

TRANSCRIPT

LEGISLATIVE COUNCIL LEGAL AND SOCIAL ISSUES COMMITTEE

Inquiry into Homelessness in Victoria

Bairnsdale—Monday, 2 December 2019

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WITNESSES

Mr Richard Evans, Manager, Homelessness Support Program, and Family, Youth and Children's Services, and Ms Donna Pendergast, Case Manager, Homelessness Support Program, Gippsland Lakes Community Health.

The CHAIR: Hello. Thanks for coming.

Mr EVANS: Thank you. Thank you for coming down.

The CHAIR: It has been great. Our heads are spinning. This is our first regional area, so it has been great.

I just have to do some housekeeping. As you know, this is the Legal and Social Issues Committee and we are undertaking the Inquiry into Homelessness in Victoria. All evidence taken at this hearing is protected by parliamentary privilege, and that is under our *Constitution Act* and our Legislative Council standing orders. That means that any information that you give today is protected by law. However, if you were to repeat it outside this hearing it may not be protected. Also any deliberately false evidence or misleading of the Committee may be considered a contempt of Parliament.

As you can see, we are recording today. You will receive a transcript of that, and that will give you the opportunity to make sure that we did not misrepresent you or they put some funny words in there just to test you—they will not do that! You will get that. Ultimately that information will become available on the Committee's website. If you would like to make some opening comments and then we might open it up for questions. We have got about 30 minutes.

Mr EVANS: My name is Richard Evans. I am the Manager at Gippsland Lakes Community Health of the Homelessness Support Program. We have four staff, four case managers, and Donna is one of those four staff. We cover from here through to the border at Mallacoota. We are supporting 105 homeless clients at the moment ranging from young people at risk of homelessness, so school-age children at risk of homelessness, through to—the eldest would probably be in the 50s, supporting them through their homelessness at the moment, with a wide range of different presenting issues. Their goals are usually all the same; they want a house—they want to be housed—but they all present very differently, with different presenting issues. That is what our day-to-day workplace looks like: supporting those clients.

I will let Donna speak later, but when I saw the 4 o'clock timeslot I thought that by now you would have a very good idea of what homelessness is looking like in outer Gippsland, or East Gippsland, and a number of people would have probably—we could have repeated, I suppose, but when I saw the timeslot I thought I may take a different slant on it and probably talk to you about, I suppose, the time frame of the changes that I have seen in the role. I have been in the role for five years. I started off with Services Connect with the organisation, and when that finished I went into a management role in homelessness. I also manage men's behaviour change and the youth programs as well.

I suppose when I was thinking about talking to you today, what resonated with me is the speed of change in the homelessness sector that I have witnessed—that we have witnessed—firsthand, and I can speak to that around some of the examples with temporary housing and short-term housing. It has gone from being a program or a system of supports that was okay, that had some good outcomes, serviced people and made them safe in the short to medium term. People transitioned through to long-term, but in the last year to two years the system has changed dramatically. I can obviously only speak to our local area, and that has been because of a number of factors, but now the short term and temporary housing is completely clogged up. It is a blockage that Donna and her colleagues cannot transition their clients out of now, and that has happened very quickly. With today it has sort of made us think about some of the reasons why and what we can share with you today and maybe provide some insights into some solutions maybe.

The CHAIR: That would be great.

Mr EVANS: I can give you a few examples as the Manager of the homelessness service, and you will have spoken to some of the other agency staff. We used to come together on a weekly basis to have a nomination

meeting for temporary housing. We would look through the nominations and we would have a meeting where we would house people, which was very gratifying, I suppose. We used to get together probably weekly, and when I was away Donna would fill in for me and do that, so she can attest to that. But we would be lucky to get together monthly now.

The CHAIR: Because there is just nothing to talk about?

Mr EVANS: No, and if we did not catch up weekly, we would probably meet fortnightly, but there would be a couple of properties. I used to go to nomination meetings where there would be three properties to discuss, one in Lakes Entrance and a couple in Bairnsdale. One would be three bedroom, there would be a couple of two bedrooms, and we would go through the list of nominees and provide discussion and then come to the decision on who we would house in there—into the THM program. As I said, now, look, I would have been to—I have been prone to exaggeration—but maybe five this year. Would you agree?

Ms PENDERGAST: It would be easily—to get a transitional house—months and months of waiting.

