

MIRRABOOKA
REGIONAL HOMELESSNESS PLAN
2011 – 2012

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INTRODUCTION

A Mirrabooka District Homelessness Workshop was held at the Ballajura Community Centre on Wednesday October 5, 2011. The purpose of the workshop was to encourage collaboration between DCP and their local partner agencies from Government and the Non-government sector to address some of the emerging issues associated with Homelessness in the 15 suburbs that are the Mirrabooka DCP district.

The Department for Child Protection has a significant investment in the not for profit community services sector for homelessness service delivery and coordination. The Department also has an ongoing commitment to assisting vulnerable children and families and this workshop's main goal was to identify the 3 main Homelessness priorities as agreed by the participants.

The workshop brought together 30 representatives from 26 agencies that covered a range of Government and non-Government service providers. Once the priorities had been identified the task was to develop a plan that can be actioned at a local regional level over the next 12 months.

A four stage process was used with the participants forming into 4 working groups to discuss the issues presented.

Stage 1

Participants discussed "what is working well"; "what are we worried about"; and "what needs to happen" on 4 key areas.

- HEALTH AND WELL BEING
- CONNECTING WITH COMMUNITY, FAMILY AND FRIENDS
- EMPLOYMENT, EDUCATION AND TRAINING
- HOUSING OPTIONS

The issues and ideas generated in Stage 1 provided the basis for prioritising the actions in the subsequent stages.

Stage 2 - Participants in the workshop used red stickers to indicate three priority actions from the issues raised in Stage 1.

Stage 3 – Participants then followed on from the priority actions to identify two key priorities that could be completed in the next 12 months.

From stages 2 and 3 it was possible to determine the top three issues that required action and to be worked upon over the next 12 months.

Stage 4 – participants provided further comment on the top three issues and made some suggestion on which agencies should be involved. It was also identified that nominations would be sought from attendees to be part of a reference group to ensure the priority actions would be achieved and become part of the Mirrabooka Regional Homelessness Plan. There were eight nominations from the workshop participants.

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The three main priorities were identified as:

1. Mirraboooka Homelessness Service Directory.
2. Mobile Health Service for Homeless Persons.
3. Co-ordinated Early intervention/Prevention Service for Homelessness.

Mirraboooka Interagency Homelessness Action Group

The formation of an interagency homelessness action group will be fundamental to achieving the priority actions of the plan and an integrated service response to homeless people and those at risk. The Mirraboooka Interagency Homelessness Action Group will form three project groups to carry out the work on priority actions. It will also ensure linkage of Non-Government agencies with Human Services Managers' Group at least twice each year for reporting progress and managing issues.

Mirraboooka Homelessness Service Directory.

This action identified a working party to come out of the focus group to research the existing local services, identify them and the services they provide to the homeless. Several agencies were identified as sources of current information including WACOSS, Office of Multi-Cultural Interests. Consideration should be given to it being an online service and/or a hard copy. Other questions raised included what format (what would it look like?) it would take. Would funding be sought from outside sources? Eg Lottery West. Agencies identified were DCP, housing agencies, women's and men's services, Anglicare, St Vincent De Paul, Uniting Care West and the Salvation Army. Resources identified were a lead agency or individual, a computer/ internet access and funding application if it was identified as needed.

Mobile Health Service for Homeless Persons.

This priority emerged under the health and well-being area of discussion. It would be included and promoted through the new area homelessness agency directory. As well as medical treatment for the homeless it would include an element of education for good health, hygiene, dental referral and nutrition. Agencies that were identified included Health and Mental Health, Drug and Alcohol.

Co-ordinated Early intervention/Prevention Service for Homelessness.

This is seen as an early intervention/prevention strategy to prevent persons/families who are at risk of becoming homeless actually losing their housing status. Strategies that could be explored include an early warning issued from the Department of Housing disruptive behaviour management unit when a tenant in public housing is being issued with a strike. The Department for Housing has defined disruptive behaviour into three categories, dangerous behaviour, serious disruptive behaviour and minor disruptive behaviour. A strike can be issued for each proven incident and legal action could follow if three strikes are issued within a 12 month period.

