

REPORT OF PROCEEDINGS BEFORE

STANDING COMMITTEE ON SOCIAL ISSUES

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

At Sydney on Thursday 8 October 2015

The Committee met at 9.30 a.m.

PRESENT

The Hon. B. Taylor (Chair)

The Hon. G. J. Donnelly

The Hon. S. Mallard

Reverend the Hon. F. J. Nile

The Hon. Dr P. R. Phelps

The Hon. P. G. Sharpe

CHAIR: Welcome to everyone. Thank you very much for coming. My name is Bronnie Taylor. I am a member of the NSW Nationals and I am the Chair of this Committee. On my left is the Hon. Greg Donnelly, member of the Labor Party. Also in attendance are the Hon. Shayne Mallard, the Hon. Dr Peter Phelps, the Hon. Penny Sharpe and Reverend the Hon. Fred Nile. We are members of the Social Issues committee. Welcome to the second hearing of the Standing Committee on Social Issues inquiry into service coordination in communities with high social needs. Before I commence I would like to acknowledge the Gadigal people who are the traditional custodians of this land. I would also like to pay respect to the elders past and present of the Eora nation and extend that respect to other Aboriginals present.

We will hear today from a range of stakeholders, including representatives from the New South Wales Government, the Information Commissioner, the Privacy Commissioner, the Benevolent Society and the Smith Family. Before we commence I would like to make some brief comments about the procedures for today's hearing. Today's hearing is open to the public. A transcript of today's hearing will be placed on the Committee's website when it becomes available. In accordance with the broadcasting guidelines, while members of the media may film or record Committee members and witnesses, people in the public gallery should not be the primary focus of any filming or photography. I also remind media representatives that they must take responsibility for what they publish about the Committee's proceedings.

It is important to remember that parliamentary privilege does not apply to what witnesses may say outside of their evidence at the hearing. I therefore urge witnesses to be careful about any comments they make to the media or to others after completing their evidence, as such comments would not be protected by parliamentary privilege if another person decided to take an action for defamation. The guidelines for the broadcast of proceedings are available from the secretariat. Media representatives who are not accredited to the parliamentary press gallery should approach the secretariat to sign a copy of the broadcasting guidelines.

There may be some questions that witnesses could only answer if they had more time or with certain documents to hand. In these circumstances witnesses are advised that they can take a question on notice and provide an answer within 21 days of receipt of the transcript. I remind everyone here today that committee hearings are not intended to provide a forum for people to make adverse reflections about others under the protection of parliamentary privilege. I therefore request that witnesses focus on the issues raised by the inquiry's terms of reference and avoid naming individuals unnecessarily. Witnesses are advised that any messages should be delivered to Committee members through the Committee staff. Finally, could everyone please turn their mobile phones off or to silent for the duration of the hearing?

AMITY DURHAM, Executive Director Family and Community Services and Service Innovation, Social Policy Group, Department of Premier and Cabinet,

BRIAN SMYTH KING, Executive Director Learning and Engagement, School Operations and Performance Division, Department of Education,

JACQUELINE MAREE WALK, Deputy Secretary, Programs and Service Design, Department of Family and Community Services, and

RACHNA GANDHI, Executive Director Service Delivery, Service NSW, affirmed and examined:

AMANDA LARKIN, Chief Executive, South Western Sydney Local Health District,

ELIZABETH KOFF, Deputy Secretary, Strategy and Resources, Ministry of Health, and

ALISON MORGAN, Acting Executive Director Regional Coordination, Government, Corporate and Regional Coordination Group, Department of Premier and Cabinet, sworn and examined:

CHAIR: I welcome our first witnesses, representing the New South Wales Government. I invite you to start by making a short statement. Please keep it to a few minutes as that allows us more time for questioning.

Ms DURHAM: If it is possible, I would like to open. I can give an overview of our Government submission and then my colleagues can pick up and speak to the specific areas of their responsibility. My role in the Department of Premier and Cabinet is working on the Family and Community Services issues and, in addition to that, on service innovation. That includes thinking about social investment, different ways of working, strategic commissioning and behavioural insights. Today I would like to speak briefly about our submission and Department of Premier and Cabinet's role in supporting service coordination at a policy level. My colleague Alison Morgan will then be able to speak about our role in regional coordination and some of the practical things that are going on on the ground through our regional coordination network.

To begin with we would like to acknowledge and recognise that the New South Wales Government has a long history of service coordination not only between our own government agencies but also with the Commonwealth Government, local government and non-government service providers. Our submission sets out a range of examples of this work. We would be pleased to take questions in relation to those and others that are occurring. Our experience has demonstrated that it is really vital to undertake service coordination when we are working in communities with high social needs. As we know, often people in those communities have multiple needs that span agency boundaries and service boundaries, and it is really important that we coordinate and work together.

Our submission highlights that there are many different approaches to doing this and often a one-size-fits-all is not the right approach across the State. We need to be flexible to adapt to communities and the particular issues in local areas. There are different ways in which government has approached service coordination. Our submission tries to give an idea of a continuum of different forms of coordination to help understand the activities that are occurring. Some examples are straightforward approaches to consultation—so the way government informs and gets feedback from communities—but in greater depth there are other coordinated activities where we work with people directly and agencies know the local service system well and are able to refer clients on to services as they require. Examples here that we are able to talk about today include our family referral services, the work on domestic violence and particularly the It Stops Here reforms, the Safer Pathways and the network specialist centres that our Department of Education is establishing.

Another form of coordination that perhaps is much more joined up and more intensive in terms of that joint working is work at the client level, so that is around individual families or individual people who have multiple needs. Often those responses involve joint case management or might involve the co-location of services in one place to provide more of a one-stop shop and the ability for practitioners to work together across different issues. Examples there include the Aboriginal Child and Family Centres, the Housing and Accommodation Support Initiative for people with mental illness and the Joint Investigation Response Teams for children who experience abuse.

The Government also has many examples of working in community around joint service design and planning. This goes beyond individual clients and individual families and thinks about the system and the services that are being delivered on the ground. Often it involves codesign with the community—so, collaboration—working with the non-government service providers who are there and also with community members and identifying some shared outcomes, thinking about how services can be better delivered on the ground to reflect local priorities and really working in a much more collaborative way to design the priorities and then the services that are delivered.

Some examples we would like to talk about are the codesign approaches that Family and Community Services is running at the moment for vulnerable families; the Collective NSW initiative, which is very much a grassroots, community-driven approach to local coordination; and our approach in Aboriginal communities around local decision-making and how we support local Aboriginal communities to set the priorities and to help and work with government to decide how services are delivered on the ground. The last element we talk about is much stronger ways of integrating services, and that is through structural reform. In that case we might see the amalgamation of service providers forming one organisation, or encouraging service providers to form consortia. That is particularly relevant for the non-government service sector.

So I guess one of the key messages is that many of these approaches are being applied on the ground. We have lots of examples out there and some learnings that are emerging from each of those approaches. Importantly from the New South Wales Government perspective there is no one way of doing this and we are still learning from experience on the ground. It is really important to consider the local context, as I said, to work out what the appropriate approach is. We have suggested in our submission that the Committee consider some best practice principles around local coordination, which we have derived from our experiences across all of these initiatives. Some of these key principles from our perspective are that there is a genuine commitment by all parties—so this is government, the non-government sector and the community—to work together and to approach these processes in good faith and collaborate and work as joint partners.

Shared goals and objectives are really important in this space, so a lot of time is often spent in the early phases of collaboration to actually agree: What are our shared goals for this community? And this can be difficult. It can take time. But it is really important then to direct the more detailed planning about what actually occurs on the ground. We have heard too that it is really important that there is a clear authorising environment for this local activity to occur. Our own agencies are keen that there is that authorisation to work differently, to invest in collaboration and coordination, and also I guess some confidence from the community and the non-government sector that the Government is committed to this space and to working through the issues and working jointly. A strong facilitator or co-ordinator is really important for these processes to keep the parties together and to sustain the momentum in the process.

We also see a principle around data sharing as being really important here. To be able to bring the community along, government needs to be able to share data about what is occurring in the community and what services are being made available. So we do acknowledge that that is really important in these processes, and also information that government can provide about the evidence base that exists with different approaches, different services and to support those local co-ordination efforts around that. A participatory approach including the voice of the community, service recipients and clients is vital and that approach is designed to really involve everybody in that thinking. And a local place-based approach often is the right way forward, particularly in these communities with multiple and high social needs. In our submission we also raise a range of enablers. I know you said to make a fairly short opening statement, so I am happy to take questions or should I continue?

CHAIR: Yes.

Ms DURHAM: Some of the enablers that we see really go to the principles as well. We have observed that having some complementary organisation boundaries across our government agencies has helped these processes and helped people be able to work collaboratively and to think about services because the people around the table are responsible for those in the same areas. Having technical capacity and the ability to produce information and data are really important so data sharing and privacy is part of that; but, in addition, having the information technology systems in place to collect the data to be able to analyse that data in an efficient way is also quite an important enabler.

Having clear strategic direction and authorisation within government—I spoke about that—we see that as a key enabler. And strong and sustainable governance arrangements on the ground, so with a strong

facilitation or leadership, are really important to make these processes work. We see a range of different models, whether they are co-located models of service, outreach service models, are ways in which the services can be changed on the ground to get much more responses around people with multiple needs. I mentioned data, a part of which is data sharing and the other part is building our capability to analyse data. So there are a couple of initiatives which the Government is presently rolling out and one is the establishment of the Data Analytic Centre within the Department of Finance, Services and Innovation.

The idea is that the centre will provide a capability within government to be able to analyse data from across our agencies and provide really strong analytics to help inform local decision-making, help inform decision-making on policy and services within government. Lastly, we see other means of using common assessment tools. So agencies that are working around clients with multiple needs, they assess those needs in a similar way and there are clear referral processes and pathways so there is a really good understanding of the services on the ground and the ability to refer people into those as required. They are really important enablers.

The last thing we see as a key enabler is being able to work towards matching funding to local needs and devolving some decision-making down to local areas so our local agencies can make decisions within these processes and be able to move and shift investment around local needs. My colleagues will be able to provide some further information on each of these specific initiatives. They have already introduced themselves, so I will not do that. As you ask questions, we will refer them and others will pick them up as they best meet each of their needs.

CHAIR: Ms Morgan, do you want to make an opening statement from the regional and rural perspective?

Ms MORGAN: No, not at this stage.

CHAIR: The Committee members will share questioning, without specific timing. I am pleased that Mr Smyth King is here as I have heard about his work from the Minister for Education. Will you elaborate on how you started your programs, obviously with an education focus, to look at challenges where our education results are not what they should be? Would you tell the Committee what you did and how it is working? I am interested in reading about the work that has occurred within the department. Often our rural and regional communities cannot get specialised staff. It appears that the department has looked at that and it has staffed these places in larger centres that outreach to the communities. Would you elaborate on that program?

Mr SMYTH KING: I am very happy to begin. Our journey in this work began probably back in about 2009-10 when we were faced with the issue of primary-aged children in rural New South Wales who had really complex reading problems. When you have a young child with a complex reading problem you invariably get a lot of psychological issues around that as well. There are lots of issues also that stretch out into the family and the dynamics within families. We found that schools in which these young children were attending did not have the knowledge, skill or ability in the depth that they needed to respond to the learning needs of these kids. We were getting young children in the early years of primary school quite significantly disengaging at a very early stage.

The system had a service that was jointly funded by Health and Education to provide an intervention service. It was an acute tertiary level service and so families were required to relocate for a particular period of time from the country to the city here to undergo the program and then they would go back into the school. We found that there was no real capability building of the schools in which these children attended nor were there significant sorts of capability buildings within the community or the families themselves. So in 2010-11 we decided to redesign the system completely. We put in place a devolved service system, again in partnership with our colleagues in health, Westmead Children's Hospital in particular. We retained the acute tertiary service but we also introduced for the first time what we called an indirect service.

We established the service hub, if you like, in the city where the expertise is. So we did not require the expertise to travel to the country but we were able to disseminate that expertise. We then established service centres in Dubbo and Wagga Wagga. Those service centres then abled families in rural New South Wales to come to those centres to access the service being delivered out of Westmead to those families. We found in the time since that has been in place is that the waiting list has been diminished and we now have about 100 students a year who receive that direct service. They get triaged into the provisions that we provide which both have a blend of literacy and numeracy development or the educational development of the core skills of literacy and numeracy. But also there is a very strong emphasis out of the clinical psychology services at

Westmead into the psychological services that go with children who are delayed or their families coping with those children—so the behavioural and psychological issues that come with children who do not progress in school.

The real innovation in this space is that we put in place what we call an early intervention and preventative mechanism within this service which is our indirect service. So it is a web-based service predominantly but through our expertise of staff in both the centralised provision at Westmead and the ones in Dubbo and Wagga Wagga. We have got another one in Manly that deals with the Royal Far West so we actually bring in the Royal Far West in terms of our marrying up with those sorts of services that that agency provides. We have been able to provide people, wherever they are in New South Wales, with the knowledge and expertise that they might need when they are in the early stages of moving through the issues that these young children provide. What we see now is that there are about 4,000 contacts with our indirect service throughout New South Wales a year and it is being very, very effective in driving capacity building across our schools and communities in New South Wales.

The outcome has been that we have now reduced the number of kids who are actually seeking the acute service or the tertiary service provided by Westmead so they get triaged through the service. We have actually got a much more holistic and quality service from the point of concern through to the ultimate delivery. We have used the learnings in that particular initiative that we have put in place to develop our network specialist centres, and I am happy to talk more about those. That is now a much broader service system that we are moving towards implementing which will build on many of the learnings that we have got out of that particular provision.

CHAIR: It is great innovative work. You talk about service co-ordination between Education and Health that are so intertwined in a child's outcome. Last weekend I heard Lindsay talk at a conference and a specific example was raised of an eight-year-old child who could not speak. Basically by working with Royal Far West and then in the community through telehealth, although the child needed very acute speech therapy intervention, there was no speech therapist where the child was but Royal Far West was able to facilitate. They worked with the school, with Health and Royal Far West and co-ordinated their services. Do you see the benefits in delivering and getting better outcomes for our rural and regional areas?

Mr SMYTH KING: Very much so because what clearly is a major issue in this space is the expertise that you might require in a remote location at a particular point in time and you need it when it is needed, not when it might be available. Families often have to experience disruption to family life and income, to travel long distances and all those types of things. This has provided us with a much better mechanism to provide an ongoing, on-the-ground service that can be cumulative over time rather than the one-off visit to a particular specialist centre at a remote location.

CHAIR: In relation to delivery do we see a change in mindset? When I saw a video of this child it struck me that within nine months, an eight-year-old who could not speak was then able to have a conversation. In the remote rural town in which the family lived there was no speech therapist and realistically no-one will be moved there. I would like your opinion because a speech therapist in Canowindra did not need to deliver that; they got the expertise of a speech therapist at Dubbo intensively for four or five days. A general worker was then able to co-ordinate with the speech therapist at Royal Far West and kept delivering therapy to the child. As a past health worker, I sometimes think there has to be a physio, an occupational therapist or speech therapist, but this was clearly evidence that by coordinating those services and working together they were able to achieve the outcome without having specialists.

Mr SMYTH KING: I think the issues you raise here really go back to empowering people locally, but empowering people like families to be better placed to understand what the issues are that a member might be having and how they can be supported in developing skills to respond to those. That is exactly what this does. You have the input of the expert, but you are actually building the capability of the individuals themselves. Particularly where young children have a reading difficulty, in many cases those students who have the most serious reading difficulty are unlikely to ever overcome them; it is about how they manage those difficulties in life. This gives them the capability to do it. It empowers them to do it, because you are skilling them to do it themselves rather than going off to treatment in a clinical sense that does not have any resonance to their daily life. For us, it has been important to connect with community and the expertise. It works very well. By extension, we start to skill people locally about understanding the issues that individuals in their community may be experiencing.

CHAIR: Would somebody else like to ask a question? I have heaps.

The Hon. GREG DONNELLY: Yesterday we had the opportunity to visit a couple of places in Western Sydney and we were exposed to a couple of initiatives. The first one was called The Hive out at Mount Druitt. In the afternoon we went out to Claymore and the folks told us about what is happening in that community. In regards to a couple of examples for which we have had specific information provided to us, are you able to comment about the thoughts that the Government has in regards to The Hive—the initiative in Mount Druitt—and what is happening in the Claymore community? I know it is a general and open-ended question, but we have a couple of case studies to which we have had specific exposure. Your comments would be welcome.

Ms WALK: I am familiar with The Hive. I think I am on one of the governance bodies of The Hive—I know I am on the governance body.

The Hon. GREG DONNELLY: I am glad you are able to confirm that.

Ms WALK: I am absolutely able to confirm that. The Hive is interesting because it was initiated by United Way. In respect of non-government agencies, it would be great for you to engage with it. United Way is not necessarily a strong service deliverer. It does not see its future in that; it sees its future in service delivery—non-government organisations [NGOs] as well as government coming together. It came together with another organisation called the Twenty10 foundation. It also is similar. It is a foundation that wants to help move beyond siloed NGOs and siloed government departments trying to address very complex social problems. They came to the Department of Family and Community Services [FACS] in Western Sydney. They had some specific projects that they wanted to see developed, but they really wanted to work in Mount Druitt which has—I do not know how many but a lot of individual initiatives by a lot of non-government agencies.

The Hon. SHAYNE MALLARD: I think up to 200.

The Hon. PENNY SHARPE: They estimate 200.

Ms WALK: Yes, that is right. A lot of those initiatives are seeking similar outcomes. Everybody absolutely joined in wanting to achieve those outcomes but they were undergoing different activities and they did not necessarily leverage off each other's activities and sometimes they were not necessarily even evidence-based—will this activity really achieve that outcome? They wanted to bring together local service providers but they also had a lot of experience with another agency that is quite active, which is TACSI—The Australian Centre for Social Innovation—which was working on a quite different model with families on the ground, which is a project called Family by Family. It takes families who are resilient who have been through tough times. They are what they call a sharing family and it pairs them with what they call a seeking family, those who are going through tough times and it really supports them. It does lots of coaching and mentoring for that family so they can help this family. It is a model that FACS has funded from South Australia. They have tested it out there.

The Hive grew out of a number of interesting initiatives in Mount Druitt that they wanted to put together and say we have got this new way of approaching very disadvantaged families and communities, and these groups all work together for similar outcomes. Is there a way we can build from the ground up the community and those agencies to get some very specific outcomes? The one outcome they are chasing at the moment is school readiness. They have reduced it. There are two primary schools they are focused on at the moment in respect of trying to shift the school readiness of children from very disadvantaged communities going to those schools. It is built on the collective impact principles, which I think we refer to in our submission, which is about when you get agencies and residents around the table, you want to get really, really focused on the shared objective. The shared objective might improve by 10 per cent the school readiness or the best start or the Australian Early Development Census [AEDC] scores of children entering schools, so you get very clear about what you measure and your objective, and The Hive is doing that, particularly around transition for early years children.

The Hon. SHAYNE MALLARD: The backbone, the Claymore Action Network, I think is more government driven than The Hive. What I found interesting was the continuity of this community partnership, whether it was government initiated in Claymore or The Hive initiated in Mount Druitt. The feedback we received was that all the other services come and go. Their funding dries up; it may disappear, it may come back. There is no continuity of presence, but this overarching backbone organisation provides that continuity

and buy-in from the community. They are two interesting examples. Is that the principle which we should be looking at?

Ms WALK: Yes. The backbone, if you like, is something that we have learnt. In the sense that the backbone organisation is the one that helps sustain these agencies because individuals in agencies come and go and the projects of agencies might come and go. The backbone, whether it is an agency, generally needs to have sufficient authority as well. Examples where it has been used in community development also are the Communities for Children Initiative, which was funded by the Federal Government, and I think it still exists. There is one in Campbelltown and Kempsey and other places in New South Wales. It specifically funds an agency to do the planning and community engagement of the agencies around the table, whether they be government or non-government. The backbone can also help bring the data and all of those kinds of things together because they are tough communities to work in and people do fantastic jobs, but they are often involved in doing the one-to-one work with clients and the backbone helps people to get up and look at the community level initiatives as well.

The Hon. SHAYNE MALLARD: A supplementary, if I may? What we picked up on was that it seemed to be necessary that they were not a service provider. They were not a competitor to all the service providers, so if there were turf wars or any issues they were not providing direct services. The Government provides the services, so if the Government is the backbone we thought it becomes an issue.

Ms WALK: I am a bit agnostic about who can be the backbone, either individually or organisationally. Some agencies or individuals have a lot of authority in communities and sometimes they are well placed. Sometimes it is about who is prepared to be engaged and active, and that might be because they are able to be because they won the tender to do it and sometimes that helps with the authorising environment. Sometimes it is because they are not a service provider and that enables them to do that work. I am always leery of saying it always has to be a government department, or it never can be a government department, or it always should be an NGO that is not a service provider. We have enough examples of the opposite where it has worked very well.

The Hon. SHAYNE MALLARD: One size does not fit all, as you have said. The City of Sydney submission indicated it was leaning towards coordinating services in the city.

Ms WALK: Sometimes local government has the ability to play that role and other times local government is the big service provider in some of our remote towns, and it might be helpful to have someone else as well.

Ms DURHAM: I will add that we are seeing the philanthropic sector playing a role in terms of funding and the Government does not want to crowd out some of that. It may be that philanthropic investors as well as a non-government agency is the right model for a community if they have that local authority.

CHAIR: A quick add-on. Yesterday we looked at the project that you talked about of getting children to preschool. We have the evidence and it is black and white: if we can get them to preschool they will have better outcomes. While the example was being used of service coordinators and different services coming together to achieve this goal—which is such a winner; you cannot argue with it—they were having trouble accessing where the children were. How do you answer that? How do we as a community say, "Here is a great project in a vulnerable community with high social needs that is actively trying to get children to preschool which will work and save money. Aside from that, it will give the children a future." The program was so impressive and so great, but it could not get the numbers of where the children were to lure them into preschool.

Ms WALK: It is interesting. Sometimes we think we have data on children. Who collects that data—maybe Housing? We know how many children live in our Housing department places, but we do not necessarily know if they are enrolled in childcare. In some of them, to be honest, the doorknocking, which I think they are doing in Mount Druitt—

CHAIR: They are.

Ms WALK: —is actually not a bad way to approach that issue because often it is not, "Oh, if only I knew preschool was up the road I would go there." I have had staff work for me who have run supported playgroups in housing estates and they say, "I can be 100 metres from someone's door but unless I go and knock on their door and say, 'Play group is starting now. Are you ready?' They won't come."

CHAIR: The art of doorknocking.

The Hon. SHAYNE MALLARD: Even in the upper House.

CHAIR: That is right.

Ms WALK: Many of those communities for children doorknock with one-on-one, face-to-face engagement as a core platform of what they do with the community.

The Hon. PENNY SHARPE: I want to ask you some questions around systemic change. Essentially the Department of Premier and Cabinet, under all governments, has tried for many, many years to coordinate within these communities. We have seen individual levels of success. I think what we have consistently seen is that as soon as the money dries up for the specialised programs, nothing changes and everyone goes back to their old bad habits—to a greater or lesser degree. My question to you all, individually and collectively, is what work is happening in Government to encourage collaboration and time spent on collaboration for all of the services that you are procuring in these disadvantaged communities, and if there is nothing in the service agreements about collaboration, is that something you would support?

Ms WALK: I will start with collaboration of our CEs [chief executives] or of our local district workers.

The Hon. PENNY SHARPE: I am talking about a place based approach. Using Mount Druitt as an example, there are 200 community organisations working on top of each other. They are Commonwealth funded and State funded. Some have a bit of Health money and some have a bit of FACS money. Some have some money through specialised school programs. Everyone is saying that they are coordinating; it is clear that they are not. Is it time for us to put something into the funding agreements that says, "Five per cent of your time will be spent working with others in the community on shared outcomes."

Ms KOFF: I am happy to go first, if I may. Working in the Ministry of Health, my portfolio covers strategy and resources, but in real terms that means that a strong component of what I look after relates to social policy issues—domestic violence, child protection, mental health issues—which are all inextricably linked. The journey has been interesting for me because I have been seven months in the post and previously I have always been out in the field working on operational issues. So I have a really strong understanding of the centre making policy and providing guidance and direction and the reality of implementation at the local level. The local level is where the rubber hits the road. That is where the difference is made. The understanding of the nuances of the local environment is quite remote from the central agency.

That is why I was very keen that Amanda Larkin—from South Western Sydney Local Health District—represented today. From my perspective in the central office we need to have a very iterative and close approach with the operational arm of the business to understand how it works at the coalface. Because of the increasing demand on social issues in Health—it would be fair to say that Health is traditionally viewed as hospitals, emergency departments and surgical waiting lists, but there is so much more to Health than what is in the four walls of hospitals—we have been doing a significant amount of work. For the first time, this year we had a joint meeting between the district chief executives of FACS and the local health district chief executives—with Michael Coutts-Trotter and Dr Mary Foley in attendance—and deputy secretaries to say, "It is now an imperative that we work together on the social issues. Let's get together. We are creating an authorising environment, as it comes from the Department of Premier and Cabinet's work with service delivery reform, but let us work together to see how it is delivered on the ground." The feedback from everyone who attended was that it was a positive experience.

