

**Submission
No 11**

CHILD PROTECTION AND SOCIAL SERVICES SYSTEM

Organisation: Tresillian

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Submission to:

**PARLIAMENT OF NEW SOUTH WALES
COMMITTEE ON CHILDREN AND YOUNG PEOPLE
Inquiry into the child protection and social services system**

**Most parents will likely say that parenting is the most rewarding
– while also the most difficult thing they have ever done.**

Parenting is difficult even in the best of circumstances, however when coupled with other stressful life events, parenting becomes even more challenging.

Being in the right place at the right time – Tresillian’s early years strategies supports families with the best foundation possible for children’s early development and safety through support, guidance, coaching, modelling confident parenting practices and resourcing families.



Tresillian®

It's in our nature to nurture

December 2020

Tresillian would like to thank the Parliament of NSW Committee on Children and Young People for the opportunity to respond to the inquiry into the child protection and social services system and to profile the work of Tresillian for children, young people and families across NSW.

The response is made on behalf of The Royal Society for the Welfare of Mothers and Babies also known as Tresillian Family Care Centres.

Tresillian is a public health organisation operating under an ACT of NSW Parliament, which is positioned in a strategic area to influence long term health outcomes. Tresillian's brand is known as a national and NSW centre of excellence, operating within a larger health and welfare service context.

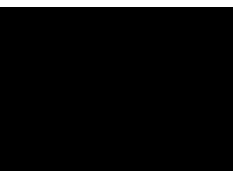
Tresillian is very well positioned to address critical state and national policy goals – in particular, early intervention and prevention services to support healthy attachment relationships, provide tailored family support for optimal development in early childhood and the delivery of “wrap around” parenting support to those families indicating early difficulties to prevent problems from occurring or escalating to the need for protective action.

Tresillian's objectives, first and foremost are about children and their best interests with a focus on matters of child and family health, early parenting, perinatal mental health, health promotion and early intervention and prevention.

Tresillian's guiding principle is to deliver the highest quality service to children and families and to provide children with their right to safety, stability and healthy development. Tresillian provides a strong framework that ensures the quality of service and care are provided to children and families of NSW and the ACT.

Our guiding principles focus on available research, literature, and Tresillian best practice which will continually inform our best service and strength based approach when supporting families.

Sincerely,



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INTRODUCTION

Tresillian's submission will comment on issues relating to the child protection and social services system within the scope of the inquiry's terms of reference.

Systems for child protection in Australia today are facing significant challenges including insufficient capacity to meet the quantity and complexity of cases crossing into statutory child protection and out-of-home care (OOHC). To see real and lasting change, the principle of collective responsibility for protecting children must be realised. When diverse stakeholders learn and solve problems collaboratively they can foster more effective actions and better outcomes for children and families than they could otherwise accomplish when working in independently.

Tresillian works with NSW Health, other government and non-government organisations to minimise inequities of access to care that are often encountered by vulnerable families. Tresillian's residential facilities and family care centres, established in strategic locations across NSW, operate on a hub-and-spoke model to maximise the number of communities we can support with our services which are centred exclusively on families with young children experiencing early parenting issues; many of whom are living with complex risks such as mental illness.

Tresillian understands that "one size" does not fit all and our holistic and tailored services provide individualised support services for families including at risk families. Tresillian provides centre based services (residential and day services), home based services, allied health support, group programs and specialist services for families with vulnerabilities including mental health issues, alcohol and other drug issues.

At Tresillian, our goal is to ensure that all expectant families and those with babies and young children, regardless of where they live, have access to parenting advice, mental health support and parenting services, enabling them to raise healthy families and build healthy, resilient communities.

Tresillian's workforce is integral to the provision of primary, secondary and tertiary care to babies, young children and families and they provide holistic care in a vast range of settings. Tresillian's nursing and allied health staff are in a strong position to identify children at risk of harm and to make timely referrals to health and support services. Most importantly, Tresillian professionals are strongly positioned to implement care and support services that may prevent or reduce the risk of harm to children from occurring.

This responsiveness to families' changing needs, particularly those experiencing challenges in the crucial early years with their children, impacts positively the life trajectory of the children.

Tresillian operates seventeen sites in NSW providing state-wide, regional and local support services. Tresillian provides effective and inclusive services that are user friendly with referral pathways that are flexible, accessible and culturally safe for families including families from Aboriginal and Torres Strait Islander communities and families from culturally and linguistically diverse backgrounds (CALD).

