

| Milestone | Anticipated date | Amount (excl. GST) | GST (if applicable) | Total (incl. GST if applicable) |
|--------------------------------------|------------------|--------------------|---------------------|---------------------------------|
| Half yearly payment of 2021-22 funds | 13 July 2021 | \$721,877.46 | \$72,187.75 | \$794,065.21 |
| Half yearly payment of 2021-22 funds | 1 December 2021 | \$721,877.45 | \$72,187.75 | \$794,065.20 |
| Half yearly payment of 2022-23 funds | 12 July 2022 | \$721,877.46 | \$72,187.75 | \$794,065.21 |
| Half yearly payment of 2022-23 funds | 1 December 2022 | \$721,877.45 | \$72,187.75 | \$794,065.20 |
| Half yearly payment of 2023-24 funds | 11 July 2023 | \$721,877.46 | \$72,187.75 | \$794,065.21 |
| Half yearly payment of 2023-24 funds | 1 December 2023 | \$721,877.45 | \$72,187.75 | \$794,065.20 |

We wish to advise you that this change to your agreement with us does not require a formally executed variation to be carried out.

The parties agree that:

(a) the only change/s are those set out in this Notice of Change. In all other respects, our agreement remains unamended.

If you have any questions about this Notice of Change, please contact VICperformanceDSS@communitygrants.gov.au.

Yours sincerely

s 22

s 22

A/g Director
Community Grants Hub
Transitions Centre of Expertise
Delivery – Network Operations

18 May 2021



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Activity Work Plan Report

Instructions

To complete the Activity Work Plan Report you will need a copy of your approved Activity Work Plan.

Most text boxes in this form will be populated by copying the text in your Activity Work Plan. You will need to report against each line item in the text boxes on the right-hand side of the form.

For further guidance on completing this form go to the [Website](#)

Add rows to the following tables as required.

Reporting Period 1 July 2021 to 30 June 2022

Activity Details

| | |
|----------------------------|--------------------------------|
| Organisation Name | CatholicCare Victoria Tasmania |
| Grant Activity Name | Family Relationship Centres |
| Grant Activity ID | s 22 [REDACTED] 4-BJR7VW4 |
| Reporting Period | July 2021-June 2022 |



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Activity Deliverables

| Objective | Deliverable | Time frames | Measures of success | Status | Progress Report |
|----------------------------------|---|-------------------------------|--|--|---|
| Quality Service Provision | <p>Systems are in place to ensure:</p> <ul style="list-style-type: none"> planning, allocation and management of the workforce provides the appropriate personnel and skills to deliver high-quality services and to meet changing client needs the workforce has the appropriate qualifications and experience to provide high-quality services and ongoing professional development to maintain and improve skills a safe and fair workplace based on a 'just' culture and mutual respect is provided, with systems in place to address issues with culture such as workplace bullying, unconscious bias and discrimination staff feedback is sought and used in a visible way to improve services promotion and support of teamwork is the basis of providing high-quality services | Monthly starting in July 2019 | <p>Senior Manager representatives of the 2 participating agencies of CCVT CatholicCare Victoria and CatholicCare Tasmania) meet 2 times per month to review, analyse and discuss relevant data derived from various systems that function across the 2 agencies and those that work across agencies, such as the CCVT-CMS Penelope. There are a number of standing agenda items including compliance with the deliverables of the relevant agreements and those detailed in the Operations Framework for FRCs (July 2019).</p> <p>Number and type of Professional training and development completed across a range of topics by CCVT member organisations.</p> <p>Senior Management and Senior staff member with legal experience met with VLA and other like organisations to advocate for improved communication and information provision from the FCFCOA in relation to the new Court Central Practice direction and Certificate of Family Dispute Resolution. FRC staff and leadership team continue to monitor referrals from the</p> | <p><i>Have met > 2 times /month</i></p> <p><i>100% completed for 2021-2022</i></p> <p><i>100% completed for 2021-2022</i></p> | <p>CCVT Operations Group (Executive and Senior leadership staff) meets on a weekly basis (since 2020) with a lengthened meeting once per month, with particular attention placed on quality service delivery, consistent practice and business continuity during COVID.</p> <p>Service delivery continues to include a range of modalities including face to face, telephone and video conferencing to adapt to changing COVID workplace restrictions. These modalities will now be ongoing options for staff and clients and embedded in practice.</p> <p>Continued use of CCVT Video conferencing practice rules for use with clients including FRC</p> |



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|-----------|---|-------------|--|--------|--|
| | <ul style="list-style-type: none"> • clear communication of role expectations, responsibilities and standards of performance is provided to all staff, and employees are supported and held accountable for meeting these expectations • mentoring and supervision is used to support, monitor and develop staff • training and tools are provided so staff can monitor and improve their own practice and organisational processes more broadly • innovation in workforce practice supports the development and maintenance of workforce excellence • there is a just process for addressing individual performance that prioritises client safety • a defined system for managing complaints or concerns about a staff member is in place and is regularly reviewed for its effectiveness | | FCFCOA to assess impact on client numbers. | | <p>clients and groups as a result of COVID.</p> <p>Each agencies systems, policies and procedures evidenced internally and work underway to develop consistent systems, policies and procedures for CatholicCare Victoria.</p> <p>Performance development review processes in place.</p> <p>Professional development and training attended by staff included attendance at the Family law Pathways national webinar series which included: Men In Focus Unpacking Masculinities and Engaging Men in the prevention of violence against women and children, The New family Law court, How will it be different? Neurodiversity in Family Law and The UN Declaration on the Rights of Indigenous Peoples and Aboriginal and Torres Strait Island Child Placement Principles.</p> |



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| | <ul style="list-style-type: none"> the systems for developing and supporting the workforce are regularly and rigorously evaluated to ensure their effectiveness. | | | | <p>Other Professional development opportunities undertaken included topics such as: Parental Alienation in Australia Family Law system, Family Violence including MARAM, Healing trauma, Transformative mediation, Conflict resolution for 1, Child inclusive training, legally assisted training, Suicide intervention training, Identifying child abuse and risk</p> <p>Several FRC staff attended the National FRSA conference in Adelaide</p> <p>Regular supervision conducted with staff with face to face, Zoom and phone options available. - evidenced in client management system</p> <p>Embedded case management processes continue to support the continual change of working conditions i.e. office based or working from home. This has ensured client service delivery remains uninterrupted during these periods. Increased IT</p> |



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| | | | | | <p>capability for staff has ensured they remain mobile both within the office environment and between work and home when necessary.</p> <p>Examples of quality improvement in service activities include: utilising the Family Safety practitioner based in Ballarat across all three FRC's in a consultation role. The development of a consistent service delivery model for the three FRC's. This involved gathering information on current models, consultation with all staff including a two-day planning event, consultation with Senior administration staff to determine administrative capability and development of the model which will now be implemented in all three FRC's meaning staff can easily transfer cases when demand is high in any of the other two FRC catchments.</p> |



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| <p>Provision of Information for Families</p> | <p>Family Relationship Centres make available general information on a range of family relationship issues to the public – either directly or through relevant Family Law Pathways Network.</p> | <p>Ongoing</p> | <p>Discrete areas available to access information (e.g. computers).</p> <p>Brochures, posters, information sheets freely available to the public.</p> <p>Canvass of administrative staff to determine types and numbers of general inquiries made by the public.</p> <p>Clients assisted to use iRefer Vic app.</p> | <p><i>Completed for 2021-2022</i></p> | <p>Each FRC has dedicated space in reception area for the provision of general information on a range of family relationship issues and specific service information e.g. specialist family violence services, mental health, drug and alcohol services which has remained available to clients during COVID. Each FRC receives regular information from Family Law Pathways Network e.g., bulletins and Family Separation services guides</p> <p>Electronic means is now the predominant way of providing information to clients due to its successful implementation during COVID pandemic. Clients who are unable to receive information this way can still access information in a hard copy. Information sessions continue to be offered online.</p> |



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| Intake and Assessment | <p>Meet separately with the people involved in the dispute for an intake appointment and invite to child focused information session.</p> <p>Following attendance at information session, assess clients to ensure that each person has the capacity to negotiate and that all parties are safe to participate in Family Dispute Resolution.</p> <p>Family Dispute Resolution (FDR) via a process of intake, assessment and joint FDR.</p> <p>Our services are child focused and supporting parents in making arrangements in the best interests of their children.</p> <p>Supporting families with complex needs, often families with low income or limited capacity to pay privately for a service, including those with family violence issues, mental health, AOD or protracted</p> | 6 monthly | <p>90% of all clients receive an intake.</p> <p>Intake and assessment tools are best practice and regularly reviewed e.g. the Family Violence Multi-Agency Risk Assessment and Management Framework (MARAM) developed in Victoria.</p> <p>50% of clients are assessed (Circumstances and Goals) and 10% (Satisfaction) following the SCORE process.</p> <p>Number of clients who progress to "mediation assessment".</p> | <p><i>Exceeded</i></p> <p><i>Reviewed 6 monthly</i></p> <p><i>Improvements in client management system data dashboards have provided more accurate data in this area.</i></p> <p><i>SCORE targets exceeded for 2021-2022 period</i></p> | <p>2,445 clients were active in 2021-2022 an increase of 258 clients from last reporting period and 98.1% of clients completed at least one service event- also an improvement on last reporting period.</p> <p>1,269 intake/assessment service events were completed. *Refer Appendix 4</p> <p>Intake capacity was increased with the merger of CatholicCare Victoria and an aligning of the three FRC's. Updates to the intake form were made in the context of a changing COVID environment e.g. capacity as per state government advice to ask clients about COVID-19 vaccination status and standardised information about fees.</p> <p>Best practice intake and assessment tools in areas of Family Violence and Multi Agency Risk Assessment and Management Framework (MARAM) – Victorian</p> |



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| | conflict counselling and therapeutic intervention. | | | | <p>government initiative – continue to be incorporated into forms and processes of intake and assessment with improved safety questions included in the Shepparton FRC intake and assessment forms.</p> <p>Improvements in measuring complexity included data on family violence presenting issues and related presenting issues have further informed service delivery. Agreement reached on core “assumed” presenting issues for FRC clients so that additional presenting issues relating to Family violence and other complex issues can be captured. COVID related presenting issues included now in data set.</p> <p>SCORE data- 65.6% of clients assessed for circumstances, 65.8% assessed for goals and 47.5% assessed for satisfaction for the reporting period.</p> |



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| Child Focused Information Sessions | <p>Provide clients with an information session with content adapted from the work of Dr Jenn McIntosh (childrenbeyonddispute.com) e.g. information about the impact of separation on children.</p> <p>Provide relevant legal information.</p> | Ongoing | 70% of all clients attend a child focused information session to prepare for FDR. | <i>Regularly offered online in 2021-2022- see progress report for numbers</i> | <p>Due to the continuation of the COVID pandemic, in the 2021-2022 period child focused information sessions were again offered online.</p> <p>In Geelong, parents were sent the online version of the child focused information session developed by staff and available on YouTube. Parents were asked to watch the session and staff discussed feedback in assessment appointment. Information session was viewed 931 times on YouTube link- a significant increase on last reporting period. The Barwon Community Legal Service (BCLS) information session sent alongside FRC session was viewed 457 times however this was on hold for a period of time while BCLS updated the information in response to the Federal Circuit and Family Courts merger.</p> |



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| | | | | | <p>s 22</p> <p>In next reporting period plans are underway to review and update information session and have available as one session for clients across the three FRC's.</p> |
| Joint FDR Sessions | Where both parties have participated in an assessment, a large proportion of clients will progress to at least one joint FDR session. | Annually | 50% of clients have a 'later' outcome assessment of SCORE Circumstances and Goals following 1 st joint session showing improved management of issues relating to separation and divorce. | <i>SCORE data target exceeded</i> | <p>53% of clients attended a joint mediation</p> <p>Of 607 parenting agreements recorded, 264 were full or partial agreements</p> <p>*Refer DEX data Appendix 1</p> |



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| | <p>Facilitate the development of a workable agreement on arrangements for the children.</p> <p>Conduct the dispute resolution with parents in such a way that best achieves sustainable parenting agreements including using applicable models such as 'shuttle mediation', child inclusive mediation, conjoint mediation and therapy, and legally assisted mediation where appropriate.</p> | | <p>(CCVT FRCs will implement the FDR-tool for outcome assessment as soon as it is translated to SCORE)</p> <p>Number of parenting arrangements made – not only “parenting agreements” (analysis of changed Circumstances and Goals).</p> <p>Number of various models of intervention (e.g. Shuttle, CIP, etc.) used to help identify trends and improve practice.</p> | <p><i>Improvement recorded in no. of CIP joint FDR sessions held</i></p> | <p>While face to face appointments increased in this reporting period due to eased COVID 19 restrictions, staff continued to offer a variety of modalities for FDR including phone and Zoom as per the CCVT Video Conferencing Practice rules.</p> <p>A particular theme in client work during the reporting period was the impact of COVID on separating parents who needed to remain living in the same home. Practice rules developed for FDRPs to manage the safety and sensitivities associated with offering ZOOM or phone FDR for separated parents who may be participating from the same premises.</p> <p>Additions to our Penelope client management system have led to improved data collection regarding outcomes at the closure of cases. This extends DSS “parenting agreements” data which does not capture complicated outcomes or</p> |