Mr EVANS: So that is just one little insight from where I sit and what I oversee. That is one of the glaring ones for me that resonates—that there is just not the throughput, and so the system is blocked up. It is blocked up for a number of reasons. It is not just all around public housing. That is the obvious reason or a causation of that, but the other one is that the private rental market simultaneously has become almost impossible for our typical client to navigate into. It was not an overnight thing, but it happened very, very quickly. We would support clients and we would advocate for them to real estate agents and they would have little or no reference. Now we are supporting clients that—even some of the referrals that come through now are people with good references and employment, and landlords are being so picky and choosy. They can be; it is just that market. The market being where it is at the moment, a commercialised market, they can pick and choose the eyes out of it to ensure they get the best tenant. It is not impossible, but it is very, very difficult for our clients to navigate into that private rental market in Bairnsdale and Lakes Entrance where we support them. And so that narrows the options for our clients, which puts more pressure on the long-term public housing, and that in turn backs that system up as well. So the supply and demand: the supply has increased but the demand has also decreased from the private rental side of things.

Ms PENDERGAST: No, the other way around: the demand has increased, supply has decreased.

Mr BARTON: We knew what you meant.

The CHAIR: We know what you meant.

Mr EVANS: Yes, you know what I am talking about. So it has been a double whammy on that front as well, which is very frustrating. It is frustrating for everyone involved—obviously the clients. We have seen clients that have come back through the sector that may have been through it successfully, say, three years ago, four years ago. They present again for whatever their personal issues are, and they are sort of gobsmacked, aren't they? There is a long wait. There is a year, there is a two-year wait. They cannot get into a transitional, and they did before. They are seeing this barrier now. That raises their frustrations and their emotive state. Sometimes staff are at the end of that and cop that, but that is the reality of it now: they are becoming more frustrated. With their other presenting issues it just complicates things and exaggerates things even more—for their mental health, their AOD issues and family violence, which are the main presenting issues.

The CHAIR: Did you have something else? Did you want to add to that, Donna?

Ms PENDERGAST: I suppose, yes, everything that Richard said, and one of the other things that we have noticed is our capacity to even work with certain people. There is absolutely no housing for single people, people on Newstart. There used to be caravan parks that had affordable weekly rates. Many of them have shut down. There is actually no caravan park that we can access for long-term housing in Bairnsdale. They have to go further to Swan Reach or Lakes Entrance. A lot of those are now unaffordable for someone on Newstart, if they will take them at all. So that has impacted on our program. We cannot even accept referrals for singles, because there is nothing we can do for them. I suppose the same would be said for people who are over 50 or who are on an aged-care pension or something like that, who are singles. Again, there is no housing. We cannot help them into housing.

Mr EVANS: Yes. The single people are coming up against single mothers with three kids. When we talk about that short-term temporary housing, the single people—it does not matter what gender they are—are just simply not going to get over the line. The priority is to keep the children safe and housed. There are no single options. As a service provider—it is not right—we simply provide a list of accommodation places further away, closer to Melbourne, where there is shared accommodation, there are hostels, backpackers. We do not have that in this area. We used to, but I think they have closed as a commercial model. We simply give them a train ticket, and that is horrendous. But that is the lay of the land. Unless the client has a DSP, has that additional income and they have prospects of private rental, or they need particular accommodation because of the DSP, there are not a lot of options for them, which is very, very difficult.

The CHAIR: That must be so demoralising for you guys.

Mr EVANS: And these are the people that, as I said, going back, may have come through the system previously, where they probably had more options. But now we turn them away, and they do not think that is fair. They think that we are not providing a proper service, which we aren't, but we do not have any options for them. It is not ideal at all for them.

The CHAIR: No, not at all.

Ms LOVELL: Richard, I would be interested to explore a bit more about Services Connect. One of the things that we hear a lot is that people do not like having to tell their stories to multiple caseworkers. Services Connect was that triage model that was trialled here. Can you tell us a bit about how it operated here, how successful it was and now that it is no longer operating whether that has had any impact or whether it could be better coordinated if it was still happening?

Mr EVANS: Yes, I can, Wendy. The Services Connect model in outer Gippsland—obviously Gippsland Lakes Community Health was the agency—we were sort of operating and we still do operate under that type of model. When I go to Melbourne and I go to the homelessness conferences or whatever the meetings are and I speak to colleagues that are city bound where they operate just in one service, I talk about that integrated one-door sort of agency where they can come through and they only have one intake and they tell their story once. We always did that, or Gippsland Lakes have always done that. We have got a full suite of services, and if homelessness is the main presenting issue but there is AOD or there is a whiff of family violence, Donna, the case manager, can make that referral to the other supports within the same building on the same floor. She can walk down, she can speak to a family violence worker, she can speak to an AOD counsellor about the case and make a referral if that is the appropriate thing to do. That type of Services Connect model, where there is one door you walk through, you tell your story once and you are provided with a suite of services if that is what is needed, that is how we have always operated at Gippsland Lakes because we are the main community health service provider in a medium to smallish regional town. Maybe Orbost do a similar sort of thing at Orbost Regional Health. The model works very well in this type of community. With Services Connect, my thoughts on it were that we need to break those silos down in the metro areas where they then can become more integrated and holistic about the service provision for the client.

