The Victorian Government proudly acknowledges Victorian Aboriginal people as the First Peoples and Traditional Owners and custodians of the land and water on which we rely. We acknowledge and respect that Aboriginal communities are steeped in traditions and customs built on an incredibly disciplined social and cultural order. This social and cultural order has sustained up to 50,000 years of existence. We acknowledge the ongoing leadership role of the Aboriginal community in addressing and preventing family violence and join with our First Peoples to eliminate family violence from all communities.
I am pleased to share the first annual report for the Orange Door, reflecting the first year of operations of this new service model.

The Orange Door, the brand name for the Support and Safety Hubs, was a key recommendation of the Royal Commission into Family Violence. It is designed to provide a visible, and more accessible way for people to get help and support for family violence and family services.

As a key entry point into the system, The Orange Door assesses and manages risk and connects people to services including crisis responses as needed. This report is an important milestone. It is not just a presentation of service delivery data, it is an important first step in building the evidence of how new reforms are working together in practice to improve safety.

Workers in the Orange Door have more access to information than ever before, following changes to legislation, which allows information relevant to family violence risk to be shared between organisations to better identify and manage family violence risk and to promote the wellbeing and safety of children.

This ability to share information is complemented by a new systemwide practice approach that enables the most contemporary and evidence-informed practice and tools to support professionals, including recognising unique risk to children and young people.

The Orange Door provides choice for how people want to access services, including a physical location which has been designed with victim survivors, to be accessible to all Victorians and is inviting, warm and child friendly.

People can walk in, call or be referred by another agency to one of the Orange Door services currently operating in five DHHS regions of Barwon, Bayside Peninsula, Inner Gippsland, North East Melbourne Area and Mallee. There are additional access points for Orange Door services in Swan Hill and Colac.

The data in this report is for the first five Orange Door sites and will be used to inform the establishment of the remainder of the 17 sites which will be operational across Victoria by 2022.

The report specifically focuses on how people are accessing the Orange Door, how the Orange Door prioritises need and how people and families are supported. Key highlights include:

- In its first full year of operation, The Orange Door provided a response to 51,157 people, including 19,655 children, ranging from identification of key issues and safety risks to being provided with an immediate crisis response or connected to services.
- The Orange Door plays a pivotal role in connecting people to service responses, including to family violence and child and family services, perpetrator services or Aboriginal services.
- Workers in The Orange Door have greater access to critical information that strengthens risk assessment and management.

This service delivery data is able to provide us with a better understanding of the demand for different types of services in The Orange Door. This will help us to better direct efforts where they are needed. Over time, this data will assist us to build an understanding of statewide levels of demand for services for the first time. It will contribute to a system level view across The Orange Door and the broader service network that will show us how earlier intervention can prevent demand in the broader system and shows the collective impact of service responses on prevention, earlier intervention and safety. This is the beginning of a process of understanding the bigger picture, and alongside work to capture and learn from client experiences of the Orange Door, we are building the evidence to continue to increase opportunities to keep people and children safe.
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The Victorian Government has committed to implementing all 227 recommendations of the Royal Commission into Family Violence and to delivering on the vision described in Roadmap for Reform: strong families, safe children. A key recommendation of the Royal Commission, and a reform direction of the Roadmap for Reform, was to establish a network of Support and Safety Hubs, now known as The Orange Door, across Victoria. Website: www.rcfv.com.au

The Orange Door provides a new way for women, children and young people who are at risk of experiencing or have experienced family violence; and families in need of support with the care or wellbeing of children and young people to access coordinated support.

The Orange Door is a key part of the ongoing reform of the family violence and the children and families service systems. These reforms aim to strengthen responses for victim survivors of family violence and create better outcomes for children and families, while also addressing perpetrator behaviour, and improving access to interventions that support behaviour change.

The Orange Door is not the only way to access services and support. It does not replace existing specialist services providing case management, support and accommodation responses but it does enable a new streamlined entry point.

The significant work undertaken across Government and the community sector, specifically our partner agencies, to build networks of safety and to connect services has been key to the successful implementation of The Orange Door.

There has been an enormous commitment and effort by The Orange Door workforce and core partner agencies in coming together to deliver the new service model. The first year of implementation also represents a significant journey in practitioners’ uptake of new systems, tools and practice. Some of their experiences and case studies have been shared in this report.

An independent evaluation of The Orange Door was completed in 2019. The evaluation focused on the establishment and initial operations of The Orange Door in the first four Department of Health and Human Services (DHHS) areas where it has been established with the aim of identifying key learnings and opportunities for improvement.

Sharing experiences and data from the first year of service delivery

This Annual Report uses service provision data to tell the story of how The Orange Door supported people in the 2018-19 financial year.

