



Family &  
Community  
Services

# Summary of Prevention and Early Intervention Local Case Studies Project Report

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This report summarises how the Prevention and Early Intervention (PEI) service delivery works in practice, identifies good practice and barriers to effective outcomes and identifies recommended improvements so that the existing system could be better aligned to have an earlier impact.

In late April 2014, Nous was commissioned to undertake a short project to examine PEI practice in four local areas: Greater Western Sydney, Illawarra, Redfern and Kempsey. Information was gathered from services and programs aimed at improving child wellbeing and child protection measures delivered by government and other organisations on behalf of State Government including Non-Government Organisations (NGOs), private providers and local government. In total 39 agencies/organisations were consulted including health agencies, police, education and family services.

## Brief summary of key findings

Across all of the areas examined, it was identified that effective collaboration and information exchange were key factors in ensuring that PEI works in practice.

The need to address the fragmentation of service delivery and the effectiveness of funding and contracting models was also highlighted. Building trust and strong working relationships was a common focus on the wellbeing of children, young people and families.

Other key findings were as follows:

- The current service system is fragmented and program-centred rather than person-centred which often contributes to adverse outcomes for vulnerable children and young people
- Lack of planning of services and the siloed nature of organisations and programs create barriers
- Inflexibility of program criteria and funding rules
- Gaps in services for medium-risk families
- Lack of access and awareness of services
- Diversity within areas needs to be taken into account and services tailored to specific area needs
- Designing and delivering services at a local level to be owned by the community allows ownership and a depth of knowledge which means programs can be directed more specifically at the real risks that families and children face as well as assessing what is and is not working at a local level
- A clear understanding of referral pathways needs to be determined; children are often not referred to services early enough by common contact points such as GPs, school teachers, neighbours and community workers
- Acquiring and retaining staff leads to stronger relationships, community partnerships and supportive environments allowing for engagement and collaboration within local areas
- Collaboration and interaction needs be embedded into job roles to increase effectiveness and increase confidence in between organisations
- Information sharing increases trust and confidence between services
- People in key positions such as school principals must be expected to play a vital role in PEI in the local community, supported with funding for training and staff resources
- Early engagement and support is required for vulnerable or at risk people (ideally from pregnancy in regards to parenting support)
- Funding uncertainty dampens workplace morale and inhibits workforce planning

## Project approach

The key themes examined across the 4 case study sites were identified as:

- Service system/delivery
- Collaboration and coordination
- Information exchange
- Workforce
- Funding and contracting
- Governance
- The ideal prevention and early intervention system for children 0–5 years old

## Project methodology

Site visits were conducted including one-hour interviews with government agency representatives, non-government stakeholders and service providers, regional coordinators teleconferences were held and data analysis was conducted. Lead agencies for this project were the Department of Family and Community Services, NSW Health, Police and Justice and Department of Education and Communities.

Nous also conducted a desktop review of 5 key sources of information related to best practice for systems reform in prevention and early intervention for vulnerable children and families, they were:

- *Prevention and Early Intervention: A Review of Research and Practice for Prevention of Early Intervention, Australian Research Alliance for Children and Youth (2015)*
- *Keep Them Safe Interim Review: Location Based Evaluation, KPMG, 2012*
- *Collaboration between sectors to improve customer outcomes for citizens of NSW: Research report prepared for the NSW Public Service Commission, Nous Group, 25 October 2013*
- Extracts from *Workforce Survey* undertaken with the mandatory workforce as part of the KTS Outcomes Evaluation
- Extracts from transcripts of selected interviews undertaken as part of the KTS Outcomes Evaluation (confidential)

## Limitations

There are 2 main limitations of this project; the short timeframe meant that sometimes the preferred representative was not available for interview and the views of children and families who receive PEI services were not within the scope of the project (the data collected was from site consultations, teleconferences and desktop reviews only).

## Key enablers and barriers

The desktop review of the ARACY Literature and System review, KPMG Location Based Evaluation, Nous Collaboration Research Report, KTS Workforce survey and Transcripts KTS Evaluation identified key enablers such as: targeted functions and dedicated roles, a holistic approach, mutual goals, funding flexibility and parenting skill development. Barriers were identified as: lack of local awareness, variations in workforce capability, misaligned incentives and timelines and irregular contact.

