

Queensland Legal Assistance Forum work plan

Collaborative Service Planning project initiatives: 2017-19

#	Working group / legal assistance forum	Project name	Estimated resources	Estimated duration	Project summary
1	ATSISPWG	Indigenous Legal Health Check project	\$300,000	2 years	Development of an Indigenous Legal Health Check (LHC) and collaborative, cross-sector legal service delivery in three Indigenous communities for two years.
2	MHSPWG	<i>Mental Health Act 2016</i> collaboration project	\$150,000	12-18 months	Development and provision of resources and training for stakeholders that encourages collaborative service delivery, information sharing and referral pathways between the criminal justice system, Queensland Health and advocacy and support services, to better assist individuals experiencing mental health issues or with intellectual disability or cognitive impairment.
3	CLELAF	Learning and development project	\$55,000	12 months	Appointment of a training and development officer for the legal assistance sector to develop, deliver and/or secure: training opportunities based on need; cross-sector training partnerships; leverage fee based training at discounted rates; co-ordinate mini regional conferences; and develop sector specific content.
4	BPEBWG	Legal Health Check implementation project	\$55,000	14 months	Support for up to five legal assistance service providers to implement Legal Health Check resources over 12 months through active collaboration with community or health service providers.
5	BPEBWG	Regionalised collaborative service planning project	\$200,000	18 months	Support for regionalised planning for legal assistance services to identify: services provided locally; service gaps; and opportunities to 'draw in' specialist, statewide services or identify service gaps that require additional funding.
6	BPEBWG	Guide to outreach	\$20,000	6 months	Development of a best practice 'how to guide' for delivering outreach legal services.

1) Indigenous Legal Health Check project

Working group / legal assistance forum	Aboriginal and Torres Strait Islander Service Planning Working Group
Project prepared by	LawRight

The gap or problem and why should it be addressed

Indigenous Australians have an increased prevalence of multiple legal problems, including government, health and rights problems.

Effective strategies to address these intersecting and multiple needs include: establishing pathways with problem noticers, including partnerships with non-legal services; improved coordination with Indigenous and mainstream legal services; and increasing the awareness of Indigenous people of their multiple legal needs and remedies. These strategies must take care to be culturally accessible.

There is also a need to explore in greater depth the legal problem-solving behaviour of Indigenous Australians, and to develop resources for Community Legal Centres to become culturally safe.

The LawRight Legal Health Check (LHC) has been confirmed as a valuable tool to support the aforementioned strategies, and is actively used by the Northern Territory Legal Aid Commission and Homeless Persons' Legal Clinic at Wuchopperen Health Service in Cairns to assist non-legal workers to identify and refer the multiple legal needs of this client group, and to effectively collaborate across a number of legal services, such as the Aboriginal and Torres Strait Islander Legal Service (Qld) (ATSILS), Queensland Indigenous Family Violence Legal Service (QIFVLS) and LawRight.

However, there is potential for the LHC to become more culturally appropriate, and thereby more effective. A LHC that was narrative based, community-connected, had reduced text and used Indigenous iconography would be a valuable resource to increase access to justice and may also be useful for other client groups with limited literacy.

Measuring the effectiveness of an Indigenous LHC and its role in enhancing effective, collaborative service delivery for Aboriginal and Torres Strait Islander clients would provide valuable evidence about how to address Indigenous legal need.

How the gap or problem should be addressed

The project could be completed in two phases.

Phase one (6 months)

1. Establish a steering committee with representatives from LawRight, ATSILS, QIFVLS and relevant Indigenous community health partners.
2. Establish or maintain preliminary outreach legal services (Health Justice Partnerships [HJPs]) at Wuchopperen Aboriginal Health Service, Gurriny Yealamucka and Apunipima. A 0.4 FTE lawyer could be appointed to each service. The services should commence using the existing LHC and their collaborative service delivery plans mapped.
3. Appoint an evaluator to deliver an independent evaluation on the effectiveness of the LHC/HJP service delivery model in Indigenous settings, including designing program logic/outcome measures for each new HJP.
4. Develop an Indigenous LHC tool. The following approach could be used:
 - Facilitation of two workshops, one with the steering committee and the other in Cairns (with appropriate selection of participants drawn from stakeholders/community of each HJP) to consider core elements of the Indigenous LHC tool and establish a design brief.
 - Provision of the design brief to Indigenous artist/graphic designers to produce the Indigenous LHC tool.
 - Referring the new Indigenous LHC to the workshop participants for final approval. Following approval, upload the Indigenous LHC to www.legalhealthcheck.org.au and distribute hard copies for use in legal clinics.

