

# Targeted Earlier Intervention Program Reform Consultation Summary Report

What you told us



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## Minister's foreword

I am pleased to present the consultation summary report on Targeted Earlier Intervention Program Reform.

The input provided here by funded service partners, clients, government, FACS staff, and other related organisations will make a significant contribution towards ensuring an early intervention system that provides the very best outcomes for clients and communities. Other information sources that are contributing to the shape of these reforms will come from existing data as well as domestic and international research.

This report outlines suggestions on how we can improve our current system; a system supporting vulnerable children, young people, families and communities; a system designed to help people from reaching crisis point resulting in trauma and abuse.

While your feedback tells us that targeted earlier intervention programs are making a difference in clients' lives, calls for greater accessibility and increased flexibility in how these programs are implemented have also been made. Current data also point to inequity within the system and we know that to make a difference we must intervene earlier before clients reach crisis point. We want good quality practitioners delivering programs driven by outcomes and underpinned by evidence.

Much of the feedback from Aboriginal stakeholders was largely consistent with other sources but again, the importance of self-determination in any program reform was made very clear. Aboriginal organisations and communities know the issues specific to their people, and any implemented change will be made in consultation with them.

I look forward to working together to shape the reform directions and implement the changes to our system.

A handwritten signature in black ink that reads "Brad Hazzard". The signature is fluid and cursive, written in a professional style.

**Brad Hazzard**

Minister for Family and Community Services  
Minister for Social Housing

## What you told us: Your feedback at a glance

### Your key themes

**1 Greater flexibility would enable TEI services to achieve better outcomes for clients**

**2 New approaches are needed to improve access to and awareness of services for priority 'at risk' groups**

### What you told us

- Removing the current geographical boundaries would improve coordination and continuity of services
- Increasing the flexibility of intervention timeframes would allow services to provide more tailored responses
- Extending aged-based eligibility criteria for some programs would facilitate greater access to and continuity of services
- Program guidelines should be re-developed and improved to focus on the needs of individuals and aim to address client concerns

- Physical access to and awareness of services are key barriers to reaching 'at risk' people
- TEI services should better reflect the needs and priorities of CALD groups
- There are some specific service gaps that need to be addressed for people experiencing mental health, drug and alcohol misuse, child sexual abuse and domestic violence issues
- TEI services should be better coordinated with other services like Housing, Health and other mainstream services, to provide seamless and integrated services to clients

## Your key themes

**3** Aboriginal needs and priorities must inform the design and delivery of TEI services

**4** TEI services are more effective when delivered through local partnerships, networks and integrated approaches

**5** Although outcomes are being achieved through current TEI programs more people could be assisted earlier

## What you told us

- Funding needs to better target the needs of Aboriginal people, families and communities and span for longer timeframes to allow establishment of reliable connections
- Aboriginal stakeholders have a crucial role and should be engaged more in TEI program design, planning and funding
- TEI services need to be more culturally appropriate and reflect Aboriginal models of practice
- Local Aboriginal capability is critical to service delivery
- A wider view of Aboriginal service networks would result in better outcomes

- Greater knowledge and awareness across programs and locations would improve referral pathways
- Place-based approaches such as community hubs improves access and coordination
- Decision-making and planning needs to occur at a local level
- Changes to governance and accountability arrangements would support a more integrated system and eliminate possible detrimental effects of competitive tendering and funding arrangements

- Targeted Earlier Intervention (TEI) programs are achieving a significant difference in things that matter most for clients
- There is a need to target and assist clients earlier in the vulnerability continuum to prevent TEI services shifting towards risk of significant harm (ROSH) type responsive service

## Your key themes

**6** Improved information systems and sharing would result in more outcome focused and evidence-based service delivery

**7** The capability of practitioners and services drives effective service delivery

**8** Changes to funding arrangements would build confidence across the sector

## What you told us

- A consistent outcome based approach would support a more client centric system
- Identifying, capturing and sharing evidence-based practice would improve the capability of the sector
- An investment in standardised information systems and processes is required to improve the consistency of TEI services

- Staff capability underpins the quality of services delivery and is a strength within the TEI sector
- There are specific capabilities that are fundamental to good practitioners and providers
- There is a need and appetite for more professional development across the sector

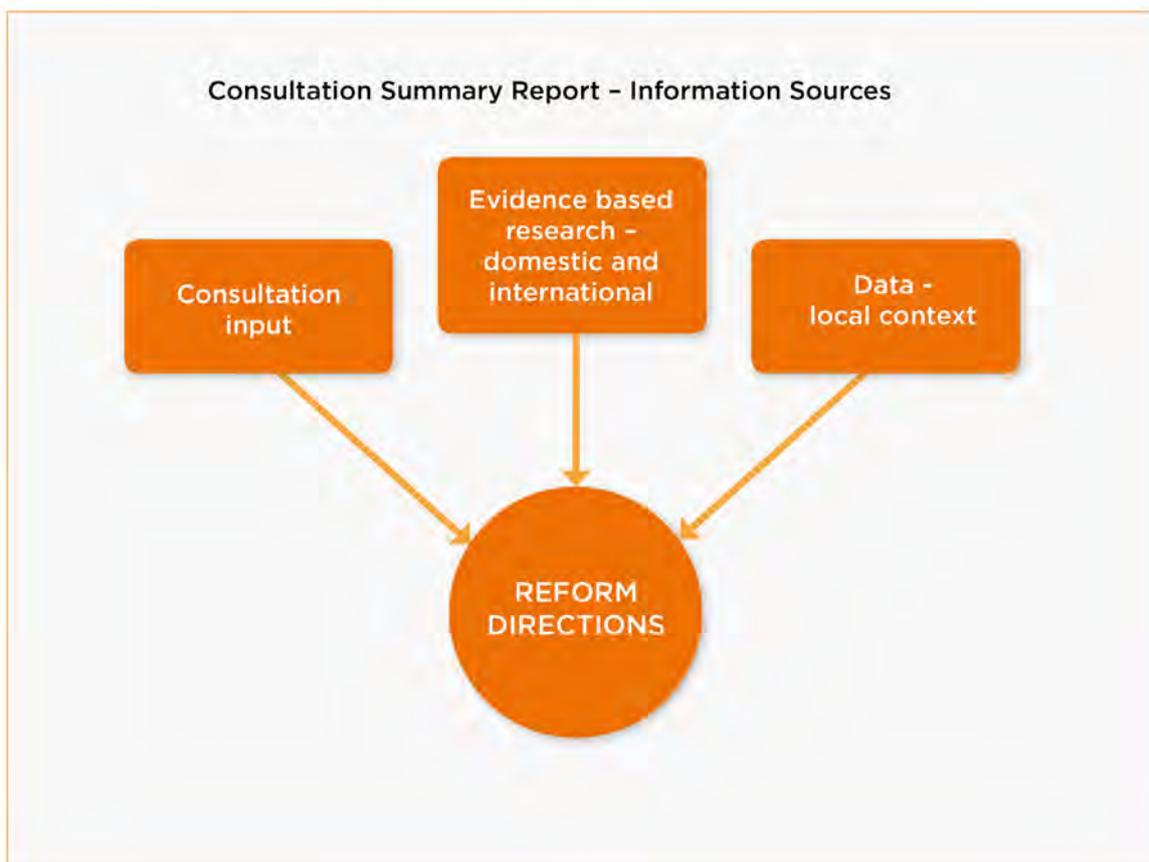
- Current funding cycles affects service stability and client confidence
- Funding cycles impact the ability to attract and retain quality staff, and can limit innovation

## Context

Here at the Department of Family and Community Services (FACS) we invest over \$150m each year in Targeted Earlier Intervention (TEI) Programs based on evidence that prevention and early intervention reduces the risk and instances of long-term adverse outcomes that come at a much higher cost both personally and financially. However, despite these efforts and the general positive feedback we received from the consultation process, the demand for statutory child protection responses is increasing. In addition, the youth population is growing and expected to increase demand on these services.

In order to realise the best for our clients and the full potential of this investment, we have undertaken a lengthy and robust research and consultation process. The research phase, including an independent review by the Australian Research Alliance for Children and Youth (ARACY) of evidence based practice and service system design, will inform and contribute significantly to the evidence base for change. This evidence supports the directions that were emphasised in FACS consultation process, in particular the barriers in the current system. These barriers include the lack of planning of services, the siloed nature of organisations and programs and inflexibility of program criteria and funding rules.

Other supporting research includes the “Better Lives for Vulnerable Teens FACS Review”, a “Local Case Studies” report informed by sector views on the prevention and early intervention system, analysis of evaluation reports and reviews of service systems both locally and internationally.



## About this report

Based on your responses from the consultation phase undertaken between August and December 2015 this report brings together the perspectives you provided through written submissions and face-to-face consultations.

It presents what you told us is currently working well and where we can improve in the design and delivery of TEI services for vulnerable children, families and communities and will help shape the direction of the TEI program reform, along with the research.

