



Client partnership strategy for The Orange Door

9 September 2019

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Aboriginal acknowledgement

The Victorian Government 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 a disciplined social and cultural order that has sustained 60,000 years of existence. We acknowledge the significant disruptions to social and cultural order and the ongoing hurt caused by colonisation.

Family Safety Victoria acknowledges the inherent strength of Aboriginal culture, recognises the wealth of experience that the Aboriginal community holds in partnering with clients and communities and is committed to promoting Aboriginal self-determination in The Orange Door.

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Terminology

Use of terminology describing family violence

Language used to describe experiences of family violence, and personal identities across communities, is complex and evolving. The language in this document will not apply to everyone and some people or professionals may identify with or use different terms. Definitions used in this document are provided in the following section.

Family violence is deeply gendered — overwhelmingly the majority of perpetrators are men and victim survivors are women and children. It is acknowledged that broader conceptions of gender apply to individuals' identities, experiences and manifestations of family violence. Therefore this document does not use gendered language to describe every form of family violence.

Definitions

Aboriginal	In this document the term Aboriginal is inclusive of all Aboriginal and Torres Strait Islander people living in Victoria.
Aboriginal self-determination	Aboriginal self-determination is the most fundamental of all rights for Aboriginal people. It means Aboriginal people and communities having true freedom, full and total control of their own safety, healing, connections to land and culture, communities, futures and lives.
Clients and people with lived experience	<p>Clients of The Orange Door are: people of all ages who are experiencing or have experienced family violence; families who need support with the care and wellbeing of their children; and people who have used violence.</p> <p>There are various terms used to refer to people who use or may use community services and many different views about what is preferred. This document uses the term 'client' or 'people with lived experience' to describe:</p> <ul style="list-style-type: none">• people who have had direct contact with The Orange Door• people with a current or previous experience of the types of services accessed through The Orange Door• people with current or previous needs that could be addressed through The Orange Door, but have not accessed services (due to barriers to access or some other reason)• the families, carers and communities of all of the above.
Co-design	The process of working together with people who use or deliver services to design and improve services.
CSO	Community Service Organisation
DPC	Department of Premier and Cabinet
DHHS	Department of Health and Human Services
FSV	Family Safety Victoria

Intersectionality	Intersectionality describes how systems and structures interact on multiple levels to oppress, create barriers and overlapping forms of discrimination, stigma and power imbalances based on characteristics such as Aboriginality, gender, sex, sexual orientation, gender identity, ethnicity, colour, nationality, refugee or asylum seeker background, migration or visa status, language, religion, ability, age, mental health, socioeconomic status, housing status, geographic location, medical record or criminal record. This compounds the risk of experiencing vulnerability and family violence and creates additional barriers for a person to access the help they need.
People who use/have used violence and perpetrators	People who currently use or have previously used family violence
The Orange Door partners	The service providers working together in partnership to deliver The Orange Door. This includes CSOs and Aboriginal services, FSV and DHHS.
Victim survivors	This term is used to describe people who have experienced family violence, including children.
VSAC	Victim Survivors' Advisory Council
Workforce	This term is used here to refer to service delivery staff, including management and leadership of The Orange Door partners.

Purpose and audience

This strategy offers a vision and roadmap to embed clients as partners in all aspects of work related to The Orange Door. It also defines client partnership in The Orange Door and provides context for this work. It builds on the commitment across the family violence and children and families reforms to recognise and be guided by the experiences of people who have experienced the family violence and/or family services systems.

This strategy proposes ways for The Orange Door to realise the vision for client partnership and the inclusion of the voice of clients set out in the DHHS *Community services quality governance framework* and *Client voice framework*. To this end, it comprises a set of initiatives which could be implemented as part of the project to design and deliver The Orange Door. Implementation planning would need to further consider the required resources, alignment with other work and priorities across the wider project.

This document is intended for use by:

- FSV leadership and project staff, to support the implementation of the enablers and initiatives outlined in the strategy
- leadership (including practice leadership) of The Orange Door partners, to align to the vision for client partnership
- other stakeholders across the service system leading related and intersecting pieces of work.

Background

What is client partnership?

Consistent with the DHHS *Community services quality governance framework*, client partnership in the context of The Orange Door is defined as systems, processes, leadership and culture where:

client engagement is actively sought and supported at all levels, from engagement in direct service provision, service design and delivery to governance and oversight.

The figure below describes client partnership from the perspective of clients. It was developed based on a review of client partnership in other service contexts, and interviews with clients.

As a client, I know I'm a partner when:

- you partner with me from the start
- I can see how what I'm contributing makes change
- I have a view of the whole process I'm being invited into (not just glimpses)
- I have a say in decision-making
- there is an exchange of skills and knowledge between us
- it feels authentic (and not like a staged promo pic)
- I feel like I'm more than my story (and others think I am too)
- you can respond to me when and where I need
- you respect me, my cultural background, and my human rights.

Effective client partnership is crucial for improving clients' experiences and outcomes, and for designing and delivering services that meet people's needs. Clients are able to identify issues and opportunities that are often invisible to service providers and have a right to influence decisions that impact them individually and collectively.

An inherent power imbalance exists in many service provider-client relationships, which can inadvertently re-traumatise people. This imbalance can be addressed by actively building authentic partnerships with clients in their own support, and throughout the design, delivery and continuous improvement of services. Many clients from diverse communities or with intersectional needs experience barriers to accessing services and are often left out of conversations about how the system could be improved.

Client partnership can help **clients** to:

- feel like things are being done with and for them (and not to them)
- heal and recover through being heard and improving the service for others
- develop their professional and advocacy skills.

Client partnership can help **services and systems** to:

- deliver a higher quality and safer service (as part of continuous improvement)
- tailor services to client needs, preferences and values
- build trust in the service and service system more broadly.

The system needs to work harder to genuinely partner with clients across all communities and backgrounds, and this strategy aims to help The Orange Door work towards that goal.

