Report

TEI Program Reform Hunter New England District Workshops

Department of Family & Community Services

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INTRODUCTION

The NSW Government has initiated a reform of the Targeted Earlier Intervention (TEI) Programs, managed by the Department of Family and Community Services (FACS), which cover a broad spectrum including:

- Community development
- Prevention and early intervention
- Support to families with greater need.

Under these categories are nine programs, all of which aim to improve child and family outcomes and build community capacity. The nine programs are:

•	Child Youth and Family Support (CYFS)	\$54.2m
•	Community Builders	\$43.1m
•	Families NSW	\$26.5m
•	Youth Hope	\$10.2m
•	Staying Home Leaving Violence	\$5.0m
•	Aboriginal Child Youth & Family Strategy	\$4.3m
•	Integrated Domestic & Family Violence Services	\$3.5m
•	Getting it Together	\$2.1m
•	Positive Parenting Program (Triple P)	\$0.48m

FACS has recently released a *Sector Consultation Paper* as part of the engagement process on the TEI reforms¹. The paper sets out the reform aims, which are to:

- Improve outcomes for clients of targeted earlier intervention services
- Create a service system continuum grounded in evidence-based best practice
- Target resources to those with the greatest needs
- Facilitate District decision making on the design and delivery of local services
- Increase flexibility so that clients are the centre of the system.

http://www.facs.nsw.gov.au/__data/assets/pdf_file/0005/335165/CS_TIER_consultation_paper.pdf



¹ Department of Family and Community Services 2015, *Targeted Earlier Intervention Programs Sector Consultation Paper*,

The consultation process for the TEI reform comprises several elements:

- District responses to the Sector Consultation Paper
- Specific cohort consultation sessions (managed by the Families and Place Unit of the FACS central office in consultation with peak organisations)
- District-led consultation sessions with the local sector
- Inter-government consultation (managed by Families and Place).

To assist the District-led consultations with the local sector, Families and Place offered to provide an external facilitator and Nexus was subsequently engaged to facilitate sector consultations for a number of the 15 FACS Districts. This paper summarises the key outputs of the facilitated workshops for the Hunter New England District held in Armidale on 1 October 2015, Tamworth on 2 October 2015, Newcastle on 7 October 2015 and Maitland on 12 October 2015. The report is structured is follows:

- Section 1 presents some key themes that emerged across all the District consultations
- Sections 2 to 5 present the data from the small group discussions of four TEI reform questions:
 - 1. What works well with the current District TEI services and service system?
 - 2. What are three key things you would change to improve the way TEI services are delivered in the District to vulnerable children, families and communities?
 - 3. What are three key things you would change to improve FACS's management of TEI programs?
 - 4. How would you like to be informed and involved in the reform and consultation process?

The data for sections 2 to 5 were derived from 'report back templates' (see appendix 1) that were used to capture the key messages from the small group discussions. It should be noted that these data are in raw form and have not been edited or analysed. Accordingly, the responses should not be read as representing a consensus and, indeed, some responses are in conflict with others.

Nexus has also prepared a report that consolidates the key state-wide themes across the above four questions.



1. KEY THEMES

Fourteen key themes or 'areas of concern' emerged from our consultations across *all* Districts:

- Flexibility
- Service coordination
- Service integration
- Resourcing and procurement
- Data collection and reporting
- Outcomes measurement and evaluation
- Evidence-based decision-making
- Capabilities of the sector
- Responsiveness and adaptability
- Service relevance/legitimacy
- Autonomy
- Continuum and quantum of services
- Engagement
- Client-oriented service design.

Many of these themes cut across issues of service system design, service delivery, program improvement and program support. It is important to note, however, that these themes resonate differently, depending on the context that which they refer to, and to keep this in mind when drawing insights from the data presented in the next sections.

For example, while service flexibility was identified frequently across all districts, it was used in different senses. In many cases, flexibility referred to either increased service provider autonomy in decision-making, and in some cases, less rigid contractual arrangements. From the perspective of the service system design and service delivery, flexibility was also identified as the general 'sector or system capability' required in order to accommodate differences in delivery styles, service culture and ways of working, and to adapt to different community or client needs. In other contexts, flexibility referred to a broadening of program guidelines, definitions (particularly definitions of early intervention) and funded activities, and implies program design change, rather than system change necessarily.



