AUDITOR-GENERAL'S REPORT PERFORMANCE AUDIT

Responding to Homelessness



The Legislative Assembly Parliament House SYDNEY NSW 2000 The Legislative Council Parliament House SYDNEY NSW 2000

In accordance with section 38E of the *Public Finance and Audit Act 1983*, I present a report titled **Responding to Homelessness**.

Peter Achterstraat Auditor-General

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Foreword

Governments have a responsibility to help the most disadvantaged in our community. They provide a range of services such as health and education, to reduce the hardship faced by those in need.

Homelessness is a complex problem with many causes. They include lack of affordable housing, debt, family breakdown or poor health. Without a home, we lose the social support that connects us to each other.

Homelessness is not just a city issue either. The rate of homelessness is higher in regional areas of NSW than in Sydney. Many long-term homeless have lost basic living skills, and can be the victims of crime including robberies and assault.

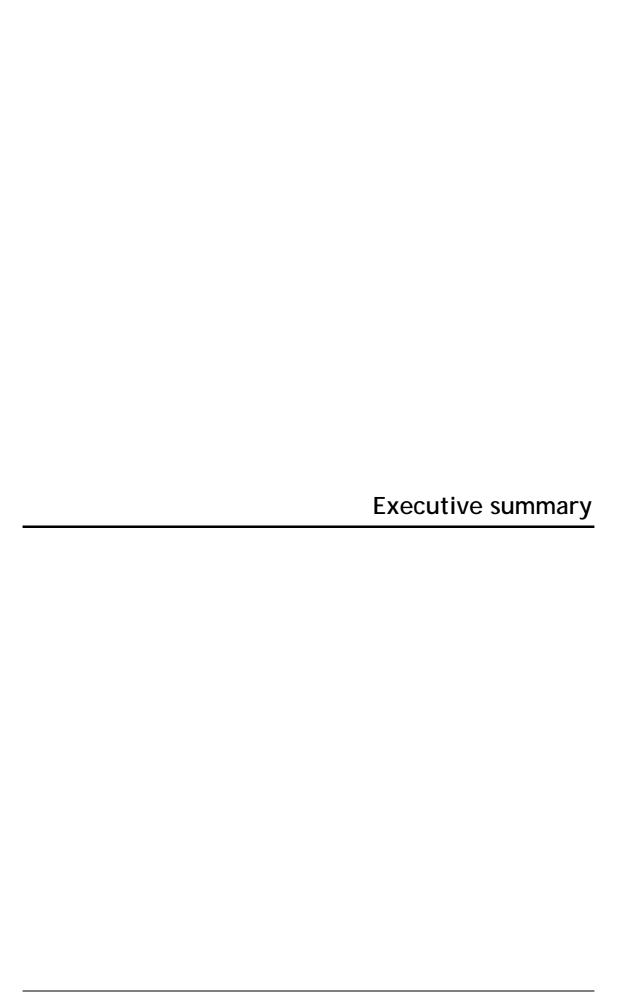
Homeless people need support for a range of complex issues. Many agencies, both government and community, intervene to help them improve their situation and break free of the homelessness cycle. This means agencies must work closely together to deal with these diverse problems.

In this review we examined whether the government is achieving its desired results for the homeless, and whether it helps them to access government services such as health care and legal assistance.

The issues raised in this report will be relevant to all agencies, both government and community, who have a role in responding to homelessness.

Peter Achterstraat Auditor-General

May 2007



The focus of our audit

On census night in 2001 there were 26,676 homeless people in NSW. This means more than four out of every 1,000 people were homeless.

The causes of homelessness are many and varied. They include lack of affordable housing, family conflict, and poor mental health. Many long-term homeless have lost their basic living skills and are among the most disadvantaged in our community. Homelessness can affect us all, either directly or through family and friends.

We wanted to find out whether:

- the government's outcomes for homeless people have been achieved
- homeless people are assisted in accessing government support services such as health care and legal assistance.

Audit opinion

Homelessness is not a specific priority action in the NSW State Plan, however it relates to a number of its key themes. These include respect and responsibility, fairness and opportunity, early intervention, and housing affordability.

In recent years the government has put in place a wide range of strategies to respond to homelessness. They vary from programs targeting high need individuals and people in crisis, to programs aimed at helping those at risk of homelessness.

The government has two key responses to homelessness through which it sets goals and strategies. The responses are:

- program responses delivered by individual agencies, mainly the Department of Housing and the Department of Community Services
- the Partnership Against Homelessness (PAH), a network of government agencies set up to foster a whole-of-government response to homelessness.

Many projects, both PAH and by individual agencies, have shown good results or led to improvements. One example is helping mental health patients maintain stable housing. Another is providing street outreach services to homeless people in inner Sydney.

Despite these efforts, we were unable to determine how well the government is responding to homelessness statewide. This is because there are no statewide performance measures or targets on homelessness. Also there is limited benchmarking, and no formal means of spreading information on homelessness initiatives and projects.

With the exception of the Department of Housing and Department of Community Services, no other agency has a clear and explicit focus on homelessness. Until recently, there was no reporting framework for PAH, however it has recently strengthened its governance structure. Homelessness is now being reported at Ministerial level.

Government and community agencies are working together to improve access to health care and legal assistance by homeless people but with mixed results. Access improves where agencies are able to reach out to the homeless. We found many examples of government agencies delivering services where homeless people live or visit, such as hostels.

However significant barriers still exist. They include limited service capacity, waiting lists, expectation gaps, intimidating physical environments, and reliance on paper based systems.

We recognise that it is hard to address these complex and diverse issues. The government is on the right path, and should build on current initiatives. However it needs to develop these in a statewide framework with a clear focus on the results it wants to achieve.

Agencies can then target areas that will bring about the best results, and ensure good practices can be adopted statewide. Responding to homelessness, both causes and symptoms, can have major community benefits. This includes safer, healthier and more harmonious communities for us all.

Recommendations

Many government agencies have a role in responding to homelessness. We are directing a number of our recommendations to the Department of Housing as lead agency on behalf of government.

Defining and reporting performance

We recommend that the Department of Housing, in cooperation with other agencies:

- develop a statewide framework that outlines the government's response to homelessness and the results it wants to achieve (page 17)
- link the framework to relevant sections of the NSW State Plan and factor in community views of homelessness (page 17)
- report annually against the state framework including a snapshot of key activities and results, and make this report publicly available (page 20)
- examine ways to network with agencies that are not members of PAH (page 23)
- set up a means to benchmark the state's performance on homelessness and spread best practice on local initiatives (page 25).

Planning services

We recommend that the Department of Housing, in cooperation with other agencies, encourage government agencies to:

- use census data on homelessness to help them plan and deliver services (page 22)
- adopt similar client identifiers to better track the homeless through their systems (page 22).

Improving access to services

We recommend that Area Health Services, Legal Aid and Local Courts, as part of service planning:

- review the extent to which homeless people access their service (page 38)
- develop new ways of delivering services to the homeless (page 38)
- take homelessness into account when planning new services (page 39).

We recommend that the Department of Health and Area Health Services investigate ways to increase hostel caseworkers' knowledge of mental health services, including appropriate responses to mental health issues (page 36).

Key audit findings

Chapter 1 What is homelessness?

Having a home or 'roof over our head' is one of life's basic necessities. Without it, we risk losing the financial and social support that connects us to society.

Homelessness is a complex problem with many causes, often interrelated. These include:

- lack of affordable housing
- financial stress through job loss or debt
- family breakdown or conflict
- poor health including mental illness
- substance abuse.

At the last census in 2001 there were 26,676 homeless people in NSW. This means there were 42 homeless people for every 10,000 people. Homelessness is not just an urban issue. The rate of homelessness is higher in regional areas than in Sydney.

Governments have a social obligation to help the most vulnerable in our community. This means protecting their rights and creating opportunities to help them improve their quality of life.

Chapter 2 Are the government's outcomes for the homeless being achieved?

We found that government agencies do not measure or report on this issue statewide.

The government has two key responses to homelessness. The first is core programs delivered mainly by the Department of Housing and Department of Community Services. The second is the Partnership Against Homelessness (PAH), a network of government agencies set up to deliver targeted cross-agency projects. PAH has four goals but has not yet reviewed or reported its achievements against these. PAH and individual agencies have reviewed many of their projects, a number of which have shown good results. However as there are no statewide performance measures or targets it is difficult for us to determine how well the government is addressing this issue statewide.

Other than census data, there is no information on the extent of homelessness, nor can agencies easily track the homeless through their systems.

Government agencies have been working together to develop and implement a range of projects. Although the community sector is involved in implementing projects, they only recently became involved in PAH's strategic process.

PAH governance arrangements have recently changed to improve accountability and provide a reporting framework. PAH does not collect statewide data therefore does not benchmark the state's performance on homelessness. Nor does it currently have a role in spreading information on local initiatives and projects, for example, like an information clearing house.

Overall, with the exception of the Departments of Housing and Community Services, no other agency has a clear and explicit focus on homelessness. Without a clear direction on what government agencies are trying to achieve for the homeless, it will be more difficult for agencies to target areas that will bring about the best results.

Chapter 3
Are homeless people helped to access support services?

Government and community agencies are working together to improve access to health care and legal assistance but with mixed results. We found many examples of government agencies trying to reach out to homeless people by delivering services where they live or visit. However these are mainly local initiatives not supported by central policies. Other agencies reported that they did not have the capacity to seek new clients such as the homeless, but rely on referrals.

Staff reported that the most difficult services to access were mental health services in the community, particularly for less acute mental health issues. The homeless often had to wait for beds in detoxification and rehabilitation centres, and for other services such as counselling.

Legal services are available to all members of the public but there are still some barriers for homeless people. They are discouraged by bureaucratic offices and courts which have a high police presence. Homeless people also have problems responding to systems that rely on telephone-based advice, or are highly document driven.

