

# COMMISSIONING ROADMAP

For NGO Services in the Community

2021 - 2023



**ACT**  
Government

**ACT Health**



**ACT**  
Government

Community Services



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# Commissioning Community Services

## Background

The ACT Government is committed to improving the wellbeing of Canberrans through providing person-centred, high performing and innovative services which are integrated and meet the needs of community members, providing early support. In 2020 we published the [ACT Wellbeing Framework](#), which will enable us to track progress across domains of social progress.

Achieving this ambition requires reform of our health and community support system, including across government, as well as services delivered by the NGO sector in the community.

The Community Services Directorate (CSD) and ACT Health Directorate (ACTHD) collectively commission over 250 services in the community from over 100 community and health sector partners.

We are moving towards a collaborative commissioning approach for the future provision of these services.

The cornerstone of our commissioning approach will be a new way of working with the community, including community and health sector partners, service users and other key stakeholders, to shape and deliver the services our community needs.

We will be outcomes-focused, client-centred and implement services in genuine collaboration with the community.

Shifting the service system and transitioning towards a commissioning approach is a significant change management process. It needs adequate time and resources within government and across the sector to allow the opportunity to grow and develop strong capabilities to manage and execute new ways of working that are tailored and fit for purpose.

Commissioning will therefore be a staged and iterative process. It is the Government's priority to maintain stability for service users and ensure they continue to have access to high quality support.

This document sets out our commissioning roadmap from 2021 to 2023 and provides further detail on our approach, including how and when we will engage with service users, community and health sector partners.

We have developed a detailed timeline for commissioning and engagement activities up until June 2023 and set out for each sub-sector which commissioning pathways will be followed initially. There are five commissioning pathways:

1. Single select procurement without collaborative design
2. Single select procurement with collaborative design
3. Contract variation to extend and improve the contract, and incorporate transitional provisions, pending future commissioning
4. Market assessment and collaborative design
5. Service decommissioning

A significant number of our services will follow commissioning pathway 3 in the first year as we develop our commissioning approach and capabilities.

We are seeking feedback from stakeholders on the services we have prioritised for commissioning this year, and the proposed commissioning pathways for those services, as well as on the roadmap more broadly.

# Our Commissioning Cycle



## Strategise

During strategic planning, we will:

- Consider the system reforms required to meet key reform agendas (e.g. the early support reforms)
- Identify services that meet/largely meet current community need
- Identify areas to collaboratively design
- Identify existing service gaps and emerging priorities
- Determine timeframes and methods to approach the market
- Test data and evidence against local knowledge and on the ground perspectives

## Design

During design we will implement collaborative design thinking to agree service outcomes and guide investment.

## Procure

During procurement of services, we will:

- Select and contract future services
- Ensure sustainable resourcing
- Actively work with sector partners to support mutual development and capability uplift

## Deliver outcomes

We will collaborate to successfully deliver the outcomes that matter most to service users, ensure continued service flexibility and support outcomes reporting.

## Continuous evaluation

We will embed the measures and processes into our partner relationships to continuously evaluate whether services are delivering value for the communities we serve.

# Strategise

The purpose of strategic planning is to plan service provision that will meet the needs of the ACT population and deliver reform agendas

## What to Expect

During strategic planning we will complete work to understand the scope and nature of the system and services currently provided, and to gain a better understanding of the underlying population need, including demographic profile, and other factors impacting communities (e.g. health and social impacts of COVID-19).

We will also define the system outcomes we are seeking to achieve, taking into consideration the ACT Wellbeing Framework and other key policy objectives; particularly Closing the Gap reforms that support self-determination and equitable outcomes for Aboriginal and Torres Strait Islander people.

We will then consider the degree to which existing services are meeting population needs and understand the sector partner landscape. We are undertaking this work now for our highest priority programs and will do this each year for a new set of programs.

As part of strategic planning, we will engage with service users and health and sector partners to test and refine our understanding.

We are particularly interested in points of integration and coordination between services (e.g. between housing & homelessness and health) and how this is experienced by service users.

This engagement will inform our final priorities for commissioning, including the appropriate procurement pathway. It will also inform the development of any budget business cases for additional funding.

## Key Activities

- Refresh Needs Assessment (annually or biannually as needed and agreed by partners)
- Develop strategic plan, including priorities for commissioning
- Engage sector in strategic planning, and understand the market
- Develop budget business cases
- Determine commissioning priorities

## Outputs

- Needs Assessment
- Review of current service provision
- Commissioning priorities
- Budget Business Cases

## Engaging with Service Users and the Community

### *Informing the needs assessment, review of current provision and strategic plan*

We will utilise a range of methods, to gather feedback from service users, health and community sector partners and other key stakeholders.