2. WHAT WORKS WELL

What works well with the current District TEI services and service system?

Armidale

- Soft entry points
- Community Hubs are a good model
- Local trustful relationships with clients and community
- Expertise in delivering support services to clients
- Diverse range of services reaching broad range of clients
- Casework
- Flexibility
- Good relationships between CPOs and services
- Previous reforms increased partnerships and information sharing
- Working together/partnerships (e.g. strategic planning processes)
- Families NSW supported playgroup
- Flexibility of Families NSW program
- Community hubs offering space for multiple programs to operate from
- Universal services provide good soft entry points
- Services do build resilience

- Good level of interaction with interagencies
- External agencies relationship with other organisations
- Positive relationships with CPO & FACS
- Relationships influence the business achieved
- YDO's
- Diversity that the services are delivering
- Continue to improve what is working well BUT we need to know what IS!!
- Universal entry point, soft entry point works well no wrong door
- Partnership between services people want to be involved childcare centre, health workers around the circle



- Developing good data/evidence of what works in same areas of practice universal
- Soft entry points (youth drop in, schools, playgroups) interagency and collaboration
- Specialist services
- Underpinning philosophy
- Good collaboration between programs often facilitated by CPO
- KTS reforms school forums, MRG
- Contracting portal
- Families NSW, playgroups, soft entry
- Partnerships and collaboration
- No wrong door approach for clients
- Relationship and support from CPO
- Innovation in partnerships
- Need more resources
- Competition between organisations is not helpful and is anti collaboration and partnerships
- Outreach services that are working well that are networking well, resourced well re: staffing hours, the community is aware of service existing and what it does
- Working well with existing service, using each services strengths and promoting unity and clear case planning for families
- Service provision flexibility offering a range of soft point entry for services e.g. supported playgroups - groups supportive/therapeutic in nature
- Local and place based services that are well resourced, qualified staff and that communities can access easily and are aware of services
- Funding is flexible, can budget according to outcomes (for some service providers, for others it's the opposite)
- Networks, partnerships, participation in interagencies, collaboration
- Flexibility with target groups (for some)
- Youth service group work feeds into individual case management



- Partnerships with districts, relationships between services collaboration
- Services working flexibly despite limitations in referral criteria/funding etc
- Youth development officer providing support/information
- Family insight sending information re: groups/programs running in the areas
- Brighter futures working up to 2 years enough time for engagement
- Services being trauma focused
- Outreach approaches services being able to see clients where they want to be seen
- Location of services good geographical spread and being embedded in local communities in neighbourhood centres provides a soft entrance for clients
- Centre-based services plus outreach services allows for client-focussed services
- Good partnerships with other service providers via interagency meetings etc - YPO's
- CYF Alliance/interagencies brought region together and on the ground services collaborate well, work around client needs and community
- Strong localised responses especially in Lake Macquarie
- Ability to deliver more flexible services in discussion with FACS CPO
- Previous reforms increased partnerships and information sharing
- Multiple entry points for clients, services that can deliver range of programs and support (home visiting, outreach groups)
- Where funding is for long term intervention and case management able to build relationships and implement embedded change. Flexibility to meet needs of clients and respond to complex needs
- Ability to work collaboratively within sectors
- Community hubs (first to know) able to facilitate no wrong door and meet needs of entire families with focus on vulnerable
- Ability to respond to community need and design groups or programs to respond



- Some local collaboration in smaller communities, however, small community areas can experience stress of change in staff, boundaries (i.e. HNEH) and CPO's
- · Community Builders works if 'clothes line' model used
- Some examples of genuine collaboration with Aboriginal controlled organisations - but not many
- WAM ICD/community reform one FACS rep
- Local relationships FACS community partnerships
- MACWP localised decision making framework
- Positive changes to information exchange 16A Practice first site
- Tools directory localised services