From my perspective in the ministry, I think we also need to have it documented in service level agreements that it is core business of the health system to work in partnership with other government agencies. Most of the metrics around service agreements to the districts involve emergency department attendance performance, surgical waiting list performance and adverse clinical events, but quantifying and measuring how we do it is a little more challenging. But if something is not there, it is not recognised as core business, and that is the next priority for us.

The Hon. PENNY SHARPE: That is good. That is just within the Department of Health, which, again, is one siloed agency across government. You are talking about the silos within your own department. How do we break that down? You are also a purchaser of a bunch of services from non-government agencies,

who are working in these same communities, falling over the same clients. Is there a need, would you support this, to have in their service agreements some requirement for time to be spent collaborating with others around some sort of shared measures?

Ms KOFF: I would, most definitely.

Ms LARKIN: I am happy to comment on that. At a local district level there are a number of non-government agencies that we fund. Historically, we gave out the funding. We said, "This is the service. You have carried it out for a certain amount of time. Here is the funding." Over the last couple of years we have had a much closer relationship with those agencies to start to look at how they work across their group of agencies. For example, we look at those that we fund in terms of mental health and look at how they collaborate. We also look at how we work closely with them in terms of providing services across the district and also in a place based—

The Hon. PENNY SHARPE: Is there a requirement within their service agreements—

Ms LARKIN: We are starting to build that in. Previously, the funding was given out. We are now sitting down and talking with the agencies not just about their KPIs but what we are asking them to deliver, how they will deliver it and how they will work with us and the other agencies. So it is not in there at the moment, but there has been lots of discussion about how we start to build that understanding. Working across agencies is absolutely building this.

Ms WALK: Family and Community Services is a very large commissioner of non-government areas, and it has been in that framework for about the last 10 years. One example is that in about 2006 we first moved to commission services called Brighter Futures. That was a \$60 million program—one of the biggest statewide early intervention and prevention programs for vulnerable families. It had a number of components, so agencies must have child care, must have home visiting, must have some brokerage and must have some parenting programs. We really pushed the non-government agencies to say, "You do not have to be the provider of all of those. In fact, you are probably better not to be the provider of all of those." So we needed to ensure that they built in the early childhood component. They needed to have partnerships with a whole range of childcare agencies, for example.

Your question contained concerns about two things. One thing was that agencies do not necessarily collaborate well on individual needs. The other is that if, for example, agencies deliver counselling services they will use counselling services to address the issue rather than saying, "Actually, this is an employment issue and we do not deliver employment but Mission Australia, up the road, do." Agencies will often not necessarily use the best evidence for that issue if they do not deliver it.

As a department, we were trying to address that issue. We were saying, "These are the components, whether you deliver them or not." Most recently, when we went back to tender for the youth program Youth Hope, we put that in the tender—how were they partnering and who were they partnering with? We asked for a copy of all their MOUs [memorandum of understanding] and those kinds of things so that we were able to build coalitions. That is quite difficult. Some smaller agencies do not engage well with the bigger consortia type of arrangements. The jury is out in terms of how effective it is to put that in contracts. The other point of your question, I think, was about whether we are valuing collaborative work in the contracts.

The Hon. PENNY SHARPE: My concern is that all of the services are overstretched. If agencies have people walking in the door in crisis, that is the priority. They worry that we should value the time within their contracts and that we say, "This is what you will do. You will come together to do this," and that we should value them doing that sort of planning and joint work because it is not only desirable but necessary to get a better outcome on the ground. That is my concern.

Collaboration, the way you have described it, is fine but I still worry that unless we say to people on the ground that we believe that it is very important and that it should be part of what those agencies should do, agencies will be inhibited because that time is not valued. They are all stretched. The other thing I would say—this is more of a comment and I will leave others to ask questions—is that I am concerned about some of the competitive tendering arrangements. I am worried that they are too short and that they inhibit collaboration on the ground. Yet again, you are seeing a lack of trust and the inability of services, which have been through very bruising tendering rounds, to rebuild. I am wondering how we can manage that better.

Ms WALK: Your final question might be a little bit about examples where we have contracted for a number of different agencies—government and non-government. HASI [Housing and Accommodation Support Initiative] is, I think, one of the best examples of that. The issue for housing is just to sustain the tenancy. So there are very clear roles and responsibilities. For health the issue is to watch out for the clinical needs of the client with a mental health issue. For Neami, or whoever the provider is, the issue is to do all of the community work to help this person in recovery. Very clear roles and responsibilities sometimes help the agencies in terms of collaboration. Sometimes when the roles and responsibilities are a bit too diffuse, after a while the client in front of them seems more needy than the too diffuse need to collaborate well. I think we need to be very sharp about roles and responsibilities in collaborations.

Reverend the Hon. FRED NILE: Thank you for coming in. I have a general question. We are looking at communities with high social needs. In your submission you referred to Professor Vinson's work. Have you simply rubber stamped what Professor Vinson has done or does the Government have its own list of those communities with high social needs, where you need to direct government resources as a priority?

Ms DURHAM: Obviously, Professor Vinson's work has been extremely informative. I think it is highly valued across government. The Department of Premier and Cabinet brought him in to present to our staff as well as to staff in other social policy agencies. His methodology and his ability to bring together a range of data sets in a way that really helps to understand where these communities are do inform some of the Government's thinking and planning.

Reverend the Hon. FRED NILE: You are saying that it has an influence. Have you adopted it officially or is there something else in the Government's agenda?

Ms DURHAM: I do not think we have an official definition. It is one of the sources of information to help inform where our priorities are.

Reverend the Hon. FRED NILE: I am thinking of the areas. Do you have an agreed list of areas that are priority areas of social need?

Ms DURHAM: Not at this point in time. Each of our agencies has structures in place around regions and places in terms of understanding the priorities and to focus efforts.

Reverend the Hon. FRED NILE: Do you think the Government should do that?

Ms DURHAM: That would be a matter of opinion.

The Hon. Dr PETER PHELPS: That is a policy issue. It is a bit unfair to ask a public servant what government policy should be.

Reverend the Hon. FRED NILE: From the point of view of their resources, I am asking about how to allocate resources. When we had Professor Vinson here, I discussed this with him. Without going into his research in detail, it seemed to me that many of those communities with high social needs overlapped with what I would call Aboriginal or Indigenous communities. Is that something that has been looked at by the Government? In other words, those areas might need extra support. What attempts are being made to involve the Indigenous community or its leaders in meeting the needs in those communities, or is it simply people from government departments going there? Is there any Indigenous involvement?

Ms DURHAM: The answer is yes, there is. Through our local decision-making reforms there are a number of communities that we are working with. The basic principle to that reform is engagement with the local community—supporting the Aboriginal community to create its own governance arrangements in the way it works across the Aboriginal community and the way in which the Government has a partnership or engagement with that community around local priorities. My colleague Alison Morgan has been involved, specifically in the Murdi Paaki region. That is the first location where we have an agreed accord. It is between the Murdi Paaki Regional Assembly and the New South Wales Government. Alison might be able to talk a bit about that as a model for the way in which Government is engaging in some of these communities.

Ms MORGAN: Local decision making is one part of the broader strategy of OCHRE, and local decision-making is predicated on a negotiated accord between the State Government and the Aboriginal community. That accord identifies areas of priority that the Aboriginal community has identified, and asks the

Government to sit down and negotiate with them new ways around what services can be delivered in their communities and how they can be delivered, and work around identifying gaps. If those issues cannot be addressed immediately we look at how we can move towards addressing those.

So in order for those accords to work and to work effectively, Aboriginal Affairs has taken a lead in a lot of this work. Aboriginal Affairs—with very strong support from the Department of Prime Minister and Cabinet, which is also working in this areas, particularly in the west and far west of New South Wales—has been working on building the capacity of Aboriginal communities across the region. For instance, in the Murdi Paaki region in the far west of New South Wales, there are 16 Aboriginal communities covering a vast expanse all the way from the Queensland border to the Victorian border, right across western New South Wales.

Each of those towns has a community working party, which is a local group with elected leaders from the Aboriginal community—with more than one community in some of those towns. Aboriginal Affairs has been doing a lot of work to help them build their internal governance and capacity to be able to sit down and participate with government on a more equal footing in terms of negotiating how services are going to be delivered. At the end of last year, 12 months ago, we started the process of negotiating the first of those accords between the State Government and the Murdi Paaki Regional Assembly [MPRA], which is their regional voice with all 16 representatives. We completed that. It was signed in February this year. We are now in the process of implementing commitments that were made between the Government and the community in those accords.

So the areas of priority that the community identified were around housing, particularly social housing in those communities; education, particularly around attendance and educational outcomes; economic development for their communities, which is a far more difficult area for the State Government to make commitments in as we are not as directly involved in making things happen in that space—it is a far more complex area; and a commitment from the Government to help the Assembly continue to build their own internal capacity and capability and how we might fund that. I was the lead negotiator on behalf of the Government for that process. We have just completed an evaluation of that negotiation process.

It showed that we did some really good things but there are certainly areas where we can improve the way we are able to work with those communities—particularly the question around how we can get input from local communities into the kinds of collaborative and co-design things we are talking about here today in a way that is informed and constructive, in a way that we can use it, and helping individuals in those communities to think not just beyond their personal experiences but to have the capacity to influence and work with us around how we change what we do. We have really made some fantastic steps forward in a number of areas in the last 12 months with that.

The other important thing, I think, about the accords and local decision making [LDM] is that the framework recognises that the community could be engaged in a negotiation with the State Government at three different levels. The initial level where we are now is in consultation—the agreements and accords. Then it looks at a second level where the community has greater capacity and where they will be able to actually co-design and co-commission work and service providers in their community. The third level assumes that we could get the assemblies to a point where their internal governance, capacity and capability would be at a point where they actually may well be service deliverers themselves. They may establish their own local non-government organisations. They may well be funded to actually deliver those services themselves. So there is a hierarchy of levels of engagement with those communities.

The Hon. PENNY SHARPE: This work has been going on for a long time. What time frame has been set? When does it start? What horizon do you see?

Ms MORGAN: Do you mean about the accords?

The Hon. PENNY SHARPE: The Murdi Paaki one in particular. The work on that predates this Government.

Ms MORGAN: It does; not just this Government. Murdi Paaki, with 16 Aboriginal communities, has been recognised by State and Federal governments now for nearly 15 years and there has been a lot of work done with them. One of the reasons they were the first cab off the rank if you like for the local decision-making is because they do have a high level of capacity, and governance arrangements are much stronger. So there has been a good history with them. In terms of the negotiation process itself, it took us about six months from start to finish negotiating that first accord. I would have to say we put quite a strict time limit on that. In order to do

that, one of the things we did was park some quite difficult issues that we did not include in the negotiation—and one of those was domestic violence. We parked that specifically so we could focus on things where we felt we could get an agreed accord in place in order to get started and see how this was going to work for us.

There is a commitment that we will come back to that. It has got a three-year timeline on that accord. In terms of your question as to how we see the Assembly moving to level two or three tier engagements with us, there is no timetable around that. Aboriginal Affairs and a variety of the assemblies, not just Murdi Paaki, Aboriginal groups are working with them about what it will look like, what kind of benchmarks will have to be reached, and how we might measure those benchmarks in terms of being confident that the community is ready to move to those next levels.

Reverend the Hon. FRED NILE: Is there a percentage of Aboriginal or Indigenous public servants involved in some of these discussions or is it only white community leaders having discussions with Aboriginal leaders?

Ms MORGAN: There is, and it varies from agency to agency. FACS particularly has quite a high level of Indigenous staff members and many of them are in western New South Wales; they were certainly engaged. Education similarly, and TAFE was quite a key part of the discussions in the Murdi Paaki accord. The Western TAFE Institute has a very strong Aboriginal engagement program and we had Aboriginal staff there. But it does vary agency to agency.

The Hon. SHAYNE MALLARD: Essentially a backbone model is being applied to Indigenous situations?

Ms MORGAN: Yes, it is. The commitments and the accord have agencies that are responsible now for implementing them. Now some of those will involve co-design programs with the communities around specific things we have agreed to do in their individual communities. Education is leading some of those—schools are taking quite a lead—and FACS is taking a lead in a number of those. It is not a backbone organisation in the sense of how we think of it in terms of the collective or in terms of some of the others; it has actually been more a model for how we can help communities articulate what they want us to do, how they want us to work with them and what their needs and aspirations are, and rather than a model of ongoing implementation we would see a variety of implementation models now to make things happen on the ground.

The Hon. SHAYNE MALLARD: Are only government agencies involved in the Assembly?

Ms MORGAN: Under the accord it is only the State Government and the Assembly that are signatories; however, the framework does assume and makes provision for others to be parties if they wish to. In the far west, anywhere west of the mountains, local government is a really large player in this. So I think in future accords, particularly future ones with Murdi Paaki, we would be looking at asking local government and probably the key non-government organisations to be around the table, to be a part of that and to be signatories around those accords.

The Hon. PENNY SHARPE: How does the funding for the extra services work? If the community identifies a need—it might be a gap or an improvement to what is already there—is there extra money on top or are we reshaping some money at the regional level to deliver those services?

Ms MORGAN: All accord commitments are delivered within the existing budget envelope but there are changes in priorities certainly around stuff, yes.

The Hon. SHAYNE MALLARD: Can I just ask you about the gender of the Assembly representatives. Is it predominantly Aboriginal women?

Ms MORGAN: As I have said, the Assembly is made up of the 16 communities. I would say probably 50:50 contribute to the community working parties when we go town by town.

Ms WALK: Perhaps 80:20.

Ms MORGAN: Yes, 80:20.

(Short adjournment)

CHAIR: The Hon. Shayne Mallard was asking a question before the break.

The Hon. SHAYNE MALLARD: I think I asked the question more out of interest. I have had a little bit of background with the Redfern Aboriginal Medical Service when I was on the board of the Council on the Ageing. Predominantly the areas of community services and health were dominated by Aboriginal women and there was a real effort to try and get Aboriginal men involved. I was interested in just a general observation of how many Aboriginal women are involved with the Assembly process.

Ms MORGAN: I think the assembly is made up of the chairperson of each of the 16 community working parties and at the last meeting when I was there I would say it was probably 50:50 male-female, but the community working parties themselves in each of the locations I would have to say is probably about 80 per cent female participation. The chairs do move around. We are still doing significant work around improving governance and capacity within those individual working parties. They can be, at times, quite factionalised so there can be a lot of changeover in who the chairperson is because people get voted out and new people get voted in. But, as we all know, that happens at all levels of representation across the community.

CHAIR: Going back, Ms Walk, to what you were talking about before—I think it originally came from a question from Penny Sharpe—you were talking about how you have an example where you say the tenancy needs to look after tenancy and sometimes having a boundary around the framework is a good thing. One of the really interesting things that I have picked up since this inquiry started, which, as a clinician myself I had not given a lot of thought to but it kept me up last night, was about someone yesterday talking about the planning.

We have all these different agencies doing different planning for different communities but all wanting the same outcome and when you gave an example like that—I mean you cannot have a mental health client without safe tenancy, but even if the stat is that you have got to maintain the tenancy, if they are next to two neighbours that do not like them that is not going to work but the person has met their priority, the service provider has met their key performance indicator [KPI]. But if they are not actually talking to the health worker that is allowing that person to be comfortable, we are not going to get the outcome that we want; but, on paper, statistically, it might look okay for your funding agreement.

One of the things that I have just thought about yesterday is that if we are actually doing joint planning for the issue. For example, yesterday with The Hive they decided they want to target what we talked about before with early childhood and they have a co-plan and they get the stakeholders in to work towards that plan and to work towards that outcome, but it is one set of planning. So if you have got all these service providers out there using their resources to plan for the outcome that they want, what are we doing? A lot of the stuff we heard in the second part of the day was "We need more resources", and I know as a nurse we would always say "We want more resources". But really I would like us to look at doing things smarter and not needing more resources. That is where I am thinking I am really gaining the information from. Why are we not all planning together? Why is FACS planning for one thing and Health and Education planning for another thing? Do you think that if we looked at that area in terms of that capacity building we would not be doubling, tripling and quadrupling up on everything?

Ms WALK: That is a great entry for me to talk about the co-design in the Central Coast, if I may. In doing so I do not want to give a sense that this is easy, because you can have planning on a geographic area that misses particular cohorts, such as people with a mental illness. This is hard because it is hard, not because of a lack of goodwill on anyone's behalf. NGOs themselves will have their own planning frameworks. What is going for us, if you like, is generally our outcomes are pretty much the same. So in order to achieve a reduction in diabetes you pretty much need good early childhood development and great engagement within families and safer environments. So we might have different things within the plan that we are shooting for but, generally, the overarching outcomes are pretty similar.

The establishment of an outcomes framework within government is really critical and it is something that most of us at a government level are working towards and I think most non-government agencies as well would have their own outcomes framework. To be honest, having been around the traps for a long time now, they are all pretty similar and they generally have good developmental outcomes for children, good family outcomes and good employment and safe communities kind of outcomes. There is a variation on themes on that. So we have great opportunities to use those frameworks.

Now if I might segue into the co-design in the Central Coast. That clearly grew inside FACS at the time where we had just done what is called the Safe Home for Life where we had put together the things that needed to change in order for us to be able to get better outcomes for children who were at risk of significant harm, children who had already been harmed and children who were in out-of-home care. On those three bits of the FACS business, if you like, we needed to engage the whole community—and, by that, both the services providers and the clients themselves—to be able to get improved outcomes. Throwing more services at it or more money was probably not going to help. In fact, it may well hinder because the service system then gets all engaged with designing and delivering new services rather than, as you were describing, fixing what were problems in some cases of a lot of bureaucracy around a lot of referrals to each other without a lot of service delivery going on.

It built also on some of the information from the Keep Them Safe [KTS] evaluation, which I would really recommend to the Committee, even if you just take the executive summary. I know Ilan Katz came in to talk to you about privacy, but he is worthwhile to hear talking about the KTS evaluation because it did show to the sector as a whole that we are spending a lot of effort and energy on referring and assessing and less energy on intervening and that that is where the service system needs to call its attention to on delivering evidence-based interventions as opposed to probably referring and assessing children and families. So we were in that space with what will be our next step?

We have suggested that rather than start designing more programs or redesigning the service system amongst the people here at the table we would choose a number of areas in the south west, Western Sydney and the Central Coast—areas that had a lot of volume and had a lot of leadership; I think we have spoken about the leadership issue being critical and I understand that it was probably raised with you yesterday. So we had in those areas three critical leaders who were very experienced and had a lot of authority in their own area to come together. We happened to use a particular consultancy at the time to help us. It was not just to be a kind of wonderful workshop; it was very well thought out. They did lots of consultations with clients, young people in particular, and also did a lot of work with the data and a lot of work with the evidence: what does it tell us with the people in the room to be able to share information and data?

It was a very structured process. It looked chaotic from the outside but it was highly structured inside and they spent two lots of two days, which is a big commitment from very busy senior people, and there were all the service providers there—government, non-government—and once you were in the room you were there to help solve the problems for the future rather than do too much looking back. They have come up with a number of things; they had well over a dozen areas that they could choose to work on and they narrowed them down. That is the other thing about community effort: sometimes we try and do too much and we are just not able to sustain all of those; so they really narrowed it down. The first one was around more effort on supporting and early intervention and particularly around young people.

CHAIR: Could we hear a bit about the Central Coast model that is a result of that? Is it the Central Coast model—

Ms WALK: This is what I am describing now. This is exactly what they did do in the Central Coast and at the end of their first two days they presented that to me and the secretary and they did that again and presented that, I think, to the head of the Department of Premier and Cabinet and the Secretary of FACS as well, and we had police, education and health as well as the big and the little NGO players there—Aboriginal, non-Aboriginal, anybody who was working in the area pretty much around childhood and family. If you were not there delivering services you were not in the room; so it was very much getting the stakeholders themselves in the room.

It was really permission to say, "Let us just set aside what is in your contract to deliver here and there. Let us try and say what we are we shooting for. How can we make a difference?" They literally have all the evidence around the room; we have 1,000 reports of under-fives by the early childhood nurse or 2,000 reports by police for runaway children. They literally have all the evidence about this area, so they start to solve the problem: How will we service the needs of vulnerable children and young people in the Central Coast? What is in our power to do that? They take that apart and look forward about where to go next.

They did that about late last year, 2014, and they have had a subsequent one and they have chosen three particular areas that they are working on. One is about moving away from a reporting culture, where they report to each other what is happening and the risks and much more to saying, "What's my role here? How can I play a role in providing services or diverting this person from possibly the child protection system into a more pro

social area?" They have a strong network and we are starting to resource them as well. Sometimes they need a bit of resourcing as a backbone to be able to do the work, but that was with no different funding requirements. The agencies in the room have a strong permission literally from the Government to be able to move things around should they need, and each of the individual government agencies are very strong on that and certainly all the non-government organisation agencies, wherever their head offices are, their imprimatur to their local people is to work as far and as fast as you can in terms of a joined up system.

CHAIR: Is it a co-location?

Ms WALK: They will move to a co-location.

Mr SMYTH KING: I am happy to talk about that. The lead-in issues that Ms Walk has just talked about are important. They take a lot of time and they are challenging experiences for any of us who have gone through them to try to arrive at a point where you have all got agreement and you go out of the room with an agreement. But what has come out of it is that—we have a similar model at Coniston in Wollongong where we have an opportunity that we have never had before to co-locate our frontline services together. In the Wyong area we will ultimately have a building where health services, FACS services, education services and NGO services will be able to come together; people will go to that particular location with a particular issue and then the service systems that are there will be able to pick up the various bits.

If a family comes in and says, "I'm homeless", and they say they have two children, we can bring in education to see how we will support them in terms of education. We have been able to move the same sort of model quite significantly forward in the Coniston-Wollongong area through what is called the One Place that is down there. In that particular location we have education, mental health services, ageing, disability and home care, child protection services, housing and 10 non-government organisations working. So people come in and they get triaged into the service systems they need and then those various agencies then take the issues that might be pertaining to those particular people or those groups of people back into the service systems that they are dealing with.

I guess the real challenges in this space as we move forward have been around what is a tension between, if you like, local governance. You can authorise agencies and people of agencies to do things, but what becomes a real challenge is getting people on the ground to utilise the authorisation they have to do things differently. So what we are finding is the need to focus as much on anything in these spaces around the local governance and its arrangements that we put in place, so there is decision-making across the agencies contributing that is equal. People have a say.

But the other bigger challenge beyond that is how the individual contributors in that local governance model feed into the systemic responsibilities and obligations that they might have. The Central Coast one is a good example where they have identified three focus areas that everybody is working on. That is the governance model around that. But it does not take away from education its role to have children engaged in school, attending school regularly, feeling safe and secure in school. We continue to do our core business, if you like, but contribute in the governance space around those focus areas, but then also capitalise on the relationships that we then build.

The example I can give in the Illawarra, we have just recently placed an officer from our Child Wellbeing Unit into that site and that person's knowledge of education, how it works, the child protection system in education working, has been invaluable to people in FACS particularly in terms of understanding and being able to share with them and work through with them the issues that families have and how schools play a part and how FACS and an NGO play a part. It has brought together a capacity for people to be more adaptive to the issues that they have and respond to them as opposed to trying to, as I think Ms Walk talked about, these constant referrals: it is not my problem, it is yours, and it goes round and round.

The Hon. GREG DONNELLY: I have a couple of questions about page 9 of the submission, which states:

The Collective NSW is an alternative model to commissioning services being led and piloted by the Department of Family and Community Services Northern Sydney District.

The next sentence refers to tapping into the assets and resources at various levels of government. Can someone elaborate on that model and give us more details? It refers to that being run out into 25 projects, and the final sentence states:

FACS is currently preparing to transfer The Collective NSW into the non-government sector ...

I am trying to understand. You have the Department of Family and Community Services driving this, but I am wondering how the other parts of government—Education, Health and Housing—cooperated with this work, given that you have another government department, FACS, in a sense sitting over the top. Was there tension? Were there issues about how the cooperation existed between the departments? Can you elucidate on that?

Ms WALK: I will start and then Mr Smyth King might come in. I will use an Education example that the Collective from North Sydney often presents on this area of work that they have done. One thing the Collective has been helpful for is the issue the Government has in terms of either funding or themselves as a service deliverer. Our services becoming very program specific and not holistic is also a problem that non-government agencies have, and philanthropic agencies have the same issues as government agencies in terms of funding them. They end up funding effort in a fairly narrow band when in fact we know you need effort across a wide range of issues to be able to solve some of these entrenched problems. The Collective sought to build on philanthropic effort and interest as well as non-government, if you can think about them quite separately, and business and local initiatives with an overarching aim.

