

**Submission
No 13**

**INQUIRY INTO SERVICE COORDINATION IN
COMMUNITIES WITH HIGH SOCIAL NEEDS**

Organisation: The Benevolent Society

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Submission to the NSW Legislative Council inquiry into service coordination in communities with high social needs

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Summary

As Australia's first charity, The Benevolent Society is highly experienced in providing services for communities with high social needs across New South Wales. Wherever possible, we seek to integrate and coordinate service delivery to ensure our clients receive the services they need as effectively and efficiently as possible.

Currently, the coordination of services for communities with high social needs across New South Wales is inconsistent. We work with a combination of formal and informal coordination mechanisms whose effectiveness is mixed.

While greater service coordination will help, it will not be a panacea to meet the needs of all vulnerable people in New South Wales. We need to continue to develop ways to meet the needs of the people in need who, for a variety of reasons, cannot or do not want to access the services currently available.

The Benevolent Society believes that to be effective, coordination requires:

- involvement of all relevant parties (including government at all levels, funded and non-funded non government organisations (NGOs), community groups, community members and beneficiaries) in developing plans for service delivery in communities
- adequate resources (funds and personnel) dedicated to coordination. Consideration should be given to appointing an NGO to be responsible for coordination in areas of high need and complexity
- regular coordination meetings for all parties involved in funding and delivering the service in the community. Coordination meetings need to be meaningful and not tokenistic. All parties need to ensure that representatives have the knowledge, skills and authority to participate effectively in coordination meetings
- regular communication and sharing of relevant information within government and between government, the NGOs and community as required. Up-to-date information on the range of services being provided in an area which is accessible to the community and service providers is critical to effective coordination
- robust quality standards are required to ensure that services offered and being provided to the community meet a baseline quality standard.

Recommendations

We recommend that the New South Wales Government:

- backs-up its commitment to improving service delivery for communities and establishing effective partnerships with the community organisations by:
 - ensuring that communities are meaningfully engaged in identifying needs and planning services in their area
 - providing funding under any new social programs for coordination between government and non-government parties in relation to planning and delivering social services in areas of high need and complexity
 - specifically, that the Government incorporates key aspects of the federally funded Communities for Children (C4C) model which promotes collaboration through the establishment of facilitating partner who receives funds to work with the community to identify the local needs and distributes funds to local organisations to deliver a range of activities
 - improving transparency by sharing information regarding planning and delivery of social services within an area with NGO partners and the community at large
 - developing minimum standards to ensure that social services meet a baseline quality standard.
- builds on the existing network of child, health and family support services and moves to a more integrated service delivery system, which focuses on early intervention and targets particularly marginalised and high risk populations, including: Aboriginal and /or Torres Strait Islanders, Culturally

and Linguistically Diverse populations, children with a disability, and other 'vulnerable' families. The Queensland Early Years Centre (EYC) approach is a model which could be adopted in New South Wales.

- invests in ongoing research and evaluation that identifies strategies and practices that are effective in engaging 'hard to reach' families.

1. Introduction

The Benevolent Society welcomes the inquiry into service coordination in communities with high social needs.

The Benevolent Society provides a range of services to communities with high social needs across New South Wales. We provide support to vulnerable children, families and older people as well as people with mental health issues. We have a strong focus on integrated service delivery, designed to meet the needs of local communities and the people we work with.

From our experience in supporting people with multiple and complex problems, we know that providing wraparound support is critical to ensuring they get the help they need, when they need it. Key to this is effective partnerships. If we are unable to provide a service to a client, we have formal partnerships and referral protocols to ensure clients' needs are identified and responded to. We have found that the needs of communities with high social needs are best met when there are formal coordination mechanisms between government, non-government organisations and the community for the planning and delivery of services to reach vulnerable members of the community. However, it is important to note that coordination alone will not ensure that services are reaching those that need help the most.

2. About The Benevolent Society

The Benevolent Society is Australia's first charity. We're a not-for-profit and non-religious organisation and we've helped people, families and communities achieve positive change for 200 years.

We help people change their lives through support and education, and we speak out for a just society where everyone thrives.

The Benevolent Society helps the most vulnerable people in society, and supports people from all backgrounds including Aboriginal and Torres Strait Islanders and people from culturally and linguistically diverse communities. We believe that building stronger communities will lead to a fairer Australia.