This may include a workshop, round table or forum, one-on-one meetings and/or online survey. We will present the initial findings from our needs assessment and review of service provision and seek your advice on whether there is additional evidence that supports, or would alter the findings; the level of interest from health and community sector partners to deliver services in this area; and any other issues that should inform prioritisation, or the collaborative design process.

## Design

The purpose of design is to define achievable system outcomes within a 3–5-year timeframe, along with any other key service requirements

### What to Expect

We are committed to an outcomes-based collaborative design approach, which:

- Sets out clearly the actions Government and sector partners need to take forward
- Aligns with Government’s strategic directions for an accessible, accountable, sustainable service system
- Is consistent with the capacity and capability of the market
- Encourages innovation

We will establish collaborative design groups for services within each sub-sector, to take part in a collaborative design process, to:

- Validate a rapid review of the evidence base for ‘what works’
- Define the outcomes we should be seeking to achieve
- Agree any critical service inputs that need to be incorporated into service specifications

Commissioning intentions for the sector will be issued, incorporating the outcomes of all collaborative design groups.

### Key Activities

- Map stakeholders and invite participants to collaborative design
- Run Collaborative Design Groups
- Issue Commissioning Intentions

### Outputs

- Defined outcomes and metrics
- Service Specification
- Commissioning Intentions

## Engaging with Service Users and the Community

### *Collaborative Design Groups*

Collaborative design groups will include:

- Current and prospective service users, their carers and families
- Current health and community sector partners
- Prospective health and community sector partners
- Expert input as required
- Other key stakeholders

Usually between 2 and 4 virtual or face-to-face sessions will be held to collaboratively design the service outcomes and specifications, however, this will vary based on service and stakeholder complexity. Attendance will be optional, with members also given the opportunity to provide input online.

## Procure

The purpose of procuring the services is to purchase the right services from the right provider at the right price, through a fair and transparent process

### What to Expect

The service specification developed through the collaborative design process will form the basis on which services are procured.

We will apply the ACT Government Procurement Framework, including its value for money principles, to determine the right approach(es) to market for each service.

Typically, the procurement thresholds set out within the Government Procurement Regulation 2007 will apply, however, exemptions will be sought when there is a good case to do so (e.g. single select where there is only one suitable provider).

Irrespective of the procurement route, prospective health and community sector partners of commissioned services will be asked to respond on how they will meet the service specification.

Services not going through the commissioning process in the immediate term have contracts varied to extend for up to two years whilst commissioning occurs.

Post procurement contracts will be negotiated and finalised, usually a minimum of three months prior to execution.

### Key Activities

- Publish the approach to market for each sub-sector
- Negotiate single select procurements and contract variations
- Undertake market assessment and the most appropriate tender process
- Undertake contract transition activities

### Outputs

- Approach to market
- Contract variations
- Procurement documentation (incorporating service specification)

## Engaging with Service Users and the Community

### *Prospective health and community sector partners*

Current and prospective health and community sector partners will be notified of the confirmed approaches to market and invited to participate in relevant procurement processes.

An Industry Briefing will typically be provided as part of competitive tenders.

## Deliver Outcomes

The purpose of delivering outcomes is to maintain collaboration between sector partners and commissioner to deliver the desired outcomes

### What to Expect

We are going to transition our contract management approach to one that is focused on strong relationships and partnership.

This will include tailoring our approach to the specific needs and context of individual health and community sector partners. Prior to contract commencement date, we will agree how we will work together throughout the contract duration, to:

- Ensure the service outcomes are met, and collect the data necessary to demonstrate this
- Bring the service user voice into all discussions regarding contract performance
- Maintain dialogue that is proportionate to the contract value, and meets the needs of both parties
- Promote open, transparent conversation regarding risks, challenges and opportunities

We will also work to identify and promote connections between health and community sector partners, where there is significant overlap of service users, and create opportunities for dialogue between partners in pursuit of our shared outcomes.