Legal staff and some health services reported that they had few homeless clients that they were aware of, indicating the homeless may not always be accessing these services.

The more capacity an agency has to reach out to the homeless, the more likely they will access services. Agencies relying on the homeless to find them, are in danger of missing those in our community that are in greatest need.

Response from the Department of Housing

I refer to your letter of 19 March 2007 concerning the Performance Report: Responding to homelessness. Thank you for the invitation to provide comment on its findings. I am pleased to note that the development of the report has proved to be a constructive and valuable process for the Department of Housing and partner agencies.

The Department of Housing, as the Government's lead agency in relation to homelessness, has coordinated this response on behalf of other government agencies who are members of the Partnership Against Homelessness, and also the Legal Aid Commission of NSW and the NSW Attorney-General's Department. The twelve member agencies of the NSW Partnership Against Homelessness include the Department of Housing, Aboriginal Housing Office, Department of Aboriginal Affairs, Department of Community Services, Department of Corrective Services, Department of Education and Training, Department of Juvenile Justice, Department of Ageing, Disability and Home Care, NSW Health, NSW Police Force, Office of Fair Trading (Department of Commerce) and the Department of Premier and Cabinet (including the Office for Women).

The causes of homelessness are complex and they are often linked to or may be causally related to unemployment, mental illness, family breakdown, domestic violence, child abuse and/or drug and alcohol abuse. The consequences of homelessness are significant for individuals, families and communities.

Effective responses to homelessness often require the active participation of a range of government and non-government services, working in collaboration, each contributing their respective skills and resources. The NSW Government has demonstrated its commitment to the development of effective responses to homelessness, and has a range of strategies in place, through both the NSW Partnership Against Homelessness and individual agencies' programs. The Partnership Against Homelessness, in particular, has been an effective way of coordinating information and action across Government agencies, and establishing a number of successful programs in high need locations. I note that this Audit has found that these programs have shown good results, and indicates that the NSW Government should build upon these existing initiatives.

Government agencies view homelessness as a critical issue, and have formulated responses ranging from early intervention and prevention, through to targeted support services and accommodation linked to support specifically for those experiencing homelessness.

The State Plan recognises the importance of embedding prevention and early intervention into Government services. In seeking to prevent homelessness, government agencies and their funded services have developed effective early intervention responses for those groups vulnerable to homelessness such as people with a disability, mental illness, substance abuse disorder, ex-prisoners/offenders, at risk young people and people experiencing family instability and/or domestic violence.

For example the Government has funded the Domestic Violence Integrated Case Management and the Staying Home Leaving Violence programs to prevent women and children experiencing domestic violence being forced into homelessness. Other initiatives include post release support services for young people and adults exiting the justice systems, social engagement programs offered to boarding house residents, through to support for people to sustain tenancies in the private rental market.

The NSW Government also provides a range of programs and services for people experiencing homelessness which often link accommodation and support services. The aim is to assist homeless people or those at risk of homelessness to access services and sustain accommodation in the longer term. One of the largest programs is the State and Commonwealth jointly funded Supported Accommodation Assistance Program that assists approximately 25,000 adults and 10,000 accompanying children each year in conjunction with the Crisis Accommodation Program. Other examples include access to accommodation such as priority housing in the public housing system, the development of the NSW Housing and Human Services Accord and those projects that fall under the Accord, the Housing and Accommodation Support Initiative, Temporary Accommodation, and outreach programs such as the Inner City Homelessness Outreach and Support Service (Department of Housing, City of Sydney and Department of Community Services initiative).

Much valuable work has been developed over the years and gains have been made to address homelessness in many locations across NSW. The Performance Audit has provided a useful 'snapshot' of the Government's response to homelessness, and supports the direction of current programs and initiatives.

With regard to the recommendations of the Audit Office in relation to defining and reporting performance and the development of a statewide framework for homelessness, I note that while the NSW Partnership Against Homelessness has enabled a strong collaborative focus on homelessness, there may be benefit in examining the Audit Office's proposal further. Therefore, the Department of Housing will lead the development of an options paper for consideration by government. The options paper will seek to clearly articulate the current role of government in responding to homelessness and to provide directions for future work. The options paper will also investigate linkages to key Government policy directions such as the NSW State Plan. Opportunities to develop performance indicators, data collection and reporting processes will also be explored.

The recommendation regarding developing links with agencies that are not currently members of the NSW Partnership Against Homelessness will be the subject of an interagency review. The establishment of the Partnership Against Homelessness Action Resource Group which brings together State, Commonwealth and community sector agencies to work collaboratively to address homelessness issues in NSW is an important action already underway.

In relation to benchmarking and sharing best practice, performance benchmarking would require the development of agreed performance indicators, monitoring and evaluation processes. Given the complex nature of homelessness, the development of performance benchmarks will be a challenging task. These issues will be explored in the proposed options paper. In relation to sharing best practice on local initiatives, the NSW Partnership Against Homelessness will explore further ways to share information on best practice across the government and non-government sectors.

In relation to the recommendations relating to planning services, agencies recognise the importance of robust data to assist with service planning. The report specifically highlights the use of census data. Census data has informed the development of many services and it is the most robust data currently available. However, Census data provides only a 'snapshot' of homelessness and is quickly out of date. Further, I would support the Audit Report's recognition of the fluid nature of homelessness. This situation further impacts the value of reliance on Census date in terms of specific service delivery options. There are often significant difficulties in mapping trends as a result of its infrequency. As such, use of Census data alone for service planning can prove problematic. There is a need for further development of effective data collection, and this will be considered in the options paper.

With regard to the adoption of client identifiers to track the homeless across the service system, it is noted that a lack of access to common information poses a significant challenge to service design and delivery to people experiencing homelessness. The Department of Housing will work with the Department of Community Services and other agencies to determine whether a trial of the use of common client identifiers is feasible.

Finally, recommendations related to the second line of inquiry focus on improving homeless people's access to health and legal services and the planning and delivery of services to take into account their needs. The agencies identified include the NSW Attorney General's Department (Local Courts), the Legal Aid Commission and NSW Health. I have written to my counterparts to invite them to consider how they might incorporate these recommendations into their future service delivery processes. However, I note that the Performance Report acknowledges that the Legal Aid Commission and NSW Health have begun to address the various issues referred to in these recommendations prior to your findings being made known.

I would like to acknowledge and thank the staff from the Audit Team for the cooperative and consultative manner in which the audit was conducted. I would also like to thank the staff from the Department of Housing and other agencies who assisted with the development of this response for their level of professionalism and collaboration.

(signed)

Mike Allen Director General Dated: 18 May 2007

1.	What is homelessness?

1.1 What is homelessness?

Having a home or 'roof over our head' is one of life's basic necessities. Without it, we risk losing the financial and social support that connects us to society.

The causes of homelessness are diverse

Homelessness is a complex problem with many causes, often interrelated. These include:

- lack of affordable housing
- financial stress through job loss or debt
- family breakdown or conflict
- poor health including mental illness
- substance abuse.

Many long-term homeless have lost basic living skills and are among the most disadvantaged in our society. They are often victims of crime including robberies and assault.

There are three broad categories of homelessness:

- 1. primary homelessness: people living on the streets, and in deserted buildings, cars and improvised dwellings
- secondary homelessness: people living in temporary accommodation including crisis housing and boarding houses, or with friends and relatives
- 3. tertiary homelessness: people living in single rooms in private boarding houses.

Homeless people are difficult to count

At the last census in 2001 there were 26,676 homeless people in NSW, the highest of any Australian state or territory. This is slightly less than the previous count. Census data is a snapshot and reflects only what is occurring on census night. This means, the number of people experiencing homelessness over a year will be greater. This highlights the difficulties in counting the homeless, given that people will enter and exit the homeless population throughout the year.

People staying with friends and relatives represent the largest segment of homeless people, as shown below.

Exhibit 1: Rate of homeless people by segment of homeless population (%)			
	NSW	Australia	
Friends and relatives	45	49	
Boarding houses	29	23	
SAAP accommodation	15	14	
Improvised dwellings, street sleepers	11	14	

Source: Counting the Homeless 2001 NSW, Chamberlain and MacKenzie, 2004. SAAP: Supported Accommodation and Assistance Program which provides short term supported accommodation for the homeless.

Homelessness is a statewide issue

Homelessness is not just an urban issue. The rate of homelessness is higher in regional areas than in Sydney.

Exhibit 2: Rate of homeless people per 10,000 of the population					
	Sydney	Hunter and Illawarra	Regional and remote	Coastal	Total
Rate / 10,000	39	37	46	61	42

Source: Counting the Homeless 2001 NSW, Chamberlain and MacKenzie, 2004.

If we include marginal residents of caravan parks the difference between the city and regional areas is even greater and the total homeless population rises to 33,557. Caravan parks are often used as boarding houses or for temporary housing, particularly outside major cities.

People working in the homelessness sector emphasise that homelessness is not a choice. Becoming homeless can be a gradual process of decline. Homeless people may not know what options they have, or the alternatives may not suit all. For example, it is hard to move someone who has lived on the streets for many years into a small unit in the suburbs.

1.2 What is the government's role?

Governments have a social obligation to help the most vulnerable in our community. They provide services such as public housing, mental health, and disability services to reduce the hardship faced by those in less fortunate positions.

Homeless people need support for a range of complex issues, including health care, family relationships, employment, and legal support. Many agencies, both government and community, intervene to help them improve their circumstances. This means agencies must work closely together to deal with these diverse problems.

There are three key roles

The government has three key roles in responding to homelessness:

- helping people who are at risk of homelessness, this includes prevention and early intervention strategies to vulnerable groups
- helping people who are experiencing homelessness who may need access to emergency or crisis housing
- coordinating responses to homelessness by both government and community agencies, including the development, delivery and review of services.

A homelessness partnership has been set up

In NSW the Partnership Against Homelessness (PAH), a committee of government agencies, was set up in 1998 to foster a whole-of-government response to homelessness. The aim of PAH is to improve coordination and access to services required by homeless people. It also aims to improve their access to crisis housing and help them move to long-term housing.