Policy context and related frameworks

Person-centred practice

In the community service sector, a person-centred service is one where:

- people are enabled and supported to meaningfully participate in decisions and to form partnerships with their service providers, with respect to their own support and the design and improvement of the service system
- people's values, beliefs and situations guide how services are designed and delivered
- people are included in shaping their own support and the service from the beginning – not after decisions have already been made.

Examples of person-centred practice include: clients being involved in planning and decision-making about service responses for them; offering service responses considering the whole person, taking into account their physical, cultural and social context; sharing information. Person-centred practice is underpinned by people's fundamental rights to live free from violence, choose who to associate with and to have a home and family free from interference (unless required by law)¹.

Accordingly, practice in The Orange Door is based on person-centred principles which define a client partnership approach to service delivery. The overarching principles, as defined in The Orange Door Interim Integrated Practice Framework², are:

- ensure safety and wellbeing is paramount
- support agency and empowerment (this principle talks to the heart of client partnership, through respecting clients' needs, decisions and choices)
- keep perpetrators accountable for violent and abusive behaviour

¹ from the Victorian Charter of Human Rights and Responsibilities:

<https://www.humanrightscommission.vic.gov.au/human-rights/the-charter/rights-under-the-charter>

² <https://www.vic.gov.au/sites/default/files/2019-04/Support-and-Safety-Hubs-Interim-Integrated-Practice-Framework.pdf>

- promote self-determination among Aboriginal people
- be accessible and responsive to risk and needs.

This strategy aims to extend the use of these principles beyond the client level and apply them to the operational and system levels responsible for delivering and developing The Orange Door.

Client partnership in government and community services

There is a shift underway towards more authentic partnership with clients in government and community services. This follows many inquiries and reviews finding that the absence of the client voice contributes to poorer outcomes for clients. Client and family partnerships, co-design, engagement and person-centred care are highlighted as key areas of focus in the design, delivery and improvement of services across the DHHS *Community services quality governance framework*³ and *DHHS Strategic plan*⁴. The Royal Commission into Family Violence recommended government and agencies identify and develop ways to ensure the voices of clients inform policy development and service delivery⁵; and the voice of victim survivors was a focus area for the Family Violence Reform Implementation Monitor⁶ in its second report.

The DHHS *Community services quality governance framework* outlines the roles and responsibilities of the department, sector and service providers to deliver services that are safe, effective, person-centred, connected and underpinned by continuous improvement. It details the systems that services should have in place to support client and family partnerships.

The DHHS *Client voice framework* (to be published in late 2019) aims to promote the value and influence of the client voice in all aspects of community services design, development and delivery. It gives a reference point for everyone working in community services to assess and reflect on how things are currently done and develop new ways of working, with the constant commitment to improve client outcomes. It notes some examples of innovative and effective approaches to hearing the voice of and partnering with clients across the community services sector. However it also highlights variability across these activities. Despite best intentions, staff at all levels (from practitioners to leadership and governance) often find it difficult to find effective and meaningful ways to partner with clients. The *Client voice framework* outlines a vision for a system where the client voice is embedded in the way we do our work; supported by information capture and analysis at a systems level to identify and share best practice, benchmark client experience, drive and support system improvement and track changes over time.

Aboriginal self-determination and *Dhelk Dja: Safe Our Way*

Aboriginal self-determination is the most fundamental of all rights for Aboriginal people. It means Aboriginal people and communities having true freedom, full and total control of their own safety, healing, connections to land and culture, communities, futures and lives. Aboriginal self-determination in a family violence context is a systemic shift from government and the non-Aboriginal service sector, that requires the transfer of power, control, decision-making and resources to Aboriginal communities and organisations. Aboriginal self-determination is the foundation for better outcomes for Aboriginal people. The Orange Door Interim Integrated Practice Framework describes in detail how practice in The Orange Door promotes Aboriginal self-determination, including by:

- including Aboriginal people in governance arrangements from the beginning

³ <https://dhhs.vic.gov.au/publications/community-services-quality-governance-framework>

⁴ <https://dhhs.vic.gov.au/publications/department-health-and-human-services-strategic-plan>

⁵ Royal Commission into Family Violence, Recommendation 201

⁶ <https://fvrim.vic.gov.au/second-report-parliament-1-november-2018>

- recognising the inherent strength of Aboriginal culture and that a healing and whole-of-family approach is the longstanding attribute of Aboriginal communities that The Orange Door will learn from
- working with Aboriginal people to shape the design and implementation of The Orange Door from the start and building relationships and partnerships with community organisations to support culturally appropriate and safe pathways and choices
- including the principles of Aboriginal self-determination all operational guidelines, agreements and position descriptions.

Non-Aboriginal services have much to learn about genuine partnership from the Aboriginal community. Many Aboriginal services already adopt a client partnership approach to their work, building from core values centring on family and community. Aboriginal communities often see Aboriginal services as part of – rather than separate from – community, which provides a strong foundation for partnership.

The commitment of the Victorian government to support self-determination has strengthened structures and processes to support partnership between government and Aboriginal people and communities.

Dhelk Dja: Safe Our Way outlines a vision for a future where Aboriginal people live free from family violence, and an agreement between government, service providers and Aboriginal people to realise that future. It is one leading example of partnership and is consistent with the ‘Empower’ approach⁷ to client partnership.

Intersectional approaches

Intersectionality helps us to understand how power differences can impact across multiple social characteristics and environments in which they are experienced. Adopting an intersectional approach:

- supports the identification of barriers to safety and access to services that individuals experience due to discrimination on the basis of Aboriginality, gender, sex, sexual orientation, gender identity, ethnicity, colour, nationality, refugee or asylum seeker background, migration or visa status, language, religion, ability, age, mental health, socioeconomic status, housing status, geographic location, medical record or criminal record
- enables the service system to better understand and respond to the complexity and spectrum of vulnerability and family violence in relation to people with a diverse range of social characteristics
- works towards creating and sustaining a service system that is inclusive, safe, responsive and accountable for all.