### Key Activities

- Agree partnership approach with community and health sector partners
- Partner with community and health sector partners to deliver outcomes
- Monitor partnership to ensure it is meeting the needs of service users, commissioner and sector partners

### Outputs

- Agreed partnership approach (incorporated into contract schedules)
- Services delivered that meet community needs

## Engaging with Service Users and the Community

### *Health and Community Sector Partners*

We will agree a tailored approach with each sector partner that meets our partnership objectives - this will include regular interaction with the commissioner and with other sector partners where there is significant overlap of service users. There will be an identified named contact person from the Commissioner and Sector Partner for each contract.

### *Service Users*

We will work with health and community sector partners to agree how service users can be actively involved in partnership discussions, including contract performance.

# Governance

## Principle of Transparency

Our priority is to establish governance forums and processes, that support transparency of decision making.

They must also ensure effective delivery of commissioning activities and robust procurement practices.

## Government Procurement Board

We will seek advice from the Government Procurement Board at key points, as we determine the commissioning pathways and market approach for each sub-sector.

The Government Procurement Board provides advice and guidance across ACT Government to ensure that best practice procurement principles are being applied.

## Project Alignment Hubs

The Project Alignment Hubs within CSD and ACTHD are the internal accountable commissioning body for each directorate. Comprising senior level representation from across the Directorates, these hubs will:

- Facilitate decision making & coordination
- Identify policy & reform objectives to inform strategic planning & collaborative design
- Oversee prioritisation

## NGO Leadership Group and Joint Community Government Reference Group

We will liaise closely with the NGO Leadership Group and Joint Community Government Reference Group for advice, and the community perspective.

## Sub-Sectors

The principle of transparency will apply to the governance approaches that each sub-sector puts in place to support commissioning within their sub-sector.

This will include clear and regular communication to the sector regarding progress against commissioning priorities, intentions and activities.

We are working towards greater service user involvement in our governance.



# Commissioning Pathways

There are five commissioning pathways that services may follow in the 2021-2023 period, as set out in the table below. Our current view on which services will follow which initial pathway is set out on pages 12 – 15, although this may change following feedback.

Commissioning Pathway	Rationale / Criteria	Impact
 <p>Single-select – no/minor change</p>	<ul style="list-style-type: none"> <li>High performing and high need service</li> <li>Low competitive density</li> <li>Longer term need established</li> <li>Service sustainable and cost-effective</li> </ul>	<ul style="list-style-type: none"> <li>Low/moderate sector and service user engagement</li> <li>Early certainty of funding for health and community sector partners (by December 2021 for June 2022 contract end dates)</li> <li>Longer term contract established with limited change from current contract</li> </ul>
 <p>Single-select – collaborative design</p>	<ul style="list-style-type: none"> <li>High need service</li> <li>Low competitive density</li> <li>Longer term need established</li> <li>Some issues with sustainability and/or alignment of current service delivery with community need, and/or</li> <li>Strategic priority</li> </ul>	<ul style="list-style-type: none"> <li>Early market testing to validate single select approach</li> <li>High sector and service user engagement in collaborative design of outcomes and service requirements</li> <li>Contract negotiation prior to current contract end date</li> <li>Longer term contract established reflecting collaborative design processes</li> </ul>
 <p>Contract variation – no/minor change</p>	<ul style="list-style-type: none"> <li>Moderate to high competitive density</li> <li>Longer term need not established and/or</li> <li>Further strategic planning required prior to commissioning</li> </ul>	<ul style="list-style-type: none"> <li>Broad sector and service user engagement</li> <li>Early certainty of funding for health and community sector partners (by December 2021 for June 22 contract end dates)</li> <li>Short-term contract extension (max two years) in anticipation of future commissioning</li> <li>Establishes a timeframe and environment for collaborative design and market assessment to continue beyond June 2022</li> </ul>
 <p>Collaborative Design and Market Assessment</p>	<ul style="list-style-type: none"> <li>Moderate to high competitive density</li> <li>Longer term need established, and/or</li> <li>Strategic priority</li> </ul>	<ul style="list-style-type: none"> <li>High sector and service user engagement in collaborative design</li> <li>Procurement undertaken (commenced by late 2021 to early 2022 for June 2022 contract end dates)</li> <li>Contract transition where contract is transferring to a new partner (April – June 2022 for June 2022 contract end dates)</li> <li>Longer term contract established reflecting collaborative design processes</li> </ul>
 <p>Decommission</p>	<ul style="list-style-type: none"> <li>Low need service and/or</li> <li>Not aligned to ACTHD or CSD priorities or responsibilities</li> </ul>	<ul style="list-style-type: none"> <li>Sector and service user consultation regarding the proposed decommissioning</li> <li>Early certainty of funding (decision made by December 2021 for June 20 22 contract end dates)</li> <li>Contract not renewed</li> </ul>

Note: the broad timeframes above are subject to change.

