

**Submission  
No 64**

## **INQUIRY INTO CHILD PROTECTION**

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**Response to  
NSW Legislative Council  
General Purpose Standing Committee  
inquiry in child protection**

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# Who is Fams?

Fams is the peak body for non-government, not-for-profit organisations working with vulnerable children, families and families across NSW.

We encourage and help these organisations to deliver quality support services and provide them with strong representation across rural, remote and metropolitan districts. Fams has always been driven by strong values, and our vision is:

Safe Children  
Strong Families  
Supportive Communities

Fams was established in the late 1980s and provides membership support to about 200 services throughout NSW. Our members provide services such as home visiting, parenting groups, playgroups, case management, individual counselling, 'connections to community' activities and supported referrals.

The priority at the heart of all our work is the safety, health and wellbeing of children, families and communities. We provide support to our members through:

- Systematic policy and advocacy: to inform and enable the government to implement solutions that support vulnerable children and families, while keeping members well informed about emerging issues, reforms and current policy related to the child and family sector.
- Building skills and knowledge: to share knowledge and resources about evidence-informed approaches related to the child and family sector.
- Modelling and promoting outcomes-based frameworks: to enable the sector to collect and use data to inform practice and collaborate to provide better results for clients, practitioners and organisations.

## District Reps program

In 2013 Family and Community Services (FaCS) implemented a new arrangement of localisation within 15 districts. Localisation meant that FaCS has within each district a single, local integrated presence for clients and communities. Fams was the first peak in NSW to establish a District Reps program that responded to the new structure, thereby ensuring that we remained well placed to represent the diverse needs of vulnerable children and families and our members across the State.

Each of the 15 Districts has a Fams representative. These District Reps are leaders within their communities with extensive experience and networks with those working with vulnerable children and families.

Having a meaningful connection to members is essential to the function of Fams as a peak body. The District Reps program assists us to maintain this connection. District Reps allow Fams to not only have a real and valuable presence locally, but creates a forum to identify and debate emerging systemic issues affecting service delivery and access pathways for clients. The District Reps program ensures that Fams is well placed to be the lead voice of the sector.

## **Outcomes measurement**

Fams has specialised knowledge and skills in outcomes measurement using the Results Based Accountability™ framework (RBA™). We work extensively with the sector to build skills and implement these evidence based systems. One way we do this is to organise and facilitate forums that focus on increasing knowledge in evidence based approaches or building capacity on practice issues.

Fams sits on a number of working groups led by government and non-government organisations that enable us to stay abreast of emerging issues and influence policy related to the child and family sector.

## **What is a family service?**

A family service is a non-government organisation (NGO) that works with vulnerable children and families. These NGOs reflect the diversity of their community and can be small, medium or large in size. They are usually located in the most disadvantaged communities within their district or they outreach into those areas.

Family services work with vulnerable children and families to deliver a wide range of services including:

- case management;
- home visiting;
- parenting groups;
- playgroups;
- evidence based parenting programs;
- children's groups;
- counselling; and
- engagement activities such as family fun days.

Workers use evidence based approaches including strengths-based, trauma-informed and child-centred practice. The nature of the work is holistic and underpinned by an ecological approach whereby communities, families and children are inter-connected and require multi-faceted solutions.

Our members work is guided by 10 endorsed core principles:

1. All members of a family should be safe from violence
2. Children should be provided with safe quality alternatives if it is deemed they cannot live with their birth family
3. There is recognition that families have multiple forms, not necessarily biologically based
4. In family services, staff and families work together in relationships based on trust and respect
5. Family services enhance families' capacity to support the growth and development of all family members - adults, young people and children
6. Family services affirm and strengthen families' social, cultural, racial and linguistic identities and enhance their ability to function in a pluralist society
7. Family services are embedded in their communities and contribute to the community-building process
8. Family services are flexible and continually responsive to emerging family and community issues
9. Principles of family services are modeled in all aspects of the project, including planning, service delivery, management and administration
10. The priority at the heart of all our work is the safety, health and wellbeing of children and families

# Introduction

Fams welcomes the opportunity to respond to Legislative Council General Purpose Standing Committee inquiry into child protection. Fams specialises in child and family sector work and has comprehensive knowledge and expertise in early intervention and prevention programs.

