



Fams submission in response to Department of Social Services consultation paper:

Implementing the successor plan to the National Framework for Protecting Australia's Children 2009-2020

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About Fams

Children are kept safe by quality services which help children and families when and where they need it. Fams makes this possible by advocating for better public policy, advising how to achieve sustainable outcomes and acting to help vulnerable children, young people, families and communities.

At Fams we advocate, advise and act.

Established in New South Wales in 1981, Fams has always been driven by strong values and our aim:

- Safe Children
- Strong Families
- Supportive Communities

We contribute to population outcomes through:

- Building skills and knowledge in outcomes-based frameworks to enable organisations to collect and use data to inform practice and collaborate to provide better results for clients, practitioners and organisations; and
- Systematic policy and advocacy to inform and enable the government to implement solutions that support vulnerable children, families and communities.

Fams' work is guided by our Principles in Practice:

1. Children and families should be safe.
2. Children and families receive services that are flexible and responsive to their needs.
3. Children and families can access services embedded in their community.
4. Children's and family's growth and development is enhanced by research supported practice.
5. Children's and family's social, cultural, racial and linguistic identifies are affirmed and strengthened.
6. Children and families work together with services in relationships based on trust and respect.

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Tenterfield Social Development Committee
The Canopy

Introduction

Fams welcomes the opportunity to respond to the consultation paper on implementing the successor plan to the *National Framework for Protecting Australia's Children 2009-2020*. Fams specialises in child and family sector work and has comprehensive knowledge and expertise in early intervention and prevention programs.

Since 2009, the National Framework has largely been the vehicle to inform how the Federal Government perceives system transformation for child safety and wellbeing in Australia. Transitioning to an Implementation Plan as the successor challenges Government and the sector to focus on true prevention and early intervention strategies.

In August 2019, Fams launched *Bridge the Gap*¹, setting out our pathway for change for effective early intervention components to meet the needs to children and families in New South Wales. The paper identified:

Significant gaps remain if early intervention workers are to achieve desired outcomes and the sector as a whole is to have a preventative impact on, for example, family contact with the child protection system.

It is recognised that the existing sector is diverse, and organisations currently sit along a continuum. Enabling a vibrant, sustainable and responsive service system, with ongoing capability to flex to meet emerging needs, requires focus on multiple elements. The answer is not simply regulation or directives to use prescribed evidence based programs. Past initiatives focusing on one element (historically either organisations or workers) whilst ignoring the structural needs has been a barrier to success. This focus on 'individual' or discrete deficits, or program reform rather than sector reform has skewed the conversation and produced fragmented activities.

What is required to achieve the desired sector transformation can be articulated as responding to the following gaps:

- **System:** the resourcing gap, which is the gap between the transitioning to a commissioning model and aligning to the NSW Human Services Outcomes Framework and access to the necessary investment and data modelling to respond to vulnerable children, families and communities
- **Organisation:** the benchmarking gap, which is the gap between what is known is required to for good governance and the process for assessing minimum standards across organisations
- **Practice:** the implementation gap, which is the gap between effective practices and the high quality implementation and sustained adoption of these practices at scale (i.e. effective practices are implemented as

¹ <https://fams.asn.au/wp-content/uploads/2020/11/Bridge-the-Gap-.pdf>

intended and workers are supported to improve their practice by the system)

- **Worker:** which is the gap between what is known about effective practices, including not just effective programs but practices that reflect the breadth of early intervention work (e.g. delivery of playgroups and community engagement), and worker's ability to access and use these practices

The guiding principles and strategic priorities set out in the consultation paper are consistent with Fams' Sector Transformation Strategy², underpinned by:

1. System capacity: roadmap to keep kids safe³;
2. Roadmap to organisational excellence⁴; and
3. Roadmap to practice excellence⁵.

System capacity

The consultation paper's *Strategic Priority: A national approach to early intervention and targeted support for children and families experiencing vulnerability or disadvantage* aligns with what Fams has identified as the strategic direction necessary to drive change.

What does the service system look like now?

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

Services in Fams' Network rely predominantly on funding through NSW Department of Communities and Justice (DCJ) plus complementary funding from other federal and state Government sources (including for disability, ageing, homelessness, health, education or justice programs), plus funding from local government grants or philanthropic opportunities.