Our focus is to foster wellbeing throughout life – from infancy to older age – with services that:

- prevent problems or reduce their negative impact
- tackle problems early before they become entrenched
- help people use their strengths to solve their own problems
- give priority to people experiencing social and financial disadvantage.

Snapshot

- The Benevolent Society is a secular non-profit organisation with 985 staff and 614 volunteers who, in 2014, supported more than 84,110 children and adults primarily in New South Wales and Queensland.
- We deliver services from 55 locations with support from local, state and federal governments, businesses, community partners, trusts and foundations.
- We support people across the lifespan, delivering services for children and families, older people, women and people with mental illness, and through community development and social leadership programs.
- Our revenue in 2013/14 was \$143 million.
- The Benevolent Society is a company limited by guarantee with an independent Board.

3. Our experience working with communities with high social needs

The Benevolent Society works in communities with high social needs. For instance, many areas in which we work have high levels of unemployment, low household incomes (below \$600pw week), rapidly growing populations and low Socio-Economic Indexes for Areas (SEIFA) scores. It is common for people living in areas of significant socio-economic disadvantage to have higher levels of vulnerability and poorer outcomes than the general population. For example, many of the areas in which we work also have high numbers of children who are developmentally vulnerable as measured by the Australian Early Development Census (AEDC).

In these communities, The Benevolent Society provides services to: children, youth and families; older people and people with a disability; and people with mental illness.

The Benevolent Society provides support to help individuals and families address issues such as:

- family and domestic violence
- poor mental health
- alcohol and substance misuse
- poor parenting skills
- social isolation
- housing stress: from insecure housing to homelessness
- sexual assault
- intergenerational service dependency
- intergenerational poverty and social disadvantage
- acute financial stress
- intergenerational trauma.

4. Our approach to working towards better service coordination

The Benevolent Society welcomes the NSW Department of Family and Community Service's (FACS) commitment to increase its focus on integrated and better coordinated service delivery.ⁱ We support FACS commitment to work with government, non-government and community partners to reach more people with better services; to ensure that people are at the centre of their services; to improving the way it engages clients and communities in the planning, design and delivery of services; and to develop greater and more effective local partnerships that encourage greater access and use of mainstream services.ⁱ

We have long had an interest in integrated service delivery, designed to meet the needs of local communities, and services providing both universal and targeted support to meet the diverse needs of communities and individuals.

Most of the children and families we work with require help with a range of complex and multi-faceted problems. The move towards more integrated service delivery has been driven by a growing awareness of how fragmented services for young children and their families are, and how that fragmentation undermines the capacity of the service system to support children and families effectively.ⁱⁱ

Integrated service delivery is central to The Benevolent Society's service delivery model. Integrated service delivery is:

- working with people so they aren't faced with barriers of the 'service system'
- ensuring people only have to tell their story once
- working with the whole person and not the 'problem'
- multi-disciplinary
- flexible

- making services available to enable the greatest number of client's service needs to be met seamlessly through direct service provision, referral pathways, and relationships with other service provider partners.

We put integrated service delivery into action in a number of ways and strive to provide integrated services for all of our clients in accordance with the model outlined above. In communities in which we may not be the most appropriate organisation to meet all of the client's needs we will have formal partnerships and referral protocols to ensure clients' needs are identified and responded to. For example, our integrated model for children and family programs has referral pathways to the specialist providers in areas of: housing, employment; clinical mental health; disability service providers; and drug and alcohol services.

Through programs such as C4C, The Benevolent Society aims to help families with entrenched and complex problems and are 'hard to reach' through traditional service models. This includes: Aboriginal and Torres Strait Islander Families; single parent families; fathers; jobless families; and income support dependent families.

Research shows that the parents in most need tend to be the ones who are least likely to access support services.ⁱⁱⁱ We use a range of methods to engage with hard to reach families or families with high social needs, including:

- collaborating with other organisations providing services to increase capacity and leverage resources
- providing non-threatening soft-entry points to engage families
- offering incentives such as food or social activities
- making time for one-on-one relationship building
- providing services in universal locations
- providing information on services in universal locations
- recruiting workers and volunteers from the same target group as participants
- offering culturally appropriate activities.^{iv}

5. Our experience with coordinated service delivery in communities with high social needs in New South Wales

5.1 The extent to which government and non-government service providers are identifying the needs of clients and providing a coordinated response which ensures access both within and outside their particular area of responsibility

The extent to which there is coordinated planning and delivery of services for communities with high social needs across New South Wales is inconsistent. Coordination of planning and service delivery with government, NGOs and the community differs between geographical locations, between different areas of support, and different programs through which we receive funding.