Information and data have been primarily collected from Family Safety Victoria’s Client Relationship Management (CRM) system. The CRM system used by The Orange Door is new and evolving and is currently only able to report on some elements of service provision and how The Orange Door is supporting people. The CRM data has been supplemented by other manual data collection in 2018-19.

As data collection and reporting processes improve, a more robust data set will be available for analysis and interpretation, including a clearer picture of people’s journey through The Orange Door and access the services they need to be safe and supported.

The data is broken down by quarters: Quarter one (July – September 2018), Quarter two (October – December 2018), Quarter three (January – March 2019), and Quarter four (April – June 2019). Throughout the report these may be referred to as Q1, Q2, Q3 and Q4.
What is The Orange Door and how does it work?

The Orange Door is for adults, children and young people who are at risk of experiencing or have experienced family violence, and for families who need support with the development and wellbeing needs of children. It provides an integrated intake pathway to family violence services, services for perpetrators, Aboriginal services, and children and family services. Within The Orange Door these are known as ‘core services’.

The whole family is kept in view, with expert support tailored to each family member’s needs. The Orange Door also connects people to the broader range of services outside of the core services – such as mental health or housing support – thus enabling a network of safety and support. Practitioners support people to navigate the service system and address the spectrum of needs that might be identified. The Orange Door is designed to avoid the person having to ‘re-tell their story’ by providing a more collaborative and joined-up approach.

How The Orange Door is set up differently to support people

A partnership approach provides opportunities to strengthen coordinated and integrated service responses, where practitioners bring specialist expertise to multi-disciplinary teams and where agencies, services and organisations work together.

The Orange Door brings together services as a partnership to support women, children and families and hold perpetrators to account. The unique model of The Orange Door allows practitioners with different specialisations to learn from and with each other, drawing on each other’s knowledge and experience, and providing a more integrated assessment of risk.

The Orange Door brings together practitioners from specialist family violence services, child and family services, Aboriginal services and perpetrator services to form multi-disciplinary teams and provide wrap-around support.

The Orange Door also helps to tilt the focus towards tackling the source of the violence including a focus on perpetrator visibility, engagement and accountability.

The Orange Door has connections with the systems and networks of services in each area. These strong service connections help people who access The Orange Door to connect to the right services at the right time. The Orange Door also has a Service System Navigator in each area who works proactively to ensure strong partnerships with local services and agencies.

The Orange Door provides a visible entry point to the service system and is currently operating in the Bayside Peninsula, Barwon, Inner Gippsland, Mallee and North Eastern Melbourne areas. The Orange Door provides support to people across these catchment areas. There are safe and accessible physical premises in Frankston, Geelong, Morwell, Mildura and Heidelberg. These primary premises have been consciously set up to be inclusive spaces for diverse communities. In the future, The Orange Door will operate in all 17 DHHS areas across Victoria. More information is available on The Orange Door website: www.orangedoor.vic.gov.au

In addition to accessing the physical premises, anyone can access The Orange Door via phone, email or referral. In addition to the primary premises, The Orange Door will enhance the network of safety and support in each area through the establishment of Access Points over time. Access Points will be visibly branded and provide public access to The Orange Door.
From alternative locations, enhancing accessibility across a geographic area or for specific communities. Access points are currently operational in Colac in the Barwon Area and Swan Hill in the Mallee Area.

Who works at The Orange Door?

The Orange Door workforce reflects the intent of the service model through the establishment of multidisciplinary teams that provide an informed and coordinated service response. The composition of the workforce includes:

- **Multidisciplinary team** (employed by community service organisations): This team draws on expertise of different practitioners in a multidisciplinary team with specialists in family violence, child and family services and perpetrator services.

- **Practice leadership**: Specialist expertise is provided to the multidisciplinary team to support high quality and culturally safe service delivery through practice leadership roles such as: Team Leader, Advanced Family Violence Practice Leader, Integrated Practice Leader, Community Based Senior Child Protection Practitioner, Aboriginal Practice Leader and Practitioner.

- **Operational support**: The Orange Door teams are supported operationally by a Manager, Operational Support, Reporting Officers, Administration, Service System Navigator and Client Support staff.

During the first year of implementation FSV, together with partner agencies, peak bodies and a range of stakeholders, developed the **Workforce Strategy for The Orange Door** and the first **Annual Action Plan**. The strategy focuses on supporting staff with the unique challenges that arise from The Orange Door service delivery context. This includes consideration of how best to support staff in the context of delivering services under a new and evolving service model, integrated practice in a multi-agency environment and a matrix management structure.

Of the 278 Full Time Equivalent (FTE) positions, 90.8 per cent of positions were filled as of the 30 June 2019 (Figure 1).