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

The current child and family service system creates unnecessary barriers that frustrates practitioners and limits the potential for families to acquire a service quickly and efficiently. According to ARACY⁶ our current system is "fragmented and poorly coordinated, structured

² <https://fams.asn.au/wp-content/uploads/2021/07/Fams-Sector-Transformation-Strategy-2021-Keeping-kids-safe-at-home.pdf>

³ <https://fams.asn.au/wp-content/uploads/2020/12/Fams-Roadmap-to-keep-kids-safe-20201211.pdf>

⁴ <https://fams.asn.au/wp-content/uploads/2021/07/Fams-Roadmap-to-Organisational-Excellence.pdf>

⁵ <https://fams.asn.au/wp-content/uploads/2021/07/Fams-Roadmap-to-Practice-Excellence.pdf>

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

around organisational needs and priorities, focused on individuals and individual problems, responding to crises and solving established problems rather than preventing the problems from occurring and has limited knowledge on what is working”.

What do we want the system to look like?

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

Structural prevention

The Implementation Plan must be underpinned by legislation, policy and investment that builds assets and increases social inclusion and equality. Fams knows that we will not truly be able to protect Australia’s children until:

- government provides adequate resources based on need to ensure all children have their basic needs of shelter, food, clothing and education met;
- government implements action to eliminate poverty;
- a human rights approach is adopted; and
- transparent and accountable whole of government approaches are working effectively with service providers and community.

Systems prevention

The Implementation Plan must address institutionalisation and systems failures that contribute to the risk of vulnerable children and families:

- children’s experiences must be prioritised, valued, measured, and responded to and embedded in all government policy;
- services should be integrated with a coordinated and holistic approach to meet a shared vision for children;
- services must be available, accessible, appropriate and affordable; and
- there must be a shared commitment to collecting, analysing and sharing the right data to ensure continuous improvement.

Investment

Strategic investment in face-to-face and digital service models that are sustainable and evidence informed must be the hallmark of a new Implementation Plan. We will only see demonstrable commitment to investment when:

- government allocates funding and investment in services to keep children thriving in their family environments;
- organisations have robust and transparent standards for governance and operations;
- workers are (adequately) paid and have core skillsets and minimum competencies; and
- services are based on practice principles that are:
 - evidence informed and data driven;
 - trauma and resistance informed;
 - culturally and identity safe;
 - place based;
 - in support of, and encourage preservation and restoration.

Universal access

Fams contends that universal access builds supportive and strong communities with access to place based, culturally safe and nurturing services. It requires:

- the provision of information, advice, education and support before problems occur;
- a proactive not reactive service system;
- a commitment to a primary prevention model of service delivery;
- building individual, family and community resilience embedded in all programs; and
- a community development approach to building child friendly communities.

Early intervention

Fams asserts that early intervention reflects coordinated entry points across whole of government to ensure necessary supports are in place for vulnerable children and families.

A strong early intervention system requires:

- a no wrong door approach;
- early responses to identified need and vulnerability to avoid escalation;
- services using an equity lens and being purposeful and targeted;
- integrated, holistic, trauma informed approaches to meet local need; and
- a strong sector able to engage in robust evaluation and measurement of outcomes.

Stable and included

If all children are to reach their full potential and thrive in safe and supportive communities, they and their families must have access to services when required. Fams strongly submits that the Implementation Plan must recognise and provide for:

- necessary, accessible and inclusive supports to be in place for children and their families when and how required;
- children to live in households that are stable;
- children to meet their milestones;
- children are safe and healthy; and
- children who cannot stay safely at home are offered a safe and quality alternative.

What the sector says about system capacity

The definition for early intervention is contentious and different across government, sectors and organisations. We understand the importance of early intervention programs having a clear focus on preventing vulnerable children from escalating to being at risk of significant harm. But, we are very concerned that early intervention funding is being eroded throughout Australia. Genuine early intervention approaches must be maintained, valued and adequately resourced.

“There is a strong and growing evidence base that supports the effectiveness of many prevention and early intervention programs and approaches”⁷. The evidence is clear that early intervention works and a system focussed on preventing problems rather than waiting until crises occur would deliver better population level outcomes for children. Importantly, the business case for early intervention is undeniable – government investment in early

⁷ Australian Research Alliance for Children and Youth (ARACY). *Better Systems, better chances 2015*, pg 1 & 6

intervention also delivers cost savings by reducing the need for long term intensive service responses and statutory out of home care end of the continuum. We strongly support a service system that is more proactive and less reactive.