The CHAIR: You had to do that anyway here.

Mr EVANS: So we do it anyway because we are the—

The CHAIR: Interesting.

Mr EVANS: Yes. It works well. To summarise what you asked me, the comments from the family violence staff that were involved in the full suite of services that were involved in that—let's call it a trial of Services Connect—were, 'Richard, you're the project manager for this, but we do this anyway. This is what we do every day'.

Ms LOVELL: So you were doing it here? It is not happening in other areas.

Mr EVANS: But it was not happening in Melbourne. Where a homeless agency might just have homelessness or maybe one or two others, we have the full suite of services contained within the building. So that model works well. You may want to chat about something else, but when you ask about solutions, I will

speak to that further around that integrated access for people to come to and have a holistic approach to their presenting issues.

Ms LOVELL: Would you like to speak about that now?

Mr EVANS: Yes, absolutely. We are certainly in an emergency response. We respond to crisis, and that is what Donna does every day sort of thing. We need to move to a prevention model, which is what you have probably heard a million times today, and there needs to be more housing stock. I think for the clients, one of the things to support the additional housing stock to free it up to address the increase in demand is I think a leadership change, and it needs to start from the very top of government, whether it is both Federal and State, and it needs to be bipartisan. We need to change our thinking around homelessness, and that creates a lot of courage and a lot of leadership. What Services Connect morphed into was—I am trying to find the word for it, Christine, we spoke about it before; is Christine still here?—a collective impact approach. That is the word I was trying to get to.

The CHAIR: It is the second time she has had to come in and do this.

Mr BARTON: Do you notice she is interrupting all the time?

Mr EVANS: And save me—thank you. So it really needs to change from a political issue. For most people it is an invisible problem, and it needs to start with whole-of-government change and to go over more than a four-year funding cycle, or a three-year funding cycle, with government. The approach needs to be from the top down, but it needs to be targeted at a local area. What affects us—and you may hear this in your travels around the state—in Bairnsdale or Orbost or Cann River is going to be different from elsewhere. It needs to come from above, and we need to have a localised targeted strategy working with maybe the likes of Gippy Lakes and so forth around what that looks like. But the number one thing I think is more housing stock, which you have probably heard a million times today, and that more coordinated approach that Services Connect did offer to reduce the barriers for clients, because if they present with homelessness, nine times out of 10, if not more, they are going to have many other issues as well which are affecting it.

The CHAIR: It is possibly just a symptom.

Ms MAXWELL: I see you do the Reconnect program. I have worked in that program previously. It is a great opportunity for that early intervention. It is, as it says, trying to reconnect that young person back into the family and keep them involved in the family, which is fantastic early intervention to stop these kids going into homelessness. I am just wondering what your KPIs are like and your allowance of support periods, because I know that often the KPIs are really high and your support period at times can be relatively low. It might take six weeks just to get to know a young person, and you might only be given an eight-, 10- or 12-week opportunity.

Mr EVANS: Tania, you have worked in Reconnect, haven't you? Because that is exactly what it is like. It is another team; it is the youth team. Donna is with HSP, and there is a youth team that service Reconnect clients. The changes that they have seen there are more complex and more crisis issues. Reconnect has been going for a long time. It is a 20-year program. The funding for CPI has not increased in 20 years. With government efficiency dividends and so forth we have got efficiency dividends we have got to keep reducing. What we are finding is that we are working longer with more complex clients that are at a higher risk of homelessness because they are disconnected from family. They are certainly not attending school; they are refusing to go to school. That is the early prevention model that we would like to do more of. The age range for Reconnect is 12 to 18. We try and concentrate on the 11-, 12- and 13-year-olds for that reason.

Ms MAXWELL: If we talk about the early intervention strategies to prevent us needing all this extra housing, that is kind of a good way to start, but it is not funded enough. There is seriously a lack of funding throughout youth services.

Mr EVANS: And the support period for the parameters of the program is around three to four months. We are working a lot longer than that, and we are having to close clients in the school holidays to sort of game the system and close them for a couple of weeks and then reopen when they come back to school.

Ms MAXWELL: And the school holidays is when they need the support, because that is when the parents will often throw them out of the family home because they just all cannot be together.

Mr EVANS: There is no structure. They are not going to school.

The CHAIR: And if it is an overcrowded home.

Mr EVANS: I think with the large proportion of our clients that present as homeless, or some of the younger clients that are at risk of homelessness, family violence is obvious very high up there. It is the relationship breakdown that is causing a lot of the issues around homelessness and being at risk of homelessness. We find that there are children that are with one of the parents, they are with other family members or they are in a shelter, and it is that relationship breakdown that is causing a lot of the increase in demand for homelessness services.

