

INDEPENDENT EVALUATION OF THE INITIATIVE

31. In late 2012, the Department commissioned an evaluation of the pilot of the Initiative to be undertaken by Red Tree Consulting. The evaluation report by Red Tree Consulting was provided in January 2013. A copy of the evaluation report is at **Attachment RF-3**.
32. The evaluation was primarily informed by qualitative data obtained from interviews with the Disability Family Violence Liaison Officer, other Departmental management and direct service roles, and employees in the family violence and disability sectors. As Red Tree Consulting observed in its evaluation conclusion (see page 3):

[The Initiative] is the first initiative of its kind in Australia, and possibly the world. By providing funds for purchase of goods and services that are beyond the resources of the family violence sector and by facilitating access to specialist knowledge, the Initiative has made it possible for some women and children with a disability to be safer from family violence. In a context in which women and children with a disability are often very dependent on perpetrator-carers and greatly marginalised within the service system, this is a very significant outcome.

33. Red Tree Consulting made a number of key findings in relation to the Initiative:
- 33.1 18 clients had been assisted by the Initiative, with eight clients being women and 10 clients being children. The immediate disability supports had assisted the clients while they resided in refuges (10 clients), safely at home (4 clients) and in transitional and other accommodation (4 clients).
 - 33.2 The Initiative had a positive impact on collaboration between family violence and disability workers, and the awareness and thinking about disability amongst family violence professionals. However, there was the view amongst family violence workers that a broader group of women and children with support needs due to chronic health issues and mental illness could benefit from the Initiative.
 - 33.3 The flexible form of the funding, which allowed for immediate expenditure where necessary, delivered timely and appropriate responses in which women's and children's disability and safety needs were generally met.
 - 33.4 Although there were some practical issues, including shortages of disability services available to meet immediate daily living needs in some rural and regional areas, the Initiative had achieved its aim for the intended target group.
 - 33.5 While uptake of the Initiative was initially slow, it had picked up after August 2012 when further work was undertaken to promote the Initiative.
 - 33.6 Locating the State-wide coordination of the Initiative in the Department's East Division (known as the Eastern Metropolitan Region at the time of the evaluation report) had been successful, but there was a need to ensure that promotion of the Initiative maintained a State-wide perspective.
 - 33.7 The appointment of a specific Disability Family Violence Liaison Officer to coordinate the program, rather than dispersing the function within a disability intake team, delivered significant benefits. The role was regarded as a highly skilled one requiring significant knowledge of family violence, risk and risk assessment as well as disability.
34. The evaluation made 27 recommendations, including recommending the continuation of the Initiative. The recommendations covered a range of measures to enhance the Initiative's reach, workings, monitoring and evaluation. A number of the recommendations also focused on proposals to 'retain' elements of the current practice that the evaluators found to be key elements in the success of the Initiative.

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Most of the recommendations have been accepted and implemented by the Department since the evaluation was undertaken, with some requiring ongoing work.

POSSIBLE FUTURE DIRECTIONS FOR THE INITIATIVE

35. In my view, there are three particular opportunities to improve the Initiative and its reach going forward. They are:
- 35.1 ensuring the Initiative is able to meet demand;
 - 35.2 being more proactive in identifying women who require this type of service; and
 - 35.3 preparing the Initiative for delivery when the National Disability Insurance Scheme (**NDIS**) is implemented.