In our experience, services are coordinated and delivered most effectively when NGOs are involved in the planning stages and involved in identifying the needs of communities; and when resources are dedicated to coordination.

In South Western Sydney and on the Central Coast, The Benevolent Society provides support to children and families through the federally funded C4C program. C4C works with the community to develop locally identified strategies to meet the needs of families with young children. Under this program, we have been appointed as the Facilitating Partner which means we are funded to lead the planning and coordination of family and children services in the area. As Facilitating Partner, we receive funding to map community needs, develop community strategic plans, manage implementation and build the capacity of community

organisations to apply for and report on funds for service delivery. We also organise and chair steering committees which bring together federal, state and local government representatives, non-government organisations and community members (schools, businesses). This model is working well to improve coordination between government and service providers involved in child and family services in the area (see below for further discussion of the C4C model).

However, resources for coordination through programs such as C4C do not alone guarantee effective coordination between all levels of government and all service providers. In areas with high social needs, such as Kempsey, coordination can be difficult when there is a relatively large amount of funding coming from a range of different sources over a short period of time. Within the past 12 months both the State and Commonwealth Governments have provided additional funds to Kempsey under the Commonwealth Government's commitment to 'Closing the Gap' on indigenous health and the National Child Protection Framework, as well as the NSW Government's commitment to 'Keeping them Safe'. The Commonwealth Government also announced funding for Kempsey under the 'Building Capacity, Building Bridges' program, to assist organisations delivering services to families and children in addition to an existing C4C Plus program in Kempsey. Limited consultation and coordination of these resources has resulted in duplication of services in Kempsey, meaning notwithstanding enormous needs, resources are not being used efficiently and community needs are not being met as effectively as they could be.

In areas where programs are delivered under which there are no dedicated resources for coordination, collaboration and coordination still takes place but it is, to a large extent, dependent on the efforts of NGOs such as The Benevolent Society. The extent and success of coordination is therefore mixed, and is determined by the commitment, efforts, skills and experience of the NGOs, and specifically their individual staff members.

For example, in Claymore where the needs of the community are acute, coordination between government and non-government service providers in the area of family and children services is more difficult than in areas where there is, for example, a C4C program. In this community, we support coordination efforts such as the Claymore Action Network and the Claymore Leadership Forum, but have found that is difficult to regularly get a consistent group together with the necessary authority, skills and experience to coordinate effectively.

In other areas in which we work, such as Wyong, there is good coordination between non-government organisations around some issues such as mental health. This is due to proactive NGOs that have taken the initiative to establish inter-agency meetings and push for services to meet community needs where these services may be lacking.

Government involvement in coordination mechanisms is mixed. In some locations government representatives at all levels are actively involved in coordination mechanisms, in other places securing regular and consistent engagement from state and/or federal government representatives is a major challenge.

The extent to which Government involves NGOs in identifying and planning services for high needs communities is also inconsistent. From our experience, services are coordinated more effectively when communities are involved in planning and prioritising the service needs. Effective planning and coordination requires access to information about the full range of services which are being funded and delivered in a given area. Up-to-date data and information which is accessible to communities and service providers is currently not available for many of the communities in which The Benevolent Society works.

5.2 Barriers to effective service coordination

In our experience, privacy has not been a major barrier to effective service coordination in communities with high social needs. In order to comply with privacy laws, we require clients to sign consent forms regarding sharing of personal information, and have Memoranda of Understanding in place with other organisations with which information is shared that cover the protection of clients' personal information.

The main constraints to effective coordination are listed below. As noted above, our experience is different in each location and each sector in which we work. These issues are not necessarily present in all locations, but do present challenges to effective coordination of services:

- lack of resources (personnel and funding) for coordination
- failure to involve the community and NGOs in planning for service delivery
- difficulties in obtaining and maintaining consistent and meaningful government involvement (at state and federal level) in coordination mechanisms
- inconsistent or inadequate sharing of information between government, NGOs and community partners and inability to easily access up-to-date information on funded activities in an area
- inconsistent commitment to meaningful coordination
- lack of communication and coordination within state government (government silos)
- lack of communication and coordination between federal and state government leading to duplication of funding and services
- lack of access to the full range of services to meet community needs (eg psychiatry and other mental health services not available in some communities)
- competition between NGOs for government funding and influence in communities
- lack of robust quality standards and systems across all activities to ensure the quality of services being provided to communities based on sound empirical evidence
- lack of knowledge and skills on how to coordinate effectively in staff from all organisations.

