

DOMESTIC AND FAMILY VIOLENCE SERVICES AUDIT

1

Queensland Department of the Premier and Cabinet

Final Report January 2016

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Glossary of Terms

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ABS	Australian Bureau of Statistics	LAQ	Legal Aid Queensland
ADFVC	Australian Domestic & Family Violence Clearinghouse	MOUs	Memorandum of Understanding
ATSI	Aboriginal and Torres Strait Islander	NACLCL	National Association of Community Legal Centres
CALD	Culturally and Linguistically Diverse	NGO	Non-Government Organisation
CLSP	Community Legal Services Program	QADA	Queensland Aged and Disability Advocacy
CPIU	Child Protection Investigation Unit	QCS	Queensland Corrective Services
CQLC	Central Queensland Legal Centre	QHP	Quality Health Plan
DCCSDS	Department of Communities, Child Safety and Disability Services	QISU	Queensland Injury Surveillance Unit
DET	Department of Education and Training	QPILCH	Queensland Public Interest Law Clearing House
DHPW	Department of Housing and Public Works	QPS	Queensland Police Service
DJAG	Department of Justice and Attorney-General	ROGS	Report of Government Services
DPC	Department of the Premier and Cabinet	SCAN	Suspected Child Abuse and Neglect
DVLOs	Domestic Violence Liaison Officers	SLASS	Seniors Legal and Support Service
EAPU	Elder Abuse Prevention Unit	TASC	The Advocacy and Support Centre
GCDFVIR	Gold Coast Domestic and Family Violence Integrated Response	WQJN	Western Queensland Justice Network

Table of Contents

Executive summary	4
Introduction	18
1.1 Definitions	20
1.2 Purpose and scope of the audit	20
Methodological Approach	21
2.1 Program and service supply data	22
2.2 Data limitations	22
2.3 Demand data	23
2.4 Survey data	23
Queensland's domestic and family violence service system	24
Summary of findings	25
3.1 Agency involvement	26
Supply, Analysis and Mapping	30
Summary of findings	31
4.1 Overview of Supply, Analysis and Mapping	32
4.2 Total funding for services	33
4.3 Service profile across the state: state-wide and localised services	36
4.4 Service providers involved in the sector	38
4.5 Distribution of funding across service providers	40
4.6 Nature of services	45
4.7 Level of specialisation	45
4.8 Targeted cohorts	47
4.9 Intervention points	49
Demand Data Analysis and Mapping	50
Summary of findings	51
5.1 Overview of Demand Data Analysis and Mapping	52

5.2 Approach to demand analysis	52
5.3 Reported police incidents	53
5.4 Protection Orders (Magistrates Courts)	53
5.5 Regional analysis	54
5.6 When incidents reported	57
5.7 DV Connect calls	58
Aligning funding to demand	59
Summary of findings	60
6.1 Overview of Aligning funding to demand	61
6.2 Regional representation	62
Survey of providers	66
Summary of findings	67
7.1 Overview of survey findings	68
7.2 Limitations of survey	68
7.3 Service provision	69
7.4 Client cohorts	71
7.5 Partnerships	73
7.6 Joint planning	74
7.7 Data collection and monitoring	75
Geographic Service System Profiles	79
Appendices	91
Appendix 1 – Gap Analysis Calculation	92
Appendix 2 – Supply data analysis and mapping	93
Appendix 3 – Local Government Association and regional data	96
Appendix 4 – References	103

Introduction/Context

KPMG was commissioned by the Department of the Premier and Cabinet (DPC) to undertake an audit of domestic and family violence services. The audit arose out of the Special Taskforce on Domestic and Family Violence (the Taskforce) in Queensland chaired by the Honourable Quentin Bryce AD CVO, former Governor-General of Australia.

Special Taskforce on domestic and family violence

The Taskforce which was established on 10 September 2014 was requested to examine Queensland's domestic and family violence support systems and make recommendations to the Premier on how the system could be improved and future incidents of domestic violence could be prevented.¹ The result was the publication of the 'Not Now, Not Ever - Putting an End to Domestic and Family Violence in Queensland' report on 28 February 2015.

The Taskforce report served as a call to action for a strategic, system-wide response to this complex and growing problem. While domestic and family violence has been a longstanding problem, the evidence suggests the incidence and severity of domestic and family violence is increasing.

Domestic violence has devastating impacts on victims, families and their loved ones. It also has wider impacts on the community and economy. KPMG's report on the costs of domestic violence estimated that violence against women and children was costing the Australian economy \$13.6 billion per year and that without action to address the problem, these costs would rise to around \$15.6 billion in 2021-22².

As the Taskforce report highlights, the statistics themselves are frightening. In Queensland, every day on average there are 181 incidents of domestic and family violence reported to police while domestic and family violence related homicides make up more than one third of all homicides occurring in the State³.

 KPMG (2009). The Costs of violence against women and their children, produced for the Department of Families, Housing, Community Services and Indigenous Affairs, Australian Government In addition to outlining the extent of the domestic and family violence problem in Queensland, the Report put forward 140 recommendations – all of which have been accepted by the Queensland Government in its subsequent response.

The audit is in direct response to Recommendation 71 of the Taskforce which recommends that:

 The Queensland Government undertakes an immediate audit of services to ensure adequate resources are available to meet demand for specialist domestic and family violence services, including perpetrator intervention initiatives and specialist shelters.

This report is the first step in examining the current state of domestic and family violence in Queensland. In particular, it is the first attempt at quantifying the level of demand and supply of services funded and/or provided by the State Government.

Service delivery system

As was highlighted in the Taskforce report, Government does not currently have a clear picture of the full range of services available to meet community need or the level of funding currently dedicated to these services.

While there have been some efforts made to improve the level of information, detailed service mapping is needed to provide a more comprehensive picture of the current service delivery system and help guide future resource allocation decisions.

Due to significant data limitations which are discussed later in the report, it has not been possible to provide a definitive picture of the current service delivery system or the level of demand across the State. However, the report provides a starting point for Government to consider where there may be gaps in services and to prioritise future areas for investment.

^{1.}Special Taskforce on Domestic and Family Violence website. About the Taskforce. Queensland Government. Available from: <<u>https://www.qld.gov.au/community/getting-support-health-social-issue/about-domestic and family violence-taskforce</u>>, accessed November 2015.

^{3.} Special Taskforce on Domestic and Family Violence website. About the Taskforce. Queensland Government. Available from: <<u>https://www.qld.gov.au/community/getting-support-health-social-issue/about-domestic and family violence-taskforce</u>>, accessed November 2015.

Purpose and scope of the audit

The purpose of the audit of domestic and family violence services was to develop a detailed understanding of:

- the current availability and distribution of specialist domestic and family violence services including the level of investment in each sector and service area;
- the demand for services across the State; and
- the strengths and weaknesses of the current service delivery system.

The audit has included a supply and demand analysis of specialist and generalist services, targeting people experiencing domestic and family violence. The results of the audit will be used to inform a long-term strategic funding and investment model for domestic and family violence services.

The scope of the audit covers State Government programs and services funded in the 2014-15 financial year and over the forward estimates (including both State and Commonwealth funded programs). Services funded by Local Governments or through other funding sources were not within scope.

This report constitutes the final report for the audit. The final report provides:

- A system-wide analysis of programs delivered in Queensland to prevent and address domestic violence against women and children, including system-wide mapping of service supply across the state and the corresponding demand in each location;
- An analysis of the discrete investments, usually delivered as recurrent grants across Queensland Government agencies for preventing and dealing with domestic and family violence and the support of victims;
- A comparative **analysis of the funding allocations for services** aimed at preventing and addressing domestic and family violence in Queensland including information about program and service funding by organisation, service provider, location, service type and target cohort.

- A **summary of findings** from analysis of programs, discrete investments and individual funding allocations; and
- Identification of **areas for future consideration** based on the findings of the audit and demand/supply analysis.

Methodological approach

The audit consisted of three key activities which included:

- conducting a supply and demand analysis;
- administration of a survey to non-government organisations (NGOs) and government agencies/service providers; and
- reporting including presentation of findings at key points throughout the audit to the Inter-Departmental Committee.

A range of primary and secondary data was collected and analysed as part of these activities which is described below.

1. Program and service supply data

Prior to commissioning KPMG to undertake the audit, DPC provided a single data collection template to State Government departments and statutory authorities that fund domestic and family violence services. The data collection template included a request for agency, program and service provider level information. It also asked for a comparative split of the funding provided by State and Commonwealth governments.

Completed data collection templates were received from the Department of Communities, Child Safety and Disability Services (DCCSDS), Department of Housing and Public Works (DHPW), Department of Justice and Attorney-General (DJAG), and Legal Aid Queensland (LAQ). Mainstream service provider agencies like Queensland Health (QH) and the Queensland Police Service (QPS) were not able to complete the template provided. This was mainly due to the fact that it is not possible to separately identify the amount of funding for domestic and family

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violence services in these agencies. However, QPS provided indicative cost estimates for domestic and family violence services based on earlier work done by KPMG which have been referenced in the report.

The data relating to service provision was cleansed based on a number of variables including:

- · the type of services provided
- · the level of specialisation
- · mode of service delivery
- timing of service (e.g. prevention or post crisis)
- target audience.

A number of generalist programs were also excluded from the analysis because it was not readily apparent how much of the funding was related to addressing domestic and family violence compared with other social services. State-wide service providers such as DV Connect were excluded from the service mapping component in order to more accurately map opportunities for improved service access at the regional level and to determine relative need.

2. Program and service demand data

There is no precise measure of the level of demand for domestic and family violence services. QPS provided extensive data on police incidents including a regional and time series profiles. This data along with data on court protection orders sourced from publicly available data have been used as the main proxy measures of demand for domestic and family violence services.

Overall, the data is expected to have understated the level of demand due to significant under-reporting (up to 58 per cent of women who experience violence from an ex-partner do not report it to police).⁴ Data obtained from QPS regarding reported occurrences of domestic violence along with court protection order data was coupled with ABS population data to calculate the rate of incidents or court

orders per 1,000 people at a regional level. The purpose of the demand analysis was to develop an understanding of service need across the State and to determine relative areas of need.

3. Surveys of government and non-government service providers

KPMG also collected primary data via an online survey of government and non-government service providers who deliver domestic and family violence services Queensland. The survey was designed to elicit system and service level information and to provide a more in depth understanding of the strengths and weaknesses of the current service system in order to identify areas of improvement. This survey was not intended to assess the individual performance or funding needs of a particular organisation but rather to paint a picture of how services are operating and working together in particular locations.

The survey was administered in five locations across Queensland comprising a mix of urban, suburban, regional and remote locations, including: the Gold Coast, Ipswich, Western Downs (Roma), Rockhampton and Mt Isa.

The information provided has been used to understand the types of services that organisations offer to people who have experienced or are experiencing domestic and family violence; the extent to which people are able to access required services; service and referral pathways; the quality of organisations' connections or linkages to other organisations; and organisations' capacity for collaboration, case management, planning and review processes.

Data limitations

As noted previously, the scope of the audit is restricted to funding provided in 2014-15 and to specialist services provided by select agencies. Specifically, the audit does not include services provided by Queensland Health, DET or QPS (including victim and perpetrator services), generalist services (including

4. Australian Bureau of Statistics, 2015, Experimental Family and Domestic Violence Statistics, cat. No. 4510.0, Canberra, Australian Bureau of Statistics, 2012, Personal Safety Survey, Cat. No. 4906.0, Canberra.

those which support significant numbers of domestic and family violence clients such as general homelessness and child protection services), state-wide services, outreach services, and services funded by the Commonwealth. These limitations must be taken into account in any interpretation of the Report's findings and caution exercised. In addition, data from the survey of government and non-government providers must also be cautiously interpreted due to the small sample size and the self-selection methodology.

Due to these limitations, and as acknowledged in various parts of the Report, the audit should be seen as a starting point for further analysis to identify service gaps, service effectiveness and areas for improvement.

Domestic and family violence programs and services

The survey findings revealed there are multiple government departments involved in delivery of services to address family and domestic violence. There are also many points of referral and entry into the system for victims of domestic violence. This creates a complex and fragmented system for victims of domestic violence to interact with for intervention support and crisis response.

The key government Queensland's domestic and family violence system is described in Table 1.1. A broad range of service 'types' are offered by service providers, generally categorised as: Counselling Support Programs; Family Violence Services; Legal Services; Specialist Homelessness Services; Telephone Helplines; and Other (e.g. events and community education).

Many of the services, while offered to any adult in the community, often target specific issues such as sexual abuse/violence, addictions including problem gambling, alcohol and other drugs, as well as people experiencing, personal, family, relationships and/or financial hardship. Across the domestic and family violence service system, government agencies fund a range of service providers to deliver specialist and generalist services to people experiencing domestic and family violence.

Table 1.1: Queensland agency involvement in domestic and family violence services.

Government Agency	Roles and responsibilities
DCCSDS	DCCSDS receives the most funding for domestic and family violence services. The Child, Family and Community Services agency within the Department is leading the response to domestic and family violence.
DHPW	DHPW is primarily involved in domestic and family violence services through the provision of emergency accommodation under the Department's Homelessness Program.
QPS	QPS provides a front line response to events of domestic and family violence. Police serve protection orders issued by the Court and are also responsible for the service of private applications and other court documentation.
DJAG	The main response to domestic and family violence by DJAG is through the provision of generalist legal services for people experiencing domestic and family violence. This predominantly consists of information and referral, court support, legal advice, representation and casework which are provided by LAQ and community legal services.
QCS	QCS provides funding for the Positive Futures program which is a low intensity program for ATSI offenders, focussing on family violence and substance abuse.
QH	QH provides mainstream services including emergency department, hospital and other health services to people experiencing domestic and family violence services.
DET	DET is not considered part of the domestic and family violence service system response but schools can play an important role in combatting domestic and family violence by changing community attitudes amongst young people.

Source: KPMG 2015

Specialist services were reported within the following funding areas, by agency:

- DCCSDS: Domestic and family violence Funding Area and Specialist Legal and Support Services.
- DHPW: Homelessness Program.
- DJAG: Community Legal Services Program (CLSP).
- LAQ: Domestic Violence Duty Lawyer Services.

DCCSDS, DJAG and DHPW provide both generalist and specialist services.

Program and service supply

The Special Taskforce on domestic and family violence in Queensland noted the "uneven or disproportionate allocation of funding for services" in Queensland with some regions commenting that services are markedly underfunded to manage the increase in referrals"⁵. For the purposes of the audit, the distribution of funding across regions has been analysed based on information provided by Queensland Government agencies about their programs and services including generalist and specialist services.

The delivery of multiple and varied services by departments, funded through various mechanisms and based on differing funding methodologies, complicates the analysis of the total level of funding available for domestic and family violence services and distribution of that funding. Based on the information provided by agencies, total funding available for domestic and family violence services in Queensland was estimated at \$506.6 million in 2014-15. This includes Commonwealth and State funding provided for State administered programs (noting it excludes Local Government and solely funded Commonwealth programs as well as funding for mainstream services like health and criminal justice responses).

Previous work undertaken by KPMG for the QPS estimated the costs of responding to domestic and family violence by the QPS to be around \$47 million

5. Special Taskforce on Domestic and Family Violence report, "Not Now, Not Ever". Transforming Queensland's service system response. p. 214

per annum. This amount has not been included in the overall funding estimate below given the data was prepared using a different methodology and not collected via the template supplied to agencies by DPC.

Table 1.2 shows the funding allocations for each government department. DCCSDS had the highest levels of investment with total funding of \$429.4 million.

DCCSDS reported child protection services and other family support services in its data collection template. While these services are used to support children and families escaping domestic and family violence, they are not dedicated programs and have therefore been excluded from the detailed audit assessment. This reduces the overall level of funding from \$506.6 million to \$104.8 million.

Table 1.2: Funding for Domestic and Family Violence Services 201	4-15
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Government agency	Funding 2014-15
DCCSDS	\$ 429,447,692
DHPW	\$ 32,061,789
DJAG	\$ 20,642,156
LAQ	\$ 24,178,000
QCS	\$ 285,981
Total All Agencies	\$ 506,615,618

Source: KPMG analysis of data supplied by DPC 2015.

The \$104.8 million reported by agencies includes funding for a range of state-wide and region specific domestic and family violence service providers. State wide programs are provided across the State and not associated with a particular region or location. Table 1.3 shows the various state-wide programs included in the \$104.8 million.

For the purposes of mapping services on a regional basis, these state-wide services have been excluded. This reduces the \$104.8 million to \$70.3 million for 2014-15 comprising the programs shown in Table 1.4 below.

Table 1.4: Total funding (excluding State-wide services) 2014-15

Agency	Prog	2014-15 (\$)	
	Generalist	Specialist	Total
Justice and Attorney- General	Victim Services Programs CLSP Community Justice Groups Positive Futures	CLSP	\$16.05M
LAQ		Domestic violence duty lawyer	\$0.24M
DCCSDS		Domestic and family violence Funding Program Specialist legal support and advice	\$24.42M
DHPW	Homelessness* program	Homelessness* program	\$29.58M
Total Spend	\$22.30M	\$48.00M	\$70.3M

Source: KPMG 2015

* Over \$100 million is provided for the Homelessness program but \$29.6 million of this funding is provided for 55 services to support women escaping domestic and family violence and an additional 10 services identified to have assisted a significant number of women and children affected by violence.

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Table 1.3 – State wide programs

State-wide Service programs identified in Audit				
Generalist	Specialist			
Legal representation services	Homelessness Program			
Family dispute resolution				
Legal advice and information services	Some domestic and family violence funding program services (eg DV Connect)			
Community Legal Services Program (CLSP)	CLSP			
Community legal education				
Elder Abuse Prevention unit (EAPU)				
Victim Services Primary/Extended Programs				
QCS: Positive Futures				
Victim Assist				
Total Spend - \$29.09M	Total Spend - \$5.47M			
Source: KPMG 2015				

10

Commonwealth/State Shares

Both the Commonwealth (53 per cent) and State Governments (47 per cent) fund domestic and family violence programs. The Commonwealth is the majority funder of legal representation services and homelessness services while the State is the majority funder of specialist domestic and family violence services. While some of the agencies described previously are involved through direct service provision (primarily the mainstream service agencies), the majority of domestic and family violence services are funded by Government but delivered by non-government organisations (NGOs).

Service Providers

Analysis of data made available to the audit reveals that there are 122 discrete service providers, some operating in more than one region, which are funded to deliver services to people experiencing domestic and family violence.

Of the \$70.3 million allocated to providers in 2014-2015, just under half of all funding is directed to 20 service providers – see Table 1.5 for the top 20 funded providers.

Funding ranges from \$0.98 million to \$2.7 million per year for the top 20 funded providers. There are also a large number of service providers receiving a small amount of this funding. For example, 31 service providers received less than 5 per cent of total funding. An estimated 23 providers received funding from more than one agency.

Table 1.5 – Top 20 Funded Organisations by Agency

Service Providers	DCCSDS	DHPW	DJAG	Grand Total
	\$	\$	\$	\$
Domestic Violence Prevention Centre Gold Coast Inc	2,753,271			2,753,271
The Corporation of the Trustees of the Roman Catholic Archdiocese of Brisbane	1,735,498	985,628		2,721,126
Uniting Care Community	396,417	1,875,150		2,271,567
Caxton Legal Centre Inc	873,725		1,279,547	2,153,272
Ozcare	170,899	1,930,538		2,101,437
Coalition on Criminal Assault in the Home Northern Queensland Inc	1,728,519	99,037		1,827,556
The Salvation Army (Queensland) Property Trust		1,524,420		1,524,420
The Advocacy and Support Centre Inc	356,629		1,132,792	1,489,421
Working Against Violence Support Service Inc	1,399,111			1,399,111
Micah Projects Inc	1,357,861			1,357,861
Caboolture Regional Domestic Violence Service Inc	1,312,921			1,312,921
Domestic Violence Action Centre Inc	1,292,516			1,292,516
Women's Legal Service Inc	78,926		1,165,232	1,244,158
Relationships Australia Queensland	1,237,875			1,237,875
Cairns Community Legal Centre Inc	463,646		684,493	1,148,139
Queensland Public Interest Law Clearing House (QPILCH)			1,145,200	1,145,200
Anglicare	333,987	810,815		1,144,802
The Uniting Church in Australia (Queensland)		1,129,284		1,129,284
YFS Ltd	672,841		415,580	1,088,421
Carina Youth Agency Inc		986,303		986,303

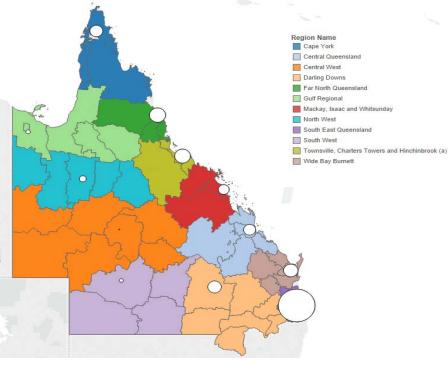
Note funding for community legal centres includes funding for domestic and family violence services as well as broader legal services to the community.

Source: KPMG 2015

Commonwealth/State Shares

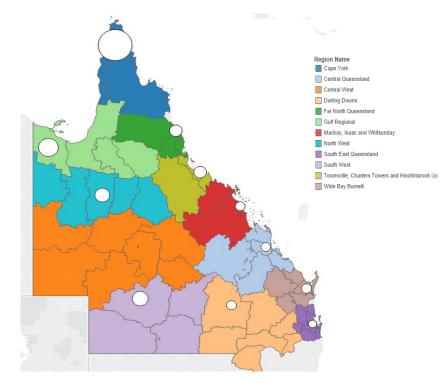
The results shown in Figure 1.1 indicate that the majority of funding for domestic and family violence related services is allocated in the south east corner of the State i.e. funding generally matches the population distribution. Gulf Regional and South West Regions had relatively low levels of funding and no funding for service providers operating in the Central West Region was identified. However, this does not account for statewide, outreach or Commonwealth funded services in that particular region.

Figure 1.1: Total Funding by region 2014-15



The highest level of funding was provided to the Cape York region with \$202,023 per 1,000 people, more than three times the amount of funding compared to the next highest region, Gulf Regional with \$67,332 per 1,000 people. Central West and South east Queensland had the lowest levels of funding per person.

Figure 1.2: Funding per 1000 persons by region 2014-15



Source: KPMG 2015

Source: KPMG 2015

Service Type

Legal services and specialist homelessness services comprise the largest number of services across most regions making up 42 per cent and 31 per cent of total investment respectively. There are regional variations with some regions having higher levels of homelessness services compared to the State average while some regions have little or no access to specialist legal services like Cape York and South West. However, residents can access state-wide services including those provided by the Queensland Indigenous Family Violence Legal Service.

The analysis of the data supplied by agencies suggested that the majority of investment is in service providers delivering post-crisis responses. Only a few service providers delivered prevention or advocacy services exclusively. Service providers that offer these types of services generally provide them in concert with other services. For example, LAQ delivers early intervention services such as dispute resolution but also offers post-crisis services such as legal information. There were also very few services targeting programs exclusively to perpetrators.

Program and service demand

The Taskforce noted that reported occurrences of domestic and family violence have increased each year since 2010-11. This indicates an ongoing, and increasing need for domestic and family violence services in Queensland. The analysis of demand is in accord with the Taskforce data and indicated that the overall number of reported incidents and protection orders in Queensland has increased over time, with a noticeable upward trend. The data show that:

- Reported incidents of domestic and family violence have increased by 44 per cent from 50,235 in 2010 to 72, 514 in 2014 calendar years, equating to approximately 199 reports occurring per day (the highest level of increase was in the Mackay, Isaac and Whitsunday region where there was an 87 per cent increase)
- Court protection orders have increased by 18 per cent between the 2009-10 and 2013-14 fiscal years, increasing from 17,125 to 20,148 (equating to approximately 55 protection orders per day).

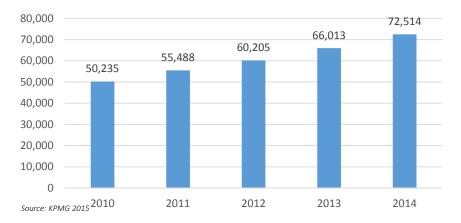
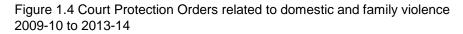
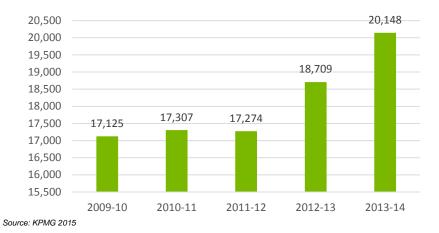


Figure 1.3: Police incidents related to domestic and family violence 2010-2014





The demand analysis revealed there is variation in incident rates across the state with particularly high rates of domestic and family violence incidents in Indigenous communities.