PAH has overseen a number of projects aimed at improving existing services, and introducing new services. PAH members meet quarterly to discuss projects and emerging issues.

Exhibit 3: Members of the Partnership Against Homelessness

- Department of Housing (lead agency)
- NSW Health
- Office of Fair Trading
- Office for Women
- The Cabinet Office
- NSW Police
- Aboriginal Housing Office

- Department of Ageing, Disability and Home Care
- Department of Community Services
- Department of Corrective Services
- Department of Juvenile Justice
- Department of Aboriginal Affairs
- Department of Education and Training

Source: PAH Terms of Reference, 2006.

Note: The Departments of Education and Training, and Aboriginal Affairs are new members, therefore were not part of our review.

It is vital that government agencies engage and work with the community sector. Community agencies, which include non-government organisations and charities, are often at the frontline of service delivery and respond to the immediate needs of homeless people each day.

1.3 What is the focus of the audit?

This audit assessed whether the government is achieving its desired results for the homeless, and whether it helps them to access support services.

We answered two questions

We sought to answer the following two questions:

- are the government's outcomes for the homeless being achieved?
- are the homeless assisted in accessing support services available to the general public?

The questions have different scopes

Each question has a different scope. To answer Question 1 we defined:

- 'the government' as NSW government agencies that are members of the Partnership Against Homelessness (PAH)
- 'the homeless' as homeless people as identified by PAH agencies.
 This includes all types of homelessness, from primary to tertiary.

To answer Question 2 we defined:

- 'support services' as government agencies that provide health care and legal assistance, specifically:
 - community mental health services
 - community health centres
 - drug and alcohol services
 - legal aid offices
 - chamber registrar services within local courts.
- 'the homeless' as people living on the street and in crisis housing, as they are potentially the most in need.

We did not review the performance of community agencies, although we recognise government may fund these to deliver services to the homeless.

See Appendix 1 for further information on the lines of inquiry, scope, criteria and audit approach.

2.	Are the government's outcomes for homeless people being achieved?

At a glance

The key question we wanted to answer was:

Are the government's outcomes for homeless people being achieved?

Our assessment:

We are not easily able to answer this question.

The government has two key responses to homelessness. The first is core programs delivered mainly by the Department of Housing and Department of Community Services. The second is the Partnership Against Homelessness (PAH), a network of government agencies set up to deliver targeted cross-agency projects. PAH has four goals but has not yet reviewed or reported its achievements against these. PAH and individual agencies have reviewed many of their projects, a number of which have shown good results. However as there are no statewide performance measures or targets it is difficult for us to determine how well the government is addressing this issue statewide.

Other than census data, there is no information on the extent of homelessness, nor can agencies track the homeless through their systems.

Government agencies have been working together to develop and implement a range of projects. Although the community sector is involved in implementing projects, they only recently became involved in PAH's strategic process.

PAH governance arrangements have recently changed to improve accountability and provide a reporting framework. PAH does not collect statewide data therefore does not benchmark the state's performance on homelessness. Nor does it currently have a role in spreading information on local initiatives and projects, like an information clearing house.

Overall, with the exception of the Departments of Housing and Community Services, no other agency has a clear and explicit focus on homelessness. Without a clear direction on what government agencies are trying to achieve for the homeless, it will be more difficult for agencies to target areas that will bring about the best results.

2.1 Are the government's outcomes and strategies clearly stated?

Our assessment

The government has two key responses to homelessness through which it has set outcomes and strategies. However more needs to be done to develop a statewide framework with a clear focus on the results it wants to achieve.

A homelessness network has been set up In 1998 the government set up the Partnership Against Homelessness (PAH), a network of state government agencies whose role is to work together to respond to homelessness. It has four key goals:

- helping the homeless access services
- coordinating support services
- improving access to crisis housing
- helping the homeless to settle into long-term housing.

PAH has mainly a project focus. It has overseen a number of cross-agency projects focusing on the inner city and other homelessness hot spots.

Examples include:

- Inner City Homelessness Action Plan
- Homelessness Action Team Support and Outreach Service
- Woolloomooloo Homelessness Project
- Hunter Signpost Assessment and Referral Service
- Inner City Homelessness Outreach and Support Service
- Homeless Leases (My Place)
- Staying Home Leaving Violence Program.

There is no statewide strategy

Although PAH has set goals, there is no statewide homelessness strategy with clearly defined performance measures or targets. Nor is it mentioned as a priority action in the 2006 NSW State Plan.

Other jurisdictions, both interstate and overseas, have developed homelessness strategies, some with performance measures to judge their success.

Evhil	bit 4: How do other governments measure success?
South	Reduce the numbers of rough sleepers by 50 per cent
Australia	by 2010
	 Increase affordable home purchase and rental opportunities by five per cent by 2014
	 Halve the number of people experiencing housing stress by 2014
Australian	 Fewer individuals and families living on the streets
Capital Territory	 Reduced numbers of homeless children
remitory	 No waiting lists for crisis housing and reduced waiting lists for social housing
	 Reduced return rate for people in crisis housing
	 Lower levels of evictions from social housing
	 Greater supply of social housing stock
	Increased stability in tenure
	 Greater community awareness of homelessness or factors which prevent / lead to homelessness
United	 Reduced numbers of rough sleepers
Kingdom	 Reduced number of families with children using bed and breakfast accommodation for crisis housing
New York	 Decrease in the number of people living on the streets
	Increase in the number of people moving to stable housing
	 Increase in the supply of affordable, service-enriched and supportive housing
	 Decrease in the number of applications for shelter
	Decrease in the length of stay in shelter
	 Decrease in the total number of people in shelter

Other jurisdictions measure performance

Source: Audit Office research of other jurisdictions.

In addition to PAH projects, a number of agencies fund or manage their own homelessness programs. These range from prevention and early intervention strategies to programs targeting people in crisis.

DoH and DoCS provide the main program responses The Department of Housing and Department of Community Services deliver the main program response. Both agencies have corporate objectives that relate to homelessness.

The Department of Community Services manages the Supported Accommodation and Assistance Program (SAAP). This State and Commonwealth initiative funds supported accommodation for people seeking crisis housing. For example, this generally means a hostel or shelter with caseworkers on-site to respond to their immediate needs and link them to relevant services. SAAP goals are to resolve crisis, reestablish family links, and help clients live independently.

In parallel with SAAP, the Department of Housing administers the Crisis Assistance Program (CAP). This program funds properties for crisis and medium-term housing.

Since 2000 the Department of Housing has developed a wide range of responses to homelessness as part of its reorientation of services to help those most in need. Key programs include:

- After Hours Temporary Accommodation Service
- Private Rental Brokerage Service
- Rentstart
- Tenancy Guarantees
- priority housing program
- public housing reforms.

As part of the public housing reforms, the Department has been the lead agency in drafting the Housing and Human Services Accord. This identifies homeless people as a priority group and sets the framework for crossagency housing and support service agreements.

The Department of Community Services also manages a number of programs that support families and children and may therefore prevent homelessness in the long-term. These include community service grants, out-of-home care, and early intervention programs.

Service delivery agencies also respond to homelessness Other service delivery agencies in areas such as juvenile justice, corrections, health, disability and policing respond to social issues including housing needs as part of their role. Many of these target vulnerable groups and people at risk of homelessness, such as ex-offenders and people with mental health issues.

Exhibit 5: Helping vulnerable groups

Ex-offenders

Homelessness is a key risk factor in reoffending. Staff who work with former prisoners or offenders in the community spend a large amount of time addressing housing issues. For example, preventing loss of tenancy when someone enters prison or helping them find temporary housing in the community.

Mental health

The Department of Health and Department of Housing jointly manage the Housing and Accommodation Support Initiative (HASI). HASI aims to help people with mental illnesses maintain stable housing. By the end of 2007 it will have provided over 800 supported accommodation places.

The Department of Health also reports that homelessness or the risk of homelessness is a key indicator on mental health service client care planning forms.

Source: Department of Corrective Services, Department of Health.

Some agencies also fund housing support programs for their clients who are at risk of homelessness. This may include temporary housing, family support, or help with employment or substance abuse.

Despite these activities, most PAH agencies other than Housing and Community Services see themselves as having a peripheral role. And none have corporate objectives explicitly targeting homelessness.

So while there are many project and program responses, it is difficult to see how they fit together in a statewide context. This has two risks; that agencies might overlook some issues, or might not work towards the same goals. The government should now develop strategies as part of a statewide framework to ensure greater impact across NSW.

While homelessness is not a priority action in the State Plan, it relates to a number of its key themes. These include respect and responsibility, fairness and opportunity, early intervention, and housing affordability. Any framework should therefore link to key elements of the State Plan.

The community sector also plays a large role in addressing homelessness, and works with homeless people daily responding to their immediate needs. It is important to take their views into account when developing the framework, including future strategies and priorities.

Recommendation

That the Department of Housing in cooperation with other agencies, develop a statewide framework which:

- outlines the government's response to homelessness and the results it wants to achieve
- links to relevant sections of the NSW State Plan and factors in community views of homelessness.

2.2 Have the government's outcomes been met?

Our assessment

We are unable to determine how well the government is performing statewide, however individual projects have shown good results or led to improvements.

No performance information on homelessness statewide

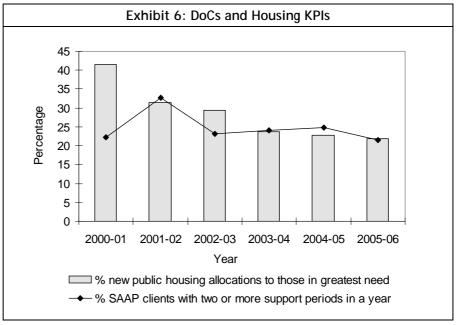
As there are no homelessness measures or targets we are unable to determine how well the government is addressing this issue statewide. Likewise, PAH has not yet reviewed or reported its achievements against its four key goals.

