# INQUIRY INTO SERVICE COORDINATION IN COMMUNITIES WITH HIGH SOCIAL NEEDS

Organisation:Community Organisations in Fairfield Local Government AreaDate received:16/08/2015

Submission to the NSW Legislative Council Standing Committee on Social Issues Inquiry into Service Coordination in communities with high social needs

Submission by Community Organisations from Fairfield Local Government Area

15 August 2015

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Parks Community	PO BOX 3147 Wetherill		
Network Inc	Park NSW 2164		
Community First Step	25 Barbara		
	St Fairfield NSW 2165		
Woodville Alliance Pty Ltd	PO Box 468 Villawood		
	NSW		
Cabramatta Community	P O Box 367		
Centre	Cabramatta NSW 2166		
Fairfield City Council	PO Box 21 Fairfield 1860		
Drug ARM Australasia	PO Box 1030, Fairfield NSW 1860		
Parents Cafe - Fairfield Inc	The Horsley Drive Fairfield NSW 2165		
Youth Off The Streets Ltd	13 Prince Street Canley Vale 2166		
NSW SLASA	PO Box 216 Bonnyrigg NSW 2177		
Vietnamese Community in	4/50 Park Road		
Australia	Cabramatta		
Australian Karen	20 Bell Crescent Fairfield		
Organisation			
Lao Community Media	85 Oliveri Cresent Green		
Group	Valley		
Australian Chinese	PO Box 156 Cabramatta		
Descendants Mutual	2166		
Association			
Cambodian Australian	211 Humphries Rd,		
Welfare Council of NSW Inc	Bonnyrigg NSW 2177		
Anglicare Sydney	16 Parkes St Parramatta		

### Inquiry into service coordination in communities with high social needs

#### **Response from Fairfield NSW**

The signatories from the community sector in the Fairfield local government area (LGA) make this submission in response to the NSW Government Standing Committee on Social Issues Inquiry into service coordination in communities with high social needs.

Fairfield has a rich history of migrant and refugee settlement since World War II. At the 2011 Census, more than 50% of the City's residents were born overseas and more than 144 different languages were spoken locally<sup>i</sup>. This makes Fairfield one of the most, if not the most, multicultural place in Australia. The presence of many existing culturally and linguistically diverse communities, along with support to assist settlement in the area, draw refugees and asylum seekers. In the last five years, approximately 6000 people from refugee and asylum seeker backgrounds have made Fairfield City their home, the highest number of refugee settlement in Australia (DIBP, 2015).

Fairfield is an area of high social needs and is the third most disadvantaged local government area in NSW and the most disadvantaged area in the Sydney metropolitan region with a SEIFA index of 854. Fairfield LGA has poorer health outcomes, higher unemployment, lower educational levels and high levels of residents receiving income assistance from government. Multiple front line services that address the needs of residents and new comers are provided by the three tiers of government, non-government organisations, not for profits and community groups. There are also many early intervention and prevention support services that aim to improve outcomes for vulnerable and disadvantaged members of the community.

#### Terms of Reference of the Inquiry

- **1.** That the Standing Committee on Social Issues inquire into and report on service coordination in communities with high social needs, including:
- a) the extent to which government and non-government service providers are identifying the needs of clients and providing a coordinated response which ensures access to services both within and outside of their particular area of responsibility

Needs assessments are widely conducted by organisations that provide support to residents of Fairfield. Needs assessments are conducted by organisations at a small level, and the assessments are conducted with parameters relating to target groups and objectives of funded programs.

For individuals accessing services, they currently often receive multiple assessments and, in the case of addiction and health issues, multiple treatment plans. The multiplicity of assessment can cause re-traumatisation and increase vulnerability. Sharing information pertaining to individuals is restricted and a comprehensive biopsychosocial assessment tool has not been developed to meet the needs of all sectors. A system level review and investment is needed to address this situation.

Assessments at community level are also conducted by large NGOs such as The Smith Family in its role as Facilitating Partner of Communities for Children Fairfield. NSW SLASA will be undertaking a strength and needs analysis of CALD community organisations and groups in the Fairfield and Liverpool LGAs. This will inform the implementation of a 2 year skills and capacity building initiative for the above mentioned target organisations. Identification of community needs undertaken by Neighbourhood Centres and currently funded through the Community Builders program, focuses on people in a place based approach. This is often a more broad based needs assessment.

These assessments are conducted as part of the process of developing strategic plans for organisations to deliver their government funded work. Assessments of needs are utilised as the crux to identifying gaps in the community, and to determining a strategic approach in responding to these gaps. Such assessments enable organisations to determine service delivery and provision in the community and enable avoidance of duplication of existing services.

While each service provider is expected to conduct a needs assessment and to provide strategically planned services, many challenges are encountered by organisations at Fairfield. Service delivery in communities of high needs is best provided by a range of large and small organisations; small organisations, particularly those led by the community, have, and gain trust of the community. This distinct advantage is, however, offset by the need of these organisations for capacity building and more stable funding.