- Location-specific elements: greater collaboration between services and more support; cooperation between NGO and government in early intervention
- General: more services in remote rural areas; more responsive to changing community needs; soft entry points to enable continuum of service and TEI without stigma
- Strategic planning around engaging Aboriginal families
- Open exchange of information transient families
- Community awareness
- Flexibility of service delivery by one organisation holding various contracts generally in each town/LGA
- The introduction of "one stop shops" Winanghi Aboriginal Centre has been very effective: very few clients come to services with single issues.
- Sharing of information and communication between services has improved under existing funding. Better working relationship between different organisations - more collaborative approach to service clients
- Flexibility within services to meet client needs
- FACS meets their system needs (this however doesn't filter down)
- Dedicated staff ensure service delivery continuum regardless of funding
- Good relationships between CPOs and services
- Good interagency relationships and willingness to work together



- L&D system
- Tamworth Family Support continuum along the whole TEI programs. Also intake systems works very well



3. IMPROVEMENTS TO TEL SERVICES

What are three key things you would change to improve the way TEI services are delivered in the District to vulnerable children, families and communities?

Armidale

- Sharing/availability of knowledge of other services and agencies
- Delivery of support more in line with client needs rather than program requirements
- Improved data collection, reporting and evidence base
- Greater value of existing relationships
- In some areas interagency needs better communication and coordination, better service promotion both between services and community
- True cost of service delivery reflected in funding amounts
- Employment of people with low-level mental health issues as requirement of funding contracts
- Increase wage rates
- Additional funding for remote or isolated community areas
- Reduce program conditionality e.g. Age, brokerage, transport etc
- Less competitive tendering
- Less duplication e.g. Rural resilience program
- Improved data collection, reporting and evidence base
- Flexibility of staffing (designated aboriginal positions are being under utilised by community)
- Time requirements for AFCs needs more flexibility high/med/low needs
- Reduction of waiting lists
- More cooperation/collaboration between services
- Increase services/programs for children 9-15
- Work with client not captured by existing data collection and reporting tools
- Too much reporting
- More investment into soft-entry points
- Service overlaps



- Staff retention in rural and remote areas
- Staff development
- No time/resources to do grant writing
- Broadening of funding guidelines

- Super interagency meeting 4 times a year with allotted times for agencies with CPO in attendance
- Service specs should state times to attend interagency
- Data from other agencies e.g. housing, education and other NGOs
- Being able to collaborate with children services & other funded organisations e.g. state, federal
- Coordination of care for families
- More interaction between funding streams
- Universal approach needs improvement
- Creative to engage the most vulnerable. Need focus on relationships, knowledge of client's needs, funding to support services - soft entry
- Systematic collaboration embedded into service agreements avoid duplication/silos
- Increased flexibility that recognises "on the ground" wisdom/trust SP
- System where FACS rate and give credit to best practice organisations tiered system. Enforce compliance where an organisation is not meeting the mark
- Improved capture of data and evidence of successful outcomes and successful program involvement such as: LoveBites, Through Black Eyes
- Flexibility high, medium and low \$ as appropriate, flexibility in boundaries, target groups
- Outcomes measurement
- Role of wellbeing units they don't know about us, who is the link? FRS?
- Impact of DV on child, youth and family long waiting lists, complex intervention
- One-on-one work
- Flexibility age groups and service element



- **Brokerage EIPP**
- In rural areas funded programs seldom cover the whole area
- All community organisations to have a central intake and sharing
- Identify gaps between funding streams
- Youth soft entry
- Build on local strengths of community address gaps locally, improve networking - services need similar best practice model so they are delivering services with core mission and vision statements
- A family worker located in local schools to help the school environment link in with community services better
- EIPP not only early intervention, working consistently with high risk/needs families. What does this mean in terms of offering services to early intervention families. Workers needing skills in a wide range of situations and needs
- Flexibility within age groups and gaps of service
- More place based (not outreach) in existing services one stop service
- Definition of TEI too narrow services unable to continue providing level of service - families/individuals falling through the gap
- With youth service if group work is taken away lose significant access point for individual clients
- Not being able to report on significant areas of workload

- Changing strategy for reporting for 9 streams factoring in evaluation into the scope of funded services
- Prevention/EI services having to be "pointy end" due to lack of other service options - services being closed, funding changed - accessible services for vulnerable families e.g. CALD
- More use of social media health promotion add on, apps and web pages, anti-violence, parenting, mental health etc
- Support for transport/childcare for families to access services
- Time requirements for FACs needs more flexibility high/med/low needs
- Age limits needs to be extended (currently 18 should be 25 yrs)