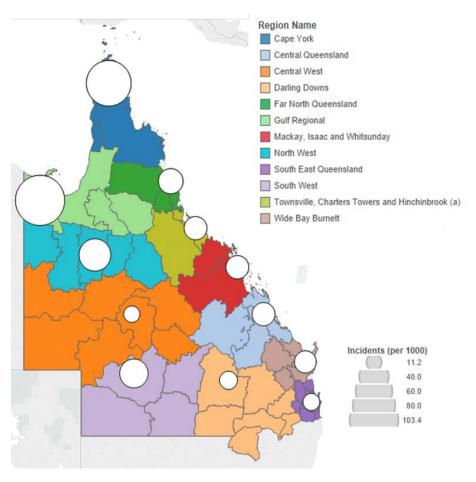
The area with the highest level of demand was the Gulf Region with 103.4 incident reports per 1000 people more than seven times the state average of 15.5 per 1000 persons. The lowest rates of reported incidents were in Central West (11.2 incidents per 1000 incidents) followed by South east Queensland (12.1 reports per 1000 people).

Police incidents were originally mapped by LGA which highlights the extremely high rates in the State's discrete Indigenous communities where rates exceed more than 200 incidents per 1000 in the top 5 LGAs as shown in the Table below.

Table 1.6 – Police DFV Related Incidents Top 10 LGAs

LGA	Incidents	Incidents per 1000	
Cherbourg	357	277.6	
Woorabinda	269	270.1	
Kowanyama	248	222.4	
Yarrabah	585	218.2	
Doomadgee	278	201.2	
Palm Island	497	191.9	
Mornington Island	199	163.9	
Wujal Wujal	37	129.8	
Aurukun	162	115.6	
Carpentaria	245	111.0	

Figure 1.5: Police incidents per 1,000 persons per region in 2014



Source: KPMG 2015

Source: KPMG 2015

Aligning funding to demand

KPMG undertook a preliminary 'gap analysis' in order to understand the relative difference between funding allocated to regions across the State and the actual demand for services in those locations. The proxy demand indicator is QPS data on the reported incidents of domestic and family violence per 1,000 persons. The proxy supply indicator is funding in each of the regions plus the state-wide funding per 1,000 persons. The index developed (called a "gap score" here) is a relative measure of demand over supply. It is the incidents per 1,000 persons divided by the funding received per 1,000 persons. A higher index score means that relative to other regions, there is a lower level of funding provided per recorded incident of domestic and family violence. The index is not a measure of absolute need. Rather it is a simple measure of relative need and does not take

into account the full range of services and funding available including funding for court, police and health services. As such, the results need to be interpreted with some caution.

Table 1.7 shows the gap scores, developed using 2014-15 funding. The highest gap score of 1.52 is in the Central West region which indicates that this region may require more funding to meet local demand for domestic violence services, relative to other regions, while the lowest gap score of 0.41 in the Cape York and Torres region which indicates that this is an area with relatively high levels of funding compared to other regions.

The gap analysis presented provides a broad indication of the mismatch between current need in each region and the current distribution of investment in selected services. Refer to Appendix 1 for full details on the calculation for the gap index.

Region	Total Incidents	Region Funding \$	Population	Incidents (per 1000)	Region Funding \$ (per 1000)	State-wide \$ (per 1000)	Gap Score
Central West	140	\$0	12,458	11.2	\$0	\$7,405	1.52
Gulf Regional (a)	684	\$445,534	6,617	103.4	\$67,332	\$7,405	1.38
Central Queensland	5,252	\$3,624,317	229,483	22.9	\$15,793	\$7,405	0.99
North West	1,288	\$1,140,044	29,950	43	\$38,065	\$7,405	0.95
Mackay, Isaac and Whitsunday	4,082	\$2,985,227	180,200	22.7	\$16,566	\$7,405	0.94
Wide Bay Burnett	5,787	\$5,182,010	286,705	20.2	\$18,074	\$7,405	0.79
Far North Queensland	6,376	\$6,586,937	246,168	25.9	\$26,758	\$7,405	0.76
South West	275	\$347,702	8,030	34.2	\$43,300	\$7,405	0.68
South East Queensland	37,938	\$34,975,273	3,138,994	12.1	\$11,142	\$7,405	0.65
Townsville, Charters Towers and							
Hinchinbrook	5,191	\$6,265,943	233,907	22.2	\$26,788	\$7,405	0.65
Darling Downs	3,745	\$4,572,472	273,272	13.7	\$16,732	\$7,405	0.57
Cape York	1,756	\$4,162,088	20,602	85.2	\$202,023	\$7,405	0.41

Table 1.7: Gap score for each region

Source: KPMG analysis of QPS data and data supplied by DPC, 2015

Service system strengths, challenges and areas for improvement

To assist in understanding the operation of the domestic and family violence service system across the five selected locations: Gold Coast, Ipswich, Roma (Western Downs), Rockhampton and Mount Isa, a service profile was developed for each LGA. Information included the geographic location in the state; demographic characteristics of residents in the LGA; an overview of the level of funding provided in the LGA; the agencies and programs being provided in the relevant area; and a description of key service providers operating in the LGA and the services they provide.

Survey Findings

Generally, services considered they were performing well in terms of working together to meet client needs in a resource constrained environment. Organisations also rated themselves highly on their capacity to undertake risk assessment and planning and to respond in crisis situations. Most had formed partnerships and joint planning was evident amongst NGOs but not to the same extent in the government sector.

Service delivery gaps

Service system strengths, challenges and areas for improvement were canvassed with government and NGOs providing specialist domestic and family violence service providers in the five selected LGAs.

The majority of the NGOs provided counselling support services while the majority of government agencies surveyed providing information and referral services. While there were mostly common issues identified across the five locations, the smaller communities like Mount Isa and Roma reported particular challenges with supporting remote locations in their areas .

The feedback indicated a number of gaps in service delivery in particular around;

- Housing and emergency accommodation;
- Perpetrator programs;

- · Early intervention and prevention programs
- · Access to legal and other support services in rural areas

In addition, gaps in services that cater for particular population cohorts such as ATSI people, youth, people from culturally and linguistically diverse backgrounds, and people with a disability were highlighted by those service provider surveyed in the five locations.

Areas for Improvement

Government and non-government service providers noted that while the current service system arrangements as a whole were mostly adequate in addressing the needs of people escaping domestic and family violence, there is room for improvement across a number of domains.

The main areas for improvement were identified as:

 The need for changes to funding arrangements to provide more funding to meet increased demand and for funding contracts to focus more on outcomes;

"Decisions for funding has to be based on the needs of the community, in consultation with the Sector, and made in well thought through strategic ways - not based on politics! Step into co-design in a real way which includes seeing services as partners not just contractors."

Non-government provider

 Provision of a more holistic approach for dealing with both victims and perpetrators across the entire system from police, courts, through to emergency responses and providing ongoing support for victims

"There is a significant disconnect between and within all of the service provisions related to DV. Presently, the demand outweighs service provision. This service provision is eclectic in nature with mixed modalities of delivery and availability."

Government provider

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• Better **information systems and data sharing** to support integrated service delivery and help build the evidence base.

"A well designed, custom built (for crisis intake, counselling and events management to mention a few) data and client management system for the sector would greatly improve information management and consistency of data gathered. The sector wants to improve our local evidence base to better inform practice and strategic direction and that requires a targeted, useful system that gathers important and meaningful data."

Non-government provider

Conclusion

The audit represents an attempt for the first time to comprehensively identify the level of funding and the distribution of services related to domestic and family violence across the State. The audit has been limited by the level of information obtainable from Queensland Government agencies and has relied primarily on the funding analyses provided for dedicated programs delivered by DCCSDS, DHPW, DJAG, LAQ and QCS. As such, this analysis does not account for the funding provided for generalist services such as police, court, and health services.

The analysis has attempted to measure the demand for domestic and family violence services again noting limitations with the available data and the reliance on police incidents and court protection orders as the main proxy indicators for demand. The funding supply analysis has been combined with demand to give an indication of where there may be gaps in services and areas of unmet need as well as potential overlap and duplication.

Areas for Future Consideration

The audit has highlighted a number of areas where the level of investment and availability of services for the community should be reviewed based on a relative assessment of need and funding levels including in the following regions: Central West; Gulf Regional; Central Queensland; North West; and Mackay, Isaac and Whitsunday regions.

The audit also indicates that most of the services and funding is skewed towards post-crisis support with roughly 74 per cent of current investment directed to legal services and homelessness services.

Future investments should seek to balance the need for increased resourcing at the front end in early intervention and prevention with the need to maintain sufficient resourcing to meet the demand for crisis responses.

The audit has not considered the evidence base about what particular interventions or services are the most effective in responding to domestic and family violence. Future investments especially in the early intervention and prevention space will need to be guided by evidence about what works including dealing with perpetrators.

The appallingly high levels of domestic and family violence in Indigenous communities also suggests that tailored responses will need to continue to be developed to address the devastating consequences for women and children in these communities.

Finally, information about costs and expenditure across Government on domestic and family violence is limited. For example, resourcing for services provided by Queensland Health, QPS, and the courts has not been included. Consideration may therefore need to be given to enhancing data collection and recording systems across agencies to improve the availability of data on the costs of domestic and family violence more broadly across the system.

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Introduction

Introduction

The Taskforce investigated and revealed the extent of domestic and family violence in Queensland's communities. The resulting report "Not Now, Not Ever" served as a call to action for a strategic, system-wide response to this complex and growing problem. In addition to outlining the extent of the problem, the Report put forward 140 recommendations – all of which have been accepted by the Queensland Government in their subsequent response.

Key recommendations of the Taskforce included:

Recommendation 71

The Queensland Government undertakes an immediate audit of services to ensure adequate resources are available to meet demand for specialist domestic and family violence services, including perpetrator intervention initiatives and specialist shelters.

Recommendation 72

The Queensland Government develops a long term funding and investment model, informed by the audit on the best mix of specialist and generalist services, to be implemented, as a minimum, over the five year forward estimates commencing in 2016-2017, to meet needs and address any gaps.

In response to Recommendation 71, DPC commissioned KPMG to undertake an audit of state funded services which includes a supply and demand analysis of specialist and generalist services targeting people experiencing domestic and family violence.

This is the Final Report outlining findings from the audit. The report provides an overview of the range of services available across Queensland that have been identified as related directly to domestic and family violence, the level of funding currently dedicated to the different service types and the need for and demand for services. This audit excludes Commonwealth funding except where Queensland programs and services are jointly funded with the Commonwealth government.

The report covers the following elements:

- Section 2 outlines the methods and approach to undertaking the audit, including key assumptions that have been applied during the service mapping and analysis
- Section 3 provides a system overview which describes the domestic and family violence service system in Queensland. This includes an overview of the agencies that are involved, the types of services that are offered both to the general public and to people experiencing domestic and family violence, the cohorts that are targeted by services and programs, and the geographical distribution of service providers across Queensland;
- Section 4 discusses the supply of domestic and family violence services across Queensland in 2014-2015. This section provides information about program and service funding by organisation, service provider, location, service type, and target cohort;
- Section 5 describes the demand for services across Queensland and in particular demand by identified high risk populations. The analysis considers demand at the state level, by LGA level and where appropriate at a regional level, and discusses variations across the state;
- Section 6 provides an analysis of service gaps identified in the supply and demand analysis and suggests potential areas of overlap and duplication; and
- Section 7 reports on the findings of providers surveyed including strengths and weaknesses in the current system and opportunities for improvement.

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1.1 Definitions

There is no accepted universal definition of domestic and family violence services. For the purpose of this audit, the definition of domestic and family violence services is as set out by DPC in the original consultancy brief as:

"... any program or intervention which provides specialist services, including perpetrator intervention initiatives and specialist shelters, to victims and perpetrators of domestic violence. In addition, it includes generalist services or interventions with a significant or identifiable domestic and family violence base that address victimisation of the client through support, financial assistance, housing support, court support, legal assistance, counselling or justice responses.⁵"

While KPMG worked to adhere to this definition, it was not always possible to maintain a strict demarcation between 'generalist' versus 'specialist' services due to variations in the way in which agencies classified services. For the purpose of the audit, KPMG retained the classification that was given by the respective agencies.

1.2 Purpose and scope of the audit

The purpose of the audit of domestic and family violence services is to develop a detailed understanding of the current availability and distribution of specialist domestic and family violence services including the level of investment in each sector and service area, the demand for services and the strengths and weaknesses of the current service delivery system. The audit will inform a long-term strategic funding and investment model for domestic and family violence services.

The scope of the audit covers State Government programs providing specialist domestic and family violence services, funded in the 2014-15 financial year and over the forward estimates.

Both State funded programs and programs jointly funded by the State and the Commonwealth were considered as part of this audit. However, services funded by Local Governments, those exclusively funded by the Commonwealth or through other funding sources were not within scope.

Data and information to inform the audit has been sourced from State Government departments and statutory authorities including: DCCSDS; DHPW; DJAG; QCS; and LAQ.⁶

Data from the above departments related predominantly to service supply and was provided in a data collection template designed and distributed by DPC, in advance of the audit beginning. In addition QPS provided extensive data on incidents of domestic and family violence to inform the audit.

A survey of Queensland government agencies and non-government service providers was also undertaken to provide a more in depth understanding of the strengths and weaknesses of the current service system and to identify areas of improvement.

The audit was conducted over the period July 2015 to November 2015.

Queensland Health provided information around estimated presentations at emergency department facilities due to domestic violence.

^{5.} Department of Premier and Cabinet, 2015, Terms of reference – Audit of Existing Specialist domestic and family violence Services, including perpetrator intervention initiatives and specialist shelters.

Methodological approach

Methodological approach Key activities and data sources

The audit consisted of three key activities:

- 1. Conduct of a supply and demand analysis;
- 2. Administration of a survey to NGOs and government agencies; and
- 3. Reporting, including presentation of findings at key points throughout the audit to the Inter-Departmental Committee.

A range of primary and secondary data was collected and analysed as part of these activities which is described below.

2.1 Program and service supply data

Prior to commissioning KPMG to undertake the audit, DPC provided a single data collection template to State Government departments and statutory authorities that fund domestic and family violence services.

Data collection templates were received from DCCSDS, DHPW, DJAG, and LAQ (this excludes duplicate or updated copies of data collection templates). Mainstream service provider agencies like Queensland Health and the QPS were not able to complete the template. This was primarily due to the fact that it is not possible to separately identify the amount of funding for domestic and family violence services in these agencies. KPMG previously undertook a study estimating the level of resources devoted by the QPS to dealing with domestic and family violence which has been referenced in this report.

The data collection templates contained agency, program and service provider level information including the funding amounts allocated by both State and Australian Governments to programs and services delivering generalist and / or specialist domestic and family violence services. Where possible, clarification was sought with data custodians to provide further detail and accuracy.

In addition to the data collection templates, KPMG was provided the following information to support the analysis and build an understanding of the scope and breadth of the sector:

- information from the Queensland Injury Surveillance Unit (QISU) on female domestic violence injuries; and
- documentation (The Taskforce Submissions) provided by LAQ and the DJAG.

2.2 Data Limitations

There were limitations to the usefulness and comparability of the data provided by agencies. Agencies were asked to provide State and Commonwealth funding information at the service provider level and where possible at the service outlet level. DCCSDS and DHPW provided data down to the service outlet level. Consequently, the analysis was lifted to the service provider level to ensure that the data was directly comparable.

Appendix 2 provides more detail on the limitations and the approach to dealing with these limitations – the advice should be considered when using and interpreting the data and findings in the report.

To address inconsistencies in the data, and enable mapping of the service providers, the data was cleansed and some variables were recoded. In order to map services to service providers and target cohorts, a number of assumptions were also made about the nature of the services, the service mode and the definition of the service area (LGA). A full list of the 'rules and assumptions' applied to the data are provided in Appendix 2 and Appendix 3.

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2.3 Demand data

There is a lack of consistent, reliable and comparable data on the incidence of violence against women and children.

For the purposes of this exercise, KPMG sought data on court protection orders and police incidents as proxy measures of demand. This included publicly available data as well as data provided to KPMG for the purpose of the audit.

It should be noted that data on the number of police incidents is separate from the number of perpetrators. A single perpetrator can result in more than one police incident and occasions of service for providers of domestic and family violence services.

The purpose of the demand analysis was to develop an understanding of the need for services across the State and to determine relative areas of need. Overall, the data is expected to understate the level of demand due to significant underreporting. Caution also needs to be exercised in interpreting the data as increases in reports of domestic and family violence can occur in response to increasing community awareness raising activities.

Key sources of demand data included:

- Data supplied by the QPS on the total number of domestic and family violence incidents by calendar year and locality;
- Administrative data from Annual Reports by the Magistrates Court of Queensland including the number of domestic and family violence related court protection order by financial year and by magistrate court; and
- ABS data including Local Government Area populations (e.g. by age, gender, ATSI status) which are used for calculating rates per 1,000 people; and
- Annual statistical summary of service provider activity files, confidential documents (n=75) provided by DHPW.

2.4 Survey data

KPMG also collected primary data via a survey of agencies involved in providing domestic and family violence services. The survey was designed to elicit system and service level information from government agencies and non-government service providers who deliver domestic and family violence services in Queensland. The purpose of the survey was to provide a more in depth understanding of the strengths and weaknesses of the current service system and to identify areas of improvement. This survey was not intended to assess the individual performance or funding needs of a particular organisation but rather to paint a picture of how services are operating and working together in particular locations.

The survey was administered in five locations across Queensland comprising a mix of urban, suburban, regional and remote locations, including:

- Gold Coast
- Ipswich
- Western Downs (Roma)
- Rockhampton
- Mount Isa

The information provided has been used to understand:

- the types of services that organisations offer to people who have experienced or are experiencing domestic and family violence;
- the extent to which people are able to access required services;
- service and referral pathways;
- the quality of organisations' connections to other organisations; and
- organisations' capacity for collaboration, case management, planning and review processes.

Queensland's domestic and family violence service system

Summary of Findings

- There are multiple agencies involved in responding to domestic and family violence across the Queensland Government including social service, criminal justice, health and education and housing portfolios.
- The main agency with responsibility for domestic and family violence is DCCSDS. The Department funds a range of programs under the domestic and family violence funding program including DV Connect a telephone and counselling service, local providers as well as specialist legal support and advice.
- QPS is often the front-line of service provision for victims of domestic and family violence. Police respond to calls for help from victims of domestic and family violence and attend incidents. Police also make applications for protection orders and respond to breaches of domestic violence orders.
- DJAG is primarily concerned with dealing with victims of domestic and family violence including providing legal advice, and court support services the majority of which is provided through Legal Aid Queensland. Court support workers are also available and a specialist domestic and family violence court has been announced and will be trialled in the Gold Coast. QCS deal with convicted perpetrators and run some domestic and family violence programs.
- In terms of providing specialist responses, the other main agency involved is DHPW which provides emergency accommodation for women and children escaping domestic and family violence.
- Mainstream agencies like Queensland Health and the DET also play a role. Hospital and Health Services treat victims of domestic and family violence in emergency departments and other health services but do not keep data on the number of people treated. The Department of Education and Training does not deliver domestic and family violence services directly but plays an important role in educating children and young people about domestic and family violence and raising community awareness.

- For the purposes of the audit, information on services provided by Queensland Government agencies was supplied by DCCSDS, DHPW, DJAG, LAQ and QCS.
- QPS and Queensland Health were not able to identify the level of funding allocated to domestic and family violence services for the purpose of the audit. In addition, information on the costs of dealing with domestic and family violence services in Queensland's courts was not able to be provided by DJAG.
- DET was not sent a template in relation to data collection for domestic and family violence services because they are not a frontline agency. It is noted, however, that DET has an important role in delivering education services that promote the prevention of domestic and family violence.
- The audit has also not considered services provided or funded solely by the Commonwealth Government including 1800 RESPECT and the raft of initiatives aimed at improving women's safety which have been recently announced at the Federal level. Nor does the audit consider the interaction with the Family Court which also falls within the Commonwealth's jurisdiction.
- As such, the report is not able to comprehensively identify the full range of services and funding expended by Government on domestic and family violence services in Queensland. Instead, it has focussed on describing those services which are attached primarily to dedicated funding programs administered by the DCCSDS, DHPW, DJAG and LAQ.
- In order to obtain a more comprehensive picture of the level of investment, consideration may need to be given to improving data collection and recording systems to improve the availability of data on the costs of domestic and family violence more broadly across Queensland Government agencies.

Queensland's domestic and family violence service system Agency involvement

3.1 Agency involvement

There are multiple government departments involved in delivery of services and support to address domestic and family violence. There are also many points of referral and entry into the system for victims of domestic violence. This creates a complicated and fragmented system for victims to interact with for intervention support and crisis response. The key departments involved in Queensland's domestic and family violence system are DCCSDS; DHPW; QPS; DJAG; LAQ; QCS; Queensland Health; and DET.

A brief overview of the roles and responsibilities of the key agencies that fund and/or provide domestic and family violence services is outlined below.

3.1.1 DCCSDS

DCCSDS provides the most significant level of investment in non-government support services directed at domestic and family violence. The Child, Family and Community Services agency within the Department of Communities is leading the response to domestic and family violence out of the Office for Women and Domestic Violence Reform.

As administrator of the domestic and family violence portfolio of services, the Department funds seven key program areas which include specialist and generalist services:

- 1. Domestic and Family Violence Funding Area, for which the key focus is to provide timely and quality risk and needs assessment, information, counselling and support to people affected by domestic and family violence as well as investment in service delivery to achieve safer communities through prevention, early intervention and system capacity building;
- 2. EAPU, which aims to assist vulnerable older people (over 60) who are at risk of and/or experiencing elder abuse or financial exploitation by providing information, support and referral mechanisms to improve health, well-being and safety, to address legal and other issues affecting older people and raise community awareness of elder abuse;

- Seniors Legal and Support Service (SLASS), provides free legal advice, information and social work services for people aged over 60 in addition to (but not limited to) social work services, short-term counselling, advocacy, referrals and representation in court or before tribunals (in certain circumstances;
- 4. Child Safety Placement Services, out of home care placement services that provide for the physical, psychological and emotional care for children and young people as part of an integrated child protection response when assessment indicates that separation from their family is unavoidable to ensure the child or young person's safety or wellbeing;
- 5. Child Protection Support Services, consisting of case management of statutory child safety clients involving therapeutic counselling and intensive support services for children and young people in the care of, and post care of the department;
- 6. **Families**, special support services for families at risk of entry or re-entry into the statutory system to improve the safety and wellbeing of children at home and reduce the need for children to enter or re-enter the statutory system;
- 7. Individuals and Young People, providing support to vulnerable Queenslanders experiencing or affected by a difficult personal issue and assisting them to get their lives back on track.

The audit of services has primarily focussed on Investment Domains that relate to specialist domestic and family violence services i.e. domains 1-3 above although the other program areas are referenced in the broad description of the domestic and family violence service system.

3.1.2 DHPW

DHPW's primary involvement in domestic and family violence service provision relates to the Homelessness Program. With the Homelessness Program, the Department funds specialist services for women and children escaping domestic and family violence as well as services for families, women and young people which are also accessed by the target group.

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Queensland's domestic and family violence service system Agency involvement

The services provided under the program include women's shelters offering temporary (emergency) accommodation together with the case management support needed to achieve a housing outcome. The aim of these services is to assist women to obtain longer-term housing and to maximise their capacity to be independent and connected with appropriate services and community support. Within the social housing system, applicants eligible for housing assistance who need to leave their current housing due to a domestic violence situation, or who are at risk of violence from another household member, neighbour, or community member, will be assessed and placed in the very high need segment on the housing register.

In July 2015, the Queensland Government confirmed that two new crisis shelters would be built in Brisbane and Townsville, with funding allocated over four years to run the centres (refer <u>http://statements.qld.gov.au/Statement/2015/7/7/state-budget-to-deliver-313-million-to-fight-domestic-violence</u>)

3.1.3 QPS

QPS provides a front line response to events of domestic and family violence in communities. Within the QPS, there is a network of police officers who undertake duties as domestic and family violence coordinators at the station, district and, where required, regional level across the State. Domestic Violence Liaison Officers (DVLOs) are located in each station. DVLOs can answer questions, provide advice and develop reports pertaining to incidents that have occurred relating to domestic and family violence. The work of these officers is overseen by regional Domestic Violence and Family Violence Coordinators.

If a call out is substantiated as a case of domestic and or family violence, the Police officer will seek protection for those affected by domestic violence which may include making an application for a protection order, issuing a police protection notice (which includes an application for a protection order) or applying to a magistrate for a temporary protection order Police also respond to breaches of domestic violence orders. Where there is a child or children present and the Police officer has concern for their wellbeing, a report will be made to the Suspected Child Abuse and Neglect (SCAN) officer or Child Protection Investigation Unit (CPIU), both situated within the QPS. Child Protection Investigative Unit reporting, which is a specialist service with an aim to identify children who are at risk of harm and to put into place appropriate interventions, including referrals and reporting to Child Safety.