**Figure 1. Composition of The Orange Door workforce**

<table>
<thead>
<tr>
<th>Category</th>
<th>FTE Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Practice Leaders covering Advanced Family Violence and Integrated Practice</td>
<td>4.9%</td>
</tr>
<tr>
<td>Community Based Child Protection Senior Practitioners and Managers</td>
<td>6.7%</td>
</tr>
<tr>
<td>Admin &amp; Support Staff</td>
<td>9.0%</td>
</tr>
<tr>
<td>Family Violence Perpetrator Practitioners</td>
<td>10.2%</td>
</tr>
<tr>
<td>Team Leaders</td>
<td>13.0%</td>
</tr>
<tr>
<td>Child and Family Practitioners</td>
<td>23.2%</td>
</tr>
<tr>
<td>Specialist Family Violence Practitioners</td>
<td>25.4%</td>
</tr>
<tr>
<td>Aboriginal Practice Leaders &amp; Practitioners</td>
<td>4.0%</td>
</tr>
<tr>
<td>Hub Managers</td>
<td>1.8%</td>
</tr>
<tr>
<td>Service System Navigators</td>
<td>1.8%</td>
</tr>
</tbody>
</table>

Source: Manual records for the 2018-19 FY as at 30 September, 2019

There is a commitment from The Orange Door workforce to develop capability in other specialisations and work in an integrated manner...

- PwC Evaluation, 2019
The strategy acknowledges that The Orange Door is one part of a continuum of service provision across multiple service sectors. It is intended to complement and build on other sector wide workforce strategies and industry development plans such as the Victorian Government’s, Building from strength: 10-Year Industry Plan for Family Violence Prevention.

Supporting and strengthening the workforce that prevents and responds to family violence is critical to the success of family violence reform in Victoria. The 10-year plan sets out a long-term vision for a workforce that is supported, valued, skilled and diverse. Website: www.vic.gov.au/building-strength-10-year-industry-plan

The Orange Door received a phone call from a private psychologist who was working with Alice* and her four children, all under the age of seven. The referring psychologist said Alice had shared information that suggested she may have experienced family violence. The psychologist then supported Alice to visit the Orange Door premises, accompanied by her mother and one of her children. The family violence practitioner at The Orange Door completed a risk assessment with Alice who disclosed she was experiencing abuse from the father of her children, Rob. The child wellbeing practitioner completed a best interests assessment of the children, consulting with the children’s school, and identified behavioural and developmental concerns. The men’s practitioner completed a risk assessment with Rob, and connected him with emergency accommodation so that he did not need to return home, and legal aid. Alice was supported to access brokerage funding to change the locks in her home and assisted to apply for a family violence intervention order at the Magistrates court. Alice and her children were also referred to intensive case management and family violence counselling.

*Not her real name
2 How accessible and visible is The Orange Door?

The Orange door aims to be accessible, safe and welcoming to people, providing quick and simple access to support. The Orange Door brings together referral points for victims and perpetrators of family violence and children and families needing support. It plays a unique role in coordinating streamlined service provision for individuals and families within the broader service system.

Access to The Orange Door

How are people accessing The Orange Door for assistance?

In the 2018-19 financial year, The Orange Door received 41,291 referrals. A referral can either be for an individual or a group such as a family. Figure 2 shows the number of referrals received for each quarter, and the different access pathways into The Orange Door.

In many instances, families are referred into The Orange Door. Practitioners consider the needs of each individual family member separately. As such, the number of individuals The Orange Door works with is greater than the number of referrals received. A total of 51,157 people were provided a response from The Orange Door ranging from identification of key issues and safety risks to being provided with an immediate crisis response or connected to services.

Individuals and families who need support from The Orange Door can make a ‘self-referral’, meaning that they make direct contact themselves. Alternatively, referrals of individuals and families can be made by a range of professionals or members of the community. Referrals are made to The Orange Door where someone is at risk of experiencing or has experienced family violence, or when there is concern about a child’s safety or wellbeing. Referrals can also be made for people who use violence.

Referrals that come directly from Victoria Police when there has been an incident of family violence are provided through the online ‘L17 portal’. In 2018-19, the most common way people accessed The Orange Door was through police referral reports, making up 63.8 per cent of all referrals.

![Figure 2. Access pathways into The Orange Door](image)

*Source: CRM data for the 2018-19 FY as at 6 September, 2019*

By the end of the first full year of operations (Q4, Figure 2), 16.6 per cent of all contacts with The Orange Door were from people directly seeking assistance (self-referrals) for themselves and their family.

People do not need a professional referral to access The Orange Door. The percentage of referrals in which individuals and families directly accessed The Orange Door for assistance through a self-referral steadily increased across the 2018-19 financial year (Figure 2). These self-referrals include contact via phone, email or walk-in.
How does the community presence of The Orange Door support safe and easy access?