Two agency specific performance measures with some relevance to homelessness are:

- the rate of clients returning to a SAAP service within 12 months (DoCS)
- the rate of housing allocated to those greatest in need (Housing).

The SAAP Accountability Framework and National Data Collection measure the number of support periods provided in one year. The graph below shows that over the last six years the rate of clients returning to a SAAP service within 12 months, that is having two or more support periods, has remained fairly stable.

The graph below also shows the percentage of public housing allocated to those in greatest need. It shows a downward trend in allocations since 2000-01. Community housing allocations to those in greatest need also show a downward trend.



Source: Report on Government Services, Productivity Commission, 2006. Notes:

- Greatest need includes low income households that are homeless, in inappropriate housing, or in housing that adversely affects health or safety.
- SAAP results for 2001-02 use estimated support periods rather than observed support periods so should be taken with caution when comparing to other years.

Other SAAP outcome measures include the rate of clients entering independent housing, and changes during the support period such as income and job status.

No clear picture of homelessness trends

However while these measures relate to people experiencing housing problems, none show a clear picture on homelessness trends. At any point in time SAAP services house only 15 per cent of homeless people in NSW, and the data on housing allocations is not broken down into subgroups such as homeless people.

Projects have shown good results

Nonetheless government agencies, either through PAH or independently, have reviewed homelessness projects, many of which have shown good results or lead to improvements.

Exhibit 7: Housing and Accommodation Support Initiative

The Housing and Accommodation Support Initiative (HASI) was set up in 2002-03. The project aims to help people with mental illnesses maintain stable housing. The Department of Housing provides the accommodation. NSW Health provides mental health support and funds community organisations to provide disability and housing support.

During its first phase HASI provided housing support places for over 100 clients. A recent review found that HASI achieved most of its aims and led to positive results for its clients. It found:

- 85 per cent of clients maintained their tenancy
- 90 per cent fall in hospitalisation or rehabilitation rates for clients
- 72 per cent of clients had made new friends and 66 per cent were participating in social activities
- 69 per cent of clinical case managers said their client's mental health had improved
- over half of the clients said they had improved their cooking, shopping and budgeting skills.

Agencies are now implementing the next three phases of HASI with housing for an extra 736 clients ranging from low to high support needs.

Source: HASI Evaluation Summary Report, 2006.

In the following case study, PAH assessed and modified its street outreach project to improve access to services by people living on the street.

Exhibit 8: Street outreach in the inner city

PAH set up the Homelessness Action Team Support and Outreach Service (HATSOS) in February 2003 to provide outreach services to homeless people living in inner city areas of Sydney. The service had two teams, an outreach team and a support team.

The outreach team engaged people living in the street, developing their trust, and identifying immediate support needs. When a client was ready to receive ongoing support and housing, they would refer them to the support team. The support team assessed their needs and worked out suitable housing options. Staff supported clients for up to 12 months to help them remain housed.

During its operation HATSOS housed clients in boarding houses and crisis accommodation. It also referred them to drug and alcohol counsellors, mental health services and women's services.

PAH evaluated the service in 2005 and recommended that non-government agencies deliver the services and that it improve its governance structure. In 2006 the Inner City Homelessness Outreach and Support Service (ICHOSS) was formed. The project is jointly funded with City of Sydney Council.

The service also includes a specialist health team which provides medical services, counselling and drug and alcohol support. Staff report that having a specialist team within the service greatly improves referrals to other health services in the community.

Source: ICHOSS brochure, Audit Office information request (Housing).

It is encouraging that many homelessness projects appear to be having a positive impact. However as there has been no formal assessment against PAH goals, and no statewide performance targets, it is hard to assess the government's overall performance in responding to homelessness.

The Department of Housing reports that PAH projects align with its key aims, in which case, agencies may have made some progress toward these goals. But we do not know if there are key service gaps and it is hard to work out how the various program responses fit together in addressing homelessness.

Recommendation

That the Department of Housing in cooperation with other agencies, report annually against the state framework including a snapshot of key activities and results, and make this report publicly available.

2.3 Is there adequate information on the causes and extent of homelessness?

Our assessment

There is some information on the causes and extent of homelessness. However data limitations with this information make it difficult to get a clear picture of homelessness in NSW.

Census and SAAP are key data sources

The key source of information on the causes and extent of homelessness is census data. This includes data on the number of homeless, where they are, and the type of housing they live in. SAAP data also gives some insight into how many people use crisis housing and why they need it.

However both these data sets have limitations that make it difficult to get a clear picture of homelessness in NSW. For example, census data is only collected every five years and the transient nature of homeless people makes them difficult to count.

Similarly SAAP data does not give a complete picture of unmet demand because it is supply driven. This means the number of people recorded as seeking crisis housing is limited by the type and number of hostels. And as previously mentioned, SAAP services reach only a small proportion of homeless people. Both government and community staff reported that as well as medium and long-term accommodation, more crisis housing is needed for:

- families (two parents and children)
- fathers with children
- single women
- people with many different issues or complex needs.

PAH does not collect homelessness data

As PAH is project-focused it does not collect or collate statewide information on homelessness in NSW. However some agencies, with PAH or independently, have commissioned research on certain topics such as indigenous homelessness in the inner city. South Eastern Sydney Illawarra Area Health Service also carried out a consumer survey on homelessness and health.

Agencies reported that they did not generally record homelessness data when collecting client information. And most wished they could track which services homeless people accessed throughout the state.

The ability to track clients through a system is a common problem, not specific to homeless people. Some agencies are trying to address this issue, for example:

- the Department of Community Services reports that SAAP uses the same client identifier as the Home and Community Care Program, which is run by the Department of Ageing Disability and Home Care
- the Department of Health is rolling out a unique in-patient identifier across all Area Health Services
- the Department of Corrective Services reports that it can track offenders it manages in custody and the community.

Recording and collating data on homelessness by agencies is the first step in getting a better picture of homelessness in NSW. This will help in finding out which services the homeless access and why, or alternatively, why they do not. This can then inform future homelessness strategies.

As a minimum, agencies should take existing homelessness data into account when planning services. Then if required, develop ways to record and collate better data on homelessness, particularly access to services.

Recommendation

That the Department of Housing in cooperation with other agencies, encourage government agencies to:

- use census data on homelessness to help them plan and deliver services
- adopt similar client identifiers to better track the homeless through their systems.

2.4 Do government and community agencies work in partnership?

Our assessment

Government and community agencies are working together to address homelessness. However more needs to be done to network with agencies that are not members of PAH.

PAH is the key means for working together

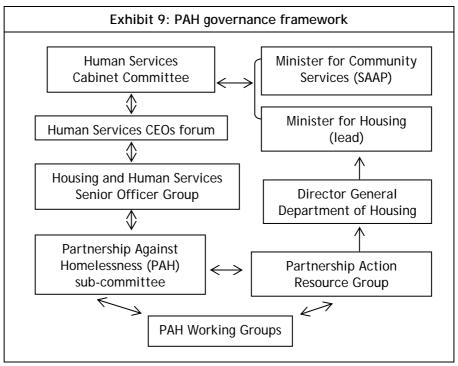
At the strategic level, PAH is the key means by which government agencies work together and exchange information. PAH currently has 13 members. Representatives of each agency meet quarterly to discuss projects and new issues. PAH has overseen many cross-agency projects involving both government and community agencies.

In the past, attendance at PAH meetings has suffered in terms of the number of representatives and differing seniority levels. Until recently there was no accountability or reporting framework.

In late 2006, PAH restructured to address some of these problems and improve governance arrangements. PAH now reports to the Housing and Human Services Senior Officer Group which in turn reports to a CEOs forum. Because CEO forums answer to a cabinet subcommittee it means homelessness has now been elevated to Ministerial level.

Community agencies now have a voice on PAH

For the first time community agencies will sit on a new committee, called the Partnership Action Resource Group (PARG). The following diagram shows the new PAH governance framework.



Source: Department of Housing.

Some barriers to partnership still exist While government and community agencies are working together to improve services for homeless people, staff reported that there were still some significant barriers to partnership. These included:

- differing roles and priorities
- lack of resources for homelessness initiatives (both staff and money)
- no champion or someone to take up the cause
- no vision from the top regarding homelessness.

Some of these barriers, the last two in particular, could be the result of the past governance problems. We do not know yet whether the new PAH structure is enough to keep homelessness on the agenda, although reporting to a cabinet subcommittee is a step in the right direction. A common element of homelessness strategies in other states is a public commitment from the head of government.

In South Australia the Premier has made reducing homelessness a priority for the State's Strategic Plan. The Minister for Families and Communities, as the lead minister for the government's homelessness strategy, convenes bi-monthly meetings to check progress against initiatives in this area.

PAH does not cover all government agencies that play a role in responding to homelessness. Justice agencies such as Legal Aid and Local Courts are not members. PAH needs to find a way to network with such agencies so it can coordinate strategies that cover all service responses, and reduce any duplication.

Recommendation

That the Department of Housing in cooperation with other agencies, examine ways to network with agencies that are not members of PAH.

Some homelessness protocols are in place

As well as PAH activities, there are a number of high level protocols that relate to homelessness or its causes. These include:

- Protocol for Homeless People in Public Places, 2002, which involves various agencies, and outlines principles for dealing with homeless people in public spaces
- Joint Guarantee of Service (JGOS) for People with Mental Health Problems and Disorders, 2003, which involves various agencies including Department of Housing and NSW Health
- NSW Interagency Action Plan for Better Mental Health, 2005, which aims to improve health outcomes for people with mental illness.

We found that agencies did not implement JGOS uniformly across the state. And neither JGOS nor the public places protocol have been reviewed, so we do not know how effective they are in responding to homelessness. The Department of Housing advised us that both are currently being evaluated.

