



Targeted Earlier Intervention Program Reform Consultation Summary Report: What you told us

Executive Summary

April 2016

The goal of the Targeted Earlier Intervention (TEI) program reform is to design a contemporary, client-centred service system, within existing resources. The Department of Family and Community Services (FACS) understands service delivery should be strengths based to appropriately respond to the changing needs, levels of risk and vulnerability over time. In order to achieve this, FACS identified five aims for the reform:

- 1 Improve outcomes for clients of TEI services
- 2 Create a service system continuum grounded in evidence-based best practice
- 3 Target resources to those with the greatest needs
- 4 Facilitate district decision making on the design and delivery of local services
- 5 Increase flexibility so that clients are at the centre of the system.

This document offers a condensed version of the *Targeted Earlier Intervention Program Reform Consultation Summary Report: What you told us*, which shares the main ideas and perspectives gathered through written submissions and face-to-face consultations undertaken between August and December 2015. This includes observations about what is currently working well and where improvements can be made in the design and delivery of TEI services for vulnerable children, families and communities.

A range of stakeholders participated in the TEI program reform consultation process, including service providers, FACS staff, government and other related service delivery organisations and clients. Over 500 written submissions were received and 26 district consultation forums were attended by 1,100 participants. Separate consultation forums were also held with Aboriginal Stakeholders in 11 locations. Over 1,800 clients of TEI services provided their feedback through an online survey, with 85

clients participating in focus groups and one-on-one interviews across metro, rural and regional locations.

In the main report, the responses from the consultation process are presented as eight key themes. A summary of each key theme is provided below.

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

There was strong support for a service system that is more flexible and client-centered. A range of changes for improving flexibility were identified, including:

- **Relaxing current geographic boundaries** – The way clients access TEI services is not reflected by the current geographic boundaries which can impact service continuity. Proposed approaches included realigning boundaries, supporting staff to travel to assist with program delivery, implementing state-wide models and the co-location of services.
- **Increasing flexibility of intervention timeframes** – Intervention durations were seen to be too short to develop trusting relationships, address complex and emerging needs, and therefore, to achieve sustainable outcomes. It was suggested that timeframes for client engagement should be more flexible with longer case management options for those with complex or entrenched issues. However, some respondents considered that increasing the duration of interventions would take away from the ‘targeted’ and ‘earlier’ nature of TEI services.
- **Extending aged-based eligibility criteria** – Age restrictions were seen to result in coverage gaps for children and young people who are located outside or between cut-offs for relevant programs. In these cases respondents proposed that service providers should be able to exercise professional judgement on eligibility. A limited number of respondents advised against changing age criteria as it would result in a deviation from the purpose of TEI and reduce the effectiveness of referrals to more appropriate services.
- **Re-developing program guidelines** – There were mixed responses on prescriptiveness versus increasing the clarity of guidelines. Respondents generally agreed that guidelines would be improved if they had a better sense of client needs and put fewer restrictions on client eligibility and service provision. This would ensure the programs are adaptable and responsive to changing client needs and can meet the demands of the local context. There were mixed views about the value of prescriptive descriptions to inform what and how funding could be applied. Some found instructions helpful while others found they constrained flexibility.

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, Murrumbidgee

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

Generally, TEI programs are reaching clients at higher risk and are having a positive impact on people who access services. However, specific groups of vulnerable people continue to have difficulty accessing services, including:

- **Aboriginal people** – See section 3 above.
- **People who are geographically or socially isolated** – Current funding arrangements, guidelines and service descriptions are not seen to support physical access to services for geographically and socially isolated people. There was a recommendation for increased funding for targeted communication and promotional materials, outreach services and home visits to improve service delivery and better target socially, linguistically and physically isolated clients.
- **People from culturally and linguistically diverse backgrounds (CALD)** – Cultural competence training would allow the TEI sector to be more sensitive to the unique vulnerabilities faced by CALD communities, with some suggesting this training should occur both within FACS and across government agencies where there is integration with the TEI system. A need to fund interpreting and translating services was also identified. Ultimately, it was stressed that consulting with CALD communities, leaders and families was critical in improving service delivery.
- **People experiencing mental health, drug and alcohol misuse, child sexual abuse or domestic violence** – There is a need for integrated partnership approaches for people experiencing mental health, drug and alcohol misuse, child sexual abuse and domestic violence issues, with an emphasis on intensive and holistic casework approaches. Improved access to specialist services including rehab services, trauma-specialist services, counselling, and child focused therapies was highlighted as a priority.