Nobody disputes that children and families at risk must not miss out on a service. The challenge is ensuring that all vulnerable children and families are able to access the response they need for as long as they need it. We strongly support a service system in which service delivery organisations can be flexible in the referrals they accept so they can meet the broad needs of local communities.

There is no doubt that there is a significant and deliberate shift for services in the child and family sector to be working with families closer to the risk of significant harm threshold than the traditional early intervention and prevention end of the continuum. Further, service providers are being required to operate in a rigid funding environment that fixes service delivery locations and timeframes, rather than investing in service models that strive to connect with children, young people and families who are hard to reach, have had poor previous experiences, or are just unaware of what support is available in their local area.

We are extremely concerned by a genuine risk that the Government's continued focus on responding to high risk to the exclusion of lower risk children will result in a long term failure to reduce the number of statutory reports to State/Territory agencies. There is an urgent need for further investment by the Government in early intervention and prevention services.

Organisational capacity

The consultation paper's *Strategic Priority: Improved information sharing, data development and analysis* aligns with what Fams has identified as the strategic direction necessary to drive organisational excellence.

The *Roadmap to Organisational Excellence*⁸ sets out the interrelated importance of:

Governance

Governance controls for financial, workforce, systems and risk management and compliance with legislative and contractual obligations.

Client experience

Client centred approaches are outcomes focused and based on access, equity, cultural proficiency and participation.

Service

Outcomes based, participatory planning creates effective, responsive, innovative and collaborative services.

⁸ Ibid 4

Quality assurance

Effective data collection, management and reporting systems supports evaluation and culture of continuous improvement.

Further, Fams' *Standards of Organisational Excellence* are based on the NSW Government's NGO Capability Building Tool developed by the Social Innovation Council and sets standards of excellence for governance and service delivery.

The Social Innovation Council was a strategic partnership between the NSW Government and the Forum of Non-Government Agencies (FONGA) whose aim was to accelerate innovation in the way human services are designed, delivered and measured, and to improve human services outcomes by:

- promoting the use of technology and collaborative work practices;
- improving the quality and accessibility of human services data for government and non-government organisations;
- driving strategic engagement of the community sector; and
- making it easier for non-government organisations and government to do business together.

Fams recognises that while improving information sharing data development and analysis is important, the Implementation Plan must go further and consider all connected aspects of:

- service delivery
 - client experience
 - client engagement
 - reporting
 - collaborative work
 - innovation; and
 - equity and cultural proficient; as well as
- governance
 - leadership and business planning
 - governance and management
 - continuous improvement; and
 - data management.

What the sector says about organisational capacity

Vulnerable children and families are often the most difficult to engage and generally do not access services. Consequently, extra time, commitment and innovation are required to engage these children and families. The risk that services do not engage the children and families who require a service the most is too great to be ignored.

A possible unintended consequence "(in) the current competitive environment, (is that) pressure to demonstrate productivity and short term results to funding bodies may cause under-resourced services to focus the delivery of their services on those who are easiest to engage and for whom change will be most evident."⁹

⁹ Grace, Rebekah. *Hard To Reach Or Not Reaching Far Enough? Supporting Vulnerable Families Through A Coordinated Care Approach*. Children and Families Research Centre, Macquarie University, 2015. A Review Of The Literature To Support The Healthy Homes And Neighbourhoods Project, pg 13 & 18

It is critical that government and the sector work in genuine partnership that takes a proactive approach to building relationships to create the community safety net to protect all children and families.

There is no excuse for language or culture to ever be a barrier to accessing the right support in the right place at the right time.

Domestic violence, mental illness, drug and alcohol misuse and risk of homelessness compound the complex challenges families are facing and limits their capacity to access services. When children, young people and families do not have the capacity to seek support themselves, or are unaware of how to navigate the service system, they can remain invisible until they require a crisis intervention. Vulnerable children and young people can be (and are being) exploited rather than being supported to connect to local services who can offer greater means of protection and escape. For example, young women being trafficked or engaged in prostitution to avoid homelessness.

