

Northcott's submission on the DSS Discussion Paper on a new program for children and families

Submission from:
Northcott

[Redacted]

[Redacted]

Date submitted: 5 December 2025

Contents

Executive summary and recommendations	2
About Northcott	3
Vision and outcomes	3
Program scope (3 streams)	4
Key priority investment areas	6
Funding arrangements and reporting	8
Questions arising from the Discussion Paper	9
Example case studies	9

Executive summary and recommendations

Northcott supports the Department of Social Services' (DSS) proposed reforms for a single, national program to support children and families. We agree this new simplified model has the potential to enable families to access the early intervention services they need to support their children to grow up to be healthy and productive members of the community. Families should not have to retell their story multiple times or navigate siloed systems.

We also agree a single, national program can lessen the administrative burden for providers, freeing them up to focus on the work of delivering impactful services that meet community needs and achieve positive outcomes for children and families. The proposed tiered model of support is a sound framework that can prevent crisis and separate early supports from statutory child protection.

However, to ensure success of a single national program, more work is needed to refine what this would look like, what services may be funded and what meaningful outcomes can be measured and tracked over time.

This submission outlines Northcott's in principle support for the reform while also highlighting our concerns and outlining some recommendations. Most notably, we believe the program currently lacks a focus on strengthening communities and community capability building – key enablers of thriving families and children. Additionally, the discussion paper fails to explicitly call out disability and neurodiversity as crucial areas where families need easy and flexible access to support.

Recommendations

1. Add a third outcome focused on **capacity building of communities**:
Outcome 3: Communities are strengthened to support organisations, families and children to thrive.
2. Embed **community capacity building** in each stream (national programs and information services, prevention and early intervention, intensive family support) or as a fourth stream of activity.
3. Ensure **navigation support** is funded across all streams or through other means.
4. Ensure funding is awarded to a variety of programs addressing **all developmental stages** (not just early years) across all streams.
5. Clarify how families with children with **disability and/or neurodiversity** will be supported through the program and how the new program will align with Thriving Kids or other programs/funding for children with disability.
6. Add an additional priority investment area for activities/services that invest in and **strengthen community infrastructure and capacity building**.
7. Further **explore, test and pilot relational contracting** with a cohort of providers prior to implementation.



About Northcott

Northcott began as the NSW Society for Crippled Children in 1929 to provide services for children with disability impacted by tuberculosis, polio and other diseases.

For almost 100 years, we have been striving to build an inclusive society where people with disability can live the life they choose. As a registered NDIS provider and long-term NDIS Early Childhood Partner in the Community, Northcott is a leader in disability services, providing supports and services for children and adults with disability across all life stages from early childhood, through the school years to adulthood. Our services support children with disability and their families to develop life skills, build confidence and actively participate in their communities.

Today, Northcott supports more than 25,000 children and their families with community-based early intervention services. We have been a trusted NDIS Early Childhood Partner in the Community since 2018. We are also a registered provider of Specialist Disability Support in Schools (SDSS) in Queensland, and have been a trusted partner with NSW Department of Communities and Justice (DCJ) for over 20 years, delivering Targeted Early Intervention (TEI) services in South West Sydney.

Our work today builds upon many years of experience working with communities to support children and adults with disability. In the decade before the introduction of the NDIS, Northcott was a leading provider of government-funded, evidence-based programs. These included early diagnosis support, autism services, capacity building, and intensive family support for children with disability who were at risk of out-of-home placement or family breakdown. We also worked with schools and preschools to mentor educators and staff to promote inclusion of children with disability in mainstream settings.

Our response to the *Discussion Paper on a new program to support children and families* includes input from representatives from our Early Childhood, Clinical Services, Supported Playgroups, First Nations Program and Strategy teams.

Vision and outcomes

Northcott supports, in principle, the proposed vision and 2 key outcomes. Strengthening families is critical to supporting children to grow up to be healthy, productive adults.

Our concerns

Achieving these outcomes is not realistic with the current funding allocation of approximately \$300M annually. The vision to '*help families get help when they need it most*' is complex and multi-faceted. DSS needs to clearly state what this new program can and can't fund to ensure the program does not over-promise and under deliver.

There also needs to be more clarity on the intent. The three aims outlined on page 1 of the Discussion Paper are each complex within themselves. Achieving all three is a huge task.

While we agree the outcome to support “*children to grow up to be healthy and resilient adults*” is good to aim for, we question how DSS plans to measure “resilience”. There are so many factors that make up resilience. What are the priorities and what are the underlying targets that would be measured to achieve resilience?

We also believe success of a single national program will depend on its design and delivery, and the assessment of services that receive funding. These factors need to be developed in consultation with First Nations voices, experienced providers, parents, clients and communities. Northcott welcomes the opportunity to contribute to the design of the program through further collaboration with the Department.