## What we did

Our first step was to undertake a consultation process to seek your feedback, commencing with the release of the TEI sector consultation paper. We called for responses through an online survey and written submissions, and an independent consultation with a small sample of clients across current programs was also conducted. Your responses and submissions were independently analysed and inform this paper.

## Who we heard from

We sought feedback from a range of different stakeholders, including clients, Aboriginal stakeholders, service providers, government and other related service delivery organisations and FACS staff across different functional areas and districts.

We held 26 consultation sessions across the districts and these were attended by over 1,100 participants. We also received over 500 written submissions from individuals and organisations.

Consultation forums were also held with Aboriginal Stakeholders in 11 locations: South West Sydney District, Dubbo (Western NSW District), Blue Mountains (Nepean Blue Mountains District), Queanbeyan (Southern District), Ballina (Northern NSW District), Sydney District, Kempsey (Mid North Coast District), Gunnedah (Hunter New England District), Illawarra (Illawarra Shoalhaven District) and Hebersham (Western Sydney District).

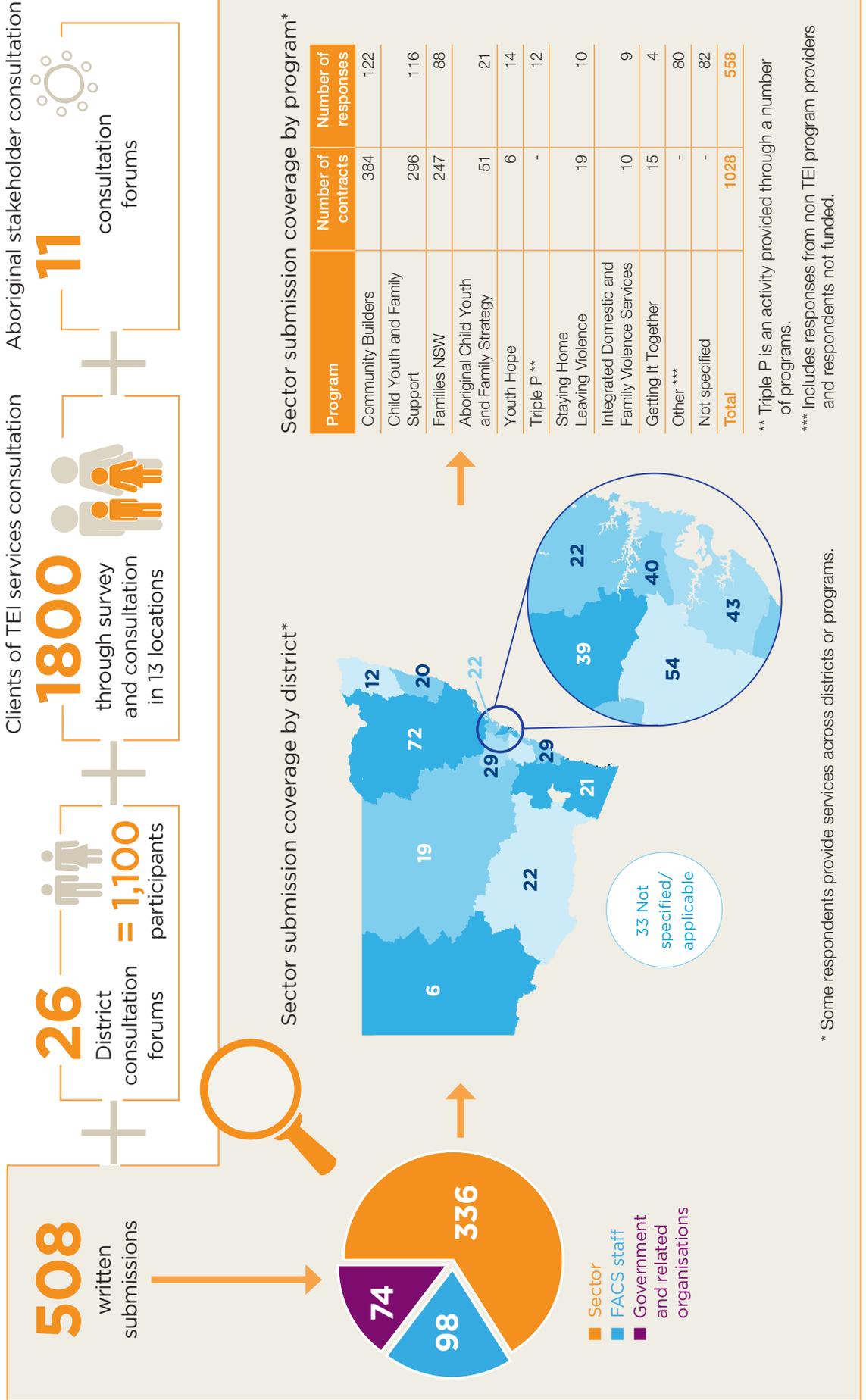
We hosted an expert roundtable in January to seek the views and insights of a broad range of academic and industry experts.

We received feedback from over 1,800 clients of TEI services through an online survey, 12 focus groups and 18 one-on-one interviews across metro, rural and regional locations.

The diagram on the next page summarises the consultations conducted and the submissions received, including a breakdown of submissions by district and program

All of this input will be tested against the research, available data and reviewed by an expert panel/advisory committee to help us decide on what the TEI service system could look like and what the priorities for TEI reform and investments should be.

# Targeted Earlier Intervention (TEI) Program Reform | Consultation dashboard



# 1

## Flexibility

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Greater flexibility would enable TEI services to achieve better outcomes for clients

One of the aims of TEI reform is to increase flexibility so that clients are at the centre of the system. We heard that you strongly support the need for a service system that is more flexible and focuses on client needs rather than program guidelines. This would allow responses to be tailored to meet the needs of children and their families, and ultimately lead to better client outcomes.

We also asked you to identify any changes that would improve the flexibility of our frameworks and guidelines. Your suggestions fell within four main areas:

- removing current geographic boundaries to improve coordination and continuity of services
- increasing flexibility of intervention timeframes to provide more tailored responses to the needs and circumstances of individual families and communities
- extending aged-based eligibility criteria to facilitate greater access to and continuity of TEI services, and
- re-developing program guidelines to address the needs of individuals rather than programs.

Your feedback related to each of these ideas is described below.

## Respondents recommended that the coordination and continuity of services would be improved by removing the current geographic boundaries

Geographic boundaries for services were seen to create challenges for service continuity and frustration for both clients and service providers. Respondents across all stakeholder groups reported that current geographic boundaries do not reflect the mobility of clients or recognise how clients access and participate in TEI services.

These boundaries were seen to be particularly restrictive for people who have familial, social or cultural connections outside of the area in which they live. For example, many people from cultural and linguistically diverse (CALD) backgrounds will travel long distances to connect with their community and participate in programs. Some people were also more likely to access services where family or friends are located, or in an area they previously lived.

The current boundaries were also seen to lead to real gaps in service coverage as people located outside of boundaries are unable to access relevant TEI services. The relaxation of geographic boundaries would allow clients without appropriate services in their area to have their needs met. This would also facilitate a less fragmented and more client centred system as individuals, families and communities could choose the right for them support to achieve their goals.

**25%**  
of respondents  
discussed  
geographic and  
intervention  
timeframes in  
their responses

Specific ideas for changing the current geographic boundaries included:

- realigning boundaries to the particular needs of the people in each location
- enabling service staff to move around to assist program delivery, without the current geographic boundaries
- implementing alternative state-wide models, and
- establishing co-location of services.

“Geographical and age eligibility criteria get in the way of good outcomes. The new model should be state wide so regardless of where people live they are not further disadvantaged by being excluded from the help and support they may identify as needing.”

– Service Provider, Families NSW

### Respondents indicated greater flexibility of intervention timeframes would allow services to better tailor responses to the needs and circumstances of families and communities

Respondents also raised the need for ‘more flexibility’ when discussing the duration of interventions and support, which were seen to be too short to deliver client-tailored services and achieve sustainable outcomes. Specifically, current support periods were seen to restrict the ability of services to:

- develop trusting relationships with clients and communities
- address complex issues and the long-term needs of clients who have no other available services in proximity, and
- address clients’ emerging needs as they gain more confidence in services.

“While the Family Support Program is designed within a rights based framework, and is child centred and parenting focused, the duration of the program is inadequate for working with families to achieve sustainable change, or develop resilience and routine for clients.”

– Service Provider, Families NSW

Clients also indicated that limited support durations can cause anxiety. Programs of fixed duration were more likely to result in clients feeling like they were ‘in a service’, and lead to uncertainty about what would happen at the end of their program. Clients requested better communication about the duration of services and improved management of expectations. This included explaining next steps clearly to relieve anxiety and managing the transition better so they do not need to retell their story, which is particularly important for those who have suffered domestic violence or trauma.

“I have been gifted enough to have temporary accommodation. Although once that runs out I fear where to go.”