Tresillian considers prevention, early intervention, health education and health promotion as essential service activities that reduce risks. We work with families to set goals to address and prevent harmful behaviours towards their children and promote a protective nurturing environment in which children are safe and supported in the critical early years of a child's life.

1. How vulnerable children and families are identified and how the current system interacts with them including any potential improvements, particularly at important transition points in their lives.

“In order to achieve improved outcomes for families at risk, a paradigm shift is required, so that unequal outcomes are seen as social injustices, rather than as products of individual dysfunction or deficit.” (Slee, 2006)

Research shows that of the Australian child population, 10-20% are vulnerable to adverse health, developmental and wellbeing outcomes. Infants exposed to adverse childhood experiences are at a greater risk of continuing to experience adversity and poor health and social outcomes as children, adolescents and adults over their life course.

Families with the greatest need are often the least likely to access or receive support, and have lower utilisation of preventative health services despite evidence that support in the first few years of life can significantly improve long-term outcomes.

Health and community services play a vital role in the early identification and effective response to vulnerable children at risk of child abuse and neglect. Services including hospitals, community health services, alcohol and drug services, mental health and community service agencies can identify and respond to vulnerability by embedding organisational governance, systems and structures focussed on vulnerable children and families, reflecting a shared responsibility across the service system for protecting and promoting the health, safety and wellbeing of children.

Identification of vulnerability risk allows prioritisation of services to those with the greatest need. Identifying vulnerability risk within child and family health services allows those families at risk of future adverse health, developmental and wellbeing outcomes to be prioritised to receive health services and supports. A shared understanding between practitioners who work with children and families in child health services, mental health services and early childhood centres is key to the identification of the “under-represented”, “invisible” or “overlooked” families.

Supporting practitioners to use their knowledge and experience, including the relationships built with families, to highlight current and potential vulnerable situations, can foster a more comprehensive understanding and consensus on what is required to better support and scaffold these families.

This includes the risk factors for each child and their family in relation to the specific operational/ service context and the promotion of ongoing, consistent identification of areas where additional support is required to foster positive outcomes for children and families.

There is robust evidence that early intervention and prevention by child and family health nurses' who provide care that is responsive and flexible to family's needs promotes infant health, child development, healthy growth and positive parenting outcomes. There are beneficial effects in prevention of childhood injury, reduction of family entries into the child protection system, improvement in child behaviour and cognitive development and immunisation rates; improvement in parenting capacity and the management of anxiety and postnatal depression.

Australian studies report that families that have access to early intervention and prevention support show improved parent - infant attachment, improved parent-child interaction, and reduction in smoking, improved educational enrolment, creation of safe environments for infants and children and stronger relationships within families and communities.

Tresillian is responsive to the changing needs of families, particularly those experiencing challenges in the crucial early years of their child's development to positively impact the life trajectory of the child. Tresillian operates from seventeen (17) sites in New South Wales, one (1) in Victoria which delivers services to families across the border in Albury NSW and one (1) in ACT, providing both state-wide, regional and local support services.

Tresillian knows that "one size" does not fit all and there is a solid case for different and individual support for families across NSW. Our tailored "bringing services to communities in need and supporting families where they live" concept will contribute to supporting vulnerable families safely and will give families an opportunity to build parenting capacity to provide sensitive nurturing care in an environment which children can thrive, with the goal of giving the best chance possible for children and families to avoid the risk of entering into the child protection and OOHC Sector.

Tresillian is guided by the NSW Ministry of Health Child Wellbeing and Child Protection Policies and Procedures which includes the legal responsibility of health services and health workers as mandatory reporters outlined in legislation.

NSW Health guidelines include screening and comprehensive assessment of family vulnerability, identifying child protection concerns, use of the Mandatory Child Protection Guide (MRG) screening tool and escalation and reporting to the Child Protection Helpline where a child is considered at risk of significant harm (ROSH).

2. The respective roles, responsibilities, including points of intersection, of health, education, police, justice and social services in the current system and the optimum evidence based prevention and early intervention responses that the current system should provide to improve life outcomes

Protecting and supporting children is everyone's business. The health, safety and wellbeing of NSW children is a shared responsibility of parents and families supported by community, government and non-government organisations (NGO's). Most children and young people are adequately cared for and nurtured by their families. It is only when parents, carers or guardians are unable to protect their children from significant harm that intervention is necessary from services such as health, education, police, justice and social services.

For a number of reasons, vulnerable and marginalised families often find accessing and making good use of services difficult. It is the responsibility of service providers to find ways of engaging the families and providing them with services that are easy to access and address their needs. The way in which services engage and work with families is critical: professionals need to respond to family priorities, build on family strengths, and establish partnerships that involve shared decision making, thereby giving families greater control over their lives.