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Other strategies that were explored included targeted education for CALD and new refugees in relation to maintaining their tenancy, expansion of the HSS (Humanitarian Settlement Services). The Humanitarian Settlement Services (HSS) program provides assistance to refugees granted permanent residence in Australia for up to twelve months, to assist their settlement into the community.

Services provided under HSS include Case Management Support and Accommodation service support. PVS has been contracted to provide Case Management Support, and will work in close collaboration with the Multicultural Services Centre of WA (MSCWA) which has been contracted to provide accommodation services. It was recognised that agencies that should be consulted/involved could be REIWA, Tenants Advisory Service, Department of Housing, PVS, Department for Child Protection, Department of Education, Department of Health/Mental Health, Strong Families, Other NGO's as identified and possibly some CALD elders as identified.

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PRIORITY ACTIONS	TASKS	DURATION	TIMELINES	ACENCIES AND RESOURCES
<p>1. Mirrabooka Interagency Homelessness Action Group to achieve an integrated service response to homeless people and those at risk.</p>	<p>Set up schedule of regular meetings. Form three working parties to carry out each of the priority actions. Ensure linkage of Non-Government agencies with Human Services Managers' Group at least twice each year for reporting progress and managing issues.</p>	<p>1.5 hours per month</p>	<p>12 to 24 months and review</p>	<p>8 self-nominees from the workshop and agency representatives by invitation.</p>
<p>2. Develop Mirrabooka Homelessness Service Directory Online Directory with a search engine by issue. Public website / SharePoint intranet.</p>	<p>Form working party out of the Action Group. Research what directories might already exist. Determine preference for format Online and / or hard copy Resource local services. Identify services and what they do. Contact WACOSS and Office of Multicultural Services access current information. Develop business case for NGO funding application</p>			<p>Resource: Possible non-government funding application to Lottery West.</p> <p>Agencies involved: Stirling W? Information Sharing Group (SWIS) re provision of information Homelessness Action Group Sub-Committee. Input from Government agencies and non-government agencies identified as working in the homelessness area. E.g. health including mental health, community, education and training, housing and front line support services.</p>
<p>3. Health and well-being response to Homelessness. I. Mobile Health Service to visit community centres</p>	<p>Form working party from RIHAG. Research and investigate current 'Street Doctor'</p>		<p>6 – 12 months</p>	<p>Agencies that were identified included Health and Mental Health, Drug and Alcohol and appropriate front line non-government agencies.</p>

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<p>and areas where homeless people and those risk congregate. To provide assessment, medical treatment plus education for good health, hygiene, dental referral and nutrition.</p> <p>II. Bulk billing GP list</p>	<p>initiatives.</p> <p>Engage health promotions and health agencies including dental in the project group.</p> <p>Identify bulk billing services and WA Dental Services clinic / schools mobile dental services</p>			
<p>4. Early intervention prevention action for families and children to retain their tenancies.</p>	<p>Form working party from RIHAG.</p> <p>Consider early responses to circumvent three strikes accumulation by families. Process in place for response and prevention before eviction/homelessness</p> <p>To comprise simple training and information that people can retain and use regarding home and yard maintenance, pro-social behaviour/good neighbour, paying the rent and tenant obligations/rights.</p> <p>Support the expansion of the Humanitarian Settlement Services to cover the housing/tenancy issues.</p>		<p>6 -12 months</p>	<p>Public and Private tenancy property managers, Tenant support staff NPAH funded agencies. DIAC, Tenants Advice Service, Department of Housing PVS, DCP SCCPW Community Department Education Health and Mental Health Services Northern Suburbs Community Legal Centre Local NGO homelessness services Community elders Strong Families</p>