– Client, Child, Youth and Family Support

Timeframes for interventions could also present difficulties for clients who have more complex needs, are harder to reach or take longer to develop trusting relationships. It was suggested that timeframes for client engagement should be revised and more flexible, with longer case management options for those with complex or entrenched issues. This view aligns with the reform objective of ensuring responses are designed to meet the needs of children and their families, rather than the needs of the program.

“There are aspects of the system which do not acknowledge impact of interpersonal trauma and legal interventions which impede on the work with children and families. For example, if a court process takes one year to finalise but we need to end our engagement by a certain timeframe, this is not client centred and is a societal context which needs to be acknowledged. Intergenerational trauma cannot be resolved in a 12 week period.”

– Service Provider, Sydney

However, this view was not universally held and a number of respondents warned that increasing the duration of interventions would take away from the ‘earlier’ and ‘targeted’ nature of TEI services. These respondents suggested a greater focus on addressing gaps in service coverage and improving the lack of confidence in the referral network to ensure that individuals, families and communities receive the support they need.

### Some respondents reported that aged based eligibility precluded access to, or continuity of, services

A need to extend aged-based eligibility criteria was described for some TEI programs to improve access to and continuity of services. Age restrictions were seen to result in real gaps in service coverage where children and young people were located outside of, or in-between, age cut-offs for relevant programs.

Age restrictions were also reported to increase frustration for families with multiple children where children in different age groups qualify for different services. This is particularly pertinent for Aboriginal and CALD youth, as eligible clients commonly seek to bring family members who fall outside of the age criteria along to services.

**15%**

of respondents  
discussed age  
criteria in their  
responses

Expanding the current age-based eligibility criteria to improve TEI responses was discussed in two ways:

- certain programs need to focus on younger people to capture and better target people at the age of greatest need, and
- certain programs need to extend to those aged 18 and over to offer greater continuity of care to those who have an ongoing need but become ineligible due to their age.

Feedback seeking greater flexibility in aged-based eligibility criteria was particularly strong for the Families NSW program. Respondents suggested service providers should be able to exercise professional judgment and discretion to determine whether to work with clients who fall outside the eligibility criteria. Respondents across all programs identified the high level of skill available within the services and asked FACS to allow them the flexibility to provide responsive and effective interventions.

As with feedback on extending program timeframes, a limited number of respondents advised against changing the current age eligibility criteria. These respondents felt that extending eligibility based on age would result in a deviation from the purpose of TEI and reduce the effectiveness of referrals to more appropriate services.

“The current guidelines for CYFS are particularly difficult for providing client centred responses. One example is dividing services between services to families with children younger than 12 and services to families with children older than 12. This creates service divisions that do not fit with the needs of families... A family that has established a trusting relationship with an organisation in the early years, should not have to be told ‘Sorry your child is 12 now – you need to go to another service’. It is an arbitrary boundary that is not necessary if services are funded to provide flexible and responsive services.”

– Service Provider, Hunter New England

### The guidelines were seen as a valuable program resource that could be more effective if they addressed the needs of individuals rather than programs

Overall, program guidelines were viewed as a useful resource to inform service delivery. However, many respondents saw them as overly prescriptive, lacking the flexibility required to meet the current and changing needs of clients, and restricting access, innovation and service delivery. It was suggested that a needs-based rather than program-based approach to guidelines would be more effective. The Community Builders program guidelines were highlighted as a good example of where guidelines create capacity to deliver tailored programs for children and young people.

**50%**  
of respondents  
identified  
opportunities for  
improving program  
guidelines

“The good thing about [Community Builders] is that it has more flexibility in terms of eligibility criteria, service activities, geographic boundaries, age groups, etc... This is an important aspect of work we do as our activities provide soft entries to many families and communities, in particular isolated groups and individuals.”

– Service Provider, South Western Sydney

Some respondents praised the client centred nature of service activity descriptions while others felt the descriptions lacked the flexibility needed to allow services to provide tailored responses. It was emphasised that the needs of individuals, families and communities are not static, and respondents encouraged FACS to allow providers to adapt service activities in line with emerging needs.

It was also noted that the guidelines are being interpreted differently across service providers, resulting in varying quality in service delivery and program effectiveness. In this case, prescription in guidelines is seen as useful where it provides clarity, evidence or instruction.

This feedback suggests there is a tension between reducing the prescriptiveness versus increasing the clarity of guidelines. However, generally speaking, there was support for the premise that the guidelines would be improved if they had a better sense of client needs and put fewer restrictions on the types of clients as well as the types of services that can be provided. This would ensure the programs are adaptable and responsive to changing client needs and can meet the demands of the local context.

“Having no flexibility in the programs means that communities are receiving services that are not meeting their needs or building on their strengths. ”

– Service Provider, Multiple programs

Other opportunities for improving client-focus in the guidelines included:

- identifying the ‘needs’ to be addressed through the program and describe what types of clients may best represent this need (rather than be prescriptive on the types of clients)
- providing greater clarity on how funding is applied and resourcing for different types of responses, and benchmark costs per unit pricing
- including examples of how services could be offered, but not necessarily prescribe them
- providing a greater evidence-base which underpins the service, and
- including benchmark information, including examples of best practices and what is expected rather than what should be done.

# 2

## Access

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New approaches are needed to improve access to, and awareness of, services for priority 'at risk' groups

A critical aim of the reform is to better direct our resources and efforts to those most in need. We asked you to describe how we can ensure our services are targeting the right clients and to identify what services we need more of. We heard that you strongly support programs that explicitly target those populations that are most at-risk and ensure they have access to appropriate services. You also identified specific groups of vulnerable people who continue to have difficulty accessing services, including:

- Aboriginal people (discussed in the previous section)
- people who are geographically or socially isolated
- people from culturally and linguistically diverse backgrounds, and
- people experiencing mental health, drug and alcohol misuse, child sexual abuse or domestic violence issues.

Your feedback related to improving access to appropriate TEI services for each of these target groups is described below.

## Respondents identified a range of challenges for both clients and service providers related to physical access and knowledge of services

Physical access to, and low awareness of services were identified as obstacles impacting the effectiveness of TEI services for many respondents. Feedback discussed accessibility barriers in four ways:

- distance to services
- available transport to appointments, activities and services
- access to childcare, and
- hours of operation.

Current funding arrangements, guidelines and service descriptions were not seen to support physical access to services for people who are geographically and socially isolated, leaving significant gaps in service coverage. The impact of distance affects both socio-economically disadvantaged and socially isolated clients and therefore was most strongly represented in responses from regional NSW districts. Funding allocation at a local government area (LGA) level was not seen to be appropriate, as it did not guarantee adequate levels of service coverage for pockets of disadvantage, particularly within LGA boundaries that are geographically and socially isolated.

Clients suggested that awareness and knowledge of TEI services relies too heavily on word-of-mouth and “random referrals”. Clients found it difficult to find out about service options, especially those who did not have access to the internet, libraries or town halls, and those from CALD groups. Many clients shared stories of having no awareness of the existence of services or only discovering the availability of additional services once they had joined an existing service.

It was suggested that FACS should fund targeted communication and promotional materials, outreach services and home visits to improve service delivery and better

target socially, linguistically or physically isolated clients. In addition to increased outreach services, alternative methods of providing responses to clients including e-counselling, webinars, skype and other forms of online or phone meetings were suggested.

“Most clients have limited transport options which means travelling long distances in cars to visit clients at home. This is costly and time consuming and there needs to be a reflection of this with the funding for regional areas.”

– Service Provider, Northern NSW

Client and sector respondents also highlighted the importance of services being located within walking distance of public transport as accessibility is reduced when services cannot be reached by public transport. This was proposed as a priority criterion for selecting the location of services within a community.

“The venue where we used to meet for playgroup was lovely but was hard to access without a car and only three families attended. The playgroup was moved to another location on a bus stop and it quickly became 15 families.”

– Service Provider, Northern NSW

Providing childcare was also identified as a key enabler for participation in services, with clients finding it difficult to attend services when it was not readily available.



“I wanted to do a course at the service but there was no childcare so I couldn’t do it. I joined the playgroup instead but the course would have helped me.”

– Client

Finally, some clients also identified that hours of operation present a barrier to service access. Clients felt that their access to services could be an issue at times, particularly in urgent circumstances.

## Respondents identified a need to improve approaches for CALD groups to access culturally appropriate services

A need to focus on responding to the growing CALD communities across NSW was identified. Specific gaps in culturally appropriate services were cited, including:

- availability of interpreting and translating services
- culturally appropriate services for migrant and refugee families
- cultural competency of service providers and their workers
- service coordination and integration of CALD funded service providers, and
- CALD community consultation and engagement.

Coverage and funding for interpreting and translating services was identified as a key obstacle to providing culturally appropriate services. Under resourcing of such services meant vulnerable non-English speaking families missed out on much-needed services.

“Where possible, bilingual workers or workers with appropriate cultural insights and skills should be used instead of interpreters in order to address complex needs more effectively... Using bilingual workers rather than interpreters has been more effective, as bilingual workers have a cultural understanding and are able to provide insight into the issues faced by the family.”