Meeting demand for the Initiative

36. **Attachment RF-2** (see paragraph 23 above) sets out information about the number of people assisted by the Initiative since December 2011 and the average cost of packages per family. As the information in the document shows, the number of people assisted by the Initiative has grown from four people in the first six months to 51 people during 2014-15. The Initiative provides immediate supports to women and/or their children with their disability-related needs, and as such there is no waiting list. To date, all women and children who meet the eligibility criteria have been helped by the Initiative.
37. Demands on the Initiative are managed by the eligibility criteria which require the women or children seeking assistance from the Initiative to have a disability in accordance with the Disability Act and to have an immediate need for disability-related supports in order to secure their safety. Where the need is not immediate despite it arising from a family violence situation, this will be dealt with in accordance with usual practices. For example, a woman and her child with a disability may have left a violent relationship for some weeks and then require respite. While there is a disability-related need that may have been exacerbated by the experience of family violence, the criterion related to the immediacy of need to secure the woman and child's safety would not be met.
38. In addition, I have referred above to 'secondary consultations' for people who do not meet the Initiative criteria but who require help and advice. I note that, as it stands now, the Disability Family Violence Liaison Officer is providing as many (and in the previous two years, more) secondary consultations as there are participants in the

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Initiative. The more recent decline in the proportion of secondary consultations is likely to be a result of education sessions undertaken by the Liaison Officer to raise awareness of the Initiative, its purpose and the broader disability service system.

39. Given the finite resources available for the Initiative, including the demands on the Liaison Officer, the Department will continue to monitor the expenditure for the Initiative and explore opportunities to better leverage other available funding, particularly for emergency accommodation.

Being proactive in identifying women who require this type of service

40. A number of activities have been taken to help promote the existence of the Initiative. These include publicising information about the Initiative on the Department's website (<http://www.dhs.vic.gov.au/for-service-providers/children,-youth-and-families/family-violence2/disability-and-family-violence-crisis-response>) as well as on the websites of Safe Steps and Women with Disabilities Victoria. Many community organisations also provide information and contact details relevant to the Initiative on their websites and in newsletters that they disseminate.
41. In addition, the Disability Family Violence Liaison Officer has now provided a substantial number of presentations about the Initiative throughout Victoria in 2013-2014 and 2014-2015. These presentations have been given to a wide variety of organisations, including Aboriginal and multicultural organisations, and involve the Liaison Officer providing general information about the barriers faced by women and children with disabilities who are victims of family violence, as well as information about the Initiative and how it might be utilised in particular example cases.
42. A list of the organisations for which presentations have been given (and the dates on which they were given) is at **Attachment RF-4**. Over the next 12 months, the Liaison Officer proposes to target promotional activities to workers with direct client responsibilities. The Liaison Officer will particularly target workers in child protection, hospitals and health services, advocacy groups and outreach services, due to the likelihood that they may be a first contact point for women or children with a disability who are experiencing family violence.

Delivery of the Initiative when the NDIS is implemented

43. Two of the most successful aspects of the Initiative are:
- 43.1 the urgency and specificity with which support can be provided to a woman and/or child with disability in need; and

43.2 the use of a full-time, dedicated Liaison Officer to administer, coordinate and promote the Initiative.

44. The Department has been working with the Commonwealth Government and states and territories on policy parameters in relation to the scope and operation of the NDIS and other service systems.

45. In accordance with what has been agreed multilaterally between the Commonwealth Government and states and territories, the Victorian Government will continue to have responsibility for child protection and community services. This includes support to access safe accommodation and counselling. However, the NDIS will be responsible for ensuring that women or children eligible for supports under the Scheme are supported to access the disability supports they need when they are escaping family violence.

46. Work on NDIS operational arrangements has begun with the Commonwealth Government, and will be finalised after the Bilateral Agreement is agreed later in 2015 on the transition to the full scheme. These arrangements will be based on the already agreed policy parameters and roles and responsibilities.

47. As part of this work, the Department is concerned to ensure that the place for this Initiative, and the particular crisis-oriented service it provides, is appropriately accommodated and funded. While the majority of services under the NDIS will be individualised as part of a participant's individual funding package, it is expected that some crisis disability response services will be directly commissioned under the Scheme.

Signed by)
Rocco Fonzi)
at Melbourne)
this 3rd day of August 2015)



Before



an Australian legal practitioner
within the meaning of the
Legal Profession Uniform Law (Victoria)