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| | | | | | <p>successful outcomes in reduced parental conflict and improved communication which may be more important than a written parenting plan. Data in this reporting period demonstrates successful capture of 82 case outcomes in addition to DSS DEX data.</p> <p>Service delivery trends mapped during reporting period demonstrate joint FDR continues to be predominant modality with 610 FDR sessions conducted, 89 shuttle FDR sessions and 40 child inclusive FDR sessions conducted which is a significant increase on last reporting period.</p> |
| Referral | Provide referrals in line with the guidelines as detailed in the Operations Framework for FRCs (July 2019) options at any point in the client journey. Make use of the iRefer Vic app. | 6 monthly | 33% of formal referrals captured and recorded Analyse referrals in and out of FRC as measure of the level of connectedness that | <i>Marked improvement in capturing referral data</i> | 2,012 outbound referrals recorded - increase on last reporting period. 44.5% of active service files contained a referral - increase on last reporting period. |



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| | | | <p>the FRC has with other service providers in the community.</p> | | <p>*Refer DEX Data Appendix 2 for referrals and Appendix 3 for service collaboration.</p> <p>Inbound referral source information captured show self, other party, legal agency and community agency, as top four referrals in pathways for clients into an FRC service.</p> <p>Administrative staff collect information about the types of general enquires that come in via telephone and in person reception and the referrals that are made at that point to other services.</p> |





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| s 22 | | | | | |
| Client Service Delivery Principles | Follow the service principles as outlined in the Operation Framework covering the Involvement of Children, Client Diversity, Services to Indigenous Clients, Legal Advice and Representation including encouraging clients to seek independent legal advice, particularly in the area of property mediation, and Fees Policy. | 6 monthly | See measures against Quality Service Provision above. | <i>Ongoing</i> | <p>CCVT has developed a Practice Framework to guide service delivery across all our programs. There are three pillars - the client experience, governance and quality practice.</p> <p>Each agency has child safe standards in place and a working group that reviews and improves practice around child empowerment and participation.</p> <p>Diversity and Inclusion committees promote inclusive practice. Information sessions reviewed</p> |



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| | | | | | <p>to ensure inclusive language particularly in relation to same sex separated parents.</p> <p>Partnerships continue with Victorian Legal Aid (VLA) and Community Legal Service. Clients have continued to access these services via phone or in person when restrictions allowed.</p> |
| <p>Targeted Client Groups</p> | <p>Utilise interpreters, co-working models, and support persons/advocates where applicable.</p> <p>Leverage bilingual staff to engage with clients (from across our other internal services).</p> <p>Address accessibility issues for clients – flexible hours, proximity to public transport, disability access and capacity to waive fees.</p> <p>Our services are proactive in engaging Aboriginal and Torres</p> | <p>Annually</p> | <p>Number of referrals from disadvantaged client cohorts – indigenous, disabled, CALD, clients with a Health Care Card, clients with Family Violence presentations, and people identifying as LGBTIQ+.</p> <p>Links to specialist family violence and/or child protection services where significant Family Violence risk is identified.</p> <p>Analyse client demographics to monitor services to targeted client groups.</p> | <p><i>Ongoing</i></p> <p><i>Not yet asking clients to identify as LGBTIQ+</i></p> | <p>Services have been offered to clients from a variety of disadvantaged cohorts. Data collected in our Penelope Client Management System and via assessment documents indicate almost half of all clients hold a health care card. 11% of clients present with family violence issues (312 clients) according to our Penelope Client Management System, however the figure is actually much higher due to limits on the number of presenting issues that can be recorded in the system. Assessment notes indicate family violence as an</p> |



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| | <p>Strait Islander clients, individuals from culturally and linguistically diverse (CALD) backgrounds, individuals with a disability, or those experiencing family violence. Our sites have also been supporting more clients with financial disadvantage evidenced by the number of clients who present with a Health Care Card.</p> <p>Triage vulnerability and need, and links to other essential or necessary services with active and facilitated referrals.</p> | | | | <p>issue in a significant number of cases.</p> <p>Referrals are provided to appropriate family violence support services and support as needed. The Family Safety Practitioner employed in s 22 was extended to provide resourcing to the Geelong and s 22 FRC's.</p> <p>The aim of this role is to work with FDR clients experiencing family violence encompassing tracking of safety and support needs, case management support, secondary consultation, and resourcing.</p> <p>Strong relationships have been established with specialist family violence providers, including Orange Doors and Child First to facilitate targeted intervention for families experiencing family violence and child wellbeing issues.</p> <p>Work continues with our Cultural Liaison Worker to engage with local CALD</p> |



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| | | | | | <p>community in areas such as Shepparton where the CALD population is higher. There are also plans to extend this role to consult with the Geelong and s 22 FRC's.</p> <p>Client demographics are noted on a monthly basis, with trend analysis and productivity reports monitored by the CCVT Operations Group.</p> |



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| Number of Clients Assisted | >2,500 | Annual (monthly) | DEX Data demonstrates number of clients assisted meets or exceeds deliverable | 2,445- <i>partially met</i> | The 2021-2022 reporting period had increased number of clients from the previous reporting period by 258. Given the COVID pandemic continues to impact not only clients but staff also, this is a testament to the availability of staff across the three FRC's to resource one another when demand is particularly high in one FRC over another. For example, when the waiting list in Geelong exceeded six weeks, s 22 were able to be allocated some clients and provide a remote service delivery option to ensure clients were not waiting for an excessive period of time. |
| Number of Service Events (Sessions) | Approx. 3.5 sessions per client x 2,500 clients = 8,750 | Annual | DEX Data demonstrates number of service events per client assisted meets or exceeds deliverable | 16,304 <i>events-average of 6.7 per client</i> | As per last reporting period, there was an increase of average events per client directly attributed to the ongoing nature of remote service |



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| | | | | <i>Exceeded</i> | delivery being necessitated by COVID pandemic. Practitioners were able to provide more sessions via telephone per case to provide support and follow up. Remote service delivery as mentioned previously is now embedded in ongoing practice as its effectiveness is now well demonstrated. *Refer DEX data Appendix 4 |
| ATSI | >2.5% | Annual | DEX Data | 68 clients 2.8% exceeded | *Refer DEX data Appendix 5 |
| CALD | >2.0% | Annual | DEX Data | 1.5 % partially met | *Refer DEX data Appendix 5 |
| Disability | >4.0% | Annual | DEX Data | 5.4% exceeded | *Refer DEX data Appendix 5 |
| Proportion of Clients with Health Care Cards | >45% | Annual | Many clients accessing the FRC are financially disadvantaged or have limited capacity to access a private FDR service. The number of clients represented as a | 44.4% met | These numbers continue to reflect increased access for health care card holders to property and financial |



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| | | | percentage of total clients seen at the three FRCs. CCVT-CMS data. | | mediation. Division of debt continues to be a presenting issue in FDR. Parents continued to report financial stress due to continued impact of lockdowns on work hours or employment, and also time away from work due to COVID diagnosis for selves or children. Increasing costs of food, utilities and petrol and rising interest rates will begin to impact on families post June 2022. *Refer DEX data Appendix 5 |
| Effectiveness of Programs | Collect and record client outcomes using SCORE. | Annual | Assess changes in Circumstances, Goals and record client Satisfaction – DEX data will show 50% of clients will be assessed with changed outcomes >10% of clients will be assessed for Satisfaction. | 100% completed for this period | SCORE data demonstrates 46.3% recorded positive change in circumstances, and 67.5% recorded positive change in goals, and 90.5% recorded positive satisfaction with service. *Refer DEX data Appendix 6 |



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| Effectiveness of Programs via Bi-monthly FRC Network Meeting | Operation Managers from the 15 FRCs in Victoria meet regularly to share practice and resources, manage risk and quality issues, monitor and benchmark performance and organise joint training. | 6 times per year | Attendance at meetings, shared joint activity including FRC protocol, training and networking, review of operational policy/practice, FRC outcome measurement, and liaison with other providers such as child protection, the Family Court, the Federal Circuit Court and other relevant stakeholders. | Completed and Ongoing | The FRC Managers Group met bi-monthly over this period (6 times over 12 months). The majority of meetings were conducted via Zoom and FRC's continued to share practice and guidelines on remote service delivery and video conferencing. A key focus has been maintaining business continuity and responding to emerging needs of separated families in the context of COVID, professional development opportunities for staff and advocacy work in relation to the FCFCOA changes and central practice direction. |
| Property FDR Training and Service development | All staff delivering Property FDR are fully trained. Ongoing training for PDR staff in will focus on advanced PDR training to ensure a competent, skilled PDR team is in place across the three FRC's. | Annual | Training conducted for all relevant staff, repeat training if required and for new staff. | Ongoing | Training offered for new staff and several staff have participated in advanced Property FDR training in the reporting period. Training for Property FDR was canvassed by the network, |



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| | <p>Provide specialist supervision.</p> <p>Develop consistent model of service delivery.</p> | | | | <p>however agencies had developed their own capability, particularly given that COVID limited group training.</p> <p>New Property FDR practice group meets monthly across the three CCVT FRC's to implement consistent best practice model including processes and tools, discuss cases and emerging client needs. Group includes a Senior FDRP with Property experience.</p> |
| Property FDR | <p>Maintain staffing group with Property FDR skills and experience.</p> <p>Ensure new staff have Property FDR as a component of their role as defined in position descriptions</p> <p>Using a similar process to that described above for joint sessions for parenting agreements, provide joint dispute resolution sessions in property</p> | Annually | <p>Identified staff skilled in delivering Property FDR</p> <p>No. of agreements</p> <p>Type of agreements including matters resolved without plan in place</p> | <p>100% completed for this period.</p> <p>Data for full reporting period now available- 58 property agreement s made</p> | <p>All three FRC's now fully operational with staffing and resources for Property FDR.</p> <p>s 22</p> <p>s 22</p> <p>In Geelong, there are two experienced FDRP's delivering</p> |



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| | <p>matters. Clients will be encouraged to formalise these agreements by way of consent orders obtained through the court.</p> | | | | <p>Property FDR, one currently being mentored and a fourth beginning their orientation into Property FDR.</p> <p>Service delivery is in place in accordance with the additional funding and revised operational framework for FRCs. Processes for Property FDR have been implemented and recording of Property FDR work now supported by Penelope Client Management System with stand-alone service file for Property FDR now being utilised.</p> <p>Data relating to property mediations has been measured separately since October 2020. There were 143 service files active in the reporting period, which is an increase of 90 on the last reporting period, with 1,439 service events and 59 joint FDR sessions conducted (an increase of 39). There were 58 property agreements made.</p> |



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| | | | | | |
| Eligibility Requirements for Property FDR | Provide some guidance for the allocation of Property FDR based on need, vulnerability and in accordance with the updated FRC Charter. | 2020-2021 | Property FDR provided to priority populations. DEX data analysed to monitor and improve practice. | 100% completed for this period | <p>As per the revised operational framework for FRCs, all three provide Property FDR with a current subsidised fee structure ensuring that clients with less financial capacity are able to access a property/financial FDR service. Data from case files continues to demonstrate some clients are needing to mediate division of debt and repayment, rather than assets.</p> <p>The three FRC's have provided Property FDR to clients who have experienced family violence and are currently considering a legally assisted model of FDR with local community legal services.</p> |



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Risk Management (please note any predicted risks & related mitigation strategies)

| Risk | How the Risk will be Managed | Report |
|---|--|--|
| <p><u>Critical Incidents</u></p> <p>A Critical Incident is any manageable or preventable event that happens involving an FRC client that significantly impacts them or:</p> <ul style="list-style-type: none"> • has the potential to jeopardise the achievement of individual and program outcomes; or • has the potential to jeopardise the reputation of FRC programs and/or the Australian Government. <p>A Critical Incident may include, but is not limited to, any of the following:</p> <ul style="list-style-type: none"> • serious injury or death of a client; • allegation or report of criminal activity, incarceration, violent behaviour, hospitalisation, neglect or abuse of children by a client; • inappropriate behaviour by the Grantee's personnel towards a client. | <p>As per Part B of the Grant Agreement, for all Critical Incidents, the Grantee must record and notify the Commonwealth representative via email within 48 hours of the event (or knowledge of the event).</p> <p>CCVT member agencies all have in place:</p> <ul style="list-style-type: none"> • Codes of Conduct/Ethics to ensure that staff are aware of their performance obligations in supporting clients safely and delivering high quality services • A regime of policies, procedures and practice instructions to support the delivery • Continuous staff skill and knowledge development activities • The use of validated and other well-regarded client needs assessment and care planning tools • A risk identification and mitigation system which includes the identifying of risks to clients and the development of strategies to mitigate such risks • A system for identifying, responding to, managing and reporting critical incidents • A regime of staff supervision, which provides both line management and clinical review. This ensures that understanding client need is shared and continuously examined • Mechanisms for supporting continuous diversity improvement including working groups, training, dissemination of relevant support materials. | <p>Systems, policies and procedures in place and regularly reviewed.</p> <p>CCVT member agencies have well developed risk management systems in place. These systems encompass identification, mitigation and reporting mechanisms, are supported by frameworks, policies and procedures which are guided by <i>ISO 31000 – Risk Management</i> (ISO 31000 – Risk Management is a family of standards relating to risk management codified by the International Organisation for Standardisation).</p> <p>In addition, CCVT member agencies hold registration and accreditation with a range of external regulatory and quality frameworks including:</p> <ul style="list-style-type: none"> • ISO 9001:2015 (All CCVT member agencies) • ISO 27001 Information Security Management System (CatholicCare Victoria) • Registered Community Service Organisation (CSO) under the Children Youth and Families Act (2009), Division 3 (CatholicCare Victoria) • A recognised provider complying with DHHS TAS Safety and Quality Standards (CatholicCare Tasmania) • National Standards for Child Safe Organisations and relevant child safety standards (All CCVT member agencies) • Accreditation with the Australian Childhood Foundation's Safeguarding Children Program (CatholicCare Tasmania) |