As it happened, the district director from FACS had a strong background in both mental health out of the Health department as well as in disabilities. He had been used to working with a set of stakeholders outside the FACS stakeholders, if you like, so it meant that he looked very broadly when he was seeking to construct it. An example that they used then or an example to give you about the agencies coming on board was that he had seen some NGO work that had been taking place in Victoria in schools where it was early work with vulnerable young people funded by a foundation and delivered by an NGO in partnership with schools in Victoria. It had a much easier way to say, "Let's get that person up here to talk to the Collective", which had the local school counsellors involved, the local education people, FACS. We had kids in out-of-home care that we were worried about because the teen years are hard for both carers and the children and the caseworkers in terms of their drift, those children, so we were worried about those ones.

Everybody had a stake in outcomes. Some NGOs that were working in the youth area were interested in that. They were able to bring them together. We might even refer to the Ryde project here, and that is largely around that work in North Sydney both in Ryde and in Dee Why. I do not think there has been a lot of tension around patch, if that is what you are inferring. I think if anything there has been a welcome: gosh, somebody else is interested in these outcomes in an area where I am at the margin of what I can do or my authority and here is someone wanting to assist me in this area. The best innovation takes place on the margins of the different systems, so it is the education system, the welfare system, the health system, if you like. Some of our best innovations take place where you bring the margins of those together.

The Hon. GREG DONNELLY: It talked about 25 projects that are being supported as a feature of the Collective NSW. Is there a list of those projects somewhere? Has an evaluation of those projects been done?

Ms WALK: Let me take that on notice and find out for you.

CHAIR: I welcome Ms Gandhi, the Executive Director, Service Delivery, Service NSW.

The Hon. Dr PETER PHELPS: I have to declare a professional association with Ms Gandhi through our joint membership on the State Records Board.

The Hon. PENNY SHARPE: I have questions for Ms Gandhi.

CHAIR: Straight into it.

The Hon. PENNY SHARPE: Yes. I am a big data nerd. I am interested in what is happening in relation to the Data Analytics Centre and how it will work. Can you elaborate on the time frame and the work that is happening with individual agencies in relation to the data that is reported to that centre?

Ms GANDHI: The Data Analytic Centre does not report into Service NSW. Are you wanting some general comments?

The Hon. PENNY SHARPE: Sorry, maybe I am asking the wrong person. Perhaps I will ask Ms Durham then.

Ms DURHAM: As I mentioned, we are establishing the Data Analytics Centre and it is sitting within the Department of Finance, Service and Innovation, so it is broadly in a cluster with Service NSW but not directly located in Service NSW. The purpose is to develop a capability within government to be able to undertake data analytics that span agency boundaries. So we have capabilities within education and health to understand the data around analytics but this is about a central whole-of-government capability to be able to take data from each of those agencies and analyse what that data tells us to help inform service planning, policy making and service improvement.

The Hon. PENNY SHARPE: And is it envisaged that the sort of data that is collected, for example, through the purchase of services with the NGOs will find its way through to that as well or is it that Education will just report on its key list of data—for example, links to learning, if that still exists, or whatever the equivalent program is? Will the results of that find their way through to that centre or is it very much just at the agency level?

Ms DURHAM: I think through just our general way we work with the non-government sector. Government has the ability to obtain data from agencies that it is purchasing services through—the commissioning. So that will continue.

The Hon. PENNY SHARPE: But will it become part of the model so that we are actually measuring the impact of that?

Ms DURHAM: Yes, I think it will need to be, and specifically because a number of our services are increasingly being delivered by the non-government sector. I think it then goes back to the way we commission services to make sure that we are still able to gather that data and to bring that data in so it forms then a larger dataset within our agencies about what services are being delivered and the outcomes on the ground.

The Hon. PENNY SHARPE: What is the expectation around public release of that data or availability of that data for others to use?

Ms DURHAM: If I can take that question on notice to give an answer, I think in its early stages this is about some of the Government's own decision-making. There is, I think, a wider commitment to open government and open data, but in the early days it is certainly something to inform and improve government decision-making. That is my understanding.

The Hon. PENNY SHARPE: I want to go to a specific example then. Mr Smyth King, this question is for you. Page 11 of your submission mentions the Aboriginal Students in NSW Public Schools Report, which I am very interested in. I have not seen that report. Is it available publicly?

Mr SMYTH KING: Yes, it is.

The Hon. PENNY SHARPE: And is it intended to be an annual report?

Mr SMYTH KING: Yes.

The Hon. PENNY SHARPE: With the level of data that is available—again, I go back to the Mount Druitt example as there are lots of Aboriginal families in Mount Druitt—would that be a resource that perhaps The Hive could pick up and use to identify where the kids are?

Mr SMYTH KING: Precisely; that is what we intended that publication to do. Because we do not have education regions or boundaries as such, it is being reported across FACS districts and health districts because they are aligned. And so communities will be able to look at the data from that sense. We have worked closely with the Aboriginal Education Consultative Group [AECG] in terms of having Aboriginal communities in particular to have access to that data in its publication. But we can easily—

The Hon. PENNY SHARPE: Is it on the Education website somewhere?

Mr SMYTH KING: It is on the Education website, but we have got—

The Hon. PENNY SHARPE: I find that website very hard to navigate. I suppose for me it is a question about whether those organisations know that it is available and that that data is there, because we had some questions about what data was available.

Mr SMYTH KING: I cannot say that I am aware of just how widespread the use is. I know that our colleague agencies are using it since it has been published. We anticipate the publication of the 2015 report will be later this year—toward the end of the year—and it will report on student performance, attendance, student engagement and those issues.

The Hon. PENNY SHARPE: Fantastic.

Mr SMYTH KING: It spans early childhood through into the post-school environment as well.

The Hon. PENNY SHARPE: So preschool as well?

Mr SMYTH KING: Yes.

The Hon. PENNY SHARPE: Fantastic. That is really good. I have two more questions, if that is all right.

CHAIR: Certainly.

The Hon. PENNY SHARPE: Pages 7 and 8 of your submission—and I thank whoever prepared the submission for the honesty that is actually demonstrated in it—talk about the issues around accountability and governance between agencies. I am very happy that we now have this "no wrong door" approach. I think that the rhetoric is very good about that. What are the accountability and governance processes through that? On page 13 you talk about it people come in and they get referred to other services. Could you point out to the Committee a couple of concrete examples where there is accountability between agencies for the outcome?

I can give you two examples that I am very familiar with. One is that many teachers are very frustrated when they report children, for example, in relation to child protection. They feel it goes off into a void. This is not a criticism of FACS, it is a priority issue; but I am wondering about that. Domestic violence is another one where there is frustration. People feel like they have made the referral, they have ticked the box and they have dealt with that client, but no-one ever follows up. With common assessment referral, have we actually come to grips with some of that accountability once you refer someone on? I am interested in a response from Health to that too.

Mr SMYTH KING: I probably would respond by saying that that is an area we are working very, very solidly on. We have not landed that yet, but—

The Hon. PENNY SHARPE: What practical things would you suggest would be contained in getting that level of accountability for referral?

Mr SMYTH KING: I think the example I referred to earlier which was in Coniston where sitting within a government sort of entity which is owned and operated by FACS we have a management process that enables people from the various agencies to come together on a daily basis and do their case management work and look at the implications of what might have come through the door that morning or the day before and what the implications are for the service sectors that will be responding to that. That has some really strong promise for us as we move forward. It is about how we build that across New South Wales in all of our locations in a systemic way that I think is the challenge—certainly for people in the roles that I have got in government trying to get that sort of sustainability and consistency across everywhere being able to do that.

The Hon. PENNY SHARPE: Do you think it is a cultural issue in terms of leadership within the public sector if people are back at the local level making that decision and the sort of flexibility that they may need to make those decisions? Do you think that is part of the challenge?

Mr SMYTH KING: I would probably add in there that this is a really, really hard space to work in and there is no simple answer to the complexities that people bring to the table around these particular issues. It is not a lack of willingness on the part of government officials to actually carry out their duties but the capacity to which you can actually see a difference being made. I come back to Coniston again. It is one I do not wish to

dwelling on but the approach there is that people that are using that service now are greeted in the morning by a concierge who asks them what sort of issue they have got as they come through the door. So it respects people as they come through the door in terms of what then the systems are able to do to provide for them.

That has all happened within the frameworks that we all have to operate in—the legislative and operational frameworks—but it is how you actually get that throughout the system which then becomes the cultural issue. It is people not necessarily just in government but I think in all of the sectors that work in this space being able—we have spoken today quite a bit about the words "trust" and "turf"—to go from turf to trust. That is the real challenge we have in this space as we move it forward.

The Hon. PENNY SHARPE: That leads to my next question which is around the issue of joint service delivery. Page 8 of the submission—and I welcome the frankness because I think this actually gets to part of what we are trying to deal with here—in the last paragraph before the section entitled "Joint Service Design and Planning" states:

... a barrier to ... joint service delivery is that the focus can often be centered towards delivering the service as agreed (to the funding specifications) rather than long-term outcomes for the client.

I think that is really a lot of what we are talking about. Can you point to any examples within the disadvantaged communities that have had a range of different programs roll over them over the last, say, four to five years? Every four to five years a new program rolls out. Where on the ground have we actually been able to change and have flexibility to specifications? You can call them Better Futures or whatever; they all have different names but they are all seeking the same outcomes. Can you provide the Committee with examples of where there has been enough flexibility, where people on the ground have been able to deliver those services slightly differently, or is it just too hard when the specifications for each program are so locked down? I am not sure who would like to have a go at answering that.

Ms WALK: I am happy to give an example. The first thing that I think you are discussing is about possibly a mentality of "set and forget" in terms of contracting, that government contracts, does a tender, it goes out, whoever is successful wins and they go away and start delivering in a fairly isolated, siloed way. Over the last 10 years where we have been contracting with the Brighter Futures programs, those lead agencies still meet together every quarter. So if I am from wherever I am from—Illawarra or the Central Coast—I will come there and talk about what is going well and what is not going so well, they send their data to us, we look at the data all the time and go back.

The other thing for us inside FACS is to be constantly asking "Are we getting the outcomes?", not "Are they meeting their outputs?"—which is important as well, getting value for money. But "Are we meeting the outcomes?" We constantly re-evaluate that program as well. I can give the example of south-west Sydney where one big provider delivers that program. They also deliver other programs, some for us and some for other contracted agencies, which sit alongside this program. And they say, "If we get a family that comes in here but their needs are so high they really need to be over in that program, we do not want to end that program and then have them walk up the road and into another door." We want to be able to either have this worker service their needs here or intensify their needs service if that is the case without changing all sorts of things and reporting them back.

The Hon. PENNY SHARPE: So are you saying that can be done?

Ms WALK: That is what we are working on right now, to say, "Let's change the service specs of this program for you. Let's change that so that we can think about that."

The Hon. PENNY SHARPE: And that can be done at an individual level?

Ms WALK: In that case we are doing it at a geographic level because they run on a continuum in terms of families' needs. We are literally talking with them at the moment. So you can do that kind of work. The other kind of work you can do is to be able to literally say, "Well, what about this program?" So with the rollout of the Homeless Youth Assistance Program [HYAP] that we are doing, where some of the programs in the youth area are actually not funded by FACS or indeed by the State Government but are funded by the Federal Government, Youth Reconnect, we are trying to say to them, "Design this service as though those services exist, not as though you are in a vacuum, and show how you will leverage off those investments."

We have done that with Youth Hope as well, to say, "Look, we really need you to test out." And in fact when those agencies tendered for that service we went back to them to say, "We do not think this is innovative enough and it is not connected up to education enough." So we got all the preferred providers in the room and said, "You are not actually leveraging off what already exists either as a funded NGO or, in that case, with education. You are not really leveraging off what education already delivers for these young people." So we redesigned those programs with them.

The Hon. PENNY SHARPE: So are you saying there is enough flexibility within the funding specifications that this is not an issue?

Ms WALK: I am saying that you can address it. We write the funding contracts. Agencies come to us often and say, "This bit is not working for us," and we can sit down and go—

The Hon. PENNY SHARPE: What about with the non-government sector?

Ms WALK: Sorry, when I say agencies I mean non-government agencies can come to us, to our contractors on the ground and say, "This bit is not working for us."

Ms DURHAM: I think from a whole-of-government perspective we are starting to see a shift towards commissioning for outcomes. It is a strong agenda across the board, although it is a shift for government and it is also a shift for the non-government sector because it does rely on the collection of good data about outcomes. Historically that has not been done in a number of areas, particularly some of the social services. It involves investment in that capability, in IT systems, in the ability to gather the data, and that takes some time, I think, to see that change. But it is certainly a priority and it is a way through that working in silos. When we commission, if we require that agencies are delivering on a broader range of outcomes it encourages partnerships—as Maree talked about—it encourages a focus on outcomes and it has started to break down that program-based, siloed way of thinking about their service. To meet their outcome they may need to move outside and create new partnerships to get there, so it is seen as a way through some of this into the future.

Ms WALK: Funding for outcomes is actually very difficult. We are really cautioning against being overly optimistic or having unrealistic expectations of what will be achieved in the first couple of years around funding for outcomes and outcome-based funding because it is very new and very different. Finally, the example where we have done the most work I think in this area between ourselves and non-government agencies has been in the social benefit bonds. They have really tested both our thinking and indeed the thinking of non-government agencies about: What is an outcome? What is the data telling me? If I keep doing this, will I get any good outcomes? They are easier to do when they are binary; a child is in care or not in care, so that is a little bit easier. You get clearer data than a prevention mechanism. But they mean that you start to chase outcomes, if you like, in ways that really change what you are delivering.

The final piece is about what are evidence-based programs that actually work for the very, very disadvantaged communities. Some of them we know and others we do not, and I think that is the tough part here as well. Some of our interventions, early childhood and the use of preschool and child care interventions for children we know work well but for the parents. You cannot just rely on their intervention for the child and the parenting programs for the parent to alter the dynamic of what is occurring in the family. There are still some real difficulties there about what actually works for whom and when.

Reverend the Hon. FRED NILE: You talk in the submission about network specialist centres and lack of co-ordination points. The Government has one-stop shops where everybody would be serviced for everything. How is it working? Will there be one place in a suburb where people go or will there be two or three points which could confuse the public? Will they be synchronised? Is it possible to have one place or one centre that could provide everything the public needs from where people are directed to specialist places?

Mr SMYTH KING: I think as a general statement around this one size does not fit all. We referred at the outset that you cannot have a model of service delivery that you roll out from here across New South Wales that will work for everybody. In our network specialist centres across the State we are establishing 20 locations. Every one of them will be very different. Some will co-locate, others will not and that is because of the service systems that are around the way in which those provisions are provided locally. In a very vast geographical area it is a very different scenario to somewhere like central Sydney where you have got a whole lot of agencies that might well be close together.

I think you have got to go back to this notion of being able to empower local people to design the service system that is going to work for them. Then you come back to the issues that we raised earlier around what are the things we are really focussed on? The big items are around people feeling safe in their communities, they are healthy, they are engaged in education, there is strong social fabric in the local community and people have got employment. Those things will then drive what happens locally. I guess the example I often use is school attendance or completion or engagement. The North Shore of Sydney has a very different story to one at Broken Hill. The issues to be addressed in Broken Hill will be very different to what might be addressed on the North Shore.

Having a one-stop shop will not necessarily work for every community. It is about us being able to liberate our service sectors to be able to design what is going to work for them locally. That is often hard from government. The organisation that I work for, it is often a centralised decision-making provision that this is what everybody gets, and being able to say to people, "No, you will need to set up how this is going to work for you but ultimately you are going to be held accountable for the outcomes you land in these areas as opposed to the service that you might be delivering."

CHAIR: Ms Morgan, I would like to hear some perspective from rural and regional areas. Where do you see the challenges? We talk about having 200 services in Mount Druitt in one place and co-ordinating them but there is a very different story out in the regions. I am keen to hear about some solutions that you see in terms of service co-ordination?

Ms MORGAN: Right, easy question then. There are some very specific challenges across rural and regional areas and I think the further west you go the more difficult the challenges become; there is no question around that. In terms of solutions, the sorts of things that we are seeing some evidence around things working are where communities are actively engaged and involved in helping to design some of those solutions. Part of the difficulty we have with that is that every small town across western New South Wales wants to have a core or key set of services delivered in their town locally, and that is not possible and will not happen.

A lot of the challenge for us in this is moving community thinking around what other options we have, what other solutions we have. One of the comments made earlier was around some of the particular challenges faced by Aboriginal communities and by those towns that have large Aboriginal communities. One of the other elements for us is that many of those challenges are not Aboriginal-specific challenges, they are the challenges that small, struggling rural communities face, and most of the challenges are arising from the economic circumstances that underpin those towns. When I am pushing my policy colleagues within the Department of Family and Community Services around some of the stuff, we often use the example that agriculture and mining, the main industries across Far Western New South Wales are now contributing nearly twice what they did to the State's domestic product but they are employing less than one-tenth of the people that they employed 25 years ago.

Your average farm would have had three or four working families living on that property. Recently I was on a property that is partly very labour intensive irrigation in the past but is now being run with computers. In the home they have three screens and they turn all their equipment on and off electronically. They are only employing seasonal workers and equipment for harvesting and that sort of thing. The whole circumstances are changing. The service models that we are delivering are changing significantly and they are moving far more towards hub centres and hub towns being the core for that service delivery, but the core for the community as well. The service delivery is following the way that these communities are changing and evolving, even though some of those changes are happening quite reluctantly.

If we look at the demographic figures across rural and regional New South Wales, the projected population changes, the population will continue to decline across those areas. The percentage of Aboriginal people will increase, the percentage of aged white people will increase significantly but Aboriginal populations will be having more children so the demographic there will be very different. The evidence is showing that we have a responsibility to see communities understand that these changes are happening although they do not like them. We have to accept that, but how can we constructively work with them around designing a service delivery system that will respond to those things and convince them that we are able to deliver core services to them in those towns but it may not be the way those services have been delivered in the traditional way.

CHAIR: You will have to get your message across that we can still look after their needs but it will be done in a different way?

Ms MORGAN: That is right.

CHAIR: I think we have seen that evidenced in Health. People do not understand why their broken leg cannot be fixed so a great response is, "Do you want the doctor that fixes 250 broken legs a year or the one that fixes two a year?" It is about getting that message across in the right way.

Ms MORGAN: Technology is an enormous enabler for us.

CHAIR: We say that all the time about technology. We talk about telehealth and I saw a great example at Royal Far West but out in the regions I do not see that great uptake of telehealth or any tele technology. What are we doing to make sure that we are enabling our communities to have those options?

Ms MORGAN: Certainly the IT infrastructure is one of the enablers that we need in place. A lot of emphasis has been placed on it and under the rollout the NBN has just launched satellites that will provide the IT out in the Far West. All of us who operate and work out there are very much looking forward to seeing if it can deliver what we are hoping it will deliver. At the moment we really do struggle with a lot of that IT infrastructure because it simply does not exist yet. But we do accept that there is a lot of working being done in order to increase and improve that. That will offer opportunities. Whether it will provide us with the options to have new innovative businesses growing up across the Far West of New South Wales in a way that will replace employment that has been lost in the past, I do not know. We are going to have to wait and see.

CHAIR: I suggest that you look at Birdsnest in Cooma, which now employs 100 people and is one of the seventh largest companies in Australia on the Internet that started in a regional rural town.

Ms MORGAN: Lightning Ridge has got some really interesting businesses that have grown up there as well.

CHAIR: There are great opportunities in the regions.

Ms MORGAN: Service NSW, of course, is using the technology. Reverend Nile, some of your questions around the one-stop shop, the transactional services that the Government provides, certainly there is a strong move to that work using IT as an enabler.

The Hon. Dr PETER PHELPS: Ms Durham, is it fair to say that communities with high social needs are basically aggregations of individuals and families with high social needs?

Ms DURHAM: I think so, yes. Our communities are made up of people and families.

The Hon. Dr PETER PHELPS: Would you also agree that the ghettoisation of social disadvantage through large mono-cultural housing estates in the 1960s and 1970s went a long way to exacerbating this problem?

Ms DURHAM: I think that is what the common understanding is and certainly a lot of the research shows that that concentration of disadvantage in certain places has resulted in poor social outcomes. That is why part of the Government's agenda has been to create a better mix through our social housing estate and to diversify the way we deliver our social housing. Marie might want to pick up a bit more on that.

Ms WALK: I think there is another complexity there which is it was not so much just a concentration of public housing, it was a concentration of the shift from the 1960s and 1970s to what we have now which is most of the people living in the housing estates no longer have employment. So you could have had, which you did in the 1960s and 1970s, a concentration of housing estates but you still had a social gradient within that. You still had working families and you did not have such a concentration of disadvantage. It was not just the physical structures, if you like, it was also, as you are saying, the concentration of very disadvantaged people now in the concentrated housing estates.

The Hon. Dr PETER PHELPS: The move in areas such as Minto and Claymore to have a better mix of private and social housing is part of a general plan to, if you like, take people out of a mono-culture of disadvantage so that they can see other modes of life?

Ms WALK: That is correct.

The Hon. Dr PETER PHELPS: Basically I want to get back to what Warren Mundine said: "I put on a suit and go to work every day because I saw my father put on his work clothes and go to work every day and his father put on his work clothes and went to work every day." If you are in a situation of high levels of unemployment and low levels of education where you cannot be what you cannot see—if I can utilise a feminist phrase—that is absolutely the case in a wide range of disadvantaged communities.

The second thing I wanted to ask about was who defines high social needs? I will give two examples that were raised yesterday. When government officials asked people in Mount Druitt what their social needs were, they talked about health and education. When residents were asked, it was security. It was said, "There is no point in putting on a workshop for me if I cannot get there without being mugged." Similarly, when we went to Claymore, the very nice lady from FACS said, "We had a look at the data and we said these are the things that need to be looked at. There is education and employment", whereas the biggest cheer in the room took place when they suggested that the best thing that could happen is if they closed the local bottle-o.

My question comes down to, if you like, who is defining what these high social needs are and, after many, many years of social services and many billions of dollars being spent, the fundamental problem we have had over decades has been a top-down approach to defining what are the social needs of the community. In other words, an imposed view from a largely white middle class bureaucracy as to what a working class and, in many cases, non-working class community has been expecting as their basic social needs.

Ms WALK: I agree with you that there has not been enough engagement of local community to work on what matters most. Government bureaucrats might think it is about school engagement and others say it is the needles in the park. There has been a disconnect around those issues. The reason I am pausing is sometimes we bureaucrats have not focused on what some of the levers are for helping to turn things around. For example, lining up what are the educational attainments of children in local areas, and what can we do about that? Ironically, that is only relatively recent that we have started to aggregate at a community level, either the Australian Early Development Census [AECD], or Best Start and My School, to go, "Okay, in this school a third of the children are in the critical domain. We need to focus on the zero to fives doing X, Y and Z." I would be a little loath to lose data driving some of the initiatives that we need to address. I think you are absolutely on the money in the sense that we need to work out what it is that people want to get energised about. What do they want to change about their community and how you work with that.

The Hon. Dr PETER PHELPS: Which then leads on to a question that I asked yesterday and I will not tell you the answer because I think you can probably guess it, and that is if money were to be allocated to a geographic area rather than a line agency for the provision of services, for example, you did not give \$1 million to the Brotherhood of St Laurence but rather gave money to a geographic area to fix a problem, would that not have better outcomes for that area than the parcelling up of service delivery into large organisations, which then would not necessarily focus on the key areas within that locality and would not understand the needs of that particular community?

Ms DURHAM: Some of the work that has been done recently by the New Zealand Productivity Commission canvasses a lot of those issues and deals with that dilemma of how does government fund it and do we want to set the accountabilities from ministerial down to local level on programs areas or portfolios, or do you want to set accountability horizontally? There is a tension around accountability for public expenditure and how it is measured. I think you have raised a real tension, probably an unresolved one, in doing this work effectively.

The Hon. Dr PETER PHELPS: It is unresolved because there is a proliferation of agencies now. That is the other great problem and there is the atomisation of delivery agencies. There are now more agencies delivering social services than there were 10 years ago, and 10 years before that, and more than there were 10 years before that, and you can go all the way back.

The Hon. SHAYNE MALLARD: And then there were none.

The Hon. Dr PETER PHELPS: There were always social service agencies operating. Before there was a complex social welfare net in Australia you had the voluntary organisations.

The Hon. SHAYNE MALLARD: Non-government.

The Hon. Dr PETER PHELPS: Yes, non-government voluntary organisations that essentially took on a large part of the social service dynamic. They provided pensions if you could not work, if you broke a leg, de facto maternity allowance, things like that. My question is, you have the problem of not having an effective localised response with big agencies, but if you atomise down to the West Bidwell Autism Spectrum Support Group and seek to multiply it, that might be a wonderful service but it is so atomised that the problem of then coordinating that with other issues—presumably there is a happy medium somewhere. Wouldn't agency management, if you like, be an absolutely necessary part of allocating scarce resources? Because the fact is there are scarce resources.