The NSW service system needs to be reconfigured to increase its collective capacity to respond promptly to the needs of vulnerable families. This means building stronger links between services, developing a systematic outreach capacity to reach isolated and transient families, and providing a range of 'soft' entry points to the service system to suit the needs and encourage engagement of vulnerable families.

Building the capacity of service providers to engage vulnerable families (e.g. through training in relationship-based and family-centred practices) should be a priority. In planning and developing early childhood and family support services and service systems, consideration should be given to ensuring that the known barriers to service access for vulnerable families are minimised. These include families with low incomes, young parent families, sole parent families, Indigenous families, families from culturally and linguistically diverse communities, families with a parent who has a disability, and families experiencing problems with housing, domestic violence, substance abuse, mental health or child protection.

While there has been a considerable effort made to avoid children coming into the out-of-home care system, change has been slow and outcomes less than desirable. The community expects that government will support children and young people and protect their right to be safe in their homes and in their communities. The past five years has shown NSW Government investing in the reduction of caseworker vacancies and making best efforts to provide services directly to families by working in partnership with health, justice and NGO agencies to commission a wide range of services and

programs that may improve outcomes for children and families - including services to improve the capacity to respond to the growing demand for child protection.

According to the Family and Community Services 2018-2019 Annual Report, caseworkers saw more children and young people at risk of significant harm than in any previous year:

30,949 in total, and 18 per cent more than in 2017–18. More frontline caseworkers are working with more families and children resulting in more child protection assessments being completed than ever before; case workers do help protect children from significant harm and for some children case workers are their safety net.

Despite the NSW Department of Communities and Justice best efforts in improving its capacity to provide a suitable response to child protection reports, statistics show an increase in the number of children 0-5 years in NSW “not seen” by a case worker following a Risk of Significant Harm (ROSH) Report.

For the number of children 0-5 years of age “not seen” by a case worker and found not in “immediate risk of serious harm” after a child protection report assessment, Tresillian and other health, Department of Communities and Justice and community service agencies can play a partnership role with local Community Service Centres and case workers in the support of the “not seen” children and families to prevent further escalation into the child protection and/or Out of Home Care (OOHC) Sector.

The right supports can transform the lives of children and families, the collaboration of different specialist teams, a commitment to action of government funded agencies to deliver holistic, co-ordinated and focussed support to the “unseen” children will undoubtedly give equal access to life’s opportunities for families with vulnerabilities already known to the Department of Communities and Justice (DCJ).

Tresillian is well placed to give support to families with vulnerabilities and the “unseen” children by DCJ and can offer families a quality service by a skilled and qualified workforce. The Tresillian Family Care Centre ‘Hubs’ provide a base from which services are provided including comprehensive assessment and consultation for the management of a range of early parenting challenges, home-based services, evidence-based group programs; and an Extended Home Visiting program for families experiencing complex vulnerabilities impacting on parenting capacity.

The Family Care Centre (Hub and Spoke model) operates up to 5 days per week for day services with additional ‘spoke’ services provided to surrounding communities through satellite services and telehealth services to provide support for more remote families and clinicians. The Family Care Centres provide a family-friendly access point for other health services for families with young children through the co-location of services including perinatal mental health counselling services, lactation support and allied health services. Joint consultations and home visits can be provided by the Tresillian clinicians

at the Family Care Centre in partnership with primary level Child & Family Health clinicians and Aboriginal Health Workers.

Tresillian can address one of the big challenges families with vulnerabilities face in connecting with and staying connected to the right supports. Families in need require “one stop shop” assistance in a simplified way in an environment of respect and consideration. This is important as many families need holistic support and access to multiple services at the same time. The Hub Centres reduce the number of times that families need to repeat their story to obtain assistance, which results in a timely response to the circumstances of each client, while at the same time removing duplication and bottlenecks.

The Grafton Child and Family Wellbeing Hub, established through a partnership between Tresillian, Bulgarr Ngaru Aboriginal Medical Corporation, the Northern NSW Local Health District and the North Coast Primary Health Network (Healthy North Coast) addresses this challenge by providing a one-stop shop for families which combines multiple health and community service providers in a single location.



Child & Family Wellbeing Hub

The Hub operates on the following principles:

- Families will know where to go for help and be able to access the right supports at the right time, in a trauma-informed, culturally safe environment.
- To stay connected, families will have access to holistic, sustained care with the introduction of an intake support role, family care plan and key worker function.
- Access to support to address the social determinants of health, such as secure housing, income support, and educational programs.