– Service Provider, Multiple Programs

The need to better support the unique vulnerabilities of CALD families during settlement was widely identified. Migrant and refugee families are commonly affected by a range of vulnerabilities including low English literacy, mental health problems (including torture and trauma related problems), social isolation, poverty and domestic and family violence. The high complexity of needs coupled with limited cultural competence amongst service providers presents challenges to providing culturally appropriate TEI services. It was seen as important that the TEI reforms address the priority issues related to the growing number of migrant and refugee families within certain areas of NSW.

Consultations in some districts identified growing tension between delivering services to more ‘established’ CALD communities within an area, and supporting the increasing number of recently settled humanitarian migrants. As the diverse and multicultural population continues to increase and cultural challenges become more complex, both mainstream and multicultural funded services will need to both cater for the increasing number of clients, and also support harmony and social cohesion among changing demographics.

**15%**  
of respondents  
discussed the need  
for more effective  
approaches for  
clients from CALD  
backgrounds

The need to build cultural competency across the TEI system was reinforced. This included providing cultural awareness training to frontline staff as well as service providers. Professional and systematic changes required to deliver more culturally responsive services were also discussed, with some respondents suggesting cultural awareness training and engagement initiatives should occur both within FACS and across government agencies where there is integration with the early intervention system.

“Service providers/workers lack basic training and skills in these specific areas... This is even a greater concern for CALD communities where refugee and migration patterns as a result of war or government oppression has led to significant trauma and torture.”

– Service Provider, South Eastern Sydney

Improved engagement and consultation with CALD communities and families was also seen as critical to improving service delivery. Some respondents suggested that a ‘one-size-fits-all’ approach to CALD services limits the effectiveness of current services as they do not meet the particular needs of diverse clients. Instead, TEI services should connect to local people and make use of their knowledge to deliver more culturally appropriate services. Better engagement and consultation would also involve supporting regional partnerships with CALD associations, organisations and community leaders. TEI services should also use appropriate engagement practices for clients who have diverse cultural backgrounds. This includes the development of linguistically and culturally appropriate resources for CALD communities, such as online surveys, promotional material and community initiatives.

“Targeted services for migrant and refugee families have been limited, with the preferential funding of large mainstream charities that do not always prioritise the needs of vulnerable CALD community members. As a result, many families in crisis have fallen through the cracks of agency bureaucracy.”

– Service Provider, South Western Sydney

## Respondents described inadequate support for people experiencing mental health, drug and alcohol misuse, child sexual abuse and domestic violence issues, with housing a key priority

Services for people experiencing mental health, drug and alcohol misuse, child sexual abuse and domestic violence issues were common gaps identified in TEI support. Integrated partnership approaches were seen to be particularly important for supporting these clients. Practices that establish trusting relationships with other agencies were considered most effective, as they allow service providers to identify what specialist services are available in the local area.

“There is a need for ‘integrated case management and wrap around services that include specialist therapy (OT, speech, mental health) that can work with the person and the family to reduce conflict and sustain family connections.’”

– Service Provider, Hunter New England

Access to safe and affordable housing was also identified as a critical service gap in the current system, particularly for those impacted by mental health, drug and alcohol and domestic violence issues. Securing housing is often a lengthy and fragmented process and Aboriginal people, CALD, LGBTIQ, geographically isolated and people with a disability were seen to have particularly poor access to safe accommodation. The need for more intensive and holistic casework approaches was emphasised. It was suggested that this could initially focus on assisting clients to find appropriate social housing, and then continue to assist with their ongoing needs.

“The young person’s hierarchy of needs becomes important, young people do not want to discuss their mental health when they have nowhere to sleep and nothing to eat.”

– Service Provider, South Western Sydney

Improved access to specialist services was also identified, and included rehab services, trauma-specialist services, counselling, and child focused therapies.

# 3

## Aboriginal clients

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Aboriginal needs and priorities must inform the design and delivery of TEI services

The Aboriginal perspectives, highlighted in the submissions and eleven consultation forums with Aboriginal stakeholders, were consistent with many of the issues raised in the broader consultations. Feedback highlighted specific examples of programs and services that are delivering effective and culturally safe responses and emphasised the need to build on what is already working. Specific issues and gaps for Aboriginal people, families and local communities were reported as service priorities and many ideas and strategies for how to do this best were offered.

We also heard the need for greater effort to ensure Aboriginal priorities inform TEI service design and delivery, and for increased cultural awareness and competence to underpin all services for Aboriginal people and their families. This section of the report describes your responses relating to five key areas of feedback:

- levels and transparency of funding to Aboriginal people and priorities
- design and planning of TEI programs for Aboriginal clients and communities
- culturally safe or appropriate service delivery and models of practice
- local connection and capability to deliver effective services, and
- Aboriginal service networks.

Collectively this feedback highlights the importance of achieving greater self-determination and the value of Aboriginal organisations and people who are best placed to plan and deliver services that are responsive to their community's local needs.

## Responses highlighted a need to allocate appropriate funding to Aboriginal people and priorities

Respondents across stakeholder groups spoke strongly of the need to target funds to Aboriginal people and priorities. Feedback indicated that, in many districts and communities, current services are not meeting the true level of demand. The need for TEI services to be population proportionate and realistic for the needs of the communities they seek to serve was emphasised. A general reduction in the capacity of Aboriginal organisations to deliver services was also described as a result of both levels of funding and current funding duration limits.

A lack of clarity and transparency in the funding of services for Aboriginal people compounded questions about the adequacy of funding distribution, suggesting that it is difficult to identify which provider had been funded and for what services. Greater transparency of funding would help ensure organisations are held accountable for the funding they receive for Aboriginal services, including:

- details of which providers have received funding for Aboriginal services, and the specific services for which they have been funded, and
- information on how services have performed in achieving results for Aboriginal people and their families.

Aboriginal stakeholders also discussed the appropriateness and efficacy of existing funding arrangements within the current envelope of funding. Greater flexibility was sought to allow service providers to tailor services based on the individual needs of Aboriginal people and communities. For example, funding for regional and remote services must factor in the significant outreach activities required to cover large distances between communities.

Reflecting broader feedback, Aboriginal stakeholders also noted that services suffer from short program durations as well as funding uncertainty, with two issues specifically relevant to the Aboriginal community. First, it was observed that short funding durations do not allow enough time for effective services to be established. Secondly, short funding durations impact service continuity and negatively impact the ongoing relationships and interpersonal connections.

**“Communities are getting tired of two year programs. There is a need to stay the distance... [programs] need to be flexible for families to still access services to stay with the same support person or organisation.”**

– Aboriginal Stakeholder workshop participant, South Eastern Sydney

It was also suggested that the tendering process for program funding could be improved to allow for Aboriginal service providers to compete more effectively with mainstream NGOs, possibly through select tendering or pre-qualification.

### **Respondents described the crucial role of Aboriginal stakeholders in TEI program design and planning to ensure the needs of Aboriginal clients and communities are met**

Aboriginal stakeholders emphasised that Aboriginal priorities must inform the planning and design of TEI programs, and this can be achieved through the meaningful and appropriate involvement of Aboriginal people, leaders and organisations. Aboriginal stakeholders provided specific examples of priority areas they identified as requiring additional support, including men’s support services, domestic violence services (including support for perpetrators), services for older children and young adolescents and drug and alcohol services, particularly for methamphetamine use.

The importance of involving local Aboriginal organisations in TEI planning and decision-making was highlighted, including accessing informed Aboriginal leaders, organisations and people to identify the local needs of different communities. The NSW Aboriginal Land Council and its member organisations were identified as examples of local organisations that could play an instrumental role in helping to understand local needs and engage Aboriginal clients.

**“Each community is different and should have a say in their priorities for their own local services.”**

– Aboriginal Stakeholder workshop participant, Mid North Coast

“Design programs to fit Aboriginal people, [don’t] try and make Aboriginal people fit the programs.”

- Aboriginal Stakeholder workshop participant, Western NSW

### Geographic boundaries

Aboriginal stakeholders highlighted two dimensions of geographic limitations that specifically impact services for Aboriginal clients. These included the limited availability of culturally safe services for Aboriginal people in their area, and the need to support people and families who move to another location but still require access to the same services. Additional flexibility within programs would help ensure service continuity as important client-provider relationships can be lost when families move beyond program boundaries.

“A family might move and all of a sudden are no longer in the right area to get the same service from the right provider. They lose contact with someone who has been engaged.”

- Aboriginal Stakeholder workshop participant, Sydney and South Eastern Sydney

### Kinship relationships and recognition of the Aboriginal context of family

Aboriginal stakeholders observed that TEI programs do not appropriately recognise Aboriginal concepts of “family” and the importance of kinship within Aboriginal communities. The role of kin in caregiving for Aboriginal children was emphasised and it was suggested that services for Aboriginal people must work with the whole family rather than just individual clients. Recognition of the Aboriginal context of family in program design and greater flexibility in program guidelines were suggested to help ensure TEI services work in an appropriate way with the whole family. Family group conferencing models were suggested as an effective way for TEI programs to encourage families as a whole to meet and identify their collective needs.