Challenges facing the coordination of services at Fairfield are seeing to relate heavily to government funding, length of term of funding and reporting requirements:

- i. Short term funding limits organisations' ability to coordinate social agenda and planning for effective coordination of services. The organisations and projects funded can change quickly and the ability to network between services is lost and made redundant when funding is lost or changed.
- ii. Short term funding and reduction of available funding have created unhealthy competition amongst service providers. Competitiveness contradicts values of coordination of services to begin with, but the unhealthy competition that exists between community organisations that are struggling for survival in the current funding climate make it exceptionally difficult to assess needs, to plan for and to deliver coordinated services that stretch beyond the fixed term details of the funding agreements.
- iii. Conflicting government policy on reporting requirements: For example, reportables of job seeker networks conflict with those of other organisations that train job seekers in language attainment. This is mainly seen where one set of organisations' KPIs are related to numbers of clients seen, and another set of organisations' KPIs relate to quality of engagement and achievements of participants.

A coordinated response and the ability of services to ensure access both within and outside of their particular area of responsibility require a broad and far reaching strengths and needs assessment, such as an assessment that is conducted at population level by Local, or even better, State Government. This would enhance capacity for services to coordinate their response as the availability, maintenance and update of such an assessment, at a centralised space that is accessible for service providers, would be an incredibly helpful tool for collaboration by services working in the Fairfield community. This is expanded on in section c) 'consideration of initiatives', below.

### b) barriers to the effective coordination of services, including lack of client awareness of services and any legislative provisions such as privacy law

Aspects of and regular changes to funding agreements between government bodies and funded organisations is determined as a barrier to the effective coordination of services. This includes but is not limited to the following:

- i. Short term funding that sets target group parameters: Government funding is traditionally for short periods of time. When an organisation provides a service determined by government objectives that define age, cultural group and geographic parameters for recipients, the ability for organisations to provide continuity of services effective referrals and coordination of services is negatively impacted. This is seen in youth homelessness, for example, as the knowledge of which organisations can accept referrals is dependent on the referring organisation's ability to make calls and to connect with providers. Providers' briefs are ever-changing and their target groups change in accordance with funding parameters, demonstrating the difficulties associated with continuity of collaborative approaches.
- ii. Funding that requires different reporting outcomes create inconsistency: The inconsistency that results from the reporting KPIs of funded programs is seen in instances where one program reportables are based on the number of clients seen, while a related program reportables are based on the quality of engagement of a client. When different outcomes are expected from organisations that work with the same client group this creates a significant challenge.
- iii. Changes in funding conditions affect continuity and stability of services: Funding is generally short term and creates difficulty for community groups and organisations to remain informed about which organisation is running which program, and for whom. This was recently seen in the changes to Emergency Relief provision in the Fairfield area whereby for a period of several weeks, there was no knowledge of who was providing this significant service to highly vulnerable people. For service coordination to succeed the conditions need to include organisations' ability to engage in long term planning, service delivery and shared measurement, evaluation and assessment of outcomes.

The adverse effects of short term funding also include:

- short term, fixed contract employment, e.g. 6 months at a time;
- capacity building and professional development of staff are significantly limited and have to be short-sighted, creating demoralised staff who are not able to plan forward;
- long-term strategy is impossible to build as organisations need to be reactive to grant availability, funding applications and changes of agreements.

These aspects affect community organisations' ability to build trust and sustain collaborative partnerships, which is crucial for success of service provision in high needs communities. Furthermore, they create restrictions for organisations to reach clients, to refer them on to other services, and they restrict an organisation's ability to follow up on referrals with services.

Other barriers include confusion about available services in a geographic area, cultural appropriateness of services, language barriers, availability of transport and parking to facilitate access to services and the cost of accessing services such as the cost of 1300 numbers.

## c) consideration of initiatives such as the Dubbo Minister's Action Group and best practice models for the coordination of services

There is strong evidence that the most effective strategies to address needs of the community and individuals within the community are those in which there is a multifaceted approach with a broad range of providers.

*Partners in Recovery* aims to increase cross-sector service coordination outcomes for individuals with severe and persistent mental illness. This program conducted within the health system, also has an evaluation strategy that could be considered as part of this Inquiry.

Our understanding of the Dubbo Minister's Action Group is that this was an intervention focused on improving safety at Apollo Estate in Dubbo. The Fairfield community can relate to this in reference to the action groups that were brought into Fairfield by the Premier's Department in response to the role Cabramatta played in drug use and distribution in the early 2000s.

In terms of service coordination in response to community needs, which are not defined geographically like the needs at the housing estate in Dubbo, or thematically such as the response to drug crimes in Cabramatta, we would like to highlight the well-researched benefits of collective impact in high needs communities.

A collective impact model exists at Fairfield in the Department of Social Services funded initiative Communities for Children and the philanthropic funded Youth Program at Woodville Alliance.

An example of collective impact can be seen in Greater Western Sydney with The Hive, a community hub at Mt Druitt. This hub is a centre of access for clients and services, and forms a strong backbone for the community to enhance the impact of the coalition of government and NGO services. Unlike Communities for Children, The Hive does not have any funding relationships with community organisations, hence, it is able to fulfill a gap in centralising the coordination of service response to the breadth of community needs, which are assessed centrally, and the needs and gaps analysis is communicated fairly and equitably to community organisations.

For this to be possible and sustainable, funding needs to be longer-term, reporting to be robust, fair and equal, and for staff and organisations to have equitable access to capacity building opportunities. The introduction of these conditions would create stability and trust, which would in turn make service coordination possible, and improved service resourcefulness a possibility.