Fams believes there is a need to review TEI programs and their interaction with the wider service system. Our members have expressed frustration regarding restrictive program guidelines and a fragmented service system that creates artificial boundaries and hinders their capacity to provide a holistic client-centered service.

In 2015, FaCS commissioned the Australian Research Alliance for Children and Youth (ARACY) to conduct a strategic literature review. The paper, *Better systems, better chances: a review of research and practice for prevention and early intervention*, “presents the findings of broad and rapid review of the key features and components of systems that support prevention and early intervention to promote the wellbeing of children, youth and families”, (ARACY 2015).

The paper’s Executive Summary concluded:

The aim of [targeted earlier intervention] reform must be the development of infrastructure for an ‘intelligent system’ that collects and uses data to measure the outcomes it is achieving, and which has mechanisms for decision-making that are responsive to evidence, data and changing local contexts. Effective systems are designed around the factors that promote the wellbeing of children and reflect the ways families work. They leverage trusted universal service platforms to promote the factors known to be important for child development and they respond early to emerging problems.

*Better systems, better chances* provides compelling evidence that the system is fragmented, requires more focus on outcomes and a better understanding of what works for vulnerable children and families.

Nevertheless, it must be recognised from the outset that there is also significant work happening across NSW that is making a positive difference to children and families. For example, the Australian Early Childhood Index (AEDI) shows that at a population level there has been an improvement in developmental outcomes for many children in NSW. Accordingly, we believe that investment in early intervention programs has contributed to this improvement and many of the elements of these programs should be maintained.

Fams believes that all stakeholders (FaCS, the sector and communities) need to be open to new ideas and ways of working while at the same time building on the strengths, expertise and innovative work happening in communities. We must strengthen our systems and practices to ensure less children are entering the statutory out of home care, fewer children are deemed at risk of significant harm (ROSH) and more children are thriving and happy.



# Service system design

## What does the service system look like now?

The current service system is designed to fund NGOs to deliver a range of programs and activities to vulnerable children, young people and families. Predominantly, programs are classified as prevention or early intervention, that is, intended to identify challenges early in the life of issue, or early in the life of a child. Clients come into contact with these services either through professional referral or self-referral.

Services rely predominantly on FaCS funding plus complementary funding from other NSW Government sources (including for disability, ageing, homelessness, health, education or justice programs), plus funding from the Federal Government, local government grants or philanthropic opportunities.

Together, typically a number of funding sources are pooled to create an opportunity to provide a suite of responses to vulnerable children, young people and families. But together, they also create a rather inflexible service system of artificial programmatic and geographic boundaries.

The current child and family service system creates unnecessary barriers that frustrates practitioners and limits the potential for families to acquire a service quickly and efficiently. According to ARACY (2015) our current system is “fragmented and poorly coordinated, structured around organisational needs and priorities, focused on individuals and individual problems, responding to crises and solving established problems rather than preventing the problems from occurring and has limited knowledge on what is working”.

## What do we want the system to look like?

Fams considers the service system should be built around the safety, health and wellbeing of children, young people and families, with a strong focus on prevention and early intervention, measuring outcomes, engaging in continuous quality improvement and using evidence informed practices that work. Essential to this are:

- recognising the importance of early intervention and prevention;
- the ongoing role of family services within the service system; and
- service coordination.

### Recognising the importance of early intervention and prevention

The definition for early intervention and prevention is contentious and different across sectors and organisations. Fams understands the importance of early intervention and prevention programs having a clear focus on preventing vulnerable children from escalating to being at risk of significant risk of harm (ROSH). But, we are very concerned that early

intervention and prevention funding is being eroded in NSW. Genuine early intervention approaches must be maintained, valued and adequately resourced.