- More cooperation/collaboration between government departments education/health/FACS and NGOs - CASE CONFERENCES
- Funding for interpreting services needs to be allocated more appropriately
- Data collection/surveys. Outcome measurement not output. Feedback of children not collected in survey
- Enable longevity of service delivery funding as recurrent, 5 year that allow other sources of funding to be sought and existing staff utilised for new programs integrated and start immediately
- How funding is calculated per service i.e. family unit cost even if working with 4 people. Results based accountability
- What does Early Intervention look like
- Time period extended work with clients (3 yrs) and conditions of deed (5 yrs)
- No funding to outsource to private
- More flexible resource allocation models across contract areas
- · Specs to respond to community need
- Nowhere to refer complex needs
- · Family workers in schools
- Funding models to work collaboratively not focus on numbers
- Funding to wrap around and flexible
- Focus on families (unit centred) not just individuals (person centred)
- More focus/increase resource on early intervention/child family for Aboriginal community organisation
- Be able to give practical support at a local level phone service not helpful
- No flexibility increase flexibility around age
- Portal which portal
- Better purpose for interagency meetings (structured)
- Maintaining continuity of service away from aged based services
- Revisit EBP i.e. Triple P
 - → more culturally appropriate embedded service provision
 - → universal service delivery for early intervention programs



- → change time based measures from 3 months to hours based. Allocate more hours to higher levelled families
- Outcome vs. output are we brave enough to give a pool of \$\$ report back output. Broaden EBP programs
 - → the need for reform of other government agency i.e. Health, justice, education to be done in line with FACS
 - > referral process to be more effective, direct

- Flexibility in funding to overcome geographical and social limitations in order to meet the needs of remote areas
- Male specific TEI programs targeting domestic violence, families and general social issues
- Continuum of service to provide consistency, cooperation, collaboration and coordination to maintain relationships and reduce disengagement
- Continuity of FACS staff
- Multiple contracts = multiple reports/extra red tape and associated costs
- Staff/sector training SHS good model
- Referral processes from FACS: pathways for those in lower priority category; FACS referral minimums not being met
- Contract length establishment and review times affect program uncertainty
- Clearer guidelines are required surrounding role of FACS on the ground. Communication as to the responsibilities of programs and what they are funded to do. Expectations of assistance. Clients slipping through the gaps
- Needs to be more "proactive rather than reactive". When funded programs identify need for extra support need to be able to refer to the necessary support programs without making an official report to FACS
- Lack of focus on needs of individual communities. There is no "one solution fits all". Differences within demographics of communities and the issue of distance to travel
- Travel to isolated clients is not factored into funding levels
- Clear understanding of the need for collaboration between services to meet client needs



- Consistency of skills and standards of services working with children and families
- Better communication system for all services to know what is/has happened for a family
- Referral process clarity around suitability/eligibility and improved involvement with partners - education/health
- Improve gap in service delivery i.e. pyramid primary/secondary/tertiary where does everyone fit



4. FACS'S PROGRAM MANAGEMENT

What are three key things you would change to improve FACS's management of TEI programs?

Armidale

- Consistent and regular communication from FACS and accessible CPO
- Transparent agenda's across all levels of FACS
- Autonomy to extend funding and allocate additional funding to organisations to deliver services outside funded program areas
- Extended working with client timeframes
- Improved data collection tools and outcome measures
- Better engagement with Aboriginal services
- Consistent and regular communication from FACS and accessible CPO
- Improved data collection tools and outcome measures
- CPOs have greater autonomy to negotiate funding extensions or change requests
- Improved data collection, reporting and evidence base
- More regular feedback to services from FACs
- Regular reviews of community needs
- Peer support' for service providers
- Client reporting = client person centred reporting

- Be more proactive and more cross over and fluidity of service provision between different funded services
- FACSs to be more flexible with service specs and CPOs being more responsive in a more time efficient manner
- Data systems
- Flexibility in their responses to local needs
- Funding body needs to listen and respond to rural areas particular requirements/needs





