**Supporting Improvements to the Families and Children Activity**

Families and Children Sector Consultation

November 2020 – March 2021

 Overview

The Australian Government will invest over $290 million each year under the Families and Children (FaC) Activity to support families and children to achieve improved child, youth, adult and family wellbeing.

It is important that this investment is targeted to those families that may be experiencing disadvantage and vulnerability, and encourages collaboration between services to achieve demonstrable outcomes.

The FaC Activity is managed by the Department of Social Services (the department) to support family functioning and child wellbeing. The work undertaken through the FaC Activity contributes to outcomes in the *National Framework for Protecting Australia's Children 2009-2020* and its successor plan to be released later in 2021*,* the *National Plan to**Reduce Violence against Women and their Children 2010–2022* andthe *National Agreement on Closing the Gap*.

In November 2020, the department published an online discussion paper, *Supporting Improvements to the Families and Children Activity*, which can be found at [DSS Engage](https://engage.dss.gov.au/supporting-improvements-to-the-families-and-children-activity/supporting-improvements-to-the-families-and-children-activity-discussion-paper/). TheDiscussion Paper questions are listed at [**Attachment A**](#_Attachment_A).

The consultation activity commenced alongside the announcement on 25 November 2020 of the extension of funding agreements for the following services:

* five-year grant arrangements to 30 June 2026 for:
  + Communities for Children Facilitating Partners (CfC FP)
  + Family and Relationship Services (FaRS)
  + Family Mental Health Support Services (FMHSS); and
  + five national-level Children and Parenting Support (CaPS) services.
* two-year grant arrangements to 30 June 2023 for:
  + other CaPS; and
  + Budget Based Funding (BBF) services.

The discussion paper put forward ideas and sought feedback on how to improve and measure outcomes for families and children in Australia, including ensuring the substantial investment under the FaC Activity is targeted most appropriately to support those who need it most.

The paper encouraged feedback from service providers funded under the FaC Activity onproposed reforms aimed at achieving these objectives. Feedback was received from other key stakeholders including the broader children and families social services support sector, peak bodies, practitioners and individuals. This process built on engagement in2018 under the department’s ‘Stronger Outcomes for Families’ consultation.

The consultation on service improvements to the FaC Activity has confirmed a shared commitment to continue efforts to improve outcomes for families and children. Theinsights and expertise shared during the consultation process are shaping the implementation of priority service improvements from 1 July 2021.

**This consultation summary captures the ideas of those who participated in the consultation process to help current FaC Activity services to continue to meet the needs of families and children in communities in Australia.**

Further details on the department’s [Families and Children Activity](https://www.dss.gov.au/our-responsibilities/families-and-children/programmes-services/parenting/families-and-children-activity) is available on the DSS website.

## Consultation Process

In November 2020, the department published an online discussion paper: *Supporting Improvements to the Families and Children Activity*.

Interested stakeholders were invited to complete an on-line survey responding to the guided questions within the discussion paper or prepare a written submission. The closing date for submission was 12 February 2021.

The department received 112 responses to the discussion paper, comprised of 62 responses to the online guided questions and 50 written submissions to the broader discussion paper. Responses were received from 109 organisations funded under the FaC Activity and three from other organisations. Individual discussions were held with a number of service providers during this time.

In addition to this online consultation, Family and Relationship Services Australia (FRSA) co‑facilitated anumber of consultation sessions to place sector perspectives at the forefront of the consultation. A total of 11 advisory group sessions, comprising 76 members, were held during February 2021. To further the consultation process, three online forums attracted strong participation:

* 8 December 2020 - *Service Provider Information Session 1*- 301 participants
* 21 January 2021 - *Service Provider Information Session 2* - 192 participants
* 30 March 2021 - *‘What we have heard so far’ - sharing your feedback - Information Session 3* - 252 participants

*What I liked about the forum [was] it was a good balance of crucial information, questions and answers and referral to other information sources.*

**The department would like to thank everyone who provided a submission or attended sessions, for their insight, time and expertise. Your input has contributed significantly to** **the service improvements within the FaC Activity, as well as a continued understanding of the needs of families and children in Australian communities.**

The department has published submissions where the author has given their permission. Direct quotes are used in this paper to showcase the experiences and ideas of consultation participants as well as to give context to key observations. Quotes have only been taken from submissions where the author provided approval for publication.

## Overview of Consultation Themes

## Key Themes

Five key service improvement themes were explored in the discussion paper.