In addition to these services, the Police provide a considerably broader response which includes:

- Investigative follow-up work from incident response, many of which result in referrals to the relevant NGOs; and
- Application hearing and services, whereby breaches of domestic violence orders require documentation to be completed and served to perpetrators, as well as attendance at court hearings and prosecution of contested cases⁷.

KPMG previously undertook work for the QPS on the costs of responding to domestic and family violence. This work showed that QPS expended around \$47 million per annum responding to domestic and family violence broken down as follows:

- \$19 million on responding to domestic and family violence calls;
- \$3.3 million for further investigation of offences by the Criminal Investigation Branch;
- \$13.5 million for Child Protection and Investigation Unit involvement in domestic and family violence investigations and support;
- \$8.5 million for application processing, court appearances and Police Prosecution support; and
- \$2.9 million to maintain the domestic and family violence coordination network.

^{7.} Department of Justice and Attorney-General 2014. 'Submission to Special Taskforce on Domestic and Family Violence in Queensland.')

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Queensland's domestic and family violence service system Agency Involvement (cont'd.)

3.1.4 DJAG/LAQ

The main response to domestic and family violence by DJAG is through the provision of generalist legal services for people who have experienced domestic and family violence. This predominantly consists of information and referral, court support, legal advice, representation and casework which are provided by LAQ (a statutory authority of the Queensland Government) and community legal services. DJAG also operates victim assistance programs which provide assistance to victims of crime generally including victims of domestic and family violence.

The majority of legal services provided by DJAG and LAQ are considered generalist because they are not solely provided to people experiencing domestic and family violence but rather they are offered to the broader community, a number of whom are experiencing domestic and family violence. However, LAQ also provides specific grants of aid for people experiencing domestic and family violence and has a specialist Violence Prevention and Women's Advocacy Team (previously called the Domestic Violence Team), which provides specialist domestic violence services. LAQ also provides the Women's Domestic Violence Court Assistance Service and Application Assistance Program, which specifically targets women who are experiencing domestic violence.

As well as dealing with offenders directly, Queensland's courts facilitate a number of specific domestic and family violence related initiatives. Court support workers, funded by DCCSDS, are available in 47 courts in Queensland, 34 of which have private waiting areas for victims and respondents (prioritised for victims where space is limited). A specialist court to deal with domestic and family violence matters has recently been announced, which will be trialled on the Gold Coast.

In Northern Queensland, there is an Indigenous Justice program that focuses on the perpetrator. Indigenous Sentencing Lists and Community Justice Groups facilitate referrals to appropriate domestic violence support services. There are currently 49 Community Justice Groups across the state.

There are restorative justice programs in two Aboriginal communities that resolve disputes before they escalate with the assistance of elders and the influence of culture.

Youth Justice does not directly deliver or provide outsourced funding to services or interventions with a specific, significant or identifiable domestic and family violence base. However, there are components of youth justice delivered interventions that include respect and appropriate and safe behaviour.

3.1.5 QCS

Apart from dealing with perpetrators who have been convicted of a crime, QCS also provides funding for the Positive Futures program which is a low intensity program for ATSI offenders focussing on family violence and substance abuse. This program is run in correctional centres and a number of probation and parole locations by QCS corrections officers.

3.1.6 DET

While schools are not considered front line service providers of domestic and family violence services, they can play an important role in combatting domestic and family violence by changing attitudes amongst young people. They can also play a role in supporting children whose families may be experiencing domestic and family violence. Education agencies across the country are implementing Respectful Relationships as part of changes to the national curriculum to help shape attitudes and behaviour under the National Action Plan to Reduce Violence Against Women and Children.

In response to the recommendations made by the Taskforce, the Queensland Government intends to increase the level of involvement of Education in coming years. Specifically, the Queensland Government has agreed to develop a "consistent, comprehensive communication strategy on domestic and family violence for Queensland" (Rec. 18) that will have input from and be the responsibility of all government frontline staff to implement, including education services and schools (Rec. 22).⁸

8. Queensland Government response to the report of the Special Taskforce on Domestic and Family Violence, Not Now, Not Ever: Putting an End to Domestic and Family Violence in Queensland (2012)

Queensland's domestic and family violence service system Agency Involvement (cont'd.)

The Queensland Government has also agreed to "lead[s] and facilitate[s] the introduction of programs in State schools to embed through the school life of all secondary and primary state schools, a culture that emphasises developing and maintaining respectful relationships, respecting self, and gender equality" (Rec 24), as well as in non-government schools (Recs 27 and 28).

3.1.7 Queensland Health

Queensland Health provides mainstream services including emergency department, hospital and other health services to people experiencing domestic and family violence services.

Queensland Health was not able to provide program or service level data on funding allocated to support domestic and family violence services across the health system.

This was primarily as a result of information about usage of services by this particular cohort not being routinely captured across health facilities. There is currently no requirement for medical practitioners in Emergency Departments to screen for domestic and family violence where a case may be suspected. Information from the Queensland Injury Surveillance Unit (QISU) was received by KPMG which provided an estimation that 2.53% of all injuries presenting at the Emergency Department may potentially be related to domestic and family violence.⁹

Given the increased risk of violence during pregnancy, a number of Queensland hospitals have started recording domestic violence screening data in the Queensland Perinatal Online system. The Royal Brisbane and Women's Hospital is also trialling a Domestic Violence Risk Assessment Questionnaire for use in pregnancy. This data was not able to be made available to the audit. Child Health Services identify domestic and family violence as a risk indicator which increases priority for access to primary health services rather than domestic and family violence-specific programs and support. Again, data is not captured in any accessible format and was therefore unavailable to the audit.

The need for better coordination between health and other services was highlighted by the Taskforce. Recommendation 22 of the Taskforce Report is to implement a communication strategy through all front line services including (but not limited to) health and hospital services, education services and schools, Queensland Ambulance Service, QPS, Queensland Fire and Emergency Services, housing services, LAQ, Director of Public Prosecutions and other legal services.

^{9.} Based on information provided Queensland Injury Surveillance Unit on 5 June 2014.

Information pertains to the proportion of women attending Emergency Departments who may have experienced Domestic violence between 1 July 2012 to 30 June 2014.

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Supply analysis and mapping

Summary of Findings

Based on the information provided by those agencies who were able to provide data to KPMG, the audit found that:

- An estimated \$506 million was provided by Queensland government agencies for domestic and family violence services in 2014-15 – this includes child placement and child protection services that may include a domestic and family violence response as part of service provision.
- When these and other more generalist type services are excluded, spending on domestic and family violence services is estimated at \$104.8 million in 2014-15 comprising \$51.4 million on generalist and \$53.5 million on specialist services.
- The main specialist programs are the domestic and family violence funding program in DCCSDS (\$24.7 million) and the specialist homelessness program in DHPW (\$20.6 million). Generalist services include legal services and victim assist services.
- Funding is shared almost equally between the Commonwealth and State Governments with 53 per cent from the State and 47 per cent from the Commonwealth (noting this only reflects the Commonwealth funding identified by State departments in the programs they administer).
- The vast majority of funding is allocated to NGOs with a total of 131 service providers in receipt of \$104.8 million of funding including large religious based organisations through to small local niche providers.
- Funding is provided for state wide as well as regional or locally based programs

 an estimated \$34.6 million is for state wide services including DV Connect with the remaining \$70.4 million allocated to initiatives at the local or regional level.
- Mapping of services at the regional level shows that 122 discrete service providers were funded by the \$70.4 million and operating in more than one region
- Just under half of all funding available for regional services goes to the top 20 funded organisations with a large number of service providers receiving less

than 5 per cent of the total funding.

- A number of organisations are in receipt of funding from multiple agencies with an estimated 23 providers received funding from more than one agency in 2014-15.
- The majority of funding is allocated to the South east corner of the State and the lowest levels of funding were provided in Gulf Regional, South West and Central West (which has no specific funding identified for services.
- The highest funded region is Cape York with \$202,023 per person more than 3 times the amount of funding compared to the next highest region, Gulf Regional, which had \$67,332 per person. South East Queensland had the second lowest level of funding (\$11,142 per person).
- Service providers identified as providing 85 different service types which were classified into six broad categories: counselling support, family violence services, legal services, specialist homelessness services; telephone helplines and other. The majority provided specialist homelessness services (48 per cent), followed by legal services (37 per cent).
- When the mix of investment is considered, 42 per cent of funding is allocated to legal services followed by 31 per cent for homelessness services and 17 per cent for counselling support programs.
- The majority of localised or region-specific services (122 of the total 131 services) are provided to victims of domestic and family violence with only a handful of programs targeting perpetrators. DCCSDS currently provides \$3.5 million for 18 perpetrator services with more planned in future years.
- Most of the services are directed at delivering post-crisis responses with only a few service providers focussing on early intervention or prevention services.
- This suggests that future investment should be directed at enhancing early intervention and prevention services as well as perpetrator programs to reduce pressure on post crisis services.

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Funding, service mapping and supply analysis **Overview**

4.1 Overview of funding, service mapping and supply analysis

The following section presents the supply analysis of agency grant funding and services providers involved in the domestic and family violence system.

Over the following pages, findings from the recoding and analyses of available data is reported with respect to:

- Total funding at the overarching service system level, at the program level and at the service provider level;
- A breakdown of agencies that provide funding and recipient organisations;
- Nature of services provided by funded organisations (i.e. what service(s) are provided) and the level of specialisation of services provided (e.g. generalist or specialist);
- Service delivery modes (i.e. how services are provided);
- Cohorts targeted by organisations providing domestic and family services (i.e. who receives the services);
- Timing of service delivery (i.e. when services are delivered); and
- Geographical location of service delivery (i.e. where services are delivered).

The coding of service providers and the what, how, when, who and where of what they deliver is based primarily on information supplied by agencies.

For example while some service providers may not target Indigenous clients, they may still deliver services to Indigenous clients. Similarly, service providers that are coded as early intervention may at times deliver post-crisis responses to victims.

The analysis has been developed using the following structure.

• Funding Agency (e.g. DCCSDS)

Program (e.g. Domestic Violence and Family Funding Program)

Service Provider (e.g. Anglicare Central Queensland Ltd.)

4.2 Total Funding for Services

Based on the information provided by agencies, total funding available for domestic and family violence services was estimated at \$506.6M in 2014-15 (refer Table 4.1). This includes Commonwealth and State funding. As the adjacent Table shows, DCCSDS had the highest levels of investment with total funding of \$429.4M. Generalist programs that were identified by DCCSDS included the following programs:

- Child Safety Placement Services (\$204.2M)
- Families (\$94.16M)
- Child Protection Support Services (\$42.70M)
- Individuals (\$37.2M)
- Young People (\$23.5M)

These generalist programs support people dealing with domestic and family violence. However, this is not their primary purpose and as such it is not possible to readily identify the proportion of domestic and family violence related usage from the broader client group.

For this reason and given the significant quantum of funding involved, these programs have been excluded from the funding analysis to examine funding available for specialist domestic and family violence services.

It should also be noted that the state funding mapped to domestic and family violence services does not include generalist services such as court and police services which are also funded by the Queensland government to respond to domestic and family violence incidents.

As noted earlier, previous estimates of the costs of QPS in responding to domestic and family violence are estimated at \$47 million per annum based on work undertaken by KPMG. Table 4.1: Funding for domestic and family violence Services 2014-15

Agency	Funding 2014-15
DCCSDS	\$ 429,447,692
DHPW	\$ 32,061,789
DJAG	\$ 20,642,156
LAQ	\$ 24,178,000
QCS	\$ 285,981
Total All Agencies	\$ 506,615,618

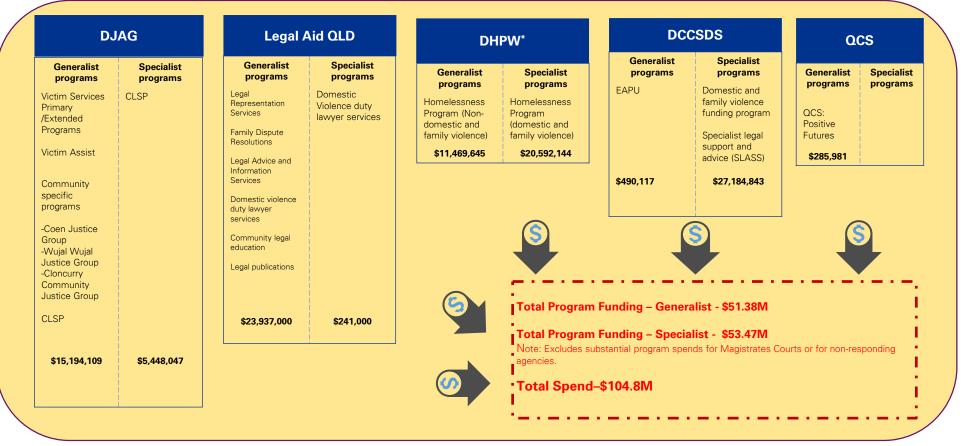
Source: KPMG 2015

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Funding, service mapping and supply analysis **Overview of funding programs**

Excluding the DCCSDS more generalist type programs reduced the overall level of funding to \$104.8M from \$506.6M. An overview of the domestic and family violence related programs identified by agencies for the purposes of the audit are shown in Figure 4.1 below. The programs cover legal and court support programs in Justice and Attorney-General and LAQ through to the Elder Abuse Prevention Unit (EAPU) in DCCSDS and homelessness programs in DHPW.

Figure 4.1: Funded Program Overview by Agency



Source: KPMG 2015 * The figures presented here for DHPW reflect the non-DFV services that were identified as having a significant proportion of DFV clients but does not reflect the total investment in services available to assist the target group of women and children.

Funding, service mapping and supply analysis Funding contribution of the State and the Commonwealth

Both the Commonwealth and State Governments are involved in funding domestic and family violence programs. For the programs identified for the audit, the funding split is 53 per cent from the State and 47 per cent from the Commonwealth (refer Figure 4.1). The Commonwealth is the majority funder of legal representation services and homelessness services while the State is the majority funder of specialist domestic and family violence services (refer Table 4.2).

Figure 4.1: Commonwealth/State Funding Share domestic and family violence Services

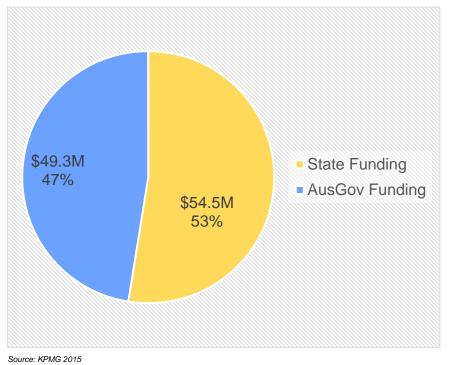


Table 4.2: Program Breakdown State and Commonwealth Funding 2014-15

	State	Commonwealth	Total
Funded Program	Funding	Funding	
Domestic and Family Violence			
Funding Area	\$24,706,666	\$0	\$24,706,666
Homelessness Program -			
domestic and family violence	\$7,001,329		\$20,592,144
Legal representation services*	\$1,363,000	\$15,742,000	\$17,105,000
CLSP	\$9,944,248	\$6,714,811	\$16,659,059
Homelessness Program - Non-			
domestic and family violence	\$3,899,679	\$7,569,966	\$11,469,645
Family Dispute Resolution			
services	\$0	\$3,532,000	\$3,532,000
SLASS	\$2,478,177	\$0	\$2,478,177
Victim Services Primary			
Program	\$2,399,721	\$0	\$2,399,721
Legal advice services	\$870,000	\$1,350,000	\$2,220,000
Legal information services	\$485,000	\$485,000	\$970,000
Victim Services Extended			
Program	\$543,000	\$0	\$543,000
EAPU	\$490,117	\$0	\$490,117
Positive Futures	\$285,981	\$0	\$285,981
Domestic violence duty lawyer			
services**	\$45,000	\$196,000	\$241,000
Community legal education	\$0	\$110,000	\$110,000
	¢40.000	.	<u> </u>
Community Justice Groups	\$12,000		\$12,000
Grand Total	\$54,523,918	\$49,290,592	\$103,814,510

* The \$15.74 million Commonwealth funding is for family law matters. ** \$196,000 in Commonwealth funding is for the court support service.

Source: KPMG 2015

Funding, service mapping and supply analysis **State wide services**

4.3 Service profile across the state: state-wide services and localised services

The \$104.8 million reported by agencies includes funding for a range of state-wide and region specific domestic and family violence service providers. The vast majority of the funding is provided to NGOs (an estimated 131 providers) including state-wide service providers.

An example of a service provider that has a state-wide reach is DV Connect (which is part of DCCSDS's Domestic and Family Violence Funding Program). While the DV Connect office is located in Brisbane, it provides a state-wide telephone counselling and referral service. The state wide services identified as part of the audit are shown in Table 4.3 to the right.

Other localised service providers only operate within a distinct region. Many of these are funded through the Domestic and Family Violence Funding area program of DCCSDS. Examples include Coalition on Criminal Assault in the Home Northern Queensland Inc. (based in Townsville) and Cairns Regional Domestic Violence Service Inc.

In order to better map the availability of services and to determine relative need, state-wide service providers have been excluded from the service mapping component to focus just on services that are provided regionally.

Table 4.3: State-wide programs related to domestic and family violence 2014-15

State-wide Service programs identified in Audit Generalist **Specialist** Legal representation services Homelessness program Family dispute resolution Legal advice and information Some domestic and family violence funding program services (eg DV Connect) services **Community Legal Services** CLSP Program (CLSP) Community legal education Elder Abuse Prevention unit (EAPU) Victim Services Primary/Extended Programs QCS: Positive Futures Victim Assist Total Spend - \$29.1M Total Spend - \$5.47M

Source: KPMG 2015

Table 4.4 Total funding (excluding State-wide services) 2014-15

Agency	Prog	Iram	2014-15 (\$)
	Generalist	Specialist	Total
Justice and Attorney- General	Victim Services Programs Community Legal Services Program Justice Groups	Community Legal Services Program	\$16.05M
LAQ		Domestic violence duty lawyer	\$0.24M
DCCSDS		Domestic and Family Violence Funding Program Specialist legal support and advice	\$24.42M
DHPW	Homelessness program	Homelessness program	\$29.58M
Total Spend	\$22.30M	\$48.0M	\$70.30M

Source: KPMG 2015

Funding linked to mapping exercise

Excluding the state wide services means that of the total \$104.8 million funding in 2014-15 only \$70.3 million (67%) has been mapped to regions for the purposes of this audit.

As shown in Table 4.4, this include \$22.3 million in generalist services which are provided out of DJAG, DCCSDS and DHPW and \$48.0 million in specialist services which are provide out of DJAG, LAQ, DCCSDS and DHPW.

The majority of expenditure sits with DHPW for its specialist homelessness program with provides emergency and other accommodation to women and children escaping domestic and family violence and DCCSDS for its domestic and family violence funding program which supports a broad range of organisations and services including counselling support, telephone hotlines and other services.

Funding, service mapping and supply analysis Mapping of services on a geographic basis

4.4 Service providers involved in the sector

Analysis of data made available to the audit reveals that of the total 131 service providers that receive funding, there are 122 discrete service providers who deliver services within their local region. Some of the 122 discrete service providers operate in more than one region. The organisations involved are as broad as their service offering, including (but not limited to):

- Large religious organisations;
- Women's Health Groups;
- Family Support Services;
- Legal Services and Legal Centres
- ATSI Community Controlled Organisations;
- Foundations, Societies and Associations;
- Corporations and Corporate Trusts;
- Community Associations, Community Hubs and Neighbourhood Centres;
- Emergency Accommodation Centres; and
- Advocacy Groups.

Services are also delivered by local governments including Aboriginal Shire Councils and Regional Councils. The majority of services are located in the south east corner of the State as shown in the adjacent Figure 4.2.

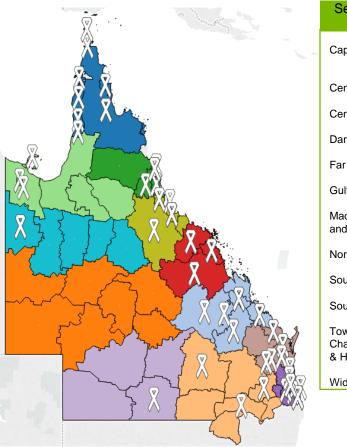
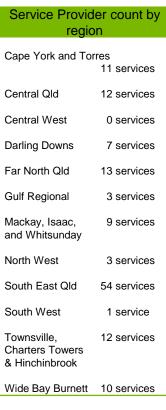


Figure 4.2: Regional distribution of funded organisations



. Source: KPMG

(a) Townsville, Charters Towers and Hinchinbrook coded

Funding, service mapping and supply analysis Service types by region (i.e. what services are delivered)

The audit considered the types of services delivered by service providers based on information provided by agencies. Agencies provided 85 different service 'types', which were recoded to six broad classifications that capture the primary service delivered by a particular service provider.

On the ground many service providers will deliver more than one of these service types i.e. the categories are not mutually exclusive. For example, a service provider will offer counselling support and family violence services and have close links to a specialist homelessness service.

Table 4.5: Count of service providers by region and type of service

The distinct number of service providers receiving funding in 2014-15 was 131 including 122 operating in regions and 11 state-wide services (which are also included in Table 4.5 below). There are some service providers that operate across multiple regions.

Legal services and specialist homelessness services comprised the largest number of services across most regions. The regions with the least number of domestic and family violence funded services are the Central West with no identified funded service providers and the South West which has only one service provider.

	Counselling Support	Family Violonco		Specialist Homelessness	Tolonhono		
Region		Services	Legal Services			Other	Grand Total
Cape York and Torres	1	5		8			11
Central Queensland	5	1	4	4			12
Central West	0	0	0	0			0
Darling Downs	2		3	2			7
Far North Queensland	4		3	8			13
Gulf Regional		1		2			3
Mackay, Isaac and Whitsunday	3		1	6			9
North West	1	1	2	2			3
South East Queensland	14	3	25	20			54
South West		1					1
Townsville, Charters Towers and Hinchinbrook	3	1	4	6			12
Wide Bay Burnett	3	2	3	6			10
Statewide	3	2	4	4	2	1	16
Grand Total Source: KPMG 2015	32	15	48	63	2	1	131

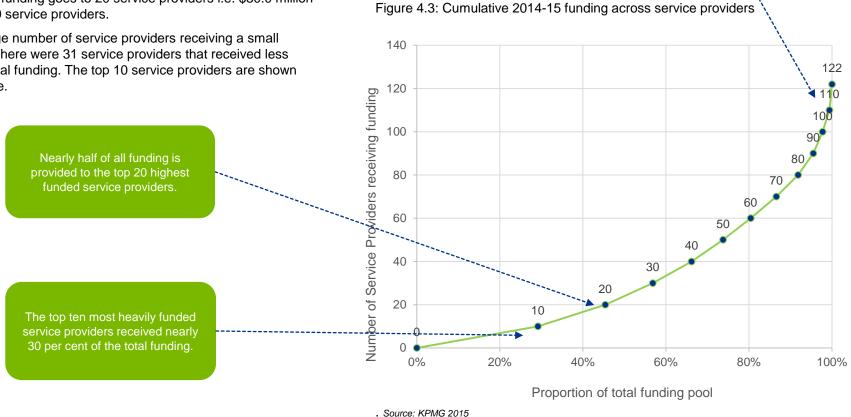
Funding, service mapping and supply analysis Distribution of funding to service providers (excludes statewide service providers)

4.5 Distribution of funding across service providers

Figure 4.3 provides a representation of the funding distribution for generalist and specialist domestic and family violence services excluding statewide services such as Victims Assist and DV connect.

It shows that funding is not evenly distributed across service providers. Just under half of all funding goes to 20 service providers i.e. \$30.0 million of funding went to 20 service providers.

There are also a large number of service providers receiving a small amount of funding. There were 31 service providers that received less than 5 per cent of total funding. The top 10 service providers are shown on the following page.



There are 31 service providers

that receive less than five per cent

of the total funding.

Table 4.6 below provides a snapshot of the top 20 funded service providers offering generalist and specialist domestic and family violence services in Queensland including funding source by agency. Funding ranges from \$0.98M to \$2.7M per year for the top funded providers. The analysis shows there are a number of service providers who received funding from multiple agencies. In some cases, agencies identified the service provider under different names. For example, DCCSDS may have identified the service Provider as "Caxton Legal Inc" while DJAG may have identified the service Provider as "Caxton Legal Centre Inc."

Table 4.6: Top 20 funded service providers (excluding state-wide services).