Everybody Matters: Inclusion and Equity Statement (Everybody Matters) sets out the Victorian Government’s ten-year commitment to ensuring that the broader family violence services system is well-equipped to respond to all Victorians who have lived experience of family violence, across all diverse community groups with appropriate and inclusive support. *Everybody Matters* represents the first attempt by the Victorian Government to apply an intersectionality framework across an entire reform agenda.

How this strategy was developed

Across March and April 2019, a six-week process to develop this strategy was carried out by a design team of nine people, comprising⁸:

- people with lived experience of family violence and family services
- practice leaders from The Orange Door
- policy and project staff from FSV
- leadership from FSV and a CSO partner in The Orange Door.

⁷ As defined in the International Association for Public Participation (IAP2) spectrum. This spectrum is the basis for the DHHS *Stakeholder engagement and public participation framework*.

⁸ See appendix for full list of group membership and additional consultation.

The team took part in four half-day workshops and additional desktop research, interviews and activities with people with lived experience of services and other stakeholders. The process was supported by FSV staff. The design team was given the opportunity to build on established and emerging practice in client partnership from other contexts, as well as generate new ideas.

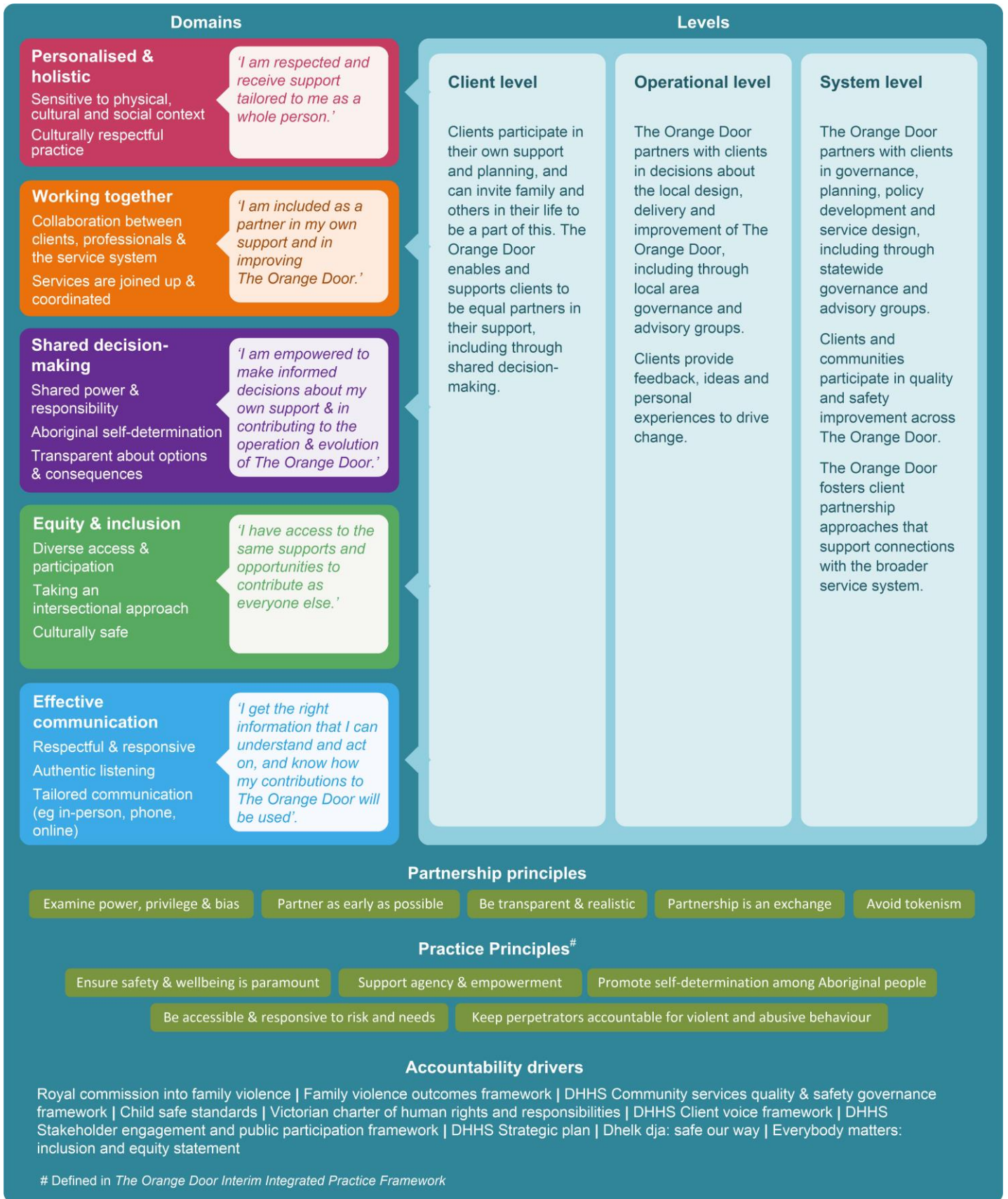
The team arrived at a set of initiatives which form the basis for the strategy, which was further refined by during the drafting process.

A client partnership framework for The Orange Door

Figure 1 on page 11 describes a framework for client partnership in the context of The Orange Door. It comprises five **domains** and three **levels**, underpinned by five **principles**⁹. This framework underpins the strategy and should be used to guide the implementation of the proposed initiatives and any other client partnership efforts in The Orange Door.

