



**Victorian Department of Human  
Services**  
Evaluation of the Multiple and  
Complex Needs (MACN)  
Initiative  
Evaluation Progress Report 2  
- Executive Summary

Government  
This report contains 5 pages

### ***Inherent Limitations***

*This report has been prepared as outlined in Section one of this report. The procedures outlined in Section one constitute neither an audit nor a comprehensive review of operations.*

*The findings in this report are based on a qualitative study and the reported results reflect a perception of The Department of Human Services and associated stakeholders but only to the extent of the sample surveyed, being the Department of Human Services approved representative sample of stakeholders. No warranty of completeness, accuracy or reliability is given in relation to the statements and representations made by, and the information and documentation provided by, stakeholders consulted as part of the process.*

*KPMG have indicated within this report the sources of the information provided. We have not sought to independently verify those sources unless otherwise noted within the report.*

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*The findings in this report have been formed on the above basis.*

### ***Third Party Reliance***

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## **Executive summary**

This is the second progress report of the evaluation of the Initiative. The first progress report provided an overview of the background to the Initiative, an outline of the roles, responsibilities and functions of the Initiative and the activities of the Initiative between May 31 2004 and November 30 2004 components.

The second progress report provides an overview of the activities of the Initiative since its commencement with specific reference to the reporting period of December 1 2004 to May 31 2005. The Initiative has been operating for only 12 months, with the focus to date being on establishing the various components, their roles and working out the ways in which the components of the Initiative link together.

Between May 31 2004 and May 31 2005, the Regional Gateway has responded to 163 inquiries; 146 consultations have been undertaken and 54 referral forms were provided to referrers, with 20 endorsed referrals proceeding to the MACN Panel for determination. CPAV had undertaken or was undertaking assessments and care plan development for 18 clients, and Indigo has become the care plan coordinator for four clients.

The data indicates that there has been a slight increase in the number of inquiries, a drop in the number of consultations and a significant drop in the number of referrals being considered by the Regional Panel. There has been a large increase in the number of referrals considered by the MACN Panel. CPAV's and Indigo's client load increased substantially in comparison to the last reporting period.

To inform the analysis of client pathways, quantitative data was collected from the Regional Gateway database and service level data collected from the MACN Panel, CPAV and Indigo. The referral pathway also includes the Corrections Gateway Panel, set up by Corrections Victoria to field referrals to the Initiative. To date, the Corrections Gateway Panel has considered 11 internal inquiries from Corrections, one of which has been referred through the Regional Gateway and accepted by the MACN Panel<sup>1</sup>.

Since the commencement of the Initiative, nearly 63 per cent of inquiries that have been made were made by service providers, and a further 32.7 per cent originated from services directly managed by DHS. The major reason for inquiry was that inquirers were not sure what to do with the case. One-quarter of inquiries took place because inquirers were concerned about deterioration in their ability to continue to provide support to the individual

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<sup>1</sup> It should be noted that inquiries do not proceed directly from the Justice Gateway Panel to the MACN Panel; rather it acts as an internal filtering process. All referrals made to the Justice Gateway Panel, that receives an internal endorsement, is then referred to the relevant DHS Region for consideration, and enters (like all other matters) into a phase of inquiry, consultation and referral. The Regional Panel determines whether the matter then proceeds to the MACN Panel.

Of the 146 consultations, 49 took place by face-to-face meeting, 45 by telephone and a further 52 involved a combination of the two methods. A total of 118 individuals met the eligibility criteria at the consultation stage; of those, half resulted in a referral.

Up until May 31 2005, the MACN Panel determined 20 referrals of which 18 satisfied the eligibility criteria for the Initiative, the remaining two referrals were pending, given additional information had been requested by the MACN Panel. Of those, eight originated from the DHS North and West Metropolitan Region and five from the DHS Southern Metropolitan Region.

As at 31 May 2005, CPAV had 18 clients; of those, five had care plans determined. CPAV consulted with between 21 and 40 stakeholders for the majority of their clients, of whom 66 per cent receive support from mental health services and 38 per cent from disability services. Indigo was the care plan coordinator for four clients.

The analysis of client pathways has shown that there are multiple points at which the eligibility and suitability of individuals can be assessed by highly specialised teams, using a variety of clinical approaches. It has also shown that fewer clients are being referred to the MACN Panel, which may indicate that services at the regional level are more coordinated, thus obviating the need for individuals to be referred to the MACN Panel.

In regard to the analysis of stakeholders' experience, it was informed by responses to surveys (n=44) and interviews undertaken to supplement the surveys (n=27), as well as 18 semi-structured interviews and four group interviews with Initiative components and those involved in its governance.

The stakeholder experience pointed to improved coordination, collaboration and information sharing between different services within regions; this had been achieved through close working relationships with services involved in supporting people with multiple and complex needs. The Regional Panel had influenced the practice and culture of DHS such that better responses were being made to people with complex needs.

There was general concern expressed at the low volume of clients moving through the Initiative and, although the effectiveness of the Regional Gateway in resolving clients' issues at the local level was considered a success, there were also concerns that some eligible individuals were unable to access the Initiative.

Although the Initiative has been in its establishment and implementation phase, it had been well received and created a new focus on coordination and collaboration and in supporting people with complex needs. However, the MACN Panel felt that the Initiative was in a paradoxical situation, given it had been created due to systems failure in supporting these individuals. That said, it suggested that a shift was needed to enable more flexible and creative responses to people with multiple and complex needs and

consider enlisting systems and services that might assist in developing more creative responses.

Service providers expressed concern as to the efficacy of the care plans; this was a matter that had also been raised by the MACN Panel and DHS Panel Nominees. This concern may be explained twofold – that service providers had unclear expectations regarding the intent of engagement with the Initiative and that, prior to CPAV’s restructure, its focus was more heavily weighted towards assessment as opposed to care planning. With CPAV’s restructure and with more experience of individuals referred for assessment and care planning it is expected that these concerns will be addressed.

Given that the issues related to the establishment of the Initiative have now been addressed, Initiative components felt that it was time to move their focus to examining ways to further develop the possible range of solutions available for people with multiple and complex needs. To date there has been substantial consultation and collaboration between the various components with many of the individual components meeting with representatives of other components on a regular basis. As part of the next stage of development, it was felt that there was a need for greater collaboration and joint problem solving between all Initiative components as part of continuing to build on shared understanding based on their experiences.

During the reporting phase, stakeholders made various suggestions regarding how the Initiative could be enhanced. These suggestions included modifying the roles of the various Initiative components, better responding to people with multiple and complex needs through designing more innovative service responses, improving the referral process and providing support to the services system to increase its capacity to respond to people with multiple and complex needs.

Regarding the impact of the Initiative on people with multiple and complex needs, the Initiative appears to be positively impacting clients for whom a determined care plan had been generated and who were receiving ongoing care plan coordination; individuals who appeared to meet the eligibility criteria at the regional level but who did not proceed because their issues were resolved at the local level; and those who did not meet the eligibility criteria and may not have proceeded beyond inquiry but who benefited from advice provided by the Regional Coordinator.

There was broad agreement that the service system was becoming more coordinated in its service planning and provision for people with multiple and complex needs given the improved collaboration and coordination that was occurring. There was also agreement that the legislation was broadly effective and provided an appropriate framework for the Initiative and facilitated information sharing required to establish a holistic view of the individual and their needs. Given the limited time that the Initiative had been operational, it is too early to tell whether cost benefits had been generated; however, this work will commence in the next reporting period.