Many local examples of collaboration

Agencies were involved in many cross-agency projects and networks as part of daily operations. For example, the Department of Housing and Department of Corrective Services have set up a liaison committee which has developed a resource on housing related issues such as debt and tenancy.

We also found many examples of joint projects, networking and collaboration at the local level, involving both government and community agencies. Section 3.3 also has more on this.

2.5 Do agencies benchmark and spread good practice?

Our assessment

Other than SAAP data, there is limited benchmarking of performance regarding homelessness and no formal means of spreading best practice.

Limited benchmarking

PAH does not collect statewide data therefore does not benchmark the state's performance regarding homelessness. However staff working in PAH agencies regularly research activities in other jurisdictions for project work.

Benchmarking on homelessness occurs mainly through the national SAAP data collection. The Department of Community Services also plans to benchmark data collected by its new SAAP performance management system. The Productivity Commission's Report on Government Services also benchmarks data on housing affordability and housing allocations, although the latter does not specifically relate to homelessness.

No formal means to spread best practice examples

PAH currently has no role in spreading information on local homelessness initiatives and projects, for example, as an information clearing house. Agencies do this informally by networking and attending interagency meetings and forums.

The Department of Community Services also encourages good practice in SAAP services by holding regional forums, and developing service standards and training programs.

Many agencies, both government and community, have a role in responding to homelessness. Therefore it is important that local initiatives and practices reach all in the homelessness sector. Agencies can then decide whether such projects would work in their region.

PAH needs to set up a better way to share good ideas and promote service improvement. This will help to reduce duplication and ensure that agencies can adopt best practice statewide.

Recommendation

That the Department of Housing in cooperation with other agencies, set up a means to benchmark the state's performance on homelessness and spread best practice on local initiatives.

3.	Are homeless people helped to acces	SS
	support services	s?

At a glance

The key question we wanted to answer was:

Are homeless people assisted in accessing support services?

To answer this question we defined the homeless as people living on the street or in crisis housing. Support services refers to government agencies that provide health care and legal assistance.

Our assessment:

Government and community agencies are working together to improve access to health care and legal assistance but with mixed results. We found many examples of government agencies trying to reach out to homeless people by delivering services where they live or visit. However these are mainly local initiatives not supported by central policies. Other agencies reported that they did not have the capacity to seek new clients such as the homeless, but rely on referrals.

Staff reported that the most difficult services to access were mental health services in the community, particularly for less acute mental health issues. The homeless often had to wait for beds in detoxification and rehabilitation centres, and for other services such as counselling.

Legal services are available to all members of the public but there are still some barriers for homeless people. They are discouraged by bureaucratic offices and courts which have a high police presence. Homeless people also have problems responding to systems that rely on telephone-based advice, or are highly document driven.

Legal staff and some health services reported that they had few homeless clients that they were aware of, indicating the homeless may not always be accessing these services.

The more capacity an agency has to reach out to the homeless, the more likely they will access services. Agencies relying on the homeless to find them, are in danger of missing those in our community that are in greatest need.

To answer this question we visited a sample of crisis housing providers and government support services within four local government areas of NSW. Crisis housing providers included street outreach services and hostels. Support services included:

- community health centres
- drug and alcohol services
- community mental health services
- legal aid offices
- chamber registrar services within local courts.

3.1 How are homeless people identified and assessed?

Our assessment

Although referral was the means by which support services found most homeless people, we found many examples of services reaching out to the homeless to assess their support needs.

Most homeless found by referral

Referral was the means by which support services found most homeless people. This included self-referral and referral by other government and community agencies, including hostels.

The homeless were not necessarily a target group, with legal staff and some health services reporting that they had few homeless clients that they were aware of. This could mean that homeless people are not always accessing these services. The exception was areas with large homeless populations, such as Darlinghurst, where some health services said that the majority of their clients were homeless.

Many examples of outreach by health services

Although there were no formal outreach policies, we found many examples of health services trying to reach out to homeless people. For example, nursing staff might visit a local hostel one or two hours a week providing health care including:

- mental health
- podiatry
- general health
- pre and post natal care.

A number of health services had one or two positions dedicated to homelessness.

Exhibit 10: Dedicated homelessness positions

St Vincent's Mental Health Service employs two clinical nurse consultants (CNCs) to work with the non-government sector and general practitioners to improve access to mental health services. They run clinics at nine inner city hostels. Key tasks include:

- providing consultation and liaison advice
- administering medication
- mental health assessment
- monitoring
- education and training (supervision, informal talks, role modelling)
- networking with community agencies on mental health issues.

The CNCs work closely with the Homelessness Nurse at the Darlinghurst Community Health Centre. The Homelessness Nurse also runs clinics at hostels, and works with other health services to raise awareness and help address new issues. A recent project involved a more streamlined approach to assisting pregnant homeless women into pre-natal care in hospital.

The Parramatta Community Mental Health Service also funds a dedicated homelessness position and runs clinics at local hostels. Services include assessments, case management, and crisis intervention.

Source: Audit interviews.

Few examples of legal outreach

There were few examples of legal services reaching out to the homeless. Most reported that they do not market their services due to capacity constraints.

However one example of outreach at Local Courts involved the Aboriginal Client Service Specialists (ACSS). ACSS officers are located in up to 18 local courts in NSW. At Downing Centre in Sydney, the ACSS regularly visits local Aboriginal homeless people to remind them of court dates and other court proceedings.

Legal Aid also has lawyers at local courts that help people in criminal law matters. Some lawyers said they had helped homeless people being held by the court for a criminal offence. Legal Aid lawyers practicing family law said they also visited women's refuges to follow-up referrals.

The community sector provides most legal outreach work to hostels in metropolitan areas.

Exhibit 11: Homeless Persons Legal Service

Most legal outreach provided by community sector

The Public Interest Advocacy Centre coordinates the Homeless Persons Legal Service (HPLS), a joint project with the Public Interest Law Clearing House (PILCH). Lawyers from PILCH agencies run free legal clinics in seven welfare agencies that provide services to homeless people, such as hostels.

Lawyers spend about two hours at a clinic each week. They provide onthe-spot advice on a range a matters including fines, victims' compensation, street offences, tenancy, and administrative law. They also undertake casework in matters that need ongoing legal assistance. Staff from the welfare agencies support clients in co-operation with the lawyers.

As well as providing legal advice, HPLS identifies systemic issues that cause homelessness or keep homeless people from improving their circumstances.

The Shopfront Youth Legal Centre also provides free services to young people who may be homeless.

Source: Audit Interviews, PIAC.

To improve access to services hostel staff must have a good understanding of agencies' assessment and referral protocols, including the criteria they use to accept clients. This helps to reduce the number inappropriate referrals.

Some assistance provided on assessments

We found that some support services provided formal training or assistance to hostels to help them assess the needs of homeless people. Examples include:

- mental health training
- help in developing a form to assess complex needs.

Legal Aid has also advised us that it will provide training to lawyers working for the Homeless Persons Legal Service. Most other assistance to hostels was informal through interagency meetings and forums, or requests for talks on certain topics.

Inappropriate referrals mainly arose in relation to mental health. We found that health services need to do more to improve the community sector's understanding of the mental heath system. This issue is discussed further in Section 3.4.

Overall, both community and government staff emphasised the importance of reaching out to homeless people as they are unlikely to access services in conventional ways.

The more capacity an agency has to reach out to homeless people, the more likely they will receive the help they need. Some agencies may have equity and access policies that encourage services to improve access by vulnerable people such as the homeless.

Exhibit 12: Access and equity policy

In May 2004 the Department of Health released its Health and Equity Statement 'In All Fairness'. The policy aims to reduce health inequities. This means reducing the gap between the people with the best and poorest health. The policy confirms that reducing health inequity is a core business for NSW Health. It provides examples of people at risk of poor health outcomes such people who are homeless or in insecure housing.

Source: In All Fairness, NSW Health 2004.

Reaching out may also save agencies money. The long-term homeless often end up at the high cost end of service delivery, such as hospitals or prisons. These costs might be reduced if the needs of the homeless were addressed earlier.

Exhibit 13: Potential cost savings

The Royal Adelaide Hospital in South Australia reviewed data on people who regularly presented to the emergency department during 2005-06. It found that 44 of its top 100 presenters were homeless people. They presented for serious health concerns which were not being addressed by other health care providers. The hospital has transfer liaison officers to link homeless people to services and make sure it does not discharge them onto the street.

Source: Audit interviews, Social Inclusion Unit, South Australia.

We recognise that homelessness is not a core responsibility for many support services. Yet agencies relying on the homeless to find them are in danger of missing those in our community that are in greatest need. Agencies should find ways of removing any access barriers. This is discussed further in Section 3.4.

3.2 Is there adequate information about support services?

Our assessment

We found that hostels and community outreach services had adequate information about support services in their area.

To refer homeless people to appropriate services, staff working in hostels must have information about support services in their area.

Hostel staff have information on support services

Support services distribute information about their service in three ways:

- brochures
- interagency meetings and forums
- outreach services (if provided).

All hostels we visited had brochures on display about local support services. We did not see any brochures for the chamber registrar service, however Local Courts said that this is because they are updating their pamphlet on court services.

Staff working in hostels said they had a good knowledge of support services. Many developed their own directories and networks and saw it as their role to keep abreast of local activities.

In most cases staff said that finding a service was easy. However, accessing it was more difficult. See Section 3.4 for more on access barriers.

3.3 Do government and community agencies work together to improve access?

Our assessment

Government and community agencies work together to improve access to services, at both project level and for individual referrals, but with mixed results.

To improve access to services it is important that government and community agencies work together to get the best possible results for their clients.

Many examples of joint projects

We found many examples of partnerships and collaboration, both at the project level and for individual clients. Joint projects included:

- PAH outreach initiatives such as ICHOSS and Signposts
- Hunter New England Area Health Service (HNEAHS) Boarding House project
- Supported Housing Program with HNEAHS Drug and Alcohol Services,
 Mission Australia, and Department of Housing
- LINKS protocol between Hunter Mental Health and SAAP services
- Western Sydney Strategic Plan Against Homelessness.