Service Providers	DCCS	DS	DH	PW	DJAG	Gra	and Total
Domestic Violence Prevention Centre Gold Coast Inc	\$	2,753,271				\$	2,753,271
The Corporation of the Trustees of the Roman Catholic Archdiocese of Brisbane	\$	1,735,498	\$	985,628		\$	2,721,126
Uniting Care Community	\$	396,417	\$	1,875,150		\$	2,271,567
Caxton Legal Centre Inc	\$	873,725			\$ 1,279,547	\$	2,153,272
Ozcare	\$	170,899	\$	1,930,538		\$	2,101,437
Coalition on Criminal Assault in the Home Northern Queensland Inc	\$	1,728,519	\$	99,037		\$	1,827,556
The Salvation Army (Queensland) Property Trust			\$	1,524,420		\$	1,524,420
The Advocacy and Support Centre Inc	\$	356,629			\$ 1,132,792	\$	1,489,421
Working Against Violence Support Service Inc	\$	1,399,111				\$	1,399,111
Micah Projects Inc	\$	1,357,861				\$	1,357,861
Caboolture Regional Domestic Violence Service Inc	\$	1,312,921				\$	1,312,921
Domestic Violence Action Centre Inc	\$	1,292,516				\$	1,292,516
Women's Legal Service Inc	\$	78,926			\$ 1,165,232	\$	1,244,158
Relationships Australia Queensland	\$	1,237,875				\$	1,237,875
Cairns Community Legal Centre Inc	\$	463,646			\$ 684,493	\$	1,148,139
Queensland Public Interest Law Clearing House (QPILCH)					\$ 1,145,200	\$	1,145,200
Anglicare	\$	333,987	\$	810,815		\$	1,144,802
The Uniting Church in Australia (Queensland)			\$	1,129,284		\$	1,129,284
YFS Ltd	\$	672,841			\$ 415,580	\$	1,088,421
Carina Youth Agency Inc			\$	986,303		\$	986,303

Funding for community legal centres includes funding for domestic and family violence services as well as broader legal services to the community.

Source: KPMG 2015

The funding analysis shows that the most common areas of overlap in funding occur between DCCSDS and DHPW (refer Table 4.7 below). These two agencies fund many of the same service providers. This overlap in funding for service providers may not necessarily indicate inefficient funding allocations but could also reflect the fact that these particular service providers provide a range of services that cut across Government agency responsibilities and that funding is organised around program areas rather than clients.

Table 4.7: Overlap in agency funding for top-funded service providers. Source: KPMG.

Service Providers	DCCS	os	DH	PW	DJAG	Gra	and Total
Domestic Violence Prevention Centre Gold Coast Inc	\$	2,753,271				\$	2,753,271
The Corporation of the Trustees of the Roman Catholic Archdiocese of Brisbane	\$	1,735,498	\$	985,628		\$	2,721,126
Uniting Care Community	\$	396,417	\$	1,875,150		\$	2,271,567
Caxton Legal Centre Inc	\$	873,725			\$ 1,279,547	\$	2,153,272
Ozcare	\$	170,899	\$	1,930,538		\$	2,101,437
Coalition on Criminal Assault in the Home Northern Queensland Inc	\$	1,728,519	\$	99,037		\$	1,827,556
The Salvation Army (Queensland) Property Trust			\$	1,524,420		\$	1,524,420
The Advocacy and Support Centre Inc	\$	356,629			\$ 1,132,792	\$	1,489,421
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Micah Projects Inc	\$	1,357,861				\$	1,357,861
Caboolture Regional Domestic Violence Service Inc	\$	1,312,921				\$	1,312,921
Domestic Violence Action Centre Inc	\$	1,292,516				\$	1,292,516
Women's Legal Service Inc	\$	78,926			\$ 1,165,232	\$	1,244,158
Relationships Australia Queensland	\$	1,237,875				\$	1,237,875
Cairns Community Legal Centre Inc	\$	463,646			\$ 684,493	\$	1,148,139
Queensland Public Interest Law Clearing House (QPILCH)					\$ 1,145,200	\$	1,145,200
Anglicare	\$	333,987	\$	810,815		\$	1,144,802
The Uniting Church in Australia (Queensland)			\$	1,129,284		\$	1,129,284
YFS Ltd	\$	672,841			\$ 415,580	\$	1,088,421
Carina Youth Agency Inc			\$	986,303		\$	986,303

Source: KPMG 2015

Funding, service mapping and supply analysis Service supply mapped to Queensland regions (i.e. where services are delivered)

In terms of funding distribution, the analysis shown in Table 4.8 and the adjacent Figure 4.4 indicates that the majority of funding for domestic and family violence related services is allocated in the south east corner of the State i.e. funding generally matches the population distribution.

Gulf Regional and South West Regions had relatively low levels of funding and no funding for a service provider that operated in the Central West Region was identified.

Table 4.8: Funding for each region in 2014-15.

Region

South East Queensland

Far North Queensland

Hinchinbrook

Wide Bay Burnett

Cape York and Torres

Central Queensland

Darling Downs

North West

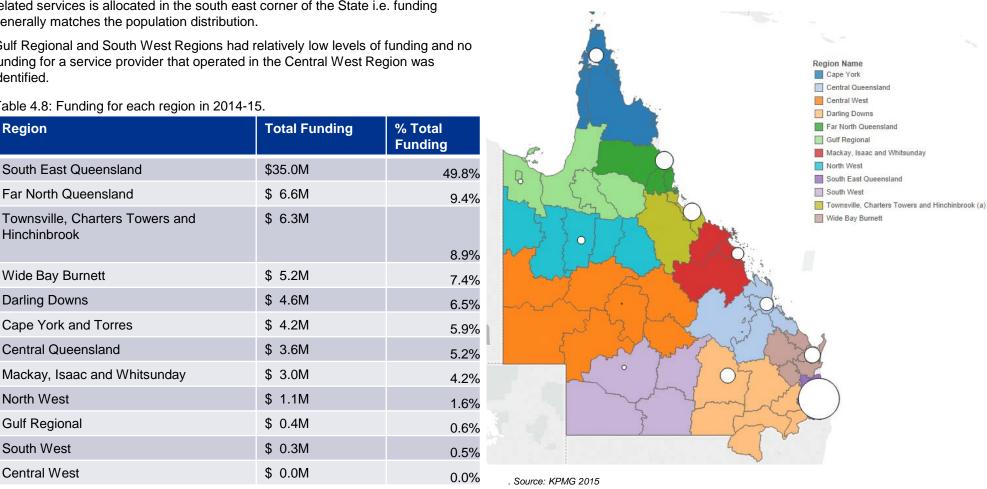
Gulf Regional

South West

Central West

Source: KPMG 2015

Figure 4.4: Funding by region in 2014-15.



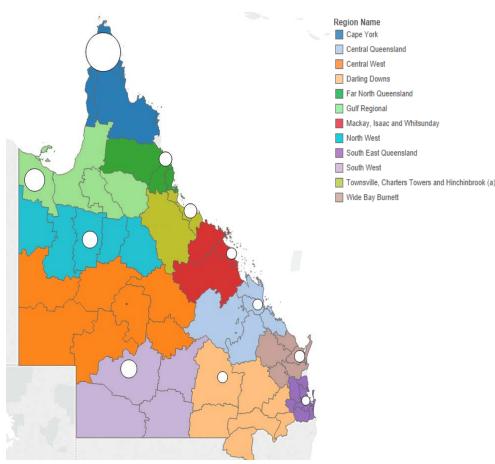
Funding, service mapping and supply analysis Service supply mapped to Queensland regions, per capita

When population is taken into account, the results show a different picture. On a per capita basis, the highest funded region is Cape York with \$202,023 per person more than 3 times the amount of funding compared to the next highest region, Gulf Regional, which had \$67,332 per person (refer Table 4.9). The average per capita funding amount is \$40,214 – closest to the average is North West at \$38,065. South East Queensland had the second lowest level of funding (\$11,142 per person). No region specific funding was identified for Central West (refer Figure 4.6).

Table 4.9: Funding per capita in each region.

Region	Funding per capita
Cape York	\$202,023
Gulf Regional	\$ 67,332
South West	\$ 43,300
North West	\$ 38,065
Townsville, Charters Towers and Hinchinbrook	\$ 26,788
Far North Queensland	\$ 26,758
Wide Bay Burnett	\$ 18,074
Darling Downs	\$ 16,732
Mackay, Isaac and Whitsunday	\$ 16,566
Central Queensland	\$ 15,793
South East Queensland	\$ 11,142
Central West	\$ 0,000
Source: KPMG 2015 .	

Figure 4.6: Funding per 1000 people. Source: KPMG.



(a) Townsville, Charters Towers and Hinchinbrook coded

Source: KPMG.

Funding, service mapping and supply analysis **Service Provider Involvement**

4.6 Nature of services provided

A broad range of service 'type' descriptions was provided in the data template completed by agencies. These are referred to collectively as 'Nature of Service'. To make best use of the information and facilitate reporting, the numerous service types were coded into seven discrete categories and one catch-all category (refer Table 4.10):

- 1. Counselling Support Programs
- 2. Family Violence Services
- 3. Legal Services
- 4. Specialist Homelessness Services
- 5. Telephone Helplines
- 6. Other (e.g. events and community education) and
- 7. All of the above.

Many of the services, while offered to any adult in the community, often target specific issues such as sexual abuse/violence, addictions including problem gambling, alcohol and other drugs, as well as people experiencing, personal, family, relationships and/or financial hardship.

4.7 Level of specialisation

Across the domestic and family violence service system, government agencies fund a range of service providers to deliver specialist and generalist services to people experiencing domestic and family violence. Agencies determined whether a program or service provider was specialist or generalist. Where agencies had not detailed whether the service provider was specialist or generalist, the approach was to classify as generalist unless it was otherwise apparent that the service provider offered specialist service delivery.

While interpretations of the definition varied by agency, specialist services generally refer to services that are provided expressly to people at risk of, or who

are experiencing domestic and family violence. Generalist services typically refer to services that are more mainstream in nature and are offered to the general public (but which are also used by domestic and family violence victims).

Specialist services were reported within the following funding areas, by agency:

- DCCSDS:
- domestic and family violence Funding Area and Specialist Legal and Support Services (SLASS);
- DHPW: Homelessness Programs;
- DJAG:
- CLSP; and
- LAQ: Domestic Violence Duty Lawyer Services.

The DCCSDS, DJAG and DHPW provide generalist and specialist services. In order to maintain some comparability between services aimed specifically at addressing family and domestic violence the generalist services such as DJAG Victims Assist and DHPW Homelessness program were excluded because it was not readily apparent how much of the funding for these programs was related to addressing domestic and family violence compared with other social welfare issues.

Table 4.10 – Total Investment by Service Type

Nature of services		Family Violence Services		Specialist Homelessness Services	Telephone Helplines	Other	Grand Total
Funding 2014-2015	\$18,337,404	\$4,259,252	\$44,491,643	\$32,066,789	\$4,143,864	\$1,543,934	\$104,842,886
Percentage of Total	17%	4%	42%	31%	4%	1%	100%

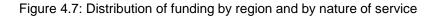
Source: KPMG 2015

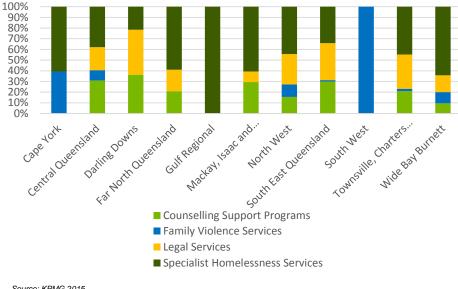
Taking into account the distribution of funding by broad service type shows that on a state-wide basis, the majority of the investment is made in legal services (42 per cent), followed by specialist homelessness services at 31 per cent (note it is not possible to clearly show how much of legal services investment is directed solely at domestic and family violence clients). Family violence services and telephone hotlines received relatively small proportions of overall funding at around 4 per cent (refer Table 4.9).

Comparing regions against the state-wide proportions shows that a number of regions have relatively high levels of specialist homelessness services compared to the State average (refer Figure 4.7). Family violence services in regions like Cape York are much higher than the State average reflecting the scale of the problem in Indigenous communities. There is also no funding for legal services in that region or in South West.

South East Queensland receives the largest amount of funding and the largest proportion of funding is towards Legal Services.

Gulf Regional & South West Region receive the lowest amount of funding and with most funding allocated to Specialist Homelessness services and Family Violence Services.





Source: KPMG 2015

Funding, service mapping and supply analysis **Service Provider Involvement**

4.8 Targeted cohorts

For the purposes of the audit agencies were asked to assign a primary target cohort for each funded service provider. There were a range of responses to this from agencies that focussed on victim/perpetrator, some on CALD status, some on particular population cohorts (e.g. persons with a disability). This was recoded into three variables, which were victim status, ATSI status and a "specialised cohort." Note that not all agencies identified service providers as having a "specialised cohort".

Presented in Table 4.11 on the following page are counts of the 122 non-statewide service providers by region and target cohorts. The majority of services are provided to victims alone, and the analysis revealed that few service providers solely target perpetrators through programs such as counselling or anger management. Many services target both victims and perpetrators as well as secondarily targeting the whole family. However, it shouldn't be assumed that where services work with both victims and perpetrators, that perpetrators are being provided with a lesser response.

Some services specifically target ATSI families. Analysis for the audit showed that 24 of the 122 service providers considered focussed on ATSI families. There were only two services that claimed to specifically target migrants experiencing domestic and family violence.

Organisations offer services to the whole of the population (universal services) as well as targeted groups in the community. The primary target cohorts include victims and perpetrators of domestic and family violence. Secondarily, services may choose to target men, women and/or vulnerable families, the elderly, and children and young people, some of whom are in care.

It is widely acknowledged that domestic and family violence is a gender issue affecting one in six women as opposed to one in nineteen men¹⁰. As such, a large proportion of domestic and family violence services are expressly delivered to support women at risk of, or who are experiencing domestic and family violence. Australia. Many family violence service providers specifically target

victims of domestic and family violence, many evidently assuming that victims are women. This is evident in the names of a number of service providers (e.g. 'Women's Legal Service') and clearly identified through the range of 'women's shelters' operating across the state.

The prevalence and severity of the violence is known to increase as geographical remoteness increases. Data from Police (police activity by LGA) and the Courts (protection orders by LGA) presented in the demand analysis demonstrate that the ten communities with highest prevalence rates are Aboriginal communities, predominantly in Far North Queensland where the ARIA classifications are 'remote' or 'very remote'.

Other groups in the community that have been identified as vulnerable or high risk are people from CALD backgrounds, people with disabilities, older (elderly) people and lesbian, gay, bisexual, transgender and intersex people. For each high risk group, it is critical to understand the context and specific needs because a 'one-size-fits-all' approach is not particularly effective. There are service providers tailoring services specifically for these high risk cohorts but these service providers are limited to a few, operating predominantly in the South East Queensland region.

10. Queensland Government, Special Taskforce on Domestic and Family Violence in Queensland, 2015, NOT NOW, NOT EVER, Putting an End to Domestic and Family Violence in Queensland

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As shown in Table 4.11 below, services are predominantly targeted towards victims and perpetrators but only a small number of programs are exclusively directed at perpetrators. There are 24 organisations which identified themselves as targeting Aboriginal and Torres Strait Islander clients. Eight services were directed towards the needs of people with a disability or the aged, two for migrants and seven for children specifically.

Table 4.11: Volume of services targeted at each cohort in each region

	Prir	nary Target Coho	ort		Aborigir	al and Torre Islander	es Strait			Specialise	ed Cohorts		
Region	Victims of DFV	Perpetrators	Both	Other	ATSI	Non-ATSI	Both	Aged	Disability	Disability & Aged	Families	Migrants	Children
Cape York		5	6		11						7		
Central Queensland		5	7		2	2 10				1	5		
Darling Downs			7			7				1	3		
Far North Queensland		9	4	1	2	9	2	2	1		7		2
Gulf Regional (a)		3			1		2	2			2		
Mackay, Isaac and Whitsunday		5	4			9					6		
North West		1	2		1	2					2		
South East Queensland		15 4	35	2	2	2 50	2	2	1 2		19	2	4
South West			1		1				1				
Townsville, Charters Towers and Hinchinbrook		8	4		3	8 9			1		6		
Wide Bay Burnett		4	6	1	1	7	2				4		1
Grand Total		54 4	64	4	24	92	7	,	4 2	2	55	2	7

Source: KPMG 2015

Supply data analysis and mapping Intervention Points (i.e. when services are delivered)

4.9 Intervention points

The analysis of the data supplied by agencies suggested that the majority of investment is in service providers delivering post-crisis responses. Less than three service providers received funding for early intervention/prevention services exclusively. Service providers that offer these types of services generally provide them in concert with other services. For example, LAQ delivers early intervention services such as dispute resolution but also offers post-crisis services such as legal information.

This is not an unexpected finding, as government investment in domestic and family violence services is generally focussed on the post-crisis response. Service providers like Relationships Australia offer a mix of counselling, family dispute resolution and family violence prevention services. This made classifying service providers by their intervention points difficult and subject to interpretation.

Figure 4.8: Count of service providers by intervention points

Given this general overlap the classification of when services were delivered was split into three categories

- 1. Early intervention
- 2. Combined services
- 3. Post crisis response

The results show that the majority of providers provide post-crisis responses and that this is supported by the highest level of overall investment. A number provide a mix of early intervention and crisis responses services. There are very few services which are dedicated exclusively to providing early intervention services.

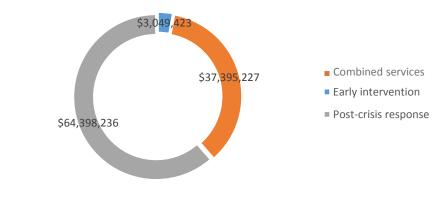


Figure 4.9: Funding of service providers by intervention points

Source: KPMG analysis of data supplied by DPC

113

Source: KPMG analysis of data supplied by DPC

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Combined services

Early intervention

Post-crisis response

Demand data analysis and mapping

Summary of Findings

- There is no accepted or common method for estimating the demand for domestic and family violence services. The demand and need for services can be affected by a range of factors many of which are not amenable to measurement. It is also well known that domestic violence tends to be under reported due to the stigma attached and other cultural or environmental factors.
- The audit has examined a range of proxy measures to ascertain the need for domestic and family violence services including police incidents and court protection orders. Data on calls to DV Connect, the telephone and counselling service have also been included in the analysis.
- There were 72,514 police incidents in 2014 or nearly 200 incidents per day. This is an increase of 44 per cent from the 50,235 incidents recorded in 2010, an increase of more than 10 per cent per annum. The most common day of the week for incidents to occur was Sunday.
- The regions with the highest levels of increase in the number of police incidents recorded were Mackay, Isaac and Whitsunday region followed by Cape York and Torres region and South East Queensland region.
- On a per capita basis, the area with the highest level of demand was the Gulf Region with 103.4 incident reports per 1000 people more than seven times the average of 15.5 incidents per 1000 people.
- Breaking the data down at LGA level shows the appallingly high rates of domestic and family violence in Indigenous communities with rates up to 278 per 1000 people.
- The lowest per capita rates of reported incidents were in the Central West (11.2 per 1000) followed by South East QLD region (12.1 incident reports per 1000 people).
- Court protection orders also show an increasing trend but not to the same extent with the number of orders increasing from 17,125 in 2009-10 to 20,148

in 2013-14, an increase of 17 per cent.

- Data on calls to DVConnect was provided to KPMG on a quarterly basis from 2010-11 to 2014-15. This showed an increasing trend with the number of calls rising from around 10,000 in July September 2010-11 to 12,000 for the same period in 2014-15. The data also show a distinct seasonal trend with higher numbers of calls in the summer months.
- Again this is likely to understate the level of demand as DVConnect is not the only telephone counselling service available – 1800 Respect is also in place and funded by the Commonwealth Government but was not in scope for the review.

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Demand data analysis and mapping **Overview**

5.1 Overview of demand data analysis and mapping

The data detailed in the Special Taskforce report provides a useful starting point in understanding the level of demand for specialist domestic and family violence services in Queensland. The following section provides further analysis of available data with respect to:

- Total demand for domestic and family violence services,
- A geographical breakdown of demand highlighting the comparative prevalence of domestic and family violence (weighted by population).

5.2 Approach to demand analysis

The Taskforce in Queensland noted that reported occurrences of domestic and family violence have increased year on year since the 2010-11 financial year.

This indicates an ongoing and increasing need for domestic and family violence services in Queensland (the alignment of funding and service availability with known demand for domestic and family violence services will be explored in the next section). Importantly, this refers to occurrences of domestic and family violence that are known to QPS.

The most comprehensive information available to the audit regarding demand for domestic and family violence services is QPS data on reported incidents of domestic and family violence, as well as Magistrate Court data on the number of protection orders in Queensland.

This data is available over a similar time period, and allows for trends for both indicators of domestic and family violence prevalence to be identified. Activity data for DVConnect was also made available to the audit at the state-wide level.

This was coupled with ABS population statistics to calculate rates of incidents or court orders per 1,000 people at a regional level.

5.3 Reported incidents (QPS)

Table 5.1 and Figure 5.1 below provide an overview of the total reported incidents of domestic and family violence in Queensland. It should be noted that reported incidents refer to the initial call out reason only. Any subsequent reclassification is not accounted for in this data set.

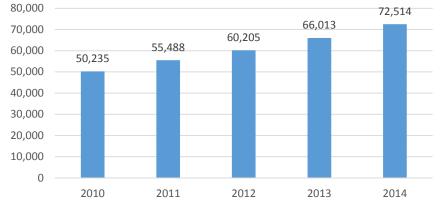
Table 5.1: Police incidents by calendar year

Calendar year	Incidents	Incidents per day
2010	50,235	138
2011	55,488	152
2012	60,205	165
2013	66,013	181
2014	72,514	199

Source: QPS data

Growth in the number of police incidents over the period 2010-2014 was 44%.

Figure 5.1: Police incidents by calendar year



Source: QPS data

5.4 Protection Orders (Magistrates Courts)

Table 5.2 and Figure 5.2 below provide an overview of the total number of court protection orders made in Queensland. As seen for reported incidents to police there is an increasing trend, particularly from 2011-12 onwards.

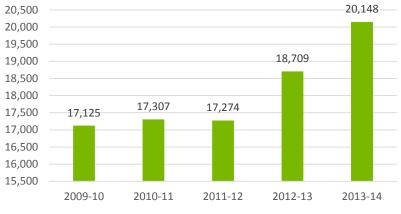
Table 5.2: Protection orders by financial year

Fiscal Year	Protection Orders	Protection Orders per day
2009-2010	17,125	47
2010-2011	17,307	47
2011-2012	17,274	47
2012-2013	18,709	51
2013-2014	20,148	55

Source: Magistrates courts annual reports various

Growth in the number of police incidents over the period 2010-2014 was 29%.

Figure 5.2: Court protection orders by calendar year



Source: Magistrates courts annual reports various

5.5 Regional analysis

Regional analysis was undertaken of demand for services using police incident data related to domestic and family violence as the proxy demand indicator. As can be seen in Table 5.3 below, there have been marked increases in the incidence of domestic and family violence in a number of regions although there have been fluctuations on a year by year basis in some regions. The highest level of increase in reported police incidents was in the Mackay, Isaac and Whitsunday region where there was a 87 per cent increase in reported incidents between 2010 to 2014. While there has been a low increase in the Central West, no region has experienced a decline in reported incidents.¹¹

Table 5.3: Total Number of Police Incidents by Region 2010 - 2014

Region	2010	2011	2012	2013	2014	% Change 2010 to 2014
Cape York and Torres	1,163	1,268	1,398	1,563	1,756	51%
Central Queensland	3,860	4,288	4,385	5,013	5,252	36%
Central West	128	147	174	155	140	9%
Darling Downs	3,045	3,151	3,213	3,373	3,745	23%
Far North Queensland	4,560	5,008	5,586	6,273	6,376	40%
Gulf Regional (a)	563	688	689	755	684	21%
Mackay, Isaac and Whitsunday	2,178	2,598	2,884	3,606	4,082	87%
North West	1,065	1,386	1,445	1,287	1,288	21%
South East Queensland	25,343	28,142	30,543	33,857	37,938	50%
South West	207	209	210	253	275	33%
Townsville, Charters Towers and Hinchinbrook	4,076	3,960	4,232	4,549	5,191	27%
Wide Bay Burnett	4,047	4,643	5,446	5,329	5,787	43%

Source: KPMG analysis of QPS data

11. Incident rates have fluctuated in some regions with falls in some years (e.g Central West and Townsville, Charters Towers and Hinchinbrook).