“In the context of Aboriginal and Torres Strait Islander families... it is particularly important to bear in mind that the concept of ‘family’ is likely to include an extended network of family members.”

- Non Government Organisation

### Age-based restrictions to services

Age-based eligibility criteria within certain TEI programs was seen to further inhibit services from working with Aboriginal families as a whole, as sibling or relatives who fall outside of designated age groups are excluded from participation. While recognising that age restrictions play a role in ensuring services are made available to the youngest members of the community (in line with the evidence that early intervention is effective), respondents noted that in some circumstances they can prevent Aboriginal people from

accessing necessary services or ignore other priority areas of need. In particular, older children and younger adolescents were identified as groups for which there was a gap in Aboriginal services.

### Data collection and reporting

Aboriginal stakeholders suggested that data collection and reporting should be improved to be more appropriate for Aboriginal clients, and better reflect the outcomes delivered by TEI services to Aboriginal clients and their families. From a reporting perspective, Aboriginal stakeholders identified that TEI programs are currently limited by their focus on quantitative measures, and that introducing qualitative measures would enable more nuanced, outcomes-based reporting for Aboriginal clients and their families. Some Aboriginal stakeholders also recommended the use of community forums and conversation-based forms of feedback collection instead of surveys.

### Aboriginal stakeholders highlighted the importance of models of practice that deliver culturally appropriate services

Aboriginal stakeholders discussed the issues of cultural safety and cultural appropriateness within TEI programs. In this report, “culturally appropriate services” refers to services that demonstrate understanding and respect for the cultural practices of the people they support. The term “cultural safety” refers to a higher threshold, where the people most equipped to provide culturally safe services to Aboriginal clients are workers within the same culture. Many Aboriginal stakeholders identified examples of appropriate or safe models and suggested that other services could more adequately reflect these Aboriginal models of practice to deliver better services.

Integrated community approaches were suggested as examples of better practices for working with Aboriginal people. Soft entry points were seen as important in building trust and relationships, and creating opportunities for Aboriginal children and families to voice their needs, express concerns, and connect into other programs and services. Supported playgroups, Community Builders, vacation care, community kitchens, swimming lessons, sewing groups, community BBQs and other educational and social programs were cited as effective examples of soft entry points.

**“Soft entry points of services are a safe space for mob to yarn about what is happening for them.”**

– Aboriginal stakeholder workshop participant, South Western Sydney

Co-location of services and use of community hubs which deliver integrated services through a single point of access were seen to provide the best outcomes for families. A number of services currently providing effective integrated services to support Aboriginal families were described, including Aboriginal Child and Family Centers.

“The community hub model is a good service model for integrating services.”

- Aboriginal stakeholder workshop participant, Southern NSW

“Integrated service hubs with multiple entry points and multi-disciplinary teams are effective as they encourage collaboration and a single entry point for families.”

- Aboriginal stakeholder workshop participant, South Western Sydney

However, others observed the need to be mindful of the cultural appropriateness of the built environment of service hubs, noting that hubs should be delivered away from institutions where possible. Participants encouraged the co-location of services with schools, and multiple participants cited the Aboriginal Child and Family Centres as positive examples of such services.

Aboriginal stakeholders also highlighted that better outcomes would be achieved through the employment of local Aboriginal people who have first-hand knowledge of, and relationships with, the communities in which they work. Services to Aboriginal clients should be delivered by Aboriginal-run organisations where possible. Next in preference would be mainstream organisations with Aboriginal staff, and finally, mainstream organisations with a strong reputation of culturally appropriate delivery.

“Employ local Aboriginal people who have first-hand knowledge of community and assist with intervention strategies... Employing local people will open doors quicker than someone who is not from that community.”

- Aboriginal stakeholder workshop participant, Southern NSW

In addition to hiring local Aboriginal workers to deliver services within their own communities, Aboriginal stakeholders proposed a range of solutions to ensure standards of cultural competency across the TEI sector, including:

- introduction of clauses in program guidelines or funding agreements that require cultural competency training for all staff working with Aboriginal clients
- introduction of clauses in program guidelines or funding agreements that require outreach and home visits to be conducted by Aboriginal workers, or non-Aboriginal workers who have received local cultural competency training
- identification of preferred providers that are recognised as having culturally safe or appropriate practices, and
- a review of related services, such as out of home care and NDIS, to ensure all services are being delivered in a culturally appropriate way.

## Local Aboriginal capability is critical to service delivery

Aboriginal stakeholders emphasised the importance of local connections to the provision to culturally safe services. It was recommended that FACS make specific provision in program funding to support hiring, training and capability building for Aboriginal workers. Aboriginal stakeholders also encouraged increasing designated funding for Aboriginal employment programs and positions.

“Consideration should be given to building the capacity of Aboriginal service providers so that these organisations can be involved in decision-making concerning the placement of children and young persons.”

- Non Government Organisation (Legal)



Specific supports which would assist Aboriginal workers were suggested, including:

- an Aboriginal service directory that assists workers to make referrals to trusted and culturally safe services
- de-brief services for Aboriginal workers
- Aboriginal clinical supervision for Aboriginal workers, and
- websites, social media groups and networking events for Aboriginal workers and stakeholders to build networks and share information.

The scope to improve cultural competence more broadly across the TEI sector was discussed. Feedback indicated that providers and individuals across the TEI sector demonstrate varying levels of cultural competence, and that appropriate cultural awareness training, particularly for non-Aboriginal staff and mainstream organisations, would improve the cultural appropriateness of TEI services as a whole. It was emphasised that cultural awareness training cannot be ‘one-size-fits-all’, and instead must be specific to the community in which the training is being delivered.

### **Collectively, this feedback suggests that a wider view of Aboriginal service networks would result in better outcomes**

The importance of focusing on the capacity and capability of Aboriginal service networks more broadly, not just TEI services was discussed. Aboriginal stakeholders reflected a need to take a wider view and consider the network of Aboriginal organisations that provide services to Aboriginal people and their families. This includes Aboriginal services funded through other sources such as Aboriginal health and community services, or those funded through local government.

Consistent with the broader group of stakeholders, Aboriginal stakeholders highlighted the importance of building capability within service networks and suggested that, in the context of Aboriginal people and their families and community, this extended to a wider group of organisations.

# 4

## Working together

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TEI services are more effective when delivered using local partnerships, networks and integrated approaches

Your feedback highlighted the value of local partnerships and positive working relationships. You described the importance of collaborating both with other service providers and other agencies in your local area, and suggested these partnerships are working well in many cases.

Partnerships were seen to lead to greater understanding about local needs and priorities, and build the capacity and the capability of other providers to meet those needs. Partnerships also facilitate a better case management model to ensure people with the right level of expertise are appointed, appropriate partner services are involved, and the right sequence of care is followed.

Your feedback identified opportunities to improve and better support collaboration, integration and networked approaches. Your suggestions fell into four main areas:

- greater knowledge and awareness across programs and locations to improve referral pathways
- place-based approaches such as community hubs to improve coordination and facilitate local level decision-making
- data driven decision making and planning at the local level to reach those most in need, and
- formalised governance structures that recognise and support a more integrated and coordinated system.

Your feedback relating to each of these areas is described below.

**30%**  
of respondents  
indicated that  
some aspects of  
partnerships are  
working well



## Respondents highlighted the need for increased knowledge about other services and providers to improve referral pathways and coordination

Greater awareness and promotion of other services was reported to build stronger referral networks, improve collaboration and break down service silos. Knowledge of existing services also strengthens the ability of TEI services to meet local needs and ultimately deliver the best outcomes for clients.

Three overarching strategies were identified to increase knowledge of other services, identify local needs and foster more effective referral pathways:

- accurate service mapping, both across programs and through a local lens
- better use of existing local government and inter-agency information on community needs, and
- investment in cross-provider networking, community hubs and capability development sessions.

Many responses spoke of the need for accurate service mapping, both across TEI programs and within a local area, to allow services to develop connections and create local networks. Comprehensive and monitored service mapping would facilitate a holistic approach to service pathways and ensure clients and families have streamlined and respectful engagement between services. Service mapping was also seen to increase confidence in, and quality of, referral pathways to suitable services, create more proactive partnerships and collaborative practice and increase sharing of information about local needs.

“Simple and visual mapping of the spectrum of services will promote clear and consistent awareness and participation of workers at all levels of service delivery (everyone working towards the same end and aware of other parts of the system for effective engagement, support and referral).”

– Service Provider, Sydney

It was suggested that FACS use existing local government information on community needs to build profiles of local communities and assist services to identify ‘at risk’ cohorts. The profile could then be shared through a central database made available to providers.

“If all government levels that provide funding agreed and rolled out one database for everyone to use (public included)... This would be created and maintained by funders – all levels of government – as you have the most accurate information about what programs are available where.”

– Service Provider, South Western Sydney

Local collaborative practices, network meetings and capability development sessions were also reported to increase awareness about other service providers.