The Hub Model encourages a “no wrong door” approach that ensures that families are able to access the hub through early intervention pathways, such as playgroups, classes and drop in activities that build families’ skills and resilience; including recently a venue for contact visits between parents and their out of home care children. These activities can also function as pathways into targeted services if required, by supporting the development of trusting relationships and/or engaging families before they hit ‘crisis point’ and formally need assistance.

Targeted services, such as health, domestic violence or children’s supports services may be delivered from the hub or may be external referral opportunities. Importantly, an objective for the hub is facilitating warm and timely referrals so families can access the support they need at the right time.

The Hub also engages in community outreach activities and co-locates with services that engage families who may not naturally visit the hub or those who are described as “hard-to-reach” families. Importantly, the model acknowledges that there is no prescribed pathway through the hub and ideally enables a fluid process where participants can enter, exit and re-enter as needed.

Future investment by government in appropriately funding universal services will be key to securing the engagement of families whilst building the capacity of the core services that children and families come into contact with early and regularly. Future investment should focus on ensuring services such as antenatal care, postnatal care, community nursing, childcare, pre-school and school are equipped to identify needs and risks, and enabling the delivery of a service that meets the different needs identified within mainstream services as far as possible.

Tresillian has a suite of services to offer families where Tresillian child and family health nurses and Aboriginal health workers play a key role in the provision of community based child and family health service. Access to specialist services and support close to home has been shown to reduce the distress experienced by parents experiencing difficulties in the early years of their child’s life, while improving health outcomes for the child and their parents.

The Tresillian 2U mobile early parenting service operates from a purpose-designed van providing a non-stigmatised, trusted environment for parents in familiar locations within their own community, enhancing their participation and control of the interaction with support staff. The service provides a high quality, accessible and flexible program that supports families to manage stressors and improve parent-child attachment during the pivotal time from birth to age five years.

The Tresillian2U Mobile Service and van, currently operating in the Mid North Coast Local Health District, was developed through extensive consultation with a broad range of stakeholders including child protection representatives, health service providers, NGOs, Aboriginal Elders, the Aboriginal community and community representatives. The idea was highlighted in consultation forums held on the Mid North Coast of NSW in 2016 which led to a partnership agreement between Tresillian and Mid North Coast Local Health District to develop the mobile service.

This innovative service model and the team have been recognised in 2020 with a series of awards, including winner of the MNCLHD Innovation Award for Delivering Integrated Care, a finalist in the HESTA National Excellence Awards for Community Services, and is a finalist in the AbSEC (NSW Child, Family and Community Peak Aboriginal Corporation) “Walking Together Award” with the winner to be announced in December 2020.

The van is staffed by a team of child and family health nurses and an Aboriginal health worker and has a consultation space for parents to meet with clinicians. This space enables comprehensive assessment of early parenting concerns, challenges and factors impacting on family functioning and parent-child relationships. The van includes a section for infant/child physical assessment and a cot for coaching of safe sleep and settling strategies.

The van is fitted with information technology and communication equipment, including internet access, to enable connectivity across multiple locations. A smart TV enables use of visual aids such as clips from trusted web sources (including the Tresillian YouTube channel). Telehealth capability is available through a web-based videoconferencing platform, allowing partners or other carers of the child to participate in the consultation if they are unable to attend at the van location (i.e. in rural areas many partners are unable to leave their farm due to the drought and requirements to hand feed their stock). Inclusiveness of key carers of the child benefits all family members and facilitates open conversations and support to enhance relationships and family functioning.

The vehicle is fitted with a generator, enabling utilisation of full functionality regardless of location. This has been integral to providing the flexibility to bring the service to a broad range of community locations including co-location with frequently visited services trusted by local parents, e.g. pre-schools, neighbourhood centres, local council locations and community events.

The van locations are authorised through Memoranda of Understanding with other local services. This includes partnerships with Aboriginal Community Controlled Organisations and other health and community service providers in the local area, within the facilities where the van is parked. There is a strong focus on engagement with Aboriginal families and communities with **over 23% of families accessing this service identifying as Aboriginal or Torres Strait Islander people.**

Importantly, the model includes a predictable and reliable rotation of locations to build community trust in the service and a knowledge that the service will be available in particular locations on certain days of the week. The communication of this location schedule has been one of the key factors to building inter-professional relationships, community trust and integrating the services into the local service system network. The flexibility of the van by its very nature of being a mobile service, means the service can respond to community requests to be present at particular community events attended by families.