“There is a strong and growing evidence base that supports the effectiveness of many prevention and early intervention programs and approaches”, (ARACY 2015). The evidence is clear that early intervention works and a system focussed on preventing problems rather than waiting until crises occur would deliver better population level outcomes for children. Importantly, the business case for early intervention is undeniable – government investment in early intervention also delivers cost savings by reducing the need for long term intensive service responses at the ROSH and statutory out of home care end of the continuum. Fams strongly supports a service system that is more proactive and less reactive.

Fams does not dispute that ROSH families must not miss out on a service. The challenge is ensuring that all vulnerable children and families are able to access the response they need for as long as they need it. Fams strongly supports a service system in which NGOs can be flexible in the referrals they accept so they can meet the broad needs of local communities.

There is no doubt that there is a significant and deliberate shift for services in the child and family sector to be working with families closer to the ROSH threshold than the traditional early intervention and prevention end of the continuum.

Fams is extremely concerned by a genuine risk that the Government’s continued focus on responding to ROSH families to the exclusion of lower risk children families will result in a long term failure to reduce the number of substantiated ROSH reports. Therefore, Fams considers there is an urgent need for further investment by the NSW Government in early intervention and prevention services.

A key example of the shift in the Government’s focus from early intervention to ROSH is the realignment of the Brighter Futures program. There is some debate about the triggers for this realignment, particularly as program guidelines have been already been revised once since the initial implementation of Brighter Futures.

The Brighter Futures program was first rolled out by the NSW Government (through what was then called DOCS) over five years – between 2003/04 and 2007/08.

A DOCS flyer from 2007 described Brighter Futures as a program to “provide targeted support to vulnerable families to prevent them from entering or escalating into the child protection system”. (emphasis added) Brighter Futures was always for non-ROSH families. If a child was assessed as being at risk of significant harm the program guidelines prevented that child from receiving support through the Brighter Futures program.

Now, FaCS describes Brighter Futures as a program that “delivers targeted early intervention services to families with children aged under 9 years, or who are expecting a child, where the children are at high risk of entering or escalating within the statutory child protection system”. (emphasis added)

The change in language from “vulnerable” to “at high risk” is critically important. It means that children and families once precluded from Brighter Futures will now be the target cohort for that program.

This is a significant shift of tens of millions of dollars away from the clients who require an early intervention response. To suggest that the total pool of funds available to deliver genuine early intervention and prevention services to vulnerable children and families has not changed is slightly difficult to comprehend. Without doubt, vulnerable children and families who were once eligible to receive a service through Brighter Futures must now be squeezed into the other programs. Without doubt, vulnerable children and families are now missing out on a service and being relegated to waiting lists.

### **The role of family services within the service system**

The diversity of family services is a real strength in NSW and Fams strongly oppose a standardised approach regarding the size of services. Fams supports a strong, viable, diverse sector with qualified workers. The majority of family services have the capacity to work across the service spectrum including universal, targeted or tertiary interventions. Family services spend considerable and essential time engaging and building relationships with families and the broader service system which means they are often the gateway to other services and a cornerstone within the service system.

### **Service coordination**

Fams members tell us that in their district there are initiatives focused on coordinated responses, but independent of each other, which contributes to program duplication and hinders effective service coordination. A lack of communication between the different levels of government and across the community sector can create disjointed community planning and coordination.

Fams members have told us of examples where there are multiple funded programs available to provide a very similar service for families within that district. NGOs are focussed on the same location resulting in other areas within that district not receiving a service. This is unacceptable and must be addressed if we are to provide a targeted and coordinated service system.

Having a well-informed and collaborative service system will support children and families to access the support they need without barriers. We need strong governance structures, and processes, such as a common assessment and referral process, to encourage effective relationship building and service coordination.

We believe that it is imperative for Government to consider the whole system that supports vulnerable children and families. Services and programs funded by Health, Education and Communities, and Police, must complement FaCS funded early intervention programs to ensure better coordination and less duplication of programs within communities. While the NSW Government has no control over federally funded initiatives, Fams considers it is nonetheless necessary to be consciously and deliberately aware of these to maximise opportunities and avoid duplication.