### Respondents suggested that place-based approaches such as community hubs improve access and coordination

There was support for place-based approaches, such as community hubs, to improve coordination and collaboration across the sector. Place-based approaches address the needs of families and communities at the local level, with a focus on community strengthening and collaboration.

The opportunity to increase place-based approaches was supported by clients who suggested that when they require early intervention across multiple needs, only a few providers were able to offer a mix of services. Clients observed that more efficient collaboration platforms would allow service providers to better meet clients' multiple needs.

“Multi-services co-located within the one building also allows for greater outcomes for clients, whilst protecting their anonymity and allowing them to feel comfortable accessing multiple services without stigmatisation.”

– Service Provider, South Western Sydney

### Respondents supported a move toward more data-driven local planning and commissioning with decision-making occurring at a local level

Overall, there was support for the reform aim of facilitating district decision making in the design and delivery of local services. Localisation was seen to build capability in service providers, facilitate more integrated service delivery and enable more timely, appropriate and flexible service delivery. Importantly, localisation was also seen to increase the accessibility of services and decrease travel burdens for clients.

“Localisation of services within the District is vital to [our] services' response to vital issues for families—local services, local knowledge, and local response. [We] are creative in responding to the needs of the diverse families in the local area. This flexibility is important to build upon/maintain open communications with communities who may historically hold some mistrust of authority.”

– Service Provider, Sydney

Enhancing localised approaches to services included:

- more local forums and meetings to address the specific client needs and services in an area
- district-led facilitation of contracted services to support a locally focused approach and coordination of service systems at a local level, and
- continued standardisation of practice, policy and systems to develop consistency in program delivery.

## Respondents recommended changes to governance and accountability arrangements to support a more integrated and coordinated system

To facilitate genuine partnerships and support a more integrated and coordinated TEI system, respondents suggested changes to current governance arrangements, including accountability structures, funding allocations and competitive tendering.

Many respondents proposed changes to governance structures to align accountability and create an integrated service system. They recommended:

- elevated accountability to drive cross-government coordination and more effective case management, particularly for universal services, and
- district level governance frameworks to help drive local planning, promote collaboration and address systematic issues.

“An integrated model would encourage ownership and empowerment for service providers to do case coordination as part of their case management work. Potentially this may decrease the number of professionals involved, and reduce siloed working and the need for clients to retell their story. To develop a truly integrative service system, the governance structure of any program reform needs to be held at cabinet level to work across government agencies. Without this over-arching leadership with the reform the silos will continue.”

– Service Provider, Sydney

Additionally, it was suggested that contract agreements should accommodate the time and resources required to build partnerships. Providers would then be enabled to engage in meaningful coordination and planning to focus on outcomes for families and children. This would also allow the value of informal discussions, information and resource sharing to be formally recognised. It was noted that current funding and program designs limit such forms of collaboration.

Competitive tendering was also seen to hinder effective collaboration and partnerships to the detriment of the TEI sector. Respondents suggested that increased competition for funding between services within an area prevents information sharing, creates silos

and leads to real service gaps. In addition, competitive tendering can foster mistrust between providers and discourage service providers from working together effectively, ultimately resulting in poorer outcomes for clients.

“Local collaboration and funding competition contradict one another. With such a little amount of funding available, and the history of communities working in silos, this is an enormous challenge.”

– Service Provider, South Western Sydney

“Competition for funds kills collaborative practice. Organisations are focused on holding funds and are not client focused.”

– Service Provider, Child, Youth and Family Support

# 5 Outcomes

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Although outcomes are being achieved through current TEI programs more people could be assisted earlier

## Respondents identified the need to target and assist clients earlier in the vulnerability continuum

We sought client perspectives through an independent survey, interviews and focus groups, and asked clients to share their experiences on TEI programs and services. Overall, clients said that their experiences were positive. Specifically, clients reported that as a result of TEI services they had stronger social connections with the community, new skills and ways of thinking and greater control over their lives. It is noted in the research that clients were very much judging success on what their life was like before or ‘what might have been’ and felt that they were significantly better off as a result of the services.

This positive feedback from clients supported the evidence that prevention and early intervention lead to measurable and substantial improvements in client outcomes. Recognising that FACS’ TEI programs support clients across the service delivery spectrum, respondents identified the need for a more proactive service system focused on earlier intervention. Reaching clients earlier in the vulnerability continuum would allow services to better address problems before they resulted in a serious, long-term impact. It was said that only a few service providers were able to offer the mix of services for complex needs and that active referrals and follow ups between service providers were a rarity .

“The evidence for intervening early in the life of a child through the provision of universal support is conclusive. It is important that such an approach forms the basis of the early intervention system, program design and in the language and dialogue at all levels.”

– Service Provider, Families NSW

Sector responses also described the positive impact that TEI services and programs were having on clients’ lives. They suggested that by targeting people who are ‘at risk’ earlier, these outcomes could be further improved and services could help clients address problems or concerns before they escalated to crisis.

The focus of TEI programs was seen to have shifted towards those closer to the risk of significant harm (ROSH) threshold. While the importance of supporting these clients was not debated, it was considered equally important to target vulnerable children, young people, families and communities earlier and across the vulnerability spectrum. The shift toward targeting people at higher risk was reported even within programs where the target client is low to medium risk.

The following factors were seen to contribute to the shift towards clients at higher risk:

- ambiguous early intervention eligibility criteria
- lack of clarity regarding services targeting ROSH versus non-ROSH clients
- a culture of crisis-centred service
- gaps in the provision of universal service, and
- an absence of services for clients at higher risk.

These factors were identified as a risk for families at the early stages of needing support who are not eligible for targeted programs. Such families may fall between cracks in the spectrum of services between early intervention and crisis response. The escalation of need and lack of available support could lead to more families ending up in the child protection system.

Overall, respondents described a need for increased funding of TEI programs to enable service providers to assist more people earlier.

**65%**

of respondents  
suggested better  
targeting and reaching  
people at risk earlier  
would result in better  
outcomes

“My life would be a mess;  
I would probably still be  
homeless.”

– Client, Getting It Together

A large number of clients felt their social connections and sense of community had been strengthened significantly as a result of the TEI services. Many were able to build trust, open up to others, share their personal journey, and establish lasting relationships with other clients. Consequently, they felt less isolation, lower levels of depression and anxiety, more support and more confidence to learn and grow.

The consultations also revealed that children, parents and communities have developed a range of skills, which help achieve important outcomes. For example, children had shown increased positive behaviour as a result of developing their socialisation skills, confidence, independence and motor skills. Clients felt this had been the result of young people having access to new services, experiences and activities that their parents could not or would not typically provide. In selected cases, homelessness had been averted through young people being granted access to short term accommodation.

“It reduced my isolation. I trusted the support person and how he handled my daughter’s condition.”

– Client, Families NSW

# 6

## Information sharing

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Improved information sharing would result in more outcome focused and evidence-based service delivery.

We recognise that effective TEI service delivery is underpinned by the collection, monitoring and sharing of evidence and information across the sector. We asked how we should measure success for our clients and services and the best way to capture feedback from clients to improve our service delivery. We also asked what information and support you need to improve outcomes.

Your feedback pointed to limitations to existing data collection and reporting systems and practices. You made a range of recommendations to improve the consistency of the reporting, monitoring and sharing of information. These suggestions fall into three key areas:

- a consistent outcomes based approach would support a more client centric system and build a better evidence base to support TEI
- a greater focus on sharing and following evidence-based practices would support the best outcomes for children, families and communities, and
- standardised information systems and processes are needed to support consistency and effectively monitor progress

Your feedback relating to each of these areas is described below.

**>45%**  
of respondents indicated that data collection and reporting processes could be improved

### Respondents indicated that a consistent outcome based approach would support a more client centric system

A range of changes to reporting arrangements were identified to enable a more client centric approach, improve program performance and build a better evidence base for TEI. These included:

- moving to outcomes based data collection and reporting
- implementing a mixed evaluation approach that includes both quantitative and qualitative outcomes, and
- implementing a results-based accountability framework and longitudinal performance indicators to measure program effectiveness.

The ability to measure success for clients and services was seen to be limited by the sector's current focus on reporting service provision numbers and outputs. While the importance of recording service provision numbers was acknowledged, it was suggested that success should also be measured by the outcomes achieved for clients and the quality of the services delivered. For example, measures which monitor the quality of referrals and handovers, in addition to volume, would promote better partnerships and reward service providers for effectively engaging with other services in the sector. Other suggested measures of client outcomes included increase in knowledge, connection with families and communities, individual case plan outcomes achieved, goals met and a decrease in risk behaviours.

“Recording the number of referrals does not actually reflect whether clients have followed up any suggestions/referrals or have acquired skills or whether their circumstances have improved. Collaborating well with other support services allows for feedback as to whether clients show up after referrals are made.”

- Service Provider, South Eastern Sydney

The need for more qualitative data collection was also identified and that a mixed methods approach would be most valuable for measuring success for clients and services. Possible qualitative data sources include self-reported feedback from clients on:

- how they feel they have progressed towards goals, and
- how they feel about the engagement and success of the service.