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| Risk | How the Risk will be Managed | Report |
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| | | <ul style="list-style-type: none"> Complying with Catholic Professional Standards Limited (CPSL) (All CCVT member agencies) <p>All CCVT member agencies have dedicated risk, compliance and quality resources and Board oversight mechanisms.</p> <p>While no major critical incidents occurred in the reporting period that met the threshold, incidents relating to clients being at risk e.g. suicide risk, reporting family violence incidents to police are documented internally and managed including clear case planning and intervention. Incident reporting is then reviewed internally, at board level, and via each agency's accreditation process.</p> <p>Induction and orientation processes and ongoing staff training incorporate risk mitigation information.</p> |
| <p><u>Organisational Governance</u></p> <p>Significant changes to governance arrangements may include, but are not limited to:</p> <ul style="list-style-type: none"> any changes to the Grantee's senior management, changes to members of the Board, and/or changes to the Grantee's representative (the Activity Primary Contact); and | <p>As per Part B of the Grant Agreement, the Grantee must notify the Commonwealth representative via email of all significant changes to governance arrangements within two weeks of the event (or knowledge of the event).</p> <p>CCVT's Family Relationship Centres are already under the CCVT Governance structure of the CCVT Board.</p> <p>The CCVT Board sets the strategic direction of CCVT, approves CCVT's annual budget and delegated authorities, monitors the implementation and performance of the risk management</p> | <p>CCVT has developed a Practice Framework to guide service delivery across all our programs. There are three pillars - the client experience, governance and quality practice.</p> <p>CCVT has demonstrated structures and capability to monitor performance and accountability. The Operations Group meets weekly and provides reports to the Governance group with the assistance of the CCVT Contract Manager. Annually the CCVT Operations and CCVT Board meet to review progress and performance and set the strategic direction for the next 12 month period, including projects and service innovation. In 2021/22 a major focus was business continuity in managing the COVID pandemic with staff and clients to enable ongoing</p> |



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| Risk | How the Risk will be Managed | Report |
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| <ul style="list-style-type: none"> any investigation, litigation or prosecution of the Grantee's staff or members of the Board. | <p>system, monitors organisation performance, sets the expectations and is responsible for organisational culture.</p> <p>The Board has oversight of the FRC program through monthly CCVT operations group meetings, board reports, and executive portfolio reports of the Chief Financial Officer and Quality and Risk Manager to the Board's Risk Audit and Finance Committee.</p> <p>The Company Secretary has oversight of CCVT's financial system, which is externally audited annually in accordance with Australian Accounting Standards. CCVT finance will work with operational managers to ensure that the FRC Service Activity is delivered within budget and meets the service deliverables of the grant agreement. CCVT has an established risk management system covering both strategic and operational risk and integrated financial management.</p> | <p>service delivery. Our focus on remote service delivery was a key feature. All these meetings have continued online utilising Zoom and Microsoft Teams.</p> <p>Across CCVT we have made further enhancements to our data and CMS capability with incremental improvements in data governance, data integrity, implementing engage modules in Penelope to assist clients to populate their own contact and client information electronically via a link on their preferred device and better manage demand and scheduling with appointments etc.</p> <p>Over this same period, we have also undertaken enhancements to data reporting, including creation of a property service file in our Client Management System (CMS), more accurate representation of complex presenting issues such as family violence, more accurate reporting of referrals data and outcomes of case closures.</p> <p>Over this reporting period managing the impact of COVID on clients and staff was a critical feature of our operations, particularly:</p> <ul style="list-style-type: none"> Maintaining COVID safe site plans Staff working from home transition documents and assessment of working from home workspace in relation to privacy and confidentiality IT enablement to ensure staff can transition between work office and home when needed |



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| Risk | How the Risk will be Managed | Report |
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| | | <ul style="list-style-type: none"> Contingency plans for staff absences |
| <p><u>Breach of Client Confidentiality</u></p> | <p>Adherence to all obligations outlined under the Privacy Act 1988 and wider privacy provisions in all relevant laws and grant program guidelines</p> <ul style="list-style-type: none"> Privacy impact assessment survey reviewed annually Data Breach Response Plan and reported incidents reviewed monthly <p>Induction training for all staff and volunteers covering code of conduct and obligations under the Privacy Act.</p> <p>Staff and volunteers to participate in ongoing privacy/security awareness training.</p> <p>Agency to establish and adhere to client consent protocols, and complaints management and escalation procedures.</p> <p>CCVT has in place standardized approaches to ensuring the protection of client confidentiality and privacy of information including:</p> <ul style="list-style-type: none"> Codes of conduct/ethics and privacy agreements which all staff are required to uphold Staff induction and ongoing development activities which ensure currency of relevant knowledge Client consent processes that uphold obligations outlined in the Privacy Act 1988 | <p>Data Breach Response Plan and reported incidents reviewed monthly by Quality Improvement Manager at each of the organisations.</p> <p>All new staff have been inducted with information relating to the Privacy Act and code of conduct.</p> <p>Assessment completed by CCVT Board at time of transition to working from home arrangements. Business Continuity Plan enacted for all Services across CCVT including privacy considerations in light of remote service delivery.</p> <p>CCVT Data breach log- monthly review of any breaches to privacy including minor breaches. There were no reportable breaches requiring external notification in the reporting period.</p> <p>Online compliance training delivered in Cyber safety and security.</p> <p>Client management system consent process documented and provided to all clients.</p> <p>CCVT has clearly documented complaints management processes.</p> |



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| Risk | How the Risk will be Managed | Report |
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| | <ul style="list-style-type: none"> • Electronic client record management systems which are password protected and only available to authorized officers • Client complaint management processes and escalation procedures • A data/privacy breach response management plan, which outlines immediate and long-term containment requirements, affected parties' notification obligations, reporting mechanisms and continuous improvement strategies. | |
| <p><u>Potential Client Harm</u></p> | <p>Identify and disseminate good practice in harm assessment and management and establish and/or review existing harm prevention protocols and guidelines.</p> <p>Ensure staff have access to harm prevention training and professional development opportunities to increase skills and knowledge.</p> <p>Identify good practice leaders and facilitate their role in influencing the agency's harm prevention management and culture.</p> <p>Implement and use incident monitoring and management systems for monitoring instances of harm and ensure effective referral pathways to relevant mental health services.</p> <p>CCVT employs best practice service delivery principles and approaches to guide the work of staff including:</p> | <p>Systems in place and utilised by staff and Managers/Supervisors include practice instructions, policies and procedures, Code of Conduct, client at risk form and incident management form and procedures.</p> <p>Increasing numbers of staff are now trained in MARAM and suicide risk and identification training. Regular engagement has occurred with local service providers in specialised areas such as family violence, mental health and drug and alcohol.</p> <p>Client file audits conducted with checks in risk screening, assessment documentation and case planning.</p> <p>Recruitment- screening of applicants for all positions include adhering to standards relating to qualifications, professional experience, police and working with children's checks.</p> |



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| Risk | How the Risk will be Managed | Report |
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| | <ul style="list-style-type: none"> • Codes of conduct/ethics • A regime of policies, procedures and practice instructions • Risk identification and mitigation systems • Validated and other well regarded client need assessment and care planning tools • Established referral pathways • Electronic client record management systems to ensure current and accurate information is available with authorised access • Continuous staff skill and knowledge development activities • Client risk identification and incident monitoring and management systems • Internal electronic information sharing systems such as SharePoint and intranets to disseminate good practice materials • A regime of staff supervision, which provides both line management and clinical review. This ensures that understanding client need is shared and continuously examined. | <p>Induction and orientation processes include code of conduct, privacy and confidentiality and child safe standards.</p> <p>Over this reporting period consideration given to all matters relating to COVID impact on clients including:</p> <ul style="list-style-type: none"> • Ongoing need for working from home arrangements that provide for privacy and confidentiality when required in accordance with pandemic orders, • Staff returning to the workplace transition documents, • COVID Safety plans, • Continued use of video conferencing platforms including video conferencing training and practice rules for staff, • Face to face client service delivery practice guidelines in place. |
| <p><u>Child Safe Legislation and Requirements</u></p> | <p>CCVT is committed to child safety and continues to work both systematically and practically to empower and protect children and achieve compliance with the Child Safe Standards. Addressing and effectively responding to the continually</p> | <p>Each CCVT member agency has documented child safety standards and evidence to demonstrate adherence to these standards through culture, policy, screening, supervision,</p> |



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| Risk | How the Risk will be Managed | Report |
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| | <p>developing child safe environment requirements and best practice opportunities, including achieving compliance with the standards, remains an active work in progress.</p> | <p>training and strategies to remove risk and promote child participation.</p> <p>CCVT has scoped a Strategic project to explore the benefits of common external accreditation processes in all business domains. This includes, but is not limited to, child safe standards, ISO, QIP and family violence accreditation. CCVT member agencies believe this project will further strengthen business growth, standardised reporting, continuous improvement and consistent sharing of resources across all programs.</p> |
| <p><u>Indexation</u></p> | <p>In the past financial year the Federal Government provided additional funding to the sector to address the shortfall from the Equal Remuneration Order (ERO) that was due to expire June 30th 2021. However, this issue has presented itself again for this next financial year 2022/23 due to salary increases due to indexation. This could result in further contractions of Service provision by approximately 5% into the future.</p> | <p>CCVT in partnership with our Peaks – Family Relationship Services Australia (FRSA) & Catholic Social Services Australia (CSSA), is lobbying the Federal Government to address a 4.9% salary increase. The Victorian Council of Social Services (VCOSS) has confirmed that indexation will be provided by the Victoria State Government funded programs funded by the Department of Fairness, Families and Housing (DFFH) and the Department of Health.</p> |



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Budget

| Items | Budgeted Amount | Expended Amount |
|----------------------------|--|-----------------------|
| <i>Funding 2021/22</i> | | |
| CCV | \$4,855,836.97 | \$4,809,569.00 |
| CCVT Total | \$4,855,836.97 | \$4,809,569.00 |
| Notional Underspend | Impact of cumulative staffing changes across the three FRC's | \$46,267.00 |

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Activity Work Plan Report

Instructions

To complete the Activity Work Plan Report you will need a copy of your approved Activity Work Plan.

Most text boxes in this form will be populated by copying the text in your Activity Work Plan. You will need to report against each line item in the text boxes on the right-hand side of the form.

For further guidance on completing this form go to the [Website](#)

Add rows to the following tables as required.

Reporting Period 1 July 2022 to 30 June 2023

Activity Details

| | |
|----------------------------|--------------------------------|
| Organisation Name | CatholicCare Victoria Tasmania |
| Grant Activity Name | Family Relationship Centres |
| Grant Activity ID | s 22 [REDACTED] 4-BJR7VW4 |
| Reporting Period | July 2022-June 2023 |



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Please note: CatholicCare Victoria Tasmania (CCVT) is comprised of two member organisations, CatholicCare Victoria (CCV) and CatholicCare Tasmania (CCT). Where service activity is applicable across Victoria and Tasmania, the activity is reported as CCVT. Where activity is only relevant to one of the member agencies, then it will be reported as CCV or CCT as appropriate.