The medical clinic at a Meals Plus in Parramatta is an example of a partnership between the government, private, and community sectors.

Exhibit 14: Local partnerships

Meals Plus provides breakfast and lunch for the homeless and other vulnerable people in Parramatta. It is the main entry point to homelessness services in the area and helps clients access a range of services from housing to health care.

Once a week it runs a medical clinic for homeless people in partnership with the Parramatta Community Health Centre, which is part of Sydney West Area Health Service, and a coalition of local doctors. The Community Health Centre provides nurses, and Meals Plus provides a room to run the clinic.

The clinic operates for one hour every Tuesday. Homeless people do not need to book an appointment or have a Medicare card to see a doctor. In its first year the clinic saw 214 clients, ranging in age from 17 to 64. Few clients had their own doctor indicating that they may not otherwise access general health services.

Source: Parramatta Mission Annual Report, Audit interviews.

Staff working in hostels and support services also attended interagency meetings where they could exchange information and discuss new issues. Some were dedicated homelessness forums, while others were general community networks, for example:

- Sydney CBD Homelessness Coordination Meetings
- Inner Sydney Homelessness Action Committee
- Newcastle and Hunter Homelessness Interagency Network
- Coordinated Legal Services Delivery meetings
- Court Users forum.

Some hostels and community organisations said they felt part of these networks and had strong links to local services. Others reported that they felt quite isolated and that it was sometimes difficult to access key staff within support services.

Good relationships often key to success Both government and community staff recognised that cultivating personal relationships with each other was the key to improving access and getting the best results. Having a champion for projects also improved the likelihood of success. Barriers to partnership were the same as those previously mentioned (see Section 2.4). Some staff said that if homelessness was a higher priority in their agency it would be easier to advance new initiatives.

Staff working in hostels and supports services would get clients' consent, often in writing, to share information with other agencies. They sometimes cited privacy as a reason for withholding information, although some reported that duty of care should override privacy concerns.

The Department of Housing is developing a client information sharing schedule as part of the Housing and Human Services Accord. The schedule will set out protocols for sharing client information regarding housing and support.

Significant access barriers still exist

So although some barriers to partnership still exist, government and community agencies are working together to improve access to services. But are they successful? We found that there were mixed results, as some significant obstacles still exist.

3.4 Has access to support services improved?

Our assessment

Access improves where agencies are able to reach out to the homeless. However significant barriers still exist including limited service capacity, waiting lists, expectation gaps, intimidating physical environment, and reliance on paper based systems.

No data on whether access has improved

Support services generally did not record client information on homelessness. Therefore, there is no reliable data on how often homeless people access services or whether access has improved.

As discussed earlier, access improves where agencies reach out to the homeless. We found many examples of this, particularly mental health and community health nurses.

Despite agencies reaching out, there are still significant barriers. Many of these affect the general population, not just homeless people. However the impact on the homeless is greater because they are more vulnerable and services are more easily delivered to people with a home.

All services reported capacity limitations

The transient nature of homeless people makes it difficult for services to find and monitor clients. And all services, both health and legal, reported that they did not have the capacity to meet the demand for their services.

The most difficult services to access were community mental health services, particularly for less acute mental health issues. Mental health teams said that high demand for their services meant they tended to deal with more serious cases.

Hard to access less acute mental health services

Exhibit 15: Community mental health teams

Community mental health teams are staffed by multi-disciplinary health workers and medical staff. They provide a range of services including:

- mental health assessments
- psychiatric crisis interventions
- case management
- clinical services
- education and support.

When someone contacts a mental health team, the triage officer conducts an initial assessment to determine the most appropriate course of action. This assessment involves comprehensive review of risks including suicide, self-harm, harm to or from others, and staff safety alerts. They assign a triage rating which determines the timeliness of the response.

The response is therefore determined by a number of risk factors and ensures clients are treated in order of their clinical priority. Staff report that increasing demand for mental health services has led to a necessary prioritisation of more acute matters.

Source: Community Mental Health Team brochures, audit interviews, mental health triage forms.

Some staff working in hostels reported that mental health teams were sometimes unable to attend incidents or required police presence if they did. Many just "wanted someone to come out and help". Mental health teams said that they often get inappropriate referrals, but that it is the triage officer's role to direct calls and that they usually met response times.

There is also much confusion in the community about what mental health actually means. For example some behavioural problems are often confused with mental illness, yet may be caused by substance abuse or social problems like family conflict. These problems may be more appropriately managed by General Practitioners or primary health care workers such as counsellors.

It appears that some hostel staff misread mental illness or expect a service that mental health teams do not or cannot provide. This expectation gap can make it more difficult for agencies to work together to improve access to services. Better understanding and awareness of mental health issues and the appropriate response might help.

We acknowledge that education is not going reduce the pressure on the mental health system. However, it helps to foster better relationships and increase awareness of the pressures facing all. The Department of Health has recently started a joint learning initiative with General Practitioners. Perhaps it could adopt a similar project with the community sector.

Recommendation

That the Department of Health and Area Health Services investigate ways to increase hostel caseworkers' knowledge of mental health services, including appropriate responses to mental health issues.

The homeless often wait for detox beds

Drug and alcohol staff told us there were waiting lists for beds in detoxification or rehabilitation centres. The longer clients have to wait, the more likely they will disengage and choose not to seek treatment. In the case of homeless people, substance abuse may be one of many issues they are dealing with, therefore it quickly becomes low priority for them.

Both community organisations and drug and alcohol services said that clients had to wait for a variety of reasons, including:

- there were not enough detox and rehabilitation beds
- some services would not accept clients on certain medications
- substance abuse was not the main presenting issue.

Homeless people with both mental health and substance abuse issues were at risk of being 'buck-passed' between services, with neither wanting to intervene unless the other issue had first been addressed. Yet many homeless people are in this position.

Staff also reported that there could be extended waits for pharmacotherapy services, and drug and alcohol counselling.

The homeless do not regularly access community health centres

As discussed in Section 3.1, some community health centres had started to offer services to homeless people, such as podiatry or pre-natal care. However we found that many community health staff did not see their service as something homeless people would access. Yet homeless people have many other health problems that community health centres may address. For example:

- psychology
- chiropractic
- counselling
- dental services.

Community health staff also advised that there were waiting lists for many of their services such as counselling although some centres had managed to reduce these recently. Hostels would regularly refer homeless people to local medical clinics or general practitioners. Yet some may not have identification, including a Medicare card.

Legal services are open to anyone

Legal Aid and Local Courts did not provide outreach services to hostels. However most staff thought their services were accessible. This is because they are open to all members of the public. And most are free, with only legal aid subject to a means test and some policy constraints.

LawAccess NSW, a government telephone legal information and assistance service, also recognised homeless people as 'priority customers'. Customer Service Officers refer homeless people directly to a lawyer if they are unable to receive a return call.

Although homeless people are able to access legal services, staff recognised that there are still some barriers.

Some barriers still exist

Exhibit 16: Barriers to accessing legal services by homeless people

- Physical environment: Bureaucratic offices are intimidating and sometimes difficult to find, courts may have a high police presence.
- Telephone service: Problematic if homeless people do not have access to a phone or money for a pay phone.
- Conflict of Interest: In cases where both parties are seeking legal aid, a homeless person may need to be referred to a private solicitor, rather than have a Legal Aid lawyer deal with their matter.
- Regional solicitors: It is more difficult to get private firms to take on legal aid clients in areas where there are few solicitors.
- Paper-based system: Because the homeless people are transient they might not receive important legal documents.

Source: Audit Office interviews, 'No Home No Justice' Law and Justice Foundation, 2005.

Fines have a big impact on homeless people

The reliance on paper-based systems is particularly problematic for justice agencies and can have a big impact on homeless people. For example, due to their public visibility many homeless people may receive fines or are charged for minor offences such as street misdemeanours or traffic offences. If they do not receive the fine or can not pay it, they accumulate more debt due to the added penalties. Similarly if a homeless person misses a court appearance, a magistrate may issue another fine or a warrant for his or her arrest.

As homeless people often have no capacity to pay these fines, it has the effect of criminalising homelessness. Los Angeles in the United States plans to set up a Homeless Court Program in rehabilitation centres. Homeless people with warrants for 'quality of life' offences can have them dismissed when they complete a mental health or drug and alcohol recovery program.

The Attorney-Generals Department reports that it is investigating similar schemes to see if it can adopt them in NSW. This is an important issue which if addressed, will significantly improve the lives of some homeless people.

SAAP data supports access problems

So although agencies are working together to improve access to services, there are still significant barriers for homeless people. SAAP data confirms this. In 2004-05 the most common support neither referred or provided to SAAP clients in NSW, were specialist services which includes health care, followed by counselling.

The challenge for support services is to reduce the gap between the chaotic world of homeless people, and the structured world of government. This is why it is important for agencies to reach out to the homeless if possible.

As a first step, agencies should review the extent to which homeless people access their service. They can do this as part of service planning. It may include a review of census data or intake statistics, or finding out where homeless people live in their area.

Agencies can then develop a range of local responses. The following exhibit outlines possible homelessness strategies.

Exhibit 17: New ways to reach out to homeless people

Local responses may include:

- assessment or intake principles for homeless people
- protocols for working with community welfare agencies
- collecting client data on housing status and the main causes of homelessness in the region
- placing specialist staff on-site in hostels or boarding houses
- setting up clinics where homeless people live or visit
- establishing co-located services
- establishing a key 'entry point' service which is visible and accessible to homeless people with single assessment and referral processes
- educating and training staff on the needs and characteristics of homeless people
- designing user friendly services for homeless people such as
 - flexible appointment times
 - welcoming and comfortable waiting rooms
 - locating services near public transport.