The key enablers and barriers identified in the local case studies are detailed in Table 1 and Table 2.

Table 1: Enablers identified from local case studies

Key area	Enablers identified from local case studies
<b>Service system/delivery</b>	<p>Locally driven planning and management to adapt services to local conditions</p> <p>Clear referral pathways</p> <p>A whole-of family approach (which includes parental supports)</p> <p>Soft entry points to engage families</p>
<b>Collaboration and coordination</b>	<p>Strong relationships and trust</p> <p>Formal collaborative structures</p> <p>Chapter 16A: the permission for agencies and NGOs to share information that helps deliver services and supports to promote the safety, welfare and wellbeing of child or young person</p>
<b>Information exchange</b>	<p>Strong relationships and trust</p> <p>Formal structures and arrangements</p> <p>Chapter 16A</p>
<b>Workforce</b>	<p>Selection of the right people for key positions</p> <p>Sustained training and positive attitudes to the importance of training</p> <p>Funding certainty</p>
<b>Funding and contracting</b>	<p>Sufficient level of funding</p> <p>Clear program specifications</p>
<b>Governance</b>	<p>A shared agenda or goal</p> <p>Action-oriented</p> <p>A focus on collaboration</p> <p>A backbone or lead agency</p> <p>Broad representation (cross-sector and cross-agency)</p> <p>Connections to decision makers</p>
<b>The ideal prevention and early intervention system for 0–5 year olds</b>	<p>Early engagement, from in utero</p> <p>A whole-of family approach (which includes parental supports)</p> <p>Strong school involvement</p>

Table 2: Barriers identified from local case studies

<b>Key area</b>	<b>Barriers identified from local case studies</b>
<b>Service system/delivery</b>	Transport and housing issues Limited flexibility to provide practical supports Fragmented services
<b>Collaboration and coordination</b>	Insular and siloed organisations / programs Competitive tendering models which discourage collaboration Workforce churn Capability and time
<b>Information exchange</b>	Privacy-centric and insular organisations Limited capability and knowledge Limitations on database access
<b>Workforce</b>	Difficulties attracting and retaining staff Staff shortages for particular roles Low levels of pay
<b>Funding and contracting</b>	Uncertainty of funding Inflexible program criteria and funding rules Competitive tendering models Insufficient level of funding
<b>Governance</b>	Limited time and resource commitment A narrow focus on discussion and information exchange
<b>The ideal prevention and early intervention system for 0–5 year olds</b>	No specific barriers were raised

## Good practice and improvements

Some of the good practice measures identified from the desktop review are: leadership helping maintain a sense of shared purpose and endeavour, a common approach to assessment, referral and support, embedding collective responsibility, local decision making, outcome-linked funding, regional implementation groups and strength-based approaches to schooling (building on children's prior learning).

Suggested areas for system improvements were identified from the local case studies. Details of these can be found in Table 3.

Table 3: Suggested areas for improvements

Key area	Suggested areas for system improvement identified from local case studies
<b>Service system/delivery</b>	Local and coalface input to services design Housing as part of PEI Individualised supports (child/client focus) Address gaps for medium-risk families PEI for 8–12 year olds
<b>Collaboration and coordination</b>	A shared mission or goal for PEI in the area Engagement of workers at the coalface in collaborative activities and structures Involvement with schools Independent facilitators of collaboration
<b>Information exchange</b>	Resource development (information packs, network maps) Wider access to streamlined databases Lead agent to coordinate information exchange Sustained training on Chapter 16A
<b>Workforce</b>	Active recruitment to address workforce shortages for identified roles Training which is targeted at negotiation, engagement and relationship building skills Training which is practical and on-the-job Collaboration included as an explicit criterion in selection for key positions



Key area	Suggested areas for system improvement identified from local case studies
<b>Funding and contracting</b>	<p>Individualised supports as a funding model</p> <p>Review of timelines for funding</p> <p>Communication on funding changes and program reviews</p> <p>Evaluation frameworks for programs</p> <p>Amendments to funding and tendering systems to incentivise collaboration</p>
<b>Governance</b>	<p>Funding for concrete regional projects</p> <p>Designated secretariat and lead agency</p> <p>Resources allocated by organisations for regional governance involvement</p> <p>Mechanisms to ensure accountability and the ability to escalate issues for resolution centrally</p>
<b>The ideal prevention and early intervention system for 0–5 year olds</b>	<p>A one-stop shop for early childhood PEI</p> <p>Stronger role for supported playgroups and day care on school premises</p> <p>Increase in allied health and treatment services</p> <p>Increased parental supports</p>