Despite our best efforts, reaching the most vulnerable members of communities with high social needs is still a challenge. Notwithstanding the range of techniques used to access 'hard to reach' families outlined in Section 4 above, barriers still exist for providing services to community members with high social needs. These include: services not being provided at the right time and conflicting with work or other non-work commitments; lack of transport; and lack of suitable or available childcare.ⁱⁱⁱ In many cases, vulnerable community members are distrustful of community service providers and reluctant to access services or may not be aware of the services available.

This means that support is still not reaching those who need it most. Improving coordination of services alone will not solve this problem. Collectively, we need to think more creatively about how to best reach those who are hardest to reach and who are most in need of help.

5.3 Recommendations

The Benevolent Society believes that to be most effective, coordination needs:

- involvement of all relevant parties (including government at all levels, funded and non-funded NGOs, community groups, community members and beneficiaries) in developing plans for service delivery in communities
- adequate resources (funds and personnel) dedicated to coordination. Consideration should be given to appointing an NGO to be responsible for coordination in areas of high need and complexity
- regular coordination meetings for all parties involved in funding and delivering the service in the community. Coordination meetings need to be meaningful and not tokenistic. All parties need to ensure that representatives have the knowledge, skills and authority to participate effectively in coordination meetings.

- regular communication and sharing of relevant information within government and between government, NGOs and community partners as required. Up-to-date information on the range of services being provided in an area which is accessible to service providers and the community is critical to effective coordination.
- robust quality standards are required to ensure that services offered and being provided to the community meet a baseline quality standard.

Greater coordination will help but will not be a panacea to meet the needs of all vulnerable people in communities with high social needs. We need to continue to develop ways to meet the needs of the people in need who, for a variety of reasons, cannot or do not want to access the services currently available. This could include engaging vulnerable families in the planning, design, implementation and evaluation of services; and developing outreach strategies and engaging outreach workers to engage with families most in need.

We recommend that the NSW Government:

- backs-up its commitment to improving service delivery for communities and establishing effective partnerships with the community organisations by:
 - ensuring that communities are meaningfully engaged in identifying needs and planning services in their area
 - providing funding under any new social programs for coordination between government and non-government parties in relation to planning and delivering social services in areas of high need and complexity
 - improving transparency by sharing information regarding planning and delivery of social services within an area with NGO partners and the community at large
 - develop minimum standards to ensure that social services meet a baseline quality standard
- invests in ongoing research and evaluation that identifies strategies and practices that are effective in engaging 'hard to reach' families.

6. Examples of best practice in coordinated service delivery for communities with high social needs

6.1 Best practice example: Communities for Children program (C4C)

6.1.1 Overview

The C4C program provides a good model for effective service coordination. C4C is an early intervention program funded by the Commonwealth Department of Social Services which operates in 45 sites nationally, with eleven sites in New South Wales.

C4C programs are aimed at increasing child safety and wellbeing by addressing known risk factors that impact on the parenting capability of families, parents, grandparent carers and other carers. Services support the wellbeing of children by building strong parenting skills and stronger and more sustainable families and communities through the provision of parenting support; group peer support for children, families or carers; case management; home visiting services; and other supports to prevent child abuse and neglect. Since 2010, C4C has specifically focused on 'harder to reach' social and community groups and program objectives have broadened to include a much stronger focus on child protection.

The C4C model is based on the Sure Start Local Programs in the United Kingdom. However C4C introduced 'Facilitating Partners' to the model whereby NGOs are funded to develop and implement a strategic and sustainable whole-of-community approach to early childhood development in consultation with local stakeholders.

The Benevolent Society is the Facilitating Partner for C4C programs in two locations across New South Wales (Rosemeadow and Wyong).

Facilitating Partners establish C4C committees with broad representation from community stakeholders. Facilitating Partners oversee the development of community strategic plans and annual service delivery plans with the C4C committees and manage the overall funding allocations for the communities. Funding is then allocated to Community Partners who deliver the activities identified in the community strategic plans and service delivery plans.