Source: Audit interviews, site visits and research of other jurisdictions.

Recommendation

That Area Health Services, Legal Aid and Local Courts, as part of service planning:

- review the extent to which homeless people access their service
- develop new ways of delivering services to the homeless.

3.5 Do support services meet the needs of homeless people?

Our assessment

There were no formal reviews of support services regarding the homeless, therefore we were unable to determine whether they met the needs of homeless people.

No formal reviews on the homeless

There had been no formal reviews of support services to determine whether they met the needs of homeless people.

Some support services had participated in surveys or evaluations of community welfare organisations. And although no formal reviews were undertaken, others had identified service gaps regarding the homeless or those at risk of homelessness and developed local responses. The medical clinic at Meals Plus and dedicated homelessness health positions, both previously mentioned, are two such examples.

The following two case studies show how services responded to clients who were at risk of homelessness.

Exhibit 18: Preventing homelessness

Some gaps identified and local responses put in place

Caravan Park project

After reviewing intake statistics for a community health centre, a community health nurse noticed that residents of a particular caravan park were not following-up their referrals. She found that many were transient, and moved between caravan parks. Others had lived in cars, on the street, or been evicted from public housing.

The community health centre set up an outreach service that operates in the caravan park six hours a fortnight. Services include a needle exchange, child and family services, immunisation, and a medical clinic. The community health centre also addresses other social welfare needs regarding education, employment, and housing. For example, it links children to schools, literacy tutoring, and has set up school breakfast programs. It has housed 70 families over 4 years.

West African clients

A chamber registrar noticed increasing numbers of people from West African nations appearing before the local magistrate. He contacted the local migration centre to find out why they were appearing in court. He found that a number were at risk of homelessness. He then developed a program to help court staff respond to their needs more appropriately.

Source: Audit interviews, Hunter New England Area Health Service, Newcastle Chamber Registrar Service.

Homeless people are now a priority group for Legal Aid In November 2006 Legal Aid recognised homeless people as a priority client group. It aims to find new ways to improve access by this group and has set up a 'homelessness' postcode so it can collect data on this issue. A coordinating team will develop initiatives in consultation with other agencies and service providers. It is also considering including homelessness as an 'exceptional disadvantage' category within its means test. This will improve opportunities for homeless people to get legal aid.

Local Courts is also exploring ways to reach out to the disadvantaged. Its Courts 2010 'Face to Face' project aims to improve services for geographically and socially isolated people. It plans to pilot an outreach service in metropolitan Sydney for people, such as the homeless, whose justice needs are not being met.

We do not suggest that support services perform extensive service reviews, especially if they find out that they have few homeless clients. But as a minimum, support services should consider the impact of any new projects or services on homeless people, and factor this into their service planning.

Recommendation

That, where homeless people are identified as a client group, Area Health Services, Legal Aid and Local Courts take homelessness into account when planning new services.

Appendix 1 About the audit

Audit Objective

This performance audit assessed whether the government is achieving its desired results for the homeless, and whether it helps them to access support services.

Lines of Inquiry

In reaching our opinion against the audit objective, we sought to answer the following questions:

- 1. Are the government's outcomes for the homeless being achieved?
- 2. Are the homeless assisted in accessing support services available to the general public?

Audit scope

Scope for Question 1 on government outcomes:

- By 'the government' we mean NSW government agencies that are members of the Partnership Against Homelessness (PAH).
- By 'the homeless' we mean homeless people as defined by PAH agencies. This includes all types of homelessness, from primary to tertiary.

Scope for Question 2 on support services:

- By 'support services' we mean government agencies that provide health care and legal assistance, specifically:
 - Department of Health
 - Legal Aid Commission
 - Local Courts / Attorney General's Department.
- Support services included:
 - community mental health services
 - community health centres
 - drug and alcohol services
 - legal aid offices
 - chamber registrar services within local courts.
- By 'the homeless' we mean people living on the street and in crisis housing, as they are potentially the most in need.
- Crisis housing includes hostels and shelters for adults and young people.
- We did not visit refuges for people affected by domestic violence, boarding houses, or caravan parks.

Audit Criteria

In answering the lines of inquiry, we used the following audit criteria (the 'what should be') to judge performance. We based these standards on our research of current thinking and guidance on better practice. They have been discussed, and wherever possible, agreed with those we are auditing.

For line of inquiry 1, we assessed the extent to which:

- government agencies that respond to homelessness have clearly set out the results they hope to achieve, the means to achieve it and how it will be measured
- government agencies are meeting performance targets or homelessness and performance is improving

- government agencies have adequate information on the causes and extent of homelessness so they can direct resources to areas of greatest need
- government agencies work in partnerships with each other and the community sector to improve services to the homeless
- government agencies strive to improve performance by benchmarking and spreading good practice on service provision.

For line of inquiry 2, we assessed the extent to which:

- government agencies help people working with the homeless to identify and assess those in need of support
- government agencies help people working with the homeless to access information about support services in their area
- government agencies consult with each other and work together to help the homeless access the most appropriate support service
- the results of support services are evaluated to determine whether they meet the needs of the homeless.

Audit approach

We acquired subject matter expertise by:

- interviewing staff in relevant government agencies responsible for:
 - developing homelessness strategies, measures and targets
 - collating and analysing information on the causes and extent homelessness
 - reviewing performance information on homelessness
- interviewing people working with homeless in crisis housing and outreach services
- interviewing homeless people (small focus groups at each site visit)
- interviewing people working in support services in the community including legal aid, mental health, drug and alcohol and welfare support
- reviewing planning documents that contain information on homelessness strategies
- reviewing government protocols for working together and with the community sector
- reviewing protocols for assessing and referring the homeless to support services
- reviewing documents which show evaluation of support services
- surveying relevant government agencies, support services and housing providers
- analysing performance data.

We also examined the response to homelessness in other jurisdictions to identify best practice examples and issues that may impact on the effectiveness of service delivery. We examined the following jurisdictions:

- Australian states and territories
- New Zealand
- United Kingdom
- Canada
- US (State of New York, Los Angeles).

John Thomson from Thomson Goodall Associates, independent consultant, provided comments on reports and other material produced during the audit.

Fieldwork

To help us answer the first line of inquiry we spoke to all the members of the Partnership Against Homelessness, a network of 13 government agencies which aim to improve services for the homeless.

To answer the second line if inquiry we visited a sample of crisis housing providers and support services in 4 local government areas within NSW. They were the City of Sydney (ie CBD), Newcastle, Dubbo, and Parramatta.

We spoke to people working with the homeless in the following services:

- hostels
- homeless outreach services
- legal aid offices
- community legal centres
- court registrar services
- mental health services
- drug and alcohol services
- community heath centres
- some NGO welfare agencies.

We also ran a number of focus groups with people staying in hostels to find out whether agencies meet their support needs.

Audit selection

We use a strategic approach to selecting performance audits which balances our performance audit program to reflect issues of interest to Parliament and the community. Details of our approach to selecting topics and our forward program are available on our website.

Audit methodology

Our performance audit methodology is designed to satisfy Australian Audit Standards AUS 806 and 808 on performance auditing, and to reflect current thinking on performance auditing practices. We produce our audits under a quality management system certified to International Standard ISO 9001. Our processes have also been designed to comply with the auditing requirements specified in the *Public Finance and Audit Act 1983*.

Acknowledgements

We gratefully acknowledge the co-operation and assistance provided by the Department of Housing, NSW Health, Legal Aid and Local Courts. In particular we wish to thank our main liaison officer Maura Boland, and staff who participated in interviews, assisted with research or provided other material relevant to the audit.

Audit team

Our team leader for the performance audit was Tiffany Blackett, who was assisted by Rod Plant. Sean Crumlin provided direction and quality assurance.

Audit cost

Including staff costs, printing costs and overheads, the estimated cost of the audit is \$354,800.

Appendix 2 Glossary

Community agencies

Includes non-government organisations and charities, which respond to the immediate needs of homeless people. Government may fund these to help

deliver a wide range of services to the homeless.

Community housing

Rental housing provided for low to moderate income or special needs households, managed by community organisations that are at least partly subsided by government. Housing stock may be owned by a variety of

groups including government.

Crisis housing Temporary accommodation for homeless people for a period of up to six

months.

HASI Housing and Accommodation Support Imitative

HPLS Homeless Persons Legal Service

Hostels For the purpose of this review hostels refer to SAAP funded services which

provide short term supported accommodation for homeless people. This means caseworkers are on-site to respond to their immediate needs and

link them to relevant services.

ICHOSS Inner City Homelessness Outreach and Support Service

Marginal residents of caravan parks

People who rent caravans where there is no-one in the dwelling who has full-time employment, and they are at their usual address.

PAH Partnership Against Homelessness

Public housing Dwellings owned (or leased) and managed by government housing

authorities to provide affordable rental accommodation.

SAAP Supported Accommodation and Assistance Program

Support services For the purpose of this review support services refers to government agencies that provide health care and legal assistance. We focused on:

community health centres

- drug and alcohol services
- community mental health services
- legal aid offices
- chamber registrar services within local courts.

Performance audits by the Audit Office of New South Wales

Performance Auditing

What are performance audits?

Performance audits determine whether an agency is carrying out its activities effectively, and doing so economically and efficiently and in compliance with all relevant laws.

Performance audits may review a government program, all or part of a government agency or consider particular issues which affect the whole public sector.

Where appropriate, performance audits make recommendations for improvements.

If you wish to find out what performance audits are currently in progress, visit our website at www.audit.nsw.gov.au.

Why do we conduct performance audits?

Performance audits provide independent assurance to Parliament and the public that government funds are being spent efficiently and effectively, and in accordance with the law

Performance audits seek to improve the efficiency and effectiveness of government agencies so that the community receives value for money from government services.

Performance audits also assist the accountability process by holding managers to account for agency performance.

What are the phases in performance auditing?

Performance audits have three key phases: planning, fieldwork and report writing.