People can contact The Orange Door in ways that are safe, accessible and convenient for them, including through primary physical community-based premises. The physical premises have been established in locations near local communities central to community service providers and public transport.

The number of times individuals or families accessed the community-based premises increased across the first year of service delivery (Figure 3). The Orange Door is designed to have a safe and accessible community presence, to reduce stigma and make it easier for people seeking help for family violence or help with the wellbeing of children and families.

In addition, people accessed the physical premises after they had made initial contact by phone or email. People also attended the premises more than once for follow up appointments.

The design of the space has been thoughtful, making it a really welcoming and flexible space.

- practitioner in The Orange Door

Connecting to the service system

How is The Orange Door connecting people to services to meet their needs?

One of the key functions of The Orange Door is to connect individuals and families to the service system. The process of connecting an individual or family to a service is done either by an ‘allocation’ into a core service - when a client is supported to access any family violence service, family service, men’s perpetrator service, or an Aboriginal service, or by a ‘referral’ to broader services - when a client is supported to access any other service outside of the core Hub functions (e.g. broader services include housing or mental health support) (Diagram 1). In 2018-19, The Orange Door connected people with core services 5,560 times and people with broader services 1,075 times (Figure 4).

Figure 3. Number of times individuals or families accessed the primary Orange Door premises at point of referral

Source: CRM data for the 2018-19 FY as at 6 September, 2019

In 2018-19, 1,523 individuals and families (13.4 per cent) came to The Orange Door premises looking for support for themselves or someone else.
The Orange Door provides a range of responses to referrals that include: allocating to core services, referring to broader services, and addressing an individual’s risks and needs within The Orange Door where it is determined that they require immediate support. The Orange Door made 6,635 allocations and referrals to core services and broader services in 2018-19. For the remaining referrals received by The Orange Door, individuals: were provided with an immediate response addressing their needs and risks; decided not to engage with the service; or could not be contacted despite multiple attempts by The Orange Door practitioners. The processes of assessing risk and providing immediate responses are described later in the report.

People have the option for The Orange Door practitioner to contact service providers on their behalf; this is known as a ‘warm referral’. The benefit of this is that, with the person’s consent, information can be shared from The Orange Door to allow a seamless connection to services.

The Orange Door also facilitated connections to Risk Assessment and Management Panels (RAMPs) for victim survivors of family violence who were experiencing serious threat, where a normal service response could not mitigate the risk. In 2018-19, The Orange Door connected 65 victim survivors to more intensive support through RAMPs, which made up 39 per cent of the total number addressed by RAMPs in the five areas where The Orange Door is operational.

The Gorman family’s story: identifying and facilitating multiple service responses and ensuring child wellbeing and safety is prioritised

The Orange Door received a referral related to the wellbeing and care of two children from the Gorman* family. There were multiple concerns in the family including substance abuse, untreated mental health issues and homelessness. The practitioner in The Orange Door engaged and linked a parent to family services (case management and support), legal counsel and the family relationships centre. A referral was also made for a child to gain medical care and obtain a mental health care plan. Following case closure at The Orange Door, the parent gave feedback to Orange Door practitioners on the confidence that they had gained via The Orange Door and the support provided through the entire process. Feedback was also provided by staff at the child’s school about the increase in the child’s engagement.

*Not the family’s real name
During the first year of implementation The Orange Door focused on building its local networks with critical services, including:
- Child Protection and Integrated Family Services
- Courts and community legal services
- Early years services
- Family violence services
- Hospitals
- Housing and homelessness
- Maternal and child health
- Men’s services (including behaviour change programs)
- Multicultural centres against family violence
- RAMPs
- Respectful relationships services
- Sexual assault services
- Victoria Police
- Women’s health services

The Service System Navigator for each Orange Door area plays an important role in establishing and maintaining these local connections, including through practice interface agreements. This work includes strengthening access and responsiveness to diverse communities.

_Nick’s story: connecting perpetrators to the right services_

A young man, Nick* was contacted by a practitioner at The Orange Door after a referral from Victoria Police. Nick had a diagnosis of ADHD, Autism and Intellectual Disability and used intimidating behaviours towards two of his family members. The Orange Door practitioner engaged Nick and talked about his intimidating behaviours and what the triggers were. With Nick’s permission, The Orange Door practitioner spoke with an agency that supports individuals applying to access NDIS. The purpose of connecting Nick to this agency was to start the process for Nick to live an independent life with support and not be solely reliant on his mother who was his primary carer. The Orange Door also referred Nick to a local counselling service to discuss day-to-day stressors and his use of violence. Nick attended four sessions on his own and then a number of sessions with his family.