Ms DURHAM: To some extent it goes back to our first premise that there is not one size fits all. I do not want to overuse that but there are a lot of services that Government delivers that are our main business, our core business, whether it is education, health. There is a large part of the population that might only require one type of service at one particular time, so that sort of model delivery is effective. Where we run into problems is where people require multiple services that cut across. That is not all of the population. There is a group that has those multiple needs. The question is: Do you want to redesign the whole system around that or is it possible to work more flexibly and effectively deliver services to those groups as well?

Government does not have the answer at the moment and we are trying different ways of working. In other places overseas, they have worked towards local budgets, pooled funding and co-commissioning. That is probably an area to explore further down the track, but we do not have strong current examples where agencies have pooled funds in a local area in that way. It is much more the coordination. You agree the shared outcomes and we marshal our investments around that, but not to the point of pooled funding.

The Hon. Dr PETER PHELPS: That leads me to my final question. The services that we are funding and coordinating, are we looking at improvement in respect of substantive improvement in the social function of those communities or the amelioration of the negative aspects that are inevitably going to happen because the nature of those communities is such that substantive improvement is not going to be able to be effected? In other words—which is the same question that I asked the people—do you improve Mount Druitt or do you seek to get to a point where you can leave Mount Druitt? Do you improve Claymore or do you seek to get people who are actuated and motivated enough to be able to get out of a metaphoric Claymore or a metaphoric Mount Druitt? What is it? Are we seeking to remake communities or to ameliorate the worst aspects of communities that have substantial dysfunction to them? It is all right to say we are simply ameliorating because we cannot save the world, but it would be nice to know what our program is.

Ms LARKIN: I will comment from a health perspective. I think, really, we work at both levels. It is critical that we work at both levels because the immediate needs of individuals in those communities today, whether it be as a result of child abuse, unemployment, whatever, are critical for us to address on a day-to-day basis, and we do that between how the agencies collaborate together. That is not going to stop overnight, but there are very clear goals in the collaborative programs, and Claymore is a very good example. When you look at the list of programs that they are running at the moment, there are clear goals to look at improvements in education in that community, improvements in access to schools, improvements to health at a much broader level.

But if we only focus in respect of improving that community of 3,300 people and do not look at the individual needs of those families and children, which are very real and are there today and deserve our attention and investment, that is not appropriate for us. So, absolutely, it is the longer term goals around how we improve the whole environment of Claymore, which is not only around the social services. You raised the point earlier about the land use planning. It is a fundamental aspect of how Claymore is today. If I can just reflect on the comment you said earlier about what happened in the 1960s and 1970s. Planning in the 1960s and 1970s is a very different world than what it is today. When that green belt was released around Sydney, people thought it was a fantastic opportunity to increase the population in respect of communities in those local areas.

The Hon. Dr PETER PHELPS: Indeed. My own family was moved from the inner city to Bradbury.

Ms LARKIN: If you remember the time, there was great excitement about that, if we put the houses and the communities out there. But we learned from an economic and social perspective that it was not only the concentration of what was set up but that we did not put in social services, and you see that in local government now around section 94 contributions. Everyone knows that you have to apply section 94 contributions early on in the development of communities, not after the community is there. In south-western Sydney when you see places like the development of Oran Park, there is extensive planning how we will work in health and other

social services in terms of development of services in those communities so we do not do it afterwards. That is what contributed to what happened in those communities.

The Hon. Dr PETER PHELPS: But if you plan the land release sufficiently and you do not get those disadvantaged you substantially reduce the need for large-scale services to be put on the ground there in the first place.

Ms LARKIN: Absolutely, and we have learned from the planning of the 1960s and 1970s in terms of what is needed. When you see social services like transport, roads, all of the things that are fundamental fabrics of how communities operate that link very closely to social services, then you get what you want out of communities. In answer to your question, we are working, I think, from a service delivery perspective at both of those levels. It will be critical that we deliver a much better future for the whole community of Claymore, but we have to deal with the individuals who are currently in dire circumstances and provide services for them.

The Hon. Dr PETER PHELPS: I will go back to a situation that was raised earlier. Say I am a 13-year-old at Brewarrina High School. What is the incentive for me to go through to year 12? Where do I go? I might dux the State but where do I go from there? What job is available for me in Brewarrina when I have completed year 12? I could leave the community but my family might not want me to leave. My cousins could call me a coconut for wanting to get out. Where is the incentive? Where is the future? I am a 13-year-old boy. Explain to me why I should continue my high school career, Mr Smyth King? Are there not certain communities where we have to say that the possibilities for material improvement in your life are not going to be possible under the existing arrangements?

Ms LARKIN: My comment to that is that it is not a simple question. In respect of the individual 13-year-old in Brewarrina who really does want to improve his education in the town of Brewarrina, the challenge for us, at many levels, is not only the issue of education and access to services, it is the whole fabric of that community and very much the employment and environment that actually exists in that community.

The Hon. Dr PETER PHELPS: Exactly.

Ms LARKIN: You cannot segment it and say we can just deal with the education. It has to be a whole-of-community approach around how we give that 13-year-old a future and a goal to work towards in the longer term. That is what I think the Premier's department was talking about.

The Hon. Dr PETER PHELPS: In the demography of country New South Wales we do not have 20 mile towns anymore, because you do not need to change the horses after 20 miles on the Cobb and Co stage coach. You have large numbers of sponge cities which have absorbed the hinterland. Some towns die. Geographic mobility has been the key in the death of those towns and also in the revival of towns—in the core mass you need to have in order to have a self-sustaining community in rural and regional New South Wales. Are we subject to an element of delusion if we believe that communities that are financially unviable and have no prospect of revivification are on anything other than palliative care before they eventually collapse?

Ms LARKIN: I am not working out in a regional area.

Ms MORGAN: It is a very real challenge that we face every day. I think that I said that a lot of agencies are responding by looking at new models for delivering services. Across most of western New South Wales there will be a core of people who will not want to leave those communities. Many of them, not all, are people in Aboriginal communities. Because of their connectedness to country they will stay. Our working assumption is that we have a responsibility as a government to provide a certain level of services to all of those communities. Those services might be delivered in the same way as they were in the past. We are constantly looking at working on how we can do it better together and how we can work with communities to best design the ways services can be delivered for them. The issues that you have raised are true. Brewarrina is a good example but there are other towns that are in the same position. It is not easy, and it is something that we struggle with all the time.

The Hon. Dr PETER PHELPS: You are essentially relating the prospect of an infinite future of social security for those towns and those communities. The previous model of social welfare was that you would work to move people out of their social disadvantage, and the best way to do that is through education and employment. Education without employment is, essentially, labour lost. There is no reasonable prospect of large-scale employment in the future.

CHAIR: Thank you, Dr Phelps. We might move on with another question. Dr Gandhi, you came in late, when we had gone through a substantial part of the submission. Is there anything you would like to add?

Ms GANDHI: There have been some questions around the one-stop shop. Service NSW offers that for transactional services. I can elaborate a little bit on that. Also, there has been some discussion around who makes the decisions—the bureaucrats or what we consider to be the end customer: the citizen of the State. Within our transactional services mandate we have done a lot of work on that, which I am happy to share if that would be helpful to the panel. Service NSW was established three years ago, with the first service centre opening in July 2013. The intention is to have a one-stop shop for transactional services. It does not provide advisory services, so it does not cover health and education but provides all State Government transactional services. That includes licences for businesses, licences for vehicles. We take housing payments. We issue Working With Children checks. We provide those services across a range of 30 or more agencies and service centres in contact centres and through digital services.

Before Service NSW was developed—this will resonate with some of the points that have been made—as a citizen or a customer of the State, I would have to interact with all 900 telephone numbers that existed across the State, and over 350 websites, which I would have to navigate to work out which agency could help me with what. There were, as well, over 350 shopfronts. Many of those were duplicated in the same location. If you went to Liverpool you would find a Fair Trading office, a Roads and Maritime Services office and, probably, other State government offices representing transactional services. The idea was that it should be easy for the citizen or the customer of the State to interact with government, that they should be able to go to the one-stop shop and have a conversation about all their transaction needs.

The idea was that the citizen should be able to choose the channel by which he or she did that, recognising that not everyone has the internet at home. Some people, depending on the nature of the conversation, would prefer to have it face to face. We recognised the multi-channel need of the customers and the fact that our entire mandate was to make it simpler for citizens to interact with government in New South Wales. We looked at a lot of best practice overseas. One of the biggest lessons we learnt was that if you just pick one channel—if you just have shopfronts or you just have a contact centre—usually the model does not work. That has been applied in many jurisdictions overseas, including Singapore. There were also models in the UK and Canada. What was really important was the omni-channel experience.

The other important lesson was that the solutions have to be designed by the customer. It cannot be anyone in government, the private sector or the non-government sector making the decision on how the experience should work. So we developed a concept that we call "customer inside", which means essentially that the customer is inside the organisation. Everything we build is designed by the customer. It is a very rough prototype. We put it out there and then it evolves depending on the customer feedback. Very rarely do we come up with a solution that is pre-established. It is usually a rough prototype—literally sticky-taped—of how it could work. We put it out there and we let our staff comment on it, because we believe that you cannot have happy customers without happy staff. So our staff and our customers tell us what does not work in this, and then we iterate.

In my experience in customer strategy—in the private sector and now in the public sector—the one simplest way to tell people that you care about their opinion is to put something out there that they can influence and change based on their actual experience of it. It is not an idea or a paper but something that is three dimensional. So they may say, "When I walked in it was hard to know which counter to go to. When I came in, because it is a one-stop shop I did not know exactly who to talk to." That was what led to the emergence of the concierge idea. We had to do so many different transactions. You could come in as a business to ask about Fair Trading, or as a housing customer, or to get a Working With Children check. How would people know where to go? We did not want to create silos within the one-stop shop. You should be able to ask anyone in our service centre or our contact centre and any one of them should be able to help you with any general inquiry you have.

We created the concierge service where you are greeted when you come in. We understand what your needs are and then we direct you to the right person. There is smart technology usage there. I will give you a simple example. We made sure that people rostered on are linked to the customer centre—the person who has the skill set to help. I think over the last two years, since the website has been live, we have iterated pretty much every six to eight weeks by looking at Google analysis and by looking at where customers are missing the information and where the detail has not been found. What are they calling our contact centre for? Are they stuck? What can we do better? It is a constant evolution. That customer input—because we cannot control

policy; we are purely a service delivery framework—has made us strong advocates for our partner agencies to go back and say, for example, "This experience does not work because of the 11 steps. At the fifth step the customer falls over because of the amount of paperwork or because of what they experience." We do that very actively.

We are able to give that feedback to agencies and say, "This is what you need to change for the policy to work." That has resulted in some successes. So, in a way, we have become the voice of the customer within government. I think the other big success in this is the reach. It is really hard for every agency to have a point of presence in every town in the State. That is a very expensive model. I will use Fair Trading as an example. They had a point of presence in 24 locations in metro, rural and regional New South Wales. Now, through Service NSW—because we deliver services on their behalf—they have 42 points of presence. As of today we have 42 service centres. Tomorrow we are opening our forty-third centre. Before the end of 2016 we will have 70. So by the time we finish, the reach of Fair Trading will have expanded from 24 to 70. This includes Broken Hill and Lightning Ridge and other really small locations. They had one in Broken Hill, so I should not have used that as an example, but Service NSW has really broadened their reach.

Similarly, the Office of Environment and Heritage had six offices across the State. When we finish deploying they can have 70. When a customer comes to our website our intention is that they should be able to get an answer to any question within three clicks. It has been designed not to be deep but to be broad. Our contact centres have no IVR [interactive voice response]. If you call, someone always picks up the phone, 24/7. Forty per cent of the calls we are now getting at the contact centres are general inquiries. They do not relate only to the agencies we serve. They relate to anything to do with government because as the Service NSW is becoming more known customers are choosing to call; it is easier than trying to figure out which of those 900 numbers should be called.

The Hon. Dr PETER PHELPS: People think, "Which of those 200 agencies in Mount Druitt should I be calling with a particular problem?"

The Hon. PENNY SHARPE: How are you managing the community service? If people are now ringing asking about community services, what happens?

Ms GANDHI: We have to warm transfer them.

The Hon. SHAYNE MALLARD: Did you say "warm transfer"?

Ms GANDHI: Yes. We typically do not connect them and hang up; we would wait for someone to pick up.

CHAIR: That is a warm transfer? They say, "Just hold on. I will speak to Joe and he will help you."

The Hon. Dr PETER PHELPS: Thank you, Rachna. Everyone on this Committee has just learnt something.

Ms GANDHI: It is a really important thing. Our principle is that customers should only have to tell us once. A lot of our technology innovation is centred around telling us once. We can use data more smartly and get to know the customer as an entity in government rather than every agency knowing parts of the customer. We have also found that when customers call and we transfer, in a lot of instances the volume of calls for the respective agencies goes up. We then work with the agency and ask, "Can we train with respect to some of your core services so that we can help the customer at that first call?" Then only if the call gets very complex would we pass it on. The more we can bring into the one-stop shop model the better the experience will be for the customer, because they will not have to deal with multiple agencies.

Reverend the Hon. FRED NILE: How many people physically come into the centres, as well as how many telephone?

Ms GANDHI: We have served 21 million customers over the last two years, of which just fewer than six million were in our service centres. Within our contact centres we handle close to 60,000 calls a week. Within our service centres we serve 120,000 customers a week. We have just hit over 12 million on our digital web. So it has grown pretty massively in the last two years.

Reverend the Hon. FRED NILE: That is very good. Could it be expanded somehow to relate to the services departments?

Ms GANDHI: We use different models. There was a point made—which I agree with—that there is no one size fits all. In Service NSW we have the website and the one-stop shop phone number—13 77 88—which is the only number we have. And we have the service centres, which do whole-of-government transactions. In November last year we launched, based on customer feedback—completely driven by our staff—a digital store model. We came up with the idea and had it live in six weeks, because we knew it would iterate. In major shopping centres or customer hubs we have set up pop-up stores with our staff and some digital facilities. We have iPhone with our app; it is essentially a desktop with our website. Customers can, for all of the 30-odd per cent of transactions that are currently available digitally, come up to our staff who will show them how to do it.

It is about educating the customer on how to use digital technology, but in their space. These transactions have been available digitally for a very long time but the customers have not taken it up. This is just a way of helping them through it. It is almost a staff-assisted self-service. That means that next time they will be more confident to do it at home. It has been a very successful model. It is a pop-up, so we can move it around. We have it near the station at North Sydney and at the Westfield shops in Bondi. It is developing, depending on the hubs, where the customer needs it. In rural and regional areas we provide services through council agencies, where we have partnered with the local council to provide our services so that we can have a really good reach in rural areas. It is very important for the committee to have direct access and it ensures that jobs can be maintained et cetera in the local areas.

CHAIR: That is great. It is what we need.

The Hon. SHAYNE MALLARD: Thank you for that information and congratulations on the success of your agency. The Committee has heard some very good things about it.

Ms GANDHI: Thank you.

The Hon. SHAYNE MALLARD: Yesterday at Mount Druitt we heard anecdotally that the vaccination rate for children was very high because of the Federal Government's policy to link vaccinations to Centrelink benefits. I have heard what you said but what is interfaced with vulnerable communities? Is there scope to increase that so people know where to go? When Senator Marise Payne was Minister for Human Services she talked in public discussion about your model for the Federal Government and said that every Centrelink worker was a counsellor. Is a counselling role evolving in your centres? Are you finding that people in crisis are coming to your centres?

Ms GANDHI: I will speak to our model and then I will let the rest of my colleagues talk to the suitability of that model to the social sector. From my perspective a lot of the investment we have made into infrastructure in Service NSW should be leveraged across the sector, across government because of the point of presence we have or the reach we will have when we finish the 70-odd points of presence. Every one of our service centres has a privacy room. What we mean by that is that we have a room with all the technology in which you can have a private discussion. It has wi-fi connection, telephone, table, seats and is accessible without having to go into a back area. More private conversations can actually be had there. The model we have developed means that if those services are needed then it is possible for them to be provided at our premises, but the staff we recruit are not counsellors and they cannot perform that role in terms of their current capability set.

Also in the investment we have made into our digital platform we have developed case management capability—which is really important in any sector actually—from when a customer comes in and we have to pass them on to a different agency like Transport, FACS, et cetera. We can actually pass all the information we have collected from that customer on to that agency so they do not have to repeat the information—even if it is a customer complaint or a positive experience. I think there is very rich opportunity to leverage infrastructure that the Government has invested in through Service NSW. The other really positive element that I think can be leveraged is culture.

Again speaking as a subject matter expert on customer strategy, the most unique point of Service NSW is its culture—namely, being able to create a group of people who are wired to care about the customer and who actually take that to the service delivery level. I think most people who work in a customer-facing role care about the customer but the empowerment that exists—which is what has created the 98 per cent satisfaction rate—is the ability to say "How do I need to design this so that the customer's needs are met?" and then

introduce that into policy and how government works. That culture is what we at Service NSW feel is the biggest differentiator. There is opportunity to leverage that and see how it can be applied elsewhere. I think it is infrastructure and culture. But are our people equipped to do the work? Absolutely not. They are not counsellors. They are not in that advisory role; they are very much in the transactional space.

The Hon. SHAYNE MALLARD: I will direct my question to the rest of the panel then. Yesterday the Committee was told that there have been issues around knowing where to find the services and being bounced around. Is there an opportunity to leverage off this one-stop shop model?

Ms DURHAM: I think on the transactional side the answer is definitely yes. That is occurring. A number of our social agencies have services being delivered from them but they are transactional in nature. At this point in time there is no government decision to expand Service NSW into more intensive service delivery, particularly for the communities we are talking about here. Other colleagues might want to comment on this as well, but that type of intervention does require a different skill set, as Rachna has said, and it also requires specialists who are well versed in terms of a particular issue—whether it is a Health matter or whether there are particular issues around domestic violence or abuse which requires specialist counselling capabilities.

The Hon. SHAYNE MALLARD: But if there is a payment issue—

Ms GANDHI: We can take that.

The Hon. SHAYNE MALLARD: You could take the payment issue from FACS but it could be an indicator of a problem or some information that could help to identify, for example, a vulnerable child. We are talking about the parallel to the vaccination issue. It is interesting that since that policy has been imposed the vaccination levels have increased. Centrelink obviously knew the data about the kids at Mount Druitt but it could not share it. Centrelink obviously knew which children needed vaccinating before it could start making payments.

Ms WALK: For example, if you are a foster carer you need a Working With Children Check, so you go down to Service NSW. FACS does not try and deliver the Working With Children Check; it is Service NSW. That is a fantastic example of where part of our business has done that. Could we do carer payments from Service NSW? We could consider it but our carer payments are often very much related to the casework around the children that the carers are providing. Is it enough volume to warrant separating the payment system away from the whole department? Absolutely we can look at wherever it is possible to pull away the transactional bits. The final point you made was about all of our agencies seeking to use whatever other mechanisms are there. For the last couple of years Housing has had an office in Centrelink offices. You do not have to have 10,000 outlets; you can leverage off there. Often people at Centrelink have housing problems so that has been quite sufficient.

Health and FACS work very closely on a program called the Family Referral Service—I do not know if you have seen them in your visits—where a non-government organisation is contracted by Health to deliver services with a child protection caseworker sitting in them to be able to help join up the service system. That might be an example of where we could think about what else could sit within the Family Referral Service—the first six weeks where a family is having difficulties—and to harness the back office and all the services in that geographic area to be able to deliver them. In particularly disadvantaged areas they can and should play a really uniting role to be able to make it less complex.

The Hon. GREG DONNELLY: On page 20 of your submission under the heading "Any other matters" you refer to promising international examples of service coordination. I was a little surprised that there was not further information about any successes Australia-wide to try to identify which initiatives appear to be working well. Does that reflect almost the reaching of consensus at State and Federal levels that a process of identifying something as working well is not going on or you did not have time and it was not really within the remit of the inquiry to give us that level of detail?

Ms DURHAM: In the way we selected the examples here we took an international focus. If we could take the question on notice then perhaps we could provide some of those examples. I think some of the challenges we face is that often a lot of these measures are tried but then the evaluation evidence is not there or it has not as yet been completed. Some of these things are quite new. There is always a challenge to get that definitive understanding: "Is this working?" Because often they are not measuring outcomes or the outcomes

take a long time to see. Certainly we can take the question on notice and provide some Australian examples if we can.

The Hon. GREG DONNELLY: In people's heart of hearts there is an understanding—this came through at our visit yesterday and I am sure you have also had the experience in dealing with communities—that it takes a long time to turn something around. Yesterday at Mount Druitt we were talking about a timespan of at least 10 years and out at Claymore someone said 25 years. It is a challenge to envisage something taking so long but the people we spoke to had a sense that this was really an issue for the long haul. In a sense they were throwing back a challenge for government, namely, there needs to be an appreciation that this is not just another program but that it is buying into something for the long haul. We can see the end point but it is certainly a long way down the track.

Reverend the Hon. FRED NILE: Ms Durham, are you clear about the question you said you would take on notice?

Ms DURHAM: Yes. We will provide any Australian examples where we think there is evidence that relates to the Committee's terms of reference.

Reverend the Hon. FRED NILE: Does that include your doing some evaluation of those programs?

Ms DURHAM: No, we would look for existing evaluations that have already been done. We would not be able to do that but we can certainly see if there are any examples.

Reverend the Hon. FRED NILE: How can that evaluation be done?

Ms DURHAM: If they have been run out of other jurisdictions, in Victoria or other places, we would not be in a position to evaluate those. We would have to go on whatever information was available.

The Hon. Dr PETER PHELPS: I think Ms Walk wanted to respond to Mr Donnelly's last question.

Ms WALK: I agree with you around the long term view. The other thing is our agencies do stress that it is helpful for us to say "Gosh, we can do something right now about the zero to fives in particular." The jury is in on that; we do not need to be debating it. I understand what you are saying. Some of the corporate people sitting on the governance body go "We have got a whole three months to be able to do a school readiness program." They have helped us all get a sense of urgency about which generation needs to wait for this. We have zero to fives right in front of you. They are the group or cohort that you can have a sense of urgency about. You know you are playing for the long game but you also need to have a sense of urgency. I know you are not dismissing that at all.

Ms MORGAN: Could I add one other thing? We all agree that some of these things do take a very long time. Also we had a discussion yesterday about the fact that very often they wax and wane, particularly when we are dealing with community organisations as key partners, the capability and capacity within those organisations. You will get a really strong leader and after five years they resign, they retire, they die or they are volunteers. We learnt a strong lesson in the work we did with the Murdi Paaki Regional Assembly. We had to remember that we were all being paid to sit around a table to do this work and these people were all volunteers, often on leave without pay if they had jobs. We do know that sometimes the capacity of our partners in this work does wax and wane and that can be seen in the way these longer term programs work as well.

Ms LARKIN: Can I just comment on that? Over a five- or 10-year program we think it is just going to go up but it does not work like that. A community literally, depending on what is happening, can fall off for six or nine months and then it will pick up pace again. The long term is very much built around that model.

CHAIR: The one thing we have not talked about in this extended period of time is some issues that came up a lot yesterday around privacy. I would like to ask you for your comments on this matter. This came out yesterday from the person who spoke at the end and I also speak from my personal experience as a clinician. My question to you is about the culture that has eventuated that we are almost hiding behind this privacy legislation in terms of "No, I cannot share that information with you because it is private and confidential". The Privacy Commissioner is coming in next to speak with us. After conversations with her, she is saying that that is not the way the privacy legislation works and that we could be doing a much better job of sharing information and service coordination. How do you all see that happening and what are you doing about it to ensure that these

agencies are able to share information? I urge that we need to put the clients at the forefront and that is how we are going to get the better outcomes. Where do you see that going? Do you think that culture exists and how are you going to fix it? How do you suggest that we make a recommendation to fix that?

Ms WALK: One of the examples I want to use is Patchwork, the IT sharing from clients about who is in your network and who is helpful. It has come from the United Kingdom and we have picked it up in New South Wales. It is being used very effectively on the Central Coast and I think we are moving to a rollout throughout New South Wales. It is where you very clearly get permission from the client to be able to share with whom in your network is important. You might have the mental health nurse, you might have the school counsellor, you might have a range of people. It is beautiful visually; it is very helpful for those agencies to not say, "I am the mental health person, I could not possibly—

The Hon. PENNY SHARPE: Is it government agencies only?

Ms WALK: No. It is whoever is important to the client.

The Hon. SHAYNE MALLARD: They control it? The client corrects it?

Ms WALK: The client can see it, but each agency can see it. If I am the teacher I cannot say, "I could not possibly ring the mental health nurse because I do not know if I have got permission" because you do; you have been given the number and the permission from the client. So it really opens it out. Of course, once again, I think that first of all they used it with young people and the other group—so they were under 18—and they also used it with mental health clients; they are the particular groups that started with it and it has gone kind of livewire after that. What we found is that clients generally want to give permission to all of these groups to be able to talk to each other about their care and support. Patchwork is a great example and it is good because visually you can see it, it is clear and it manages the privacy issues very well because some people do not want all of their history shared with everybody but they do want each other to talk with one another.