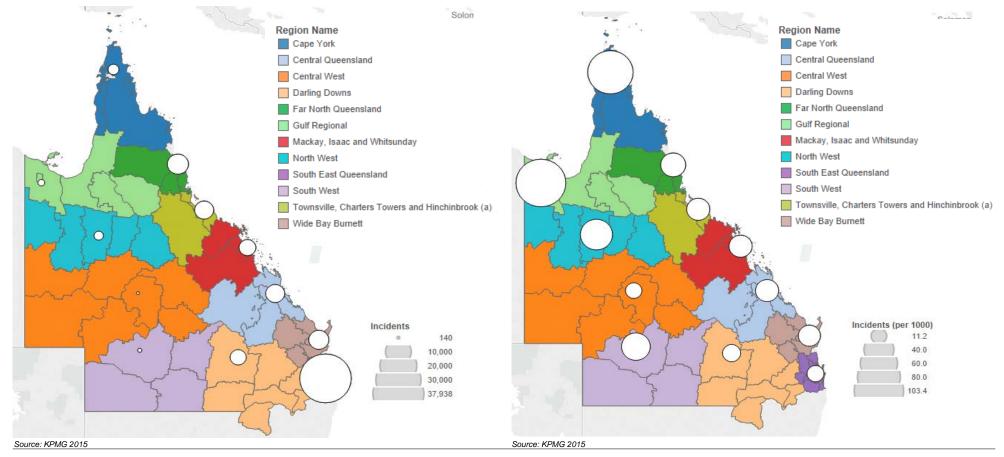
Demand data analysis and mapping Police incidents and incidents per 1,000 people by region

It is important to note that while South-East QLD reported the highest number of recorded incidents (refer Figure 5.3), the region also has a much larger population than the other regions.

Figure 5.3: Police Incidents per region in 2014

This is best highlighted by comparing the overall number of incidents for each region with the number of incidents per 1,000 persons in each region. Figure 5.4 shows that the Gulf Regional area and Cape York have significantly higher number of police incidents per 1,000 persons than other regions.

Figure 5.4: Police Incidents per 1,000 persons per region in 2014



Demand analysis – Indigenous communities

The regional analysis highlighted that regions like Cape York and the Gulf which have large Indigenous populations had the highest per capita rates of domestic and family violence. The Table below provides a breakdown by LGA of the communities with the highest rates of domestic and family violence which are all made up of the State's Indigenous communities. This highlights further the appallingly high levels of reported domestic and family violence in the State's discrete Indigenous communities where rates range from 111 incidents per 1000 people in Carpentaria to 278 per 1000 people in Cherbourg (refer Table 5.4). This compares to the State average of 15.5 incidents per 1000 people in 2014. For protection orders the prevalence rates range from 32 protection orders per 1000 people in Pormpuraaw to 1000 per 1000 people in Kowanyama. This is much higher than the State average of 4.32 protection orders per 1000 people.

Table 5.4: Top 10 areas with large Indigenous populations and highest number of police incidents.

LGA	Incidents	Incidents per 1000
Cherbourg	357	277.6
Woorabinda	269	270.1
Kowanyama	248	222.4
Yarrabah	585	218.2
Doomadgee	278	201.2
Palm Island	497	191.9
Mornington Island	199	163.9
Wujal Wujal	37	129.8
Aurukun	162	115.6
Carpentaria	245	111.0

Table 5.5: Top 10 areas with large Indigenous populations and highest number of protection orders.

Incidents per 1000	Protection orders	Court
99.6	111	Kowanyama
76.3	76	Woorabinda
69.8	187	Yarrabah
63.4	77	Mornington Island
58.6	81	Doomadgee
35.9	93	Palm Island
35.1	10	Wujal Wujal
35	49	Aurukun
32.1	17	Lockhart River
31.6	23	Pormpuraaw

Source: KPMG 2015 adapted from QPS data

Source: KPMG 2015 adapted from QPS data

Demand data analysis and mapping Police incident trends by day of week and time of day

5.6 When incidents are reported

Understanding when incidents of domestic and family violence are most commonly reported can support effective resource allocation of both the QPS and associated crisis response agencies. Figure 5.5 details the spread of reported incidents across the week for 2014. There was a decrease in reported incidents on Tuesdays, Wednesdays, and Thursdays when compared to 2013. Reports increased on Mondays, Fridays, Saturdays and Sundays.

This data has not been cross-referenced with data from information and referral services (such as DV Connect). The peak volume of calls in each year is fairly consistent from 2010-11 to 2013-14 at around 14,000 calls per quarter (slightly less in 2012-13) with a significant spike in 2014-15. Consideration of the times at which incidents are reported (refer Figure 5.6) also reveals patterns throughout the time of day with a marked drop off between midnight and 6am. This has implications for QPS responses, as well as acute crisis response services.

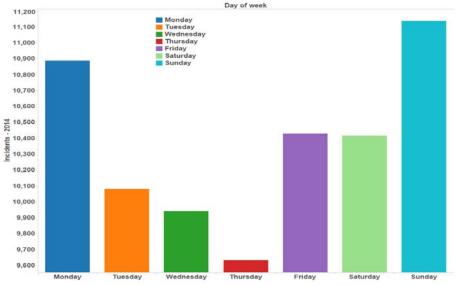
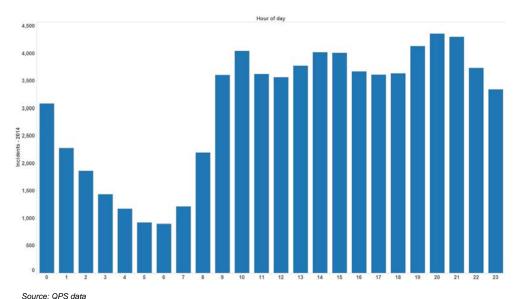


Figure 5.5: Police Incidents by day of week in 2014

Figure 5.6: Incidents reported by time of day (2014)



Source: QPS data

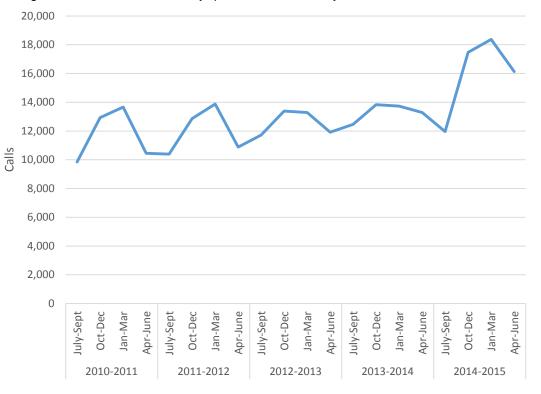
Demand data analysis and mapping **DV Connect calls by quarter**

5.7 DVConnect - Calls

DVConnect is the only state wide telephone service offering anyone affected by domestic or family violence a free 'crisis hotline' 24 hours a day 7 days a week. DV Connect offers a range of services although the main help lines are the Womensline (majority of calls), Mensline and the Sexual Assault Helpline.

Figure 5.7 indicates that there is distinct seasonality and a trend in the DV Connect incoming calls series. The trend is of increasing calls over the five year period, with a more marked increase in 2014/15. The seasonality within each financial year is that peak quarters for calls are either Oct-Dec or Jan-Mar (i.e. summer months) and that lower volumes of calls are seen in the July-Sept and Jun-Mar quarters (winter months).

Seasonality in domestic and family violence incidents has been written on extensively (see Australian Domestic & Family Violence Clearinghouse (ADVFC), 2007. Domestic Violence Incident Peaks: Seasonal Factors Calendar Events and Sporting Matches). Figure 5.7: DV Connect calls by quarter and financial year from 2010-11 to 2014-15.



Source: DV Connect

Aligning funding and demand

Aligning Funding and Demand

Summary of Findings - Aligning Funding and Demand

- The results of the service mapping and demand analysis have been used to develop a gap analysis.
- The gap analysis is used to understand the relative difference between funding allocated to each region and the level of demand for services as measured by the number of police incidents.
- The region with the highest gap score was the Central West region (this reflects the fact that no funding was identified for this region in the audit). Central West was followed by Gulf Regional, Central Queensland, North West and Mackay, Isaac and Whitsunday regions.
- The region with the lowest gap score was the Cape York and Torres region which indicates that the region receives a relatively high level of funding compared to need (as measured by the number of reported police incidents).
- The gap analysis provides a simple estimate of need which does not take into account a range of others factors impacting on both the supply and demand for services in each of the regions.
- For example, funding for police services and Commonwealth funded services like 1800 Respect have not been included and nor has funding provided by NGOs been considered in the analysis.
- However, it does provide the basis for considering future Queensland Government investment priorities across the State on a geographic basis.

- Based on the results, the five regions that have been identified for further investigation are:
 - Central West
 - Gulf Regional
 - Central Queensland
 - North West
 - Mackay, Isaac and Whitsunday

6.1 Overview of Aligning Funding and Demand

"Many of the people consulted referred to unmet needs and gaps in service provision. Some submissions referred to uneven or disproportionate allocation of funding for services and advocated for better analysis of needs as a basis for funding allocation. Others suggested that current funding arrangements are a barrier to holistic and flexible approaches. Some submissions commented favourably about referrals made using SupportLink. Others commented that in some regions, services are markedly underfunded to manage the increase in referrals generated." – Not Now, Not Ever

A Gap analysis has been undertaken in order to understand the relative difference between funding allocated across the State and the actual demand for services. QPS data on the reported incidents of domestic and family violence was used as the key measure of demand and funding identified in the audit at the service delivery level was used to indicate supply. An index called the Gap Score was developed to provide a relative measure of demand over supply. The Gap Score could be interpreted as the incidents per person over the funding received per person, so a higher number means that relative to other regions, there is a lower level of funding provided per recorded incident of domestic and family violence. This score considers: **The number of reported incidents per person per region, the funding per person in each region and the State-wide funding per person (e.g. divided by the total Qld population)** \$34,555,339/ 4,666,386 **~** \$7.405 per person or \$7405 per 1000. Refer to Appendix 1 for full calculation.

Region	Reported Incidents in 2014	Region Funding \$ DFV	Population	Region Funding + State-wide funding (per 1000) i.e. \$7405 (proxy supply indicator)	Region Incidents per 1000 (proxy demand indicator)	Gap Score
Central West	140	\$0	12,458	\$7,405	11.2	1.52
Gulf Regional	684	\$445,534	6,617	\$74,737	103.4	1.38
Central Queensland	5,252	\$3,624,317	229,483	\$23,198	22.9	0.99
North West	1,288	\$1,140,044	29,950	\$45,470	43	0.95
Mackay, Isaac and Whitsunday	4,082	\$2,985,227	180,200	\$23,971	22.7	0.94
Wide Bay Burnett	5,787	\$5,182,010	286,705	\$25,479	20.2	0.79
Far North Queensland	6,376	\$6,586,937	246,168	\$34,163	25.9	0.76
South West	275	\$347,702	8,030	\$50,705	34.2	0.68
South East Queensland	37,938	\$34,975,273	3,138,994	\$18,547	12.1	0.65
Townsville, Charters Towers and Hinchinbrook	5,191	\$6,265,943	233,907	\$34,193	22.2	0.65
Darling Downs	3,745	\$4,572,472	273,272	\$24,137	13.7	0.57
Cape York Source: KPMG analysis of QPS data and dat	1,756	\$4,162,088	20,602	\$209,428	85.2	0.41

Table 6.1: The number of reported incidents and estimated amount of funding for each region.

6.2 Regional representation

It shows that:

Figure 6.1 provides a

further summary of the gap

measure for each region.

The highest gap score

indicating that funding

for this area requires

further investigation in

to meet local demand for domestic violence

services, relative to

The lowest gap score

(0.41) is in the Cape

area with the highest

domestic and family

level of funding for

violence incidents. relative to other regions.

York and Torres region

indicating that this is the

other regions.

order to ensure that the funding and service provision is appropriate

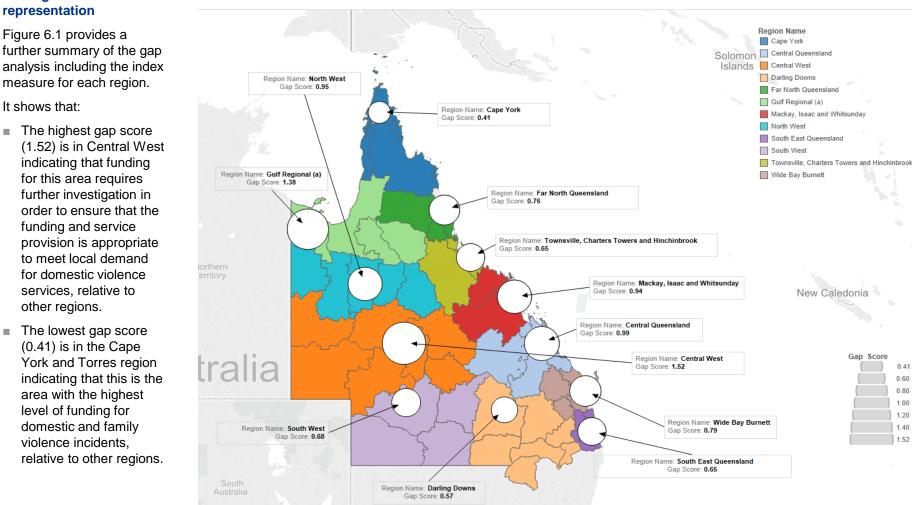


Figure 6.1: Index of gap between supply and demand for family and domestic violence services in each region.

Source: KPMG analysis of QPS data and data supplied by DPC

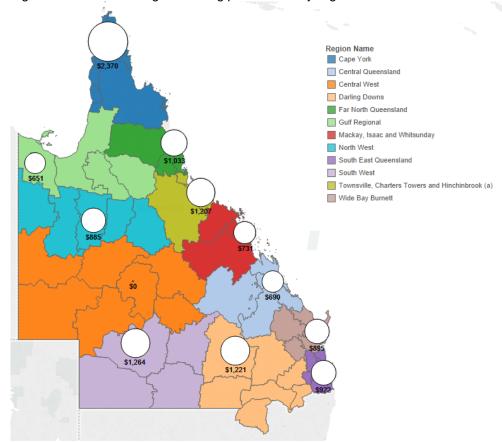
The index developed by KPMG can provide a useful tool for estimating the service need of one region in Queensland relative to another¹². To portray the gap between the demand for services and supply in a different way, Figure 6.2 shows the estimated funding per incident in each region in 2014.

Cape York and Torres region had the highest estimated funding per incident (\$2,370) in 2014 but other regions such as Mackay, Isaac and Whitsundays; South West; and Darling Downs also had relatively high funding per incident in 2014.

These results align with findings regarding the nature of services in each region (refer Table 6.2) wherein those regions with the lower gap index and higher estimated funding per reported police incident have more domestic and family violence services available relative to other regions. For example, the Cape York region has a relatively low gap index, 0.41, a relatively high amount of funding estimated for each domestic and family violence incident in 2014 and 11 domestic and family violence services including 8 specialist homelessness services. This indicates that there is a small gap between service demand and supply for domestic and family violence services.

South East Queensland region also has a relatively low gap index of 0.65 and a high number of domestic and family violence services (54 services) but a midrange estimated funding amount per incident. This indicates that the South East Queensland region has a similarly small gap between service demand and supply. The lower estimate for funding per incident is likely due to the lower cost of service delivery in metropolitan areas.

On the other hand, the high gap index (1.52) and funding per reported incident for Central West region (\$0) which has only 1 domestic and family violence service indicates that the region is underserviced and underfunded for the purposes of addressing domestic and family violence services relative to other regions.



Source: KPMG analysis of QPS data and data supplied by DPC Excludes state-wide funding.

Figure 6.2: Estimated region funding per incident by region in 2014

^{12.} The index has been developed based on estimates for the funding in each region. Underpinning these funding estimates are a number of assumptions aimed at addressing the complexity and fragmentation of Queensland's domestic violence system. The assumptions for our analysis are presented in Appendix 2 of this report. These assumptions should be taken into consideration before making an informed decisions about policy changes or alterations to the funding allocations to each region.

The table below summarises the results by each region indicating the level of funding available in each region along with the gap score and a brief description of the services provided in each area. As noted previously, the gap score measures supply as the level of funding allocated to each region not the number or type of services provided. This means that while the gap index provides a relative measure of demand over supply, it does not provide an indication of the quality of services or the appropriateness of the mix of services in each region. Improvements in data collection would be required to better understand the outcomes achieved by particular services with the funding provided in each region.

Table 6.2: Funding, gap index and nature of services for each region.

Region	Region Funding \$ DFV	Gap Score	Nature of Services
Central West	\$0	1.52	Central West does not have a dedicated service for domestic and family violence identified at the time of the audit (note this excludes services funded exclusively by the Commonwealth or from other sources).
Gulf Regional	\$445,534	1.38	The Gulf region has one domestic and family violence service and two specialist homelessness services.
Central Queensland	\$3,624,317	0.99	In Central Queensland there are five counselling services, a family violence service, four legal services and four specialist homelessness services.
North West	\$1,140,044	0.95	North West has one counselling service, one family violence service, two legal services and two specialist homelessness services.
Mackay, Isaac and Whitsunday	\$2,985,227	0.94	The Mackay, Isaac and Whitsunday region has three counselling services, one legal service and six specialist homelessness services.
Wide Bay Burnett	\$5,182,010	0.79	In the Wide Bay Burnett region there are three counselling services, two family violence services, three legal services and six specialist homelessness services.
Far North Queensland	\$6,586,937	0.76	Far North Queensland has four counselling services, three legal services and eight specialist homelessness services.
South West	\$347,702	0.68	South West has one dedicated family violence service.
South East Queensland	\$34,975,273	0.65	South East Queensland has a range of services including fourteen counselling services, three family violence services, twenty five legal services and twenty specialist homelessness services.
Townsville, Charters Towers and Hinchinbrook	\$6,265,943	0.65	In the region of Townsville, Charters Towers and Hinchinbrook there are three counselling services, one family violence service, four legal services and six specialist homelessness services.
Darling Downs	\$4,572,472	0.57	The Darling Downs region has two counselling services, three legal services and two specialist homelessness services.
Cape York	\$4,162,088	0.41	In Cape York ,there is one counselling service, five family violence services and eight specialist homelessness services.

Source: KPMG analysis of QPS data and data supplied by DPC

Note that more specialist homelessness services are available in each location but these are not specifically funded to assist the target group i.e. are not offered specifically to address domestic and family violence.

For most regions where the gap index is low, there is a high number of services available and a high level of funding per incident. However, the North West and South West regions are outliers in terms of having a very low number of services (3 services in North West and 1 service in South West) and relatively high funding per incident reported (\$885 and \$1,264 respectively) and relatively low gap indexes of 0.95 for North West and 0.68 for South West. This indicates that while there may be relatively few domestic and family violence services, the gap between demand and supply for domestic and family violence services is relatively low when compared with other regional and remote areas such as the Gulf Regional and Central West.

Presented in Figure 6.3 is the estimated funding per region in 2014-15. A discussion of the two regions with the highest and lowest funding per incident is provided below.

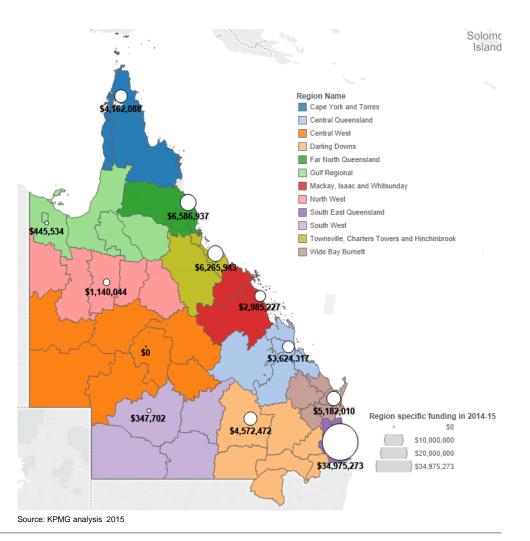
Cape York and Torres

- Characteristics: Highest incident rate per 1,000 persons, highest funding per incident, small population but high proportion identify as Aboriginal and Torres Strait Islander
- Services: Primarily Aboriginal and Torres Strait Islander specific services (e.g. National Partnership Agreement for Family and Community Services ATSI Corporation, Kowanyama Aboriginal Shire Council).
- Summary: If the Cape York and Torres strait region experienced the rate of police reports of SE Queensland there would have been approximately 249 incidents reported, instead of the 1,756 that were reported to police. This is a difference of 1,500 police reports.

Central West

- Characteristics: Lowest incident rate per 1,000 persons, lowest population of all regions and population spread across a vast area.
- Services: No region specific State administered funding or services (not taking into account statewide, outreach or Commonwealth funded services).

Figure 6.3: Estimated funding by region in 2014.



Survey of providers

Summary of survey findings

Summary of Survey Findings

The survey was administered in five locations across Queensland comprising a mix of urban, suburban, regional and remote locations. These locations included: the Gold Coast, Ipswich, Western Downs (Roma), Rockhampton and Mt Isa.

- The survey covered both government and NGO service providers.
- The survey revealed that generally, services perceived that they were performing well in terms of working together to meet client needs in a resource constrained environment.
- Organisations rated themselves highly on their capacity to undertake risk assessment and planning in particular and to respond in crisis situations.
- A broad range of services are provided in each of the five locations surveyed with counselling support services making up the largest number of service responses.
- Most respondents provide services specifically to victims of domestic violence, or victims, perpetrators and their children.
- Few agencies provide services specific to perpetrators only across the five locations surveyed. This was noted to be a service gap in some areas, particularly in remote areas.
- There are few agencies specifically targetting services at children and young people.
- In terms of joint service planning the survey indicates that out-of-home care services are not frequently engaged with by both government and NGO service providers.
- Most NGO service providers have formed partnerships and have undertaken joint planning with other services – however, these findings were not as evident in the government sector.
- Joint planning between service providers was usually undertaken between nongovernment service providers whose primary role is responding to domestic and family violence or family violence.
- The survey results also show that only NGO providers undertook joint planning with services targeted at perpetrators (that were not behaviour change programs).
- Survey findings from the Gold Coast and Rockhampton indicate that effective collaboration exists through strong referral pathways at the local level with the majority of respondents indicating that engagement in formal partnerships, and participation in joint planning, were important to offering effective services.

- Service providers in Ipswich and the Gold Coast also reported that high levels of engagement with the local community were key to effectively raising community awareness of domestic and family violence.
- Survey responses show that competitive funding arrangements impact the way agencies, particularly non-govenment agencies, interact with each other (for example through with-holding referrals or hesitation to engage with other services).
- There were common service gaps noted across the five locations including emergency crisis accommodation and long term housing, brokerage, and after hours access to services (both in person and telephone). Perpetrator programs and acommodation were also highlighted as service gaps, particularly in remote areas.
- Smaller rural and remote communities like Mount Isa and Roma reported issues with limited access to services – particularly legal services.
- Suggsted strategies for improving delivery of domestic and family violence services include:
 - improving funding arrangements to increase sector capacity to address service gaps
 - ✓ developing funding arrangements in partnership with the sector
 - ✓ increasing incentives and opportunities for collaboration through alternatives to competitive funding processes
 - ✓ focussing on outcomes rather than outputs
 - ✓ adopting a place based approach which encourages providers to address issues at the local level and promotes collaboration between government and nongovernment providers.

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Survey findings Introduction and scope

7.1 Overview of Survey Findings

As part of the audit, surveys were administered to both government organisations, and non-government specialist domestic and family violence service providers. Surveys collected both quantitative information (such as single or multiple selections questions and scaled questions), as well as qualitative information.

The survey was intended to elicit in depth system and service level information from government agencies and non-government service providers who deliver domestic and family violence service. To this end, the survey was designed to canvass information across the following broad domains:

- Background and agency information
- · Collaboration and multi-agency case management
- Diversity (organisational and client based)
- Data collection analysis and monitoring
- Risk assessment and risk management
- Overall strengths and opportunities for change

Sample and scope

The survey was administered to both government agencies and non-government services in five LGAs between October and November 2015. The following table outlines the sample size of the survey for both cohorts of respondents.

7.2 Limitations of survey

The total sample size for the survey was 70 responses. This sample size includes started but unfinished surveys (the survey tool automatically saved allowing data capture even if a respondent did not press the final submit button), as well as finalised surveys with blank responses. As such, not all responses add to the total of 70 responses. Incomplete surveys have been included because these documents contain valuable information, even if not all questions have been answered.

Survey responses are not equally distributed across the five LGAs. As such, the potential for analysis against specific questions, and the level of qualitative depth available differs significantly. The distribution of survey responses is outlined in the following table.

Table 7.1: Survey sample size by LGA

LGA	Government	NGO
Western Downs (Roma)	2	4
Rockhampton	5	10
Mount Isa	3	6
Ipswich	5	12
Gold Coast	4	12
Blank	2	5
Grand total	21	49

Source: KPMG 2015

The survey included a mix of single choice, multiple selection, and free text questions. The small pool of survey responses, particularly by government agencies, and in locations such as Roma and Mount Isa, limits the depth of information available. As well, while the survey attempted to elicit respondent views on the system as a whole, services may have been limited in the elements of the sector they have visibility and involvement in (for example, a government health facility will have a different view to a specialist service provider).