Fams believes that a best practice framework that would improve service coordination and enable responses to local need is the Collective Impact approach based on Kania and Kramer (2011) five conditions of collective success:

1. common agenda;
2. shared measurement systems;
3. continuous communication;
4. mutually reinforcing activities; and
5. a backbone support agency (a neutral organisation that is the lead).

Collective Impact will increase and enhance cross-sector collaboration, will pull organisations out of silos and help government and NGOs to start thinking about the system as a whole rather than just about their organisation or specific programs. For more information on Collective Impact refer to Appendix 1.

Fams believes that the Results Based Accountability (RBA™) framework is the best way to achieve Collective Impact. Collective Impact using RBA™ is internationally recognised through the Promise Neighbourhoods (supporting over 60 communities that work to improve educational and developmental outcomes of children. serving 14.7 million children experiencing poverty in United States) and Living Cities initiatives.

Further, Fams encourages Government to embrace established proven technology to support service coordination. The Clear Impact Scorecard™ (formerly known as Results Scorecard) is a cloud based innovative state of the art system that would support service coordination, encourage outcomes focused service delivery, improve data collection and reporting, support community strategic planning and streamline funding contracts. Through our partnership with Clear Impact (formerly Results Leadership Group), Fams is aware that earlier this year, the New Zealand Ministry of Health adopted RBA™ and the Results Scorecard™ to administer nearly \$1 billion worth of outcomes based contracts with the NGO sector.

Locally, Fams is trialling two projects using RBA™ and the Clear Impact Scorecard™: one with the Brighter Futures Lead Agency forum; the other in partnership with Youth Action and 10 NGOs receiving Child, Youth and Family Support funding in the Nepean Blue Mountains District. We are also leading community projects with Aboriginal Affairs relating to the Local Decision Making Accords, plus work with individual FaCS districts.

Fams is keen to further engage with Government on how these projects can inform TEI reform. For more information on these specific projects refer to Appendix 2.

## **Recommendations**

1. Fams recommends that Government commit to increased investment in services providing intervention services along the continuum from prevention and early intervention to risk of significant harm to give the sector the best chance of achieving a long term sustainable reduction the number of substantiated ROSH reports.

2. Fams recommends that Government, through FaCS) take the lead in developing district plans that are focussed on community wellbeing outcomes and shared outcomes measurement. Fams recommends that Results Based Accountability™ and the Collective Impact approach should be used to develop this plan.
3. Fams recommends that Government endorse, support and resource Collective Impact initiatives across NSW. These initiatives should begin with the most disadvantaged communities and build on the strengths of the local community and initiatives within it. This would enhance service coordination and lessen duplication of services.
4. Fams recommends that Government explore new technologies such as the Clear Impact Scorecard™ that will enhance and support service coordination in communities.

## Service delivery

### How are we doing on service delivery?

When the Community Service Grants Program (CSGP) was reformed in 2010 it had adverse effects on service delivery for many family services in NSW. For example, the new Child Youth and Family Support (CYFS) program did not allow for engagement strategies which are a vital component for early intervention family programs.

The resulting changes to program guidelines from this earlier reform also prevented many family support services from working with families experiencing complex issues even though they had been doing that work for years. It removed flexible service delivery that had allowed services to respond to community need.

Fams believes that there is real strength in service delivery for vulnerable families in NSW, however we want to see more focus on evidence informed practice. The *Keep Them Safe* evaluation in 2014 reported that there has not been enough focus on holistic multi-agency interventions. We agree – we need a strong and increased focus on best practice.

In regards to service delivery Fams believe that areas that require consideration in regards to this reform are:

- engagement of vulnerable families;
- integrated service delivery;
- flexible service delivery; and
- evidence based practice.

### Engagement of vulnerable families

Vulnerable children and families are often the most difficult to engage and generally do not access services. Consequently, extra time, commitment and innovation are required to

engage these children and families. The risk that services do not engage the children and families who require a service the most is too great to be ignored.