Activity Deliverables

| Objective | Deliverable | Time frames | Measures of success | Status | Progress Report |
|---------------------------|--|---------------------------------|---|---|--|
| Quality Service Provision | <p>Systems are in place to ensure:</p> <ul style="list-style-type: none"> planning, allocation and management of the workforce provides the appropriate personnel and skills to deliver high-quality services and to meet changing client needs the workforce has the appropriate qualifications and experience to provide high-quality services and ongoing professional development to maintain and improve skills a safe and fair workplace based on a 'just' culture and mutual respect is provided, with systems in place to address issues with culture such as workplace bullying, unconscious bias and discrimination staff feedback is sought and used in a visible way to improve services | Monthly commencing in July 2019 | <p>Senior Manager representatives of the 2 participating agencies of CCVT (CatholicCare Victoria and CatholicCare Tasmania) meet 2 times per month to review, analyse and discuss relevant data derived from various systems that function across the 2 agencies and those that work across agencies, such as the CCVT CMS: Penelope. There are a number of standing agenda items including compliance with the deliverables of the relevant agreements and those detailed in the Operations Framework for FRCs (July 2019).</p> <p>Number and type of professional training and development completed across a range of topics by CCVT member organisations.</p> <p>Senior Management and Senior staff member with legal experience met with VLA and other like organisations to advocate for improved communication and information provision from the FCFCOA in relation to the new Court Central Practice direction and Certificate of Family Dispute</p> | <p><i>Have met > 2 times /month</i></p> <p><i>100% completed for 2022-2023</i></p> | <p>The CCVT Practice Framework guides service delivery across all programs in a manner that focuses on best practice that is inclusive and evidence informed. There are three pillars - the client experience, governance, and quality practice.</p> <p>CCVT Operations Group met weekly in the first six months of the reporting period and then moved to fortnightly meetings as well as a lengthier monthly meeting, with particular attention placed on consistent practice, consistency in client data management, and current client trends and themes.</p> <p>CatholicCare Victoria completed a staff survey during the reporting period to</p> |



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| Objective | Deliverable | Time frames | Measures of success | Status | Progress Report |
|-----------|---|-------------|--|--------|---|
| | <ul style="list-style-type: none"> • promotion and support of teamwork is the basis of providing high-quality services • clear communication of role expectations, responsibilities and standards of performance is provided to all staff, and employees are supported and held accountable for meeting these expectations • mentoring and supervision is used to support, monitor and develop staff • training and tools are provided so staff can monitor and improve their own practice and organisational processes more broadly • innovation in workforce practice supports the development and maintenance of workforce excellence • there is a just process for addressing individual performance that prioritises client safety • a defined system for managing complaints or concerns about a staff member is in place and is | | <p>Resolution. FRC staff and leadership team continue to monitor referrals from the FCFCOA to assess impact on client numbers.</p> | | <p>obtain feedback across a range of measures including leadership support, opportunities and challenges within the organisation</p> <p>CatholicCare Victoria introduced a new Performance, Development and Review process with accountabilities related to position descriptions and operational plans.</p> <p>Service delivery continues to include a range of modalities including face to face, telephone and video with an increase in face-to-face events evidenced in the data. Ensuring a range of modalities is in place has ensured reduced waiting times and ability to adapt to changing work environments.</p> <p>Continued use of CCVT Video conferencing practice rules for use with clients including FRC clients and groups when service delivery offered online</p> |



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| Objective | Deliverable | Time frames | Measures of success | Status | Progress Report |
|-----------|---|-------------|---------------------|--------|--|
| | <p>regularly reviewed for its effectiveness</p> <ul style="list-style-type: none"> the systems for developing and supporting the workforce are regularly and rigorously evaluated to ensure their effectiveness. | | | | <p>CCV staff completed online compulsory training modules on workplace bullying & harassment, child safety, privacy and racial discrimination,</p> <p>Professional development and training attended by staff included attendance at the Family Law Pathways national webinar series which included: 'Why People Lie The Psychology of Attribution in Family Law' speaker Phil Watts, and a presentation on 'The Lighthouse Project'. Various Family Law Pathways events were also attended in local areas.</p> <p>Other Professional development opportunities undertaken included topics such as: Family Law System, Family Violence including MARAM, ASIST Suicide Prevention, Child Inclusive training, and legally assisted training. Some of the training attended by staff include:</p> |



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| Objective | Deliverable | Time frames | Measures of success | Status | Progress Report |
|-----------|-------------|-------------|---------------------|--------|---|
| | | | | | <p>attendance at Centre for Excellence in Child and Family Welfare - connecting communities regional tour Geelong, Shepparton, Bendigo.</p> <p>Training conducted by African Family Services to support leaders from within the community to have meaningful conversations on healthy relationships</p> <p>World Elder Abuse training.</p> <p>Property Dispute Resolution training.</p> <p>MARAM (Multi Assessment Risk and Management).</p> <p>Goulburn Child & Family Services Network Forum.</p> <p>Autism and Parenting focusing on the father son relationship.</p> <p>ASIST training.</p> <p>Best Interest Case Practice Model Framework.</p> |



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| Objective | Deliverable | Time frames | Measures of success | Status | Progress Report |
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| | | | | | <p>Meet and greet with Child Protection.</p> <p>Several FRC staff attended the 2023 National FRSA conference.</p> <p>Regular supervision conducted with staff with face to face, Zoom and phone options available. - evidenced in client management system</p> <p>During 2022/23 the three Family Relationship Centre's transitioned to a consistent service delivery model including embedded practices across Information and Referral Officer role, intake and assessment and Family Dispute Resolution. This has been supported by a revised program manual to guide practice in line with the FRC operational guidelines.</p> <p>CCV has also implemented sharing staffing resources across sites in response to demand and also challenges in recruitment. This has been very successful and is</p> |



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| Objective | Deliverable | Time frames | Measures of success | Status | Progress Report |
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| | | | | | detailed further in the comments section. |
| Provision of Information for Families | Family Relationship Centres make available general information on a range of family relationship issues to the public – either directly or through relevant Family Law Pathways Network. | Ongoing | <p>Discrete areas available to access information (e.g., computers).</p> <p>Brochures, posters, information sheets freely available to the public.</p> <p>Canvass of administrative staff to determine types and numbers of general inquiries made by the public.</p> <p>Clients assisted to use iRefer Vic app.</p> | <i>Completed for 2022-2023</i> | <p>Each FRC has dedicated space in reception area for the provision of general information on a range of family relationship issues, and specific service information e.g., specialist family violence services, mental health, alcohol and other drug services. Telephone, internet access, printing/copying and other service information is also available at each site. Each FRC receives regular information from Family Law Pathways Network e.g., bulletins and Family Separation services guides</p> <p>Electronic means continues to be the predominant way of providing information to clients with hard copies also available. All clients receive an information pack containing parenting plan information, fee schedule, and information sheet covering mandatory FDR</p> |



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| Objective | Deliverable | Time frames | Measures of success | Status | Progress Report |
|------------------------------|--|-------------|---|--|--|
| | | | | | <p>information and frequently asked questions on process. Information sessions continue to be offered online and are detailed below.</p> <p>Child focused information is provided at various stages of the FDR process and are based on individual needs of the family. Examples include: Initial information pack, discussions in one on one sessions, brochures, relevant websites related to parenting.</p> |
| Intake and Assessment | <p>Meet separately with the people involved in the dispute for an intake appointment and invite to child focused information session.</p> <p>Following attendance at information session, assess clients to ensure that each person has the capacity to negotiate and that all parties are safe to participate in Family Dispute Resolution.</p> | 6 monthly | <p>90% of all clients receive an intake.</p> <p>Intake and assessment tools are best practice and regularly reviewed e.g., the Family Violence Multi-Agency Risk Assessment and Management Framework (MARAM) developed in Victoria.</p> <p>50% of clients are assessed (Circumstances and Goals) and 10% (Satisfaction) following the SCORE process.</p> <p>Number of clients who progress to 'mediation assessment'.</p> | <p><i>Exceeded</i></p> <p><i>Reviewed 6 monthly</i></p> <p><i>Improvement in client management system data dashboards have provided more accurate data in this area.</i></p> | <p>3,041 clients were active in 2022-2023 and 98.7% of clients completed at least one service event.</p> <p>3,934 intake/assessment service events were completed. This number is reflective of the FRC service delivery model which includes a phone intake and an individual assessment however DSS service type does not differentiate between the two.</p> |



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| Objective | Deliverable | Time frames | Measures of success | Status | Progress Report |
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| | <p>Family Dispute Resolution (FDR) via a process of intake, assessment and joint FDR.</p> <p>Services are child focused and supporting parents in making arrangements in the best interests of their children.</p> <p>Supporting families with complex needs, often families with low income or limited capacity to pay privately for a service, including those with family violence issues, mental health, AOD or protracted conflict counselling and therapeutic intervention.</p> | | | <p><i>SCORE targets exceeded for 2022-2023 period</i></p> | <p>Intake capacity has been consolidated with a team of Information and Referral Officers available across all sites and managed by a Team Leader. The workflow process for case management has been improved and via consultation with administration staff, an efficient procedure has been developed to ensure timely access to FRC services for clients.</p> <p>The initial intake form and individual assessment form are reviewed on a regular basis to ensure they meet best practice guidelines and incorporate key safety and screening questions. The intake and assessment tools are informed by the Victorian Family Violence and Multi Agency Risk Assessment and Management Framework (MARAM).</p> <p>SCORE data - 66.7% of clients assessed for circumstances, 66.4%</p> |



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| Objective | Deliverable | Time frames | Measures of success | Status | Progress Report |
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| | | | | | assessed for goals and 50.3% assessed for satisfaction for the reporting period. All results are an increase on last reporting period. |
| Child Focused Information Sessions | <p>Provide clients with an information session with content adapted from the work of Dr Jenn McIntosh (childrenbeyonddispute.com) e.g., information about the impact of separation on children.</p> <p>Provide relevant legal information.</p> | Ongoing | 70% of all clients attend a child focused information session to prepare for FDR. | <i>Regularly offered online in 2022-2023</i> | <p>In the 2022-2023 period child focused information sessions continued to be offered online.</p> <p>The child focused information session is now included on the CatholicCare Victoria website. Clients are sent the link to the session in their introductory letter of appointment. The session is also available for interested parties who are viewing the CCV website.</p> |
| Joint FDR Sessions | Where both parties have participated in an assessment, a large proportion of clients will progress to at least one joint FDR session. | Annually | 50% of clients have a 'later' outcome assessment of SCORE Circumstances and Goals following 1 st joint session showing improved management of issues relating to separation and divorce. | <i>SCORE data target exceeded</i> | <p>55.5% of clients attended a joint mediation, a slight increase on the previous reporting period</p> <p>Of 773 parenting agreements recorded, 376 were full or partial agreements.</p> |



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| Objective | Deliverable | Time frames | Measures of success | Status | Progress Report |
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| | <p>Facilitate the development of a workable agreement on arrangements for the children.</p> <p>Conduct the dispute resolution with parents in such a way that best achieves sustainable parenting agreements including using applicable models such as 'shuttle mediation', child inclusive mediation, conjoint mediation and therapy, and legally assisted mediation where appropriate.</p> | | <p>(CCVT FRCs will implement the FDR-tool for outcome assessment as soon as it is translated to SCORE.)</p> <p>Number of parenting arrangements made – not only 'parenting agreements' (analysis of changed Circumstances and Goals).</p> <p>Number of various models of intervention (e.g., Shuttle, CIP, etc.) used to help identify trends and improve practice.</p> | <p><i>Improvement recorded in no. of CIP joint FDR sessions held</i></p> | <p>*Refer DEX data Appendix 1</p> <p>The provision of face-to-face appointments continued to increase in this reporting period and staff continued to offer a variety of modalities for FDR including phone and zoom as per the CCVT Video Conferencing Practice rules.</p> <p>Themes in client work this reporting period included:</p> <ul style="list-style-type: none"> • Parents separated under one roof- largely attributed to rising costs of living and associated financial pressures, • Children with Mental health issues, • High levels of anxiety across both adults and children, • Coercive control • Working with incarcerated clients as part of the FDR process <p>The CCV Penelope client management system continued to collect additional information regarding</p> |



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| Objective | Deliverable | Time frames | Measures of success | Status | Progress Report |
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| | | | | | <p>outcomes at the closure of cases which extends DSS 'parenting agreements' data. This provided details of 641 case outcomes and included 99 cases where following some form of service intervention, clients were able to resolve their issues. This demonstrates that successful outcomes are broader than 'parenting agreements reached'.</p> <p>Service delivery trends mapped during reporting period demonstrate an increase in FDR sessions offered and joint FDR continues to be predominant modality with 722 joint sessions conducted, 144 shuttle FDR sessions and 37 child inclusive FDR sessions.</p> |
| Referral | <p>Provide referrals in line with the guidelines as detailed in the Operations Framework for FRCs (July 2019) options at any point in the client journey.</p> <p>Make use of the iRefer Vic app.</p> | 6 monthly | <p>33% of formal referrals captured and recorded.</p> <p>Analyse referrals in and out of FRC as measure of the level of connectedness that the FRC has with other service providers in the community.</p> | <i>Marked improvement in capturing referral data</i> | There were 2,010 outbound referrals with the top five reasons being: parenting support, family services, financial assistance, legal support, and family violence specialist services including the Orange Door. This is a |



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| Objective | Deliverable | Time frames | Measures of success | Status | Progress Report |
|-----------|-------------|-------------|---------------------|--------|--|
| | | | | | <p>significant increase on last reporting period and is indicative of the complexity of issues clients are presenting with. This represents 40.1% of active service files.</p> <p>Inbound referral source information captured show self, other party, legal agency and community agency, as top four referrals in pathways for clients into an FRC service.</p> |

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| s 22 | | | | | |
| Client Service Delivery Principles | Follow the service principles as outlined in the Operation Framework covering the Involvement of Children, Client Diversity, Services to Indigenous Clients, Legal Advice and Representation including encouraging clients to seek independent legal advice, particularly in the area of property mediation, and Fees Policy. | 6 monthly | See measures against Quality Service Provision above. | <i>Ongoing</i> | <p>CCVT has a Practice Framework to guide service delivery across all programs which is also aligned to the operational framework for FRCs.</p> <p>CatholicCare Victoria has child safe standards in place and a working group that reviews and improves practice around child empowerment and participation.</p> <p>CatholicCare Victoria has a Diversity and Inclusion committee to promote inclusive practice and have</p> |