Phase Two (18 months):

1. HJPs to develop and publish a user guide for new the Indigenous LHC.
2. HJPs to maintain mapped collaborative service delivery plans and produce a referral guide, and other service-mapping tools as required, in consultation with the steering committee and evaluator.
3. HJPs to maintain service delivery until June 2019, with quarterly reports to the steering committee.
4. Evaluator to provide six monthly reports and the final report to the steering committee.
5. Finalise all new resources for publication and distribution.

What should be delivered

1. An Indigenous LHC and user guide, published online and distributed in hard copy to relevant Indigenous services (within six months of project commencement).
2. An independent evaluation and report on the effectiveness of the LHC/HJP service delivery model in Indigenous settings.
3. Two years of collaborative, cross-sector legal service delivery (HJPs) in three Indigenous communities.
4. Other service-mapping, referral guides and collaborative planning templates developed and adapted by the three HJPs.
5. A project report.

Who should be involved in the delivery of this project

1. Project lead organisation.
2. Indigenous legal services and Community Legal Centres delivering programs to primarily Indigenous clients.
3. Nominated local Indigenous leaders participating in workshops.

How long it could take to deliver this project

Phase one: 6 months.

Phase Two: 18 months.

How much it could cost to deliver this project

\$300,000 (includes project management, workshop facilitation, graphic design and evaluation costs, and two years of service provision in three Indigenous communities)

2) *Mental Health Act 2016* collaboration project

Working group / legal assistance forum	Mental Health Service Planning Working Group
Proposal prepared by	Aged and Disability Advocacy Australia Queensland Advocacy Incorporated LawRight

The gap or problem and why should it be addressed

The Legal Australia-Wide Survey identified that the largest legal need in Queensland is people with a disability (80% of which have a mental illness). This project addresses three separate yet interrelated issues to address the legal needs of people with mental illness, intellectual disability and cognitive impairment:

1. Under the *Mental Health Act 2016* (MHA 2016) the Independent Patient Rights Advisers (IPRAs) will advise people of their rights and choices under new MHA. It is anticipated that IPRAs may also become problem noticers for other legal needs, outside of MHA issues (based on recent research that vulnerable people often have several legal problems and they are most likely to seek help from a health professional). The legal literacy of most health professionals is not necessarily high and would therefore benefit from a closer relationship or links with legal and advocacy services.
2. Under the MHA 2016, the Court Liaison Service (CLS) will play a greatly expanded role by performing clinical assessments to assist Magistrates to decide how to dispose of a matter. It is hoped that this will lead to the earlier and better identification of people with intellectual or cognitive impairment or acquired brain injury, and their diversion from the criminal justice system through linking with appropriate social services. However, the right social services for people who do not have a mental illness are often difficult to ascertain and access, especially for Magistrates and time poor CLS staff, duty lawyers and other advocates.
3. In 2016 the Mental Health Collaboration Project (MHCP) developed best practice resources for lawyers engaging with clients with a mental illness. The MHCP consulted widely with stakeholders in the mental health sector and some feedback from community lawyers highlighted that not all lawyers feel equipped to help this client group in spite of their high attendance at Community Legal Centres (CLCs).

How the gap or problem should be addressed

The project would:

- lay the foundations for collaborative service delivery, effective information sharing and strong referral pathways between the criminal justice system, Queensland Health and advocacy and support services to better assist individuals experiencing mental health issues or with intellectual disability or cognitive impairment; and
- improve identification and resolution of legal problems for people with people with mental illness, intellectual disability and cognitive impairment.

These objectives would be achieved through appointing a project officer to:

- identify needs by working with stakeholders and reviewing existing resources; and
- address those needs, including:
 - accurately mapping social services and legal and advocacy services. The compiled data would be searchable via a website, to enable providers on the ground to quickly identify appropriate services for their clients;
 - improve the legal literacy of support services (including IPRAs and the CLS) by using the Legal Health Check project resources, developing a glossary of legal terms and rights awareness building;
 - potential creation of resources for lawyers working with clients with a mental illness, intellectual disability or cognitive impairment, for example a stepped process to guide lawyers in top 3 areas of legal need; and
 - training to ensure resources created are used.

What should be delivered

- Review of existing resources including online services.
- Development/compilation of resources – housed on a website and promoted to stakeholders, including an accurate, web-based map and referral information source and resources for lawyers assisting the client groups (if need is sufficient).
- Development and provision of training for stakeholders particularly the CLS, IPRA's and CLCs that encourages collaborative service delivery, information sharing and referral pathways.
- Promotion, evaluation and refinement of resources and training.

(Mapping and training will draw on and complement existing resources, i.e. the MHCP and the Legal Health Check project).

Who should be involved in the delivery of this project

A consortium of organisations working with people with mental health and/or intellectual or cognitive disability Queensland legal assistance service providers, Queensland Health, Court Liaison Service, Magistrates Court, and community/social service providers.

A project officer could be appointed to lead the project with different members involved at different stages. The project officer would be based in one of the community organisations involved in the consortium.