Access to safe and affordable housing was identified as a critical service gap for vulnerable groups, particularly for those impacted by mental health, drug and alcohol and domestic violence issues.

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

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

Written submissions and consultation forums with Aboriginal stakeholders emphasised the need to consider how funding can better target Aboriginal needs and priorities and how TEI services can build on what is already working in the delivery of effective and culturally safe programs. Feedback focused specifically on the following key areas:

- **Levels and transparency of funding** – There is a need target funds to Aboriginal people and priorities, as current services are not seen to meet the true level of demand. Issues of clarity and transparency also compounded questions about the adequacy of funding distribution. Greater transparency of funding would help ensure organisations are held accountable for the funding they receive for Aboriginal services.
- **Aboriginal stakeholder involvement in the design, planning and delivery of services** –The involvement of Aboriginal people, leaders and organisations in the design, planning, funding and delivery of programs is needed to identify the most important priorities for Aboriginal people. Key priorities requiring additional support were identified, including men’s support services, domestic violence services (including support for perpetrators), youth and drug and alcohol services, particularly for methamphetamine use. Aboriginal stakeholders voiced many of the same issues raised in the broader consultations (including program inflexibility, geographic boundaries, short funding cycles and age-based restrictions to service) and provided additional insight into how these issues specifically affected Aboriginal clients. For example, it was observed that TEI programs do not appropriately recognise Aboriginal concepts of “family” and as such do not take into account the role of kin in caregiving.
- **Culturally appropriate services that reflect Aboriginal models of practice** – Much of the feedback touched on the issues of cultural appropriateness and cultural safety, with local Aboriginal capability seen to be critical to the delivery of culturally safe services. FACS was recommended to make specific provisions to support hiring and training Aboriginal workers, as well as cultural awareness training for non-Aboriginal workers to lift cultural competence across the sector. Numerous examples of better practice were provided, including integrated community approaches, soft entry points, co-location of services and community hubs.
- **A wider view of Aboriginal service networks** – Consistent with the broader consultations, respondents highlighted the importance of building capability within service networks. In the context of Aboriginal families and communities, this extends to a wider group of Aboriginal organisations that provide services to Aboriginal people and their families.

Each community is different and should have a say in their priorities for their own local services. – Aboriginal stakeholder workshop participant, Mid North Coast

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

Partnership and collaboration were recognised to bring significant benefits, including a greater understanding of local priorities, and capacity and capability building of providers to meet client needs. Partnerships in local areas are generally seen to be working well, and suggestions were provided for how collaboration could be better supported, including:

- **Increasing knowledge and awareness across programs and locations** – The need for accurate service mapping to facilitate connections, improve referral pathways and coordination and create local networks was highlighted. Existing local government information on community needs could be used to build profiles of local communities and assist services to identify ‘at risk’ groups.
- **Increasing the number of place-based approaches within a local area (e.g. community hubs)** – An increase in place-based approaches was supported by clients, who felt that when they require services for multiple needs, only some providers were able to offer the mix of services.
- **Facilitating district decision making in the design and delivery of local services** – Localisation, through shared meetings and forums and standardised practices, policies and systems, was identified as an opportunity to build capability, and facilitate more timely, integrated and flexible service delivery.
- **Changing governance structures** – Changes in cross-government coordination and district level governance frameworks could help align accountability and improve integration. It was also noted that contract agreements should account for the time and resources required to build and maintain partnerships. The competitive tendering process was generally seen to hinder collaboration between service providers, prevent information sharing and create service silos.

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

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

Feedback reflects the belief that TEI programs are making an important difference in clients’ lives which supports the research that TEI leads to substantial improvements in client outcomes. Clients reported benefits such as stronger social connections within the community, development of new skills and greater control over their lives. Clients also indicated that they felt less isolated, had lower levels of depression and anxiety and better support networks as a result of accessing TEI services.