# Commissioning Priorities

## Overarching Priorities

- *Driving co-production and accountability*
- *Furthering self-determination of Aboriginal and Torres Strait Islander people and communities*
- *Delivering person-centred, outcomes-based procurement and contracting*
- *Developing better policy, systems and governance*
- *Building Industry capacity, sustainability and innovation*
- *Valuing data and research that drives investment and outcomes*

## Health Sub-Sector Priorities

Sub- Sector	Current no. of Services	Initial Commissioning Pathways	Commissioning Priorities
Aged & Palliative (A&P)	3		<ul style="list-style-type: none"> <li>• We plan to collaboratively design transition care (September – December 2021), and test the market with a view to competitive tender commencing in early 2022.</li> <li>• We also plan to collaboratively design and test the market for non-clinical in-home palliative support (September – December 2021), with a focus on identifying gaps in service provision and innovation opportunities.</li> <li>• We will single select specialist services where there is no alternative provider, using collaborative design to identify opportunities for improvement.</li> </ul>
Chronic Conditions & Primary Care (C&P)	13		<ul style="list-style-type: none"> <li>• We will use a collaborative design approach across the sub- sector (September – December 2021) to identify incremental opportunities with our existing health and community sector partners which strengthen collaboration and joint work across the sector and promote prevention, self-management, and integrated care, with a focus on priority populations.</li> <li>• During 2021-2022 we will progress detailed strategic planning work with the chronic conditions working group, to inform commissioning of a new system and services from July 2023 onwards.</li> <li>• We will single select the small number of specialist services where there is no alternative provider – we anticipate minimal change to these services from July 2022.</li> </ul>
Aboriginal & Torres Strait Islander Health Services (ATSIHS)	8		<ul style="list-style-type: none"> <li>• We will recommission existing services via single select for up to five years, recognising that these organisations are uniquely qualified to meet the needs of their communities.</li> <li>• We will engage with health and community sector partners and service users (June – December 2021) to identify incremental opportunities to address gaps in service delivery, build links to other services, and improve contracting and reporting. This will include a community workshop between August and October.</li> </ul>
Family & Inclusion (F&I)	7		<ul style="list-style-type: none"> <li>• We will collaboratively design women &amp; children’s services to incorporate the findings of the Joint Maternity Project (October 2021), with a view to either single select or open tender, dependent on the outcome of collaborative design.</li> <li>• We will single select the small number of specialist services where there is no alternative provider, with minimal change to these services from July 2022.</li> <li>• Other services will be varied to extend for one year pending decisions regarding future commissioning.</li> </ul>

## Health Sub-Sector Priorities (cont.)

Sub-Sector	Current no. of Services	Initial Commissioning Pathways	Commissioning Priorities
Alcohol and Other Drug (AOD)	11	3	<ul style="list-style-type: none"> <li>We will be undertaking collaborative strategic planning and design with our partners from July 2021, finalising the ACT Drug Strategy Action Plan and developing a new Drug Strategy Action Plan.</li> <li>This work, as well as the Inquiry into the <i>Drugs of Dependence (Personal Use) Amendment Bill 2021</i>, will examine matters such as best practice approaches and responses to reduce harm and societal impacts from drugs, the ACT Government's current funding commitments, the issues specific to drug rehabilitation and the service sector, will inform our commissioning priorities for 2022-2023 and beyond.</li> </ul>
Mental Health (MH)	22	3	<ul style="list-style-type: none"> <li>Our mental health sector partners are uniquely qualified to provide the services of our NGO sector and have built invaluable networks, relationships and community trust. We will be undertaking collaborative design as part of this process specifically in relation to outcomes and deliverables.</li> <li>The commissioning process will include consultation and engagement with the sector both one on one with funded organisations as well as whole of sector, sub-sectors and broader community including consumer and carer representatives throughout the process.</li> <li>We will look to incorporate key strategic priorities into all contracts from July 2022, including: a shift to focusing on outcomes, including improved outcomes for vulnerable groups; a focus on person-centred care; improved integration of services; collaboration, co-design and continuous improvement; services that are responsive and integrated; early intervention in life, illness and episode; whole of person care; reduced self-harm and increased suicide prevention.</li> </ul>
Community Support (CASP, FFS)	21	3 4	<ul style="list-style-type: none"> <li>We will be undertaking a full review of services in this sub-sector during 2021-2022, including collaborative design, commencing with a roundtable of community support sector partners in the second half of 2021.</li> <li>During the review we will work with existing sector partners to advance key priorities, including increasing flexibility for sector partners to deliver outcomes – to be incorporated into one-year contract extensions from July 2022.</li> <li>Undertake collaborative design in 2022-2023 with a view to identify the most appropriate procurement for June 2023.</li> </ul>
Sexually Transmitted Infections and Blood Borne Viruses (STIBBV)	6	3 4	<ul style="list-style-type: none"> <li>We are currently undertaking a full review of services in this sub-sector and intend to use this review to inform a collaborative design process (September – December 2021) to commission new services from July 2023.</li> <li>The review includes consideration of gaps in service provision to meet community needs, including commissioning of new services where gaps are identified.</li> <li>Undertake collaborative design in 2021 to 2023 which will identify the most appropriate options for service delivery from July 2023.</li> </ul>
Peak Functions, Education and Training (PF)	12	1 2	<ul style="list-style-type: none"> <li>We will recommission existing services via single select for up to five years, to support sector stability.</li> <li>During 2021-2022 we will engage with peak functions to better understand demand for services now and in the future; capacity and resourcing; and ideas and innovations for services to meet service user needs.</li> </ul>