How long it could take to deliver this project

12-18 months (full-time or part-time basis).

How much it could cost to deliver this project

\$150,000 (includes wages for research, training and coordination, travel, web-building and administrative costs).

3) Learning and development project

Working group / legal assistance forum	Community Legal Education Legal Assistance Forum
Proposal prepared by	Community Legal Centres Queensland

The gap or problem and why should it be addressed	
<p>The legal assistance workforce faces considerable cost and time barriers to achieving its need for professional development. These barriers are particularly pronounced for workers in rural and remote regions.</p> <p>A number of research projects (e.g. Access all areas and the follow-up Meeting the training and development needs of workers in legal assistance services) have recommended the appointment of a training and development officer for legal assistance service workers, to:</p> <ul style="list-style-type: none"> • facilitate the induction of all new staff in core areas of specialisation; • arrange regular Continuing Legal Education for lawyers in core areas of specialist law (that attract Continuing Professional Development points as set out by regulators); • arrange regular continuing education and professional developments for other key staff groups, including social workers, managers and leaders, business support staff; and • maintain a Knowledge Management Database. <p>The training should be focused on up-skilling staff in specialist legal issues that are both prevalent and relatively simple. The more complex or resource-intensive specialist legal issues should remain the province of the specialist centres and be referred appropriately at the earliest opportunity.</p> <p>It is further proposed that webinars and the use of interactive websites are an appropriate vehicle for training staff, as they are practical, both cost- and time-effective and documented to achieve superior results to other forms of training or education.</p>	
How the gap or problem should be addressed	
<p>The legal assistance workforce requires a learning and development program that is targeted, accessible and responsive to the reality of a high demand working environment. By simultaneously drawing on self-directed e-learning and implementing strategies to enhance communities of learning practice, workers will feel supported in their daily challenges of responding to the increasing complex legal needs of their community.</p>	
What should be delivered	
<p>A part-time sector learning and development coordinator could be appointed to:</p> <ul style="list-style-type: none"> • secure training opportunities based on identified need; • develop cross-sector training partnerships; • leverage fee-based training at a discount rate; • co-ordinate mini-regional conferences; and • develop sector specific training content. 	
Who should be involved in the delivery of this project	
<ol style="list-style-type: none"> 1. Project lead organisation. 2. Consultation with all legal assistance services that provide community legal education. 	

How long it could take to deliver this project

12 months.

How much it could cost to deliver this project

\$55,000 (includes wages for a project officer, subscriptions and resources, and venues and event costs).

4) Legal Health Check implementation project

Working group / legal assistance forum	Best Practice and Evidence Base Working Group
Proposal prepared by	LawRight

The gap or problem and why should it be addressed

The *National Strategic Framework for Legal Assistance 2015-20* encourages legal assistance services, government and other services collaborate to provide joined-up services to address people's legal and other problems.

The Legal Health Check Project 2014-16 (funded by the Department of Justice and Attorney-General [DJAG]) delivered training and resources for legal assistance services to collaborate with local non-legal services. These do-it-yourself resources are now freely available at www.legalhealthcheck.org.au.

Nevertheless, resources and support are required to assist legal assistance service providers to implement the Legal Health Check (LHC) resources and track data. Investing in collaboration at the frontline of service delivery will benefit clients and all the services which aim to support them.

How the gap or problem should be addressed

This project would offer up to five legal assistance service providers \$10,000 each to implement the LHC resources over 12 months. Preference would be given to service providers seeking to engage clients with multiple, intersecting disadvantage.

Interested service providers would:

- consider the existing LHC resources;
- submit an expression of interest to the Best Practice and Evidence Base Working Group (BPEBWG), indicating the client type/s they wish to engage with, the community or health agency they propose to collaborate with, and the legal issues they have capacity to address and/or warmly refer;
- nominate staff who would lead the initiative in their organisation; and
- undertake to work with LawRight and the BPEBWG to implement all aspects of the project, including active, structured engagement with a non-legal service, effective data capture/reporting and service delivery.

For each service provider engaged with this project, LawRight would be provided with \$1,000 to cover travel costs (at least one face-to-face visit per year), and the cost of overseeing/supervising the implementation.

LawRight would provide data capture templates and consistent evaluation frameworks across all service providers involved. LawRight would also engage the independent consultants who delivered the DJAG LHC evaluation (Encompass), for general guidance on the project. Encompass have indicated their willingness to provide their LHC data collection tools free of charge to LawRight for this project.

What should be delivered

1. Up to five service providers actively engaged with the DJAG LHC resources, including collaborating effectively with a non-legal community/health agency, with the intention of increasing targeted service delivery to highly disadvantaged clients.
2. A published roadmap and project timetable for each service provider to mark key implementation and review dates.
3. A published report containing data from the implementation of the project and further guidance/resources for service providers wanting to engage with the LHC resources and build collaborative practices.