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Survey findings Services provided (service providers)

7.3 Service provision

Figure 7.1, to the right provides an overview of the services provided by non-government survey participants.

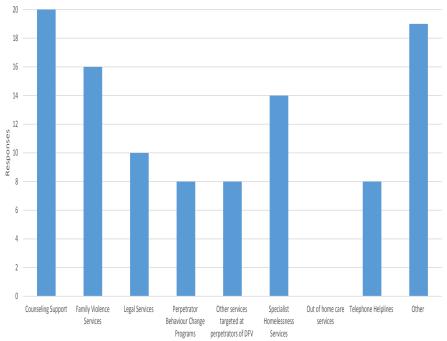
Respondents were able to choose all services that applied to them, explaining discrepancies between respondents and responses to this question.

As can be seen in the graph, the survey did not capture any out of home case service provides in any of the five LGAs.

Services categorised as 'other' were defined as those that included financial and material assistance, integrated services, and other services not specified in the provided categories.

It shows the broad range of service provision in each of the five locations with counselling support services making up the largest number of responses.

Figure 7.1: Services provides by non-government service providers



Source: KPMG 2015

Survey findings Services provided (government agencies)

Figure 7.2 below provides an overview of the services provided by government agency survey participants. Respondents were able to choose all services that applied to them, explaining discrepancies between respondents and responses to this question.

Services categorised as 'other' were defined as those that included financial and material assistance, integrated services, and other services not specified in the provided categories.

There are notable differences in the services represented which could be expected given the difference in functions between government agencies and the nongovernment agencies in the sector. There are only seven counselling services provided by government agencies for example, compared to the 20 provided by non-government agencies. Information and referral services were provided by a number of government agencies with 17 services reporting that they provided this function as a core service.

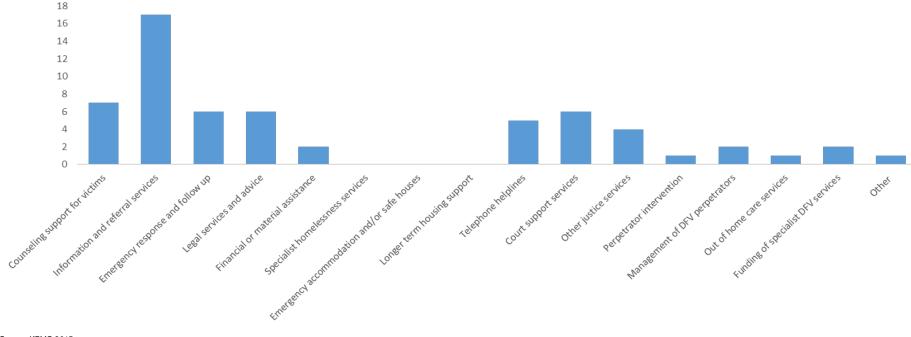


Figure 7.2: Services provided by government agencies

Source: KPMG 2015

Survey findings Client cohorts

7.4 Client cohorts

Survey respondents were asked to specify the most appropriate category that describes their primary client cohort. Organisations are likely to provide services to a mix of victims, perpetrators, children, and family configurations. Understanding the primary clients of government and non-government agencies provides an understanding of potential service gaps in the system.

Figure 7.3 below illustrates that:

- Most respondents provide services specifically to victims of domestic violence, or victims, perpetrators and their children.
- Few agencies provide services specific to perpetrators only across the five LGAs. This was noted to be a service gap in some areas, particularly in remote areas.
- There are similarly few agencies specifically targeted at children and young people only.¹³ A respondent in the Ipswich area commented that there was a notable lack of focus on this cohort by the domestic and family violence sector.

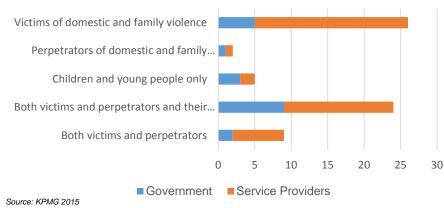


Figure 7.3: Primary clients of all respondent agencies

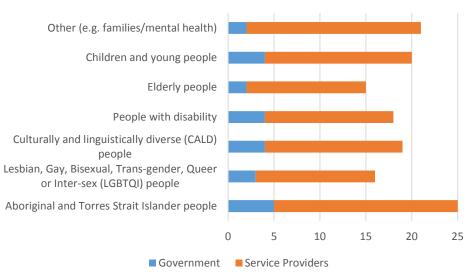
13. This excludes generalist services for young people and the child protection sector.

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Specific target populations

Domestic and family violence affects different population cohorts in different ways, with the experience and therefore service response required differing between these cohorts. Figure 7.4 below provides an overview of the proportion of agencies targeting specific client cohorts. It illustrates that at an overall survey level, all of the surveyed client cohorts are targeted by both government agencies and non-government agencies. This does however differ at the local LGA level. Non-government services in Mount Isa for example only specifically target Aboriginal and Torres Strait Islander people, with no participating service targeting any other client cohort. Specific targeting of these cohorts is likely to reflect the demographics of the LGA.

Figure 7.4: Specific target populations for all respondent agencies



Source: KPMG 2015

Survey findings Client cohorts

Specific target populations (cont:)

In order to support work with specific client cohorts, government and non-government agencies have utilised a range of strategies related to providing access to specialised professionals and improving access to information.

The following graph provides an overview of strategies that agencies have used to provide targeted services to specific client cohorts:

- Service providers primarily relied on partnerships with specialist organisations, and the use of interpreters rather than the recruitment of dedicated personnel to meet the needs of CALD clients;
- The use of dedicated bilingual worker positions was reported to be very low (with only one government provider and four non-government providers reporting on this feature);
- 'Other' responses included: specific staff and volunteer training, general and project based engagement with CALD communities, referrals to appropriate agencies, and specific programs/projects. One government agency noted the use of carer and consumer advocates, and the employment of peer support workers. The majority of responses however referred to other survey options (such as the employment of specific workers).

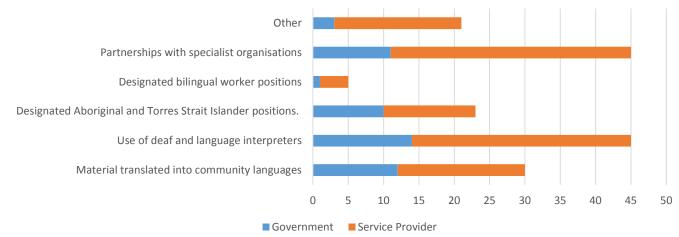


Figure 7.5: Strategies used to target specific client cohorts

Source: KPMG 2015

Survey findings

7.5 Partnerships

Formal partnerships were entered into by just over half of the respondents to the survey (61 per cent). This was more common with government agencies, with 67 per cent of government agencies reporting some kind of formal partnership, compared to 31 per cent of NGOS. This is illustrated in Table 7.2 below. Figure 7.6 provides an overview of the kinds of services both government and non-government agencies reported partnering with.

Table 7.2: Prevalence of formal partnerships

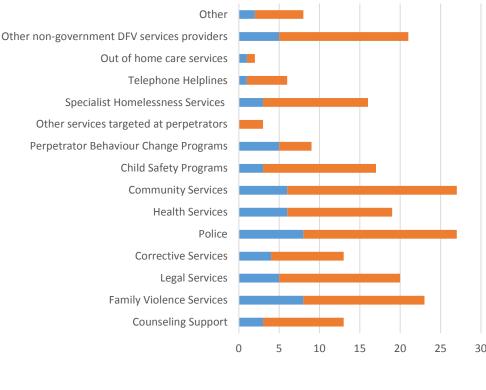
Has the agency engaged in formal partnerships?	NGO	Government	Grand total
No	15	6	21
Yes	29	14	43
Blank	5	1	6
Grand total	49	21	70

Source: KPMG 2015

Partnerships were primarily enabled by:

- MOUs: 37 percent of NGOs versus 25 per cent of government agencies
- Service level agreements: 25 per cent of NGOs versus 25 per cent of government agencies
- Interagency protocols: 32 per cent of NGOs versus 38 per cent of government agencies
- Other: 5 percent of NGOs versus 25 per cent of government agencies

Figure 7.6: Types of services agencies partner with



Government Service provider

Source: KPMG 2015

Survey findings Joint planning

7.6 Joint planning

While undertaken by a majority of respondents, joint planning is not a systemically embedded process in the surveyed regions. Joint planning was undertaken by 34 (69 per cent) non-government agencies as compared to 11 (52 per cent) of government agencies.

The graph on the right illustrates the service types that respondents reported they engaged in joint planning with. It illustrates that:

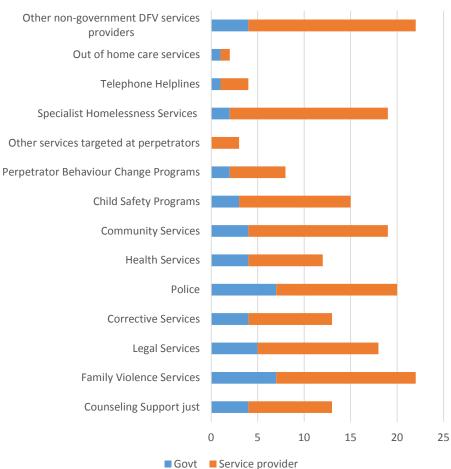
- Out of home care services were not frequently engaged with by both service types.
- Only non-government service providers undertook joint planning with services targeted at perpetrators (that were not behaviour change programs). It is possible that this is because perpetrator management services were provided by government already (for example by justice agencies).
- Engaging with other non-government domestic and family violence service providers, as well as family violence services were the primary services engaged with in joint planning.

The following table provides an overview of how agencies engaged with joint planning processes.

Table 7.3: Initiation requirements for joint planning

Mechanism	NGO	Government
At the request of another organisation/agency	24	3
On a case by case basis	28	2
Requirement of formal partnership or network	14	3
Conducted for every client	3	N/A
Other	4	2
Source: KPMC 2015		





Source: KPMG 2015

Source: KPMG 2015

Survey findings Data collection and monitoring

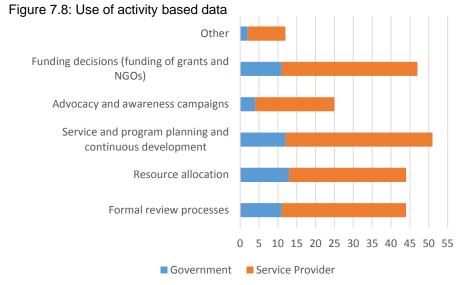
7.7 Results from data collection

Activity based data

Activity based data (that is, the number of times an activity or service is undertaken) was collected by 45 (85 per cent) non-government respondents as compared to 18 (43 per cent) government agencies.

The graph below provides an overview of how respondents used this data, with respondents able to choose multiple areas where appropriate. Primarily, this data was used by both types of organisations for funding decisions (both to apply for these, and decision making around these), continuous development, resource allocation, and formal review processes.

Other uses for this data were reported to be due to contractual funding requirements, as well as for internal use and informal review.



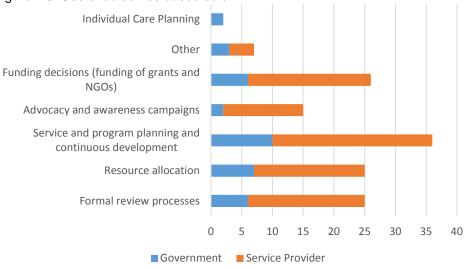
Outcomes based data

Outcomes based data (that is, data regarding the outcomes of services provided for clients), was collected by 31 (69 per cent) of non-government respondents as compared to 11 (52 per cent) of government agencies.

The graph below provides on overview of how respondents used this data, with respondents able to choose multiple areas where appropriate. This data was used only by government agencies to contribute to care planning, while it was by both organisations for funding decisions (both to apply for these, and decision making around these), continuous development, resource allocation, and formal review processes.

Other uses for this data were reported to be due to contractual funding requirements.

Figure 7.9: Use of outcomes based data



Source: KPMG 2015

Source: KPMG 2015

Survey findings Overall perceptions of the system

The following summarises high level findings of the perceived strengths, challenges, and opportunities for improvement in the system from a regional perspective based on survey responses. Regional profiles of the surveyed LGAs outline qualitative feedback at a more local level.

Perceptions of the system	"We provide effective client focused case work and have been attaining a good client outcome with exits from homelessness into affordable accommodation" – Service provider in Ipswich
Strengths	Across LGAs, it was commonly reported that agencies were committed to providing an immediate reponse to victims of domestic and family violence and reducing crisis levels of risk. Most providers considered they were operating effectively with the resoruces they had at their disposal and that collaboration worked at the local level but was not encouraged on a system wide basis.
	 The Gold Coast and Rockhampton respondents reported that effective collaboration exists through strong referral pathwa at the local level with the majority of respondents indicating their engagement in formal partnerships, and participation in joint planning. Providers in Ipswich and the Gold Coast also reported high levels of engagement with their local communities. This was reported to be important to raising community awareness about domestic and family violence.
	"The competitive nature of the tendering process and the strict outputs within service agreements has had an impact on relationship building" – Service provider from Roma
	• Across LGAs a number of services reported that they were at, or over, capacity with responses indicating a tendency for services to focus on crisis driven responses, with a lack of services for early internvetion and prevention.
Challenges	 Competitive funding arrangements were seen as impacting the way agencies, particularly non-govenment agencies, interact with each other (for example through witholding referrals or hesitation to engage with other services). Other notat challenges to this included privacy laws and legal privilege, as well as time and resource constraints.
	 There were common service gaps noted across LGAs including emergency crisis accommodation and long term housing brokerage, and after hours access to services (both in person and telephone). Perpetrator programs and acommodation were also highlighted as service gaps, particularly in remote areas. Their availability was seen as impacting the ability of victims to stay at home.
	Smaller rural and remote communities like Mount Isa and Roma reported issues with access to legal services in particula
	"Avoid the business model of service delivery that are seeking funding and focus and engage specialist front line DV services who have experience in dealing with this scourge." – Service provider from the Gold Coast
Opportunities for	Increase sector capacity and address service gaps through improved funding arrangements which are developed in partnership with the sector.
improvement	 Increase incentives and opportunities for collaboration through alternatives to competitive funding processes, focussing o outcomes rather than outputs and providing incentives for collaboration and integration.
	 Adopt a place based approach which encourages providers to address issues at the local level involving government and non-government providers in consultation and design processes.

Survey findings Reported perceptions of the system at the LGA level

	Strengths	Challenges	Respondent proposals for improvement
Rockhampton	 Strong referral pathways coupled with a commitment to providing an immediate response for victims. There is also a commitment to working with perpetrators to reduce the incidence of domestic and family violence. 	 Poor performing services can create service gaps because of their performance and space in the system. Lack of consistency in the understanding of domestic and family violence by Magistrates, demonstrated through sentencing outcomes. Competitive funding preventing collaboration and integrated responses to domestic and family violence. 	 Reduce service gaps created by poor performing services and re-allocate funds to higher performing organisations. Develop strategies to enhance service performance and incentivise interagency approaches. Increase funding for perpetrator programs, accommodation, and brokerage for safety upgrades. Encourage whole of community involvement in addressing domestic and family violence
Mount Isa	 Providers respond well to immediate crisis situations, keeping clients safe and free from danger. System is geared towards providing culturally appropriate services in appropriate settings for clients. 	 Staff changeover between organisations in the area requires relationships to be constantly re-established. This was reported to be a consequence of funding arrangements. Capacity of services and individual roles, such as counsellors, limits immediate service provision. Ability for services to support remote towns (which are reported to have few, or poorly funded services). 	 Streamlining of data entry requirements for services would reduce administrative time. Preventative strategies and better integration with child protection practice is needed. The practice frameworks used within the area should reflect a holistic approach to working with victims and perpetrators. More holistic community responses enabled by targeted funding and
Roma	Providers have the ability to handle crisis situations, with agencies able to collaborate well in these situations.	 Collaboration between services outside of crisis situations. No growth funds for the refuge sector, with challenges in the accessibility of both crisis and long term accommodation. Challenges in removing perpetrators from the home and the need to make perpetrators more accountable Funding agreements focus on high outputs, reducing the focus on quality and don't account for costs of travel 	 Alternative service delivery models (such as outreach) that could help provide services to families outside of townships. Greater coordination to reduce duplication of services, and identify service gaps. Subsidised training programs for people in local communities to address recruitment and retention issues. Travel requirements and impacts should be reflected in funding agreements.

Survey findings Reported perceptions of the system at the LGA level

	Strengths	Challenges	Respondent proposals for improvement
lpswich	 Services self-assessed themselves as providing high quality services to those in need, noting their knowledge of their intervention, sector, and commitment to families. The commitment of workers and the system to provide services and support women and children with limited resources – the system manages to hold high risk situations and progress them to acceptable levels of safety. There is a positive shift in the community towards creating change. 	 The capacity of existing service providers, for example limited crisis accommodation stock. Need to strengthen referral pathways and general awareness of what different agencies offer (including those that are not specialist agencies) Ways to support victims who are not eligible for Centrelink benefits e.g migrants. The lack of availability of services tailored to children affected by domestic and family violence. 	 Funding to provide services through Aboriginal and Torres Strait Islander and CALD specific positions. Increase mobile support and brokerage services for women escaping domestic and family violence. Integrated responses in the area require commitment from both government and non- government agencies. A streamlined integrated legal approach to minimise the impacts on family members. Integrated responses should also include perpetrator programs. A well designed data and client management system for the sector would increase information management and consistency, contributing to local evidence based practice.
Gold Coast	 The Southport Magistrates Court Domestic violence trial has made a positive impact. This, in conjunction with cross sector and agency collaboration supports safety and consistency of services. Messaging around domestic and family violence and its unacceptability in the community, as well as opportunities for both victims and perpetrators to engage in the system have been positively received. 	 Sentencing does not necessary reflect the views of the community, particularly around consistency in sentencing. Funding increases are required due to the increase in complexity that the system (for example dealing with refugees). Exit options for people leaving refuges are inadequate. Financially supporting women from CALD backgrounds without financial support and income. 'New funding' is targeted at new, innovative projects, but should not ignore current services that are known to work. 	 Services targeted at women escaping violence need to have their capacity increased as this is the area where there is the least amount of support, however is when victims are in the greatest danger. Public campaigns encouraging women to leave abusive situations need to align with services that can support them to do this. Conversely, the availability of long term support services also requires an increase in capacity, as well as prevention and support for healthy relationships. Enhancing the QLD Police response, particularly around domestic and family violence reports and breaches of protection orders.

Geographic Service System Profiles

Profile of the Selected Geographic Areas

Profile of Selected Regions

To assist in understanding the operation of the domestic and family violence service system across the five selected locations, a service profile was developed for each locality.

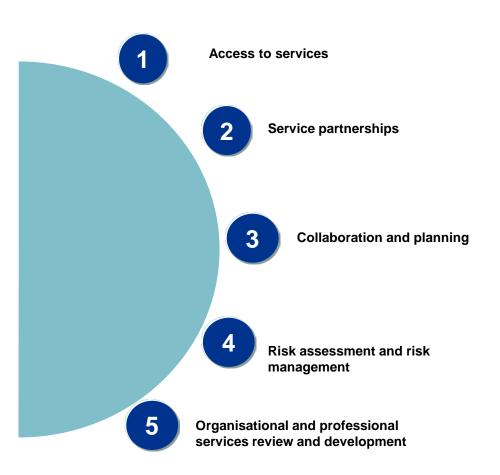
This includes information on:

- The geographic location in the State;
- Demographic characteristics of residents in the LGA;
- An overview of the level of funding provided in the LGA in 2014-15 (note areas may have received additional funding post the audit which have not been included*);
- The incidence of domestic violence in the area as indicated by police incidents;
- The agencies and programs being provided in the relevant area; and
- A description of key service providers operating in the LGA and the services they provide (note LAQ services have been excluded from the analysis as they have been defined as a state-wide service).

Survey Results

The results of the survey were then used to provide more in-depth analysis of the way services are operating in the selected locations across five key domains that were examined in the survey as shown in the adjacent figure.

Surveyed Domains – Domestic and Family Violence Service System



Geographic Profile Rockhampton

As a regional centre, with a population of 80,345 (2014), Rockhampton has a range of services available to victims of domestic violence and specialist services for the elderly, disabled or homeless. There are also culturally specific programs available for the Aboriginal and Torres Strait Islander population. In addition to domestic violence services, there are a range of targeted early intervention family support programs as well as child protection and safety programs. There are two programs available for perpetrators and these focus on legal support rather than counselling to change long-term behaviours.

While Rockhampton is not considered to be a rural or remote area, there may be difficulties delivering domestic violence services to those who live outside the city of Rockhampton. The region is geographically dispersed and some communities are highly isolated, in particular the Woorabinda community (170kms from Rockhampton) which is likely to require higher support levels.

In 2014, there were **3,140 incidents** of domestic violence reported to police in **Rockhampton**, that is approximately **27 incidents per 1,000 people**. Funding identified for Rockhampton in the 2014/15 financial year was \$1,763,717.

Examples of funded programs available in the Rockhampton:

Community Legal Services Program (CLSP)	Domestic and Family Violence Funding Area	Homelessness Program
In Rockhampton in 2014-15 the CLSP funded the Central Queensland Legal Centre (CQLC) and the Queensland Aged and Disability Advocacy (QADA) to provide legal assistance services for disadvantaged members of the community and those with special needs and/or those whose interests should be protected as a matter of public interest. Both organisations provide information / referrals to support agencies, legal advice, casework and court representation and / or support. However, QADA focuses on providing services to elderly or disabled victims of domestic and family violence. CQLC works with the whole family including victims and perpetrators. Services cover early intervention (linking family to services to reduce the impact of domestic violence), tertiary (working with the family in the court system and post-crisis support. Both are available via telephone or face to face. Funding is provided by the Queensland Department of Justice and Attorney General (DJAG) and the Federal Government.	 In Rockhampton the Domestic and Family Violence Funding Area supports: 1. Relationships Australia Queensland (services for perpetrators and children) 2. Anglicare – Central Queensland (services for victims); 3. Roman Catholic Trust Corporation (services for victims, services offered in Emerald – west of Rockhampton); 4. Helem Yumba Inc. (services for Indigenous perpetrators and victims); and 5. Women's Health information and Referral Service Queensland (services for victims). To provide timely and quality risk and needs assessment, information, counselling and support to people affected by domestic and family violence as well as investment in service delivery to achieve safer communities through prevention and early intervention and system capacity building. Funding is provided by the Queensland Department of Communities, Child Safety and Disability Services (DCCSDS). 	 The Homelessness Program funds the Rockhampton Women's Shelter to reduce the number of people who are homeless or at risk of becoming homeless in Queensland by funding services that assist people to: Obtain and maintain housing; Maximise their capacity to be independent; Be self reliant; and Connect to appropriate social and community supports. The program aims to provide post-crisis support i.e. through counselling, practical support such as funding safe accommodation and referrals to other services to homeless women who have experienced domestic and family violence. Funding is provided by the Queensland and the Federal Government. DHPW has committed funding to the Homelessness Program in Rockhampton until 30 June 2018.