⁹ The domains and levels in the framework have been adapted from Safer Care Victoria's *Partnering in healthcare framework*, which was developed through an intensive design process involving: a project team that included consumer and sector leads; desktop research; a statewide online survey that reached 180,000 Victorians; data analysis of more than 3,000 responses; and a face-to-face 'priorities summit'. See: <https://bettersafecare.vic.gov.au/resources/tools/partnering-in-healthcare>

Figure 1: Client partnership framework for The Orange Door



Enablers

A number of enablers critical to client partnership have been identified in the development of this strategy. Initiatives in the strategy partially contribute to these enablers, however these require attention beyond The Orange Door project to strengthen client partnership capability across The Orange Door partners and create a solid foundation for implementation. Work towards these enablers will ultimately be of benefit to other work areas across The Orange Door partners (including FSV and DHHS), and it's acknowledged that partners may already have these elements in place.

Supportive leadership and culture

Leadership and culture that are supportive of client partnership across FSV and The Orange Door are critical to the success of the strategy. While the proposed initiatives go some way to establishing this environment, FSV and The Orange Door partner organisations should focus on a supportive leadership and culture for their work beyond The Orange Door. In promoting Aboriginal self-determination, The Orange Door partners should be respectful of Aboriginal leadership and culture and acknowledge and learn from Aboriginal expertise in working with families and communities. Central to a supportive leadership and culture is the ability of staff across all organisations to critically reflect on power, privilege and unconscious bias they may bring to engagement with clients and community members at all levels. These efforts can be supported by the *Community services quality and safety governance framework* and the upcoming *Quality and safety guide for The Orange Door*.

Policies and processes to support client partners and promote safety

The Orange Door partners should establish clear policies and procedures to support, recognise the effort and ensure the safety of clients partnering with and contributing to The Orange Door. This should include consideration of ethical and trauma-informed ways to engage with clients. Existing processes and procedures can often be based on the assumption of once-off consultation (such as interviews or focus groups), rather than more intensive, ongoing or team-based work that is required for partnership approaches.

Clients should be provided with the information, training and supports they need to partner with services, in ways that are accessible and culturally appropriate. This could include: clearly communicating the purpose, scope and likely impact of any engagement; training in communication, advocacy and project processes; clear support arrangements with any CSOs engaged with a particular client; debriefing and counselling for clients and staff; coaching; and support workers for engagements that may be particularly challenging.

The effort of all client partners should be recognised in some form. This includes remuneration, including through direct employment and other contractual arrangements but may also take other forms, such as providing clients with documents acknowledging their contribution which could be used to support applications for study or employment, or direct contribution to a qualification. Ways to reduce other barriers to participation (e.g. subsidised travel and childcare) should also be explored.

The Orange Door partners should work together to ensure the safety of all participating clients. This could include considerations with respect to:

- potential re-traumatisation
- an individual client's readiness to take part in a particular engagement, paying attention to the stage they are at in their recovery journey
- setting clear expectations about what is involved in a particular engagement and what supports are available (so that clients don't find themselves 'out of their depth')

- the level of risk the client is exposed to, and any potential increase in risk (to themselves or someone else) as a result of participation
- the safest channels (e.g. telephone, online and in-person) to use to engage with a particular client
- confidentiality and protection of personal information (both of the client participating and other clients)
- risks and issues arising from contact between participating clients, and between participating clients and staff members (e.g. in a workshop setting).

The outputs of the DHHS *Voice of the child* project will include a number of products which could be of use to support these efforts, including guidance on ethical practice, recruitment and incentives in working with children and young people. FSV are contributing to the development of these products and considering their applicability to other client cohorts.

Monitoring and continuous improvement

The Orange Door partners should establish:

- time-limited mechanisms to monitor the implementation progress of the proposed initiatives
- ongoing mechanisms to monitor the effectiveness of client partnership processes across The Orange Door
- mechanisms to monitor activity of The Orange Door partners in support of Aboriginal self-determination.

Insights gathered through monitoring activities should inform continuous improvement of client partnership processes, as part of broader continuous improvement effort. Clients should be included in these monitoring and improvement activities through various means which could include: defining the measures of success for client partnership; contributing to the design and implementation of improvements; and membership in governance groups tasked to oversee client partnership in The Orange Door. The results of continuous improvement activities should be communicated broadly. Data and insights related to client partnership, including findings from the client voice survey, may:

- be embedded in ongoing monitoring such as service delivery reporting and performance frameworks
- be more fully analysed in upcoming evaluations of The Orange Door
- contribute to work on the Family Violence Outcomes Framework.

It should be noted that the DHHS *Community services quality governance framework* already guides The Orange Door partners to monitor the effectiveness of client participation across all community services (in The Orange Door and beyond) funded, delivered or regulated by DHHS.

Inclusive service with an intersectional approach

There are individuals in the community who are systemically marginalised and often experience barriers to accessing services or participating in processes to improve the service system. Intersectionality is a framework for understanding how systems and structures intersect and interact on multiple levels to compound these barriers through oppression and creating overlapping forms of discrimination, stigma and power imbalances based on particular social characteristics. Barriers to access and participation typically include:

- fear of and past experience of discrimination
- lack of inclusive response by the service system
- fear of reprisal for accessing services
- limited visibility of their needs and experience
- failure to recognise the authenticity of their experience.

To overcome these barriers, The Orange Door partners should:

- take an intersectional approach to service provision and client partnership at all levels

- support staff at all levels to critically reflect on their own power, privilege and unconscious bias they may bring to their engagement with clients
- identify which individuals and communities are being excluded from services and processes
- pro-actively find ways to break down barriers to access and partnership with these individuals and communities.

This work can be supported by *Everybody Matters: Inclusion and Equity Statement*, and the following upcoming pieces of work: The Orange Door Inclusion Action Plan, The Orange Door Aboriginal Inclusion and Engagement Action Plan and the FSV Intersectionality Capacity Building project.

Client partnership with specific groups

This section highlights partnership considerations for individuals, groups and communities for whom there are particular sensitivities and challenges for client partnership, due to trauma, vulnerability or barriers to accessing services and contributing to service system improvement. These should be considered as part of an intersectional approach to implementing the strategy. As detailed in the previous section, an intersectional approach is necessary to fully understand and respond to overlapping discrimination, stigma and power imbalances inherent in the system.