- CB data portal and surveys need to change completely to reflect the work done by the services
- Reflective of emerging local needs FACS is a conduit
- Improve accountability for genuinely knowing who is performing in line with PA and who is not
- Right and left hand knowing what the other is doing
- FACS to provide \$\$ for us to attend these forums etc or provide video conferencing/webinars
- Consistency of CPO input/contact
- CPOs have consistent messages not interpretations, definition of terms
- Focus on a linking role both funded and unfunded services
- Relationships in wider sector how do we make relationships structural rather than relational
- Data collection, recording not accurate reflection of services, activities, surveys not relevant for activities
- Streamline data collection, too much time is spend recording, reporting and paperwork - very little feedback
- CPOs need to proactively engage with the services they are responsible for (many services report little contact with their CPO)
- Community development is hard to fit in the framework difficult to provide evidence re outcomes
- Relationship culture of FACS and NGO better knowledge of systems/working with families in safety/contract plans - training of NGO workers to better understand FACS processes. Earlier contact with support services to engage with families with FACS worker - warmer referrals
- Greater flexibility in service agreements, and service agreements reviewed more often ensuring they are still meeting community needs
- Improved data collection both the systems of collection and ensuring the data collected is meaningful
- Client responsive transition planning with individual funding

Meeting more FACS CPOs to discuss client needs/service provision before contract renewed/completed - negotiation within service delivery schedule



- Improving accountability of FACS
- Program reporting would be consistently streamlined portal much less complicated
- Moving with changing needs of clients/communities flexibility with use of funding - within the contract - seeing benefit in creativity in interventions
- Changing prescriptions for service specs e.g. See between 300 600 clients
 this isn't client centred, it impacts on client relationships, service provision, outcome activities within service models/benchmarks etc = restrictive
- Clarity of CPO's role in relation to program delivery. Improved communication
- Broader support of more innovative programs extension of supported parenting programs that better meet the needs of specific client groups
- More consultation with service providers for improvements to data reporting tools
- Consistent and regular communication from FACS and accessible CPO
- Recognise the need for both generalised and specialist services within the El sector, ongoing funding for professional development
- No record of qualitative work in assessment, referral, clients supported outside of funded guidelines
- Client reporting = client person centred reporting
- Currently a lack of consistency/flexible/and be able to report on partnerships that gain outcomes - evidence based qualitative reporting
- More consultation with CPOs, no gaps with CPO staff, keep staffing levels up
- More evidence based targeted training for TEI services. Client CCWT used to be free...FACS to pay for replacement of staff when off on training. Local and regional
- TEI implementation groups
- Local mapping of partnerships, including partners with Aboriginal controlled organisations
- Real examples of collaborative practice neighbourhood centres
- Community Builders model more accessible
- Local district see reporting early with 1 portal
- International models that don't work locally i.e. PPP



- Ensure enough frontline staff to provide timely referrals from ICD to NGO services. Current wait time for referrals could be up to 5 weeks
- How referrals flow from government agency to agency i.e. Police to FACS that don't reach threshold
- Referrals before crisis/increased vulnerability from first to know services police, justice (FACS to take lead)
- Weekly allocation meetings cases are allocated to services
- Interagency case discussion wider group representation from schools etc - then referrals made

- Clear processes in place to ensure accountability, support continuous improvement, review program outcomes and establish clear feedback processes. Transparency in service funding and delivery requirements consider organisational viability when allocating funding
- Consistent data reporting systems across all programs with outcomes measured. More user-friendly with better training. Reports which reflect numbers
- Greater flexibility to facilitate integrated case management to support outcomes identified at a local level, keeping aligned with clearly defined strategic vision FACS 2020 etc
- Contracting one contract no matter how many programs
- Results-based reporting
- Contract length acquittals not yearly allows planning and building of program
- Greater respect shown by FACS's workers on the ground. Need to assure that FACS staff follow protocols when working with organisations
- Greater communication with CPOs and timely responses to issues raised
- Reporting improved data collection systems. Current system too time consuming and not an effective reporting tool. No allowances for changes in service delivery - portal not aligned to PLAs - surveys for snapshot months; not relevant and not capturing outcomes
- Improve reporting processes/portals
- FACS to facilitate networking between specifically FACS funded services and other government organisations e.g. DET, health, corrective services



- Funding to match isolation and distance to reach families
- More informed meetings with services/allocations/suitability vs. eligibility
- Better communication between managers and case managers as to services and capacity
- Better understanding of programs to ensure referrals are suitable not just eligible



5. TEI REFORM CONSULTATION

How would you like to be informed and involved in the reform and consultation process?