1. **Outcomes and Evidence** – continuing the journey to move from measuring inputs and outputs, to measuring outcomes (what is achieved) through the development of an overarching FaC Activity outcomes framework and program logics for in-scope services; introducing an outcomes reporting requirement through the Data Exchange Partnership Approach; and demonstrating how outcomes reporting supports evidence about what interventions work and why.
2. **Certainty and Accountability** – achieving greater certainty through longer-term grant extensions for in-scope services, while balancing service quality through the introduction of review points as a useful two-way ‘check-in’, and continuous learning and improvement for both service providers and the department.
3. **Targeting and Accessibility** – recognising the important role that in-scope services play in continuing to support the needs of a diverse range of clients, including those with multiple and complex needs who can be at greater risk of experiencing poorer outcomes than other families and children.
4. **Collaboration and Coordination** – emphasising that better coordinated support helps drive improved outcomes for families and children. Proposals included inclusion of Family Mental Health Support Services (FMHSS) with the FaC Activity, and exploring better integration of Children and Parenting Support (CaPS) services and Budget Based Funded (BBF) services into the Communities for Children Facilitating Partner (CfC FP) program, where suitable.
5. **Capability and Innovation** – providing opportunities for targeted capability building for service providers, especially in addressing new service improvement requirements such as outcomes measurement and reporting, while encouraging innovation that contributes to improved outcomes.

## Recent Service Delivery Impacts and Adaptations

The department asked about recent and lasting impacts on service demand and delivery in the wake of the 2019-2020 bushfires, floods and coronavirus (COVID-19). Respondents highlighted the sector’s success in rapidly shifting to online and telephone service delivery and working beyond geographical boundaries, where necessary.

The department heard about underlying challenges associated with the pandemic, including issues of digital accessibility and literacy. Respondents raised the difficulties associated in building client relationships without in‑person contact, as well as managing privacy and monitoring e-safety.

More broadly, the consultation highlighted the importance of ongoing community engagement and community-led recovery as a key element to re-building or restoring communities after the collective trauma that such unexpected and sudden events can bring.

In some cases, the necessity to employ innovative service delivery practices proved beneficial for clients who struggled to access face-to-face services due to travel, time or social distancing restrictions, and allowed some providers to reach more people. Many providers suggested that the experiences of the pandemic, while brought about by necessity, have resulted in some permanent improvements to their services. Some providers plan to continue both face-to-face and online service delivery, where appropriate and beneficial for their clients and staff.

For both providers and the department, the developments of the last year are an indication of the value of continued flexibility needed in grant arrangements.

*Our experience highlighted the impact of the digital divide on the children and families we serve, particularly at a time when many day-to-day activities transitioned online. In recognition of this issue, we put together and distributed activity packs for parents to use to continue connecting with their children at home.*

*The ability to apply flexibility to the guidelines in response to changing situations (e.g. pandemics) …was incredibly beneficial in 2020, [and] will continue to bring benefits to the community. This flexibility will help to ensure that services working directly with the community are able to be responsive while also having the structures and parameters in place to ensure the intentions of the program are still achieved.*

## Consultation Feedback on Key Themes

This summary provides an overview of the views shared through written submissions, discussions in the targeted advisory group sessions, and one-to-one provider discussions with the department.

The department may separately consider ideas that are outside the FaC Activity service improvement consultation process. These could be pursued through further consultation throughout the implementation of new grant arrangements for in-scope services, effective from 1 July 2021. There were other valuable ideas provided which are not referenced in this report as they are broader than the FaC Activity process and service improvements. The department may seek further sector engagement on these ideas in the future.

1. Outcomes and Evidence

FaC Activity Outcomes Framework

The department proposed the development of a FaC Activity-specific outcomes framework for in-scope services to support greater shared understanding and emphasis on measuring outcomes and showing evidence for their effectiveness.

FaC Activity service providers were very engaged in the development of the FaC Activity outcomes framework and are keen that the outcomes accurately reflect the complexity of client experience, and diversity of clients as individuals and as members ofdifferent family types.

In general, the draft outcomes proposed in the framework were considered appropriate, but providers indicated that there were a few more elements that could be included, or expanded upon, around diversity, inclusivity and access of services; elevating the voice of the child, young people and families; cultural identity, connection and knowledge; and increased attention to mental health.

Community outcomes were raised with calls for increased attention to issues of community cohesion and connection; services working collaboratively as a system to support families; and communities being involved in developing solutions for families.