Funding

DCCSDS

DHPW

DJAG

 \checkmark

Cohorts covered

Both

Geographic Profile Rockhampton

		Service providers		Government agencies
Access to services	•	Some respondents (2/9) reported difficulties for clients accessing their services. This was due to a lack of capacity to service demand and the subsequent wait list for services, as well as logistical difficulties such as transportation, childcare, and phone reception. Specific service gaps were noted to include the availability of specialist DFV services, perpetrator programs, legal advice and representation, emergency and post emergency accommodation, accommodation for perpetrators which impacts the use of ouster orders, limited services for people who use violence towards their parents, after hours services, brokerage funding, emergency relief (for example food vouchers and financial assistance) and pet care (which can be a barrier to a victim leaving).	•	Specific service gaps were noted to be understanding of the service system in the area (what is available and how to access it), accommodation as current services are at capacity (in addition shelters do not cater to men), and 'practical help' such as brokerage.
Service pathways	•	Almost all respondents (8/9) noted developed to well developed referral pathways in terms of their extent and their strength. These referral pathways are supported by inter-agency meetings (9/9), case coordination/case conferencing (7/9), formal service agreements (7/9), and community events (9/9). One respondent reported that their referral pathways also included private businesses such as mining companies. Another respondent noted their need to refer to counselling services specific to child victims of DFV. Barriers to the development of effective service pathways in this area were reported to include services withholding referrals due to the competitive nature of funding, as well as a lack of available specialist, and culturally appropriate services. Conversely, individualised service offerings and a focus on community engagement and relationship building supported strong pathways.	•	Two of the five respondents answered this question, reported well developed or developed referral pathways. These pathways were supported by comprehensive understanding of the support agencies in the sector could provide, as well as DFV network meetings that facilitated relationships between services.
Collaboration and planning	•	Five of the nine respondents reported that multi agency case management and collaboration was either developed or well developed, with the remaining respondent reporting that this was a somewhat developed practice. Barriers were reported to include legal privilege and information sharing barriers in accordance with National Privacy Principles, as well as time constraints for agencies Five of the nine respondents participate in joint planning. Challenges to engaging in joint planning were similar - the fear of losing funding (therefore competition between services or reluctance by a service to engage with others) and the time and resources required.	•	Two of the five respondents reported that their organisations were developed in their engagement in multi-agency case management and collaboration, with two reporting that this was not well developed or somewhat developed. Challenges were noted to be expectation management, as well as a lack of client centric practice. It was noted that 'agencies need to understand that instructions need to come from the client'.
Risk assessment and risk management	•	Seven of the nine respondents assessed their organisation as having developed to well developed risk assessment and management systems, with six of the nine reporting similarly for having supporting policies and processes in place. Staff complacency was reported to be a barrier, as well as funding agreement criteria. Supporting factors were noted to be organisational focus on staff safety, client needs, and governance. Respondents noted the following areas where risk assessment and management protocols are in place: client screening (6), safety planning (8), child safety and mandatory reporting (6), worker safety (8), home visiting (7), and suicidality (5). Respondents primarily used internally developed tools.	•	Four respondents assessed their service as having developed to well developed management systems, and supporting policies and processes. Challenges were availability of resources to act on identified issues, and ensuring that risk processes are completed properly and efficiently. Various risk assessment tools are in place
Organisational	•	Six respondents reported that they were effective or very effective in ensuring that services are delivered, monitored, reviewed, and reassess clients had a access to fair, accessible and accountable feedback, complaints and appeals mechanisms.	ed, w	vith five respondents responding similarly for ensuring that
and Professional review and	•	Almost all respondents undertake formal service review (4/5), with these reviews informing continuous practice improvement and service or training requirements.	devel	opment, policy and procedural appropriateness, and staff
development	•	Six respondents provide regular opportunities to support DFV professional practice (this was N/A for one respondent), with three respondents (this was N/A for two respondents, with two other respondents stating that they did not provide this training).	s pro	viding training targeted at working in multi-agency settings

Geographic Profile Mount Isa



As a regional centre for remote communities and Aboriginal and/or Torres Strait Islander communities, Mount Isa domestic and family violence support services are required to operate over a very large area. Although some services are available via telephone the majority are delivered face-to-face, which raises difficulty given the remote location and large distances needed to travel to deliver services.

There are a small number of organisations delivering counselling support – there is legal support and intervention programs but no evidence of state or federal government funding for post-crisis counselling services. Unlike other regions, perpetrator services include early intervention services rather than just legal support once navigating the court system. As with other regions women's shelters and domestic and family violence accommodation support will be defunded past FY15. In 2014, there were 1,114 incidents of domestic violence reported to police in Mount Isa, that is approximately 49 incidents per 1,000 people. Funding identified for Mt. Isa in the 2014/15 financial year was \$1,140,044.

Examples of funded programs available in Mt. Isa:

Community	Legal	Services	Program	(CLSP)
Community	Legai	JEIVICES	FIUgraill	

In Mount Isa in 2014-15 the CLSP funded the Western Queensland Justice Network (WQJN) to provide legal assistance services for disadvantaged members of the community and those with special needs and / or those whose interests should be protected as a matter of public interest.

The organization provides support primarily to rural and remote victims and perpetrators of domestic and family violence. It targets vulnerable individuals in particular Aboriginal and / or Torres Strait Islanders, those with mental health issues and individuals living with a disability or are homeless. It provides information / referrals to other support agencies, legal advice, casework and court representation and / or support and works with individuals at all stages of the system i.e. early intervention, tertiary and post crisis support.

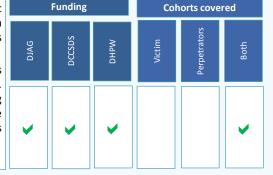
Funding is provided by the Queensland Department of Justice and Attorney General (DJAG) and the Federal Government. Funding contracts are allocated on a two yearly basis.

Domestic and Family Violence Funding Area

In Mount Isa the Domestic and Family Violence Funding Area supports the **Coalition on Criminal Assault in the Home (North Queensland) Inc.** to deliver three programs aimed at delivering early intervention and post-crisis support, these are:

- 1. Domestic and Family Violence Men's Perpetrator an early intervention program aimed at preventing violence before it occurs and working with men following referral by the court when a domestic violence order is made;
- 2. Mount Isa Safe at Home Service a post-crisis support for victims of domestic and family violence that provides home security safety upgrades; and
- North Queensland Domestic Violence Resource Service a post-crisis support service for victims navigating the court system.

Funding for all programs is provided by DCCSDS, with funding for the perpetrator program higher than for safety upgrades and court support.



Homelessness Program

The Homelessness Program aims to reduce the number of people who are homeless or at risk of becoming homeless in Queensland by funding services that assist people to: obtain housing, maintain their housing, and maximize their capacity to be independent, self reliant and connected to appropriate social and community supports. In Mount Isa the program funds:

 The Aboriginal and Islanders Development and Recreational Women's Association to run the Aboriginal and Islander Women' Shelter – Nawamba, which provides five units of accommodation to women fleeing violence as well as parenting skills classes and education support; and

 The Coalition on Criminal Assault in the Home to run the North Queensland Domestic Violence Resource Service which provides 1,340 hours of annual case management support.

To deliver post crisis support to women and children escaping domestic and family violence. The former service focuses specifically on Aboriginal and / or Torres Strait Islander women.

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Detailed survey results Mount Isa (service providers)

	Service providers	Government agencies
Access to services	 One respondent (1/5) reported difficulties for clients accessing their services, due to the limited hours of the operation of the telephone service that they provide. Specific service gaps were noted to include perpetrator programs especially in remote communities as men do not have places or services to access to address their issues, legal advice and representation, emergency and post emergency accommodation, and limited understanding about the complexity of DFV. 	• Specific service gaps were noted to be accommodation for perpetrators (so victims can stay in their homes), perpetrator programs, and emergency accommodation.
Service pathways	 All respondents (5/5) noted developed to well developed referral pathways in terms of their extent and their strength. These referral pathways are supported by inter-agency meetings (5/5), case coordination/case conferencing (3/5), formal service agreements (2/5), and community events (5/5). In Mt Isa barriers to developing referral pathways included the capacity to action a referral, the time required to maintain relationships and networks the distance between services and specific service gaps, understaffed services and client willingness to go to some services. 	• Two of the three respondents reported developed or well developed referral pathways. The third respondent, a health service, noted that the lack of internal referral to appropriate specialists limited further referral to the sector. Legal services noted that open communication between courts facilitated referral pathways
Collaboration and planning	 Three respondents reported that multi agency case management and collaboration was either developed or well developed, with the remaining respondent reporting that this was either not well developed or somewhat developed. Barriers to engaging in this process included legal privilege limiting information sharing, lack of clear expectations on the purpose of meetings and the scope of what involved agencies are able to do, and the commitment and capacity to engage on a regular basis in a small community. It was reported for example that the monthly DFV taskforce in the area has the 'same small regulars attend'. Almost all (4/5) services undertook annual reviews of their work with other services/agencies. Barriers affecting review were reported to be the lack of suitably qualified staff, and insufficient funding. Almost all respondents (4/5) participate in joint planning, with one respondent reporting that they did not engage in this practice due to the lack of suitably qualified staff, and insufficient funding. Supporting factors to engaging in joint planning included the reputation and recognition of a service, close working relationships, and the effective sharing of information between services. 	 Two of the three respondents reported that their organisations were developed in their engagement in multi-agency case management and collaboration. Facilitating factors were reported to be collaboration as a result of a small population, and open communication. It was also reported that barriers to this were a lack of communication, opportunity, resourcing, and identified pathways. The same two respondents participated in joint planning, with the third respondent citing a lack of resources for not engaging in joint planning.
Risk assessment and risk management	 All respondents assessed their organisation as having developed to well developed risk assessment and management systems, and supporting policies and processes. Holistic service delivery and strong practice frameworks (legal) were reported as enablers of strong risk assessment and management systems. Barriers to effective risk management were noted to be the time and resources required to develop best practice, relevant tools specific to the service. Respondents noted the following areas where risk assessment and management protocols are in place: client screening (4), safety planning (5), child safety and mandatory reporting (4), worker safety (5), home visiting (2), and suicidality (1). Other areas not included in the survey were reported to be NACLCL professional indemnity requirements. Respondents primarily used internally developed tools. 	 Two of the three respondents assessed their service as having developed management systems, and supporting policies and processes. The third respondent noted early development in this area, and fear by clients on the consequences of referral. The following risk assessment tools are in place: client screening (2), safety planning (3), child safety and mandatory reporting (1), worker safety (2), home visiting (1), and suicidality (1). All respondents used internally developed tools.
Organisational and Professional review and development	 All respondents reported that they were effective or very effective in ensuring that services are delivered, monitored, reviewed, and re accessible and accountable feedback, complaints and appeals mechanisms. Almost all respondents undertake formal service review (4/5), with these reviews informing continuous practice improvement and service training requirements. Two respondents provide regular opportunities to support DFV professional practice and training targeted at working in multi-agency setting 	development, policy and procedural appropriateness, and staff

Geographic Profile Roma



Domestic and family violence support services are limited in Roma with only two funding programs supporting three service delivery programs. These services cover early intervention and post-crisis support. There is a focus on advocacy and legal services through the Community Legal Services Program. Most services are directed at victims of domestic and family violence although legal support and some counselling is available for perpetrators. Unlike other regions Roma does not have funded homelessness programs – it is unclear whether there is limited need for these services in Roma or whether they exist but are funded through other organisations.

Support services in Roma are generally provided on a face to face basis. Although this may improve service delivery, it could create difficulties in the delivery of support services to more remote populations.

In 2014, there were **238 incidents** of domestic violence reported to police in **Roma**, that is approximately **17 incidents per 1,000 people**. Funding identified for Roma and surrounding areas (Maranoa LGA) in the 2014/15 financial year was \$1,184,759.

Examples of funded programs available Roma and surrounding areas:

Community Legal Services Program (CLSP)

In Roma in 2014-15 the CLSP funded:

- 1. Roma Community Legal Service; and
- 2. The advocacy and support centre (TASC).

Both services provide information, referral, legal advice, minor assistance, casework and court support across vulnerable individuals. In particular there is a focus on delivering services to Aboriginal and/or Torres Strait Islander Australians, those living within mental health disorders, or individuals who are elderly, disabled or at risk of becoming homeless. The legal support is available for victims and perpetrators of domestic and family violence and is generally tertiary or post-crisis i.e. navigating the court system or providing court support. However, some early intervention services are available. Services are provided face-to-face or via telephone.

The program aims to contribute to the provision of access to legal assistance services for disadvantaged members of the community and those with special needs and / or those whose interests should be protected as a matter of public interest through the provision of funding to community-based organisations.

Funding is provided by the Queensland Department of Justice and Attorney General (DJAG) and the Federal Government. Funding contracts are allocated on a two yearly basis.

Domestic and Family Violence Funding Area

Funding

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Cohorts covered

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In Roma, the Domestic and Family Violence Funding Area funds **The Corporation of the Roman Catholic Diocese of Toowoomba** to provide early intervention and post-crisis support to victims and perpetrators of domestic and family violence in central Queensland. Services include counselling, assistance in court and group programs. All services are delivered face to face by Centacare Safer Families Support Service. Although this improves service delivery, it has the potential to exclude support needs of more remote populations. To address this issue Centacare Toowoomba also has a phone line to support clients in more rural/remote areas within the Roma catchment.

Individuals can access services by self-identifying a need for support or be referred to the program by the courts, police or other support agencies.

The program aims to provide timely and quality risk and needs assessment, information, counselling and support to people affected by domestic and family violence as well as investment in service delivery to achieve safer communities through prevention and early intervention and system capacity building.

Funding is entirely state based and is provided by the Department of Communities, Child Safety and Disability Services, there is an expected increase in funding for these services over the next few years.

Detailed Survey Results Roma

	Service providers	Government agencies
Access to services	 One respondent (1/3) reported difficulties for clients accessing their services, due to the limited hours of the operation of the telephone service that they provide. Specific service gaps were noted to include services for children as victims of DFV, mobile support services in the community, post refuge support, perpetrator programs legal advice and representation, and emergency and post emergency accommodation. 	 Specific service gaps were reported to be services for Indigenous people, mental health and intellectual disability.
Service pathways	 All respondents (3/3) noted developed to well developed referral pathways in terms of their extent and their strength. These referral pathways are supported by inter-agency meetings (3/3), case coordination/case conferencing (2/3), formal service agreements (3/3), community events (3/3). Barriers in the Roma LGA in the development of referral pathways included staff turnover at agencies (specifically noted to have an impact in Indigenous services), the capacity to action a referral, the time required to maintain relationships and networks (especially with geographic spread) and the priority of funding being to provide direct client support. 	 One of the two respondents reported a developed referral pathway supported by existing knowledge of service providers due to the experience of their staff. The other respondent reported somewhat developed and weak referral pathways due to the geographical spread of their centres.
Collaboration and planning	 Two respondents reported that multi agency case management and collaboration was either developed or well developed, with the remaining respondent reporting that this was not well developed. Barriers to engaging in this process included legal privilege limiting information sharing, lack of participation by some agencies, and funding of staff to work in this capacity. Almost all (8/9) services undertook annual reviews of their work with other services/agencies. Barriers affecting review including the availability of time and resources to undertake evaluation (or source an external evaluator), as well as information sharing between agencies. With the service that didn't undertake this reporting that the reason for this was that it had not been requested of the service. Joint planning is undertaken by two of the three respondents, with one respondent reporting that they did not engage in this practice due to a lack of opportunity, lack of suitable partners, and their focus on direct service provision. Time and resources are the most challenging aspect of this. 	 One of the two respondents reported that their organisation was somewhat developed in their engagement in multi-agency case management and collaboration. This was due to the irregular and generalist nature of meetings held across the centres they service. In addition, service accessibility is variable across the areas they operate in. Challenges to joint planning were reported to be due to the large distance between services, lack of agencies involved in the sector and the experience and training of agency workers.
Risk assessment and risk management	 All respondents assessed their organisation as having developed to well developed risk assessment and management systems, and supporting policies and processes. Strong risk management was reported to be facilitated by holistic service delivery and a strong professional legal framework. Barriers to effective risk management were noted to be the time and resources required to develop best practice, relevant tools specific to the service. Respondents noted the following areas where risk assessment and management protocols are in place: client screening (3), safety planning (3), child safety and mandatory reporting (3), worker safety (3), home visiting (3), and suicidality (3). Other areas not included in the survey were reported to be NACLCL professional indemnity requirements. Respondents utilised a mix of internally developed and licensed tools, including QHP. 	 Respondents assessed their service as having developed or well developed management systems, and well developed supporting policies and processes. The following risk assessment tools are in place: client screening (2), safety planning (2), child safety and mandatory reporting (1), worker safety (2), home visiting (2), and suicidality (2). A mix of licensed and internally developed tools were used.
Organisational and	 All respondents reported that they were effective or very effective in ensuring that services are delivered, monitored, reviewed, and reas accessible and accountable feedback, complaints and appeals mechanisms. 	ssessed, as well as for ensuring that clients had a access to fair,
Professional review and development	 Formal service reviews are undertaken by two respondents, with these reviews informing continuous practice improvement and service deve All respondents provide regular opportunities to support DFV professional practice with none providing training targeted at working in multi- 	

Geographic Profile



As part of the South East corner with a larger population group residents of Ipswich have access to a wider range of domestic and family violence support services than more rural and regional areas. Funding at the state level for these services is expected to increase over the next few years. There will be a drop in federal funding from FY15 to FY16, mainly due to the removal of funding for homelessness services as reflected in all other regions. However, federal funding should remain relatively stable after FY16 with ongoing funding for the Community Legal Services Program, the only other support service directly funded by the Federal Government.

As with services in other regions, contracts for support services generally run for two years and are updated on a rolling basis.

In 2014, there were 3714 incidents of domestic violence reported to police in Ipswich, that is approximately 20 incidents per 1,000 people. Funding identified for Ipswich in the 2014/15 financial year was \$2,165,069.

Examples of funded programs available in Ipswich:

Community Legal Services Program (CLSP)	Victim Services Extended Program	Domestic and Family Violence Funding Area	Seniors Legal and Support Service (SLASS)	Homelessness Program
 In Ipswich in 2014-15 the CLSP funded: 1. The South West Brisbane Community Legal Centre; and 2. The Advocacy and Support Centre (TASC). The program provides information, legal advice, minor assistance, casework, court representation, court support, advocacy and referrals to other organisations as needed to vulnerable individuals. Support covers early intervention through to postcrisis support. All services are available face-to-face or by telephone. Services are available for the both the perpetrator and victim although TASC focuses on delivering services to the aged and disabled. 	 The Victim Services Extended Program operates in Ipswich, to provide postcrisis support including counselling and peer support to victims of violent crime, it is not specific to domestic and family violence but does work with victims. The program funds: 1. WWILD – Sexual Violence Prevention Association – aimed at victims of violent crime with an intellectual disability. Services include counselling and needs assessments; and 2. Court Network Inc. – aimed at victims of violent crime, required to attend court. Both services are based in Brisbane but operate in Ipswich as well. Both are also entirely state funded. 	 The Domestic and Family Violence Funding Area provides post-crisis support to victims in Ipswich through, the Domestic Violence Action Centre Inc. which runs the following programs: 1. Domestic Violence Action Centres – one in Goodna/Springfield and one in Toowoomba / Darling Downs which provide counselling services; 2. Ipswich Safety Upgrades Service which provides home security safety upgrades; and 3. Ipswich Women's Centre Against Domestic Violence which provides counselling programs. Uniting Care Community is also funded for a perpetrator intervention program under the Child Safety Ancillary funding program. 	The Seniors Legal and Support Services provides assistance to vulnerable elderly people at risk of / experiencing elder abuse or financial exploitation. In Ipswich the program funds The Advocacy and Support Centre Inc. (TASC) to deliver legal assistance / information, advice and representation. The organisation receives referrals from Queensland Police, Queensland Ambulance Services and Aged Care facilities.	 In Ipswich the Homelessness Program funds: 1. Ipswich Women's Shelter, to deliver services to women and children escaping domestic violence; and 2. Hannah's House which provides support to victims of domestic violence, in particular young women. Both organisation provide post-crisis support in the form of immediate supported accommodation for those fleeing violence.

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Funding

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Cohorts covered

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Both

Detailed Survey Results Ipswich

	Service providers	Government agencies
Access to services	 Almost all services noted issues with access. Service access was reported to be limited by transport and funding (the personal finances of the client to access a service), a lack of outreach in the area, and limited capacity to provide services and handle the volume of referrals. Standard office hours were also noted to be a barrier to service access (for both in person and telephone based services). Specific service gaps include accommodation and affordable accommodation, safety upgrades funding, counselling for children and mobile counselling, income assistance, perpetrator programs, safety initiatives, outreach, legal services and representation (for both applicant and respondent), educational work in schools. 	• Specific service gaps were reported to youth specific perpetrator programs (increasingly for females), outreach services to suburbs in the greater Ipswich area, and the general availability of services across the geography of the LGA.
Service pathways	 Additional areas of inbound referral were reported to be family dispute resolution, and Centrelink, with additional outbound referral areas reported to include microfinance services. Most respondents (8/12) noted developed to well developed referral pathways in terms of their extent and their strength, with 3 noting that these were somewhat developed. These referral pathways are supported by inter-agency meetings (12/12), case coordination/case conferencing (8/12), formal service agreements (9/12), community events (10/12), and other mechanisms such as special events, engaging in co-design with government departments, and engaging in regional and state-wide networks. Barriers to development of referral pathways included the lack of specialist DFV practitioners in the area and lack of training provided to general human services workers, lack of awareness by professionals on the available services in the area. There were also reported challenges with Police Link as a referral service, as well as some DFV services actively withholding appropriate referrals. 	• Four of the five respondents reported developed or well developed referral pathways, with staff engagement in the region with both clients and stakeholders driving this. The lack of services in some areas, existing service capacity, and the impact of distance were reported as barriers to effective referral pathways.
Collaboration and planning	 Over half of the respondents reported that multi agency case management and collaboration was either developed or well developed (7/12). Barriers to engaging in this process included resistance to engage by other agencies, particularly around confidentiality processes, geographical spread, and competitive tendering. Generalist services are reported to have difficulty identifying, and therefore presenting DFV issues to the sector. It was also noted that the relationship between government agencies and NGOs was not always productive. There were also reports of the impact of QLD Police responses to call outs impacting individual service's engagement with them Collaboration was supported however the implementation of the Under 1Roof Ipswich initiative, networking meetings and local level alliances, with 10/12 services having a formal partnership of some kind. 	 Three of the five respondents reported that their organisation was somewhat or not well developed in their engagement in multi-agency case management and collaboration. This was due to staff capacity to assist, as well as staff expertise. Joint planning was undertaken by two of the three respondents. One respondent noted that joint planning was undertaken at a central, rather than local level.
Risk assessment and risk management	 Almost all respondents (11/12) assessed their organisation as having developed to well developed risk assessment and management systems, and supporting policies and processes. Strong risk management was reported to be facilitated by electronic systems and evidence based risk assessment models that can be adapted by the organisation to the client. Barriers to effective risk management were noted to be the need to triage referrals, and therefore timely application of assessment, as well as worker safety particularly when home visiting. The presence of partners are not often disclosed, which can leave workers in more risk than was foreseen. Respondents noted the following areas where risk assessment and management protocols are in place: client screening (9), safety planning (11), child safety and mandatory reporting (10), worker safety (11), home visiting (11), and suicidality (10). Other areas not included in the survey were reported to be NACLCL professional indemnity requirements, duty of care, confidentiality, and event planning. All respondents utilised internally developed tools, with one using a mix of internally developed and external tools. 	 There was a mix in responses about the level of development of management systems and supporting policies and processes. One health service reported that a lack of training and referral pathways were challenges. The following risk assessment tools are in place: client screening (4), safety planning (4), child safety and mandatory reporting (2), worker safety (4), home visiting (2), and suicidality (3). Tools were primarily internally developed.
Organisational and Professional review and development	 All respondents reported that they were effective or very effective in ensuring that services are delivered, monitored, reviewed, and reasses accessible and accountable feedback, complaints and appeals mechanisms, with almost all (11/12) reporting that these were effective or ver Formal service reviews are undertaken by 8/12 respondents, with these reviews informing continuous practice improvement, resource alloci independent reviews as well as conducting reviews internally. Over half of the services surveyed provide regular opportunities to support DFV professional practice (7/12), with only four providing training 	y effective. ation, and lobbying. One respondent noted that they commission

Geographic Profile Gold Coast



There are a greater range of providers for both victims and perpetrators of domestic and family violence in the Gold Coast. As a regional centre with a large population, the Gold Coast has a range of services not available in other regions e.g. Victim Services Extended Program and the Seniors Legal and Support Service. QCS also provides support for a perpetrator program in the area. As with all other regions, federal and state funding for homeless support services is being removed.

Southport on the Gold Coast has been nominated as a trial site for a specialist domestic and family violence magistrates court. The six-month trial started on the first of September 2015. An evaluation will occur at the end of the trial period to prepare for a potential state wide roll out. The trial aims to make responses to domestic and family violence coordinated and consistent to ensure they are effective.

In 2014 there were 5,183 incidents of domestic violence reported to police in Gold Coast, that is approximately 10 incidents per 1,000 people. Funding identified for the Gold Coast in the 2014/15 financial year was \$6,863,572.

Examples of funded programs available in the Gold Coast region:

Community Legal Services Program (CLSP)	Victim Services Extended Program	Domestic and Family Violence Funding Area	Seniors Legal and Support Service (SLASS)	Homelessness Program
 In 2014-15 the CLSP funded two programs on the Gold Coast : 1. Gold Coast Community Legal Centre which provides legal advice, casework, information, referrals and support to perpetrators and victims; and 2. QLD Aged and Disability Advocacy which provides advocacy and support for vulnerable people Services cover early intervention and post-crisis support and are available both face to face and via the telephone. Funding is provided by Queensland DJAG and the Federal Government. 	The Victim Services Extended Program on the Gold Coast aims to provide support to victims of violent crime, including victims of domestic and family violence. The program funds WWILD Sexual Violence Prevention Association to provide counselling, needs assessments, court support, case management and emergency response to individuals who have been victims of cime. Support is mainly post-crisis and the main target group are vulnerable individuals with an intellectual disability. Services are provided face to face. Funding is provided by Queensland DJAG.	 The Domestic and Family Violence Funding Area funds: 1. Domestic Violence Prevention Centre Gold Coast Inc. to provide early intervention and post crisis counselling support to victims; 2. The Corporation of the Trustees of the Roman Catholic Archdiocese of Brisbane which runs three programs – two for victims which focus on providing legal services and support and one for perpetrators which focuses on counselling support programs.; and 3. Domestic Violence Prevention Centre to run two programs covering counselling and legal support for women and children and court based support. 	SLASS provides services to vulnerable older people at risk or experiencing elder abuse or financial exploitation. On the Gold Coast it funds the Caxton Legal Centre Inc to provide early intervention and post-crisis responses to individuals over the age of 60 who are victims or potential victims of elder abuse. The program focuses on providing legal support services to individuals and can refer to support networks if necessary.	 The Homelessness Program funds on the Gold Coast: 1. Macleod Accommodation Support Service Inc; 2. OzCare; 3. The Salvation Army (QLD) Property Trust – provides support to victims and perpetrators; 4. The Uniting Church; and 5. The Wesley Mission Brisbane. All provide immediate accommodation support to those at risk of becoming homeless. The first three focus on victims of domestic and family violence while the last two focus on general homelessness support.