Fams agrees with Grace (2015) that a possible unintended consequence “(i)n the current competitive environment, (is that) pressure to demonstrate productivity and short term results to funding bodies may cause under-resourced services to focus the delivery of their services on those who are easiest to engage and for whom change will be most evident.”

Domestic violence, mental illness drug and alcohol misuse and risk of homelessness compound the complex challenges families are facing and limits their capacity to access services. When children and families do not have the capacity to seek support themselves, or are unaware of how to navigate the service system, they can remain invisible until they require a crisis intervention. Family services have the skills to engage these children and families effectively, link them to other services and support them by using evidence based approaches to achieve their goals.

Given family services are well placed to engage and work with families with complex needs we believe that building the professional specialist capacity of family workers around areas such as domestic violence and mental illness would be a holistic and cost effective way of ensuring families are receiving an appropriate service that meets their needs.

## **Integrated service delivery**

Fams believe that family services, must work together with others, including early education and schools, to provide a more integrated service for vulnerable children and families. “There is a strong compelling case for the creation and systematisation of a comprehensive and holistic child and family service platform. A platform that encompasses outcomes driven parenting, learning and health programs and practices, accessed through the gateways such as early education” (ARACY 2015).

Improving our service system requires all levels of government and NGOs to work together and create shared policies, frameworks and systems. The ARACY report (2015) indicated that the system was fragmented and poorly coordinated, structured around organisational needs and priorities, risk averse and unaware of what is working. Clearly we need investment and focus on planning a system built around outcomes for children, strong implementation processes and a commitment from all stakeholders to achieve improved population level outcomes for vulnerable children in NSW. Service provision focussed on outcomes for children should be the platform for integrated service delivery.

Fams’ members have told us that current practice of FaCS districts having different data collection requirements, performance measures and referrals processes is a major hindrance to the effective delivery of services. It limits flexibility in transitioning children and families between the current programmatic structures and leads to unnecessary paper work. Fams is very concerned that artificial boundaries are created by program guidelines and district borders which stifle integrated service delivery. Fams supports localisation, but believes that this must be tempered with flexibility to operate in a truly integrated way.

## **Flexible service delivery**

Without doubt, the resounding outcome that Fams and our members are seeking is more flexibility to respond to children and families in need. Overwhelmingly, family services want to be able to work with vulnerable children and families for as long as they need to achieve their case plan goals. This could range from very short support of a few weeks to long term intervention and support for many months.

Currently, program contracts are too prescriptive and hinder service delivery by restricting the capacity of services to take on higher needs families when appropriate. Fams acknowledge that some NGOs are operating in a flexible way to ensure that vulnerable children and families receive a service even where they may not be strictly eligible under current program guidelines. Others consider the guidelines more as prescriptive rules and are far more rigid in their approach. The difficulty with this situation is that data capture and reporting is skewed and is not a true representation of the work being done and the outcomes being achieved.

The time frame for working with children and families should be more flexible and allow for longer interventions, particularly when working using a trauma informed approach. Fams members commonly express that when families have the chance to experience complete healing and reconnect attachment with their child it is rare that these families come back into the system.

## **Evidence based practice**

Evidence based practice needs to be an integral part of service delivery if the aim is to achieve positive outcomes for vulnerable children and families. Evidence should guide work and support informed decision making. It can be derived from best research evidence, evaluations, theory and practice wisdom.

Family services work with vulnerable children and families to deliver a wide range of services. Regardless of what service or program is being delivered workers need to be using evidence based practice including strengths based, trauma informed and child centred practice.

Supporting Children and Responding to Families (SCARF) is a good example of a robust, evidence based case management system that guides practice. This system is very similar to the system in the *Getting it right for every child* approach that is reviewed in *Better systems, better chances* by ARACY (2015).

In Fams' experience most services funded to deliver early intervention services are highly professional and have the capacity to provide services and interventions for children and families across the continuum including prevention, early intervention, and working with ROSH families. Many of these services are already working with ROSH families, or have done this work in the past and would willingly return to this work.