The Hon. PENNY SHARPE: Can the clients log in themselves and look at what is there?

Ms WALK: Yes.

The Hon. PENNY SHARPE: Are they given their own login?

Ms WALK: Yes.

Mr SMYTH KING: The Patchwork profile does not give you the detail of what they might have shared with a particular service or provider but it tells you that that person or that organisation has been involved. So it enables you to make the contact and the phone calls. What I was going to say earlier is that I think what is really important in this is this notion of the warm referral, that people do not have to tell their story over and over again, that you have got a mechanism in place where somebody can come in. That is where Patchwork works very well for us in the places where we have been able to use it and build on it in that people are quite willing and happy to trust somebody else to assist them in telling their story rather than they having to go and tell their story three, four, 500 times over because everybody is a new person. That notion of the warm referral is really, really important in this space.

CHAIR: I am interested to hear from Health.

Ms KOFF: In Health privacy is a perennial challenge and, as a former—

CHAIR: I have never heard of Patchwork and I spent 20 years in Health.

Ms KOFF: It is relatively new and the unique proposition there is seeking permission to share your data. With health records and other information you give a commitment that you are only using the information you collect for the intended treatment and interaction between the clinician, so opening it up more broadly. A lot of health professionals feel a personal liability for sharing information inappropriately.

The Hon. Dr PETER PHELPS: But surely that is a problem for us legislators. The legislation should be predicated on the idea that the information is transferable unless there is a good reason not to do so rather than you should only transfer if there is a good reason. Is that not a legislative problem which we can fix?

Ms KOFF: Yes, and that is part of the issues we have been working on with the Child Wellbeing Units under section 16A. We can share information.

The Hon. PENNY SHARPE: Has work also been done through the eHealth projects in the Commonwealth? Surely there is a lot of learning around how you would fix that through there.

Ms KOFF: It is not even between other government agencies; it is with GPs, it is with—

CHAIR: Certainly, but what you are saying, I think, is that one of the issues that has continuously been brought up—if you are doing a nursing assessment and you know there is a mental health issue you say, "May I discuss this with the mental health worker?" and they can say, "Yes, you are able to discuss that", not just the data but the information. So it is this perception within our organisations that that is not possible. Are we able to do something about changing that culture of sharing information where the client has given permission to do so?

Ms KOFF: It is going to be absolutely critical that we do change that. It is both the culture and the knowledge and understanding. It was highlighted to me when I went to Cowra because we have an integrated care program there that involves GPs, the health service, NGO providers, et cetera. People even felt uncomfortable discussing the case conference in the presence of NGO providers there who were not directly involved with the case. I can understand people wanting to safeguard an individual's privacy and health conditions but if we are working towards a common purpose we have to be far more sophisticated in how we do that. We will continue to operate in silos if we do not have that free exchange of information between people.

The Hon. PENNY SHARPE: I have a question that is slightly outside the terms of reference. I am also the shadow Minister for Planning and my question is how are we dealing with the 1.6 million people who are coming to live in Sydney by 2030? What planning is being done around the social services system, be it schools, health or community services, for all of the new land leases and also the densification that is coming to our city? I am interested in the sort of work that is happening within government and is that being talked about? I think Ms Larkin talked a little bit about that.

Ms LARKIN: South-western Sydney is very much affected by that population increase significantly. I think there is a lot of extensive work very much from the health perspective in terms of looking really critically at what the service needs from the health perspective area and we need to do more across government work around that.

The Hon. PENNY SHARPE: Is there a structured program that is talking about that kind of growth and that planning?

Ms LARKIN: What I am assuming, and I do not want to presume the Government—

The Hon. Dr PETER PHELPS: I bet there is within individual departments.

The Hon. PENNY SHARPE: This is what I am asking. This is exactly the point.

Ms LARKIN: I think you will see with the commission for Sydney and the districts that are created around the commission for Sydney very clear planning across government around the thinking of what will be required for these communities.

The Hon. PENNY SHARPE: Do you think that will fall under the social commission? Do you see that as a vehicle?

Ms LARKIN: My understanding—and I do not want to make any presumptions in terms of the Government's position around that; that is their choice—is when you look at what the structure of that is and what the districts will look at, it will be across government. But specifically around Health, we have done a very comprehensive clinical services plan for that growth area very much up through Oran Park up to Badgerys Creek and obviously the impact of the airport is a fundamental one for us. We have looked critically at the population that will move into that south-western area; it will grow probably to well over a million by 2021. So we have looked at what we need to do in our hospitals but, more importantly, what we need to do in the community and providing services very much at a community base.

What my colleague Elizabeth spoke about was in relation to integrated care centres, looking at how we develop services that very much meet the needs of those communities based in those communities. For example, in Oran Park we are looking at the development of an integrated care centre with GPs that we hope will build up over the next five to 10 years which will enable services to be provided in those communities, not on hospital sites. Wollondilly, for example, has also got some significant growth and we have looked at some virtual health services down there, which sounds a little bit futuristic but it is not. It will do telehealth, which we have already got going at the moment, it will do a whole lot of specialists through telehealth also, and it will link up with local government in terms of health promotion there.

So there is a whole range of service delivery models that we are looking to build to cope with that population growth and my understanding, as I said, is that the commission for Sydney will look much more critically at the districts. A little bit of a challenge around that, as I understand, is that the district for south-western will not take in the bottom of south-western, which is the Wingecarribee local government area, nor Bankstown.

The Hon. SHAYNE MALLARD: It has got boundary problems already.

Ms LARKIN: Potentially.

The Hon. Dr PETER PHELPS: Can we have a redistribution?

Ms LARKIN: I think there is good collaboration between especially those metropolitan areas from a health perspective about how we work together; so I do not see that as a barrier. We are just going to have to think carefully about how we link up some of that district work. That has not been developed at this point, as I understand, in terms of the detail but that is in train at the moment.

Ms KOFF: If I may just add, I go to the senior officers planning group that Planning convenes which has transport, education, FACS, all the human services agencies in conjunction with the infrastructure ones to then piece all the puzzles together. So it is happening at a local level, as Amanda described, but it is converging at a statewide level.

The Hon. Dr PETER PHELPS: Just on the issue of district boundaries, was I correct in hearing earlier that FACS and Health have aligned their boundaries?

Ms LARKIN: Correct.

The Hon. Dr PETER PHELPS: But Education has not. Is that because Education does not have boundaries or because—

Mr SMYTH KING: We do not have boundaries.

The Hon. Dr PETER PHELPS: Is there an argument to be made for data collection on the basis of presumptive boundaries which are used by FACS and Health?

The Hon. PENNY SHARPE: All the six districts under the Greater Sydney Commission.

Ms DURHAM: My understanding is that you can get that data from Education; it can be laid out depending on the boundaries. Brian might want to add something to that.

The Hon. Dr PETER PHELPS: I do not want to cause more work to be done at the touch of a button.

Mr SMYTH KING: I have already made reference to that around the Aboriginal report that we have got and we have cut that via the boundaries of Health and FACS. As Amity said, we have got the capacity to provide that in most areas. I cannot guarantee that it is every area but in most areas—

The Hon. Dr PETER PHELPS: It is just that one of the things which we were impressed with yesterday with the collective action model is verifiable data where people are talking about the same thing rather than different datasets for different purposes.

CHAIR: Thank you very much all of you for coming; we really appreciate it. I know how busy you all are and we value what you do. With the briefing paper request, the secretariat will start planning and coordinating our next site visit to Bourke, so I am directing this to you, Ms Morgan, and will be in contact with the Department of Premier and Cabinet and FACS to establish what we should see and who we should hear from. The Committee requests that the Government provides a briefing paper on Bourke which outlines relevant programs and services that you think we may benefit in relation to the terms of reference of this Committee. The time frame is by 30 October so that we have it before our visit on 5 November. The secretariat may also phone you prior to that report to get some ideas. The Committee has resolved that answers to questions taken on notice be returned within 21 days. The secretariat will contact you in relation to those questions. Again, many thanks to all of you; we really appreciate it. We hope to have our recommendations nailing it.

(The witnesses withdrew)

(Luncheon adjournment)

ELIZABETH TYDD, Information Commissioner and Chief Executive Officer, Information and Privacy Commission, sworn and examined:

CHAIR: Would you like to start by making a short statement? If so, I ask you to keep it to a few minutes so that we have time to ask you questions.

Ms TYDD: I would like to commence with a short statement. I would like to particularly comment that the work of the Committee is appreciated, and the terms of reference are very active terms of reference that go to the heart of issues within the jurisdiction of the Information and Privacy Commission [IPC] and me as the Information Commissioner. In preparation for this meeting this afternoon I have taken time to look at some of the submissions that have been made to the inquiry. I would offer my observations that in relation to some of the submissions there seems to be five precepts, five standard themes that appear to be coming out in this short sample of matters that I have considered. They are the need for an integrated service delivery; the need for information sharing and access, both to data and to information more broadly; meaningful engagement between service providers and citizens and across agencies as well; the need for improving transparency so that targeted services can be provided, so that planning can be facilitated and so that there is an evaluation of success; likewise, the fifth is an improved understanding of the extant legislation, particularly in relation to information access and privacy.

Those submissions that I have reviewed recognise that not one agency has a solution, nor does it have the capacity to transform service delivery, particularly for the individuals or citizens living in communities with high social needs. But three of those five enablers are directly predicated upon the precepts of open government, for which I am responsible and for which the IPC has a responsibility. They are enshrined in the Government Information (Public Access) Act and full activation of that legislative regime and building on that legislative regime provide a foundation from which these requirements can be delivered. I briefly turn to the role of the IPC. The IPC is established as an independent government sector agency under the Government Sector Employment Act. It is recognised and my role as Information Commissioner and Chief Executive Officer is recognised. In establishing an independent entity such as the IPC, there is a recognition that independent oversight of access to government information and, indeed, open government is required, and that independent oversight provides a capacity to monitor and provide advice to government, to agencies and to citizens.

The IPC itself supports delivery of in essence four legislative regimes: the Government Information (Public Access) Act, the Government Information (Information Commissioner) Act, the Privacy and Personal Protection Act and the Health Records and Information and Privacy Act. Starting with the Government Information (Public Access) Act—I certainly will not traverse the other three pieces of legislation—the objects of the Act are to maintain and advance a system of government that is responsible and representative, a democratic government. That legislation starts from a presumption in favour of disclosure and, indeed, that is possibly the most important aspect of the operationalisation of that legislation. It starts from the presumption of, yes, you can have access to that information. It does not start from the presumption of maybe or perhaps, which is where the FOI legislation could be seen to be interpreted, and it certainly does not start from the presumption of no. Starting from the presumption of yes is the enabler that facilitates information sharing and information exchange.

Within the Government Information (Public Access) Act there are four pathways to obtain information. There are the proactive release and the push pathways and then there is the reactive in response to a request pathway. The intent is to activate all four pathways and to ensure that as much information is readily available as can be available. Therefore the Act prescribes mandatory open information, so open access information. That collaboration between agencies would be facilitated by those precepts, by those concepts of open government as they apply not only between citizen and government but also across agencies. The Government Information (Public Access) Act provides a structured decision-making regime in which individuals making decisions can properly respect principles such as privacy and security and make a decision that has a sound legislative basis. Fundamental to those principles enshrined in legislation is that those pathways should be available to all citizens of New South Wales, not just those who have the resources, the knowledge or the ease of opportunity to use them.

Indeed, citizens in high need communities may be those who could benefit most from effective, integrated regulatory approaches and service delivery. That is represented through the type of empowering regime that is provided under the Government Information (Public Access) Act. I am conscious that I have a lot

more in my opening statement, but I want to ensure that you have the opportunity to raise questions as I continue through.

CHAIR: Yes, please continue.

Ms TYDD: The Department of Premier and Cabinet has recently undertaken some research. They commissioned the NSW Social Policy and Research Centre to undertake research. That is mentioned in my earlier submissions. I would also advise the Committee that at any time further submissions can be made, and if there are questions that the Committee has following this appearance, of course we would be only too willing to oblige. That report utilised human services case studies, which are obviously germane to this inquiry, to identify opportunities for better personal information sharing for government agencies and, where appropriate, with non-government organisations that are providing services. The research identified organisational factors as the most significant barriers to enabling information sharing by New South Wales public sector agencies and with third parties. It found that the predominant barriers were risk averse cultures, technological barriers, the interpretation of legislation and policy, rather than the instruments themselves, and highlight the need for greater guidance.

One of the IPC's priorities has been to provide constructive guidance and consistent information to engage and ensure that coordinated service and training about information access and privacy matters are provided. Indeed, that is represented in the first strategic plan of the IPC in 2012. In looking at the ways to better advance those objectives of the Government Information (Public Access) Act, the IPC has also commissioned recent research. That was showcased at the Right to Know Week last week, so I am no longer heralding an event to occur. In that we looked to explore, through the research conducted by the University of Technology, Sydney, ways in which to activate open government, to switch on open government. That research provides a wealth of examples of case studies that are ensuring better service delivery, more integrated service delivery through switching on open government, through ensuring the ease of access to information and data and to informing service delivery through that data across what could be referred to as traditional silos.

Switches were identified in that research. The first was legislative or structural features that build success and that promote a model of proactive agency information sharing. The second was to promote proactive release of government data across organisational walls, and recognise and reward individuals or agencies that are active in promoting proactive release. Thirdly, there is the requirement to build inter-agency trust and to provide soft regulatory tools or soft regulation to enhance that. It looked at a number of international best practice case studies. It drew upon the United Kingdom model, where the Information Commissioner also oversees data protection principles. There are a number of highlights in that report, and I am happy to take the Committee to some of those because they are very much exemplary in the way they have activated open government and permitted greater service delivery or improved service delivery.

There were highlights on the Right to Know event, which was a thought leadership event designed to promote this notion of sharing information. Some of the highlights were: Minister Dominello attended and presented on the Data Analytic Centre. Tim Reardon, Secretary for Transport, showcased the work of his agency engaging with the community with products and services. Simone Walker, Executive Director, Design, Innovation and Safety for Family and Communities, offered a compelling insight into child story and that initiative. We also heard from Mike Pratt around meeting customer citizen expectations and the digital licence and also other technological advances or contributions. The presentation I provided focused on an important precept—and arguably not well activated in the Government Information (Public Access) Act—and that is citizen engagement.

As I said earlier, that citizen engagement, engagement with communities, is integral to understanding the problem, problem identification and delivering services. So at that meeting I announced a commitment to activating those provisions in the Government Information (Public Access) Act that have not largely been fully utilised, and they are the provisions that enable citizens to participate in the formulation of policy and the development of service delivery options and how that might be achieved. I might share with you one example that I relied upon on that day.

CHAIR: I am conscious of the time, but if you just want to share that example and then we will move on to questions.

Ms TYDD: Interstate there are a number of charters or citizen engagement mechanisms in place, and New South Wales will be developing similar mechanisms through the IPC's work. The one example I provided was one that appears in a case study in the research about Denmark. In Denmark there are 98 municipalities but

enshrined in legislation is a commitment to engage with senior citizens. So they established senior citizen councils. These councils obviously have a legislated right to provide advice but volunteers make up those councils. They advise—they do not determine—government in its decision making about the provision of aged care services. They advise on everything from bus stops through to the provision of aged care housing solutions, for example.

One of the keys to success of that particular model is that the committee must see the requirements in totality and they are provided with sufficient evidence to make those decisions or to make those recommendations, if you like, so they have to prioritise, and in doing so they assist government in prioritising and assist in ensuring that the service delivery meets the unique needs of each municipality. They are the sorts of examples that are occurring internationally that could be facilitated further.

CHAIR: Thanks very much for your submission. This has actually been a constant theme for us throughout our hearings, throughout the submissions and again this morning in terms of information sharing and people being able to coordinate their services. One of things I am observing, and I think it is what you are saying in your submission as well, is that we have the framework there but it is people's understanding of using that that is an issue; they are often hiding behind the fact that they think it is a privacy issue or that they cannot share that particular information. But what I am hearing is that that framework can be used but people just are not utilising it. Would that be accurate?

Ms TYDD: I think that is largely accurate of the understanding of the legislation. I think it is complicated by people needing to interface between GIPA and privacy legislation—certainly that is what the Department of Premier and Cabinet [DPC] research confirms. In 2012 the former Information Commissioner issued a guideline that well demonstrates how GIPA operates. GIPA must respect privacy—it is listed under section 14 as one of the factors for consideration—but it does not dominate. It is a factor for consideration. Likewise, the privacy legislation will be no doubt referred to by the Privacy Commissioner, but it respects the operation of the GIPA Act.

The GIPA Act is the pre-eminent vehicle, if you like, and perhaps in traversing that and other codes or other soft law solutions people do become, if you like, more inclined to operate from the position of maybe or perhaps as opposed to the position of recognising that it is a permissive regime. GIPA is a permissive regime. The guideline issued in 2012 by the former Information Commissioner confirms that and the IPC has been taking steps to ensure that we do undertake more training, we provide more information and we assist agencies in understanding that interface between the two sets of legislation.

That is as it relates to service provision or acquisition of information for individuals, but the sharing between agencies is something that also is referred to in the DPC research. There are a number of options that no doubt this Committee will consider that might provide better opportunities to facilitate that sharing of information between agencies. The Data Analytics Centre [DAC] is one model. Other models might be to consider the way that GIPA is constructed with that sound determinative model and consider the approach so that agencies can make those sorts of legally defensible decisions between themselves in exchanging information.

The Hon. Dr PETER PHELPS: Thanks very much for coming along. There are two issues which are on my mind. A lot of social development work is now outsourced. It is still government funded, it still has to meet government-created key performance indicators [KPIs] but it goes to private sector companies, whether they be NGOs or local organisations—well, local organisations are NGOs. There seems to be an issue of government data getting to NGOs, but there is also an issue of NGO to NGO transfer of information which might be accumulated under a government-funded and even government-directed program. Firstly, what capacity is there for transfer of information both from government to NGOs and NGOs back to government, but also from NGO to NGO who might be working holistically on a broad problem in an area but may be deeply reticent about having to transfer information to another, and perhaps rightly so? Where is the line drawn? Is there a line? If there is not a line, why does there appear to be a line?

Ms TYDD: That question too will require some degree of explanation and I would like to come back to the Committee to try and explain that a little more, because the GIPA Act does not of itself provide the vehicle to facilitate that exchange between NGOs. The GIPA Act's jurisdiction does not go to NGOs but it does provide that in undertaking that service delivery from a government agency, between a government agency, there is a provision in the Act that deals with ensuring that citizens have access to that information. So, if you like, the

NGOs will, by virtue of a contract, assume those responsibilities for holding that information and providing that information to citizens, but it does not answer your question, Dr Phelps, about between NGOs.

The Hon. Dr PETER PHELPS: That is well and good for the citizen to get information but the delivery of service is often contingent upon an effective use of information which may have been extracted elsewhere so that you do not have repetition or inconsistent needs evaluation. Presumably there is a degree of information flow from government to the NGOs and even more substantial flow from the NGOs back to government. So does government then become the clearing house of transfer of information from one NGO to another? If it does not, who does it? Is it informal arrangements between NGOs? I can guess how a system may be working. I can guess whether the legality or illegality of that information transfer might be taking place. But would it not be better if there were a systematic attempt to define information transfers within a broader context of service delivery in a particular geographic location or to meet a particular social end?

Ms TYDD: Certainly that is my view in considering the submissions I have considered to date in terms of the barriers faced by NGOs for delivering services. They are the sorts of issues that are raised in some of the submissions that you would have seen. I can confirm, Dr Phelps, that the GIPA Act does not currently provide that vehicle. So there are means to ensure that information is accessed but, in the manner you describe, that is not fully covered through the GIPA Act.

The Hon. Dr PETER PHELPS: So public servants have to guess.

Ms TYDD: As to the information held? Or—

The Hon. Dr PETER PHELPS: As to the information they can hold and as to the information they can disclose.

Ms TYDD: No, I am sorry—public servants are covered. The NGOs were the entities I was referring to in responding to your question.

The Hon. Dr PETER PHELPS: No, but it is the information which might have come from an NGO to a public servant to be able to then forward it on to someone else.

Ms TYDD: The agencies are definitely covered by the GIPA Act, so they could on request and through the proactive release—if a government agency holds that information it is able to apply the GIPA Act framework. I think I may have confused your question, Dr Phelps. I thought you were talking about between NGOs as such.

The Hon. Dr PETER PHELPS: I think that is basically a totally ad hoc arrangement where there is no definitive legal framework for it. But what I am trying to find out is an optimal solution. Is it an optimal solution to recognise NGO to NGO transfer of information or is it an optimal solution to have a more expansive capture and release program of information via a departmental thing? I do not know the answer.

Reverend the Hon. FRED NILE: Ask the witness.

Ms TYDD: At this stage I would not make a recommendation without fully appreciating the issues faced by the NGO sector. I would say in relation to that sector though, Dr Phelps, you are quite correct in saying it is possibly an increasing problem. One of the observations I would make, and it is contained in the section 37 report published last year, was that from a low base of about 3 per cent of applications from NGOs in 2010-11 for GIPA applications to now we are at about 30 per cent of the applications in New South Wales coming from the NGO sector. So I think the issue that is being grappled with is a very real issue.

Reverend the Hon. FRED NILE: What is your quantity? What is it 30 per cent of?

Ms TYDD: The average over the last four years has been in the order of about 13,000 GIPA applications per annum.

The Hon. PENNY SHARPE: And are they mainly human services NGOs or is a lot of that coming from environmental and other NGOs?

Ms TYDD: I would have to take that question on notice.

The Hon. PENNY SHARPE: If we could get a breakdown of the type of NGO, that would be great. I want to ask you about proactive release. The GIPA Act is very clear about this that it is a presumption to yes. What sort of monitoring have you done in relation to the agencies' actual proactive release? Do they report to you what they have released or have you done some monitoring of that?

Ms TYDD: In terms of proactive release there is limited mandatory reporting required under the GIPA Act. This is a piece of work that very capable officers in the Information and Privacy Commission [IPC] have recently embarked upon. So in the last 12 months we have started looking at that. We sampled councils in particular and undertook a survey to look at how councils were informing their proactive release program because, as you clearly have a knowledge of the GIPA Act—those four pathways—informal release should in fact inform proactive release, because if information is being released informally then it should inform what is being released proactively.

So we undertook a survey to see what systems were in place in the council sector in particular to see if those pathways were being adequately activated. It is I think probably fair to say that there are aspects of the GIPA Act that have not realised their full maturity, and this would be one of those aspects of the GIPA Act. In the same way, citizen engagement would be one of those aspects. So the IPC has taken that forward and we have produced a fact sheet and guidance to assist in promoting proactive release.

The Hon. PENNY SHARPE: And in relation more to the government agencies themselves, I am assuming that there is quite a difference between agencies and that some agencies through leadership or through better understanding of the Act proactively release more than others. Have you had a look at those kinds of factors?

Ms TYDD: Sampling of government agencies is something that we have not formally undertaken. We have in terms of mandatory release—for example, in contracts, we looked at the university sector recently. That has been the first proactive regulatory initiative that I have undertaken in my almost two years as Information Commissioner. That showed results that were concerning but that were consistent with the recommendations of the New South Wales Auditor-General and with ICAC in terms of reporting on contracts. We are actively engaging with universities now, because contracts are mandatory reporting requirements, to elevate the levels of compliance with those reporting requirements. And contracts and the reporting requirements under GIPA do provide a very sound basis to gain an understanding of the sorts of services that are being delivered and how they are being delivered, by whom and the allocation of funds, particularly government funds, to deliver those services.

The Hon. SHAYNE MALLARD: I am very familiar, coming from a local government background, with the differing views on GIPA and the fact that different lawyers—council lawyers and external lawyers—give different advice, always deferring to the cautious side because they are risk averse, and I am sure it is the same in departments and so forth. I found when I was in local government that it was very hard to know where to go to find a definition and some guidance on how to apply the Act and I think it would be the case in a lot of areas. In your submission you talk about the fact that clear guidance and direction is needed to clarify what information may be shared, how and by whom. What actions do you undertake in terms of educating and increasing awareness of government agencies and local government about their role and the GIPA and, from that, that of the community? I do not think the proactive release of information is very well understood. We have heard that during our inquiry.

The Hon. PENNY SHARPE: Actively resisted is how I would define it.

The Hon. SHAYNE MALLARD: You might not even be aware that—

The Hon. PENNY SHARPE: I am not talking about the little ones; I am talking about the big ones.

CHAIR: If we could just direct the question.

The Hon. SHAYNE MALLARD: Sorry, yes. Well done, Madam Chair. There are organisations that are interested in looking at data to create opportunities for apps and sharing information to the community. A lot of government agencies do not know that that data is of use to other people—they sit on it and think it is just their information.

Ms TYDD: Commencing with government agencies and the reference to apps and how data is applied, the Right to Know event was just one of the many engagement opportunities we have with agencies to develop the thought leadership in this area to demonstrate how agencies are both legally able to and how they operationalise those legal requirements. The transport example, the example from FACS, the example from the EPA [Environment Protection Authority] were very strong examples of how that information can be released and used to serve regulatory purposes, used to better inform service delivery and used to better measure outcomes from service delivery.