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| Objective | Deliverable | Time frames | Measures of success | Status | Progress Report |
|--------------------------------------|---|-----------------|---|-----------------------|--|
| | | | | | <p>current objectives relating to the development of a Reconciliation Action Plan and the progression towards Rainbow Tick Accreditation.</p> <p>Partnerships continue with Victorian Legal Aid (VLA) and Community Legal Service. Clients have continued to access these services via phone or in person at local offices.</p> <p>The FRC fee procedure and schedule is in place and provided to clients upon commencement of service.</p> <p>Child inclusive mediation is progressing as a key service delivery option for families to ensure the voice of children is heard throughout the mediation process. All relevant staff have been trained in the Child Inclusive Practice model.</p> |
| <p>Targeted Client Groups</p> | <p>Utilise interpreters, co-working models, and support</p> | <p>Annually</p> | <p>Number of referrals from disadvantaged client cohorts – indigenous, disabled, CALD, clients with a Health Care Card,</p> | <p><i>Ongoing</i></p> | <p>Services have been offered to clients from a variety of disadvantaged cohorts. Data collected in the Penelope</p> |



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| Objective | Deliverable | Time frames | Measures of success | Status | Progress Report |
|-----------|--|-------------|---|--------|---|
| | <p>persons/advocates where applicable.</p> <p>Leverage bilingual staff to engage with clients (from across other internal services).</p> <p>Address accessibility issues for clients – flexible hours, proximity to public transport, disability access and capacity to waive fees.</p> <p>Services are proactive in engaging Aboriginal and Torres Strait Islander clients, individuals from culturally and linguistically diverse (CALD) backgrounds, individuals with a disability, or those experiencing family violence. Sites have also been supporting more clients with financial disadvantage evidenced by the number of clients who present with a Health Care Card.</p> <p>Triage vulnerability and need, and links to other essential or necessary services with active and facilitated referrals.</p> | | <p>clients with Family Violence presentations, and people identifying as LGBTIQ+.</p> <p>Links to specialist family violence and/or child protection services where significant Family Violence risk is identified.</p> <p>Analyse client demographics to monitor services to targeted client groups.</p> | | <p>Client Management System and via assessment documents indicate 41.4% of all clients hold a health care card. 18.9% of clients present with family violence issues (592 clients). While this figure is an increase on last reporting period it is still not representative of total number of cases with family violence as presenting issue due to limits on the number of presenting issues that can be recorded in the system. *Refer DEX data Appendix 2</p> <p>Referrals are provided to appropriate family violence support services as required.</p> <p>The Family Safety Practitioner role provided secondary consultations with staff across the 3 FRC's and supported safety planning and some direction and education regarding the impacts of FV. Some short-term work conducted with individual clients that required ongoing support, including service linkage and brief</p> |



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| Objective | Deliverable | Time frames | Measures of success | Status | Progress Report |
|-----------|-------------|-------------|---------------------|--------|---|
| | | | | | <p>intervention. Identified relevant training details regarding family violence and updated information and resources to FRC staff.</p> <p>Manager and team leaders worked throughout the reporting period on improving relationships with the Orange Door and discussed topics such as information sharing. Education provided to the Orange Door and Child Protection about the legal provisions of information sharing for FDR services which differs from State legislation.</p> <p>Work continues by the CCV Cultural Liaison Worker to engage with local CALD community in areas such as Shepparton where the CALD population is higher. This role was extended to provide consults to Geelong and s 22 FRC's.</p> <p>Client demographics are noted on a monthly basis, with trend analysis and</p> |



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| Objective | Deliverable | Time frames | Measures of success | Status | Progress Report |
|-----------------------------------|-------------|------------------|---|---|---|
| | | | | | productivity reports monitored by the CCVT Operations Group. |
| Number of Clients Assisted | >2,500 | Annual (monthly) | DEX Data demonstrates number of clients assisted meets or exceeds deliverable | <i>3,041 clients assisted in reporting period including 2,377 new clients.</i> <i>Exceeded</i> | While this figure is a small contraction from the last reporting period it still exceeds the deliverable. A review of the way service files are allocated against FRC/FDR and RFDR has highlighted a need for staff education on categorisation of service files. This data will now be a more accurate representation of the funding stream. Demand continues to be high however is managed by the sharing of staffing resources and remote service delivery capability |



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| Objective | Deliverable | Time frames | Measures of success | Status | Progress Report |
|--|---|-------------|---|---------------------------------|---|
| Number of Service Events (Sessions) | Approx. 3.5 sessions per client x 2,500 clients = 8,750 | Annual | DEX Data demonstrates number of service events per client assisted meets or exceeds deliverable | 20,994 <i>Exceeded</i> | The complexity of case work in all FDR services is evidenced in the numbers of additional events that are required to further assess, support, and prepare clients for mediation. However, there is recognition that some reporting protocols require review and updating in relation to what is sent to DSS via the DEX portal. This is likely to impact numbers of events in the next reporting period. *Refer DEX data Appendix 2 |
| ATSI | >2.5% | Annual | DEX Data | 108 clients 3.5% exceeded | *Refer DEX data Appendix 2 |
| CALD | >2.0% | Annual | DEX Data | 101 clients 3.3% exceeded | *Refer DEX data Appendix 2 |



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| Objective | Deliverable | Time frames | Measures of success | Status | Progress Report |
|--|---|------------------|---|--------------------------------|---|
| Disability | >4.0% | Annual | DEX Data | 168 clients 5.5% exceeded | *Refer DEX data Appendix 2 |
| Proportion of Clients with Health Care Cards | >45% | Annual | Many clients accessing the FRC are financially disadvantaged or have limited capacity to access a private FDR service. The number of clients represented as a percentage of total clients seen at the three FRCs. CCVT-CMS data. | 41.4.% partially met | Assessment data demonstrates further increases in financial stress for parents not eligible for a health care card due to interest rate rises and increasing costs of food, utilities, and petrol. This also translated to increase in referrals to emergency relief/financial counselling services *Refer DEX data Appendix 2 |
| Effectiveness of Programs | Collect and record client outcomes using SCORE. | Annual | Assess changes in Circumstances, Goals, and record client Satisfaction – DEX data will show 50% of clients will be assessed with changed outcomes >10% of clients will be assessed for Satisfaction. | 100% completed for this period | SCORE data demonstrates 60.8% recorded positive change in circumstances, and 80% recorded positive change in goals, and 89.5% recorded positive satisfaction with service. *Refer DEX data Appendix 3 |
| Effectiveness of Programs via Bi- | Operation Managers from the 15 FRCs in Victoria meet regularly to share practice and resources, | 6 times per year | Attendance at meetings, shared joint activity including FRC protocol, training and networking, review of operational | Completed and Ongoing | The FRC Managers Group met bi-monthly over this period (6 times over 12 |



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| Objective | Deliverable | Time frames | Measures of success | Status | Progress Report |
|--|--|-------------|--|---------|--|
| monthly FRC Network Meeting | manage risk and quality issues, monitor, and benchmark performance and organise joint training. | | policy/practice, FRC outcome measurement, and liaison with other providers such as child protection, the Family Court, the Federal Circuit Court, and other relevant stakeholders. | | months). The majority of meetings were conducted via Zoom and FRC's continued to share practice and guidelines on remote service delivery and video conferencing. A key focus has been client issues and trends, community of practice for team leaders, Draft Family Law Amendment Bill and collaborative opportunities including annual training across the 15 FRCs. |
| Property FDR Training and Service Development | <p>All staff delivering Property FDR are fully trained.</p> <p>Ongoing training for PDR staff in will focus on advanced PDR training to ensure a competent, skilled PDR team is in place across the three FRC's.</p> <p>Provide specialist supervision.</p> <p>Develop consistent model of service delivery.</p> | Annual | Training conducted for all relevant staff, repeat training if required and for new staff. | Ongoing | <p>Newer staff completed their Property FDR training with all beginning property work in 2023 with mentoring from experienced FDRP's.</p> <p>Established Property FDR practice group meets monthly to implement consistent best practice model including processes and tools and also discuss cases and emerging client needs.</p> |



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| Objective | Deliverable | Time frames | Measures of success | Status | Progress Report |
|--------------|---|-------------|---|--|---|
| Property FDR | <p>Maintain staffing group with Property FDR skills and experience.</p> <p>Ensure new staff have Property FDR as a component of their role as defined in position descriptions</p> <p>Using a similar process to that described above for joint sessions for parenting agreements, provide joint dispute resolution sessions in property matters. Clients will be encouraged to formalise these agreements by way of consent orders obtained through the court.</p> | Annually | <p>Identified staff skilled in delivering Property FDR.</p> <p>No. of agreements.</p> <p>Type of agreements including matters resolved without plan in place.</p> | <p>100% completed for this period.</p> <p>Data for full reporting period - 93 property agreements made</p> | <p>Consolidated team of FDRP's who deliver property mediation including 3 from Ballarat, 2 from Bendigo, 1 from Shepparton and 4 from Geelong including 2 new to Property FDR.</p> <p>Well-developed service delivery model is in place in accordance with the additional funding and revised operational framework for FRCs.</p> <p>There was a marked increase in requests for Property FDR including requests that Property FDR be conducted prior to parenting matters. There were 228 service files active in the reporting period, which is an increase of 85 on the last reporting period, with 2,483 service events and 159 joint FDR sessions conducted (an increase of 100).</p> <p>There were 93 property agreements made.</p> |



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| Objective | Deliverable | Time frames | Measures of success | Status | Progress Report |
|--|---|-------------|--|--------------------------------|--|
| | | | | | |
| Eligibility Requirements for Property FDR | Provide some guidance for the allocation of Property FDR based on need, vulnerability and in accordance with the updated FRC Charter. | 2020-2026 | Property FDR provided to priority populations. DEX data analysed to monitor and improve practice. | 100% completed for this period | As per the revised operational framework for FRCs, all three FRC's provide Property FDR with a current subsidised fee structure ensuring that clients with less financial capacity can access a property/financial FDR service. Data from case files demonstrates 44 clients accessing Property FDR held a health care card. CCV has demonstrated via data capacity the provision of Property FDR to targeted client groups including 9 Aboriginal and Torres Strait Islander clients, 14 Culturally and Linguistically diverse clients and 22 clients who identified as having a disability. |



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Risk Management (please note any predicted risks & related mitigation strategies)

| Risk | How the Risk will be Managed | Report |
|--|---|--|
| <p><u>Critical Incidents</u></p> <p>A Critical Incident is any manageable or preventable event that happens involving an FRC client that significantly impacts them or:</p> <ul style="list-style-type: none"> • has the potential to jeopardise the achievement of individual and program outcomes; or • has the potential to jeopardise the reputation of FRC programs and/or the Australian Government. <p>A Critical Incident may include, but is not limited to, any of the following:</p> <ul style="list-style-type: none"> • serious injury or death of a client; • allegation or report of criminal activity, incarceration, violent behaviour, hospitalisation, neglect or abuse of children by a client; • inappropriate behaviour by the Grantee's personnel towards a client. | <p>As per Part B of the Grant Agreement, for all Critical Incidents, the Grantee must record and notify the Commonwealth representative via email within 48 hours of the event (or knowledge of the event).</p> <p>CCVT member agencies all have in place:</p> <ul style="list-style-type: none"> • Codes of Conduct/Ethics to ensure that staff are aware of their performance obligations in supporting clients safely and delivering high quality services • A regime of policies, procedures, and practice instructions to support • Continuous staff skill and knowledge development activities • The use of validated and other well-regarded client needs assessment and care planning tools • A risk identification and mitigation system which includes the identifying of risks to clients and the development of strategies to mitigate such risks • A system for identifying, responding to, managing, and reporting critical incidents • A regime of staff supervision, which provides both line management and clinical review. This ensures that understanding client need is shared and continuously examined • Mechanisms for supporting continuous diversity improvement including working groups, training, dissemination of relevant support materials. | <p>CCVT member agencies have risk, compliance, quality management systems, policies, procedures, and dedicated resources in place. All such systems are regularly reviewed for currency and encompass Board oversight mechanisms.</p> <p>Risk management systems employed by CCVT member agencies encompass identification, mitigation and reporting and treatment mechanisms. They are supported by frameworks, policies and procedures which are aligned with <i>ISO 31000 – Risk Management</i>. (ISO 31000 – Risk Management is an international standard that provides principles, a framework and a process for managing risk).</p> <p>In addition, CCVT member agencies hold registrations and accreditations with a range of external regulatory and quality frameworks including:</p> <ul style="list-style-type: none"> • ISO 9001:2015 Quality Management (All CCVT member agencies) • ISO 27001 Information Security Management System (Cybersecurity) (CatholicCare Victoria) • Victorian Human Services Standards (CatholicCare Victoria), CatholicCare Victoria is currently undertaking a migration process from the VHSS to the new regulatory environment for Victorian agencies due to commence in July 2024. • National Standards for Mental Health Services (CatholicCare Victoria) • Accreditation with the Australian Childhood Foundation's Safeguarding Children Program (CatholicCare Tasmania) |