## Appendix A: Interview outline

The following outline was used to guide each of the interviews for the local case studies:

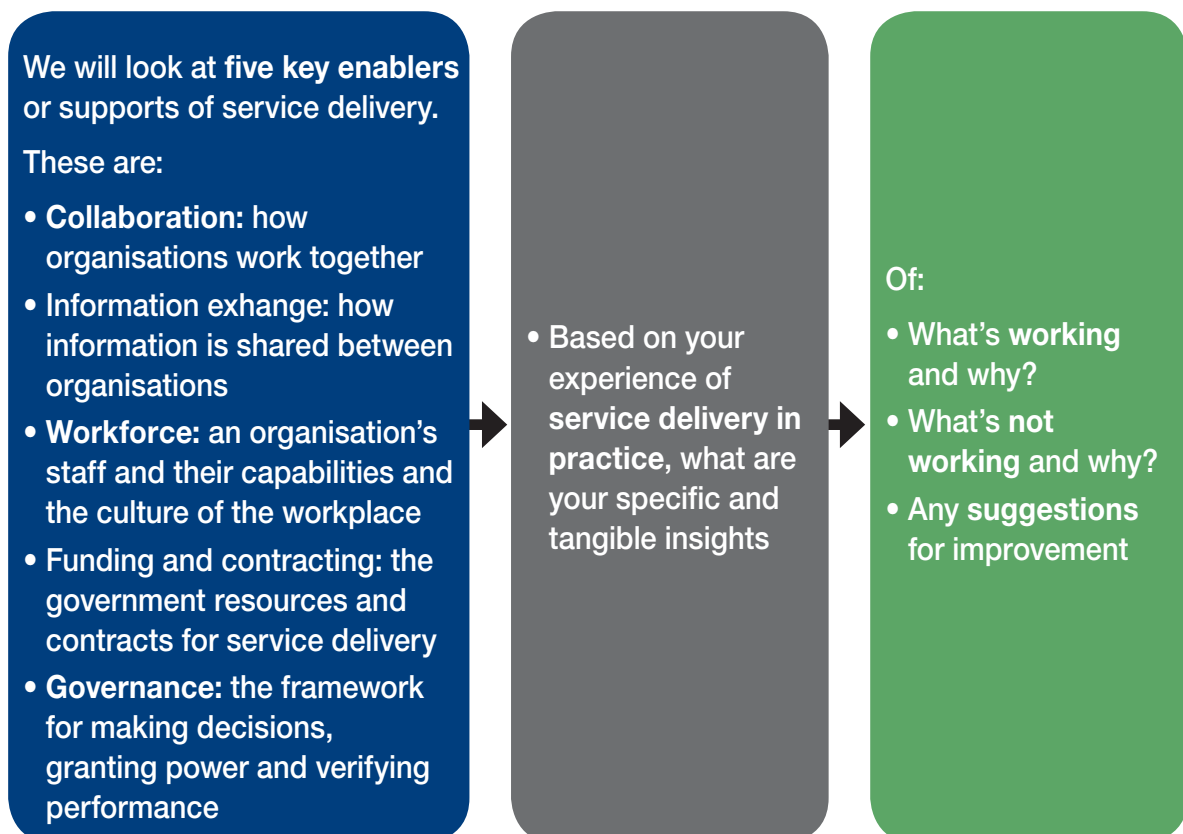
### Your background and experiences with PEI services

- Please confirm your role and key responsibilities with regard to prevention and early intervention (PEI) services.
- Do you have any further/past experiences with (PEI) services?

### The PEI services available in the region

- What are the main PEI services for children and families in your region?
- Please briefly describe three of the more common service interactions with children and families in your region (you might like to give some de-identified specific examples).

### The enablers and supports for effective PEI service delivery



### Conclusion

- Do you have any further insights or key success factors for the PEI system for 0–5 year olds?
- Do you have any further comments on how to best deliver PEI services in your region?



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