An independent national evaluation of the C4C initiative undertaken in 2009 found that:

- C4C has had a significant impact on the number, type and capacity of services available in the communities in which it is based; and
- service coordination and collaboration has improved between services within the C4C communities.^v

The C4C evaluation found that aspects of the C4C model - specifically the Facilitating Partner and funding - were particularly important in contributing to positive impacts on service provision and children and their families.^v

The evaluation found that the role played by Facilitating Partners in asset mapping, community development, program establishment, facilitation, coordination, implementation and support was a major strength of the C4C model.^v The role of Facilitating Partners in building the capacity of small agencies in funding applications, program implementation and reporting was noted. The evaluation also found that the success of the C4C model is highly dependent on the qualifications, skills, experience and personalities of the project manager, staff and volunteers. Project managers require a range of skills including communication, organisation, facilitation, contract management and conflict resolution skills.

The evaluation found that funding for the Facilitating Partner and coordination of services was critical to the C4C initiative. The review sites spent 9 per cent of activity funding on activities relating to coordination.^v Service providers reported that they preferred the C4C model to direct funding because it was community-based, allowed for flexibility and built on local connections.^v

6.1.2 Case Study: Karen's story

Karen's story below demonstrates how C4C programs are having a positive impact on the lives of vulnerable people in New South Wales.

Karen's story

Karen lived in western Sydney for 16 years before moving to south west Sydney in mid-2012, with five of her six children. The youngest – Taliesha, Tyson and Wesley were 3, 5 and 12 when they moved into public housing.

Karen says moving to the area and her involvement in the Communities for Children program has turned the family's life around:

I suffered from chronic depression, and wasn't getting any support. In Mt Druitt I got in with the wrong crowd - drinking too much - then I got fines for driving without a licence. I couldn't pay, so I was incarcerated for six months.

This was the worst thing that could have happened to us – I couldn't look after my kids. It was hardest on my youngest – Taliesha and Tyson found it difficult without me. Taliesha became withdrawn and shy, and Tyson was anxious and wetting his bed.

After six months, I got them back. Then we got a Housing Department home in Rosemeadow – the best thing that’s ever happened to us. We got great support through The Benevolent Society’s Communities for Children program and the school.

Tyson went to Rosemeadow public, he had anxiety and trouble settling in. I would get calls because he would have accidents and poo his pants, and he had trouble concentrating.

Then his teacher put him through Reading Recovery. After intensive one-on-one work he improved from level 1 to level 19. Now he’s at the same level as his class mates.

Recently his teacher said: "I get emotional saying this, but I want you to know I've nominated Tyson for an Aboriginal achievement award." He’s so well behaved now – and he has no more accidents.

Taliesha was also very withdrawn. So I enrolled her in the Leapfrogs program to prepare her for school. Watching her inter-act with other kids and learn more was amazing. She was quiet when she started, but at parent-teacher night they said she’s really come out of her shell. She’s confident and talking a lot in class. She’s a really bright intelligent girl.

The support of my case worker from UnitingCare has made a big difference. Thanks to her, I'm more independent and confident, and able to support my family.

She’s given me really practical help, like getting my driver’s licence. I’ve got a car now and I can take the kids anywhere.

Uncle Dave is another huge support. His “Young Spirit Mentoring” program has been huge for Wes. When we moved here, he was withdrawn and not happy at school, but since this he’s found his confidence. Uncle Dave made him a mentor and encourages him to take responsibility and to see himself as a leader.

6.1.3 Recommendation

We recommend that the NSW Government:

- incorporates key aspects of the federally funded Communities for Children (C4C) model which promotes collaboration through the establishment of facilitating partner who receives funds to work with the community to identify the local needs and distributes funds to local organisations to deliver a range of activities.

6.2 Best practice example: Integrated child and family centres

6.2.1 Overview

The Early Years Centres model, which The Benevolent Society runs in Queensland, could also be seen as a best practice model for service delivery in communities with high social needs. The Benevolent Society runs three of the four Early Years Centres (EYC) in Queensland, covering nine locations plus mobile outreach. The Centres are one-stop shops supporting the health, wellbeing and safety of families who have young children from conception to eight years.