*Not his real name
The Orange Door team is an integrated team of specialists from organisations delivering family violence victim and perpetrator services, child and family services, Aboriginal services and community-based Child Protection.

Diagram 1. How The Orange Door connects with the service system
Who is accessing The Orange Door for assistance?

The Orange Door is inclusive, responsive and accessible for individuals of any age, gender, ability, sex, sexuality, ethnicity, culture or religion. Upon full implementation across the 17 DHHS areas, The Orange Door will be readily available to all Victorians.

The Orange Door recognises that people can face additional barriers to getting the help they need and will ensure that everyone who needs support is able to access the right service and receive the help they need in alignment to the Everybody Matters: Inclusion and Equity Statement and The Orange Door Inclusion Action Plan.

Everybody Matters: Inclusion and Equity Statement is a ten-year commitment that supports Ending Family Violence: Victoria’s Plan for Change to build an inclusive, safe, responsive and accountable family violence system for all Victorians.

The statement includes a call for everybody to:

- Act as champions for diversity
- Challenge the current system
- Strive for change that delivers choice for all which includes workers, service organisation leaders and those with lived experience.


The Orange Door Inclusion Action Plan is a three-year plan to embed inclusion, access and equity in The Orange Door services and policies. It sets out the approach by which The Orange Door will offer supports tailored to individual needs and experiences. This includes services that are responsive to diverse community groups, recognising that diverse characteristics may impact individuals in different ways.

How many people has The Orange Door sought to support?

Individuals and families access The Orange Door for a range of reasons related to family violence and child wellbeing. Of all the referrals received in the 2018-19 financial year (41,291), over half (21,715) included at least one child on the referral. A referral can include more than one person, hence the number of people who were provided a response from The Orange Door is higher than the number of referrals received. In its first full year of operation, 51,157 people, including 19,655 children were provided a response from The Orange Door ranging from identification of key issues and safety risks to being provided with an immediate crisis response or connected to services. Individuals can seek assistance from The Orange Door multiple times.

The Orange Door recognises the agency of individuals and families in choosing to engage or not engage with the range of supports provided by The Orange Door. There are also circumstances where The Orange Door is unable to contact the individual.

Responses from The Orange Door may be provided via face to face, phone or email or a combination of these, depending on the person’s preferences and what is safe to do in the individual circumstances.

When a family is referred for family services and we suspect family violence then I involve the family violence practitioner. This didn’t always happen before The Orange Door.

- practitioner in The Orange Door
By providing a comprehensive service response to individuals, families and children, The Orange Door aims to address people’s needs and prevent them telling their story more than once.

Practitioners also collect detailed information about the specific issues that cause an individual or family to be referred or seek assistance, which informs the process of assessing risk and need so that the right response can be offered. This information is captured in the CRM, but was not ready to be reported for the first year of service delivery. Future reporting will include more information about the specific reasons people seek help.

**Figure 5. Number of times people were referred or sought support**

![Figure 5](image)

Source: CRM data for the 2018-19 FY as at 6 September, 2019

On average, 80.1 per cent of people who received a response from The Orange Door only sought or were referred for assistance once. A smaller percentage (19.9 per cent) needed assistance more than once (Figure 5).

**Figure 6. Gender for adults and children who were provided a response by The Orange Door**

![Figure 6](image)

On average, 80.1 per cent of people who received a response from The Orange Door only sought or were referred for assistance once. A smaller percentage (19.9 per cent) needed assistance more than once (Figure 5).

51.5 per cent of all adults who were provided a response from The Orange Door identified as female and 35.2 per cent identified as male. Almost equal proportions of children identified as female or male (Figure 6).

For a proportion of adults and children the gender was not recorded. This is understood to be an historical practice issue across the service system, and this will continue to be a key area for improvement.
Working with people from diverse communities

People from diverse communities are offered safe service responses through The Orange Door where their cultural and religious preferences are respected, including the option to work with a female worker if required. Interpreters are available, and clients are connected to targeted services such as settlement support or migration advice to meet their specific needs. The data relating to diverse communities has been improving over time but is not ready for reporting; this is a key focus area for development.

To support and develop workforce capability relating to working with people from diverse communities, The Orange Door workforce is required to attend induction training at the commencement of operations for each The Orange Door area. The training is focused on putting the person at the centre of The Orange Door service, and includes components on Inclusive Practice, Client Voice and Intersectionality. This training has supported building the capacity of The Orange Door workforce to respond appropriately to people from diverse communities.