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| Risk | How the Risk will be Managed | Report |
|----------------------------------|--|--|
| | | <ul style="list-style-type: none"> • Registered Community Service Organisation (CSO) under the Children Youth and Families Act (2009), Division 3 (CatholicCare Victoria) <p>Further, CCVT member agencies actively work to comply with legislation, regulations and external best practice including:</p> <ul style="list-style-type: none"> • DHHS TAS Safety and Quality Standards (CatholicCare Tasmania) • National and State Standards for Child Safe Organisations and relevant child safety standards (All CCVT member agencies) • Catholic Professional Standards Limited (CPSL) (All CCVT member agencies) <p>CCVT member agencies have systems to identify and support clients who may be at risk e.g., suicide risk, family violence, etc. Should incidents occur they are reported to relevant authorities including police and are documented internally and managed with clear case planning and intervention. Themes from such risks and incidents are thematically reviewed and reported (via management and governance structures) internally and responded to with a continuous improvement lens.</p> <p>Induction, orientation, supervision and training processes and ongoing staff training incorporate risk mitigation information, expectations and required outcomes.</p> |
| <u>Organisational Governance</u> | As per Part B of the Grant Agreement, the Grantee must notify the Commonwealth representative via email of all significant changes to governance arrangements within two weeks of the event (or knowledge of the event). | CCVT has a Practice Framework to guide service delivery across all programs. There are three pillars - the client experience, governance, and quality practice. |



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| Risk | How the Risk will be Managed | Report |
|--|--|---|
| <p>Significant changes to governance arrangements may include, but are not limited to:</p> <ul style="list-style-type: none"> any changes to the Grantee's senior management, changes to members of the Board, and/or changes to the Grantee's representative (the Activity Primary Contact); and any investigation, litigation or prosecution of the Grantee's staff or members of the Board. | <p>CCVT's Family Relationship Centres are already under the CCVT Governance structure of the CCVT Board.</p> <p>The CCVT Board sets the strategic direction of CCVT, approves CCVT's annual budget and delegated authorities, monitors the implementation and performance of the risk management system, monitors organisation performance, sets the expectations and is responsible for organisational culture.</p> <p>The Board has oversight of the FRC program through fortnightly and monthly CCVT Operations Meetings, board reports, and executive portfolio reports of the Chief Financial Officer and Quality and Risk Manager to the Board's Risk Audit and Finance Committee.</p> <p>The Company Secretary has oversight of CCVT's financial system, which is externally audited annually in accordance with Australian Accounting Standards. CCVT finance will work with operational managers to ensure that the FRC Service Activity is delivered within budget and meets the service deliverables of the grant agreement. CCVT has an established risk management system covering both strategic and operational risk and integrated financial management.</p> | <p>CCVT has demonstrated structures and capability to monitor performance and accountability.</p> <p>The CCVT Operations Group has scheduled meetings and provides reports to the Governance group with the assistance of the CCVT Contract Manager. The CCVT Operations Group and CCVT Board meet to review progress and performance and set the strategic direction for the next 12-month period, including projects and service innovation.</p> <p>In 2022/2023 a major focus was returning staff to office bases and increasing the provision of face-to-face service delivery. There was also a review of the learnings from remote service delivery with key aspects of this modality to be a feature moving forward. This has increased not only service options for clients however collaboration and support across teams given the geographical distance of the FRC's from one another.</p> <p>Across CCVT there has been further enhancement to data and CMS capability with incremental improvements in data governance and data integrity.</p> <p>Over the last 12 months CCVT has implemented processes designed to protect client privacy by creating greater separation between CCV and CCT's client information. This has resulted in changes to reporting capability where CCVT data has previously been presented in an amalgamated format, whereas for this report the data is displayed separately.</p> <p>CCVT has reviewed data quality processes to ensure accuracy and improved completion rates of the information reported to DEX. There is a current review of the protocols for sending information to DEX to ensure they're more closely aligned with</p> |



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| Risk | How the Risk will be Managed | Report |
|---|---|---|
| | | the DEX Appendix B protocols. It is anticipated that this may alter how the data is sent for the next reporting period and subsequent reporting in next years' AWP. |
| <u>Breach of Client Confidentiality</u> | <p>Adherence to all obligations outlined under the Privacy Act 1988 and wider privacy provisions in all relevant laws and grant program guidelines.</p> <ul style="list-style-type: none"> • Privacy impact assessment survey reviewed annually. • Data Breach Response Plan and reported incidents reviewed monthly. <p>Induction training for all staff and volunteers covering code of conduct and obligations under the Privacy Act.</p> <p>Staff and volunteers to participate in ongoing privacy/security awareness training.</p> <p>Agency to establish and adhere to client consent protocols, and complaints management and escalation procedures.</p> <p>CCVT has in place standardized approaches to ensuring the protection of client confidentiality and privacy of information including:</p> <ul style="list-style-type: none"> • Codes of conduct/ethics and privacy agreements which all staff are required to uphold. • Staff induction and ongoing development activities which ensure currency of relevant knowledge. | <p>Data Breach Response Plan and reported incidents reviewed monthly by Quality Improvement Manager at each of the organisations. CCVT Data breach log - monthly review of any breaches of privacy including minor breaches. There were no reportable breaches requiring external notification in the reporting period.</p> <p>All new staff have been inducted with information relating to the Privacy Act and code of conduct.</p> <p>Online compliance training delivered in Cyber safety and security.</p> <p>Client management system consent process documented and provided to all clients.</p> <p>CCVT has clearly documented complaints management processes.</p> |



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| Risk | How the Risk will be Managed | Report |
|-------------------------------------|---|---|
| | <ul style="list-style-type: none"> • Client consent processes that uphold obligations outlined in the Privacy Act 1988. • Electronic client record management systems which are password protected and only available to authorized officers. • Client complaint management processes and escalation procedures. • A data/privacy breach response management plan, which outlines immediate and long-term containment requirements, affected parties' notification obligations, reporting mechanisms and continuous improvement strategies. | |
| <p><u>Potential Client Harm</u></p> | <p>Identify and disseminate good practice in harm assessment and management and establish and/or review existing harm prevention protocols and guidelines.</p> <p>Ensure staff have access to harm prevention training and professional development opportunities to increase skills and knowledge.</p> <p>Identify good practice leaders and facilitate their role in influencing the agency's harm prevention management and culture.</p> <p>Implement and use incident monitoring and management systems for monitoring instances of harm and ensure effective referral pathways to relevant mental health services.</p> | <p>Systems in place and utilised by staff and Managers/Supervisors include practice instructions, policies and procedures, Code of Conduct, client at risk form and incident management form and procedures. CatholicCare Victoria now has an established and consistent risk reporting process for both client and employee risk and incidents with one electronic form in use for all programs.</p> <p>Increasing numbers of staff are now trained in MARAM and suicide risk and identification training with a particular focus on the Information Referral Officer role. Regular engagement has occurred with local service providers in specialised areas such as family violence, mental health and alcohol and other drugs.</p> <p>Client file audits conducted with checks in risk screening, assessment documentation and case planning.</p> |



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| Risk | How the Risk will be Managed | Report |
|------|---|---|
| | <p>CCVT employs best practice service delivery principles and approaches to guide the work of staff including:</p> <ul style="list-style-type: none"> • Codes of conduct/ethics • A regime of policies, procedures, and practice instructions • Risk identification and mitigation systems • Validated and other well-regarded client need assessment and care planning tools • Established referral pathways • Electronic client record management systems to ensure current and accurate information is available with authorised access • Continuous staff skill and knowledge development activities • Client risk identification and incident monitoring and management systems • Internal electronic information sharing systems such as SharePoint and intranets to disseminate good practice materials • A regime of staff supervision, which provides both line management and clinical review. This ensures that understanding client need is shared and continuously examined. | <p>Recruitment - screening of applicants for all positions include adhering to standards relating to qualifications, professional experience, police and working with children's checks.</p> <p>Induction and orientation processes include code of conduct, privacy and confidentiality and child safe standards.</p> <p>Over this reporting period consideration given to:</p> <ul style="list-style-type: none"> • Ongoing need for flexible working arrangements that ensure staff are able to continue service to clients. • Staff returning to the workplace transition documents, • Update and review of video conferencing platforms including video conferencing training and practice rules for staff, • Shared resources for Family Relationship Centre program staff across Victoria on SharePoint. |



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| Risk | How the Risk will be Managed | Report |
|---|--|---|
| <p><u>Child Safe Legislation and Requirements</u></p> | <p>CCVT is committed to child safety and continues to work both systematically and practically to empower and protect children and achieve compliance with the Child Safe Standards. Addressing and effectively responding to the continually developing child safe environment requirements and best practice opportunities, including achieving compliance with the standards, remains an active work in progress.</p> | <p>Each CCVT member agency has documented child safety standards and evidence to demonstrate adherence to these standards through culture, policy, screening, supervision, training, and strategies to remove risk and promote child participation.</p> <p>CCV is nearing completion of a significant project to ensure full compliance with the Victorian Child Safe Standards and the alignment of these processes with other state and Commonwealth Child Safety Commitments. The work has included a comprehensive risk assessment of all areas of service delivery review of key documentation and a revision of incident reporting and investigation processes. In addition, a working party is producing a set of material aimed at empowering and informing children about consensual participation in counselling processes.</p> |
| <p><u>Indexation</u></p> | <p>The shortfall from the Equal Remuneration Order (ERO) that expired 30 June 30, 2021, presented itself again as an issue for this financial year 2022/23 due to salary increases. This could result in further contractions of service provision by approximately 5% into the future.</p> | <p>The increase of funding actioned by the department in April 2023, which included a measure of supplementation to account for increases to minimum wage amounts, was used to contribute to the impact of the 4.6% award wage increase effective from July 2022 and other operating cost increases in the 2022/2023 financial year for the organisation. However, to fully meet cost increases, there is reduced staffing levels via natural attrition. CCVT, in partnership with the peak body, Family Relationship Services Australia (FRSA) and other member organisations, continues to lobby the Federal Government on the impact of salary increases and other operating expenses.</p> |



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Budget

| Items | Budgeted Amount | Expended Amount |
|--|--|--|
| <i>Funding 2022/23</i> | | |
| Budgets are allocated to each of the participating agencies of CCVT. Agencies then allocate across service delivery sites according to anticipated needs for the year. | | |
| CCV | \$4,954,383 | \$5,024,573 |
| CCVT Total | \$4,954,383 | \$5,024,573 |
| Carried forward 2021/22 underspend | \$46,268 | \$46,268 |
| Total including carried forward underspend | \$5,000,651 | \$5,070,841 |
| Underspend for 2022/23 - CCV | \$109,155 | \$109,155 |
| <i>Totals</i> | <i>Total budgeted amount (Should equal funding allocation)</i> | <i>Total expended amount (Should equal funding allocation)</i> |



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Further Comments:

s 22

Some examples of positive client outcomes and client feedback:

- FRC Geelong: Previous clients from 2017 where s60i was issued and clients referred to Parenting Orders Program for entrenched conflict. In 2022 returned to the FRC. First mediation provided a safe space to hear each other's proposal's which were predominately about time spent with parents. Clients referred to Child Inclusive FDR. Feedback from children – daughter wanted a voice and to say why she wanted home schooling, and for parents to stop arguing. Son wanted Dad to listen to him. Second mediation was more focused on children's specific needs e.g., schooling, parent's communication and not focused on time spent arrangements. Third mediation did not result in a lot of agreements however there was more discussion around communication and there was an agreement to visit different schools with their daughter. Fourth mediation resulted in an agreement about what school their daughter felt comfortable attending and the father did not enrol her in a different school. Agreement on transport to extracurricular activities. Parents reflected they could have handled the situation better and discussed communication strategies. They also agreed to explore high school options.
- FRC staff member in Geelong received some feedback from a very thankful client, acknowledging her skills and knowledge and the importance her role played regarding supporting the children and the co-parenting journey.

s 22

From: **s 22**
 To: **s 22**
 Cc: **s 22**
 Subject: Outcome of AGD AWP Progress Reports covering the reporting period 1 July 2021 to 30 June 2022 [SEC=OFFICIAL]
 Date: Tuesday, 4 October 2022 10:15:24 AM
 Attachments: [image001.jpg](#)

Dear **s 22**

Thank you for submitting your AWP Progress reports covering the reporting period 1 July 2021 to 30 June 2022. I apologize in the delay in getting this feedback to you. No issues were identified however the below table requests some additional information regarding the AGD activities. Please note all progress reports are approved and the milestone is marked as complete. Thank you to Emily and Amie for completing the FRC, FL and POP reviews of the progress reports.

The Department is aware of the extenuating circumstances that some organisations have faced due to recent natural disasters and the COVID-19 pandemic. It's fantastic to hear that CCVT were able to achieve majority of the deliverables set out during the reporting period.