The CHAIR: You mentioned you had 105 clients who were waiting somewhere. Just prior to you, the Salvation Army mentioned that they had 156 clients that were also waiting somewhere. Do you expect that there is an overlap between those two client cohorts, or would you try and make sure that there was not?

Mr EVANS: Donna might be best to answer that.

Ms PENDERGAST: As far as Salvation Army, I am not quite sure where they get their referrals, whether they are actually walk-ins or not. The majority of our referrals come from Community Housing Limited, who are the Opening Doors for this area, or if it is in Lakes, they come direct to us. I do not know if there is an overlap, but I would suspect there may not be. I would suspect the Salvation Army may be dealing with a lot more single people.

The CHAIR: Yes, they certainly are.

Ms PENDERGAST: I would think that that might be where Community Housing Limited send them when they come through intake—because they cannot access programs with us, the Salvos should be able to help, hopefully, or they are another option I suppose. That, without speaking with Dave—

The CHAIR: No, it was just whether there was some sort of conversation where you can check any overlaps.

Ms PENDERGAST: Quite often when I open clients they are not often open with anyone else, so I do not—

The CHAIR: And that would be a question you would ask.

Ms PENDERGAST: So I do not think that there would be an overlap. I think that there is just that much homelessness here, and there would be more than even that.

The CHAIR: Yes, certainly. That does not reflect the numbers we have been hearing.

Ms LOVELL: And I was just having a look at the actual waiting list numbers, and there are 1025 applicants on the public housing waiting list of which 656 are priority housing, so they are the people at risk of homelessness, escaping domestic violence or with a disability. So the two numbers together—

The CHAIR: No, that is right—certainly the numbers Christine and others have presented. Rod, I think you get the last question for the day. No pressure!

Mr BARTON: Well, it is not really a question. It will be one of my statements again. One of the reasons I put up the homelessness one is because of the experience of my own family; that included drugs, partners in and out of jail. I lived as a kid in government housing. What has been very good for me on a personal level is how many good people are out there doing lots of good stuff. I always tell everybody that I am not a politician. I did not get into politics for a career. I am too old—apparently I am elderly; I found out today. I came in to revenge a thing for me, but it also gave me the opportunity to do something that I really care about. I am really impressed with the work everyone is doing, but I want us to do the best possible job. I have been in business for

40 years and I am yet to come into a business—and I am calling it a business—that we cannot shake the tree to make a little bit better. That is what my motivation is. I am not here for a long-term political career; I am here to fix some problems and I am hoping we can all work together and do this. That is my statement, Chair.

The CHAIR: Thank you. Right on time! Thank you, Donna. Thank you, Richard. And I thank everybody who is still here. Thank you to everyone. This has just been such a valuable day.

Ms LOVELL: And to the lady who spent the entire day here.

The CHAIR: Yes, thank you.

Mrs STEVENSON: It has been fascinating. Thank you.

The CHAIR: Just before we close the meeting, is there anyone who wants to make some final statements?

Ms McNAMARA: Can I just ask a question? This question is for you, Rod. You spoke earlier about a commissioner for homelessness. I just wondered whether you could give a bit of information about what that position might look like or what your expectations might be?

Mr BARTON: Look, I generally think there are so many organisations and everyone is doing fantastic work, there is no question about that. But you are dealing with multiple levels of government across the board, and I think that if we could focus things and have a more direct approach—we will never get a minister for homelessness, that would be a great one—

Ms LOVELL: We do—we have the Minister for Housing that is the minister for homelessness too.

Mr BARTON: It does not happen, though, does it?

Ms LOVELL: It did when I was minister.

Mr BARTON: I think a commissioner would be someone we can focus and direct and have a holistic view over everything.

The CHAIR: And not that four-year view.

Mr BARTON: Yes, absolutely, because we are never going to get it completely 100 per cent. It is going to be a work in progress forever because people are always going to have their problems.

Ms McNAMARA: And I guess what it says is: this is really important and we are serious about this, and there is a focus here for homelessness, which I think sometimes gets a bit forgotten.

Mr BARTON: There is a seriousness about this Committee; make no mistake.

Ms McNAMARA: Yes; great.

The CHAIR: We are intent.

Mr BARTON: A little bit nuts, but we are okay.

Ms McNAMARA: Hansard has stopped, hasn't it?

The CHAIR: No, they have not, but I won't deny that. I will close the meeting now if everyone is happy with that. Thank you again. This has been amazing.

Ms McNAMARA: Thank you.

Committee adjourned.