Mario’s story: responding to cultural diversity

Following advice from Centrelink, Mario*, a 65 year old man attended The Orange Door to discuss safety and wellbeing concerns about his 62 year old sister. She did not speak English and had been isolated from extended family for many years because of her husband’s controlling behaviours. The Orange Door practitioners contacted the woman and used a telephone interpreter to improve Communication and ensure understanding from both sides. The woman attended The Orange Door supported by her brother. A bi-lingual specialist child and family practitioner and specialist men’s practitioner both met with the woman. The Orange Door practitioners developed a safety plan for the woman and referred her to a cultural and language appropriate specialist support service for case management within their family violence program.

* Not his real name

How is The Orange Door supporting Aboriginal self-determination?

The Orange Door works in partnership with local Aboriginal services to support Aboriginal self-determination and ensure that culturally safe responses are available for Aboriginal people. Local Aboriginal services are funded to provide Aboriginal Practice Leader and Practitioner roles in The Orange Door. These positions build relationships and partnerships with community organisations to support culturally appropriate and safe pathways and choices, including pathways to Aboriginal legal services. An Aboriginal Advisory Group is being established in each Orange Door area, with advice from local Aboriginal community controlled organisations. The Aboriginal Advisory Group membership is determined
locally and is comprised of people from the local Aboriginal community, Aboriginal organisations (both partner and non-partner Agencies to The Orange Door) and local area Aboriginal gathering places.

At the end of the 2018-19 financial year, a total of 4 per cent (11 full-time equivalent) of the positions funded for The Orange Door were Aboriginal Practice Leader and Practitioner positions.

**Kira’s story: Aboriginal practitioners creating cultural safety**

Aboriginal practitioners are an important source of knowledge for The Orange Door workforce. One non-Aboriginal practitioner had been trying to get in contact with Kira*, an Aboriginal client, but was having difficulty. The practitioner reached out to an Aboriginal colleague who messaged Kira using her preferred contact method and got an instant response. Kira was a mother and said she had been scared to respond but felt culturally safe discussing her situation with an Aboriginal practitioner.

* Not her real name

Further work is underway to develop dedicated Aboriginal Access points. The design and implementation of these will be underpinned by the **Dhelk Dja Agreement**. Dhelk Dja is the key Aboriginal-led Victorian agreement that commits the signatories to work together and be accountable for ensuring that Aboriginal people, families and communities are stronger, safer, thriving and living free from family violence.

It articulates the long-term partnership and directions required at a statewide, regional and local level to ensure that Aboriginal people, families and communities are violence free and services are built upon the foundation of Aboriginal self-determination. More information is available on the Victorian Government website: [www.vic.gov.au/dhelk-dja-partnership-aboriginal-communities-address-family-violence](http://www.vic.gov.au/dhelk-dja-partnership-aboriginal-communities-address-family-violence).

The population of Aboriginal and/or Torres Strait Islander people in the five areas where The Orange Door is currently operating ranges from 0.6 per cent (North Eastern Melbourne area) to 3.3 per cent (Mallee). In the 2018-19 financial year, a total of 3,503 people who were provided a response from The Orange Door identified as Aboriginal and/or Torres Strait Islander (7 per cent of all the people supported within The Orange Door); Mallee supported the highest number of Aboriginal and/or Torres Strait Islander people. Of those who identified as Aboriginal and/or Torres Strait Islander, 52.7 per cent were adults and 47.3 per cent were children.
Practitioners at The Orange Door are supported to do their work by changes to information sharing legislation, an improved family violence risk assessment and management framework and the Central Information Point.

The Orange Door takes a holistic approach to working with families, balancing services based on need whether that relates to family violence or safety and support of children. In the process of supporting a family, children are treated as individuals in their own right.

We share information across the team to quickly understand what is happening for the whole family. Previously it took a long time and huge effort to gather information from different agencies partly because we were uncertain if we could share information.

- practitioner in The Orange Door

The purpose of assessment and planning is to assess the key risks and needs of each individual and to identify their goals and preferences in the context of their family and community to determine the type, priority and urgency of the response. The Orange Door recognises the agency of individuals and families. In some cases, people choose not to engage with The Orange Door, or cannot be contacted, including for risk assessment purposes.

Identifying risk and need for children and families

How is risk and need being identified where there is significant concern for child wellbeing?

Within The Orange Door, practitioners undertake child wellbeing assessments where there are concerns for the safety, wellbeing or development of a child, with or without identifying family violence. There is a strong focus on working with families to develop a thorough understanding of child safety and wellbeing concerns as described in the Best Interests Case Practice Model. Community Based Senior Child Protection Practitioners support this process by providing information and advice about assessment of risk and safety.

A total of 5,373 child safety, wellbeing and needs assessments were undertaken in 2018-19.¹ There was a notable increase in assessments from the first to last quarter of 2018-19 which likely reflects improvements in recording within the CRM.

¹ The number of child safety, wellbeing and needs assessments reported in Budget Paper 3 reporting for 2018-19 was 5,374. This small variation is due to point in time data extraction within a dynamic CRM system.
Assessing risk where family violence is present

How is risk and need being assessed for victim survivors of family violence?