Our recommendation

We believe there should be an additional outcome which focuses on strengthening communities.

As a disability service provider with more than 95 years of experience working in communities across New South Wales, the Australian Capital Territory and Queensland, Northcott has seen the positive outcomes that come from local services, organisations, schools, playgroups and others working together with the resources and funding to do so.

Our Kempsey Early Childhood/Therapy Program (see page 9) is a great example of the positive outcomes that can be achieved by communities when targeted, tailored programs and capacity building are provided.

Program scope (3 streams)

We support the three streams:

- Program and Information Services
- Prevention and Early Intervention
- Intensive Family Support.

They reflect the existing framework for Early Intervention and Family Support services and provide different levels of support which are needed by families at different stages.

From a First Nations perspective, we see the potential of these streams providing support to prevent families falling through the cracks. Historically, First Nations families have often only received support at the crisis or intervention stage. Prioritising prevention and early intervention in a culturally safe way is critical to breaking the cycle of disadvantage and supporting Closing the Gap outcomes. First Nations voices must

be part of the development of these three streams to ensure an appropriate cultural lens is applied.

Families from culturally and linguistically diverse (CALD) backgrounds also face unique challenges. For these families, caring for a child with disability or developmental delay adds another layer of complexity. Many CALD families may need additional support to understand and access services that best meet the needs of their children. The proposed streams should provide specialist support to CALD families to help to prevent issues and challenges escalating. As above, it is vital representatives from Australia's CALD communities, including families with children with disability and specialist CALD service providers, are part of the development of these streams.

Our concerns

We believe more clarity is needed to understand how these streams will differ from state and other funded programs. We would also like to better understand how this program will support families with children with disability to access targeted, specialised services delivered through the three streams.

Our recommendations

To improve the program scope, we suggest the following refinements, additions and considerations:

- **Community capacity building** – this should be embedded in each stream or considered as a fourth stream of activity. Strong communities are critical in supporting families to get the help they need to thrive. Services that prioritise strengthening community capacity should be part of the program. For example, this could include funding to attract qualified, experienced workers to rural/regional areas that often lack services, or funding to bring training and opportunities to communities where more targeted resources are needed to support local families and children.
- **Navigation support** – Accessing services and supports can be overwhelming for families – particularly those with children with disability or neurodiversity, families from CALD backgrounds and First Nations families. Help to navigate the system isn't just crucial for families requiring intensive support. All families need support to understand what is available for their situation. The program should find ways to fund navigation support – either across the streams or through other means.
- **Support across all life stages** – While we agree early intervention in the early years is crucial, support and services should continue as children grow older. Key transition stages such as preschool to school, primary school to high school, and school to adulthood all benefit from sustained, consistent support. At Northcott, we have seen positive outcomes from participation in group skills-based programs for teenagers with disability and neurodiversity

who attend our Skills 4 Life program. These include improved social skills, confidence and greater independence. Ensuring funding goes to a variety of programs to address all the developmental stages should be considered across the streams. [Read about Xavier's experience with our Skills 4 Life program.](#)

- **Disability and neurodiversity** – How will this new national program support children with disability and neurodiversity? Will programs that target children with disability, developmental delay or neurodiversity fall within these three streams or will these types of programs be funded separately? More clarity is needed around how this new national program aligns with Thriving Kids and what it aims to deliver.

Key priority investment areas

Northcott has broad support for the proposed investment priority areas:

- Early intervention
- Connected, co-located and integrated services
- Services that are informed by and respond to community need
- Services that improve outcomes of First Nations families and children.

We acknowledge that these are key areas where support and services can make a difference to families and children. There is significant evidence to show that programs and services that align with these programs can have positive outcomes. Through our own experiences working with Indigenous and non-Indigenous families with children and young people with disability, developmental delay and neurodiversity, we have seen the positive impact of early supports, school readiness programs, Skills 4 Life and Work & Study programs. We have also seen how targeted, tailored support that meets the needs of certain cohorts and communities is beneficial.

Our concerns

As mentioned above, we do have reservations about the funding amount. We do not believe the current allocation of \$300M annually is enough to achieve the outcomes above, when stretched across these priority areas, each of which is multi-layered. More detail about how these priorities may differ from other funded programs (such as similar funding streams administered by the states) is needed to fully understand what may or may not be funded under each category.