Tresillian has a commitment and an obligation to create a child safe environment. The Tresillian Child Safe Policy gives guidance on the processes and procedures that aim to ensure children's safety and wellbeing. It guides workers (paid and volunteer) on how to behave when interacting and engaging with children in our organisation. The policy focuses on how we can build and maintain a child safe environment which is inclusive, transparent and promotes children's participation and is underpinned by the 10 child safe principles.

Tresillian also acknowledges the NSW Child Safe Standards created in response to the recommendations made by the Royal Commission into Institutional Responses to Child Sexual Abuse and supports the direction to deliver effective and integrated services to vulnerable children and families at risk of or experiencing harm.

Tresillian makes every effort to ensure that we are committed to the endeavour of offering family and child ready services that are inclusive of family vulnerabilities and encourage their initial access, make them feel welcome and valued, and promote their ongoing participation.

This commitment is embedded in our service parameters and not viewed as a stand-alone strategy to reach at risk, vulnerable or “hard to reach” families.

3. The adequacy of current interventions and responses for vulnerable children and families and their effectiveness in supporting families and avoiding children entering out of home care

The success of interventions is determined as much by the way in which they are delivered as by what is delivered; if services are not delivered in ways that engage parents and respond to their needs, then they will struggle to attract, retain them and their effectiveness will be compromised.

Services currently funded by NSW Government to support vulnerable families such as Family Referral Service, Brighter Futures, Family Support Services and NGOS provide an important arm in early intervention and prevention, however, over time these services have been reduced and the allocation of families continues to be affected by lengthy wait lists, referral criteria issues and referral pathway constraints. The whole premise of “early” intervention is to keep the biological family intact and prevent escalation of risk or Adverse Childhood Experiences. Research evidence points to less favourable clinical outcomes once the child is removed from their birth family and enters the Child Protection and OOHC system. Services such as day care for children and/or support within the home play a vital role in the recovery of families.

To get the best possible start in life, a mother needs to be healthy before, during pregnancy and childbirth. There is compelling evidence that a child’s experiences in the early years (0–5) has a major impact on their health and life chances as children and adults. Parents and/or other main carers have the primary responsibility for, and influence on, their child’s health, wellbeing, learning and development. All parents need some level of support and use services at some stage during their child’s early childhood years.

The priority is to prevent children from becoming vulnerable through supporting families to parent effectively. When vulnerabilities are present, they need to be recognised early to provide families with access to the tailored family support and skills needed to make sustainable changes. Tresillian is committed to using a child focused and family centred approach in best practice, drawing on best evidence and to involve families across the continuum of care.

Tresillian provides timely, accessible and evidence based support to families, services which prevent the escalation of the distress a family can experience as a result of early parenting difficulties.

Tresillian's service model provides an integrated and personalised service response for families in the early parenting period appropriate to the level of need and complexity of individual situations.

When working with families with vulnerabilities, it is important to focus on family strengths and have positive contact with parents and care-givers. When positive and trusted relationships with families are developed, it's much easier to raise and resolve difficulties.

A focus on shared goals and a problem-solving approach will help staff, children, parents and families work in partnership to tackle problems. For example, the shared goal might be ensuring a child's health, safety or wellbeing. It can also help if you express confidence that, together, you and the parents can find a solution early. Importantly, trust is often built through listening to parents, through empathy and by supporting the family to navigate the service system network to access the services to best meet their short and longer terms needs.

Tresillian places value on equity of access, social inclusion, psychosocial and health and wellbeing outcomes for families. We focus on engagement and relationship building as a means of achieving clinical and family wellbeing outcomes. Tresillian's aim is to provide an effective and inclusive service that is user friendly with referral pathways that are flexible, accessible, culturally safe and responsive. There is flexibility in setting appointments for families and provision of service in non-traditional settings. Community co-design has informed these approaches, enabling a flexible service model to be adapted for the needs of different community contexts.

Delays in providing appropriate family support and education and referral when needed may impact children achieving positive developmental and functional health and educational outcomes. As highlighted in the NSW First 2000 Days of Life Framework (NSW Health 2019) the early years are a critical time for physical, cognitive, social and emotional health and development. International and national research has clearly demonstrated the link to what happens in the first 2000 days of life, including Adverse Childhood Experiences, and the impact throughout the life trajectory.

Tresillian offers families a suite of "wrap around" services that are tailored to the individual needs of families - one example is the Tresillian Extended Home Visiting Program for families with complex vulnerabilities. This home-based early intervention program provides intensive support for families with identified vulnerabilities impacting on parenting capacity and the quality of the relationship and interactions with their child/ren. The program includes up to six visits then a review with an option for an additional six visits.