Practitioners within The Orange Door assess family violence risk for women and children and the level of risk posed by the perpetrator. Practitioners work across specialisations to ensure there is a multi-agency coordinated response to address identified risk and needs and develop appropriate safety planning. Practitioners in The Orange Door completed 3,456 safety plans to help keep victims of family violence safe in 2018-19.

Since implementation, The Orange Door is being supported to undertake individual risk assessments of children, to recognise them as victim survivors in their own right.

The Family Violence Multi-Agency Risk Assessment and Management (MARAM) Framework commenced in September 2018 and supports services to effectively identify, assess and manage family violence risk.

The MARAM Framework, together with the Family Violence Information Sharing Scheme and Child Information Sharing Scheme, strengthen system-wide family violence risk assessment and management, and facilitate better sharing of risk-relevant information between services to keep people safe and keep perpetrators in view.

In 2018-19 practitioners undertook 5,459 risk assessments; of these 4,481 were undertaken for adults and 978 were undertaken for children (Figure 8).2

The number of risk assessments undertaken in 2018-19 was lower than the number of people who received a response. There are a few reasons for this.

Firstly, it is likely that this count underestimates the number of risk assessments that were undertaken. During this time, practitioners in The Orange Door were transitioning to a new risk assessment tool (the Tools for Risk Assessment and Management). This was a significant practice shift that meant assessments were not consistently uploaded to the CRM correctly, which affected the data. In addition, some people who are referred to The Orange Door receive a rapid response that does not require a comprehensive risk assessment; decide not to engage; or, cannot be contacted despite multiple attempts.

As TRAM is further tested and capability is built over time, it is envisaged that the number of assessments recorded electronically will increase.

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2 The number of risk assessments reported in Budget Paper 3 reporting for 2018-19 was 5,434, including 949 for children. This small variation is due to point in time data extraction within a dynamic CRM system.
The multidisciplinary team at The Orange Door assessed a case of Sang* and her child as low risk on the basis of information provided in the Victoria Police referral form (known as an L17 form). A practitioner within The Orange Door requested a report from the Central Information Point to inform the risk assessment. The Central Information Point report revealed that the perpetrator had a history of violence. He had a family violence intervention order against him from a previous partner and a correction order. As a result of this consolidated information, the case was escalated to high risk. The Central Information Point data custodian contacted The Orange Door a few days later to advise that the perpetrator had applied to be released on bail that day. Sang was contacted to update a safety plan for herself and her child. After successfully supporting Sang and her child, The Orange Door staff reflected that before the Central Information Point was available they would have had to make multiple phone calls to multiple government agencies to gain this kind of information, which would have taken several days, thus greatly increasing the risk of violence for this family.

*Sang’s story: using the Central Information Point to understand and respond to risk of violence

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*Sang’s story: using the Central Information Point to understand and respond to risk of violence

Co-working meant I asked questions the other worker didn’t think of and the other worker asked questions I didn’t think of, so that all the safety and wellbeing needs of all the family were covered.

- practitioner in The Orange Door

Central Information Point

How is information being shared about the perpetrator to inform assessment of risk and safety responses?

The Central Information Point is a new and unique initiative that helps to keep perpetrators in view. The Central Information Point consolidates critical information from Victoria Police, Corrections Victoria, the Magistrates’ Court of Victoria, and Department of Health and Human Services Child Protection. Information from these sources about a perpetrator or alleged perpetrator of family violence is consolidated into a single report for The Orange Door practitioners to assist with family violence risk assessment and management.

In 2018-19 a total of 2,846 CIP reports were provided to practitioners in The Orange Door with a gradual increase in the number of reports over the course of the year (Figure 9).
5 What immediate support does The Orange Door provide to individuals and families?

As a key entry point into the service system, The Orange Door assesses and manages risk, develops safety plans, coordinates allocations and referrals to services outside The Orange Door, and provides crisis responses where needed.

In the first year of implementing The Orange Door, the focus was on establishing the critical functions and service networks that would enable practitioners to properly assess people’s risk, identify their needs, and connect them with the right services. Information about the risk assessments and service connections made by The Orange Door in 2018-19 has been provided earlier in the report.

brokerage funds are available to individuals and families accessing services through The Orange Door. The brokerage provides quick and flexible support early in the service delivery system. In consultation with the individual, the brokerage is prioritised based on an assessment of need, anticipated outcomes and positive impact on a person’s safety, stability and development.

Figure 10 shows the percentage of brokerage used to provide immediate support to individuals and families during the first year of implementation.