*It is important that families/individuals/clients are able to tell us what outcomes they hope to achieve and to report against those… My experience is that clients often appreciate the opportunity to share what they know and ideas they have. Therefore, client input into program logics is important.*

Some providers shared valuable and detailed examples of their organisation’s own outcomes framework, outcomes reporting and tracking tools.

What Next?

* The department has been working with the Australian Institute of Family Studies (AIFS) to refine the outcomes framework following the wealth of feedback received through these consultations. A revised draft outcomes framework is available in operational guidelines for each in-scope program, and at [**Attachment B**](#_Attachment_B).
* While further work will be done to finalise the framework, it is expected that providers will be able to reflect the outcomes from the draft framework in their Activity Work Plans and Program Logics under the new grant agreements, demonstrating a clear ‘line-of-sight’ between service delivery activities and higher‑level outcomes.

Data Exchange Partnership Approach

The Data Exchange Partnership Approach will be a requirement for all providers from 1 July 2021, except where special arrangements with the department have been approved. Participation in the Partnership Approach will enable providers to measure the outcomes achieved by families and children participating in funded services, and thereby better articulate the value of these programs.

The department’s Data Exchange attracted a number of comments from providers during the consultation process. While many service providers have been using the Data Exchange for some time and have transitioned to the Partnership Approach, the department heard that this transition often required investing in new or upgraded data systems and measurement tools as well as staff training. Other organisations reported that they had developed confidence in inputting the data and getting more out of the Data Exchange reports.

*In addition to the DSS guidelines and data exchange protocols, staff would benefit from further training regarding extracting reports. We would also benefit from training particularly when processes are changed or updated and preferably this would be in an interactive form where staff can ask questions and seek clarification, either online or face to face. This would ensure consistency of reporting by staff and across agencies and ensure that data is of high quality.*

*In addition, more detailed and in depth reports specific to our organization through DEX would also be most beneficial.*

Respondents mentioned entering data into the Data Exchange, including into SCORE, can take significant time and some raised wanting to report more nuanced or contextual data. This contextual data is typically reported through an Activity Work Plan (AWP). There were strong calls for greater two-way information exchange with the department beyond the Data Exchange reports. Providers wanted the department to share how their data is being used to drive policy decisions.

The consultation revealed that asking some of the extended demographics questions, such as income, can create a barrier to developing a trusted client relationship. The department will continue to make these extended demographics fields optional. They will not be included as part of mandatory reporting in the Partnership Approach.

What Next?

* The department will work with providers to deliver support to use the Data Exchange and develop suitable methods for providing whatever additional information providers deem most important.
* The consultation highlighted the need for a transition period before full compliance with reporting requirements could be achieved. The first 12 months, or two reporting periods, will be a transition period. This time will be used to resolve any initial issues, such as altering data collection methods if necessary. The department is developing a package of support that will continue to assist providers who require assistance.
* .

Program Logics

The discussion paper proposed that providers be asked to develop a program logic and theory of change for the program they are delivering.

Service providers have often accumulated experience from delivering a program or activity for many years that is not necessarily articulated through reporting requirements to the department.

In general, respondents viewed the development of a program logic and theory of change as presenting an opportunity to reflect on whether the particular programs or activities are still fit-for-purpose or whether there are improvements that can be made.

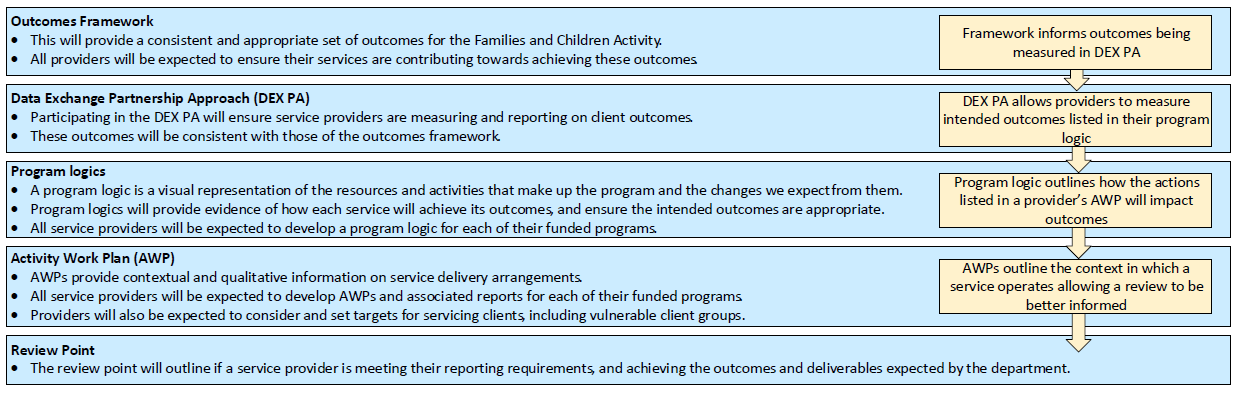
What Next?