Tresillian also offers families the following mix of entry points for access to our services:

- Provision of individual consultations providing comprehensive bio-psychosocial assessment and intensive management, care coordination and follow-up.
- Soft-entry points including a 7-day per week Parent's Help Line for ready access to support for parents experiencing early parenting difficulties or distress
- Evidence-based therapeutic and parent education group programs based on needs analysis, e.g. Postnatal Depression and Anxiety Therapeutic Groups, Circle of Security. It is envisaged there may be opportunity to co-facilitate with staff from other government and non-government agencies.
- Multidisciplinary teams and co-location of services utilised by families with young children to increase accessibility to parents including lactation support, perinatal psychology/mental health, speech therapy etc.

4. The child protection intake, assessment, referral and case management system including any changes necessary to ensure that all children assessed as being at risk of significant harm receive a proactive and timely in-person response from child protection staff

Our increasingly complex social environment contains many families who face growing issues raising their children, including family violence, mental illness and alcohol and drug abuse. Ongoing social, economic and demographic changes place further burdens on families, making them more vulnerable due to a lack of support. More services are reporting an increasing complexity of clients accessing services, including individuals and families with multiple problems and needs. These families often have simultaneous contact with multiple services, which need a better integrated and coordinated service response.

Without a shared responsibility for strengthening families and keeping children safe, healthy and well, families are often and will continue to be pushed down-stream to child protection to assess safety risks. Tresillian provides the option of self-referral to services by families to engage earlier with parenting supports that may over time reduce the flow-on impacts to child protection services

Rather than offering a place where people feel comfortable and confident to go for help, entry to services is still largely through professionals reporting that a child is at significant risk of significant harm to child protection. Those agencies may not have the capability to manage families unwilling to engage or where the family is feeling stressed or under pressure so families bounce without effective help between statutory child protection services.

Child protection services are overwhelmed, with the high numbers of reports, caseloads and gaps in information sharing making it more difficult to monitor changing family circumstances and identify

children who are most at risk, to support child protection staff in achieving a proactive and timely in-person response for children requiring assessment and case management support. A strong connection and communication strategy with health and education services is essential. Poor communication between agencies delays active engagement of, and rapid response to families at risk.

Disconnected services are exacerbated by gaps in services for affordable housing, mental health and drug and alcohol rehabilitation, and specialised parenting support for at-risk groups. The lack of a whole-of-community approach means that vulnerable children and families miss out on social and economic opportunities that are important to their health and wellbeing.

The Victorian Government's evaluation of the strategic framework for Family Services shows that outcomes for vulnerable children and families were improved through:

- a centralised intake system involving shared dialogue, processes and decision making, with a focus on identifying high need referrals and targeting the development of a coordinated response
- strong partnerships, characterised by tangible changes in service delivery, such as joint planning and delivery of services, joint client outreach activities
- joint management of cases that improved information sharing, joint training and development, and staff colocation.

A focus on the best interests of children effectively places the child in the context of its family with the best interests of the child being addressed based on child protection policy and legislation.

When assessing the efficacy of a child protection intake, assessment referral and case management system the best interests of the child must always be paramount. If the "best interest" principle is applied by child protection staff at the point of intake, a determination of action in the best interests of the child, the need to protect the child from harm, to protect their rights and to promote their safety, stability and development (taking into account their age and stage of development) should always be considered first and foremost. The need to give the widest possible protection and assistance to both the child and parent as the fundamental group unit of society ensures that intervention in that relationship is limited to that necessary to secure the safety, stability and development of the child.

Consideration should also be given to strengthening, preserving and promoting positive relationship significant to the child and in relation to an Aboriginal child, the need to protect and promote their Aboriginal cultural and spiritual identity by maintaining and building their connections to family and community.

Much has been achieved in recent work undertaken in the NSW child protection and OOHC sector. There has been significant improvement in the following activity in recent years:

- Minimising entries and re-entries into care by maintaining children and young people at home where safe to do so
- Finding permanent homes for children and young people currently in care through restoration, guardianship and open adoption
- Addressing the over representation of Aboriginal children and young people in the care system by maintaining connections with family, community, language, culture and country
- Investing in higher quality support and providing more targeted and therapeutic support to address individual needs.

The NSW Department of Communities and Justice works to support vulnerable individuals and families to keep them safe from harm, with a focus on providing targeted support to reduce risk and vulnerability in the community. They do this by intervening early and connecting people to services to improve their safety, security and wellbeing and also by working effectively with non-government partners in child protection, domestic and family violence, and homelessness.