“The organisation’s ability to focus on quality of service delivery rather than quantity is a very important factor for frontline workers.”

- Service Provider, South Western Sydney

Un-restricted surveys were described as a useful mechanism for gathering qualitative data from clients, while others suggested that face-to-face engagement was most appropriate, particularly when seeking feedback from more vulnerable clients and clients from CALD backgrounds. Interviews conducted at multiple stages of service delivery were also seen to be valuable. Irrespective of method, there was consensus that these approaches needed to be culturally appropriate and socially inclusive.

“The use of standardised case management systems has been important as a source of data for program evaluation. Any data system must be able to capture feedback from clients by asking them directly. We ask clients to complete feedback forms when appropriate (while acknowledging literary levels and language barriers). In our group work, clients are asked for their feedback confidentially and anonymously.”

- Service Provider, Western Sydney

Increasing the use of a framework such as Results Based Accountability (RBA) was also proposed as an effective way to understand and measure the client’s perspective. A system-wide adoption of this approach was encouraged to enable the monitoring of outcomes over time. Peak bodies would be a critical contributor to the development of such a framework.

“Data needs to capture information that is meaningful and outcomes focused and using a genuine RBA framework that considers how many, how well and is anyone better off in a comprehensive yet easy to collect way.”

– Service Provider, Murrumbidgee

To ensure an effective transition, respondents recognised that any changes to data reporting needs to be supported by appropriate training and capability development for service providers and their staff.

### Respondents supported a greater focus on identifying, sharing and following evidence-based practices

The reform aims, in part, to create a service system continuum grounded in evidence-based practice, which was described as essential to delivering high quality and effective TEI programs. Examples of such practices that led to positive outcomes for clients include families-centred practices, client centred practices, strengths based approaches, solution focused approaches and collective impact.

Although a number of examples of best practice were identified, feedback suggested that evidence and practice was not consistent across the board. Overall, the majority of respondents identified a need for mechanisms to ensure that a consistent evidence base informs service delivery across service providers and programs.

“We do not have shared goals or outcomes. If all organisations worked to a broad set of common outcomes, this would give us a shared language and an improved ability to work together.”

– Service Provider, Nepean Blue Mountains

Greater use of independent academic research would help support evidence-based practice and achieve best outcomes for children and families. This included involving more local academics and supporting longer term, locally conducted research. Respondents also supported the adoption of a learning and innovation approach to sharing evidence-based practice. This would be coordinated across service providers, all levels of government, Health and Education to ensure clarity and to reduce duplication and costs. Others suggested that ongoing development of highly skilled practitioners to lead the sharing of best practice would be effective.

**40%**  
of respondents felt  
that information  
sharing could be  
further improved

## Respondents recommended investment in standardised information systems and processes to improve the consistency of services and lift performance across programs

The need for standardised assessment tools was proposed to support cross-practice work and allow services and government departments to effectively monitor progress. A shared database and client management system would bring together client and service information and ensure consistency of information between FACS and service providers. The 'Patchwork' web application was suggested by some respondents as a client management system that could be more broadly explored.

Some respondents identified a lack of consistent reporting processes and discussed the need for streamlining measurement and reporting arrangements across programs. Consistent reporting tools would make it easier to record client outcomes when clients move across programs, and would also help create a longitudinal dataset to measure client progress over extended periods of time.

“A frequent obstacle encountered when delivering services is a lack of sharing of information or communication between government departments. For example, even when consents have been given, Housing NSW does not update Centrelink who do not update the Child Support Agency. The result of this is that workers have to inform all of them which takes up a huge amount of time. Improved communication between different government agencies would result in a more efficient service system.”

– Service Provider, Eastern Sydney

Shared measurement tools would also create a common language for reporting on outcomes across service providers and across programs. This would help improve the efficiency of the reporting process, enable comparisons across services to determine which services are achieving program aims and identify areas for improvement. Most agreed this would ultimately enable staff to have more face-to-face time with clients.

“There is a need for evidence-based management tools that are uniform across services.”

– Service Provider, Northern Sydney

# 7

## Capability

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The capability of practitioners and services drives effective service delivery

We asked you to identify what service providers do that most effectively influences outcomes for clients. Frontline staff and the strength of their relationships with clients was described as being critical to achieving positive outcomes. The capability of individual practitioners was seen as a key strength within the current TEI sector and allowed real outcomes to be achieved for clients.

You also identified that a focus on supporting and building the capability of service providers and their staff would improve the quality of services we deliver and our ability to achieve outcomes for clients.

Your feedback related to both of these areas is described below.

### Sector respondents and clients agreed that staff capability underpins the quality of service delivery and is a current strength within the TEI sector

Feedback from all stakeholders highlighted staff capability as being critical to service delivery quality. They highlighted that while systems, processes and tools are important, it is the capability of staff that best drives outcomes for clients. Staff capability was seen to be dependent on two underlying dimensions:

- Skills-base: It is the skills and ability of practitioners that is seen to most influence the effectiveness of services. This includes the practitioner's ability to apply and tailor evidence-base to best meet clients' needs and adapt the case plan accordingly when new emerging needs are identified.
- Relationship-based: The practitioner's ability to build relationships and achieve buy-in from vulnerable clients is crucial to engaging them in programs and, ultimately, achieving positive outcomes.

Clients' feedback emphasised the critical role of frontline staff. They indicated that they received personalised and tailored services, and cited that strong relationships with staff and facilitators were key factors in the quality of services they received. Broadly, they felt that staff listened and provided help in an understanding and respectful way. This feedback highlights the importance of ensuring individual staff and service providers as a whole have the necessary capability to deliver high quality services to clients.

“[The worker] has helped me through this time and spotted that I had depression before I even knew. She made appointments for me and even came with me to the family lawyer because I was just so overwhelmed and didn't know what to ask. I also did the parenting programs and got counselling for my son and daughter. I can manage their behaviour better and help them through this. Even my kids are excellent because of the help I've had from here.”

– Client, Child, Youth and Family Support

## Respondents identified specific staff and service provider capabilities as being of foremost importance to TEI service quality

Respondents collectively identified a range of capabilities that defined high quality practitioners and service providers. These included ability to:

- adopt client-centered, strength-based approaches
- deliver effective case management
- apply and tailor evidence-based practice
- deliver services in a culturally appropriate manner, and
- capture and share data and information.

### Client-centered, strengths-based approaches

Sector responses showed strong support for the use of client-centered and strengths-based approaches. TEI practitioners and services that focus on individual clients and their existing strengths and capabilities empower clients to support themselves.

“[Our program] works from a strengths-based model, recognising the strengths, capacities and potential of our clients, as well as the pressing needs many have as a result of the traumatic experiences they have endured.”

Service Provider, Western Sydney

“Our commitment to our clients being central to all decisions and processes that affect their lives... is reflected in a strengths-based approach that focuses on the individual/family needs, visions, culture, lifestyle choices, with the client as the director of this process. Needs, goals and supports are reviewed regularly (depending on the service this process may be formal or informal) with the client and adjusted accordingly.”

- Service Provider, Community Builders

Clients' feedback also reflected the value of tailored, client-centered approaches. There was a common view that such approaches made them feel more empowered and in control, with greater confidence and more tools to make decisions.

### Effective case management

Effective case management was seen to play a critical role in assisting clients navigate the system of support available and access the services they require. Effective case management capability meant service providers are able to identify needs as they emerge and refer clients to appropriate services through referral pathways.

Some respondents highlighted the need for providers to achieve the right balance between formal and informal case management as appropriate to clients' needs. Informal approaches were considered safe and non-stigmatising ways to introduce clients to services. Comments also reflected the importance of formal case management to ensure clients receive the assistance and support they need across the service spectrum. The importance of both approaches illustrates the need for service providers to be able to seamlessly integrate their case management approach in response to client needs.

“Clients with complex multiple issues are best assisted by specialist staff and it is important that generalist workers recognise professional boundaries and refer clients, or work with specialist workers in a joint service model. It is important that generalist workers are trained to accurately recognise these complex issues to provide the best possible service to clients. There is always the risk of these issues being missed or dismissed as something less significant, to the detriment of the client.”

– Service Provider, South Eastern Sydney

### Use of evidence-based practice

Evidence-based practice was seen as essential to delivering high quality and effective TEI programs. Although a number of examples of evidence-based practice were identified throughout the consultations, overall respondents felt there was inconsistency in the extent to which evidence-based approaches were used across the sector. This feedback spoke to the need to ensure TEI service providers and practitioners have the capability to consistently apply and tailor evidence-based practices across service delivery.

### Cultural competence

The need for cultural competence to underpin the planning and delivery of TEI services was a recurring theme and reinforced the importance of building cultural competency across the TEI sector. Cultural competence and culturally appropriate engagement is critical to ensure that services are planned and delivered in a way that is appropriate to the needs of the particular communities receiving those services. This was particularly crucial for services for CALD and Aboriginal clients.