Aboriginal people and communities

Partnership with Aboriginal people and communities is critical to realising Aboriginal self-determination.¹⁰ There are a number of considerations that should be taken into account when partnering with Aboriginal people and communities, described below.

- **The role of Aboriginal Elders in enabling partnerships.** Elders play an important role in Aboriginal communities, with respect to both leadership and the cultural knowledge they hold. Elders should be drawn on to support and facilitate client partnership with The Orange Door, and have their contribution recognised financially or by other means.
- **All 'knowledges' should be respected equally.** There are many different Aboriginal communities, each with their own culture and knowledge. All of these should be shown equal respect.
- **Use community-led and local-led approaches.** This supports self-determination and acknowledges the importance of country to Aboriginal people.
- **Use and build on the well-developed partnership structures that are already in place.** This includes the Dhelk Dja action groups and the area-based Aboriginal Advisory Groups for The Orange Door.
- **Make sure that any partnership or engagement is culturally safe for clients and professionals.** This includes:
 - understanding how Aboriginal people represent their community – some may need to clarify that they are empowered by their community to participate or talk about a particular issue
 - being transparent
 - acknowledging the history of dispossession and intergenerational trauma experienced by Aboriginal people
 - being sensitive to the different experiences of each Aboriginal person
 - not placing unrealistic expectations on an individual or group to represent the whole Aboriginal community
 - ensuring that staff have the capability to support culturally safe engagement

¹⁰ See 'Aboriginal self-determination and Dhelk Dja: Safe Our Way' on page 9 of this document for a detailed description.

- being aware of local protocols, connection to country and the cultural significance of particular places.

Children and young people

Victorian organisations providing services for children, including The Orange Door, must comply with the *Child Safe Standards*¹¹. Standard seven requires that in-scope organisations have strategies in place to promote the participation and empowerment of children.

Partnership with children and young people at the client level is supported by the *Best interests case practice model*¹². The model acknowledges that partnership with children, their families and communities produces the best outcomes for children. In implementing this strategy, ways to build on the partnership approach in the model should be considered.

Young people have long expressed a wish to have more influence at the operational and system levels. This has resulted in some youth-focused services establishing practices for including young people in service design, planning and decision-making. Examples include young people being equal members of governance groups and organisational boards, and teams of young ‘consultants’ trained in advocacy and available for engagement across the service system. The Orange Door partners should learn from these examples, and explore opportunities to partner with these organisations and programs.

The level of ethical oversight required and associated constraints often lead to children not being given an opportunity to contribute to service improvement and systems change. This is a widely acknowledged issue across government and the community services sector, and there are two pieces of work underway which aim to make it easier to safely include children in participation and partnership at the operational- and system-levels:

- the DHHS *Voice of the child* project
- the *Framework for ethical practice in human-centred design*, currently being developed in a partnership between FSV, DHHS, DPC and a number of community service organisations.

The DHHS *Voice of the child* project is a major piece of work underway specifically aimed at enabling the voice of children to influence the service system. The project has identified organisational and process barriers that often prevent policymakers and service designers from directly engaging with children and young people, and a need to further explore mechanisms for giving a voice to children and young people when designing policies and services that affect them. The outputs of the project will include:

- a DHHS Child and Youth Participation model
- practical supports (including online tools) for engaging children and young people
- guidance on ethical practices, recruitment and incentives for participation
- proposals for other ways to strengthen the voice of children and young people in service design and improvement, including through greater use of two-way online communication.

This work has the potential to inform and support partnership with all clients of The Orange Door.

People who use or have used violence

The contribution of people who use or have historically used violence is critical to influence the service system to more effectively reduce and prevent family violence. To keep victim survivors safe The Orange Door needs to be effective in engaging people who use violence and connecting them to services to hold them accountable for their behaviour. To date, people who use violence have had limited input into the way The Orange Door works. Their involvement should be carefully considered for each of the proposed initiatives, while being mindful of the associated risks and challenges, which include:

¹¹ <https://ccyp.vic.gov.au/child-safety/being-a-child-safe-organisation/the-child-safe-standards/>

¹² <https://www.dhhs.vic.gov.au/publications/best-interests-case-practice-model-summary-guide>

- avoiding collusion
- managing associated risks to victim survivors
- determining if the individual has changed their behaviour enough to meaningfully and safely contribute to service design and improvement.

Victim survivors consulted while developing this strategy were positive about the prospect of the proposed initiatives being offered to people who have used violence. For example, with respect to the inclusion of people who have used violence on governance and advisory groups, one victim survivor commented that “it’s really important to bring their perspective to the table as well”, while another shared that “I may be a little nervous, but that wouldn’t stop me” so long as appropriate supports were in place.

The strategy

The strategy proposes seven related focus areas for work (or ‘initiatives’) to strengthen client partnership in The Orange Door. This section includes:

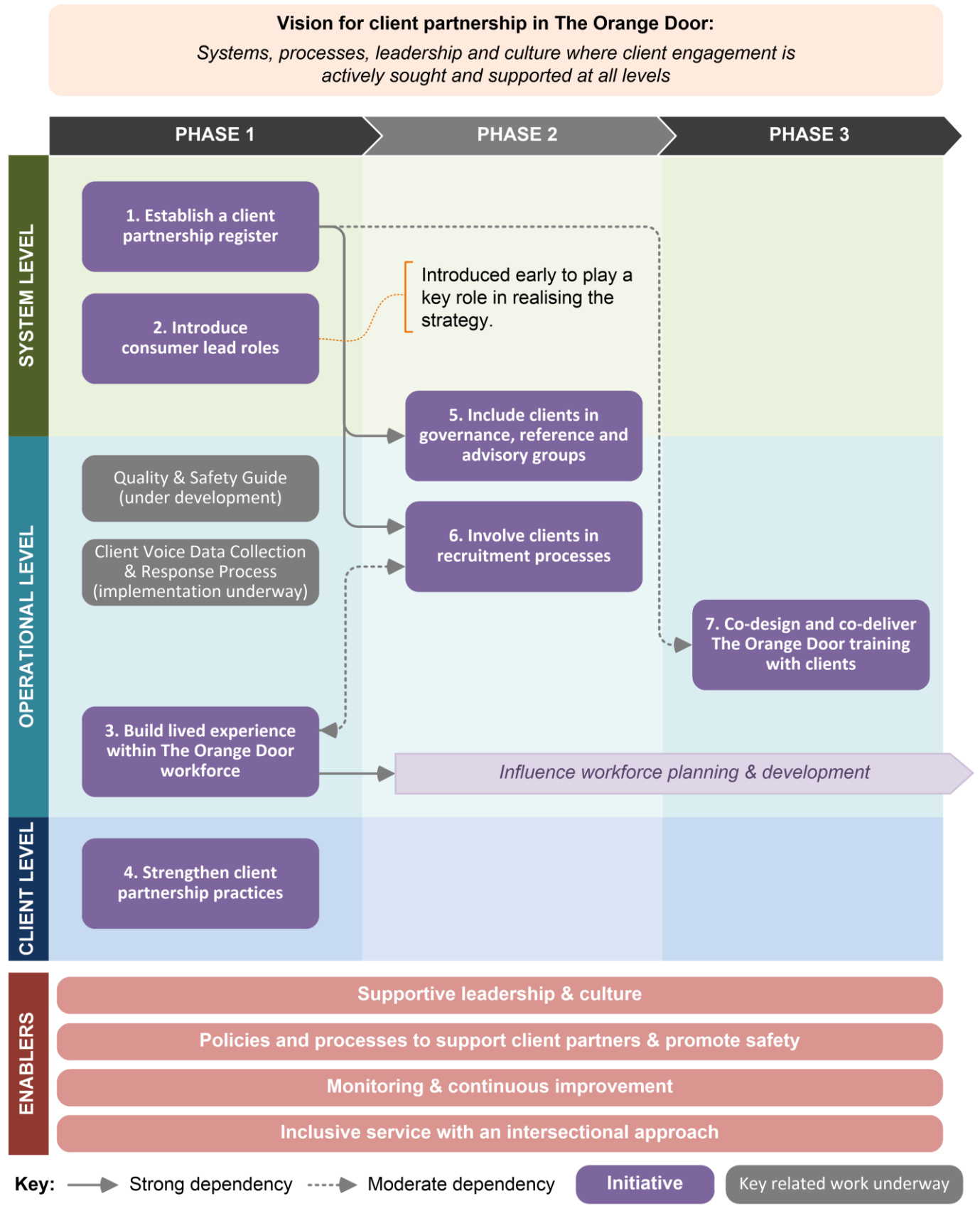
- an overview of the initiatives and their relationship to each other (Figure 2 on page 17)
- a high-level description of each initiative.

The initiatives can be planned and considered separately but sequential implementation may enable better management of resources and dependencies. The strategy suggests a phased implementation approach, outlined in Figure 2 and further described in the detail that follows.

It is suggested that by introducing the client partnership register first, this could support work to bring the rest of the strategy to life and bring the voice of clients into current and emerging pieces of work. Initiatives on which other initiatives rely, and those with potentially far-reaching change management and workforce implications may need to be commenced earlier than others. Consideration needs to be given to the appropriate oversight for implementing the initiatives in this strategy, which could include a dedicated steering committee including people with lived experience.

An action learning approach, including prototyping, testing and piloting, should be considered in implementing each initiative. All initiatives will embed client partnership approaches (informed by the framework earlier in this document) in design, development and implementation.

Figure 2: Client partnership strategy for The Orange Door



Projects, processes & frameworks influencing client partnership in The Orange Door:



Valuing lived experience project | Dhelk dja: safe our way | The Orange Door inclusion action plan | The Orange Door Aboriginal inclusion and engagement action plan | Intersectionality capacity building project | FSV feedback management procedure | Victim Survivors' Advisory Council | Rolling action plan of 10-year industry plan for family violence | Multi-agency risk assessment & management (MARAM) framework



Community services quality & safety governance framework | Client voice framework | Voice of the child project | Partnering in healthcare | Mental health lived experience engagement framework | Stakeholder engagement & public participation framework



Child safe standards | DPC Framework for ethical practice in human-centred design (in development) | DPC Human-centred design playbook (in development)

Description of proposed client partnership initiatives

Each initiative in this section is described as an ideal end-state, with the assumption that some may initially be limited in scope and scale. It is also assumed that clients will be partners in bringing these initiatives to life, through involvement from early planning to detailed design and implementation.

1. Establish a client partnership register

A common barrier to client partnership for service providers and government is being able to quickly connect with clients who are willing and able to participate.

This initiative will establish a register of clients who are interested in participating in the development, implementation, delivery and improvement of The Orange Door. It will match them to time-limited participation opportunities and support them to take part in activities such as interviews, workshops or governance and advisory groups relating to local and statewide issues. This initiative could be implemented first to make it easier to partner with clients in implementing the remaining initiatives.

Scope of initiative

Develop processes and resources to:

- identify and prioritise client engagement opportunities across all streams of work
- safely identify clients who may want to contribute (considering how existing statewide and local groups could support this)
- match clients to participation opportunities based on their skills, interests and capacity
- establish development pathways for clients to strengthen their skills and sense of agency by progressing to more complex and demanding partnership opportunities (and potentially employment) with The Orange Door and across the service system
- support clients to participate, which may include skill building (e.g. communication training), debrief counselling, mentoring and tools
- support staff across The Orange Door partners to identify opportunities for client participation and engage with clients matched through the register.

Benefits

- Improves service quality and design through a mechanism to easily include clients in the process, avoiding common challenges with recruitment and support.
- Provides a development pathway for clients, and acts as a stepping stone to other roles within the service system and beyond.