Armidale

- Forums are good to keep people up to date with FACS thinking and opportunity for feedback (more forums at appropriate times)
- Funding available to cover costs associated with Face-to-face and reform engagement
- Short surveys followed up with face-to-face meetings about results
- Networking with other services that complement each other
- Block funding
- · Consultations with Aboriginal services and community
- Short surveys only 5 questions
- Opportunities to network with other services
- Email
- Face-to-face forums
- Written submissions
- Variety of communication methods
- Face-to-face forums
- Smaller, digestible topics rather than long reports
- Use language that sector understands so they can feel comfortable to provide feedback
- Consultations with Aboriginal services and community

- Would like the CPO to inform service providers
- Bi-weekly communication by Andrew Hunter
- A little bit more transparency
- CPO to have meetings with all service providers in area
- To see a draft document of delivery model before approval



- Timely information and consultation
- Involved in change management strategies
- Video conferencing/webinars
- Fund our involvement
- Inform us in a timely manner timeframes need to be "stuck to"
- Round table discussions
- **Email updates**
- FACS attend interagencies + update
- Webinars
- Distribution of data including local trends
- In a timely manner, with more communication stage by stage
- Feedback from today
- Email at least informing of updates to check on website
- Make information from other areas available
- Advice re: timeframes as the evolve
- No portal
- Respect local knowledge, community specific

- More connection to CPOs discussion, negotiation, flexibility
- Forums/workshops interagency approach
- Reviews at multiple points of the process
- Greater frequency of consultation meetings with all service deliverers together
- Regular FACS updates on website about what:
 - → consultation has taken place
 - → emerging issues
 - → key stakeholder submissions
- Early and targeted training when reform implemented
- Input to draft reform at later stages, feedback about how sector input informed policy



- Frontline workers involved in training and education re: reforms, not just management feeding information down
- Through CPOs and email to be able to give to staff
- Consultation to be transparency and genuine, not jargon
- Information to be given ASAP not sit on tables for months four us to be able to get on with business
- YDO's to be informed to be able to engage sector
- Localised think tanks
- Have a district committee to have dialogue with
- FACS have conversation with organisations who are working well
- · Early notice if the funding will shift, how will it shift
- Provide enough time to consult with community
- Make changes and localised trial sites to report back to FACS. Ensure proper evaluation practices
- Taree, Forster, Gloucester region to trial the new reforms no program distinction, client first, balance right between level need and service

- Continued consultation around client and community and existing funding at a local level (LGAs)
- F2F discussions
- Constant email updates monthly
- Surveys quarterly
- Further face-to-face consultations 6 monthly
- Video conferencing
- Reflection of industry ideas
- Regular, relevant, clear and concise updates about the reform process via email and interactive webinars; ability to type questions during webinar and have them addressed. Given tyranny of distance this is far more effective use of time
- Feedback from the consultation process like to see feedback from other areas in the state as well



- Communication on changes of processes (portal) and training provided (governance) for boards
- Information to be consistent across the board. Same information to all services
- Links on website for input not just emails. Access to other service comments and responses in a timely manner (live chat)
- Regular meetings on reform process
- Services are individual and have different processes and goals



APPENDIX 1: REPORT BACK TEMPLATE

Targeted Earlier Intervention Reform District Consultation Sessions HUNTER NEW ENGLAND DISTRICT

REPORT BACK TEMPLATE

1.

What works well with the current District TEI services and service system?			
2. What are three key things you would change to improve the way TEI services are delivered in the District to vulnerable children, families and communities?			
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Targeted Earlier Intervention Reform District Consultation Sessions HUNTER NEW ENGLAND DISTRICT

REPORT BACK TEMPLATE

5.	What are three key things you would change to improve FACS's management of TEI programs?	
١.	How would you like to be informed and involved in the reform and consultation process?	
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