* The department is working with AIFS to incorporate service provider feedback in developing a process for the program logic development and assessment, in line with sector best practice. A program logic template will be made available in the second half of 2021. The department will seek targeted consultation with service providers to further explore specific contexts where developing a program logic and theory of change may present unique challenges.

*To best engage busy people, ensure specific time is set apart regularly to provide opportunities to question and have input into growing their understanding of the development and utilisation of program logics.*

Diagram showing the connection between requirements

The following diagram describes the relationship between the new outcomes framework, development of program logics and AWPs that articulate how outcomes will be achieved, and reporting and review of outcomes through the Data Exchange Partnership Approach and a review point, where applicable.



1. Certainty and Accountability

Longer-term agreements were supported for in-scope services.

The department heard feedback that the introduction of a review point for five-year grant agreements should not be considered solely a performance management exercise.

In general, the idea of a review point was seen as a useful opportunity for a two-way ‘check‑in’ to identify whether programs and services are on track, and as an opportunity for continuous learning and improvement, for both service providers and the department.

What Next?

* Considering feedback that has been received, the department has published the assessment criteria for the review point within operational guidelines for each relevant grant program. The department will not be benchmarking providers against one another.
* The review will commence from September 2023. The department will provide additional guidance and support, particularly with Data Exchange requirements and program logics, to undertake a holistic review that draws on qualitative information in Activity Work Plan reports and other sources.

Many providers sought assurance that it would be possible to provide information inaddition to the Data Exchange to give more context around the unique circumstances inwhich services operate. The department is committed to a holistic review that draws on qualitative information in AWP reports and other sources, where relevant, to account for the individual circumstances of service providers and the communities in which they operate.

*Our program is evidence-based but assistance in evaluating the outcomes would be appreciated as this is not captured in Dex reporting for our specific program. We do evaluate our youth programs pre and post session delivery and collate the survey … for our own use and for…other organisations so they can see the increase in knowledge and awareness post session delivery. We would like to be able to capture more qualitative data but need assistance with this.*

3. Targeting and Accessibility

A key observation from the consultation process was the sector’s recognition and progress in making critical shifts from outputs (how much is delivered) to outcomes (what is achieved).

Respondents told the department that the FaC Activity’s continued focus on early intervention and prevention activities is highly valued and a commitment to universal access, or a ‘no-wrong-door’ approach should be retained. Many providers acknowledged the tension between enabling universal access while responding to urgent complex needs.

Providers gave comprehensive information about efforts to target certain groups, but emphasised vulnerability and complex needs are not restricted to particular groups and can occur in any family, at any time, regardless of socio-economic circumstances, location or access to support networks.

Providers welcomed the department’s focus on removing barriers to access for vulnerable and hard-to-reach cohorts, including avoiding language that stigmatises potential service users as ‘disadvantaged’ or ‘vulnerable’.

*Our long term support is aimed at supporting the most vulnerable children and young people, we assess the client’s vulnerability in terms of risk and protective factors and these are considered at allocation. The flexibility of the service allows the program to support high risk clients that may have slipped through the cracks for example children and young people who do not fit the criteria … or those where transport to service providers … is a barrier.*

Providers emphasised the time it takes to build local knowledge and relationships oftrust, both of which are essential pre-conditions for client engagement in services and programs. They continued to stress the importance of cultural appropriateness and cultural safety in service delivery. They highlighted the value of developing stronger referral pathways with mainstream and specialised services in their area, while noting that providers are generally not specifically resourced to connect with other providers or groups.

*… all the ideas and proposals would be enhanced by embedding Aboriginal and Torres Strait Islander perspectives into the policy and initiatives. This would involve consulting specifically with Aboriginal and Torres Strait Islander leaders, experts and community members to ensure that the Families and Children Activity is informed by a strong cultural voice. We feel that in this aspect it is desirable and essential for the department to lead by example…*

Providers asked the department to explain how the FaC Activity outcomes framework would connect with target cohorts in other initiatives such as the successor plan for the *National Framework for Protecting Australia’s Children* and the *National Agreement for Closing the Gap*. The implementation plans underpinning these initiatives are being finalised during 2021. This will allow further targeted consultation with FaC Activity providers to promote the outcomes and targets outlined in these initiatives. The further consultations will explore how FaC Activity services and programs can contribute to their achievement.