Each EYC is located in a socio-economically disadvantaged area (according to the SEIFA index) with high numbers of children who are developmentally vulnerable in on one or more domains according to the Australia Early Development Census (AEDC). The centres are staffed by a multidisciplinary team through partnerships between The Benevolent Society, Queensland Health, Aboriginal and Torres Strait Island social service providers, the Crèche and Kindergarten Association (C&K), and other local service providers. The centres offer a range of universal and targeted early childhood education, care and health services, such as playgroups, parenting support and education programs, home visiting family support, and long day

care and kindergarten. These services are delivered by a multidisciplinary team, including family support workers, early childhood educators and child health professionals (employed through Queensland Health). In January 2013, the Queensland Department of Education, Training and Employment published the results of an evaluation of the Early Years Centre initiative.^{vi} The results of the evaluation indicated that developmental, social and behavioural outcomes for children had improved, parenting skills and families had been strengthened, and outcomes for vulnerable families enhanced. In addition, it is reported that the EYCs helped to contribute to community inclusion, connections and supports.

6.2.2 Recommendation

We recommend that the NSW Government:

- builds on the existing network of child, health and family support services and moves to a more integrated service delivery system, which focuses on early intervention and targets particularly marginalised and high risk populations, including: Aboriginal and /or Torres Strait Islanders, Culturally and Linguistically Diverse populations, children with a disability, and other 'vulnerable' families. The Queensland Early Years Centre (EYC) approach is a model which could be adopted in New South Wales.

7. Other related matters: research into coordinated and collaborative action to tackle complex social problems in theory

7.1 Research into Integrated Service Delivery

The Benevolent Society is committed to providing quality evidence-based services to vulnerable communities, and to ongoing review and evaluation of our services and our approach to ensure our practices reflect the latest evidence. In 2010, we commissioned the Murdoch Children's Research Institute to report on integrated service delivery in early childhood developmentⁱⁱ and more recently commissioned research into the evidence base for early interventions to support vulnerable children.ⁱⁱⁱ

The Murdoch Children's Research Institute report, focused specifically on family and children, highlights the need for integrated service delivery to meet the complex needs of children and families and identified four levels on which integration needs to occur:

- Government/policy integration: policy and planning needs to be integrated across government portfolios, departments and agencies
- Regional and local planning integration: establishing partnership groups to drive local integration. Strategies include: mapping community assets and needs; developing an integration plan; linking specialist services with universal services.
- Service delivery integration: virtual or co-located integration along a spectrum from coexistence to full integration
- Teamwork integration: requires professionals to work with members of different disciplines.ⁱⁱ

There is limited research on the impact of integration. There is more evidence about the process of integration which confirms that it requires commitment, enthusiasm and careful planning.ⁱⁱ Reviews of coordinated multi-agency service delivery have identified a range of barriers to successful multi-agency collaboration, including:

- top-down decision making
- too many players and initiatives
- lack of clarity regarding roles and responsibilities
- poor communication and information sharing
- lack of ongoing training
- lack of trust and understanding between individuals and agencies
- constant re-organisation and frequent staff turnover
- lack of qualified staff

- different professional ideologies and agency cultures.ⁱⁱ

Reviews of coordinated multi-agency service delivery have also identified a range of factors that promote successful multi-agency collaboration, including:

- commitment
- having common aims and objectives
- strong leadership and a multi-agency steering committee or management group
- effective communication and information sharing
- understanding the culture of collaborating agencies
- providing adequate resources for collaboration
- participatory planning processes
- involving the relevant staff and agencies.ⁱⁱ

7.2 Research into the benefits of early intervention to target vulnerable people

Research commissioned by The Benevolent Society highlights the importance of acting early – within the early years of an individual's life (0-5 years) - to prevent long-term negative outcomes and to address existing problems.ⁱⁱⁱ It shows that programs alone are not sufficient to change outcomes for the most disadvantaged children and families, but that community and service level, and structural and societal level interventions are also needed.

Despite widespread social changes, the services and service systems that support children and their families have not changed significantly over the past 50 years, and are struggling to meet the needs of the most disadvantaged groups. Evidence suggests that vulnerable families often make limited use of services, such as early childhood and early intervention services, designed to assist them. Research finds the accessibility of services tends to vary inversely with the need for it in the population served. Thus, the parents in most need tend to be the ones who are least likely to access support services- referred to as 'inversed care law'. There are a range of reasons for this including: vulnerable families may have difficulties with transport and therefore have difficulties getting to a service; vulnerable families may be intimidated by the presence of more confident families attending services or they may not know about available services. Children from families who have poor social supports and make limited or no use of early child and family services are at increased risk of poor health and developmental outcomes.