## **Evidence based parenting programs**

Evidence based parenting programs are an important element of evidence base practice. When an organisation uses this type of program it must be used in its entirety to maintain the efficacy of the program. These programs are an important contributor to achieving positive outcomes for children and families. However, services need to be supported with the proper resources and support to ensure an effective implementation process.

One size does not fit all when it comes to evidence based parenting programs. Therefore, we believe that the districts need to look at the different types of evidence based programs provided to ensure a range of programs are on offer. Rather than a blanket approach (which is what Fams considers happened with *Triple P*), there should be a suite of programs available that can be utilised according to the needs of children and families within the district. Fams believes that evidence based programs, coupled with evidence informed practice, should be the underpinning of service delivery across all government funded services. For example, a family may require support for mental health and for attachment or managing a child's behaviour. To achieve this there must be a coordinated approach to identifying appropriate interventions, that also recognises the importance of allowing a family to participate in decision making. "To be genuinely effective, a program must also be part of an effective system". (ARACY 2015)

Fams thinks it is important to openly recognise the debate within the sector around whether the rigid structure of evidence based programs can make it difficult for some children and families to engage depending on their personal circumstances. Fams does not hold a strong view either way as the reasons for a family not engaging with a program would be as many and varied as the families themselves. Rather, Fams strongly considers that it is critical for services to have a suite of strategies and approaches available to respond in a flexible and appropriate way to engage clients when they are ready, and most importantly, to keep them engaged and supported to achieve case plan goal. We cannot risk losing contact with vulnerable children and families only to have them present again to the system when issues and risk have escalated.

## **Case management**

Providing vulnerable children and families with a designated case worker where a range of interventions can be delivered (including referrals and support to access services) is an excellent way of ensuring the very vulnerable are receiving the support they need. We believe that it is important for vulnerable children and families experiencing a range of issues to have someone to support them to navigate the system. According to Schmied et al 2006, case management is often considered to be "the glue that holds the system together." Case management has been a part of family service core work for many years, playing a pivotal role to support vulnerable children and families experiencing a range of issues to navigate a complex system to ensure the best outcomes are achieved.

## **Groups**

Many organisations provide supported playgroups or parenting groups that work collaboratively with other services allowing for a coordinated response and early identification of child and family needs. These groups provide a non-stigmatised gateway for



families who may need support but unlikely to access other services. Rather than waiting for families to self-identify and present themselves to services they have the opportunity to access a service early. Communities should not lose access to these services – they link, refer and support vulnerable families so it is paramount that they are enhanced and maintained.

## Recommendations

1. Fams recommends that all child and family services are supported to implement local engagement strategies to engage the most vulnerable families. Engagement strategies must be valued and implemented in all early intervention programs.
2. Fams recommends that Government maintain supported playgroups and groups that focus on parenting skill development, helping families' access services and building positive social networks.
3. Fams recommends that services should be using evidence based case management systems that guide best practice.
4. Fams recommends that Government contracting and procurement processes allow for more flexibility so that services can respond to the presenting needs of vulnerable child and families. Children and families should be able to access the services they need for as long as they need them to achieve case plan goals and lasting positive outcomes.
5. Fams recommends that Government provide NGOs with better access to local data to strengthen the process of localisation and inspire action and collaboration in communities.

## Program support and improvement

Some of the challenges for family services in recent years have been:

- the restrictions posed by funding contracts;
- the expectation to collaborate without any extra support;
- inflexible timeframes to support vulnerable children and families; and
- a lack of time and resources to focus on professional development.

It is paramount that family services are valued and supported so that they can continue to support their communities. Some of the key areas for program support are:

- revised funding contracts;
- organisations working with ROSH families; and
- workforce development.

Fams believes that a culture of outcomes driven, continuous quality improvement should be embraced and encouraged in the child and sector. Evaluation and program improvement

should be embedded within all NGOs and considered an essential part of core business in the delivery of quality services for vulnerable children and families.

FaCS has named its targeted earlier intervention reform goals as: “client-centred service delivery, evidence based service design and delivery, intensive responses that address causal factors and measuring effectiveness, focus on outcomes and interventions that work”.