That approach to education, developing thought leadership is one in a suite of a number of opportunities the IPC avails itself of. We have produced this year e-learning modules so that decision-makers are able to log on free of charge and work through the Government Information (Public Access) Act and understand how it operates and how to make a decision under the Government Information (Public Access) Act. We publish our reports so that they provide guidance as well. I have produced two section 37 reports in my time: one was a data acquittal of the first three years of data acquired under the Government Information (Public Access) Act regime and the second was a more comprehensive report. A third report is now under development and that is required annually.

In that report we have undertaken a review of agencies and engaged with stakeholders to look at how the report could actually promote the objects of the Act and be an educational tool, serve as a regulatory tool. The feedback has been overwhelming that case studies are vital to ensuring that people understand how that information can be applied and accessed. So there is a focus on that both in our report but we are also in the IPC working towards case notes and an IPC bulletin so that people can log on and see the latest developments in that area. We engage with practitioners throughout New South Wales, information and privacy practitioners, to educate them and ensure that they have a full understanding of the legislative regime.

One of the most significant and, if you like, innovative approaches that we have settled upon is the notion of an IPC information management scholarship. So introducing this concept that information management that rises above, if you like, traditional legislative regimes and enables people to work across and respect those legislative regimes but give them a full appreciation, if you like, from a top down perspective. That initiative is something that we will roll out early next year when we will bring in decision-makers, sponsor them in the IPC and provide them with education, advice and knowledge to then form a diaspora of people who can inform better decision-making more broadly. Those initiatives are, I guess, the flagship initiatives. All the while we continue to publish facts sheets, reports, engage in training exercises across all of the legislative regimes for which we are responsible.

Reverend the Hon. FRED NILE: You refer to your office mostly as the Information Commissioner. Is it simpler for your office to be called the Commissioner of Information without the reference to "privacy" because that gets confused with the Privacy Commissioner?

Ms TYDD: There are various models for addressing this issue. The United Kingdom is noted to lead the world on any measure in terms of its capacity to deliver open government and starting from that precinct. That model is not too dissimilar to the model that we have in New South Wales. There are other features but in 2011 the IPC was established as a single point of contact to provide coordinated advice and assistance in managing that legislative interface. Certainly the legislation is clear in that regard as were the second reading speeches, for example. So it was established with the purpose of an integrated service delivery. Our case investigation and review officers work every day in working between the legislative regimes and bringing them together for a cohesive outcome. We should be able to operationalise that externally to give that same service and understanding to agencies covered by the jurisdiction.

Reverend the Hon. FRED NILE: Are you happy with the existing system?

Ms TYDD: The existing system certainly brings together a single point of contact to enable citizens and agencies covered by the Government Information (Public Access) Act to work between those two legislative regimes so that they are not, if you like, separated which may cause additional issues such as reinforcing particular regimes.

The Hon. GREG DONNELLY: You may take this question on notice. This matter may have been picked up in your opening statement which you may have had to cut short. You spoke about some options for the sharing of information by government departments. You referred to at least one specifically by a title. Do you have other options somewhere and if so, could you provide them to the Committee?

Ms TYDD: That is something that I will take on notice because that would be the subject of some international best practice identification as well, and we would happy to provide that.

(The witness withdrew)

ELIZABETH MARY COOMBS, Privacy Commissioner, Office of the Privacy Commissioner, sworn and examined:

CHAIR: Do you want to make an opening statement?

Dr COOMBS: Yes, I would. I thank you and members of the Committee for extending to me an invitation to appear before you and to answer any questions that you might have. I am going to keep my opening statement as brief as possible because I know that a lot more comes out of the question than necessarily the matters that I may raise. It is an important opportunity in this statement to clarify and respond to some of the issues which have been raised by previous witnesses, but also in the submissions which the Committee has already received. If I may, I would like to also leave the Committee with some suggested recommendations which I think will ultimately lead to an improved understanding and improved service delivery outcomes.

The Privacy Commissioner is responsible for the undertaking of privacy statutory functions, and that includes education, training and the development and communication of guidelines. I know that you have all had the time to review my submission. It is important to note that in that submission I acknowledge that the collection of sensitive information which will consist of both personal information and health information is a very important part of effective service coordination and the delivery of good outcomes. I think that it is important that that purpose be facilitated both in terms of practice as well as in legislation between government and non-government organisations.

I also think it clearly articulates that my primary concern is that all New South Wales citizens have their privacy respected, whatever their location or circumstances happen to be. Good public policy outcomes and a respect for the privacy rights of New South Wales citizens are not necessarily mutually exclusive. You do tend to notice that people see them as such but they are polar opposites. But to the contrary, privacy protection is also a very good public policy outcome. It underlies the nature of the community and society that we want to live in.

As Privacy Commissioner I support wholeheartedly the appropriate and lawful flow of information between stakeholders and service providers. I know that the Committee has received a number of submissions and I note that is not a view alone to me and most of the people share that. One of the things that I also noticed about that is that they are very clear that there are other reasons which may be barriers to service co-ordination than privacy legislation. I noticed when I was reading the transcript on 28 August that you met with Professor Ilan Katz of the Social Policy Research Centre, University of New South Wales. You may recall that in my submission I quoted quite extensively from the report that he and his colleagues produced. The centre's submission, as well as his testimony, makes it very clear that there are no legal impediments to information sharing inside New South Wales. He talked very much about the understanding of the privacy framework. His words were:

Organisations may have an over-determined view of privacy. So they interpret privacy in a way that means that they could never talk to anybody about anything to do with their clients ... any information is only for the organisation.

They believe the law does not allow you to talk to other agencies about your clients. He states quite clearly, "that is a misinterpretation of the law". He and I are as one on that, that is most definitely a misinterpretation of the legislation and, in particular, he is talking about privacy legislation is absolutely not the case. But what I do think we are identifying here is that there is a knowledge gap in the New South Wales sector about how the New South Wales privacy framework actually works in practice, and there is a variety of reasons for that and I will go through that.

In addition to knowledge gap, there is also a gap in terms of how to best use the privacy framework to achieve outcomes such as appropriate sharing of personal information and health information. That theme was actually repeated in a number of submissions to your inquiry, including those received from the Australian Research Alliance for Children and Youth, Nambucca Shire Council, Drug ARM, the Council of Social Services of New South Wales, amongst others. As I mentioned before, this knowledge gap is something that I raised in my own submission. My experience both as a service provider as well as Privacy Commissioner which comes from advising agencies on privacy is that those knowledge gaps only lead to missed opportunities for service outcomes which are good for the people of New South Wales, and most particularly, for certain communities of very high need.

You will recall that during his testimony Professor Katz suggested the development of guidelines by me for the purpose to provide clarity for the sector on their interaction and the responsibilities under the two legislative instruments I oversee—the Privacy and Personal Information Protection Act 1998 and the Health legislation which is known as the Health Records and Information Privacy Act. Educating the sector is key to resolving these issues. In late 2014 I undertook a survey of non-government organisations and that was part of my report to Parliament which was tabled in May of this year about the operation of the New South Wales Privacy Act. In that survey I found that most of the respondents did not know of their privacy obligations, they did not know where to turn to get advice to assist them and the majority had not hear of the Information and Privacy Commission. Quite a number of them passed comment about the very low profile of privacy in their horizon.

I would like to draw your attention to recommendation 6 of my report to Parliament on the operation of the Act. This is where I support the concept of guidelines to be developed. These are to assist government and non-government organisations to meet their obligations and manage implementation of contractual arrangements that they might have with government agencies. This would greatly assist to narrow the knowledge gap. It is something that the team in the commission and I are strongly committed to achieving. It is a function that requires significant resourcing, and that is something we do not have at the moment. As a starting point, I suggest the following recommendations be made by the Committee when reporting on the inquiry, if I could be so bold.

CHAIR: Please, Dr Coombs.

Dr COOMBS: That the Privacy Commissioner develop a framework with guidance for non-government organisations on appropriate information handling and information sharing; that this guidance also includes information on how these organisations can meet their obligations under the privacy framework when contracted to deliver services on behalf of Government; that the Privacy Commission be given additional resourcing to assist in the development, implementation, training and oversight of adherence to those guidelines; and that the Privacy Commissioner act as a point of coordination with other bodies such as the Federal Privacy Commissioner where sometimes there is overlapping of legislation, particularly in the health area. Unlike the Government Information (Public Access) Act, the New South Wales privacy framework allows me, as Privacy Commissioner, to relate directly to non-government organisations that provide health services or that hold health information.

At a minimum, I would suggest to the Committee that its report on the inquiry endorse the recommendations of my 2015 report to the Parliament, particularly recommendations 6 and 36, calling for privacy guidance and additional resources for the Privacy Commissioner to meet statutory obligations. Those statutory obligations, if I just repeat, include education and providing assistance to agencies and to the broader community through the development of guidelines and other forms of assistance, which might include development of exemptions which, with the approval of the Attorney General and sometimes the Minister for Health, can be made if there is a barrier that resides in respect of the privacy principles. There are separate identities for privacy and access in other models. If you are interested, I can most certainly speak further on that but the ones I drew to your attention as being recognised internationally as the most effective in this space are New Zealand, and Victoria.

I have put together information packages, which I thought might be useful for you. If it pleases you, I have the following documents in support of further expanding my submission and my testimony this afternoon: a facts sheet that outlines my statutory responsibilities under both pieces of legislation; a rundown on a tool that we launched last year, which we call very simply the Privacy Governance Framework, because it attempts to bring together at one point all of the various instruments that service providers need to be aware of when considering privacy. When I started in this role, I found that most people were not aware of what their requirements were and they did not know where to go. It was quite disparate, so we have pulled that together for agencies and organisations that are not public sector agencies per se. I also have a copy of my report to Parliament. If it is an appropriate time I would be very happy now to answer any questions.

CHAIR: Thank you so much, Dr Coombs. It is refreshing to have someone come with suggested solutions. It is really nice. I have had time with you before in another Committee and when we met one on one, so I will not hog your time.

The Hon. Dr PETER PHELPS: I will throw to Dr Coombs the same questions that I asked her predecessor as a witness, that is, what is the existing statutory framework for NGO to NGO transfer of private

information? Does it need legislative change? I take it from your suggestion that you believe you could provide a sufficient form of regulatory regime of guidelines simply by producing guidelines from your office?

Dr COOMBS: I think there is a need for more than just guidance. Guidelines are very important. I also think there is a need to have a higher profile and to be more present. In relation to the point that you raised, I would like to point out that many portfolios actually have interagency case coordination mechanisms, and a lot of them actually share information. They can do that lawfully now through the privacy codes of practice, of which there is something like 11.

The Hon. Dr PETER PHELPS: Are you talking government agencies or NGO to NGO transfer?

Dr COOMBS: If they are contracted by a New South Wales public sector agency.

The Hon. Dr PETER PHELPS: The contractual relationships make the disclosure allowable?

Dr COOMBS: Yes.

The Hon. Dr PETER PHELPS: That is presumably done on ad hoc basis rather than a comprehensive basis?

Dr COOMBS: That would be an issue of the effectiveness of service coordination mechanisms out in the field rather than—

The Hon. Dr PETER PHELPS: That is the problem we face. That is why this Committee exists. It is coordination between the agencies.

Dr COOMBS: Yes. They do not have the means or the structure. We not only have the privacy codes of practice under the Privacy and Personal Information Protection Act and the codes of practice under the Health Records and Information Privacy Act, we also have what we call public interest directions, which allow for the short-term modification of the principles, say for an evaluation of an initiative, such as Youth on Track, and those sorts of initiatives, to see what is the most effective way of getting good service delivery outcomes. From my time in service delivery, a lot of it depends upon the capacity and structures that you have in place at the local level.

Increasingly, a lot more is happening between agencies and a lot more is focused on the need to be able to usefully examine personal information in a way which is helpful, but it is very important that they all understand that you do not want unintended consequences. If people feel that you are sharing information about them without their knowledge or their consent, they tend to do two things: they either will not give you accurate information, they will give you incomplete information—and that means that your services are going to be less effective, you will be less likely to pick up things that you need to pick up—or they will not use your services.

I am not saying that because of anecdotal things. I am pointing to robust national quantitative research done by my colleague Timothy Pilgrim, the Federal Privacy Commissioner, who found that when people find they cannot trust organisations with their personal information and more so with their health information they choose not to deal with that organisation. That is not just an issue of when you go to Myer or David Jones; it is an issue for government services. Over a period of seven years, the percentage of those who have chosen to go elsewhere or go without has risen from 23 per cent to 42 per cent, and for those in the private sector it has gone from something like 40 per cent to more than 60 per cent. I think it is really important to examine some of the myths that exist that privacy does not matter and that we know best. Yes, sometimes that is the case. The Acts, not just the Privacy Act but other legislation such as child protection legislation, does allow certain information to be shared because it is appropriate to do so.

Reverend the Hon. FRED NILE: Thank you for coming in. In your report you made well over 30 recommendations.

Dr COOMBS: It is 36 across four themes.

Reverend the Hon. FRED NILE: What do you anticipate will happen with your recommendations? What is the procedure that you expect to be followed?

Dr COOMBS: Reverend, the Government has advised Parliament that it is considering my recommendations and that it will be preparing a response to those. We are always having discussions with the Department of Justice, and I try to engage with committees such as this one to ensure that it is not just another report that is placed on a shelf, that it is actually something that adds value to Parliament and to Government in its consideration of policy initiatives.

Reverend the Hon. FRED NILE: I anticipate that they are all important recommendations. It would perhaps help you and us if you sent us a copy of those recommendations and perhaps indicate priority for those recommendations, how to assist you in our recommendations.

Dr COOMBS: Certainly. Thank you, Reverend, for that opportunity. I would be very happy to do so. Some of the recommendations that particularly come to mind are recommendations 6 and 36. I will go to my consolidated list and cover those. That is that the Privacy Commissioner assist agencies to provide guidance and assistance to non-government organisations in meeting their obligations and to manage the implementation of contracts which govern the provision of such services because, as we all know, more services are being provided by those community organisations.

Reverend the Hon. FRED NILE: It is increasing, yes.

Dr COOMBS: For example, the National Disability Insurance Scheme is seeing that aspect applied to it, and recommendation 36 addresses the need for a specific budget for the Privacy Commissioner to manage the priorities that are emerging in the privacy space with a very prompt turnaround.

CHAIR: In recommendation 36 you have requested additional resourcing. Could you, for the benefit of *Hansard*, say how many people work with you in your office at the moment?

Dr COOMBS: That is a rather complex question. The former New South Wales privacy agency had 12 staff. When the organisation became a part of this commission, there were originally eight, including the Privacy Commissioner. The inaugural Information Commissioner and I decided when we were meeting budget savings to move to a pooled model of staffing. Underneath the current organisational chart, I have no direct responsibility for oversighting staff in a direct manner.

The issues which are around this is that it is important to provide a coordinated service delivery output to people when they are dealing with information under both access and privacy regimes, but the Parliament was very clear on the need for the retention of two separate identities and also of unbiased representatives for privacy and for access to information. New South Wales has a very proud history in privacy protection. In 1975 it was the second international jurisdiction that introduced privacy legislation. Then in 1998 the current legislative instruments were introduced.

The Hon. GREG DONNELLY: Thank you for coming along this afternoon and providing us with an opportunity to ask you some questions. On page 3 of your submission, halfway down the page, there is a heading "Relevant recent activities".

Dr COOMBS: Yes.

The Hon. GREG DONNELLY: At 3.1, directly beneath it, there are four dot points. You and staff from your office have been or are currently involved in those whole-of-government issues. Specifically with respect to the first and second dot points, do you think things are progressing and getting underway in regards to those two particular committee works, first of all the Data Analytics Centre [DAC] steering committee and the Enabling Information Sharing Working Group? Do you think there is activity underway which is moving things ahead?

Dr COOMBS: I do think that. There is a very strong leadership in that space and a real desire to progress matters. The desire for this mechanism came out of the identification by agencies, particularly health and education, to be able to share de-identified personal information, and the steering committee has been working on this activity. I do not have a sense that it is going to peter out. I think that there is a very strong commitment to work it through. With respect to the second one, that group is also continuing. That is led—as is the DAC steering committee—by the Department of Finance, Services and Innovation. I am very happy to come back to you on some of the particular initiatives, if it would be useful, because I have been speaking in generalities.

The Hon. GREG DONNELLY: That would be good, particularly in the area of health. For reasons you are well aware of, that is one area where some broad based work needs to be done to get people's minds focused.

Dr COOMBS: Health has been looking at broadening the use of an organisation which is called CHeReL [Centre for Health Record Linkage]. It provides a very rigorous methodology for stripping out personal information but allowing data to be linked so that you can do good analysis and feed that into policy and strategic and planning analyses. They have always wanted to broaden that to make it more accessible by the rest of the sector so that we can get better outcomes.

The Hon. PENNY SHARPE: With respect to the Cross Border Commissioner, you raised cross-border issues in your submission. Anyone who lives in Queanbeyan would appreciate that there are a bunch of issues. Are you aware of or have you done any work with the Cross Border Commissioner in relation to these data-sharing issues in the human services space?

Dr COOMBS: I am aware of that. I am not as across the issue as I once was. I might draw a little bit upon my previous life. There has always been through the Department of Premier and Cabinet regional coordination. I was responsible for organising a meeting of all of the heads of the big cluster organisations with the Victorian counterparts so that they could meet and go through issues to try and sort through the unnecessary barriers. In Albury-Wodonga a person across the river in Victoria may be a closer service provider than someone in New South Wales. Those initiatives are still continuing. I am not across the detail. The officers of Department of Premier and Cabinet would be the best people to speak to about that. The fact that organisations have now been consolidated into larger clusters is assisting a lot. So when officers from Housing, FACS and Community Services speak to their counterparts in Victoria there is more ability to answer—

The Hon. PENNY SHARPE: Specifically I was talking about overcoming the privacy issues that you have outlined. Is that possible? Is it best for that to be pursued through the interagency workings or is there a role for the Cross Border Commissioner?

Dr COOMBS: At the moment, because of the nature of the privacy legislation here in New South Wales, with respect to PAPIPA [Privacy and Personal Information Protection Act] there is no protection for personal information which is moved out of New South Wales across the borders. There are protections underneath the health legislation. It is not, by any means, prohibitive. Basically it says that information should not be moved unless it is being moved to a jurisdiction that has equivalent privacy protections in place. That is sensible. I would not want to go into anything that sets a higher standard than that but I do think it is very important.

CHAIR: Dr Coombs, thank you, as usual, for your time and your thought and your clarity. I appreciate it. If you have taken any questions on notice please return the answers within 21 days.

Dr COOMBS: I would certainly be very happy to do that. I would like to mention to you that I am thinking of putting out a media statement that will say that I have appeared before the inquiry today and about the nature of my broad statements today. I am not aware of the process for this so I thought I would draw it to your attention and seek guidance.

CHAIR: The information from the secretariat is that it is fine but that you should be aware that it will not be covered by parliamentary privilege. I do not think that will be an issue.

The Hon. PENNY SHARPE: I do not think you will be making any adverse comments.

Dr COOMBS: I will be repeating the statement that privacy legislation is not a barrier to effective service coordination.

The Hon. Dr PETER PHELPS: That would be a very good press release. We would wholeheartedly endorse that.

CHAIR: We would really like that, Dr Coombs. Dr Phelps may re-tweet your press release.

Reverend the Hon. FRED NILE: You might send a copy to the Chair.

CHAIR: Yes, that would be wonderful.

(The witness withdrew)

PAUL HARKIN, Regional Director, Southern New South Wales and the Australian Capital Territory, The Benevolent Society, and

NERIDA DALTON, Manager Government Relations, The Benevolent Society, affirmed and examined:

CHAIR: Welcome. Thank you very much for coming. Mr Harkin and Ms Dalton, we appreciate your coming to give evidence to this upper House committee. Would you like to make a short statement? If you do, please keep it to a few minutes so that we have time to ask you questions.

Mr HARKIN: Thank you for inviting us and giving us an opportunity to speak with you today. I will not summarise the submission. I have no doubt that you have all had an opportunity to look at it. I am regional director for one of the regions of The Benevolent Society. We have seven regions in the organisation. I am a community development worker by trade. That is my background and my training. I have worked a lot in rural development organisations in Ireland, as you might have guessed, and with urban redevelopment initiatives in the UK. Here with The Benevolent Society I have spent a large part of my time in the Campbelltown area. When you came out to Claymore yesterday I happened to be at that meeting.

CHAIR: I was just thinking, "I know you; you were behind me."

Mr HARKIN: Yes. I have had a long involvement in that region with interagency coordination, community development and community regeneration work. Our submission has touched on a number of different areas, from Communities for Children—which I can talk about in great detail and which I have a lot of passion for—through to our EYCs and some other initiatives that we may need to take questions on notice about.

The Hon. Dr PETER PHELPS: What is an EYC?

Mr HARKIN: It is an Early Years Centre. It is an integrated model for delivering services to children and families. Obviously, we submitted a whole-of-organisation response. We will do our best to answer any questions.

Ms DALTON: I think Paul has covered the main things. I will just reiterate that The Benevolent Society is one of Australia's oldest charities. It has been going for over 200 years. In New South Wales particularly we have about 34 offices and about 127 programs. Paul is here to give some light and shade to the submission that we have provided but we do have a breadth of experience in this area. We have tried to capture those as best we can. We have focused on some of the positives and we have pulled out some of the best practice models, as Paul has mentioned with the Communities for Children example. We may need to take some questions on notice if they go into other areas.

CHAIR: Of course. Thank you for backing up again, Mr Harkin. That is really impressive. Thank you for your submission. Dr Phelps has already caught my eye because he has a question, so I will let him start.

The Hon. Dr PETER PHELPS: What does Government do which makes your life more difficult?

The Hon. PENNY SHARPE: Good question.

Mr HARKIN: There is a question: What does Government do that makes my life or our lives more difficult? There is the old chestnut of silos. There is a lot of government, a lot of different departments and a lot of different agencies each with its own contracting model and its own set of reports that we need to submit and data we need to collect. We touched on this a little bit yesterday. Those government agencies seek different kinds of data. They ask similar questions, which may be slightly different. So, there are number of different departments with a number of different expectations—slightly similar but quite different at the same time. Managing and engaging with that, and trying to get some sort of coordination and alignment with all of that is pretty time-consuming, and can be resource intensive for an organisation such as ours.

Reverend the Hon. FRED NILE: The tender process has often been criticised. Can that be improved? How difficult is it for you?

Mr HARKIN: The time scales with respect to tender processes can be difficult. There can be quick turnarounds in those. It can be inefficient because some of the questions and hoops that need to be gone through are gone through for each tender process. It may be that the capacity of an organisation or the general skills of an organisation in management or finance and so on get tested through each individual tender process. That can be an inefficient use of time, both for those reading the tenders and for those preparing them.

It reduces competition. It is probably not the best way to find the right organisation to deliver a service because it can encourage, by its very nature, a level of competition between organisations, and there may be some element of organisations not wanting to show their hand. That can happen. There is also a problem with the short time scales. I know that when we have tried genuinely to submit partnership applications or when we have engaged in a partnership tender the time scales provided to complete the tender make that very difficult.

Reverend the Hon. FRED NILE: There are problems, often, with the length of time that the tender covers.

Mr HARKIN: Yes.

Reverend the Hon. FRED NILE: Some of the groups say that one year or two years is too short. What do you recommend, or should it vary?

Mr HARKIN: I think it depends on the activity that you are running. It depends on what you want to achieve with a particular pot of money. Sometimes one or two years may be appropriate. In general, for the kinds of services that we are increasingly delivering, five years would be much more appropriate than the current three years.

The Hon. PENNY SHARPE: Thank you for your submission. Were you here this morning?

Mr HARKIN: No.

The Hon. PENNY SHARPE: That is all right. I do not expect you to sit here all day. Senior people across government were, this morning, giving evidence. They were very frank about some of the issues in relation to collaboration and coordination within their own departments and across the departments. Do you think it would be useful—in terms of your own service specifications in the programs that you participate in and also within agencies and perhaps further up the line in terms of management—if there were defined requirements for collaboration and participation at a local level? Are you aware of any that exist in any of your contracts? I am looking for some reflections about embedding collaboration at a local level through the funding mechanism.

Mr HARKIN: I would doubt—we can check this—that there is any clear expectation, when there are funding contracts within our service specifications about what coordination and collaboration should look like unless that is specifically where the funding is being targeted. If it is about something else—family support work or mental health work and so on—the clarity about what coordination and collaboration should look like could be beefed up.

The Hon. PENNY SHARPE: Is that important? Would being very explicit about that give you permission to spend the time within those kinds of projects doing that work? Is there a tension around the immediate and the necessary versus the ongoing collaboration in the way that your workers are able to spend their time on the project or is it more flexible than that?