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Cohorts covered

Both

Detailed survey results Gold Coast

	Service providers	Government agencies
Access to services	 Survey respondents noted minimal issues with clients accessing services (5/12). Where Service access was reported to be limited this was primarily due to service capacity. This relates to both the type of services available (for example the availability of men's programs) and the capacity of individual services to take clients. Waiting lists for some services were noted to be between one to four weeks, with full refuges in the area and limited contact hours available for over the phone advice. In another example, one service reported that when full, clients were asked to call the service back at a later time (in conjunction with referrals). 	 Specific service gaps were reported to include after hours services, with no services aside DV Connect available on public holidays, small scale of delivery, and limited models of DFV service delivery.
Service pathways	 The majority of survey respondents (10/12) noted developed to well developed referral pathways. These referral pathways are supported by inter-agency meetings (which all respondents participate in), case coordination/case conferencing (4/12), formal service agreements (7/10), community events (12/12), and other mechanisms such as integrated responses and specialist workshops and events. Barriers to the development of referral pathways included, the capacity of the sector to take on referrals, the time and investment required to maintain relationships and networks (particularly given geographic spread, not being involved in the Domestic and Family Violence Integrated Response (GCDFVIR) body, building relationships with other sectors (such as the disability sector), services requesting victims to contact services for support rather than facilitating the referral themselves, and issues regarding information sharing and legislation. 	 Respondents were mixed in their assessment of their referral pathways. Challenges to this were reported to be privacy (likely to refer to the impact of privacy principles on information sharing), lack of available services and their capacity to service demand, and inflexible service hours.
Collaboration and planning	 Multi agency case management and collaboration is not strong in the LGA, with all respondents reporting that this was either not well developed or somewhat developed. Barriers to engaging in this process included service agreements (particularly funding) and information sharing limitations (specifically legal privilege). Barriers to joint planning with other agencies in the LGA were noted to be due to time and resources, as well as competition for resources. The competitive tendering process was reported to be a barrier, with services not necessarily trusting each other. Survey respondents noted that effectiveness in this area was facilitated by structured processes and agreements (such as MOUs and the GCFVIR), as well as a willingness by agencies to communicate regularly and as required. There was more variation in considering ability to undertake annual reviews with other services/agencies, with one respondent noting they were not well developed, 4/12 respondents saying somewhat developed or well developed in this area. 	 Two of the four respondents assessed their organisation as being developed in facilitating multi-agency case management and collaboration, with the remaining assessing themselves as not well developed or somewhat developed. Challenges to collaboration were reported to information sharing, the capacity and availability of services, lack of adequate communication systems, and the need for more seamless services. Joint planning was undertaken by three of the four respondents.
Risk assessment and risk management	 Almost all respondents (11/12) assessed their organisation as having developed to well developed risk assessment and management systems, and supporting policies and processes. Strong risk management was reported to be facilitated by well developed tools and clear policies and guidelines supported by ongoing training and reinforcement of their use and importance. In addition, strong practice frameworks, accreditation, and knowledge of the gravity of the outcomes of these processes on individuals drives their use. Respondents noted the following areas where risk assessment and management protocols are in place: client screening (10/12), safety planning (10), child safety and mandatory reporting (10), worker safety (11), home visiting (5), and suicidality (10). Other areas not included in the survey were reported to be NACLCL professional indemnity requirements. These tools are primarily internally developed (8/12), with only 2 organisations using licenced tools with these being SARA, CVMS, and DVIR. In addition, the National Accreditation Standards for Community Legal Centres were also reported to be in use. 	 There was a mix in responses regarding the level of development of management systems and supporting policies and processes. With challenges being resourcing, while one organisation reporting well developed systems noted the use of a mixture of internal and internally recognised risk assessments with various risk assessment tools in place that had all been internally developed.
Organisational and Professional review and development	 Almost all respondents (11/12) noted that they were effective or very effective in ensuring that services are delivered, monitored, reviewed access to fair, accessible and accountable feedback, complaints and appeals mechanisms. Formal service reviews are undertaken by 9/10 respondents, with these reviews informing strategy, inform program, policy, and legal de training, and the identification of service gaps. Almost all services provided regular opportunities to support DFV professional practice (10, agency settings. This training was linked to specific networks and partnerships, such as the Family Law Pathways Network, Regional Legal A Barriers to providing training were noted to be around the time and funding available for workers to attend training, as well as the travel requires 	velopment and reform, continuous practice improvement, staff /12), with only 3 providing training targeted at working in multi- Aid Forum, as well as relationships with individual organisations.

Appendices

Overview

The Gap Score incorporates three key pieces of information: 1. Police Incidents (to capture level of demand); 2. Funding supplied; and 3. Population data. It captures the number of incidents per person over the dollars supplied per person for each region, which also reintroduces the distribution of \$34.56M state-wide funding per person.

Can Score (region) -	1000 * Incidents per person (region)	$1000 * \frac{co}{co}$	lumn A
Gap Score (region) =	funding \$ per person (region) + statewide \$ per person	$\frac{column B}{column C} +$	<u>column E</u> 1000

As an example the Gap Score for South East Queensland may be computed as follows:

$$Gap \ Score \ (SEQ) = \frac{1000 * \frac{37,938}{3,138,994}}{\frac{$34,975,273}{3,138,994} + $7.405} = 12.086/(11.142 + 7.405) = 0.65$$

Region	Incidents (A)	Funding \$ domestic and family violence (B)	Population (C)	Funding \$ (per 1000) (D)	State-wide \$ (per 1000) (E)	Incidents (per 1000) (F)	Gap Score (G) =(E+F)/ G
Central West	140	\$0	12,458	\$0	\$ 7,405	11.2	1.52
Gulf Regional (a)	684	\$445,534	6,617	\$67,332	\$ 7,405	103.4	1.38
Central Queensland	5,252	\$3,624,317	229,483	\$15,793	\$ 7,405	22.9	0.99
North West	1,288	\$1,140,044	29,950	\$38,065	\$ 7,405	43	0.95
Mackay, Isaac and Whitsunday	4,082	\$2,985,227	180,200	\$16,566	\$ 7,405	22.7	0.94
Wide Bay Burnett	5,787	\$5,182,010	286,705	\$18,074	\$ 7,405	20.2	0.79
Far North Queensland	6,376	\$6,586,937	246,168	\$26,758	\$ 7,405	25.9	0.76
South West	275	\$347,702	8,030	\$43,300	\$ 7,405	34.2	0.68
South East Queensland	37,938	\$34,975,273	3,138,994	\$11,142	\$ 7,405	12.1	0.65
Townsville, Charters Towers and Hinchinbrook	5,191	\$6,265,943	233,907	\$26,788	\$ 7,405	22.2	0.65
Darling Downs	3,745	\$4,572,472	273,272	\$16,732	\$ 7,405	13.7	0.57
Cape York and Torres	1,756	\$4,162,088	20,602	\$202,023	\$ 7,405	85.2	0.41

Appendix 2: Stepping through supply data analysis and mapping

4. 1 Supply Data Limitations

- It should be noted that no attempt has been made to validate the funding data provided by agencies. While a review of the data for completeness and consistency has been undertaken the analysis has relied upon the accuracy of information supplied. In addition, no attempt has been made to reconcile total agency third party funding to financial statements.
- Further, a number of programs have been excluded from agency data responses as they were considered to fall outside the scope of this project. This includes a number of programs funding service providers and individuals by the DCCSDS (e.g. Families, Individuals, Young People Investment Domains).
- Limitations in the data received by KPMG has limited the extent to which agency funding can be attributed to either specialist or generalist programs. Where the level of specialisation was unclear, the assumption was made that the service was generalist unless a web search of the service yielded information to the contrary. Importantly, no data on funding for generalist services (or specialist services, where applicable) was provided by Health or by the Police, even though these two Departments are deeply involved in the response to domestic and family violence.
- Certain assumptions were made where data was incomplete or vague. These assumptions are:
 - The State Funding amount was assumed to be the funding amount for the Positive Futures Program run by QCS;
 - The DJAG 'Other Total' funding was assumed to be 2014-2015 funding. Further to this, the last row of 2919238 was assumed to be part of Victim services extended program (because the service provider funding amounts reconciled with state funding total).
 - Where the audit lacked information, a process of research was undertaken

to locate reported funding amounts for an agency and then calculated based on the proportion of services estimated to relate to domestic and family violence. For example, to determine the amount of real net recurrent expenditure of Magistrates Courts funding including Children's Courts, the audit team sourced the 2015 Report on Government Services (ROGS) which estimated that domestic and family violence funding was 9 per cent of overall ROGS Magistrates funding. This amount came to \$9,854,370.

- Throughout the report, agency funding is analysed according to the type and nature of service delivered, the mode and timing of service delivery, the target client group and the geographical location of the organisation (i.e. service provider). Within the data collection template agencies were able to provide this information at the program, service provider and service outlet levels. For the purposes of the analysis, however, we have undertaken analysis at the service provider level.
- The analysis is high level. Data limitations (in particular around service categorisation) have limited capacity to draw firm conclusions about potential areas for rationalisation and consolidation but we have highlighted areas where we think further investigation may be required.
- At the time of the publication of this report, Queensland Health data had not been included in the analysis as this data was not available to the audit. Caution should therefore be taken when interpreting this report as representative of all domestic and family violence expenditure.

Appendix 2: Stepping through data assumptions for analysis

Data Assumptions

Inconsistencies in the data and information provided by agencies, particularly in regard to completion of the data template provided to agencies by the DPC:

- some fields being left incomplete;
- program level funding not reconciling with the service provider level funding;
- some agencies providing forward funding estimates and some not;
- unclear categorisation of generalist and specialist services, possibly due to varying definitions of these concepts;
- substantial differences in the way that activities were recorded; and
- unknown geographical catchment areas for service providers in some cases.

To address inconsistencies in the data and enable mapping of the service providers the data was cleansed and some variables were recoded. Examples of the variables that were recoded include:

- What services were provided (i.e. nature of services provided);
- Level of specialisation (i.e. generalist or specialist service);
- How the service was provided (i.e. mode of service delivery);
- Whom received the service (e.g. perpetrators or victims;
- When the services were provided; and
- Where the services were provided (i.e. location of service provider and their catchment area).

The 'rules' and assumptions applied to the service mapping exercise are described below.

- 1. Nature of service: services were mapped to six classifications:
 - <u>Counselling Support Programs</u> individual and group counselling for people experiencing domestic and family violence, including perpetrator intervention and behaviour change programming;

- <u>Family Violence Services</u> includes information and referral services, case management, emergency accommodation and safety upgrades, events, community education and training;
- <u>Legal Services</u> includes legal case work, individual and community education, information and referrals, court based support, advocacy, and dispute resolution services;
- <u>Specialist Homelessness Services</u> includes foster and kinship arrangements, residential care, safe houses, transitional supported accommodation and related supports for women and children escaping domestic and family violence or who are at risk of homelessness;
- <u>Telephone Helplines</u> confidential telephone counselling and referral services for people who are experiencing, or concerned for a family member of friend experiencing domestic and family violence; and
- <u>Other</u> captures those programs that did not neatly fit into the aforementioned categories, including financial and material assistance and integrated response.

2. Level of specialisation: Programs and services were classified as 'generalist' or 'specialist' by funding agencies. However, definitions of generalist and specialist varied by agency. For the purpose of the audit, KPMG retained the classification that was given by the respective agencies. In the absence of a specialist or generalist classification, a 'generalist' classification was applied. However, some services were classified as both generalist and specialist, in which case they were classified as generalist except where the term 'specialist' was present in the program title.



Appendix 2: Stepping through data assumptions for analysis

3. Target (client) cohort: the target cohort was broken down in three ways: firstly by the primary client cohort; secondly, by Indigenous status, and finally by more specialised cohort classification (e.g. targeting of high risk groups).

- a) Primary Client Cohort: The first line of classification included:
 - Victim of domestic and family violence;
 - Perpetrator of domestic and family violence;
 - Both, applied in situations where information was ambiguous but services evidently targeted parents or families experiencing domestic and family violence; or
 - Other, applied when the primary target cohort was a party other than the victim or perpetrator, typically children and/or young people or for instances in which the target cohort was the whole community (e.g. events or community education programs).
- b) Indigenous Status: some services specifically targeted ATSI people and were coded accordingly. In the absence of clear indication that Indigenous people were the intended service target cohort, a service was coded as 'Non-Indigenous'. Exceptions were made where the service was provided in an Aboriginal or Torres Strait Islander community or by an Aboriginal Community Controlled Organisation.
- c) Specialised target cohort classification: The inclusion of an additional level of classification enabled a richer picture of specialised target cohorts. The cohorts included are:
 - Children and young people, applied when the primary client cohort selected was specifically (only) for children and young people or for children and young people as well as one or both parents;
 - Disability/Aged, applied when services were directed specifically towards people with disability and/or elderly client cohorts;
 - Immigrants, where services specifically targeted immigrants;
 - Indirect victims, to identify where services were provided to friends and / or family of victims of violent crime; and

 Prisoners, where services were provided specifically to people incarcerated for domestic and family violence

4. Intervention points: services were coded as being 'prevention', 'early intervention', or 'post crisis'. This information was provided inconsistently, and agencies that provided this information commonly provided more than one label to the service providers, indicating that many organisations provide services throughout the domestic and family violence life cycle.

5. Location of services: LGAs and planning regions (grouped LGAs) were selected as the base geography for mapping the location of domestic and family violence services across the state. KPMG constructed a higher-level mapping based on regional areas as shown in Figure A.1 on the following page. Tables A.1 gives greater detail on the LGAs and their corresponding regional planning association (RPA).

95



Appendix 3: Local Government Area data

The demand and supply analysis were originally conducted using LGAs as shown on the following pages.

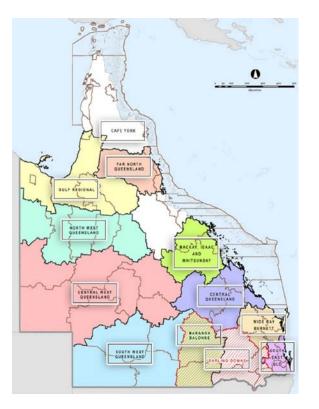
LGAs were then mapped to twelve regional areas as shown in the adjacent figure.

The regional boundaries are those used by the Queensland Government's Statistician's office regional planning areas. There were some gaps in the regional planning boundaries which have been dealt with as follows:

The LGAs of Burdekin (S), Charters Towers (R), Hinchinbrook (S), Palm Island (S), Torres (S), Torres Strait Island (R) and Townsville (C) are not covered by either a regional plan or non-statutory plan. Burdekin, Charters Towers, Hinchinbrook, Palm Island and Townsville have been assigned a region labelled Townsville, Charters Towers and Hinchinbrook" and Torres and Torres Strait Island were assigned to Cape York).

The LGA and the corresponding region are shown in more detail in the following pages.

Figure A.1: Regional mapping applied to geographical data analysis.



Source: Queensland Government Statistician's Office

Table A.1 Regional Planning Areas (RPAs) and their Local Government Areas (LGAs)

Region	LGA	Region
ape York	Aurukun (S)	Darling Downs
	Cook (S)	Daning Donno
	Hope Vale (S) Kowanyama (S)	
	Lockhart River (S)	
	Mapoon (S)	
	Napranum (S)	
	Northern Peninsula Area (R)	
	Pormpuraaw (S)	
	Torres (S)	
	Torres Strait Island (R) Weipa (T)	Far North Queensland
	Wujal Wujal (S)	
Central Queensland	Banana (S)	
	Central Highlands (R)	
	Gladstone (R)	
	Livingstone (S)	
	Rockhampton (R) Woorabinda (S)	Gulf Regional (a)
	woorabinda (3)	
Central West	Barcaldine (R)	
	Barcoo (S)	
	Blackall Tambo (R) Boulia (S)	
	Diamantina (S)	
	Longreach (R)	
	Winton (S)	

Source: KPMG

Table A.1 Regional Planning Areas (RPAs) and their Local Government Areas (LGAs)

gion	LGA	Region
ay, Isaac and Whitsunday	Isaac (R)	South West
	Mackay (R)	
	Whitsunday (R)	
n West	Clongurp (S)	
IVVESI	Cloncurry (S) Flinders (S)	
	McKinlay (S)	
	Mount Isa (C)	Townsville, Charters Towers and Hinchinbrook
	Richmond (S)	
h East Queensland	Brisbane (C)	
	Gold Coast (C)	
	lpswich (C)	
	Lockyer Valley (R)	
	Logan (C)	Wide Bay Burnett
	Moreton Bay (R)	
	Noosa (S)	
	Redland (C)	
	Scenic Rim (R)	
	Somerset (R)	
	Sunshine Coast (R)	

Source: KPMG



Table A.2 Police Incidents by LGA

LGA	Incidents	LGA Population (2013)	Incidence Prevalence (per 1000)
Cherbourg (S)	357	1,286	277.6
Woorabinda (S)	269	996	270.1
Kowanyama (S)	248	1,115	222.4
Yarrabah (S)	585	2,681	218.2
Doomadgee (S)	278	1,382	201.2
Palm Island (S)	497	2,590	191.9
Mornington (S)	199	1,214	163.9
Wujal Wujal (S)	37	285	129.8
Aurukun (S)	162	1,401	115.6
Carpentaria (S)	247	2,225	111.0
Hope Vale (S)	105	1,080	97.2
Lockhart River (S)	51	529	96.4
Pormpuraaw (S)	54	727	74.3
Weipa (T)	274	3,795	72.2
Torres Strait Island (R)	302	4,567	66.1
Paroo (S)	123	1,903	64.6
Grand Total	66,013	1,131,191	58.4
Northern Peninsula Area (R)	141	2,560	55.1
Mount Isa (C)	1,114	22,779	48.9
Cook (S)	189	4,393	43.0
Croydon (S)	13	322	40.4
Cloncurry (S)	121	3,413	35.5
Charters Towers (R)	348	12,491	27.9
Balonne (S)	135	4,886	27.6
Rockhampton (R)	3,140	118,043	26.6
Tablelands (R)	1,209	46,175	26.2
Murweh (S)	119	4,736	25.1
Cairns (R)	4,173	168,618	24.7
Burke (S)	13	556	23.4
Longreach (R)	95	4,244	22.4
Mackay (R)	2,606	121,909	21.4
Whitsunday (R)	697	34,016	20.5
Ipswich (C)	3,714	183,105	20.3
Burdekin (S)	351	17,888	19.6
Bulloo (S)	8	408	19.6

Source: KPMG 2015

Table A.2 Police Incidents by LGA

South Burnett (R)	631	32,641	19.3
Bundaberg (R)	1,766	93,976	18.8
Lockyer Valley (R)	698	37,652	18.5
Richmond (S)	15	845	17.8
Townsville (C)	3,341	189,238	17.7
Maranoa (R)	238	13,800	17.2
Gympie (R)	814	48,145	16.9
Gladstone (R)	1,056	63,955	16.5
Fraser Coast (R)	1,629	100,297	16.2
Boulia (S)	8	496	16.1
Flinders (S)	28	1,828	15.3
Logan (C)	4,356	300,667	14.5
Somerset (R)	337	23,287	14.5
Toowoomba (R)	2,111	160,251	13.2
Moreton Bay (R)	5,364	408,914	13.1
North Burnett (R)	132	10,360	12.7
Isaac (R)	303	24,275	12.5
Central Highlands (R)	383	31,289	12.2
Southern Downs (R)	430	35,559	12.1
Western Downs (R)	365	33,494	10.9
Banana (S)	165	15,200	10.9
Cassowary Coast (R)	306	28,694	10.7
Scenic Rim (R)	399	38,399	10.4
Diamantina (S)	3	292	10.3
Sunshine Coast (R)	3,359	330,498	10.2
Redland (C)	1,483	147,437	10.1
Gold Coast (C)	5,183	537,844	9.6
Blackall Tambo (R)	20	2,319	8.6
Goondiwindi (R)	92	11,032	8.3
McKinlay (S)	9	1,085	8.3
Brisbane (C)	8,964	1,131,191	7.9
Barcaldine (R)	20	3,361	6.0
Winton (S)	8	1,382	5.8
Etheridge (S)	5	918	5.4
Quilpie (S)	3	983	3.1
Barcoo (S)	1	364	2.7
Hinchinbrook (S)	12	11,700	1.0
Moree Plains (A)	2	14,250	0.1

Source: KPMG 2015

100



Table A.3 Protection Order data by LGA

LGA	Protection Orders	LGA Population (2013)	Prevalence (per 1000)
Kowanyama (S)	111	1,115	99.6
Woorabinda (S)	76	996	76.3
Yarrabah (S)	187	2,681	69.8
Mornington (S)	77	1,214	63.4
Doomadgee (S)	81	1,382	58.6
Palm Island (S)	93	2,590	35.9
Wujal Wujal (S)	10	285	35.1
Aurukun (S)	49	1,401	35.0
Lockhart River (S)	17	529	32.1
Pormpuraaw (S)	23	727	31.6
Carpentaria (S)	62	2,225	27.9
Torres Strait Island (R)	101	4,567	22.1
Cook (S)	90	4,393	20.5
Weipa (T)	72	3,795	19.0
Northern Peninsula A	46	2,560	18.0
Mount Isa (C)	396	22,779	17.4
Grand Total	18,709	1,131,191	16.5
Paroo (S)	29	1,903	15.2
Boulia (S)	5	496	10.1
Rockhampton (R)	985	118,043	8.3
South Burnett (R)	256	32,641	7.8
Cloncurry (S)	24	3,413	7.0
Cassowary Coast (R)	196	28,694	6.8
Tablelands (R)	310	46,175	6.7
Whitsunday (R)	224	34,016	6.6
Etheridge (S)	6	918	6.5
Burdekin (S)	110	17,888	6.1
Murweh (S)	29	4,736	6.1
Richmond (S)	5	845	5.9
Longreach (R)	25	4,244	5.9
Cairns (R)	960	168,618	5.7
Balonne (S)	26	4,886	5.3
Ipswich (C)	923	183,105	5.0
Central Highlands (R)	156	31,289	5.0
Maranoa (R)	68	13,800	4.9
Gladstone (R)	306	63,955	4.8
Gympie (R)	229	48,145	4.8

Source: KPMG 2015

101

Table A.3 Protection Order data by LGA

Logan (C)	1,347	300,667	4.5
Southern Downs (R)	159	35,559	4.5
Townsville (C)	830	189,238	4.4
Fraser Coast (R)	434	100,297	4.3
Scenic Rim (R)	158	38,399	4.1
Bundaberg (R)	375	93,976	4.0
Banana (S)	59	15,200	3.9
Moreton Bay (R)	1,570	408,914	3.8
Flinders (S)	7	1,828	3.8
Mackay (R)	465	121,909	3.8
Hope Vale (S)	4	1,080	3.7
Redland (C)	540	147,437	3.7
Toowoomba (R)	577	160,251	3.6
Charters Towers (R)	43	12,491	3.4
Western Downs (R)	114	33,494	3.4
Hinchinbrook (S)	39	11,700	3.3
Gold Coast (C)	1,768	537,844	3.3
Goondiwindi (R)	35	11,032	3.2
Sunshine Coast (R)	1,018	330,498	3.1
Lockyer Valley (R)	103	37,652	2.7
Brisbane (C)	2,621	1,131,191	2.3
Winton (S)	3	1,382	2.2
Burke (S)	1	556	1.8
Barcaldine (R)	6	3,361	1.8
Isaac (R)	41	24,275	1.7
North Burnett (R)	17	10,360	1.6
Blackall Tambo (R)	2	2,319	0.9
Somerset (R)	10	23,287	0.4
Cherbourg (S)	-	1,286	0.0
Diamantina (S)	-	292	0.0
McKinlay (S)	-	1,085	0.0
Quilpie (S)	-	983	0.0

Source: KPMG 2015



Appendix 4: Reference List

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