## Community Sub-Sector Priorities

Sub-Sector	Current no. of Services <sup>1</sup>	Initial Commissioning Pathways	Commissioning Priorities
Non-statutory children, youth and family services sector	38 (CYFSP) 13 (CSP) 45 (CDP) 1 (ACTCW)	<p>For 2021-22</p> <p>Beyond 2022</p>	<ul style="list-style-type: none"> <li>This sector comprises funding currently divided across several streams: Children, Youth, Family Support Program (CYFSP); Children's Services Program (CSP) and Community Development Program (CDP). There is currently a mix of grant agreements and service funding contracts across these programs.</li> <li>In preparation for Commissioning processes, contract variations or extensions have been negotiated with existing sector partners through to June 2022.</li> <li>It is proposed that commissioning of non-statutory services is informed by the outcome of the commissioning of the statutory Child, Youth and Family services which is due to be completed by 30 June 2022.</li> <li>A process of incremental change to these programs is already underway and may continue in the lead up to the eventual commissioning of these services.</li> <li>The non-statutory services are likely to require further extension to enable staggering of commissioning as agreed with the sector.</li> </ul> <p><i>Note: For completeness, Funding for ACT Children's Week (ACTCW) is included. Commissioning of these activities will be discussed with sector partners closer to the end of the current agreement (2024).</i></p>
Systemic Advocacy and Peak disability provider organisations	4	<p>Beyond 2022</p>	<ul style="list-style-type: none"> <li>There are a limited number of disabled people's and carers organisations in the ACT and we fund these for systemic advocacy. We also fund the peak disability provider body.</li> <li>The commissioning approach was used recently to redesign systemic advocacy contracts towards a focus on outcomes, as well as to establish appropriate reporting mechanisms and processes that better reflect the impact of this work.</li> <li>As there is no market for these Representative and Peak organisations, current partners have been re-engaged under longer term grant agreements with minor variations.</li> </ul>
Seniors Initiatives	2	<p>For 2021-23</p> <p>Beyond 2023</p>	<ul style="list-style-type: none"> <li>An extension until 30 June 2023 has been made for the current community partner, acknowledging that due to their skills and experience, they are best placed to continue these initiatives at this time.</li> <li>We intend to commence further conversations with NGO sector and community members in late 2021-early 2022 on the transition to commissioning. We anticipate these conversations will include consideration of how this transition will impact future funding agreements for Seniors initiatives from 1 July 2023.</li> </ul>
Aboriginal and Torres Strait Islander Job Readiness Support Program	1	<p>Beyond 2022</p>	<ul style="list-style-type: none"> <li>The Job Readiness Support Program will be evaluated during 2021. Following the evaluation, further conversations with community members and NGOs will commence in late 2021-early 2022 on the transition to commissioning.</li> <li>We anticipate these conversations will include consideration of how this transition will impact future funding agreements for the Program from 1 July 2022.</li> </ul>