Key questions

- Which organisation(s) would be best placed to maintain the register and support clients to participate?
- Should this register connect with similar registers in other service sectors (e.g. mental health)?
- What tools and resources from other contexts can be used to support the register and its engagement processes?

2. Introduce consumer lead roles

Clients have reported that they want opportunities to contribute to the service system in a more embedded (and less piecemeal) way.

This initiative will introduce consumer lead roles to contribute directly to the work of The Orange Door across policy, design, implementation and service improvement, including evaluation and quality

assurance. Consumer lead roles are in place at DHHS and in other services¹³ and require common project, policy and design skills in addition to lived experience expertise. Having a consumer lead role in a team doesn't remove the need to consult with clients outside of the organisation. These roles could be introduced early to play a key role in realising the remainder of the strategy.

Scope of initiative

- Develop position descriptions for the consumer lead roles, drawing on insights from other organisations with similar roles already in place.
- Develop resources (such as communications tools) to support managers and teams to understand the expectations of the consumer lead role, and to help consumer leads feel welcome and valued.

Benefits

- Improves the quality of products and processes by embedding lived experience expertise directly in the work of The Orange Door.
- Provides employment opportunities for people with lived experience.
- Responds to client concerns about 'piecemeal' and inauthentic client partnership.

Key questions

- What is the ideal number, placement and scope of these roles?
- Would there be benefit in these roles being independent of government?
- Could existing roles be re-purposed as consumer leads?
- How will the needs of diverse populations be represented?

3. Build lived experience within The Orange Door workforce

While it is acknowledged that there are people with lived experience working within and leading The Orange Door, there is no consistent approach to acknowledge or draw on this experience, or to build the lived experience expertise of the workforce.

This initiative will explore opportunities to build the lived experience expertise of the workforce, including through active recruitment and developing ways for people in the workforce to acknowledge and draw on their own lived experience in their work with clients, if this is something that they wish to do. This initiative will also explore the potential for new roles specifically designed to leverage the skills and experience of people with lived experience.

This initiative should be informed by services and sectors where lived experience is already a prominent feature of the workforce, including Aboriginal Community Controlled Organisations and mental health, disability and youth services.

Scope of initiative

- Deliver a review of role descriptions in The Orange Door workforce (including operational FSV roles), with a focus on drawing value from the lived experience of staff. The review should recognise that lived experience can be a professional asset, but that it is important to ensure all staff are equipped with the skills, knowledge and support to undertake the work.¹⁴

¹³ Safer Care Victoria, the Office of the Chief Mental Health Nurse and mental health services have similar roles in place.

¹⁴ From 2020, consideration will need to be given to the implementation of mandatory minimum qualifications (recommendation 209 from the Royal Commission into Family Violence), noting that the model for implementation includes specific pathways for people with lived experience.

- Start from the assumption that lived experience is not a substitute for minimum mandatory qualifications.
- Explore whether any new roles specifically focused on leveraging lived experience could be of benefit in the context of The Orange Door.
- Explore potential pathways for clients to develop the skills and experience required to progress into employment in The Orange Door workforce, or other similar roles.
- Inform and be informed by research examining role design being undertaken as part of the *Rolling Action Plan of Building from Strength: 10-Year Industry Plan for Family Violence Prevention and Response*¹⁵.

Benefits

- Making lived experience visible in the workforce would help build greater trust and empathy between the service, clients and the community, leading to improved outcomes for clients.
- Supports people in the workforce with lived experience to acknowledge and draw on this in their work, playing a part in their own recovery journey.
- Potentially provides employment opportunities for people with lived experience, contributing to improved longer-term recovery outcomes.

Key questions

- What are the key ways that the workforce can draw on its own lived experience to benefit clients?
- What are the possible impacts of this initiative on the workforce? How ready is the system for this initiative?
- What can be learnt from other service sectors that embed lived experience in their workforces?

4. Strengthen client partnership practices

At its core, practice in The Orange Door is client-led and person-centred: practitioners are directed by the needs and preferences of clients seeking support. However, there is not a clear understanding of where there are opportunities to enhance client partnership, and how to best embed these in practice.

This initiative will explore the service model and practice on the ground to determine ways to improve clients' experience of partnership. Areas for investigation may include identifying visible practices at The Orange Door which support client choice; information critical to share with clients to maximise their empowerment (through understanding of The Orange Door and their own service options) and ways to make the referral experience feel more supportive. It will also consider ways that workers, as part of their practice, can seek input about the client's service experience directly from clients and use this to contribute to service improvement.

Scope of initiative

- Develop guidance and resources to strengthen person-centred practice in The Orange Door to improve clients' experience of partnership. Deliverables could include: practice guidance to support better engagement with clients of The Orange Door, and information and resources tailored for clients to explain service options.
- Embed the proposed solutions into existing processes, documents and training materials and influence continuous improvement and practice development processes.

¹⁵ vic.gov.au/familyviolence/family-safety-victoria/industry-plan.html

Benefits

- By strengthening client partnership, this initiative gives clients a greater sense of empowerment and agency in their service experience with The Orange Door.
- Improves the ability of the service to hear clients and give them control over their situation and decisions (a measure in the Family Violence Outcomes Framework).
- Provides a basis for more visible client partnership practices across the work of The Orange Door.

Key questions

- How might we support clients to feel a continuity of partnership as they are connected from The Orange Door to other services?
- How might approaches to person-centred practice inform this work?

5. Include clients in governance, reference and advisory groups

It is critical to include the voice of clients in decision-making and advisory structures to ensure that The Orange Door policy and operations evolves to better meet the needs of clients. Without client representation, client partnership can not be considered authentic.

This initiative will deliver policy and supporting resources for The Orange Door partners to include clients as members of The Orange Door governance, reference and advisory groups at the local area and statewide levels.

This initiative builds upon the success of the inclusion of VSAC members in various groups (such as The Orange Door Statewide Reference Group), and draws on examples in other social services sectors, including disability, mental health and youth services.