The proposal to fund “*connected, co-located, integrated services*” does not acknowledge the current burden (financial and administrative) on providers and early childhood organisations to deliver services through an integrated model. Under the new program, DSS plans to prioritise funding towards these types of services, however, until this point, the funding environment and market mechanics have not encouraged or enabled this type of service delivery. There are likely service providers who are capable

and willing to provide an integrated model but have not been funded to enable them to do so. Through this reform, DSS is acknowledging the value of integration (which is not funded at state-level), yet integration does not appear to be a funding priority area. We believe integration matters more than co-location. Services that communicate and collaborate (regardless of location) achieve better outcomes for their clients. Families and children benefit when services share information with consent, align goals and offer consistent messaging. Through this reform, there is an opportunity for DSS to fund “integration” as opposed to (or in addition to) “integrated services”.

In relation to funding *services that are informed by and respond to community need*, it is important that DSS looks at more than just SEIFA (Socio-Economic Indexes for Areas) and Census data – particularly when considering disability-related disadvantage in rural and remote areas. DSS should find ways to also consider community need in relation to:

- allied health shortages and lack of services
- long wait lists
- access to diagnostic pathways
- parental disability and neurodivergence
- cultural factors that may impact engagement.

These are all important factors influencing family wellbeing, access to services and engagement with support.

In relation to funding *services for First Nations families and children*, we recommend partitioning funding or developing dedicated and protected First Nations funding streams for ACCOs. It is also important to provide funding for capacity building for ACCOs – as per the SNAICC report.

ACCOs face different challenges when working with First Nations families to achieve outcomes. Many remote First Nations communities face significant barriers including isolation, lack of services and workforce shortages. Funding should address training and development of Aboriginal staff, workforce issues, cultural safety, integration across systems/sectors and navigation support for families.

Our recommendation

We propose an additional priority investment area for activities that invest in and strengthen community infrastructure and capacity building. This is critical for the success of the other 4 priorities. The program should invest in the “village” around children - playgroups, schools, ACCOs and local networks – not just programs and services. This helps to underpin prevention, while strengthening families and communities.

Funding arrangements and reporting

Contract length

Northcott supports minimum 5-year contracts over 2-3 year contracts. This allows for meaningful investment, development and collaboration that delivers effective outcomes. Shorter contracts may be impacted by competition and workforce challenges. Longer contracts can lead to anti-competitive practice and complacency by service providers.

Relational contracting

Northcott broadly supports relational contracting which places a focus on shared goals and outcomes. We are part of a contingent of Partners in the Community exploring how relational contracting may work in the disability sector. More work is needed to better understand the benefits of relational contracting. Before adopting relational contracting, we recommend this model is explored further, tested and piloted. Northcott welcomes being part of a pilot of relational contracting.

Data Exchange reporting

Northcott has some experience with using the Data Exchange reporting system to report outcomes of our funded Targeted Early Intervention (TEI) and Community and Family Support (CAFS) programs. Our frontline teams report finding the system user-friendly for collecting data for reports and tracking referral and information about how customers find out about Northcott programs. Our teams use the SCORE data to provide information on how families and children are tracking.

However, we feel there are limitations with the system in terms of integration with CRM systems (which may be challenging) and alignment with the SCORE measurements.

Our teams would like more visibility on the impact of their work on the greater DCJ service systems. This could be in areas such as child protection cases, domestic and family violence reports and homelessness rates.

When it comes to assessing and reporting the impact of programs and services, meaningful outcomes go beyond numbers and data. Qualitative progress can often reflect the real impact of supports more accurately than quantitative data. Other outcomes that would be useful to measure include qualitative areas such as:

- family wellbeing
- improved parental confidence
- reduced family stress
- consistent routines and school engagement
- increased child participation

- improved ability to navigate systems.

Devising ways to measure these types of outcomes for funded services may be beneficial.

Questions arising from the Discussion Paper

While Northcott supports the overall concept of a new national, single program to support families and children, the Discussion Paper raises several questions we would like to see addressed in further development of the proposed program.

1. How does the new program align with Thriving Kids? How does the Department aim to avoid duplication with Thriving Kids as well as other existing programs and initiatives?
2. How will the new program fit with state-funded programs (particularly in the child protection system) that have similar goals? Clarification is needed on what would be funded through this program versus what would be funded through other initiatives.

Example case studies

Northcott Tharawal Aboriginal Playlinks Supported Playgroup – a successful ACCO collaboration and co-located service

Northcott and Tharawal Aboriginal Corporation have worked in partnership since early 2000 to deliver a supported playgroup – Tharawal Aboriginal Playlinks Playgroup - for children and their families in the Campbelltown community.

This long-term partnership has seen great successes and many firsts.

The playgroup, which is co-located within the Tharawal Aboriginal Medical Service (AMS) - supports children aged from 0 to 5 years. Northcott staff provide families with any extra support they need by linking them with services provided by Tharawal Aboriginal Corporation and Tharawal AMS.