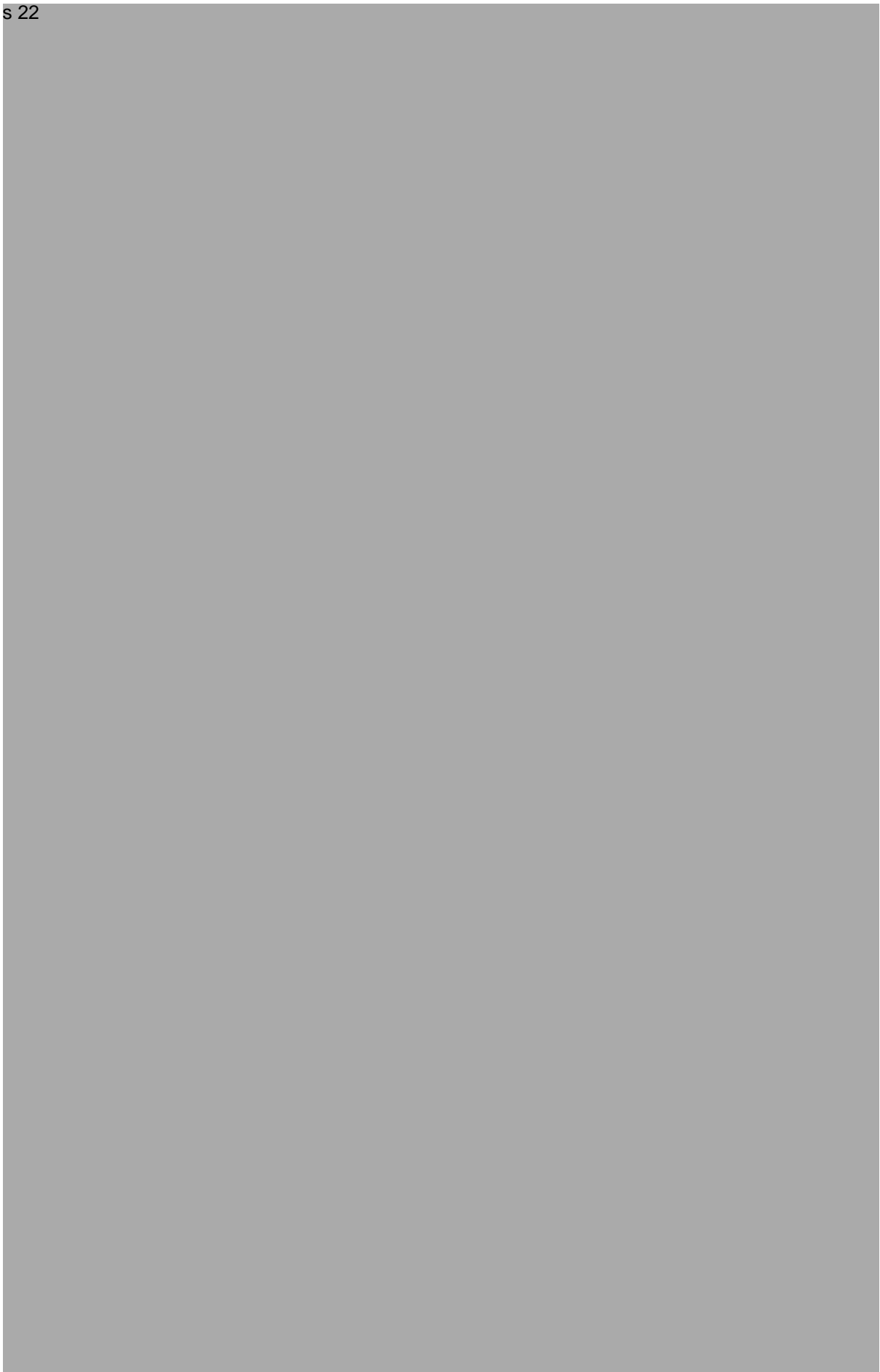
| Activity ID | Activity Name | Service Delivery |
|----------------------------------|------------------------------------|--|
| <p>s 22 4-BJR7VW4</p> | <p>Family Relationship Centres</p> | <p>Quality service provision</p> <ul style="list-style-type: none"> • CCVT have adapted and use a range of modalities for providing services and have systems and processes in place to transfer cases across outlets when demand is high. • It's fantastic to hear that staff attend regular training and professional development. The training topics undertaken have been very extensive. I note the resourcefulness in utilising specialised practitioners across outlets. <p>Provision of information for families</p> <ul style="list-style-type: none"> • I noticed that educational resources and information is mainly provided to clients electronically. Are these digital versions of the hard copy materials in the each FRC? <p>Child focused information sessions</p> <ul style="list-style-type: none"> • It's great that you've been able to work around COVID-19 obstacles by offering these information sessions using social media and online resources. Were you able to provide the YouTube links to these videos? While you have included the number of views for these resources did you happen to capture or evaluate how many of your clients attended the sessions in line with the 70% target? <p>Client service delivery principles</p> <ul style="list-style-type: none"> • I note the ongoing development and commitment to improving service deliver, child empowerment, diversity and inclusion reflected in the frameworks, committees and working groups at CCVT. <p>Targeted Client Groups</p> <ul style="list-style-type: none"> • I noticed that you are not yet asking clients to identify as LGBTQI+. Are there plans to do this/is there a reason you haven't been asking this? • You've mentioned that you are planning to have the cultural liaison worker also consult with the Geelong and s 22 FRC's. Will this consultation be done online? • It's great to hear that the number of clients assisted has increased as COVID restrictions have eased and staff were flexible to assist other outlets where demand was high. • This was mentioned in your DEX assessment, but thank you and the teams work in collecting SCORE data. <p>Property FDR</p> <ul style="list-style-type: none"> • I note that all FRC's have staffing and resourcing for property FDR and new staff offered advanced property FDR training. Further to this, there's been an increase in the number of these services being accessed. <p>Budget</p> <ul style="list-style-type: none"> • I note the underspend of \$46,267 as a result of staffing changes. This will be addressed as part of the acquittal process. • Going forward we require a more itemised break down of the amount spend on broad categories of service delivery (staffing, training, program delivery, travel, |

property, vehicle costs etc).

s 22



s 22



Thank you for your offer to provide information from your dataset. It is always appreciated hearing from CCVT about what trends

and issues are emerging on the ground and we look forward to meeting with you and discussing your insights .

Thanks again to you and team for your work in completing all the reporting requirements over the past couple of months.

Kind regards,

s 22

s 22

Team Leader, Family Law and Safety
Delivery, Network Operations Victoria State Office
Community Grants Hub

P: s 22 | E: s 22 @dss.gov.au

The Department of Social Services acknowledges the traditional owners of country throughout Australia, and their continuing connection to land, water and community. We pay our respects to them and their cultures, and to Elders both past and present.





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CatholicCare Victoria Tasmania

Dear Funding Recipient

Acquittal of Family Relationship Centres funding for the period 2021-2022

Thank you for submitting your Family Relationship Centres Financial Declaration for the 2021-2022 financial year.

A reconciliation of your documentation has been completed, and it has been determined that your organisation has fully expended the funds for the above activity. Please see **Tables 1 and 2** for further details.

Although funds have been acquitted as outlined in the tables below, the Department reserves the right to seek the return of those funds or pursue other remedies if future investigation reveals that the funds were not used in accordance with your grant agreement.

Yours sincerely

Financial Assurance Centre of Expertise
Community Grants Hub

31 October 2022



Please note that all amounts in following tables are ***GST Exclusive***:

Table 1 – Base Funding

| Program Schedule ID | Activity ID | Activity Program Name | (A) | (B) | (C) | (D) |
|---------------------|-------------|-----------------------------|-----------------------------------|---|--|--------------------|
| | | | 2021-2022 Funding to be acquitted | Approved carried-forward from 2020-2021 | Total Amount reported as expended in 2021-2022 | Unexpended funding |
| 4-BJIKOGZ | 4-BJR7VW4 | Family Relationship Centres | \$1,458,192.46 | \$0.00 | \$1,458,192.46 | \$0.00 |

Table 2 – Social and Community Services (SACS) Funding - *if applicable*

| Program Schedule ID | Activity ID | Activity Program Name | (A) | (B) | (C) | (D) |
|---------------------|-------------|-----------------------------|-----------------------------------|---|--|--------------------|
| | | | 2021-2022 Funding to be acquitted | Approved carried-forward from 2020-2021 | Total Amount reported as expended in 2021-2022 | Unexpended funding |
| 4-BJIKOGZ | 4-BJR7VW4 | Family Relationship Centres | \$0.00 | \$0.00 | \$0.00 | \$0.00 |

From: s 22
To: s 22
Cc:
Subject: Outcome of Data Exchange (DEX) Assessment for reporting period 1 January to 30 June 2022 - Attorney General Activities [SEC=OFFICIAL]
Date: Thursday, 1 September 2022 1:50:29 PM
Attachments: [image001.jpg](#)

Hi s 22,

Thank you for submitting CatholicCare Victoria Tasmania's DEX data covering the reporting period 1 January to 30 June 2022. Please find the review, feedback and questions below for the following AGD Activities:

- *Family Relationship Centres* – s 22 and Geelong
- s 22
- s 22
- s 22
- s 22

A review of the activities identified that your DEX data aligns with the milestone requirements, and they have now been formally marked as **Complete** in the Grant Recipient Portal. Thank you to s 22 (FRC & FL Counselling FAM) and s 22 (POP FAM) who completed the review for these activities.

On behalf of the Community Grants Hub, please thank your team for their ongoing support and role in helping vulnerable Australians across your diverse range of funded services areas. Overall, it's been another extraordinary six months with the post-covid operational and staffing challenges as well as some of the technological benefits such as telehealth.

As discussed on the phone this week, we will be in touch to organise a face-to-face catch up mid-end of September.

Kind regards

s 22

| Activity ID | Activity Name | Data Quality | Service Delivery | Partnership Approach |
|-------------|---------------|--------------|------------------|----------------------|
| s 22 | | | | |

s 22

| | | | | |
|------------------|---|--|--|---|
| <p>4-BJR7VW4</p> | <p><i>Family Relationship Centres - Geelong</i></p> | <p>Thank you for again having such a high standard of data quality with:</p> <ul style="list-style-type: none"> • 100% Valid SLKs • 95.3% Complete demographic data (ex. Gender) • 0% DOB over 110 <p><i>Demographic data</i></p> <ul style="list-style-type: none"> • 0.8% of clients are classified as CALD • 1% Identify as ATSI • 4.1% are classified as PWD | <p>3,862 sessions were recorded for the reporting period which is a 27.6% increase from the previous reporting period (3,026).</p> <p>There has been only a minor decrease in the number of clients (6.5% decrease) which indicates that average number of sessions per client have increased (7.6 sessions up from 3.8 in the previous reporting period). In the August meeting you indicated that there had been successful recruitment in Geelong and some cases had been transferred to this outlet.</p> <p>Similar to the other FRC activities, dispute resolution makes up only a small portion of the services delivered to clients at 4.9%.</p> <p>The majority of service delivery is information/advice/referral with 82.3% sessions or 3,180.</p> | <p>CCTV have assessed 448 individual clients for SCORE which is fantastic (72.8%). This is broken down to:</p> <ul style="list-style-type: none"> • 72.8% Indiv Clients with Circumstances SCOREs • 72.8% Indiv Clients with Goals SCOREs • 42.6% Indiv Clients with Satisfaction SCOREs <p>The rate of satisfaction SCORE is high but all have been assessed by a practitioner (262 clients).</p> |
|------------------|---|--|--|---|

s 22

s 22

s 22



Regards,

s 22

Team Leader, Family Law and Safety
Delivery, Network Operations Victoria State Office
Community Grants Hub

P: s 22 | E: s 22 @dss.gov.au

The Department of Social Services acknowledges the traditional owners of country throughout Australia, and their continuing connection to land, water and community. We pay our respects to them and their cultures, and to Elders both past and present.



From: s 22
To: s 22 @ccam.org.au
Subject: Outcome of Data Exchange (DEX) Assessment for reporting period 1 July to 31 December 2021 - CatholicCare Victoria Tasmania [SEC=OFFICIAL]
Date: Wednesday, 16 March 2022 10:50:12 AM
Attachments: [image001.png](#)
[Outcome of Data Exchange \(DEX\) Assessment - ly to 31 December 2021. \(4-BJR7W4X, 4-BJR7W0D, 4-BJR1VLU, 4-BJR7VW4, 4-BJR1VD6\).EML](#)
s 22

Dear s 22

Currently I am the lead Funding Arrangement Manager for CatholicCare Victoria Tasmania activities until further notice.

Thank you for submitting your DEX data covering the reporting period 1 January to 30 June 2021. A review of the activity below identified that your DEX data aligns with the requirements specified in the funding agreement, and this milestone has been marked as complete.

s 22

You have already received the Outcome of DEX Assessments for some of your activities (attached). I have further attached Outcome of DEX Assessment for activities that were sent to the state/local contact (see highlighted in purple).

Outcome of Data Exchange (DEX) Assessment for other activities has been attached as per the below list:

1. s 22 4-BJR7VW4, s 22

s 22

s 22

You will be contacted in coming days to discuss these results and to see how your organisation is tracking for the current period (Jan to Jun 2022).

If you require any further information or assistance please do not hesitate to contact me.

Kind regards,

s 22

s 22

Funding Arrangement Manager
Community Grants Hub
West Performance Team

Delivery - Network Operations - Victoria State Office
Department of Social Services

P: s 22 | E: s 22 @dss.gov.au

The Department of Social Services acknowledges the traditional owners of country throughout Australia, and their continuing connection to land, sea and community. We pay our respects to them and their cultures, and to elders both past and present.

CGH_Signature_2



From: s 22
To: s 22 @ccam.org.au
Subject: CATHOLIC CARE VICTORIA TASMANIA - Outcome of Data Exchange (DEX) Assessment for reporting period 1 July to 31 December 2021. [SEC=OFFICIAL]
Date: Friday, 4 March 2022 9:14:43 AM

Dear s 22,

Thank you for submitting your DEX data covering the reporting period 1 July to 31 December 2021. A review of the activity/activities below identified the following issues and discussion points.