Services have the skills to engage these children and families effectively, link them to other services and support them by using evidence based approaches to achieve their goals. Given local services are well placed to engage and work with families with complex needs we believe that building the professional specialist capacity of early intervention workers would be a holistic and cost effective way of ensuring families are receiving an appropriate service that meets their needs.

“There is a strong compelling case for the creation and systematisation of a comprehensive and holistic child and family service platform. A platform that encompasses outcomes driven parenting, learning and health programs and practices, accessed through the gateways such as early education”.¹⁰

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

Current practice of government agencies having different data collection requirements, performance measures and referrals processes is a major hindrance to the effective delivery of services. It limits flexibility in transitioning children and families between the current programmatic structures and leads to unnecessary paperwork. We are very concerned that artificial boundaries are created by program guidelines and geographic borders which stifle integrated service delivery. We support localisation but believe that this must be tempered with flexibility to operate in a truly integrated way.

¹⁰ Ibid 7

We are also very concerned that the work of data collection threatens to overtake the actual work of supporting children and families. There is real scope to improve data collection systems, analysis and reporting so that it is timely, useful and proportionate to the services being delivered.

Without doubt, the Implementation Plan should be seeking to achieve more flexibility to respond to children and families in need. Overwhelmingly, we want to be able to work with vulnerable children and families for as long as they need to achieve their goals. This could range from very short support of a few weeks to long term intervention and support for many months and/or years.

Currently, program contracts are too prescriptive and hinder service delivery by restricting the capacity of services to take on children and families when appropriate. We acknowledge that some organisations are operating in a flexible way to ensure that vulnerable children and families receive a service even where they may not be strictly eligible. Others consider there are prescriptive rules and are far more rigid in their approach.

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

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

Regardless of what service or program is being delivered workers need to be using evidence based practice including strengths based, trauma informed and child centred. Further, genuinely seeking and hearing the voice of children and young people to inform strategy and decision making is critical. At every level from the Implementation Plan through to front-line service delivery must be clear how children play a role in decisions being made about them. As well as confirming their views on how they want to be communicated with and involved in strategies and conclusions about their circumstances and follow on actions.

Most services funded to deliver early intervention services are highly professional and have the capacity to provide services and interventions for children and families across the continuum including prevention, early intervention, and working with children substantiated at risk of significant harm and their families.

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

We strongly consider that it is critical for services to have a suite of strategies and approaches available to respond in a flexible and appropriate way to engage clients when

they are ready, and most importantly, to keep them engaged and supported to achieve their goals. We cannot risk losing contact with vulnerable children and families only to have them present again to the system when issues and risk have escalated.

Practice capacity

The consultation paper's *Strategic Priority: Strengthening child and family sector workforce capacity* aligns with what Fams has identified as the strategic direction necessary to drive practice excellence.

An early intervention and prevention sector that is enabled to deliver high quality services and use effective practices requires an evidence-informed practice approach. *The Roadmap to Practice Excellence* is based on five pillars:

- principles of practice
- evidenced informed models of service delivery
- rights based approach
- outcomes measurement
- evaluation framework

What the sector says about practice capacity

Ongoing professional development for practitioners working with vulnerable children and families is crucial. Services need to have adequate funding to ensure staff have opportunities to access current research, time to engage in reflection, action learning and participate in ongoing professional supervision provided by an experienced worker. Given the complexity of work delivered by organisations, the workforce needs to have universal access to employee assistance programs so their mental health and wellbeing is supported. We must value and support the workforce who support children and families.

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

Again, partnerships are key to bridging the gaps that cause vulnerable children and families to fall through the cracks. For example, a successful model in New Zealand provides better pathways from first responders to early intervention services. It is not the role of first responders to take responsibility for all issues or contributing factors (they cannot be all things to all people), but they can play a proactive role of connection and referral.

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

For the most part, NGOs do not have the funds or resources to regularly use scientific methodologies when evaluating services delivered. However, every organisation has the capacity to embed evaluation through an outcomes framework and regularly monitor performance if they are resourced to do it. Services delivered to vulnerable children and families should be focussed on measurable outcomes for clients, include feedback, and

focus on evidence based approaches that support ongoing improvement. When data is collected regularly an evidence base can be built, trends and patterns identified and an opportunity created to reflect on results and improve practice.

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

Conclusion

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

We believe that the priority at the heart of all work in the child and family sector should be the safety, health and wellbeing of children and young people. This underpins all of our work including our response to this consultation.