Who should be involved in the delivery of this project

1. Project lead organisation to supervise the project.
2. Up to five service providers which elect to engage with the project.
3. BPEBWG to:
 - consider expressions of interest from service providers to participate in the project;
 - make recommendations to LawRight for final decision on participating service providers; and
 - provide general oversight of key milestones of the project.

How long it could take to deliver this project

14 months.

How much it could cost to deliver this project

\$55,000 (includes the participation of five service providers and a LawRight levy).

5) Regionalised collaborative service planning

Working group / legal assistance forum	Best Practice and Evidence Base Working Group
Proposal prepared by	Community Legal Centres Queensland

The gap or problem and why should it be addressed	
<p>The <i>National Partnership Agreement on Legal Assistance Services 2015-20</i> and reforms to Queensland's approach to legal assistance strategy and funding require collaborative service planning to enable service providers to work in partnership to address legal need, reduce duplication, and make sure clients receive appropriate, timely and joined-up assistance. The Queensland Legal Assistance Forum plays a vital role in this, and its constituent regional legal assistance forums also provide an opportunity to identify emerging need, coordinate local projects and pathways, and encourage collaboration and communication.</p> <p>However, both national approaches (evidenced by the Law and Justice Foundation of New South Wales) and work in Queensland (e.g. Community Legal Centres Queensland's <i>Updated evidence and analysis of legal need</i>) identify the importance of localised or regionalised planning for legal assistance services. This would allow local service providers, using evidence of legal need and their own expertise and experience, to identify services provided locally, service gaps, and opportunities to 'draw in' specialist, statewide services or identify service gaps that require additional funding. This work could then contribute to statewide planning.</p>	
How the gap or problem should be addressed	
<p>A regionalised service planning process could be piloted in three regions in Queensland.</p> <ol style="list-style-type: none"> 1. A centralised function (0.6 FTE) would develop tools and templates to assist in regional planning, and monitor progress, coordinated by a state-wide coordinator. 2. Regionalised service planners (3 x 0.5 4 FTE based in regional services) would develop regional service plans, including consultation with local services. 	
What should be delivered	
<p><u>Phase 1</u> (July-December 2017)</p> <ol style="list-style-type: none"> 1. Development of a single regional collaborative service plan (including service map, referral guide, collaborative plan and gap analysis) <p><u>Phase 2</u> (January-June 2018)</p> <ol style="list-style-type: none"> 1. Development of three regional collaborative service plans. 2. A template/guide to developing regional collaborative service plans. 3. Project progress report. <p><u>Phase 3</u> (July 2018-June 2019)</p> <ol style="list-style-type: none"> 1. Development of nine regional collaborative service plans. 2. Project final report. 3. Summary collaborative service plan to inform the next triennial funding cycle (2020-23). 	
Who should be involved in the delivery of this project	
<ol style="list-style-type: none"> 1. Project lead organisation. 2. Local legal assistance services in identified pilot regions. 3. Community services, courts and other stakeholders should be consulted in the development of regional plans. 	
How long it could take to deliver this project	
18 months.	

How much it could cost to deliver this project

\$200,000 (includes wages for a project coordinator for 18 months, wages for three local project officers for 7 months, and travel, consultation costs and other overheads.

6) “How to guide” – Delivering outreach legal services project

Working group / legal assistance forum	Best Practice and Evidence Base Working Group
Proposal prepared by	Community Legal Centres Queensland

The gap or problem and why should it be addressed	
<p>All legal assistance services deliver outreach legal services to meet the legal needs of people where they are. Increasingly, the Law and Justice Foundation of New South Wales research reflects the experience of legal assistance services, that this can be the best method for reaching vulnerable population groups.</p> <p>However, when developing new outreach services, practices differ across legal services and there is an opportunity to develop ‘best practice’ guidelines to assist services as they conceive, develop, deliver and evaluate outreach services.</p> <p>It is suggested that other areas of practice management could benefit from a suite of ‘how to guides’, and this is the first area suggested for consideration.</p>	
How the gap or problem should be addressed	
<p>Development of a ‘how to guide’ for delivering outreach legal services, comprising:</p> <ol style="list-style-type: none"> 1. Literature review; 2. Interviews and other stakeholder consultation; 3. Drafting, and testing with Best Practice Working Group; and 4. Publication and distribution. 	
What should be delivered	
A guide on how to deliver outreach legal services.	
Who should be involved in the delivery of this project	
<ol style="list-style-type: none"> 1. Project lead organisation. 2. Consultation with all legal assistance services that provide outreach legal help. 	
How long it could take to deliver this project	
6 months.	
How much it could cost to deliver this project	
\$20,000 (includes wages for a project officer for 6 months, and travel, consultation costs and other overheads).	