**Figure 10. Percentage brokerage spend by category**

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accommodation</td>
<td>44.0%</td>
</tr>
<tr>
<td>Safety and security</td>
<td>23.9%</td>
</tr>
<tr>
<td>Food</td>
<td>10.2%</td>
</tr>
<tr>
<td>Other</td>
<td>8.8%</td>
</tr>
<tr>
<td>Transport</td>
<td>5.3%</td>
</tr>
<tr>
<td>Education</td>
<td>2.0%</td>
</tr>
<tr>
<td>White goods</td>
<td>1.7%</td>
</tr>
<tr>
<td>Clothing</td>
<td>1.4%</td>
</tr>
<tr>
<td>Mental health</td>
<td>1.2%</td>
</tr>
<tr>
<td>Telecommunications</td>
<td>0.7%</td>
</tr>
<tr>
<td>Physical health</td>
<td>0.5%</td>
</tr>
<tr>
<td>Legal services</td>
<td>0.1%</td>
</tr>
<tr>
<td>Employment</td>
<td>0.1%</td>
</tr>
</tbody>
</table>

Source: Manual records for the 2018-19 FY

A significant amount of brokerage is provided to address the wellbeing of children (Figure 11).

Sue’s story: using brokerage funds to address immediate safety needs

Sue*, a young transgender woman, was experiencing violence from her intimate partner. She sought help from The Orange Door to leave her relationship due to safety concerns. Her partner had exhibited increasingly controlling behaviour such as withholding her hormone medication and restricting access to female clothes. Using brokerage funds, the practitioner helped Sue to enter a refuge due to the imminent threat posed by her partner and supported her to purchase clothing that better aligned with her identity. The Orange Door practitioner also contacted w/respect, a specialist LGBTQI family violence service, to identify how to best support Sue’s specific needs.

*Not her real name

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**We feel empowered to work together to support clients.**

- practitioner in The Orange Door
Brokerage may also be provided to perpetrators, to reduce the risk or enhance the safety of victim survivors and families through purchasing products or services that engage perpetrators to stabilise and link them into programs to address their use of violence. This could include offering taxi vouchers to enable perpetrators to attend behaviour change programs or supporting perpetrators into alternative accommodation so that their families can remain safely in the home.

In addition to brokerage support, The Orange Door was also able to assist people with crisis responses and short-term interventions 4,313 times.

The Orange Door practitioners provide immediate support for people in crisis. This includes responding to emotional distress or physical harm. Short-term interventions are tailored to the unique circumstances of the individual or family and are determined through triage and assessment. These interventions may include providing information and practical support to access financial, legal or housing support and helping individuals and families to understand their situation and know what to expect next.

Future service enhancements to The Orange Door will strengthen the targeted interventions provided to people needing immediate or short-term support.
The full intent and function of The Orange Door is described in The Support and Safety Hubs: Statewide Concept published in July 2017. This document describes the service components that make up the full functionality of The Orange Door, and notes that operation and delivery of The Orange Door will be scaled up incrementally over time.

This annual report has described the first year of service delivery of the foundational service model for The Orange Door in the first five sites, including: screening, intake, triage, assessment and planning, crisis response and connections to specialist family violence and child and family services and broader social services for longer term support where needed.

Establishing the foundational service model in the twelve remaining sites is a priority for Government.

To achieve the full functionality of The Orange Door as articulated in the Statewide Concept a suite of improvements to the service model will be rolled out. These enhancements focus on strengthening connections with other services most commonly needed by clients through referral pathways, including legal, housing services and financial counselling. This could occur through ‘outreach’, whereby practitioners from The Orange Door are outposted to these other services, or through ‘inreach’, whereby staff from other services deliver targeted interventions at The Orange Door.

In parallel with enhancements being made to The Orange Door service, there is ongoing improvement in our ability to record and report information about service delivery.

Over time, data collection will be strengthened, allowing for reporting on a wider range of service delivery data, including on client experience of The Orange Door.

Further enhancements to the CRM and practice guidance will also support the quality and consistency of data collection. For example, better demographic data will improve our understanding of who is accessing The Orange Door, and more precise data on allocations and referrals out of The Orange Door will provide a stronger understanding of people’s journey through the service system.

As The Orange Door CRM and data collection processes mature, reporting will include a stronger focus on outcomes for people (i.e. the impact of our services on what is achieved in people’s lives) and the system (i.e. how services are delivered) in addition to reporting on outputs (i.e. what service intervention is delivered). This information will provide a clearer picture of what is working and for whom, and will support future decision-making about service delivery and design.
The Orange Door: Annual Service Delivery Report 2018-2019

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In this document, ‘Aboriginal’ refers to both Aboriginal and Torres Strait Islander people. ‘Indigenous’ or ‘Koori/Koorie’ is retained when part of the title of a report, program or quotation.