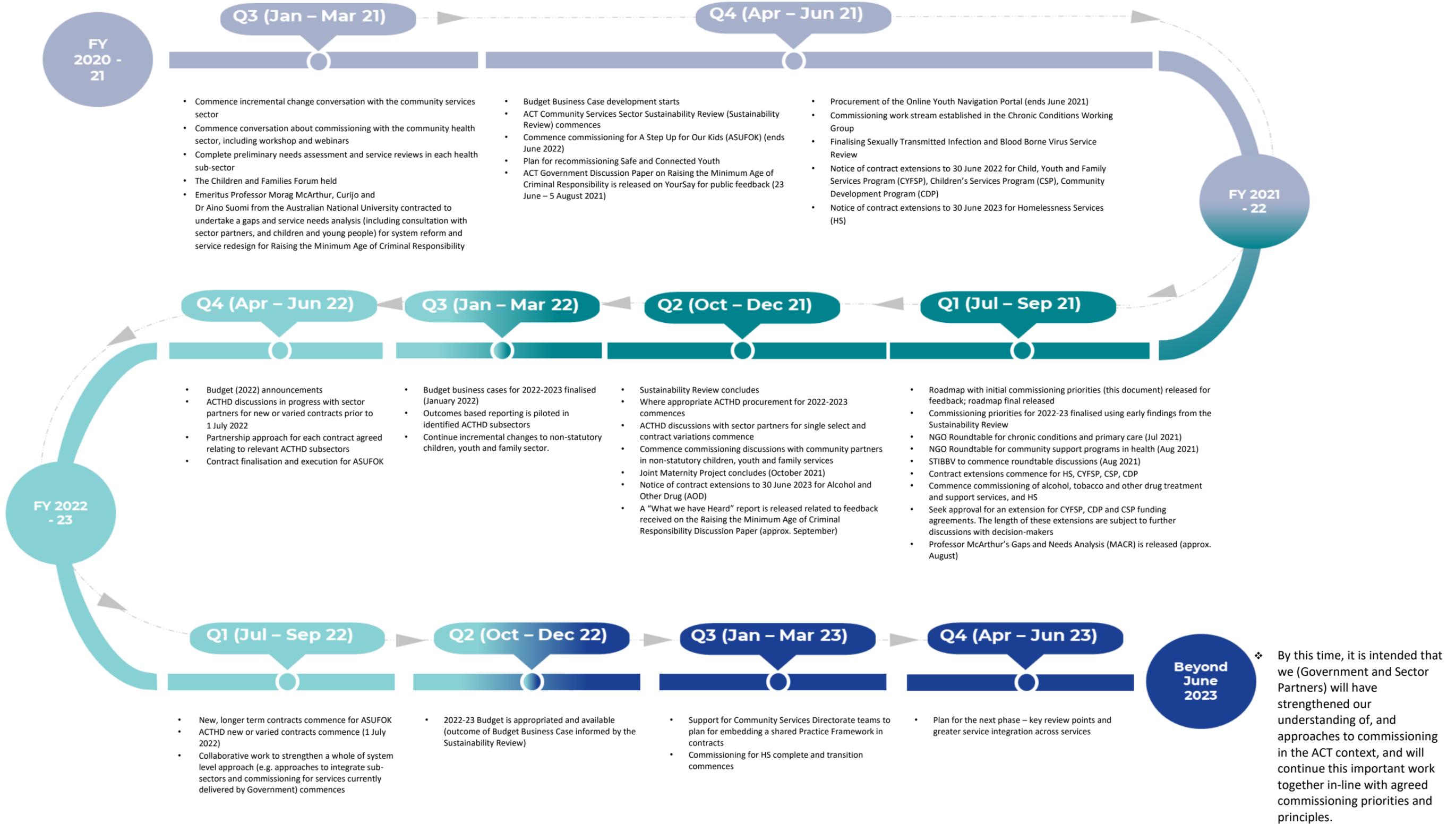
<sup>1</sup> Excluding Equal Remuneration Orders