Fams agree with these goals and identify the specific factors below as key elements in creating a culture of continuous quality improvement in programs and best practice:

- outcomes measurement;
- minimum standards for funded NGOs; and
- independent academic research.

## **Funding contracts**

The competitive tendering process can undermine relationships between organisations and frustrate cooperation. There can be no argument that NGOs must be viable in order to remain providing quality services to vulnerable children and families. But that must be balanced with the need for place based services, accessible and trusted within their local community, with specialist expertise and local knowledge. Fams accepts that there must be a level of contestability within the procurement process to ensure that those NGOs best placed to deliver a quality service are funded. However, Fams strongly opposes a blanket competitive tendering process.

Within funding contracts, Fams strongly suggests that NGOs should be supported to develop projects that focus on building relationships and developing innovative ways to work together using a cross sector approach. This could involve developing resources for learning and engagement opportunities to bridge the gaps in service delivery and create a well informed and educated multi-disciplinary service system. This could also include funding for partnership building. Currently, funding does not reflect the time required to network and build connections, establish and form partnerships, cultivate solid governance arrangements, develop shared measurement systems and engage in real coordination and planning focussed on outcomes for families and children. Ultimately, this work should contribute to a better functioning service system but requires investment, time and resources to do it well.

## **Organisations working with ROSH families**

Regardless of current program guidelines many family services have been working with very vulnerable families experiencing complex issues. This is largely due to the gaps in services for medium risk families. Many family services are responding to the ever increasing demand for access to services by accepting referrals of vulnerable children and families not strictly eligible for programs being offered. There is no evidence that these demands will decrease, rather the opposite is more likely, so there is a necessity to allow services to work with these families for longer periods of time and ensure realistic unit costings.

ROSH families do voluntarily access groups funded under programs such as Families NSW and CYFS. It is not unusual for workers to be unaware that these families should be classified as ROSH or are experiencing a range of complex issues until they have built a relationship. Families do not fit neatly into boxes and are not aware of how they are expected to fit into different programs in order to be supported. Therefore, we need to ensure all family workers have the skills to support children and families along the full continuum whenever possible.

It is imperative that all family workers have skills and knowledge in areas such as: domestic and family violence; mental illness; drug and alcohol misuse; trauma informed care, having difficult conversations; and good referral processes. Investment in upskilling all family workers in evidence based practice relating to the named issues could contribute to breaking down some of the barriers that prevent families from receiving quality client-centred service delivery.

## **Workforce development**

Ongoing professional development for practitioners working with vulnerable children and families to be using evidence based approaches is crucial. Services need to have adequate funding to ensure staff have opportunities to access current research, time to engage in reflection, action learning and participate in ongoing professional supervision provided by an experienced worker.

The sector needs to explore innovative ways to build the capacity of the sector to ensure a focus and commitment to best practice. Innovative programs such as peer mentoring programs and reflective practice are cost effective ways to build a culture of best practice and lifelong learning.

Unfortunately, the best program in the world will not be effective if it is delivered poorly – investment in building the skills and knowledge of practitioners is imperative, particularly when more NGO's are taking on highly complex families than ever before.

## **Outcomes measurement**

Through our participation on the Social Innovation Council, and engagement with FACSAR, Fams has actively supported the Government's work on a NSW Outcomes Framework. We are keen to assist in its early roll-out and adoption.

For the most part, NGOs do not have the funds or resources to regularly use scientific methodologies when evaluating services delivered. However, every organisation has the capacity to embed evaluation through an outcomes framework and regularly monitor performance if this becomes a part of their funding contract and they are resourced to do it. Services delivered to vulnerable children and families should be focussed on measureable outcomes for clients, include feedback, and focus on evidence based approaches that support ongoing improvement. When data is collected regularly an evidence base can be

built, trends and patterns identified and an opportunity created to reflect on results and improve practice.

Further, Fams believe that funding contracts needs to be outcomes based rather than just outputs. Organisations should be expected and supported to measure and report on outcomes related to the difference they made for their clients, as well as on and their internal governance practices, and partnerships within the sector.