Mr HARKIN: As an organisation we would commit to that anyway. That is a strong belief we have, in that we cannot do the whole thing ourselves. We understand that the clients we are often working with are highly vulnerable and have very complex issues in their lives so we obviously need lots of people involved in that. So part of our job is to build collaboration and coordination locally. What it would do is probably allow us to hold others accountable to that—to know that is actually required of them as well. I think it also needs to be required of our government partners. But that can be hit and miss, as it can also be in the non-government sector. I think the biggest challenge though for people will be resourcing it. By probably naming it more in a contract or a tender agreement it would then be about how are we going to resource that. As we have said in our submission, this is not something you can do as an extra; it needs to be a core part of what you want to achieve.

The Hon. Dr PETER PHELPS: But arguably if you had a requirement for coordination that took something like 5 per cent of the tender value you may well get far greater than that in terms of economies that you have actually saved because you are not cutting across purposes that other non-government organisations may well be engaging in or alternatively you might get economies from fixing the problem in consultation with your own work because you will be undercutting the problem you were seeking to fix in the first place.

Mr HARKIN: I think you are right. I do not know that you would see it in a three- to five-year contract.

The Hon. Dr PETER PHELPS: No.

Mr HARKIN: But by creating coordination, not on its own. I think a whole lot of other things sit underneath this. But in the longer term if we create structures that facilitate coordination of services then you have to spend less on it ultimately.

The Hon. PENNY SHARPE: I think I know the answer to this question because I asked it yesterday but I am going to ask it again. You are obviously at the front line out at Claymore. You are all funded with different buckets of money. With complex clients are you finding the government agencies responsive and flexible enough to allow you to change your specifications or to slightly alter the way in which you might deliver a service as a result of that client need, or do you feel it is too inflexible?

Mr HARKIN: I actually feel that there is a level of flexibility there. I mean, I cannot speak for all government contractors. The large part of the government contract we would have in Claymore, for example, are Families NSW and FACS. Families NSW in particular is very flexible. That funding does allow us to go back and renegotiate. We would have to present evidence, as you should do, and explain why, but we have found a level of flexibility there. So there is room for negotiation on individual contracts.

Reverend the Hon. FRED NILE: In the recommendations contained in your submission you refer to the need to have strategies and practices effective in engaging with "hard-to-reach families". Who are the hard-to-reach families?

Mr HARKIN: We have found that hard-to-reach families tend to be families who have a multitude of barriers and issues that they are facing in their lives. Very often—I am generalising here—there could be a mental illness in the parents and/or children.

The Hon. Dr PETER PHELPS: Substance abuse.

Mr HARKIN: Substance abuse, domestic violence, risk of homelessness. It will always be more than one of those key issues that we are dealing with day in, day out. There will be a number of them. Some of those families will trust in agencies. They will have a history of engaging with agencies and getting support from them. Some of them will not. The last speaker alluded to the sharing of information and the belief that "my information might get shared". That will affect people's willingness to engage. For example, we work with a number of people with mental illness who have major fears about what is going to happen to their information and what we are going to do with that stuff, and who will not want to engage. Families with young children will worry that we are going to report them and that they are going to get their children taken away. So there is a whole set of people who just do not trust us. "Who are you? What do you want to do?" We would spend a lot of time just building up trust.

The Hon. Dr PETER PHELPS: But that contradicts evidence the Committee has received, namely, in a majority of cases people are happy to have an exchange of information on the basis that they do not have to repeat their life circumstances over and again to different agencies.

Mr HARKIN: Yes.

The Hon. Dr PETER PHELPS: So you are talking about a narrow cohort of your people?

Mr HARKIN: Yes. I would not necessarily believe that people don't. I would agree with the previous testimony in terms of privacy. It is not necessarily a major barrier to people accessing but how we handle that and how we handle it with our clients becomes really important. As you heard yesterday, workers need to tell

the person "I am going to share this". Even though they are not required to and even though they have signed, it is just that trust piece. It is just about saying "Here is what we are going to do."

The Hon. SHAYNE MALLARD: I think you would add to that a distrust of authority. One of the first questions asked yesterday of The Hive group by this suspicious Committee was "Who funded you?"

Mr HARKIN: Yes.

The Hon. SHAYNE MALLARD: They can then work backwards, and maybe they are thinking about where that information may end up.

Mr HARKIN: Yes.

The Hon. SHAYNE MALLARD: Can you give the Committee some examples of how you have successfully identified and provided services to that narrow cohort of hard-to-reach families?

Mr HARKIN: We do a whole host of things. One of the very effective things we have done in our Communities for Children program is one called Street Treats. UnitingCare Burnside runs this service; we fund them to do it.

The Hon. SHAYNE MALLARD: Sweet Treats?

Mr HARKIN: Street Treats. A couple of childcare professionals will go out and set up a playgroup on a grass verge at the end of a street. They literally stay there for weeks and they may not get anyone. I have seen them there for six weeks. All that will happen is that curtains will twitch and people will wonder what the hell is going on out there. Ultimately somebody will come out and ask what is going on. There is your one chance to engage with one person and if you make that right connection or engagement that will spread to their neighbour and someone will ultimately come out. They will then start to tell people. I have seen these groups build up to four, five or six participants but these are highly complex, vulnerable families who have a multitude of things going on. A number of them may never have spoken to a service before that or in recent times. That is a fairly intensive approach. The other things we do are street barbeques. It is really important to get out and be seen, to be walking around and getting your face known for them to begin to go "Actually these guys are okay."

The Hon. SHAYNE MALLARD: That is how we do politics. I have run many a barbeque.

Mr HARKIN: Yes. You said yesterday you know how important the doorknock is. That is what we do too: we knock on doors. It is all about the trust piece. You need to find people who are trusted in the community and build relationships with them. That tends to be how you get your referrals.

The Hon. Dr PETER PHELPS: My question is related to your relationship with other non-government organisations and your willingness and capacity to exchange information. Do you feel that you need additional guidance perhaps from the Privacy Commissioner about what is appropriate or do you believe that your own internal structures are good enough to make an evaluation of that?

Mr HARKIN: I believe our own internal structures are good enough to make an evaluation of that. As you heard yesterday, I think some smaller non-government organisations would be unsure about it.

The Hon. Dr PETER PHELPS: That is the problem. It is not the benevolent societies, it is the atomised ones.

Mr HARKIN: We have got the resources to get our heads around that.

The Hon. GREG DONNELLY: In your submission you refer to the development of minimum standards for service delivery. Would you be able to elucidate on that?

Mr HARKIN: Sure.

The Hon. GREG DONNELLY: It might come as a bit of a surprise to some around this table that there are not any minimum standards. Can you provide the Committee with an explanation about that?

Mr HARKIN: This is an interesting one. One of the challenges beneath surface coordination is that we often talk about a lack of understanding of the roles. This can really create barriers in how people connect and coordinate with one another. I think there is also an element of trust. Workers on the ground will develop relationships of trust with people in the communities in which we work. We work out who is there, what they do and get an understanding of how good they are at it. A lot of workers spend quite a bit of time developing a relationship with a client who, as I have said, is potentially highly vulnerable and who has put some trust in them. They will want to know that if we are referring them on or if we are bringing somebody else into that process then it will be a positive and beneficial thing.

We could not and should not remove that from the way we work but I think to be clear we also should have other systems and structures that make it clear that a service is good quality. That you do not have to build a relationship with somebody and see their work to know that it is good quality. That we have a clear way of way of identifying what good quality work looks like in the sector in which we work and measure that. We are increasingly becoming more focused on the delivery of evidence-informed services. We are not just picking stuff out of the sky and delivering it; we are actually taking stuff that has been assessed either here or elsewhere as knowingly having an impact. For me, we need to build on that and have a means by which we can be clear on the quality of service.

The Hon. Dr PETER PHELPS: But what is the means? Is it a departmental list? Is it an industry list? Who is providing this quality accreditation you are seeking?

Mr HARKIN: That is a very valid question. I suppose there are bodies out there that provide this in specific sectors. So we would get accredited for our aged care work, for example.

The Hon. Dr PETER PHELPS: Would the Government do this or not?

Mr HARKIN: I think it would have to be—

The Hon. Dr PETER PHELPS: You do not have to answer every question. You can take the question on notice.

Mr HARKIN: I might do.

The Hon. Dr PETER PHELPS: It is fine to say that we need a certain standard of service but there is a multiplicity of ways in which one can do that. It can be done through some sort of industry oversight. It can be done through official departmental investigation and the creation literally of a list of approved service providers. There are also independent standards outside an industry for which accreditation can be sought. But if you are going to ask for industry standards then the question of who sets them and who benefits from them has to be addressed.

Mr HARKIN: I will take that on notice.

CHAIR: Yesterday we were talking about collective impact. My initial reaction is that I wish everyone would talk to each other and it was a bit simpler, but we are here to look at solutions. I observed at The Hive that they choose certain things and whilst they are not providing the service they are coordinating it. That seems to be a real secret to success—we see it right across New South Wales. Is that some way forward to start breaking down this silo mentality of not using shared coordination effectively? Whatever way we term it, it is the same issue.

Mr HARKIN: I think area-based initiatives—that is, take a defined area and invest in coordination—is absolutely a way forward in terms of communities with high social needs and getting coordination data there. We run a program called Communities for Children at Rosemeadow and Ambarvale in Campbelltown. It is a federally funded service that invests in a coordinating body—they are called a facilitating partner—that works with the community agencies in that area to identify needs. It brings together the consultation data, hard data and creates a community plan for that area and funds services on the basis of that community plan. We believe that is a really effective model in breaking down some of those silos, in getting a shared understanding of what the needs of the communities are and what strategies they want to focus on. So yes, I would absolutely agree that that is a way of breaking down silos.

The Hon. Dr PETER PHELPS: Can I just clarify that? Are you both the project manager and the service provider under that relationship?

Mr HARKIN: We cannot be a service provider under it; it is divided up in such a way that the facilitating partner—

The Hon. Dr PETER PHELPS: You lose the accusation that you would necessarily favour your own projects.

Mr HARKIN: Yes.

The Hon. Dr PETER PHELPS: And you think that is an important—

Mr HARKIN: Absolutely because it just takes the competition out of the whole thing; we are not a competitor in it then. We facilitate the process; we create a panel of residents and agencies to make decisions as tenders come in and people apply to run certain aspects of it and we adapt the plan as we move forward and can be quite flexible and can be quite flexible quickly to respond to local needs.

The Hon. Dr PETER PHELPS: Are those bottom up recommendations as well, or is it simply an implementation? Have you got the community input to make bottom up recommendations as to what they want done or is it simply community consultation to ensure effectiveness of a top down recommendation, if you like?

Mr HARKIN: I would say it is the former.

The Hon. PENNY SHARPE: Do you have community members on any of those in terms of choosing tenders and all that sort of stuff?

Mr HARKIN: Yes, absolutely. We have got community members on a committee and the committee meets quarterly.

The Hon. Dr PETER PHELPS: So you get community buy-in.

Mr HARKIN: We get community buy-in. We would start with getting an understanding of what is burning for the community and there will be different things that are really popping, but we will also look at what does data tell us about that community because I think we need to also look at what we know about it—what does the ADC's data tell us, what does the census data tell us, what does research in general tell us about the extra space in communities such as this—and then we map that against what the community is telling us is important to them and develop a community plan in partnership with them.

Reverend the Hon. FRED NILE: Just a general question: We see in child care and residential care the for-profit organisations coming in, companies. Is there any tension in the caring areas in which you are involved? Is there any tension there? You are a not-for-profit organisation.

Mr HARKIN: We are a not-for-profit. No I would not say there is—

The Hon. Dr PETER PHELPS: Is anyone in social issues making a profit?

Mr HARKIN: No. I think the world for aged care and the world for disability is changing and that will change dramatically in the coming years, but I do not necessarily think that that is a bad thing. Is there a tension? In the issues we are dealing with here in terms of areas of high social need you tend not to see those private providers in those areas where the intensity of the work would not make it profitable.

The Hon. GREG DONNELLY: On the issue of these areas, which we had a bit of a look at yesterday at Mount Druitt and Claymore, the history of those areas is pretty well known in terms of the establishment of the housing and the people who have moved into those houses some time ago and there are a number of those around the south-western Sydney belt. You may not have heard this answer yesterday but when we were at Claymore someone mentioned Minto as a place where change has happened, that things are going ahead in Minto—I am paraphrasing a comment that was made.

Do you have examples that you can point us to or you are willing to cite where you think you have actually seen progress happening with whole communities that have embraced that holistic bottom up approach to dealing with a range of complex issues within them? Many people have said, and I think we generally agree, that these are intergenerational and that we will look at these over a long haul, but is there evidence that by approaching it holistically from the ground up, buying into the issues that are important and then pushing up from there and having that longer term perspective that that does turn things around?

Mr HARKIN: I would always point to the Communities for Children site in Rosemeadow/Ambarvale; I think great strides have been made in that community. I am biased; it is in my region, but I believe there have been great improvements in terms of what is going on and what is going on for that community. I can get you some further information on Rosemeadow/Ambarvale, if that is useful, and how we see that community has changed.

The Hon. GREG DONNELLY: Does that have a particular focus on children and education and intergenerational improvement in regards to—

Mr HARKIN: It did. The Communities for Children [CfC] project focuses on 0 to 12 year olds and their families. It has come to an end now—not the CfC—but housing was in their community regeneration phase as well so we were lucky to be able to work very closely with the housing manager at that particular time, who was able to focus more on the other issues outside of the 0 to 12 year olds and their families and really get that focus on young people and older people and other sectors that we could not do from our funded perspective approach. So we worked very closely together and sort of co-led any kind of coordination and work that needed to go on and in that developed a very proactive and powerful interagency that had resident involvement called the Rosemeadow Ambarvale Community Interagency.

But I think what I would probably struggle to totally promise you is that the positive benefits in Rosemeadow/Ambarvale are just down to the work that we have done through Communities for Children, because I think that step has also been through a level of regeneration, particularly regeneration that has happened in Minto and is going to happen in Claymore.

The Hon. Dr PETER PHELPS: All of which points to the need for a collaborative effort across a broad front.

Mr HARKIN: Absolutely.

The Hon. Dr PETER PHELPS: Rather than individualised programs in the short term.

Mr HARKIN: Absolutely.

The Hon. GREG DONNELLY: When visiting The Hive yesterday and Claymore in the afternoon—I do not want to get caught up with the language—we were told about the vision for a community for improving the potential for children and their future in terms of education and studying, as they outlined at The Hive in Mount Druitt, starting at preschool and working up from there. I might appear to be naïve but it struck me, on the face of it, that that is a highly attractive and motivating possibility for a community that has been in a tough place in the past. We are talking about children and grandchildren and education leading to jobs and employment outcome. On the face of it, that seems to be a great motivator to start with the family and the children and sort of push, because perhaps in the past there has been dysfunctionality, that there is another way in which this can be done, so to speak. By focusing on the children and their future in terms of education and employment opportunities and getting that inculcated into the community becomes almost like a leaven to raise things up.

Mr HARKIN: Yes and communities get the concept of early intervention. They know that if we tackle this when the child is one or two and put different things in place, we get that they understand it and it is positive. It does not mean we do not do the other stuff.

The Hon. GREG DONNELLY: There is something intuitive about it, is there not?

Mr HARKIN: Yes and we know it is important from an evidence perspective to get in there at that stage and it will produce long-term outcomes.

Reverend the Hon. FRED NILE: In your recommendations you talk about Communities for Children, the CfC program, and you state that it is federally funded but that the State Government should incorporate the key aspects. Is there some tension between this federally funded program and the State programs?

Mr HARKIN: There is an ongoing piece that we need to do to coordinate our work with the Department of Social Services, who funds it, and Family and Community Services. There is a potential for overlap and there may be a potential for tension there or at least greater effort needed from them to coordinate around that.

Reverend the Hon. FRED NILE: Are you getting federally funded money?

Mr HARKIN: Yes, the Communities for Children initiative is federally funded—it is the Department of Social Services [DSS]. Then we would make sure, for example, with the committee that oversees it—we have to have a committee; we facilitate the committee and the committee makes the ultimate decisions—that we have relevant State bodies including Health, Education and Family and Community Services on that committee and on that body.

Reverend the Hon. FRED NILE: Are there any problems there or tensions?

Mr HARKIN: No. It requires work, it requires us to think about it and it requires good communication and good coordination and making sure that everyone is across what we are doing. So it has the potential to be difficult but no, we are lucky in that where we are and in the relationships we have and in the relationships we have in that area that it works relatively smoothly.

Reverend the Hon. FRED NILE: Federal money is fairly guaranteed into the future, is it?

Mr HARKIN: We have just been awarded another five years, so the Department of Social Services [DSS] did move towards the ideal of at least providing a five-year funding contract. By that point Communities for Children will have been running for probably over 10 years. I think the idea is that, as is often with these programs, there is a commitment to a generational change that is required with something like CfC. CfC is a very exciting and innovative model that is saying that it takes a generation to make the changes we want to make. So we cannot assume that it is going to continue longer, but there is that commitment—a long-term investment in the area.

Reverend the Hon. FRED NILE: Are you aware that the State would take over the funding if it is discontinued?

Mr HARKIN: That would be amazing, or even develop some similar sorts of initiatives. In Claymore, for example, I think one of the differences I see between Claymore and Rosemeadow and Ambarvale is that in Rosemeadow and Ambarvale there is funding for coordination facilitation, but, as we say in our submission, that is a piece that needs to be invested in. In Claymore it is still done but it is a messier process in terms of there are a number of different bodies and who is sort of facilitating and shifting that process forward can change from time to time.

The Hon. SHAYNE MALLARD: Are you saying that the CAN [Claymore Action Network] process is messier?

Mr HARKIN: CAN is not. CAN is a resident-led action group; that has been going longer than any of us really. But the coordination of agencies and what agencies were doing, it has to tighten those.

CHAIR: It was interesting yesterday with White Lion, there were no buckets of money yet they found a coordinator and then they coordinated the services and they are giving a program. Do you agree that that was quite powerful?

Mr HARKIN: That is very powerful. It is absolutely very powerful yes. They needed to invest time in making that happen.

The Hon. GREG DONNELLY: I am probably approaching this from the reverse side. From evidence we have received and just general experience, which I have raised already and you have commented on—we saw it yesterday both at Mount Druitt and Claymore—you are in the room and you are seeing people in the

community who are highly driven and wanting to be part of the transformation that has got underway and is progressing in the community for the better. Are there instances where we are still—when I say "we" I mean government and non-government—going into communities with services on offer and not being required to engage the community at that grassroots level or have we moved on from that, that it is now seen as being essentially imperative that if it is going to be successful, even moderately successful, we have got to reach down and involve the local community and make sure we do that?

The question that leads to is: If there are instances where it appears that that is not happening, where government and non-government are going to communities and are just saying, "Here we are, we have got something for you", so to speak, is that something we should be trying to dissuade or discourage because we generally appreciate that that is not the best way to try to engage with the communities and get change underway and progressing?

Mr HARKIN: It is an interesting question. Both government and non-government organisations have come a long way in terms of engaging with communities about ensuring that how we implement services is done in partnership with them and with their buy-in, because we just know they will not access it because it will not meet their needs, it will not be the right thing for them delivered in the right way. But at the same time there were quite a number of funding initiatives that governments produced that were: We were contracting you to deliver this service. So was that designed? Where does that idea come from? How was that need identified? How was the solution to that need identified? How much community involvement that has, I am unsure. So in terms of understanding the needs of communities, in designing services that go into them, I think we have a way to go.

The Hon. GREG DONNELLY: This is about specific criticism but we had witnesses this morning and I lost count of how many times the phrase was used, "It is not a case of one size fits all". I think that is right as a broad principle, but you can almost imagine—I am not suggesting that they were doing this—that it is a cover to say that there is a plethora of things and they are at our disposal and we can use these different things so we need to keep all options available. When do we get to the point where we say, "We will say no to this one" or "No to that one", because clearly there is evidence that it has not worked or is not delivering results or there is evidence interstate or there is some good international peer review analysis being done that suggests that this—

The Hon. Dr PETER PHELPS: Or even the community does not want it. For example, what happens if a government department looks at year 3 NAPLAN scores and says, "We've got a major problem here. We have to have early intervention at this point of time", and the community says, "We don't want to send out kids to school because there are problems of violence there and outside the school yard"? You could have all the goodwill in the world if the community does not have any interaction at the initial states of defining the problems they have and then seeking solutions. Surely that is the optimal way of doing it.

Mr HARKIN: I agree and there needs to be ways and we need to create ways of making decisions about when things should come to an end and why things should come to an end and having a process around that. The secrecy example, that is exactly what they do. It is a three-year rolling plan; at the end of the three years there is an assessment again about where the community is at, what the community needs at a particular point in time and whether we need the services we currently have running. That can be a painful process, to go from 10 or 12 organisations being funded to deliver services and we have to facilitate them through a process which means a good number of them—in the last round, all of them—closed. And you need to start again.

The Hon. Dr PETER PHELPS: Is that not the optimal outcome for all these social organisations we would like to work ourselves out of existence?

Mr HARKIN: Yes, exactly. It is still a process to go through, and I think one of the challenges for us, in doing this in communities is: At what level do we have these conversations and these plans? That is the thing we connect to a little bit in this document is: What is a community? Do you focus on Claymore? Do you focus on Campbelltown? Do you focus on south-west Sydney? Then who do you need to involve in those processes? A major challenge for government bodies is being able to engage in these processes. We might all be focused on Claymore but there are a number of Claymores around Campbelltown. How do you get the right people at the table? How do you know? Where does the planning sit?

The Hon. Dr PETER PHELPS: That is a community self-identified. Communities are what they believe themselves to be. I do not want to go all Benedict Anderson, but a community is a product of your imagination. It is what you see yourself as.

Mr HARKIN: Where do we sit our planning?

The Hon. PENNY SHARPE: The CfC program has been running for about 10 years. Is there any evidence about that, given the intensive work? It looks like it is quite good. I am quite interested in the model. In the evaluation does it show, for example, that more kids are getting immunised, that more are going to preschool? In terms of the aims of the project at that macro community level, have you been able to show improvement?

Mr HARKIN: Yes.

The Hon. PENNY SHARPE: Can you provide that to the Committee?

Mr HARKIN: Yes. There was an evaluation done. It is some years since the original. There was a national evaluation done and then we did our own local evaluation. There have been some improvements running through that. We have also done a small piece of research around resilience and the notion of building community resilience. We are currently engaged with Griffith University and a number of other non-government organisations on the actual piece of being a facilitating partner, and I tested a model of how you do that. They call it the prevention support system, which is another form of collective impact, and we are testing and evaluating that at the moment. That will be around how effective we are, and the effective tools and processes you use to coordinate and engage and deliver services in a community, and the second piece of which we hope to complete will be about what impact that has on children. We can send that through.

CHAIR: Thank you for attending this hearing. We appreciate and understand how busy you are, and it is very valuable to us. I cannot state that enough. The Committee has resolved that answers to questions taken on notice be returned within 21 days and the secretariat will contact you in relation to the questions you have taken on notice.

(The witnesses withdrew)

(Short adjournment)

WENDY FIELD, Head of Policy and Programs, The Smith Family, and

ANNE HAMPSHIRE, Head of Research and Advocacy, The Smith Family, sworn and examined:

CHAIR: You are both welcome to make an opening statement. If you do so, I would encourage you to keep it to a few minutes so we are able to ask you questions.

Ms FIELD: It will be a very brief opening statement, just to say thank you for the opportunity to be a witness. We think it an important issue. The Smith Family is a national children's charity that focuses on education, and the comments that we have made in our submission relate to our experience in implementing and being part of place-based approaches across the 94 communities that we work in. We welcome the focus from successive governments across New South Wales and also in other jurisdictions on better service coordination and integration through initiatives like Families First and Brighter Futures. Even through the planning processes like NSW 2021, there is a clear focus on better service coordination and integration. But it is clear from the data that there is still some way to go around addressing these issues.

Our observation from our experience of implementing in place as a not-for-profit would be that there are a number of issues relating to inter and intra government coordination and coordination around policy but also coordination around implementation and also how that links in with activity already on the ground through not-for-profits, and a lack of common and shared data. We have talked about the loss of the COAG Reform Council as a big loss, we think, in being able to track populations and better outcomes. Short-term policy focuses on short-term funding in many instances and also until recently a lack of ongoing evaluation and adaptation of promising practice or promising service delivery.

CHAIR: Thank you very much, Ms Field. We will all ask questions now. You talk a lot about the negative impacts of competitive tendering. How do you see an approach around being able to have a competitive tender?

Ms FIELD: I do not know that we see particularly negative impacts around competitive tendering. We recognise that there needs to be a process to establish who is the best person or which is the best organisation or what is the best way to implement services for families and children. We have been participants in many tender processes. But I think there can be drivers within the way governments buy services which enable coordination, cooperation and facilitation. I think Communities for Children is a reasonably good example of that.