The Department is aware of the extenuating circumstances that some organisations have faced due to recent natural disasters and the COVID-19 pandemic.

| Activity ID | Activity Name | Data Quality and Protocols | Service Delivery |
|-------------------|-----------------------------|---|---|
| s 22 | | | |
| s 22 4-BJR7VW4 | Family Relationship Centres | SCORE data submitted as required Nil unidentified clients. Valid SLK data 99.7% Demographic Data 94.2% | 6059 sessions reported 1439 clients assisted Clients assisted via telephone/video/online (40%) In person (13.5%) Not recorded delivery method (45.8%) No session gaps. <u>Would like to discuss</u> Improved recording of delivery method. |

s 22



Thank you also for submitting outcomes data. I look forward to chatting about the data.

I will contact you in March to discuss the data and to see how your organisation is tracking for the current period (January to June 2022).

If you require any further information or assistance, please do not hesitate to contact me.

Kind regards,

s 22



Team Leader / Funding Arrangements Manager
Community Grants Hub
Delivery – Network Operations
Victoria State Office
Department of Social Services

P: s 22 **E:** s 22 [@dss.gov.au](mailto:s 22@dss.gov.au)

The Department of Social Services acknowledges the traditional owners of country throughout Australia, and their continuing connection to land, water and community. We pay our respects to them and their cultures, and to Elders both past and present.

From: § 22
To: § 22 @catholiccarevic.org.au
Cc: § 22
Subject: FW: Outcome of Data Exchange (DEX) Assessment for reporting period 1 July to 31 December 2022 - Attorney General Activities [SEC=OFFICIAL]
Date: Monday, 27 March 2023 8:31:48 AM
Attachments: [image002.png](#)

Hi § 22

Thank you for submitting CatholicCare Victoria Tasmania's DEX data covering the reporting period 1 July to 31 December 2022. Please find the review, feedback and questions below for the following AGD Activities:

- Family Relationship Centres – § 22 Geelong
- § 22
-
-
-

A review of the activities identified that your DEX data aligns with the milestone requirements, and they have now been formally marked as Complete in the Grant Recipient Portal. Thank you to § 22 (FRC & FL Counselling FAM) and § 22 (POP FAM) who completed the review for these activities.

On behalf of the Community Grants Hub, please thank your team for their ongoing support and role in helping vulnerable Australians across your diverse range of funded services areas. Overall, it's been another extraordinary six months with the post-covid operational and staffing challenges as well as some of the technological benefits such a telehealth.

As discussed, we can catch up to discuss this at our arranged meeting on Wednesday 29 March at 2.30pm.

See you then

§ 22



s 22

| | | | | |
|------------------|---|--|---|---|
| <p>4-BJR7VW4</p> | <p>Family Relationship Centres <i>Geelong outlet</i></p> | <p>Good data quality results with no issues identified:</p> <ul style="list-style-type: none"> • 100% Valid SLKs • 94.4% Complete demographic data (ex. Gender) • 0% DOB over 110 | <p>No issues identified in service delivery data. Session and client figures remains consistent with the previous reporting period:</p> <ul style="list-style-type: none"> • 3,787 sessions down from 3,862 in the previous reporting period (a 1.9% decrease) • 647 individual clients up from 615 in the previous reporting period (a 5.2% increase) <p>There were no session gaps during the period and sessions per month ranged from 462 (December) to 835 (August).</p> <p>Demographic data recorded:</p> <ul style="list-style-type: none"> • 1.5% CALD clients • 1.1% ATSI clients • 3.9% clients with a disability <p>Services delivered in the period include:</p> <ul style="list-style-type: none"> • Dispute resolution – 3.4% • Information/advice/referral – 80.3% • Intake/assessment – 15.6% <p>Information/advice/referral makes up the majority of services delivered and dispute resolution is 3.4% of sessions. Did you have any information around why this is the case?</p> <p>There's been a shift in service settings, with majority of attendances held face to face, compared to telephone/online/video:</p> <ul style="list-style-type: none"> • Organisation outlet/office – 2,876 attendances • Telephone – 1,694 attendances • Video – 166 attendances • Online service – 59 attendances | <p>SCORE assessments recorded:</p> <ul style="list-style-type: none"> • 72.0% Indiv Clients with a Client SCORE (any domain) • 71.4% Indiv Clients with Circumstances SCOREs • 72.0% Indiv Clients with Goals SCOREs • 38.2% Indiv Clients with Satisfaction SCOREs <p>All satisfaction SCORE (247) was assessed by a practitioner. As mentioned above it is preferred that this data is assessed by the client to avoid bias.</p> <p>There were 8 instances of an initial SCORE of 1 and subsequent SCORE of 5 recorded within 6 months.</p> |
|------------------|---|--|---|---|

s 22

s 22



Kind Regards

s 22

Team Leader, Family Law and Safety

Delivery, Network Operations Victoria State Office

Community Grants Hub

communitygrants.gov.au

P. s 22 E E. s 22 [@dss.gov.au](mailto:s22@dss.gov.au)



From: s 22
To: [REDACTED]
Cc: [REDACTED]
Subject: CatholicCare Victoria Tasmania - Family Law Counselling and Family Relationship Centres - Outcome of Data Exchange Assessment for reporting period 1 January to 30 June 2023 [SEC=OFFICIAL]
Date: Monday, 11 September 2023 8:57:14 AM
Attachments: [image001.png](#)

Dear s 22

Thank you for submitting your DEX data covering the reporting period 1 January to 30 June 2023. A review of the FRC and s 22 services activities below identified the following results.

s 22



s 22



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|----------------------|---|------|
| Activity ID | 4-BJR7VW4 | s 22 |
| Activity Name | Family Relationship Centres (Geelong) | |
| Data Quality | <ul style="list-style-type: none"> • 99.7% valid SLKs • 0.0% DOB over 110 • 91.9% complete demographic data (ex. | |

| | | |
|-------------------------|---|------|
| | <p>gender)</p> <p>Data quality is to a high standard.</p> <p>Note from June there appears to be two Geelong outlets on DEX. We understand that this is part of the new data system at CCVT to separate Victorian and Tasmanian data.</p> | s 22 |
| Service Delivery | <ul style="list-style-type: none"> • 2,978 individual client sessions which is a 21.4% decrease in sessions since the previous reporting period (3,787 sessions) • 645 individual clients compared to 647 in the previous reporting period (0.3% decrease). <p>The number of clients at the Geelong FRC has remained consistent with the previous reporting period, however the number of client sessions has dropped by 21.4%. Did you have any information as to why this is the case?</p> <p>Service types recorded in the period are:</p> <ul style="list-style-type: none"> • Advocacy/Support – 0.5%, 14 sessions • Dispute resolution – 4.5%, 133 sessions • Information/advice/referral – 69.8%, 2,079 sessions • Intake/assessment – 24.3%, 725 sessions • Property mediation – 1.0%, 29 sessions <p>Information/advice/referral makes up the majority of sessions recorded. In previous meetings we have discussed how the complexity of cases has increased these sessions resulting in an increase in sessions not necessarily resulting in the client undertaking dispute resolution.</p> | |

Was there any other information you were wanting to add to data?

- **2.9% CALD clients**
- **1.2% Aboriginal or Torres Strait Islander clients**
- 4.0% of clients have a disability

I note the proportion of CALD clients has increased from the previous reporting period.

Attendances by service setting

- **1,889 attendances in the organisation outlet/office**
- **1,604 attendances by telephone**
- **256 attendances by video**
- **28 attendances using online services**

Interestingly compared to the other CCVT FRCs, attendances in person at the Geelong office are greater than by telephone. We spoke about the demand for face to face sessions in the Geelong FRC and how this has slightly increased wait times.

s 22

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| | | s 22 |
| <p>Partnership Approach</p> | <ul style="list-style-type: none"> • 70.5% of individual clients had a client SCORE (any domain) • 70.4% of individual clients had a Circumstances SCORE • 69.1% of individual clients had a Goals SCORE • 41.1% of individual clients had a Satisfaction SCORE assessment. <p>SCORE results are consistent with the previous reporting period. Thank you and the team for your work in completing these assessments and collecting outcome data. All Satisfaction SCORE was assessed by a practitioner. There were for 4 instances of initial SCORE of 1 and subsequent SCORE of 5.</p> | s 22 |

s 22 and I will be in contact in the next few weeks to discuss these results and for an update on the progress of these activities in the current reporting period (July to December 2023).

If you require any further information or assistance, please do not hesitate to contact me.

Kind regards

s 22

s 22

Funding Arrangement Manager

Community Grants Hub

Family Law and Women’s Safety

Victorian State Office

P: Phone s 22 | **E:** s 22 @dss.gov.au

communitygrants.gov.au

The Department of Social Services acknowledges the traditional owners of country throughout Australia, and their continuing connection to land, water and community. We pay our respects to them and their cultures, and to Elders both past and present.





Australian Government

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Grants Hub**
Improving your grant experience



CatholicCare Victoria Tasmania

Dear Funding Recipient

Acquittal of Family Relationship Centres funding for the period 2021-2022

Thank you for submitting your Family Relationship Centres Financial Declaration for the 2021-2022 financial year.

A reconciliation of your documentation has been completed, and it has been determined that your organisation has fully expended the funds for the above activity. Please see **Tables 1 and 2** for further details.

Although funds have been acquitted as outlined in the tables below, the Department reserves the right to seek the return of those funds or pursue other remedies if future investigation reveals that the funds were not used in accordance with your grant agreement.

Yours sincerely

Financial Assurance Centre of Expertise
Community Grants Hub

31 October 2022



Please note that all amounts in following tables are ***GST Exclusive***:

Table 1 – Base Funding

| Program Schedule ID | Activity ID | Activity Program Name | (A) | (B) | (C) | (D) |
|---------------------|-------------|-----------------------------|-----------------------------------|---|--|--------------------|
| | | | 2021-2022 Funding to be acquitted | Approved carried-forward from 2020-2021 | Total Amount reported as expended in 2021-2022 | Unexpended funding |
| 4-BJIKOGZ | 4-BJR7VW4 | Family Relationship Centres | \$1,458,192.46 | \$0.00 | \$1,458,192.46 | \$0.00 |

Table 2 – Social and Community Services (SACS) Funding - *if applicable*

| Program Schedule ID | Activity ID | Activity Program Name | (A) | (B) | (C) | (D) |
|---------------------|-------------|-----------------------------|-----------------------------------|---|--|--------------------|
| | | | 2021-2022 Funding to be acquitted | Approved carried-forward from 2020-2021 | Total Amount reported as expended in 2021-2022 | Unexpended funding |
| 4-BJIKOGZ | 4-BJR7VW4 | Family Relationship Centres | \$0.00 | \$0.00 | \$0.00 | \$0.00 |



CatholicCare Victoria Tasmania

Dear Grant Recipient

Acquittal of Family Relationship Centres funding for the period 2022-2023 financial year.

Thank you for sending your Family Relationship Centres Financial Declaration for the 2022-2023 financial year.

We have reviewed your documents and determined that you have fully acquitted grant funding for the above activity. Please see **Table 1** for details.

Please note that the Department reserves the right to seek the return of any funds or pursue other remedies if an investigation reveals funds were not used in accordance with your grant agreement.

If you have any questions, please email the Agency's acquittal inbox listed on the [Community Grants Hub website](#).

Yours sincerely

Financial Assurance Centre of Expertise
Community Grants Hub

30 October 2023



Please note that all amounts in following tables are ***GST Exclusive***:

Table 1 – Base Funding

| Program Schedule ID | Activity ID | Activity Program Name | (A) | (B) | (C) | (D) |
|---------------------|-------------|-----------------------------|-----------------------------------|-----------------------------------|--|--------------------|
| | | | 2022-2023 Funding to be acquitted | Approved roll over from 2021-2022 | Total amount reported as expended in 2022-2023 | Unexpended funding |
| 4-BJIKOGZ | 4-BJR7VW4 | Family Relationship Centres | \$1,527,748.24 | \$0.00 | \$1,527,748.24 | \$0.00 |



CatholicCare Victoria Tasmania

Dear Grant Recipient

Acquittal of Family Relationship Centres funding for the period 2023-2024 financial year.

Thank you for sending your Family Relationship Centres Financial Declaration for the 2023-2024 financial year.

We have reviewed your documents and determined that you have fully acquitted grant funding for the above activity. Please see **Table 1** for details.

Please note that the Department reserves the right to seek the return of any funds or pursue other remedies if an investigation reveals funds were not used in accordance with your grant agreement.

If you have any questions, please email the Agency's acquittal inbox listed on the [Community Grants Hub website](#).

Yours sincerely

Financial Assurance Centre of Expertise
Community Grants Hub

30 October 2024



Please note that all amounts in following tables are ***GST Exclusive***:

Table 1 – Base Funding

| Program Schedule ID | Activity ID | Activity Program Name | (A) | (B) | (C) | (D) |
|---------------------|-------------|-----------------------------|-----------------------------------|-----------------------------------|--|--------------------|
| | | | 2023-2024 Funding to be acquitted | Approved roll over from 2022-2023 | Total amount reported as expended in 2023-2024 | Unexpended funding |
| 4-BJIKOGZ | 4-BJR7VW4 | Family Relationship Centres | \$1,572,735.84 | \$0.00 | \$1,572,735.84 | \$0.00 |