The NSW Department of Communities and Justice has endeavoured to develop a service system that moves beyond crisis responses to address the factors that put people at risk and to help them build their capabilities and improve their lives. One of the key improvements has been the response to the year-on-year increase in the number of risk of significant harm (ROSH) reports by working towards seeing more children.

During 2018–19, caseworkers saw 30,949 children and young people at ROSH, an increase of 18 per cent from the preceding year and have made good progress towards reducing the percentage of children and young people re-reported at ROSH within 12 months of having their case plan closed following a face-to-face assessment. The decreasing trend in ROSH re-reports continued, with only 35.8 per cent of children re-reported as at the period ending 30 June 2019 compared to the 2014–15 baseline of 40.4 per cent, keeping on track to achieve the Premier's Priority by 2023.

The NSW child and family service sector has developed strong partnerships and alliances, but according to feedback at the coal face current contracting arrangements are complicated, reinforce program silos, and encourage competitive behaviour over funding and collaboration. Current arrangements also fail to incentivise providers to collaborate and work across sectors to improve outcomes for children, young people and families.

The child and family service sector understand that to achieve the best outcomes for children, young people and families with complex needs, there is a need for the coordinated planning, funding and delivery of services. Current funding approaches encourage service models designed around short-term crisis interventions, rather than long-term wellbeing. Funding should not be designed around individual problems and programs, but should be designed to address people's needs and risks and implemented around the context of the community they live in. The absence of a coordinated and planned response is contributing to disconnected service delivery and a lack of collaboration.

Tresillian and other government and non-government agencies in NSW are in a very good position to play a major role within an integrated approach to the delivery of community and social services for populations living with vulnerabilities. Government and community sector agencies will bring expertise in using and building evidence of what works and embedding a holistic focus on risks to children's safety, a child's developmental status and family functioning in multi-agency assessment and planning.

For families it means delivering timely support to address the challenges and multifaceted issues that can prevent an adult from meeting their responsibilities as a parent or carer. It also means linking parents with education and training; connecting them to formal and informal supports within their community; and helping them find employment, stable housing and all the other basic needs that make good parenting possible and for children, it means ensuring all the things are in place to ensure their safety, health and wellbeing.

5. The availability of early intervention services across NSW including the effectiveness of pilot programs commissioned under Their Futures Matter program

It is during our very earliest years and even pre-birth that early brain development takes place, setting patterns upon which individuals draw and make sense of the world and impacting on their life-long trajectory. The early years are therefore a key opportunity to shape a NSW of the future which is smarter, healthier, safer and stronger and fairer. However, there is the need to maximise positive opportunities for children to get the start in life that will provide a strong platform for the future success of NSW.

The future of NSW most valuable future resource is our children and therefore it is imperative that early years experiences provide a gateway to learning and skills that will power NSW's knowledge economy. Equally important is to address the needs of those children whose lives, opportunities and ambitions are being constrained by legacies of poverty, poor physical health, poor mental health, poor attainment and unemployment.

This will mean a shift from intervening only when a crisis happens, to prevention and early intervention. In turn, that will mean providing a supportive environment for children and the earliest possible identification of any additional support that may be required. It is not about throwing new money at old problems, or narrow initiatives. It is about a fundamental shift in philosophy and approach that embraces the role of parents and communities and supports them with engaging, high quality services that meet their needs while de-stigmatising help-seeking.

A robust approach of developing policy in partnership recognises that different local areas have different needs and moves away from a centrally driven, inflexible approach, which will not deliver what is needed. An approach that recognises the right of all young children to high quality relationships, environments and services which offer a holistic approach to meeting their needs. Such needs should be interpreted broadly and encompass play, learning, social relationships and emotional and physical wellbeing. This approach is important for all children but is of particular benefit in offering effective support to those children and families requiring higher levels of support delivered by a valued and appropriately qualified workforce.

In 2016, the NSW Government launched 'Their Futures Matter' (TFM) - a whole-of-government reform aimed at delivering improved outcomes for vulnerable children, young people and their families. TFM was the government's key response to the 2015 Independent Review of Out of Home Care in New South Wales (known as 'the Tune Review').

The focus is primarily on prevention and early intervention across the whole social support system, driving change across government and improving how NSW looks after its most vulnerable people.

In July 2020 the NSW Auditor-General's Report showed that although "the TFM reforms started building an evidence base for effective data informed interventions that worked to better identify and support vulnerable children and families in NSW" and laid other important foundations, that they are still foundations that need to be built and strengthened. The report also stated that TFM had no enabling legislation and the majority of investment funding was expected to be negotiated from existing agency budgets.