During the planning phase, the audit team will develop audit criteria and define the audit field work.

At the completion of field work we will meet with agency management to discuss all significant matters arising out of the audit. Following this, we will prepare a draft performance audit report.

We meet with agency management to check that facts presented in the report are accurate and that recommendations are practical and appropriate. Following this, a formal draft report is provided to the CEO for comment. The relevant Minister is also provided with a copy of the final report. The final report, which

is tabled in Parliament, includes any comment made by the CEO on the conclusion and the recommendations of the audit.

Depending on the scope, performance audits can take several months to complete.

Copies of our performance audit reports can be obtained from our website or by contacting our Office.

How do we measure an agency's performance?

During the planning phase, the team develops the audit criteria. These are standards of performance against which the agency or program is assessed. Criteria may be based on best practice, government targets, benchmarks, or published guidelines.

Do we check to see if recommendations have been implemented?

Every few years we conduct a follow-up audit. These follow-up audits look at the extent to which action has been taken to address issues or recommendations agreed to in an earlier performance audit.

The Public Accounts Committee (PAC) may also conduct reviews or hold inquiries into matters raised in performance audit reports. Agencies are also requested to report actions taken against each recommendation in their annual report.

Who audits the auditors?

Our performance audits are subject to internal and external quality reviews against relevant Australian and international standards. This includes ongoing independent certification of our ISO 9001 quality management system.

The PAC is also responsible for overseeing the activities of the Audit Office and conducts a review of our operations every three years.

Who pays for performance audits?

No fee is charged for performance audits. Our performance audit services are funded by the NSW Parliament and from internal sources.

Further information

Further information can be obtained from our website www.audit.nsw.gov.au or by contacting us on 9275 7277.

Performance Audit Reports

No	Agency or Issues Examined	Title of Performance Audit Report or Publication	Date Tabled in Parliament or Published
85*	Internal Financial Reporting	Internal Financial Reporting including a Better Practice Guide	27 June 2001
86	Follow-up of Performance Audits	The School Accountability and Improvement Model (May 1999) The Management of Court Waiting Times (September 1999)	14 September 2001
87	E-government	Use of the Internet and Related Technologies to Improve Public Sector Performance	19 September 2001
88*	E-government	e-ready, e-steady, e-government: e-government readiness assessment guide	19 September 2001
89	Intellectual Property	Management of Intellectual Property	17 October 2001
90*	Intellectual Property	Better Practice Guide Management of Intellectual Property	17 October 2001
91	University of New South Wales	Educational Testing Centre	21 November 2001
92	Department of Urban Affairs and Planning	Environmental Impact Assessment of Major Projects	28 November 2001
93	Department of Information Technology and Management	Government Property Register	31 January 2002
94	State Debt Recovery Office	Collecting Outstanding Fines and Penalties	17 April 2002
95	Roads and Traffic Authority	Managing Environmental Issues	29 April 2002
96	NSW Agriculture	Managing Animal Disease Emergencies	8 May 2002
97	State Transit Authority Department of Transport	Bus Maintenance and Bus Contracts	29 May 2002
98	Risk Management	Managing Risk in the NSW Public Sector	19 June 2002
99	E-Government	User-friendliness of Websites	26 June 2002
100	NSW Police Department of Corrective Services	Managing Sick Leave	23 July 2002
101	Department of Land and Water Conservation	Regulating the Clearing of Native Vegetation	20 August 2002
102	E-government	Electronic Procurement of Hospital Supplies	25 September 2002
103	NSW Public Sector	Outsourcing Information Technology	23 October 2002
104	Ministry for the Arts Department of Community Services Department of Sport and Recreation	Managing Grants	4 December 2002
105	Department of Health	Managing Hospital Waste	10 December 2002

No	Agency or Issues Examined	Title of Performance Audit Report or Publication	Date Tabled in Parliament or Published
	Including Area Health Services and Hospitals		
106	State Rail Authority	CityRail Passenger Security	12 February 2003
107	NSW Agriculture	Implementing the Ovine Johne's Disease Program	26 February 2003
108	Department of Sustainable Natural Resources Environment Protection Authority	Protecting Our Rivers	7 May 2003
109	Department of Education and Training	Managing Teacher Performance	14 May 2003
110	NSW Police	The Police Assistance Line	5 June 2003
111	E-Government	Roads and Traffic Authority Delivering Services Online	11 June 2003
112	State Rail Authority	The Millennium Train Project	17 June 2003
113	Sydney Water Corporation	Northside Storage Tunnel Project	24 July 2003
114	Ministry of Transport Premier's Department Department of Education and Training	Freedom of Information	28 August 2003
115	NSW Police NSW Roads and Traffic Authority	Dealing with Unlicensed and Unregistered Driving	4 September 2003
116	NSW Department of Health	Waiting Times for Elective Surgery in Public Hospitals	18 September 2003
117	Follow-up of Performance Audits	Complaints and Review Processes (September 1999) Provision of Industry Assistance (December 1998)	24 September 2003
118	Judging Performance from Annual Reports	Review of Eight Agencies' Annual Reports	1 October 2003
119	Asset Disposal	Disposal of Sydney Harbour Foreshore Land	26 November 2003
120	Follow-up of Performance Audits NSW Police	Enforcement of Street Parking (1999) Staff Rostering, Tasking and Allocation (2000)	10 December 2003
121	Department of Health NSW Ambulance Service	Code Red: Hospital Emergency Departments	15 December 2003
122	Follow-up of Performance Audit	Controlling and Reducing Pollution from Industry (April 2001)	12 May 2004
123	National Parks and Wildlife Service	Managing Natural and Cultural Heritage in Parks and Reserves	16 June 2004
124	Fleet Management	Meeting Business Needs	30 June 2004
125	Department of Health NSW Ambulance Service	Transporting and Treating Emergency Patients	28 July 2004
126	Department of Education and Training	School Annual Reports	15 September 2004

No	Agency or Issues Examined	Title of Performance Audit Report or Publication	Date Tabled in Parliament or Published
127	Department of Ageing, Disability and Home Care	Home Care Service	13 October 2004
128*	Department of Commerce	Shared Corporate Services: Realising the Benefit including guidance on better practice	3 November 2004
129	Follow-up of Performance Audit	Environmental Impact Assessment of Major Projects (2001)	1 February 2005
130*	Fraud Control	Current Progress and Future Directions including guidance on better practice	9 February 2005
131	Follow-up of Performance Audit Department of Housing	Maintenance of Public Housing (2001)	2 March 2005
132	Follow-up of Performance Audit State Debt Recovery Office	Collecting Outstanding Fines and Penalties (2002)	17 March 2005
133	Follow-up of Performance Audit Premier's Department	Management of Intellectual Property (2001)	30 March 2005
134	Department of Environment and Conservation	Managing Air Quality	6 April 2005
135	Department of Infrastructure, Planning and Natural Resources Sydney Water Corporation Sydney Catchment Authority	Planning for Sydney's Water Needs	4 May 2005
136	Department of Health	Emergency Mental Health Services	26 May 2005
137	Department of Community Services	Helpline	1 June 2005
138	Follow-up of Performance Audit State Transit Authority Ministry of Transport	Bus Maintenance and Bus Contracts (2002)	14 June 2005
139	RailCorp NSW	Coping with Disruptions to CityRail Passenger Services	22 June 2005
140	State Rescue Board of New South Wales	Coordination of Rescue Services	20 July 2005
141	State Budget	In-year Monitoring of the State Budget	28 July 2005
142	Department of Juvenile Justice	Managing and Measuring Success	14 September 2005
143	Asset Management	Implementing Asset Management Reforms	12 October 2005
144	NSW Treasury	Oversight of State Owned Electricity Corporations	19 October 2005
145	Follow-up of 2002 Performance Audit	Purchasing Hospital Supplies	23 November 2005
146	Bus Transitways	Liverpool to Parramatta Bus Transitway	5 December 2005
147	Premier's Department	Relocating Agencies to Regional Areas	14 December 2005
148	Department of Education and Training	The New Schools Privately Financed Project	8 March 2006

No	Agency or Issues Examined	Title of Performance Audit Report or Publication	Date Tabled in Parliament or Published
149	Agency Collaboration	Agencies Working Together to Improve Services	22 March 2006
150	Follow-up of 2000 Performance Audit	Fare Evasion on Public Transport	26 April 2006
151	Department of Corrective Services	Prisoner Rehabilitation	24 May 2006
152	Roads and Traffic Authority	The Cross City Tunnel Project	31 May 2006
153	Performance Information	Agency Use of Performance Information to Manage Services	21 June 2006
154	Follow-up of 2002 Performance Audit	Managing Sick Leave in NSW Police and the Department of Corrective Services	29 June 2006
155	Follow-up of 2002 Performance Audit	Regulating the Clearing of Native Vegetation	19 July 2006
156*	Fraud Control	Fraud Control Improvement Kit: Meeting Your Fraud Control Obligations	20 July 2006
157	Roads and Traffic Authority	Condition of State Roads	16 August 2006
158	Department of Education and Training	Educating Primary School Students with Disabilities	6 September 2006
159	NSW Health	Major Infectious Disease Outbreaks: Readiness to Respond	22 November 2006
160	NSW Health	Helping Older People Access a Residential Aged Care Facility	5 December 2006
161	Follow-up of 2003 Performance Audit	The Police Assistance Line	6 December 2006
162	NSW Health	Attracting, Retaining and Managing Nurses in Hospitals	12 December 2006
163	Legal Aid Commission of NSW	Distributing Legal Aid in New South Wales	13 December 2006
164	Department of Juvenile Justice NSW Police Force	Addressing the Needs of Young Offenders	28 March 2007
165	Homelessness	Responding to Homelessness	May 2007

^{*} Better Practice Guides

A list of performance audits tabled or published since March 1997, as well as those currently in progress, can be found on our website www.audit.nsw.gov.au.