What Next?

* The FaC Activity will continue to focus on services that provide early support tohelp improve the wellbeing of children, parents and families in Australian communities.
* The department encourages providers to report on strategies to increase access for children and families experiencing vulnerabilities within their AWPs.
* Children and family services funded by the department will continue to support the objectives in the successor plan to the *National Framework for Protecting Australia's Children 2009-2020, Closing The Gap* targets and other outcomes as defined by the Government, with an emphasis on supporting the achievement of common outcomes through delivery of early intervention and prevention services to families and children.
* The department is committed to strengthening and improving partnerships with the Aboriginal and Torres Strait Islander community controlled sector. Thedepartment is continuing to consult on future opportunities to increase the involvement of Aboriginal and Torres Strait Islander organisations and to improve targeting and accessibility of services for vulnerable Aboriginal and Torres Strait Islander families and children.

1. Collaboration and Coordination

Better integration of CaPS and BBF services into Communities for Children Facilitating Partners

On the proposal to better connect CaPS and BBF services with CfC FPs, providers indicated that more information is needed for comprehensive views to be provided, although generally there was openness to consider this proposal further.

Feedback from the consultations noted further consideration of how to form greater connections between CaPS, BBFs and CfC FPs, noting complexities about geographical location, and the bespoke nature of CaPS and BBF services, especially smaller services.

The two-year extension for CaPS and BBF providers will allow for further consultation and consideration of this proposal.

There were strong calls for greater collaborative practice and for the department to play afacilitation role in developing communities of practice. This would allow providers tonetwork and further share relevant skills and knowledge beyond their own networks. There were calls for the department to play an active role in building the capacity ofthe sector to measure collaboration where services actively engage in partnerships toachieve better outcomes for clients.

The tension in working collaboratively within a competitive funding and service delivery environment was acknowledged in many submissions.

Providers shared knowledge of good collaborative models and networks that already exist. There was interest in learning, sharing and connecting more with collective impact initiatives, including *Stronger Places, Stronger People*. In addition, there was interest inanincreased emphasis on collaborative design and collective impact to deliver long term, positive outcomes for children, families and communities.

*It is imperative that for a positive change to take place for the community, systematic collaboration is undertaken with a user/client centred lens rather than being organisation or service system focused.*

What Next?

* The department will continue to consult with CaPS and BBF providers during 2021, following the commencement of new grant agreements.
* Suggestions were made for the department to establish a centralised service directory or service mapping site of other similar DSS funded-services in providers’ areas of operation to assist collaborative efforts. The department is now looking torespond to this need.

Integration of Family Mental Health Services (FMHSS) into the FaC Activity

The discussion paper proposed further strengthening and collaboration across related families and children services through integrating the Family Mental Health Support Services (FMHSS) program to sit within the FaC Activity.

The FMHSS program offers family-centred, early intervention support in community settings to improve mental health outcomes for children, young people and their families. Thedepartment heard from FMHSS providers that the uniqueness of this service should not becompromised if integrated with the FaC Activity suite of programs, but overwhelmingly supported the integration on this service within the FaC Activity.

What Next?

* The department will formalise arrangements that support integration of the FMHSS program within the FaC Activity.

1. Capability and Innovation

Broadly, providers said that the department’s capacity building support is valued and should continue to be funded and expanded upon with a focus on:

* culturally appropriate capability support
* data access and interpretation, including access to shared Australian Government data sets
* trials of innovative projects and partnerships between organisations, researchers and other bodies
* the CfC FP evidence-based programs so they are fit-for-purpose
* practice leadership and sharing practice knowledge, including showcasing examples of excellence in practice methods and performance reporting
* greater monitoring and evaluation of services and programs; and
* staff capability and service integration considered as part of the FaC Activity outcomes framework.

There were positive reviews of the support provided by the AIFS Families and Children Expert Panel Project, which was seen as a trusted source of information and support for FaC Activity providers in developing or updating program logics, planning evaluations, choosing outcomes to measure, identifying measurement tools, and identifying data needs and data collection methods. Some felt the role of the Expert Panel could be strengthened and expanded.

The AIFS Child Family Community Australia (CFCA) Information Exchange was highly valued by providers as an easy-to-access information and knowledge translation hub for evidence, resources and support for professionals working in the child, family and community welfare sector.