The report highlighted the success of a range of (trialled) pilot programs to better support children and families living with vulnerabilities across NSW. Some of these pilot programs are adaptations of evidence-based programs which have shown promising results overseas. TFM has provided an opportunity to showcase the success of these pilot programs – given the amount of resources already injected into the pilot programs should there be support for continuity of these programs to demonstrate their agreed targets, service activity and performance outcomes. Funding cycles are also problematic in supporting sustainable change, particularly when families and communities take time to build trust that service providers will remain on board for the "long-haul", knowing that many entrenched long-term intergenerational challenges will take long-term commitment to overcome.

Although Tresillian did not receive funding under the Their Futures Matter (TFM) Program, in 2019 an invitation was extended to our organisation to engage in discussion with TFM and relevant stakeholders in the landmark reforms of the NSW Government in the design of a future service system that is more child and family focused, easier to navigate and able to bring together services from across government portfolios. Work that strengthens efforts to increase the impact and effectiveness of services and supports provided to vulnerable children, young people and families and over time, an approach that will help to redirect investment and efforts from crisis-driven responses to early intervention and prevention.

Tresillian actively engaged in a number of NSW Stronger Communities Investment Co-Design forums which included “round table” collaboration and discussion on the TFM outcomes framework that provides baselines, measures and focuses on investment of interventions across government and NGO activity.

There was multiagency discussion regarding service mapping focusing on the existing programs in the TFM funding investment pool. This relied on self-reporting from agencies about the programs’ geographic location, alignment to TFM priority cohorts, stage of support, funding value and contract period, and whether service providers considered there to be competitors or alternatives to the service in their area. However, further service mapping needs to be done to understand how existing agency services and programs match to need, and more robustly identify any service gaps or duplication.

While some progress can be achieved through alignment of resources, addressing the needs and challenges of the sector will need a concerted and long term effort. We recognise that these are high ambitions at a time when there will be no new money available for implementation. Proposed frameworks can only be taken forward by realigning and prioritising resources to offer more effective support to all families and to enable help to be provided earlier to children and families requiring additional support.

The improvements that are envisaged offer significant economic as well as social dividends for communities – in the short and medium-term helping to support employment and enhance productivity and in the longer term to improve a range of outcomes and reduce the need for costly crisis interventions. A simpler, integrated structure of services also has significant potential to deliver greater value for money. We do not underestimate the challenge of reallocating resources while continuing to help those who need our support now; but we believe that it is essential that we strive to do so.

From the child's perspective, there is evidence that exposure to high levels of parental stress, neglect and abuse can have a severe effect on brain development. There are clear gaps between the development of children whose parents face such significant life stresses and those being brought up in less stressful households. These gaps continue through life. At age 3, children at higher risk of poor outcomes can be identified on the basis of their chaotic home circumstances, their emotional behaviour, their negativity and poor development.

These children face many risks and improving early years support is key to improving child protection. By the time such children reach adulthood, these children are more likely to have poor health outcomes, be unemployed, have criminal convictions, have substance misuse problems and have experienced teenage pregnancy.

Improving the experiences of children in their early years is therefore a central element of any strategy for regenerating communities, reducing crime, tackling substance misuse and improving employability. It will also help us to break the repeating cycle of poor outcomes often associated with teenage pregnancy.

CONCLUSION

Early year's investment is not a magic bullet. There is no single programme or approach that can deliver the improved outcomes we seek. Instead, it will take a concerted and long-term effort across a range of policies, agencies and services to achieve a transformation in outcomes, importantly starting in the critical early years of a child's life. The scale of the changes which will be required to bring about these improvements is significant and complex. Service planners and providers may have to make difficult decisions, for example in respect of resource allocation, to shift the focus from crisis management to prevention, early identification and early intervention, whilst realistically recognising that crisis management will still be needed. This is the approach being taken by Tresillian and our partners in Northern NSW, investing in making a difference and breaking down barriers to early identification and access to support with the new Child and Family Wellbeing Hub in the Clarence Valley, Grafton.

At the coal face, our clinical experience at Tresillian is that early intervention services are limited irrespective of programs, however building on the good work already done, the future can see better results for children and families to address demand pressures at all points along the child and family service continuum.

There is life beyond early years and some children and families will need long-term support throughout childhood and beyond. We can, however, hope to reduce the numbers of such families through supporting the capacity of children and parents to secure positive outcomes for themselves to the point where it can be self-sustaining within the universal services that are available and by building community capacity so that the wider community is empowered to provide a supportive environment for children and families.

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