## Community Sub-Sector Priorities (cont.)

Sub- Sector	Current no. of Services <sup>2</sup>	Initial Commissioning Pathways	Commissioning Priorities
Homelessness Services	53	 <p>1 3 For 2021-23</p> <p>4 2 Beyond 2023</p>	<ul style="list-style-type: none"> <li>Homelessness services include but are not limited to, general support (housing and food), Aboriginal and Torres Strait Islander support, women, men, youth, and families support.</li> <li>All Homelessness sector partners should now have received notification of contract extensions until 30 June 2023.</li> <li>We will undertake a commissioning process for support services being managed by the Homelessness Services team during 2021-2023. Using a collaborative design approach, we will work with our sector partners and other stakeholders to redesign aspects of the service system to enable it to better meet community need.</li> <li>It is expected that these conversations will occur over an 18-month period prior to contracts being in place from July 2023.</li> </ul>
Statutory Children, Youth and Families Services	9	 <p>1 2 3 4 5</p>	<ul style="list-style-type: none"> <li>Work is underway to evaluate the existing evidence base and performance data from the previous five years of the implementation of <i>A Step Up for Our Kids Out of Home Care Strategy</i> (ASUFOK), including what is required to deliver on the intent of agreed recommendations from the <i>Our Booris, Our Way</i> report. This analysis will inform targeted discussions with our sector partners for funding agreements beyond 30 June 2022.</li> <li>Commissioning work with our sector partners for the next iteration of <i>A Step Up for Our Kids Out of Home Care Strategy 2022–2032</i> has already commenced. During April–June 2021, we have had discussions with our sector partners and service users seeking their views and perspectives on the next iteration, with a focus on building on the reform journey of the past five years. These discussions are in addition to conversations with sector partners and service users prior to 2021. We are now preparing a Listening Report and intend to publish the report on the CSD website.</li> <li>From July 2021, we will continue conversations with our sector partners and service users to move towards commissioning services for contracts beyond 1 July 2022. This will commence with refreshing of the guiding principles for the next iteration of <i>A Step Up for Our Kids Out of Home Care Strategy 2022–2032</i>.</li> <li>We will also be writing to sector partners to seek their involvement in discussions on commissioning and procurement approaches including potential changes to contracts which would further progress the transition to a commissioning environment. These discussions are expected to occur in August–September 2021.</li> <li>Recognising the timeframes for the next iteration of ASUFOK, we acknowledge it may not be possible to apply a full commissioning processes to every aspect of the procurement of services post June 2022.</li> <li>Work is underway to plan the approaches to procurement for this strategy. All options may also be considered and will be discussed as part of development with stakeholders.</li> </ul>

<sup>2</sup> Excluding Equal Remuneration Orders

# Commissioning Roadmap



Please note the information on this page is current at this time. It will be updated as required.

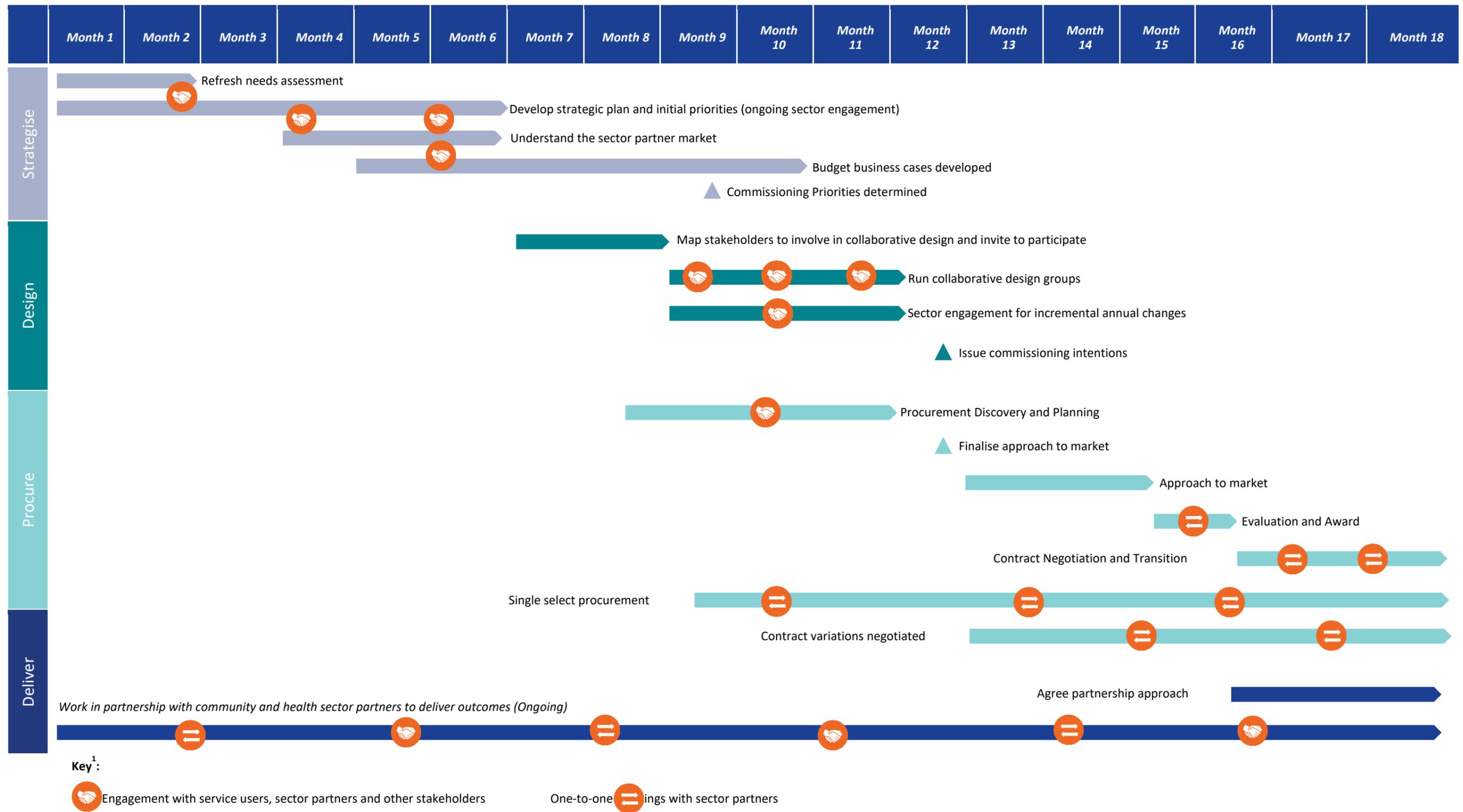
# Appendix 1: Sector Partners in multiple sub-sectors