### Data capture, reporting and information sharing

As noted previously, respondents believed that an improved approach to data capturing, reporting and information sharing would contribute significantly to service delivery quality and achievement of client outcomes. To ensure TEI staff are able to maximise use of new approaches and an effective transition, it was recognised that any changes must be supported by appropriate training and capability development for TEI staff.

## Respondents emphasised a need for professional development to build capability across the sector.

The feedback reflected an overall need and appetite for professional development across the TEI sector. While existing training opportunities were praised, there was recognition that workers require more time for dedicated training. Service providers and smaller NGOs in particular highlighted that they lacked the resources to develop and deliver effective training. Such organisations were looking to FACS to provide them requisite financial assistance and training opportunities. Standardisation of training for the TEI sector was also recommended to ensure service providers are able to deliver consistently high quality service across programs.

“Webinars and face-to-face training run this year have been positive and it would be good to keep it up or offer more opportunities.”

– Aboriginal Service Provider, Sydney

In discussing training and needs, respondents identified both a range of specific subject matters and approaches which they believed would benefit the TEI sector. First, the need for general, ongoing training opportunities as well as specialised, subject-matter based training was identified. Specific topics for which capability development was sought included:

- trauma-informed practice
- localised cultural awareness and cultural competence
- mental health
- substance misuse
- domestic and family violence
- recognition of risk and protective factors.

Feedback pointed to a lack of capacity of frontline workers to recognise the signs and symptoms of complex issues and to respond to unexpected client requests.

In addition to specific training, a range of capability development approaches that would benefit the TEI sector were identified including:

- identification of role-model practitioners and peer mentoring
- shared training opportunities and networking and collaboration opportunities
- requirements for NGOs to develop workforce development plans to ensure their staff are well equipped to do their jobs, and
- standardised training modules for TEI staff.

The NGO Learning Centre was cited as a positive example of a professional development initiative and praised for its accessibility and applicability for on-the-ground staff in NGOs.

# 8

## Funding arrangements

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Changes to funding arrangements would build confidence across the sector

We asked you to describe how we, as a funding agency, can help improve the effectiveness of your work and support you to deliver the best outcomes for clients. We acknowledge that you identified the need for more funding overall as well as a need to review the appropriateness and efficacy of current funding arrangements. In particular, you suggested that the current funding cycles present a significant challenge to effective service delivery, as it:

- limits funding certainty and service stability, and
- inhibits your ability to attract and retain high quality staff and to innovate.

Both of these themes are described below.

### Respondents felt that the current funding periods affect service stability and inhibits ability to attract and retain quality staff and to innovate

Longer funding periods were seen to be beneficial to clients and support service providers' ability to deliver program continuity. Many service providers felt shorter funding cycles limited their ability to commit to ongoing service delivery for clients or adequately plan for future activities. This was seen to increase anxiety and disruption for clients and communities.

“Short-term funding cycles also make it difficult for organisations to do meaningful strategic planning.”

- Service Provider, Community Builders

“Short-term funding timeframes and frequent reforms make it difficult for NGOs to build relationships with clients, plan for the future and deliver the best possible outcomes for clients.”

- Service Provider, Multiple Programs

The importance of investing time to properly engage with communities and ensure that services are appropriate for the clients and families they seek to serve was emphasised. This concern was particularly pertinent for place-based programs and for Aboriginal services.

“It takes [time] to properly consult with community and engage, by that time funding is wrapped up.”

- Aboriginal stakeholder workshop participant, Sydney and South East Sydney

Many respondents suggested five-year funding cycles in response to this concern. Such arrangements would provide greater funding certainty and allow service providers to build service stability and improve client outcomes. Providers felt longer funding cycles would also provide the resources to develop services that meet

currently unmet demand, provide client-centered services for target groups, increase service levels to more vulnerable clients and, where appropriate, lengthen support durations.

Other respondents suggested that even longer funding durations, of up to 10 years, could be considered for programs which sought to address generational issues.

“Five year funding cycles should be implemented to allow for increased stability within the sector, long term engagement, planning and service coordination.”

– Service Provider, South Western Sydney

In addition to concerns about service continuity, short funding cycles were also suggested to be detrimental to staff morale and limit providers’ ability to attract and retain high quality staff. Some respondents observed that these workforce limitations in the TEI sector had both an economic cost and a detrimental effect on service delivery standards.

“The sector would like to have more funding certainty and longer funding cycles. Having staff constantly worry about their programs being defunded builds a demoralised workforce and a transient workforce. In an industry where relationships are critical, having staff from job to job, program to program comes at an economic cost, as well as undermining the standard of service delivery.”

– Service Provider, Community Builders

Finally, it was suggested that longer term funding would increase innovative practices within the TEI sector. Shorter funding cycles were seen to limit innovation of services as providers place focus on using funds for service delivery rather than exploring potentially innovative approaches. These comments suggested that some providers would be more inclined to invest in and trial innovative practices if they had funding certainty for a greater period of time.

“Greater funding certainty [with] longer funding cycles is needed [for] funding security that assists growth and innovation.”

– Service Provider, Community Builders

“There is also a need to trial new things – innovation or doing it differently. This needs to be factored in as a ‘service activity’ and have discretionary funds, although these may not be used every year.”

– Service Provider, Community Builders

## What is next

You provided clear guidance on how FACS should engage with stakeholders during the reform process, and drew on your experiences to highlight what a successful reform program would, and would not, look like. This section outlines what we heard about how FACS should engage with stakeholders throughout the reform process, how your feedback will inform the reform process and the next steps.

### You gave clear guidance on how FACS should engage with stakeholders throughout the reform process

Your feedback on how we should communicate with stakeholders emphasised the importance of engaging early, actively and honestly throughout the reform process.

You described what a successful reform process would look like and drew on experience from previous reform processes to raise concerns about unrealistic timeframes, poor communication and lack of meaningful collaboration. We drew on your feedback to identify the following principles to inform our reform process:

- establish a transparent consultation feedback loop
- undertake genuine sector consultation throughout the entirety of reform
- set realistic timeframes which are appropriate for all stakeholders, and
- take a strength-based approach to the reform process.

We also sought your guidance on what information is most important during the reform process. Collectively, your responses emphasised the importance of providing certainty and clarity, and identified five key areas of interest:

- the vision, purpose and future of TEI
- timeframes for the various stages of the reform
- decision, direction and options under consideration
- the transition plan and specific details on key processes, and
- the impact on client outcomes.

We also asked how we should communicate with your organisation. You encouraged the continued use of multiple communications channels and communication targeted at different levels of stakeholders, including through:

- regular newsletters, emails and updates to the FACS TEI reform website
- local forums, information sessions, workshops and face-to-face consultations
- peak organisations and the Early Intervention Council, and
- FACS District Directors, Community Program Officers and Contract Managers.

You also highlighted the need for resources, documents and information to be available in plain English and community languages. You emphasised the importance of developing resources specifically for Aboriginal people.

You identified participants who should be involved in local planning processes:

Clients - Children, young people and families	Service providers	Relevant peak bodies
Aboriginal communities and leaders	Aboriginal associations and organisations	CALD communities, associations and leaders
Relevant government agencies (i.e. health, housing, justice, education)	Local Council	Commonwealth agencies
Frontline staff	Schools and early childhood centres	Police
Settlement, refugee and migrant organisations	Local businesses and clubs	Philanthropic organisations
Union representatives	Industry advocates	Industry experts and researchers

## Your feedback will inform the scope and direction of the next steps in the reform process

Your feedback will help shape the scope and direction of the TEI program reform. We will also draw on evidence-based practice, analysis of evaluation reports and reviews of services systems in local and international jurisdictions.

Your responses emphasised the need to ensure realistic timeframes for the reform process. You highlighted the importance of not rushing reform processes at the expense of consultation and best practice change management. Instead of rapid, significant change, the reform process should focus on continuous improvement for the TEI sector. Decisions on future funding and implementation timing should not be made until the shape of reform is determined and local consultation and planning has occurred. The overall timeframe should depend on district planning, transition and implementation approaches that may be undertaken and transition readiness of the TEI sector. A broad timeline is shown below:

Consultation and collaboration	Consolidating and reporting feedback	Reform directions	Service design planning	Transition planning and implementation
August 2015 January 2016	November 2015 – March 2016	March – July 2016	October 2016 – June 2017	Commences July 2017

## Glossary

<b>CYFS</b>	Child, Youth and Family Support
<b>CALD</b>	Culturally and Linguistically Diverse
<b>EIPP</b>	Early Intervention and Placement Prevention
<b>FACS</b>	Family and Community Services
<b>GIT</b>	Getting It Together
<b>LGA</b>	Local Government Area
<b>LGBTIQ</b>	Lesbian, Gay, Bisexual, Transgender, Intersex, and Questioning
<b>NGO</b>	Non-Government Organisation
<b>RBA</b>	Results Based Accountability
<b>ROSH</b>	risk of significant harm
<b>TEI</b>	Targeted Earlier Intervention