*I've really appreciated the many webinars provided through organisations like AIFS - they always help me reflect on my own practice and try to improve. I would like to see online webinars continue...I think it makes training and connecting with colleagues so much more accessible, especially being on the outskirts of the city...I get a lot more done with online options, being very time poor. Also important to have a wide range of training and innovative ideas being explored in our professional networks - great talking to similar professionals in other countries as well for fresh ideas.*

In relation to innovation, there was discussion about the approval process for FaC Activity service providers using up to 10 per cent of funding on innovation.

Some providers supported the idea of the department introducing a separate innovation fund or innovation ‘hub’ to support the development, implementation and evaluation of innovative responses to priority needs. Others considered that innovation should be considered as part of the cost of undertaking evaluation.

*So often core business costs and evaluation activities are deliberately excluded from or minimised in funding. When organisations cannot identify the elements that make a program or intervention successful, there is no evidence base on which to build or experiment.*

*Supporting service organisations by allocating a percentage or allowance for core costs enables an organisation’s capacity to innovate using the data gained through evaluation.*

What Next?

* The department will consider opportunities to improve capability support in response to feedback provided during this consultation.
* The department will explore ways to streamline the approval process for use of10per cent of funding on innovation.
* The department continues to support providers having freedom and flexibility toexplore innovative service delivery and practices. Provision for funding tobedirected towards innovation should be taken in consideration of potential impacts on much needed front-line service delivery.

Next steps

While this phase of the consultation process has now closed, the department will continue to work with providers through targeted conversations and engagement in 2021. The next phase of the consultation process will focus on implementation of the new requirements ofthe grant agreements and how the department can best support providers through this transition over the next 12 months and beyond. The next phase of the consultation process will also focus in more detail on the ideas proposed around collaboration and coordination.

The department heard that online forums and advisory groups worked well and consideration will be given to opportunities to use these methods of engagement more in the future.

# Attachment A

## Discussion Paper questions

In November 2020, the department published an online discussion paper titled *Service Improvements to the Families and Children Activity*, which can be found at DSS Engage under [Discussion Paper](https://engage.dss.gov.au/consultation-on-the-intercountry-adoption-family-support-service/consultation-on-the-intercountry-adoption-family-support-service-discussion-paper/)*.* The Discussion Paper questions for public submission are listed below.

Recent and emerging impacts on service delivery

Question 1:

How have you adapted service delivery in response to recent crises such as bushfires, drought, floods and Coronavirus pandemic? When has it worked and when hasn’t it worked? How will this affect how you deliver services in the future? Have your service adaptations included better integration with other initiatives?

Outcomes and Evidence

Question 2:

Are the proposed key outcomes for the families and children programs the right ones? Are there any major outcomes missing? How can we include strengths-based outcomes that focus on family or child safety?

Question 3:

What tools or training would support you to effectively measure and report outcomes through the Data Exchange Partnership Approach?

Question 4:

Do you already have a program logic or theory of change outlined for your program? Did you find the process useful? If you do not have one, what has stopped you from developing one? What capacity building support would assist service providers to develop program logics and theories of change?

Certainty and accountability

Question 5:

As longer-term agreements are implemented, how can the department work with you to develop criteria to measure and demonstrate performance? How can the Data Exchange better support this?

Question 6:

How does success look like for your service, and how do you assess the overall success of your service?

Targeting and Accessibility

Question 7:

Do you currently service cohorts experiencing vulnerability, including those at risk of engaging with the child protection system? If not, how does service delivery need to adapt to provide support to these cohorts?

Collaboration and Coordination

Question 8:

If you are a Children and Parenting Support or Budget Based Funded service provider, do you currently link with a Communities for Children Facilitating Partner or other regional planning mechanism to understand what other services are provided in the community and what the community identifies as their needs? How does this work in practice? Would you value the increased support of being attached to a local Facilitating Partner?

Question 9:

For all providers, are there other ways to improve collaboration and coordination across services and systems?

Capability and Innovation

Question 10:

The capability building support offered under Families and Children Activity programs has gone through several iterations. What works well? What do you think should change?

Question 11:

Aside from additional funding, how can the department best work with you to support innovation in your services while maintaining a commitment to existing service delivery?

What else should we know?

Question 12:

Is there anything else you would like to share about the ideas and proposals in the Discussion Paper?

# Attachment B

## Draft outcomes Framework for the Families and Children Activity