Community, service level, structural and societal level interventions require a collaborative approach that doesn't only involve services but also involves, parents, communities and government. In addition, in order to ensure a more seamless service system for children and families- and more effective planning and resource management- there is a need for much greater collaboration between different government departments, different levels of government and between government and non-government services.

The community and service system priorities recommended to support early intervention and address problems faced by vulnerable people early before they become entrenched include:

- building a tiered system of services based on universal provision to ensure that all families receive a core set of services with additional services being provided to those with greater needs
- building whole of community, place-based, 'collective impact' alliances to deliver a comprehensive suite of interventions that target whole communities and address both the presenting and background needs of vulnerable families
- designing and running services with those who use them to ensure that vulnerable families have access to and make better use of supportive child and family services
- utilising outreach workers to engage families most in need.

7.3 Collective Impact

The Benevolent Society is also participating in research lead by Griffith University which is looking to develop structures and processes that can be used to achieve Collective Impact.

Collective Impact is a coordinated approach that brings organisations together from across government, community and the business sector to solve difficult social issues and achieve important social change. The underlying premise of Collective Impact is that no single organisation can create large-scale, lasting social change alone. Sustainable change which addresses complex issues requires people from different sectors, different functions, different cultures and diverse geographies to come together to be part of the solution.

A government department looking to offer more citizen-centred services needs to work with other departments, as well as the NGO sector, to achieve its goal. NGOs need to find new ways of working with each other if they are going to better serve communities. And business won't find the answers to the complex challenges of sustainability, corporate responsibility and innovation within the four walls of their organisation.

Many efforts to coordinate services have involved establishing networks. The Collective Impact approach differs in that it involves the creation of a formal governance framework, which needs to be adapted to the needs of each of the communities to which it is applied to solve complex social problems.

Successful Collective Impact initiatives typically have five conditions that together produce true alignment and lead to powerful results:

1. Common agenda: All participants have a shared vision for change including a common understanding of the problem and a joint approach to solving it through agreed upon actions
2. Shared measurement: collecting data and measuring results consistently across all participants ensures efforts remain aligned and participants hold each other accountable
3. Mutually reinforcing activities: Participant activities must be differentiated while still being coordinated through a mutually reinforcing plan of action
4. Continuous communication: Consistent and open communication is needed across the many players to build trust, assure mutual objectives, and appreciate common motivation
5. Backbone organisation: Creating and managing Collective Impact requires a separate organisation(s) with staff and a specific set of skills to serve as the backbone for the entire initiative and coordinate participating organisations and agencies^{vii}.

In theory, collaborative action will have positive effects such as better outcomes for clients, reforms that stick, innovation, better policy and lower costs. But in practice, collaboration is difficult. It is undermined by:

- Competition: between government partners which work within functional silos and between NGO participants who compete for government funding and may fear losing funding, losing long-term sustainability or losing their role in the community;
- Control: issues of relinquishing and sharing control, for example it can be hard for government when collaborating with the community sector to genuinely enter a creative space and let go of the traditional power relationship
- Commitment: it is unusual for partners to have equal motivation and levels of commitment and skills for effective collaboration.

Developing capacity in the community to understand how to work collaboratively is essential to adapting a Collective Impact framework and to tackling systemic social issues in a community.

The C4C program and the Early Years Centres in Queensland are initiatives which demonstrate the collective impact approach.

ⁱ New South Wales Government, Family and Community Services. FACS Strategic Statement. www.facs.nsw.gov.au/__data/assets/file/0008/298700/FACS_Strategic_Statement.pdf

ⁱⁱ Moore, T. and Skinner, A. (2010). *An integrated approach to early childhood development*.

ⁱⁱⁱ Moore, T. and McDonald, M. (2013). *Acting early, changing lives: how prevention and early action saves money and improves wellbeing*.

^{iv} The Benevolent Society. (2013). *Evaluation of The Benevolent Society's Communities for Children Programs*.

^v Muir, K et al. (2010). *The national evaluation of the Communities for Children initiative*. Family matters 2010 No.84.

^{vi} Queensland Department of Education, Training and Employment. (2013). *Evaluation of the Early Years Centre initiative: Summary report*.

^{vii} The Benevolent Society. (2013). *Collective Impact: the theory in practice*.