Scope of initiative

- Identify which groups and forums are appropriate for client membership.
- Determine if changes are needed to existing groups, their practices and terms of reference to be able to authentically include clients.
- Deliver policies and resources (e.g. group terms of reference) to:
 - support secretariats to identify clients with the right skills and experience and recruit them to these groups
 - support clients to participate and be heard in these groups (e.g. requiring a minimum of two clients in each group and a dedicated support person before, during or after meetings)¹⁶
 - clarify the purpose of client involvement in each group (this may be to contribute: based on their lived experience of family violence, vulnerability or services; based on professional expertise developed as an advocate; as a representative of a group/community or as an individual).
- Determine if any additional groups are required.

Benefits

- Clients will identify issues and opportunities early that may otherwise be missed, or not identified until implementation.
- Provides a skills development opportunity for clients, and acts as a stepping stone to other roles within the service system and beyond.
- Improves the quality of connection and communication for all group members¹⁷

¹⁶ These are recommended approaches from other sectors, including: voiceatthetable.com.au/resources/consumer-participation-kit/

¹⁷ Anecdotal feedback from Victorian youth organisations and the Office of the Disability Services Commissioner

- Contributes to the healing and recovery of clients by giving an opportunity to influence the service.

Key questions

- For which groups and structures is client membership most critical? For which is it critical to include Aboriginal people? For which is it critical to include people from diverse communities?
- Is there a need to establish additional consumer advisory groups (as is common practice in health services) specific to The Orange Door at a statewide level and/or in each area?
- Could clients in these groups play an oversight role in ensuring The Orange Door delivers on its client partnership vision?
- What more can be learnt from other social services sectors (including disability, mental health and youth services) where this approach is already being used?

6. Involve clients in recruitment processes

Clients offer a unique perspective on what makes for a client-focused and effective staff member, however current FSV recruitment processes do not include clients and this practice is variable across partner agencies.

This initiative will deliver policies and resources to support the inclusion of clients in recruitment processes across The Orange Door partners for roles relating to The Orange Door. This will include involvement in recruitment process design through to role definition and candidate selection. The initial focus should be on operational roles, however involvement in recruitment of policy and project roles should also be considered.

Including clients in recruitment is a well-established practice in parts of the community service and health systems.

Scope of initiative

- Establish processes to identify and engage clients to participate in recruitment processes (drawing on initiative two above).
- Prioritise roles relating to The Orange Door according to which would most benefit from client input in recruitment.
- Review role descriptions and recruitment processes for priority roles (likely area-based roles). Alternatives to conventional interview panel processes should be considered¹⁸.
- Deliver policies and resources to guide practice and support hiring managers, recruitment panel members and clients to support and participate in the process.

Benefits

- Leverages client expertise in identifying the key skills and attitudes needed in the workforce, leading to better quality recruits.
- Improves the ability to select candidates who have a genuinely client-centric approach.

Key questions

- What are the opportunities and challenges for including clients in recruitment for CSO partners in The Orange Door?
- How will the process ensure fairness in recruitment? In situations where the client knows the candidate, how will conflicts of interest be dealt with?

¹⁸ An example of alternative selection process activities: <http://healthwest.org.au/community-participation-in-the-recruitment-process-a-case-study/>

7. Co-design and co-deliver The Orange Door training with clients

Through sharing their knowledge and experience, clients are ideally placed to support the workforce to deliver a client-centric service. The current induction training program for The Orange Door workforce includes an opening speech by VSAC members and draws on client experience resources developed with clients. There is, however, an opportunity to draw greater value from client contributions in training, drawing inspiration from this emerging practice in other community and health service sectors, including disability, youth, homelessness and mental health services.

Using a phased approach, this initiative will embed clients in the design and delivery of training (including induction training) for The Orange Door workforce so they can better partner with, understand and meet the needs of clients. Clients will directly contribute to the development and review of training modules, and co-facilitate alongside other training providers.

Scope of initiative

- Embed co-design and co-delivery with clients as a requirement in documents used to procure training services.
- Establish processes to identify and engage appropriately skilled clients (drawing on initiative two above).
- Engage training providers who are able to co-design and co-deliver training with clients.
- Determine which existing training modules would most benefit from the proposed approach, and if any additional content is needed.
- Update and develop training material as required (starting with the highest priority content).
- Develop a plan to move towards greater client involvement in training over time.

Benefits

- Improved learning outcomes for The Orange Door workforce, and therefore improved service delivery and practice through deeper understanding of client experience and approaches to working with clients.
- Provides a skills development opportunity for clients, and acts as a stepping stone to other roles within the service system and beyond.
- Contributes to a more person-centred, partnership-focused practice and culture.
- Demonstrates client partnership in action – to the workforce, and to clients involved in the training and in the broader community.

Key questions

- Where would there be the most benefit in including clients in The Orange Door training?
- What can be learnt from other sectors already using this approach?

Appendix

Design Team membership

- Two members of the Victim Survivors' Advisory Council (VSAC)
- Person with lived experience of family services
- Assistant Director, Support and Safety Hubs Statewide Policy and Design
- Member of a Hub Leadership Group
- Integrated Practice Lead from The Orange Door
- Aboriginal Practice Lead from The Orange Door
- Manager, Aboriginal Strategy Unit, FSV
- Implementation Manager, Hub Operations, FSV
- Manager, Service Development, Hub Operations, FSV

Facilitation and support provided by Senior Program Officer, Support and Safety Hubs Statewide Policy and Design, FSV. Additional facilitation support provided by Inclusion and Engagement, FSV.

Additional consultation and engagement

- Additional interviews with four clients in regional and rural areas, with experience across the family violence and family services systems
- The Orange Door Working Group
- Victim Survivors' Advisory Council
- Dhelk Dja Sub-working group for priority four: system transformation based on self-determination principles, and people from Aboriginal Community Controlled Organisations
- Koori Caucus
- The Orange Door Statewide Reference Group and Working Group