In that model there is a lead agency. In this instance it is a not-for-profit who is doing the data analysis, community consultation, service mapping, strategic planning and then supporting implementation across the place. Government can buy those sorts of services which enable the establishment of governance across the community and then cooperation around service delivery to the extent that Communities for Children enables that, because there are some parameters relating to jurisdictional responsibilities that even mitigate against the full effectiveness of that initiative.

The Hon. Dr PETER PHELPS: I have two quick questions which I also asked of the Benevolent Society. The first is in relation to project coordination and its role in acting as a broad front to fix a whole range of social issues by having someone who is actually outside the service delivery process but who coordinates the service deliverers on a broad front approach. Is that a model you would endorse or do you believe that service deliverers can also be project coordinators?

Ms FIELD: In our role as facilitating partner for Communities for Children we made a conscious decision before it became the applied policy not to be a service deliverer in communities where we were a coordinator. We think that it sets up some potential conflicts and that in your role as a facilitator the things that you should be assessed on are not service delivery but actually how you are coordinating service delivery—how you are facilitating and brokering solutions for that community. So we would say it would be best if there is an agency who has responsibility for coordination that they are not a service deliverer.

The Hon. Dr PETER PHELPS: Would you say it should be mandatory?

Ms FIELD: I think in some communities it is tricky because they would be on a journey around having a critical mass of service delivery, so if there is not the community based infrastructure in a community then it is tricky for an organisation that does have the capacity to deliver those services not to deliver. So in some remote

areas I am aware that some of the facilitating partners have struggled to find an organisation that has the capacity to be able to deliver those services. In some ways a function of that model and in some ways of the Families First model was to play a service strengthening and coordination role. So you could say that that has not succeeded very well. To be short, you would have to take account of the infrastructure in the community before you made it mandatory.

The Hon. Dr PETER PHELPS: The second thing relates to, if you like, the proliferation and atomisation of service deliverers to the point where we now have, we were told, in Mount Druitt 200 different service deliverers in that one postcode. The previous witnesses talked about the need for, if you like, a level of accreditation or a standard to be set. Do you agree with that and, if so, who should be setting the standard? Is it intra-industry standard? Is it an external evaluator? Is it the government department? Do you believe there is a necessity for, if you like, a standard of service delivery and, if so, who should do it?

Ms FIELD: I think in the end our focus would be on the outcomes that are being achieved and having funding arrangements which focus on both short- and long-term outcomes as opposed to categorising activity. I think what we do a lot of is counting the number of participants in programs as opposed to the difference that is being made to those participants through their participation in those programs, both in the short and the long term. I think it would be very difficult across the spectrum of services to have a standard standard. Probably through the funding process itself there is a quality assurance process that is inbuilt.

The Hon. Dr PETER PHELPS: Are you saying there is or there should be?

Ms FIELD: I think there probably should be more than there is.

The Hon. Dr PETER PHELPS: Okay.

Ms FIELD: But I do not know that it would be an accreditation process because I think that would build in a degree of red tape that would be difficult to manage. It would build a whole bureaucracy around ensuring the standards.

The Hon. GREG DONNELLY: I ask a question on the issue of backbone organisations which is picked up in your submission on page 8. Would you say that programs designed to provide services into communities that need them would struggle to be able to take advantage of those services unless there was in place or at least had got underway the process of putting into place a strong backbone organisation to enable that to be done well? Do you see having a strong backbone organisation as a vital part of trying to deal with serious social pathologies in a community?

Ms FIELD: I think having an organising focus, and that could be delivered through a backbone organisation, is key—so understanding what the issue is: What is the data telling us about this community, what are the issues anecdotally as well that mitigate against people succeeding in these communities and what do we need to do in order to coordinate the range of services around that? You talk about 200 services in Mount Druitt. There are Aboriginal communities where there are many more services than that.

The Hon. Dr PETER PHELPS: Really?

Ms FIELD: Groote Eylandt is a really good example of a massive number of services who are providing activity that is not coordinated in any way. You sometimes think you would be better just giving everyone a million dollars.

The Hon. Dr PETER PHELPS: If you are an ordinary punter, how do you know who to go to if there are 200 services? If you have a problem, how do you find out who is there to fix your problem?

Ms FIELD: If services are well coordinated, if there is a "no wrong door" sort of policy which says no matter which entry point you go to you enter into the service system, then you will get the referral that you need to address the issue that you need and ideally you will not have to be telling your story over and over again. Again, a number of the Communities for Children initiatives have worked hard to try to facilitate that across the services that they deal with. But the families that are struggling also use a range of other services that fall outside the remit of child and family services. People who are homeless quite often have mental health problems or quite often have drug and alcohol problems which are not ostensibly child and family services—they are adult focused services. So getting coordination across that range is key and needs to be done but is hard yakka.

Ms HAMPSHIRE: I think the point is to move away from having just a single, discrete program. We have lots of single, discrete programs which in and of themselves might be quite high quality, but they do not actually get to the purpose of: "What are the outcomes we would want for, for example, children in this community?" And that is the piece where I think the backbone organisation potentially adds most value—to look across those programs, to narrow down what are the collective outcomes we might want from a suite of programs and deliver those in a very coordinated way.

The Hon. GREG DONNELLY: With respect to the work we are trying to do in this State with communities that have the difficulties that we have been discussing, is there sufficient maturity or development of the backbone structures that we have been talking about to enable things to progress or is this whole discussion about backbone organisations still in its early stages of discussion and development?

Ms HAMPSHIRE: I think it would be very fair to say it is at early stages of development. The language has actually come off the back of collective impact, which is a concept which is—

The Hon. GREG DONNELLY: Which is still relatively new.

Ms HAMPSHIRE: Yes. And that, as with many terms, can be defined in different ways. So I think the collective impact work that started the conversation in Australia is out of Stanford innovation review. It is very clear about the sorts of criteria you need to have a collective impact and what a backbone organisation might look like. In particular I think the one that is most important is: Do we have a shared sense of what are the small number of outcomes we are trying to achieve here and a common way of measuring them? So doing away with lots and lots of programs—having far fewer programs—but a more intensive effort around a smaller number of common, agreed outcomes which government and non-government organisations are working on together with very clear accountabilities and often shared accountabilities.

The Hon. GREG DONNELLY: The way in which we have been discussing these issues, we are moving through a fresh iteration at a community level and at a government level, including the non-government organisations, about how to deal with these complex communities. With what is being discussed now, backbone organisations and related matters, is this a fashion that is going to in fact pass? I am putting it crudely. It is obviously a way of thinking. It is a methodology or a way of approaching this. It seems almost obvious that this is the way in which you would deal with complex problems but I gather we have not been dealing with them too well at all. Has that led to this thinking which has now manifested with this research from Stanford or wherever and now everyone has got on board with it almost internationally and this is the modus operandi that around the world governments are trying to utilise to get in there and deal with complex communities?

Ms FIELD: A couple of things: I would say probably a reasonable amount of it has been driven over the past 10 years by both an increased focus on and an increased capacity for data. So the data revolution in a sense has given us much clearer insight into what we are not achieving, and also some clearer insight into what we could be achieving with the right coordination. So I think it is probably an evolution of having a focus on outcomes and having a focus on place. We have talked a little bit in here about the latest Vinson report, but the first Dropping Off the Edge report was a really clear insight into the concentrated disadvantage in communities and a catalyst for a need to do something about that at a community and place-based level. So what are the features and functions of that community and of the individuals who are living in those communities, although those communities are inevitably transient?

Ms HAMPSHIRE: Is it a fashion? I hope not.

The Hon. GREG DONNELLY: That is what I was going to say. Hopefully if we have got to this point we are likely to see a maturation of this take place that will lead to the improvements that we are all hoping for.

Ms HAMPSHIRE: I think "maturation" is the right word to use. I think one of things in the "I hope not" is that short-term funding cycles in portfolio buckets actually do not deliver the sort of outcomes that are required over the realistic timeframes. We have now had a series of Vinson reports. The first one, as Wendy said, was very clear about which communities were disadvantaged. Some of them then got some intensive support for a three-year period but not for five or 10 years and so the second report was identifying the same communities, as is the third.

I think part of the need is to make sure that we have got very clear—beyond the electoral et cetera cycle—and really say very honestly and realistically as a community, there is a series of complex, interconnected issues here that will take time, resources and collective effort with good visibility, acknowledging successes but also acknowledging what does not work. We are still catching up as a nation on doing strong long-term evaluation in the Education space, in particular, in the Community Services space. All of those components are going to be very important if we are going to get the change that is required.

Reverend the Hon. FRED NILE: Those reports showed over those 16 years there was no change in those disadvantaged areas, nine out of the 12. Should the Government have a directed program or campaign at those disadvantaged areas? Has that ever been done? If so, we will focus on those areas rather than leave it to government departments and non-profit groups.

Ms FIELD: There has been some focus in those areas but I think it probably has been reasonably sporadic. As Anne said, the initial round of support and funding was for about three years and then there have been ins and outs over time both by the Commonwealth and State governments. So it is actually a focussed cross-government, cross-sector set of co-ordination. The Vinson report makes a recommendation around having co-ordination units that do that mapping and how they are going to apply the resources. In my view jurisdictions need to, in a sense, give up some of the constitutional demarcation and just focus on the outcomes that you are trying to achieve.

So we hear a lot of Commonwealth funded agencies cannot, for example, get involved directly in child protection issues or in speech therapy issues or in health-related issues because those are State Government responsibilities and there may be some cost shifting inherent in that. But as a service user it does not matter to you who is doing the funding, you just know that you have not got speech therapy for your child and so they are going to be behind when they start school and the flow-on consequences of that for the long term.

Reverend the Hon. FRED NILE: I assume you are critical of the disbanding of the Council of Australian Governments [COAG] council for reform because it had played an important role.

Ms HAMPSHIRE: It played a very important role in making public visibility of how we were tracking as a nation across a number of national partnership agreements. For example, in the Education space, and this was a shared Commonwealth-State responsibility where we as a nation agreed we wanted a certain number of educational outcomes for example, also in other related areas. What the COAG reform council did was report annually around how are we tracking educationally, not just as an aggregate level because the aggregate hides a whole lot of things. So it reported at an aggregate level but also for rural and regional young people, for Aboriginal and Torres Strait Islander young people and for low SES [socioeconomic status] young people. It allowed us as a nation to say, how are we doing year on year at a national level and also at a jurisdictional level for different groups of young people.

Unfortunately that no longer exists and the only probably important marker that we now have is closing the gap, and that is a very important marker to have, how are we are tracking against those outcomes but also we have no way of marking how we are travelling for low SES young people, for example, or how are rural and regional young Australians going as well.

Reverend the Hon. FRED NILE: Should that reform role have been taken over by the regular COAG meetings? COAG still meets but they have dropped that reform mission out of its cast.

Ms FIELD: They have dropped the data analysis and reporting function unfortunately except for the Closing the Gap targets.

Reverend the Hon. FRED NILE: For what reason?

Ms HAMPSHIRE: Initially it was a budget. It came under the first Prime Minister's Abbott's budget cuts and understandably a lot of money was aiming to be found and it was thought it was going to be picked up elsewhere but unfortunately it has not yet. I think unless we have that level of visibility the communities we are talking about tend to remain invisible.

The Hon. PENNY SHARPE: I want to ask for examples you have of wherever you have been operating where you have had input into the initial policy development program planning stage for some of these programs, particularly in the child education space. Are there places where departments have welcomed

you in early and you have done some of that co-design work? How did it come about? Was it really the goodwill of a smart public servant on the ground who thought that was a good idea or has it been your experiences around co-design is really what I am asking?

Ms FIELD: As a service delivery organisation from a State Government perspective we tend to fall between two departments. We see ourselves as a bit of a bridge between service systems. At a State Government level we have not been involved in any co-design, although we would like to be. At the Commonwealth level as an organisation to the Smith Family was very heavily involved in the design and development of the Communities for Children initiative. That was developed from some evidence both in the United States of America and the United Kingdom about emerging impact of place-based approaches.

So it drew heavily on the Sure Start initiative in the United Kingdom but it picked up the initial evaluation which had said the scope of activity was too broad to be able to define outcomes. It was much more focussed on a clear set of outcome areas. The process for establishing that was engagement of a number of large not-for-profits in the development and then ongoing governance arrangements to support a central community committee that kept the policy live.

The Hon. PENNY SHARPE: Has that been a good model?

Ms FIELD: It has been a good model, yes.

The Hon. PENNY SHARPE: What is missing in the State Government's involved in that? There are big dollars coming for that project which has obviously been in place for quite a long time. From all that we have heard it is working well, and sounds pretty promising to me. Where is the State Government at?

Ms FIELD: The State Government is involved around the governance table.

The Hon. PENNY SHARPE: At what level, at each individual local project?

Ms FIELD: The governance model is that there is a Communities for Children committee that ostensibly has responsibility for sign off on the plans for that local area.

The Hon. PENNY SHARPE: Each local area.

Ms FIELD: State Government would be an in putter into decisions that are made about funding in those communities.

The Hon. PENNY SHARPE: What does "in putter" mean? They come to the meeting and they say yes or no, or they provide some data that would show yes or no?

Ms FIELD: They provide some data. They are a key data provider. They are also a key provider of feedback and input into the development of plans. In some areas more than others they would have a yes or no, depending on what the committee structure is.

The Hon. PENNY SHARPE: In your submission you are quite critical of the coordination between the State and local. What is missing? That sounds it is actually not too bad.

Ms FIELD: A big part of it is the jurisdictional responsibility piece and, as I said, the cross-over into adult-focussed services, some of which are run by the State and some of which are run by the Commonwealth. Also, the State Government is not seeing initiatives like Communities for Children as key players in child and family services—

The Hon. PENNY SHARPE: Because it is not its program?

Ms FIELD: In part, but it is also I think because there is a very strong focus for State Government on the key areas of out-of-home care, outcomes for vulnerable families, homelessness services, although that is a crossover with the Commonwealth as well. I think a lot of the lack of co-ordination does come down to a concern around jurisdictional responsibilities. There are two parts that you can possibly go around that you completely delineate to the extent that that is possible or you can just amalgamate funding in a place-based way.

The Hon. PENNY SHARPE: Can you point to some solid examples? Everyone say that but I do not where we see very many examples of where that really has happened. Can you point the Committee into the direction of anywhere where there has been inter jurisdictional pooling of funding around shared outcomes and it is working?

Ms FIELD: I do not know of anywhere in Australia where that has happened.

The Hon. PENNY SHARPE: Are there any international examples? The Committee is desperate for some.

Ms FIELD: It has happened in some of the Sure Start communities in the United Kingdom. I do not think that is a perfect model because they clearly have not been able to point to the long-term outcomes that they have achieved but they certainly distilled responsibility for defining the focus and the sorts of initiatives that they would run down to place-based. Government agencies were required to take the funds that they would normally put into those communities and to pool them.

The Hon. PENNY SHARPE: Is there evidence that that improved the outcomes?

Ms FIELD: There is some early evidence for Sure Start. The focus on evaluation has not been long-term.

The Hon. Dr PETER PHELPS: For how long have those programs been going if you are talking about creating generational change?

Ms FIELD: Sure Start has been in place for probably about 15 years.

The Hon. PENNY SHARPE: It was a Blair Government initiative.

Ms FIELD: Yes. But also when the Government changes the focus of Sure Start changed as well which almost inevitably happens. So the evaluation has not been maintained.

Reverend the Hon. FRED NILE: In your submission you are critical of the lack of cooperation between child and family services and education service systems. Can you provide the Committee with an example and what can be done to bring about co-operation? Earlier witnesses said they are cooperating and are having a lovely time together.

The Hon. PENNY SHARPE: All good, isn't it?

Ms FIELD: We work a little bit across both systems, so our experience would be that people tend to focus on the things that they get measured for. With some of the best intentions in the world around support for families, the issues at home tend not to be well addressed in school. We know from our own experience and from all of the research and data that the home environment has a major impact on educational outcomes for children but there is not a lot of co-ordination between what happens in school and what happens in the home and across the education and Child and Family Services systems. There may be when there is a real crisis but there is not from an early intervention perspective.

Reverend the Hon. FRED NILE: What are your solutions?

Ms FIELD: I think a focus for some shared responsibility around educational outcomes would be a starting point. I am trying hard not to spruik what the Smith Family does is the solution but our focus is on supporting parents to help their children to stay at school, and then building community co-ordination and services around that. Our model takes a whole-of-community approach and brings kids from disadvantaged backgrounds into contact with people from outside the spectrum of their normal network of contacts and role models. You see some of that in schools but it is not very well coordinated.

The Hon. PENNY SHARPE: I want to ask you about how you work with kids in out-of-home care. If they are lucky, they have a steady placement but most of them move around a lot. Can you talk about the work that you do? Do you provide the same sort of support to foster carers or do you follow the services that those kids are attached to, whether they are with the Department of Community Services or others?

Ms FIELD: We do not have a specific focus or funding stream for kids from out-of-home care. Most of the support that we provide as an organisation we fundraise for. Many of the families and students that we support are in foster care situations but it is not a feature of our selection of them. So the kids that we support are in the schools that we work with, partner schools that we work with, and they are families who are on a low income and who have a range of indicators of educational risk.

The Hon. PENNY SHARPE: Can I clarify that that picks up kids in out-of-home care?

Ms FIELD: Absolutely, yes.

Ms HAMPSHIRE: We support 34,000 young people on a long-term educational scholarship, called Learning for Life. Of those, about 3 per cent would either be grandparent, kin care or foster care, which is about 1,000 young people.

Ms FIELD: It is not a funding program—

Ms HAMPSHIRE: It is not the means on which we recruit.

The Hon. PENNY SHARPE: The reason I am asking is the jurisdictional issue. For your organisation, are you saying we pick up through families. They are in out-of-home care so there are other organisations looking after them. I am testing whether they are perhaps not picked up as much as they could be, given that we know the concentration of disadvantage that they face.

Ms HAMPSHIRE: We pick up through schools and schools would suggest "This family might need your support."

The Hon. SHAYNE MALLARD: That touches on a point I was going to ask about. I remember specifically from my childhood and school years at Penrith, it being a public housing area. I have asked this question of others. How do you identify families in need? We have heard about some narrow cohort of families that are very isolated. It might be a dense suburb, but they are isolated from services. How do you identify them?

Ms FIELD: Our approach is to work in a place-based way. We work in a concentrated number of communities and our focus for service delivery is through schools, so we work with usually a cluster of schools in a community and we build a partnership with those schools. The criteria for participation in the scholarship program is that you are on a very low income, so you have a healthcare card, a pension concession card, and at the time that you sign up for the scholarship, that you have a commitment to supporting your child's participation in education. The scholarship is a long-term focused program. So you can sign up for the scholarship in year one of school and you can still be on scholarship at the end of tertiary. Over that time, what we will provide for you and your family is support from a worker. It is kind of like a family support worker.

The Hon. SHAYNE MALLARD: It sounds to me like the families need to be confident to go forward to you to make the approach. They are not isolated?

Ms FIELD: The schools make the referrals, usually, and they are families who are struggling, so we have done—

The Hon. SHAYNE MALLARD: So teachers identify—

Ms HAMPSHIRE: Teacher, principal, counsellor within the school. To get to your point, we were concerned as an organisation that we might be creaming. Are we taking the best of the most disadvantaged young people because, as Wendy has flagged, the criteria is actually quite small. We do not want there to be 101 hoops for a family to get on to the program, but what is the converse? What is the response that we were getting the "best" of the disadvantaged young people? We have now done data analysis and we now have good visibility of the families we support. We have compared those families with their peers in the same schools. They are all disadvantaged communities, they are all disadvantaged schools. Our students are more disadvantaged than their peers and we know that because they are more likely to be Aboriginal and Torres Strait Islander. They are less likely to have a parent who has gone to year 12 and they are far less likely to have a parent in employment than their peers in the same disadvantaged schools. We now know that despite having a

relatively easy hurdle to get over in terms of those three criteria that Wendy has flagged, we are targeting students who, without support, all the research would suggest will have very poor outcomes.

The Hon. GREG DONNELLY: I want to ask a question on data sharing. Our secretariat has helpfully put together clearly written questions. Instead of me rambling, I will read directly. Some submissions have suggested that inadequate data sharing, evaluation and monitoring of community needs has hindered the delivery of coordinated services. First, do you share this concern? Secondly, how could data collection sharing and monitoring be improved and what would be the outcome of improving monitoring? It gives you a wide berth, covering a lot of issues.

Ms FIELD: I will kick off. Maybe a good thing to do would be to provide you with an example. From a Commonwealth perspective, the key agency that has social services responsibility is the Department of Social Services [DSS]. It has just introduced a completely new data system called DSS Data Exchange. It is doing some wonderful things in respect of measuring change through participation in programs and it will have the ability to track the program use of various families and various program participants and also to look at their short-term outcomes, but it has no cross-coordination with any of the data that is being used by State Government.

The Hon. GREG DONNELLY: It is sad, is it not?

Ms FIELD: It is sad. When you are in conversations or discussions with the Commonwealth Government and with DSS about the data exchange, the opportunity to look at what is happening for those families in a place-based way and to coordinate that with the State Government data that is being gathered about service usage, because the State Government is trying to do the same thing and succeeding to some extent, they are the same families. It would be useful to get some coordination across those data sets.

There have been some efforts made in the past, I think, to look at, in particular, very vulnerable families, families who are at risk of being in contact with the out-of-home care system. There have been some efforts made to track those families through the Department of Human Services to look at what benefits they are on, how they are using those benefits and the services they are using through the Department of Human Services, but the privacy regulations or the political will was not there to make that happen, so they are a couple of very practical examples of how things could be improved.

Ms HAMPSHIRE: To add to the evaluation piece, data is only useful if we use it. Part of it is about how is the system working for individual families, but part of it is about trying to assess what interventions, what policies, what programs. I think we do not collectively have sufficient focus on that yet for the long-term piece. To talk briefly about the education space, one of the most salutary things for us as a nation in the school funding reform process was that of the \$4.4 billion conservatively spent per year by the Commonwealth or the States on supporting improved educational outcomes for disadvantaged young people, whether that be low socioeconomic status or Aboriginal young people or rural and regional communities.

The school funding review was not able to conclude what impact that \$4.4 billion had had because there was very little evaluation done and what evaluation was done, very little of it focused on student outcomes. We now have a bigger capability as a nation. We could not actually do the match data piece or collect this big data even five years ago. We now have a capability to think about how we use that for individual families, but to try to think about what works over the long term.

The Hon. Dr PETER PHELPS: Is that not how collective impact came into existence? They spread the net as widely as possible and cut down to five key components on what worked. It was only by that broad scale data collection and understanding of what worked and what did not that they were able to create a program that created a formula which said, generally speaking, these five criteria are shown to be effective in achieving change.

Ms HAMPSHIRE: Knowing what does not work is as important as what does work.

Ms FIELD: Absolutely.

The Hon. Dr PETER PHELPS: Absolutely.

Ms HAMPSHIRE: Having the culture as a nation, as tricky as it can be, to say if we tried something that did not work, let us acknowledge that it did not work. Let us not lambaste the department or the NGO that tried it if there was a rational decision that was well researched, et cetera, but then also let us build the evidence.

The Hon. Dr PETER PHELPS: No-one wants that on their curriculum vitae. That is the problem.

Reverend the Hon. FRED NILE: Is that why you have recommended in your submission a centre for community strengthening and program evaluation?

Ms FIELD: Yes.

Reverend the Hon. FRED NILE: Would that be attached to a university, would it?

Ms FIELD: The Vinson report suggests that they are attached to the various bureaucracies, but their focus is on coordination. There is a Commonwealth body incorporating State bodies, so reflecting State bodies.

Reverend the Hon. FRED NILE: Do you think the State should establish one if the Commonwealth does not do anything about it?

Ms FIELD: I think the real benefit would be getting the cooperation across Commonwealth and State.

Reverend the Hon. FRED NILE: In every State?

Ms FIELD: Yes.

Ms HAMPSHIRE: Or a networked arrangement where you had a central Commonwealth, but certainly with relationships with the States.

Ms FIELD: We should not underplay the efforts that have been made by the New South Wales Government to try to get some better integration across service delivery. We have seen a considerable effort to make that happen. It takes work. It takes a lot of hard work to make it happen. You still see big examples of where decisions are made by a planning department that is not linked to human services that have massive human service implications, in a sense. Those things happen, but you will get the real gold when you get coordination across the Commonwealth and the States because they are very often dealing with the same families.

Reverend the Hon. FRED NILE: You would be happy if we recommended that recommendation in our report?

Ms FIELD: We would, yes, absolutely.

The Hon. GREG DONNELLY: That was very helpful.

CHAIR: Thank you for your time. We appreciate it. We realise how busy you are providing the services you do. It gives us great insight. Thank you.

Ms HAMPSHIRE: The only thing we might come back to you on is the other example about what might be working internationally, which perhaps is the communities that care.

The Hon. PENNY SHARPE: That would be really great.

CHAIR: The secretariat will be in touch with you and if you could provide an answer within 21 days that would be great.

(The witnesses withdrew)

(The Committee adjourned at 4.42 p.m.)