Foreword

The second year of Take Two operation could be characterised as a remarkably stable year. During 2005 we allowed ourselves some self-congratulation: for getting our statewide clinical program from start-up in the latter months of 2003 to full and effective operation from the beginning of 2004. The diverse workforce recruited to Take Two had brought a focused commitment to children who have suffered abuse and/or neglect and a range of clinical skills that had been crafted from employment experiences in child mental health services, child protection services and child welfare services. Whereas the impetus of our program during 2004 could largely be attributed to an enthusiasm for the new, the energy of our second year focused around program consolidation.

Our challenge during 2005 was to create a genuine treating team; cross-connecting clinical staff scattered in small teams across Victoria, and integrating their work with our research, training and administrative functions. We built our sense of program identity by requiring all staff, no matter how geographically remote they were nor how clinically busy they were, to participate regularly in a Friday Focus day of professional development. Our most remote staff member was flown to Melbourne for this regular developmental day, and all country staff were offered a night of motel accommodation immediately prior to or following each Focus. Through the Friday Focus we commenced the process of laying the foundations for a common Practice Framework that could characterise the way we address the needs of each child referred to us and the needs of those who care for our clients.

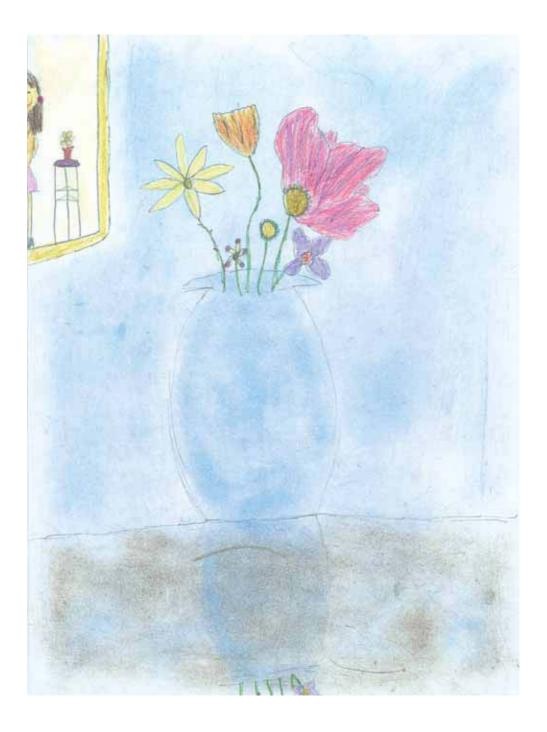
With its inbuilt capacities for formal and reflective evaluation, and for training to its learnings, the Practice Framework developed by Take Two will always be dynamic. During 2005 we were able to start to form connections with international colleagues providing therapeutic services to abused children, and through our own program evaluation we were able to commence a more systematic profiling of client needs and the needs of those who care for our clients. Ultimately, the diagnostic formulations we construct through our clinical assessments and the therapeutic interventions we make into the lives of our clients must be open to scrutiny and formal review. This second Evaluation Report introduces friends and colleagues from allied services to the client outcomes methodology we are seeking to embed within our practice.

The stability and comparative program coherence of Take Two during its second year of operation were mirrored at all levels. The Take Two program was increasingly integrated into the organisational functioning of Berry Street Victoria, and the Take Two Partnership of Berry Street Victoria, Austin Child and Adolescent Mental Health Service, School of Social Work and Social Policy, La Trobe University and Mindful (Centre for Training and Research in Developmental Health) continued to provide the program with committed and coherent oversight. The Take Two Research Team led by Margarita Frederico also prospered as a stable and highmorale team; the productive capacities of the team being well reflected in the high quality of this second Evaluation Report. I again congratulate the principal authors of this report - Margarita Frederico, Annette Jackson, Carly Black, and the wonderful team they have gathered in the School of Social Work and Social Policy, La Trobe University - on their achievement in this report. I thank all the principled and hard-working people who contributed to the consolidation of Take Two during 2005: the staff team; the protective case workers and managers and other services who identified children in need of the program and referred them to Take Two; Berry Street Victoria and its full staff group; the Take Two Partners who help Berry Street Victoria to govern this particular clinical program within the broader organisation; and the many workers, carers and family members who are working so collaboratively with Take Two clinical staff to the purposes of better health outcomes for vulnerable children.

Ric Pawsey

Director Take Two





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