Northcott's close connections with Tharawal AMS mean we have access to professionals from a wide range of services who can support families attending our playgroups. This includes oral health services, women's health, family and domestic violence support, as well as family and community services including Housing, Centrelink etc. Our playgroup is also a great way for participants in Tharawal's Bulla

Bulla parenting program to keep up to date with baby checks and immunisations and participate in activities and programs during and after pregnancy.

Over the 15 years of the playgroup, Northcott has seen many positive outcomes:

- families have grown and united
- parents have built meaningful and supportive relationships with other parents
- participants have accessed other community services in addition to the many services and programs Tharawal provides
- families who have formed relationships connect with each other outside of the playgroup and attend other support programs and activities together, creating their own support networks.

By educating parents through providing the correct information and resources, our playgroup strives to support families be the best they can be. Through our playgroup, we are strengthening the community by helping to build relationships, grow knowledge and support culture.

Northcott Kempsey Early Childhood/Therapy Project – a tailored, culturally-informed, integrated service

Northcott has been working with Dalaigur and Scribbly Gum Pre-Schools in the Kempsey community for approximately 5 years. Our Early Childhood and Therapy teams work in partnership with the preschools to address a gap in early intervention and therapy services for Aboriginal children and their families in the area.

Background

When the NDIS rolled out to Kempsey, Dalaigur and Scribbly-Gum Dalai Pre-Schools Director, Debbie Swanson started supporting local families to apply for funding to support their child's development.

As the area's NDIS early childhood partner, Northcott's NDIS Early Childhood team visited Kempsey to provide additional support. The team identified a high number of children in need of therapy support – and the lack of local services available to families.

Of the 120 children attending both Dalaigur and Scribbly-Gum Dalai Pre-Schools in December 2020, 12 had a NDIS plan. However, Northcott's NDIS Early Childhood team estimated that close to 90% of the children would benefit from some sort of support.

Aware of the challenges experienced by Kempsey's Aboriginal community, the Early Childhood team sought expertise from Northcott's Aboriginal and Torres Strait Islander Programs Advisor and Aboriginal staff from Northcott Ballina to engage in a culturally appropriate way with families. This approach, which included connecting with the



Kempsey community over an extended period, was crucial in building trust for Northcott in the local community.

What we achieved

Once trust was established, Northcott was able to work with families and the pre-schools to develop NDIS plans and apply for funding for 20 more children. Northcott wouldn't normally be able to provide support directly to these children, but after approaching the NDIA and discussing the shortage of services in Kempsey, it was agreed that it was in the best interests of the community for Northcott to provide therapy support in this case. So Northcott designed a way for therapy services to be available to the community through an outreach program involving highly experienced therapists from Northcott's Sydney offices. The project now provides 'fly-in-fly-out' therapeutic and capacity building services, as well as onsite allied health services through a locally based Northcott Allied Health Assistant.

Why this matters

This work is an example of how Northcott can respond to local needs by developing a tailored approach to service provision. It also highlights how important collaboration and integrated services are for families, particularly Aboriginal families in communities where services may be lacking or hard to access. This project also shows the value of relational contracting. Northcott is only able to deliver this project through combining multiple funding streams:

- Early Childhood funding to support early access
- NDIS funding for capacity building in the preschools, assessments and therapeutic supports
- philanthropic funding where no NDIS funding is available (to help cover the cost of the FIFO model of care).

Northcott Yenu Allowah partnership - ACCO collaboration and integrated services

Northcott has an ongoing partnership with Yenu Allowah Aboriginal Child & Family Centre in Mount Druitt to provide early childhood support and NDIS referrals. To be present and visible in the community and to build trust, our Early Childhood team works from the Centre once a month supporting families.

Like all our partnerships with ACCOs, this partnership is grounded in mutual respect, cultural humility and a shared commitment to improving outcomes for Aboriginal and Torres Strait Islander children and their families.

With guidance and support from the Yarrabee Network, Northcott's Aboriginal and Torres Strait Islander Staff Advisory body, we ensure that our engagement with Yenu



Allowah and its clients is culturally safe, respectful and community led. By advising on culturally appropriate approaches, the Yarrabee Network has strengthened our staff's cultural competence through training, reflection and two-way learning.

Northcott's collaboration with Yenu Allowah is not transactional but focused on long-term, trust-based relationships. This includes joint service planning, information sharing, culturally informed referrals and co-delivery of early intervention supports where appropriate. By recognising and respecting the expertise and autonomy of Yenu Allowah, we have been able to better support Aboriginal and Torres Strait Islander families in ways that honour cultural identity, community connection and self-determination.

This culturally responsive approach has led to more accessible and appropriate supports for Aboriginal children with developmental delay or disability, as well as stronger engagement from families who may have otherwise felt unsafe or unsupported in mainstream systems. Through this partnership, Northcott is actively contributing to improved developmental, educational and social outcomes for Aboriginal and Torres Strait Islander children and families.