Fams expertise in outcomes measurement tells us that it will assist organisations to engage in continuous quality improvement and support best practice. In addition, it will provide the framework and discipline to articulate the population outcomes and program performance measures to show the demonstrable impact NGOs are making to vulnerable children and families.

For more information on success stories from our members on implementing and embedding outcomes measurement using Results Based Accountability™ and the Clear Impact Scorecard™, refer to Appendix 3.

## **Service standards**

Service delivery in the child and family sector has improved over the years because services have embraced evidence based programs, evidence informed practice and have professionalised. Nevertheless, Fams believe that we do need to ensure all services meet minimum service standards to ensure every family can be confident they are referred to a family service that reflects best practice and quality standards.

Fams believe that family services would benefit from a set of enforced service standards that align with an outcomes framework. There is no doubt that NGOs working in the child and family sector must be able to safely and appropriately respond to clients who are experiencing domestic violence, mental illness and/or drug and alcohol misuse.

Fams strongly supports a mechanism that has a strong practice focus, and includes benchmarks for a qualified workforce that embraces reflective practice and experience beyond clinical knowledge. Change to introduce minimum standards should be commenced immediately to allow the child, youth and family a reasonable opportunity to demonstrate they do (or can easily) comply before the end of current contracting arrangements (30 June 2017 for most Fams members).

The Social Innovation Council has led work on an NGO Benchmarking framework which creates a solid base from which those NGOs without formal accreditation can commence working.

Fams has the expertise to lead the child and family sector through the implementation of minimum standards. The Fams *Principles in Practice: the family support approach to family work* is a sound initial reference point to ease the transition toward full implementation of the NGO Benchmarking framework.

## Independent academic research

The type of research required to evaluate programs in the Australian contemporary community is expensive and long-term – it is not work done alone by child, youth and family workers. Fams believe that funding should be available to conduct more research and build the evidence base for early intervention and prevention work with families.

An important issue in academic research on early intervention is that there are long-time frames for evaluation. Fams believes that it is important to have studies that follow a family, for say five years, and evaluates the lasting impact (or not) of early intervention.

## Recommendations

1. Fams is recognised for its expertise in embedding quality improvement through the robust outcomes measurement RBA™ framework. We are recognised across Australia for our significant expertise in outcomes measurement using RBA™ and Collective Impact. It is recommended that Fams should be funded to build the capacity of the sector to be embedding outcomes measurement.
2. Fams recommends that services are provided with a suite of evidence based programs that can be utilised according to the needs of children and families.
3. Fams recommends that practitioners be supported to engage in recognised ongoing professional development, including reflective practice.

## Conclusion

Our response to this inquiry is based on recent forums with our members and our strong connections to the child and family sector, including through our District Reps program. Fams is extremely well placed to actively engage and contribute to developing innovative ways to improve our service system and ensure that the best possible outcomes are achieved for all children in NSW.

We believe that the priority at the heart of all work in the child and family sector should be the safety, health and wellbeing of children and young people. This underpins all of our work including our response to this reform. Measureable outcomes for children, young people and families in communities must be central to decisions made in regard to partnerships, planning, service delivery and practice.

# References

Australian Research Alliance for Children and Youth (ARACY),. *Better Systems, better chances 2015*, pg 1 & 6

Grace, Rebekah. *Hard To Reach Or Not Reaching Far Enough? Supporting Vulnerable Families Through A Coordinated Care Approach*. Children and Families Research Centre, Macquarie University, 2015. A Review Of The Literature To Support The Healthy Homes And Neighbourhoods Project, pg 13 & 18

Kania, John, and Mark Kramer. *Collective Impact*. Leland Stanford Jr. University, 2011. Print. Stanford Social Innovation Review , pg 39 & 40

Schmied, Virginia, Suzanne Brownhill, and Peter Walsh. *Models Of Service Delivery And Interventions For Children And Young People With High Needs*. Centre for Parenting and Research, NSW Department of Community Services, 2006, pg. 35