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

– Service Provider, Families NSW

Sector respondents also described the positive impact of TEI programs and suggested that outcomes could be further enhanced by engaging vulnerable people earlier in the risk continuum to address problems before they escalated to crisis. This would enable a more proactive service system focused on earlier intervention.

Importantly, respondents described a need for increased funding to deliver TEI services that assist more people earlier.

Respondents noted that even for programs where the target client is low to medium risk, there has been a shift in practice towards targeting people closer to the risk of significant harm (ROSH) threshold. Reasons cited for this include lack of clarity regarding services targeting ROSH versus non-ROSH clients, a culture of crisis-centred service and gaps in the provision of universal services. These factors were seen to lead to situations where families at the early stages of needing support fall through the cracks and end up in the child protection system when their low-risk need escalates to a high risk over time.

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

The limitations of existing data collection and reporting systems were highlighted as key issues. A number of recommendations to improve the consistency of the reporting, monitoring and sharing of information were provided:

- **A consistent, outcomes based approach to support a more client centric system** – Focusing on outputs limits the ability to measure success. A need for qualitative data collection and a mixed methods approach was recognised and respondents saw merit in increasing the use of an outcomes framework.
- **A greater focus on sharing and following evidence-based practices** – Feedback indicated a need for mechanisms to ensure consistent evidence-based service delivery across programs and providers. Greater use of academic research was also identified as a way to support evidence-based practice.
- **Standardised information systems and processes to support consistency** – A shared database and client management system would be useful in bringing together client and service information and make it easier to record client outcomes over time and across services. Improved reporting efficiency would also allow staff to have more time with clients.

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

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

Frontline staff and strong relationships with clients were seen to be critical to achieving positive outcomes. The capability of individual practitioners to build relationships with vulnerable clients and apply and tailor services to best meet clients' needs was particularly valued.

High quality practitioners and service providers identify with a range of capabilities. These included the ability to:

- **Adopt client-centered, strengths-based approaches** – Services focusing on individual clients' strengths and capabilities were seen to empower clients.
- **Deliver effective case management** – The right balance between informal and formal case management was seen as important. Informal approaches were considered a safe and non-stigmatising way to introduce clients to services and formal approaches were recognised as ensuring clients receive assistance and support across the service spectrum.
- **Apply and tailor evidence-based practice** – The opportunity for evidence-based approaches to be applied with greater consistency across the sector was identified.
- **Deliver services in a culturally appropriate manner** – Cultural competence should underpin the planning and delivery of TEI services. Respondents emphasised the importance of building cultural competency across the TEI sector, particularly given the specific needs of CALD and Aboriginal clients and communities.
- **Capture and share data and information** – Improvements in data reporting and information sharing would contribute to better service delivery. Any changes to data collection must be supported by appropriate training and capability development.

In order to maintain capability across these areas, there is a need for increased professional development and training as well as mentoring, opportunities to collaborate and requirements for NGOs to establish workforce development plans.

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

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

Feedback identified a need to review the appropriateness and efficacy of current funding arrangements. Current funding cycles were seen to present challenges for effective service delivery, limiting the ability to deliver program continuity and attract and retain high quality staff.

Respondents emphasised the importance of investing time to properly engage with communities and ensure that services are appropriate for the clients and families they

serve. Five year funding cycles were recommended by many, while some suggested that even longer funding cycles would be more appropriate to address generational issues.

Providers generally felt that longer funding cycles would 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 lengthen support durations. Some providers noted that they would be more inclined to invest in innovative practices if they had funding certainty for a greater period of time.

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 shift 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

Next steps

Feedback on how FACS should continue to engage with stakeholders as the reform progresses was provided. Respondents emphasised the importance of engaging early, actively and honestly throughout the reform process, and the need to ensure realistic timeframes and the use of best practice change management. It was also noted that decisions on funding and implementation timing should not be made until the shape of reform is determined and local consultation and planning has occurred.

The following timeline for the reform activities has been communicated to the service partners:

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