We recognise that a number of our health and community sector partners will be providing services across more than one sub-sector. We will engage smartly with these partners, as well as other key stakeholders impacted across sub-sectors, to minimise duplication of effort.

Stakeholder	Sub-Sectors
ACT Disability, Aged & Carer Advocacy Service	CASP; MH
Anglicare	CASP; F&I; CSP; CYFSP
ACT Council of Social Service	CDP; CYFSP; HS, CASP
Australian Red Cross	CASP; CYF; HS
Barnardos	CYF; CYFSP; HS
Canberra Institute of Technology	CASP; MH; Aboriginal and Torres Strait Islander Job Readiness Support Program
Canberra Rape Crisis Centre	CDP; HS
Capital Health Network (CHN)	C&P; STBBV; MH, AOD
Capital Region Community Services	CASP; CDP; CSP; CYFSP
CARE Inc.	CDP; HS
Carers ACT	CASP; PF; CYF; MH; Disability Systemic Advocacy
CatholicCare	AOD; CASP; MH; HS; CYFSP
Communities@Work	AOD; CASP; HS; CSP; CDP
Community Options	A&P; CASP; C&P; F&I
Companion House	CYFSP; F&I
Conflict Resolution Service	CDP; HS
Council of the Ageing (ACT)	A&P; HS; Seniors Initiatives
Domestic Violence Crisis Service	CDP; HS
Everyman Australia	CDP; HS
Gugan Gulwan	ATSIHS; CYFSP; HS, AOD
Healthcare Consumers Association of the ACT	C&P; PF
Karinya House and Home for Mothers and Babies	CYF; HS
MARSS Australia	CDP; CYFSP; HS
Marymead	CASP; F&I; CYF
Northside Community Service	AOD; CASP; CDP; CSP; CYFSP; HS
Society of St Vincent de Paul	CDP; CYFSP; HS, MH
The Salvation Army	A&P; AOD; CDP; HS
Toora Women	AOD; HS
Uniting Care Kippax	CDP; CSP; CYFSP
Winnunga Nimmityjah	ATSIHS; HS, AOD
Woden Community Service	CASP; MH; CDP; CSP; CYFSP; HS
YWCA Canberra	CDP; CSP; CYFSP; HS

## Appendix 2: Typical Commissioning Timeframes

The diagram below sets out typical commissioning timeframes – this is not our starting point, but rather, what we are working towards. (Our roadmap for the next two years is set out on page 15). These typical timeframes are indicative, as timelines for commissioning will always vary depending on the complexity and scale of services being commissioned, the level of system reform required, and the capacity, maturity and readiness of the sector from a commissioning, government and sector partner perspective.



<sup>1</sup>Note these icons indicate the type of engagement that may occur only, and are not intended to represent the month in which engagement will take place – this will vary by sub-sector

