Are you an individual or making a submission on behalf of an organisation?

Organisation

Organisation name

SDN Children's Services

Is your organisation....?

- A provider currently funded under one or more of the 5 programs in scope for this consultation

What type of service or support do you mostly provide?

- Prevention or early intervention services
- Intensive family supports

What state or territory does your organisation deliver services and supports in?

- New South Wales

Where does your organisation deliver most of their services and supports?

Major city

1. Does the new vision reflect what we all want for children and families?

SDN is in support of the new vision.

2. Are the two main outcomes what we should be working towards for children and families? Why/Why not? - Outcome 1: Parents and caregivers are empowered to raise healthy, resilient children - Outcome 2: Children are supported to grow into healthy, resilient adults.

Outcome 1: SDN endorses empowering parents and caregivers to raise healthy, resilient children. However, if the vision is for skills and confidence then this should be reflected in an outcome. For example: Parents and Caregivers are skilled and confident in raising healthy, resilient children as well and/or Parents and Caregivers are empowered to build their capacity to raise healthy, resilient children.

Outcome 2: SDN recognises the importance of this outcome however as programs

are short term, we are unsure how this can be considered a program outcome. The impact of programs may be limited especially for children aged 0-5 years. For example, an outcome might be Children are safe and supported to thrive as well as children are also supported to meet their developmental milestones.

3. Will a single national program provide more flexibility for your organisation?

Children's services such as health, education and child protection are both state and territory based. Due to this children's services have varying requirements and components. SDN is concerned that a single national program will create additional barriers rather than flexibility.

4. Does the service or activity you deliver fit within one of the three funding streams? Do these streams reflect what children and families in your community need now – and what they might need in the future?

SDN recognises that the current services we deliver would significantly change due to current cohorts no longer being eligible. Children and families in our community may find the service types a barrier to accessibility. Our program is currently meeting a service system gap by delivering programs for culturally and linguistically diverse communities, refugees and asylum seekers as well as supporting a large number of families with primary school aged children. SDN acknowledges that there are very few if any, services that these families can access that don't result in an escalation to the child protection. Should these changes occur, this would be a likely outcome for these families. We are concerned about the gap in support for 5-12 years old particularly during times of transition to school and high school.

5. Are there other changes we could make to the program to help your organisation or community overcome current challenges?

SDN recommends ensuring the program supports the whole family with a focus on children aged 0-12 years old. Only providing services for families in government structured systems such as early childhood health centres and schools is not necessarily a stream that families are accessing as they are often stigmatised. Promoting soft entry universal services including mainstream long day care centres, libraries and supported playgroups are critical places that help support families. However, soft-entry universal services require ongoing funding to support families beyond their core business responsibilities which can often present as a current challenge.

6. Do you agree that the four priorities listed on Page 4 are right areas for investment to improve outcomes for children and families?

Whilst SDN supports priority 2, we acknowledge the need for integrated services to be non-government and universal service locations. To improve outcomes for children and families there needs to be funding for infrastructure as well as staff support to create integrated services that work. It is clear that successful models have demonstrated the requirement for funding to cover integrated practice that extends beyond service delivery. Similarly, SDN supports priority 3 noting that it requires financial investment from the Department.

8. Do the proposed focus areas – like supporting families at risk of child protection involvement and young parents match the needs or priorities of your service?

Supporting families at risk of child protection involvement and young parents has always been the overarching goal for SDN's programs. SDN is concerned about the challenges that varied state and territory child protection systems and rules present and how this would be measured. To a large extent, to track and monitor these varied systems would add a burden to service providers as well as significant administration that could possibly overreach in families lives.

9. Are there other groups in your community, or different approaches, that you think the department should consider to better support family wellbeing?

SDN recommends measuring increased skills and confidence related to child wellbeing would be a good measure. ARACY'S Wellbeing Nest provides outcome markers that would overall aim to reduce the risk of involvement in child protection as well as being more practical, realistic and measurable in practice.

10. What are other effective ways, beyond co-location, that you've seen work well to connect and coordinate services for families?

Case Coordination processes and practices, Interagencies and Communities of Practice all support connection and coordination of services for families. These approaches require intentional funding to ensure services have the capacity to engage meaningfully.

11. What would you highlight in a grant application to demonstrate a service is connected to the community it serves? What should applicants be assessed on?

The number of referrals made for families, demographics from families, case scenarios or stories demonstrating practice experience.

12. Beyond locational disadvantage, what other factors should the department consider to make sure funding reflects the needs of communities?

SDN recommends early intervention is prioritised so that all children are prepared and have accessibility prior to starting school.

SDN proposes community playgroup to be prioritised to allow for community connection through staff facilitation. Through the prioritisation of community playgroups, SDN does note that there is a lack of NDIS access and resources for Refugee families. SDN acknowledges that brokerage for developmental assessments is limited and costly as this is not part of the NDIS, this provides limitations for many families. This includes CALD families that are on visas and are provided with limited interpretation and translated resources. SDN does acknowledge that there has been an increase in the cost of living that is impacting the way that families are accessing services, to help support families SDN suggests that more time is allocated to allow for networking to help put in sustainable support for families. SDN recommends that flexible service delivery is implemented to assist families with changing needs and demands.

SDN recognises the need and preference for flexible services, this includes home visiting case management services and home-based therapy services. Having staff that is appropriately qualified and understanding of developmental and the impact of having a child with disabilities is important to ensuring the successful support of parents and children.

16. What types of data would help your organisation better understand its impact and continuously improve its services?

Feedback on change from families including confidence and skills, achievement of goals identified and biopsychosocial assessment on entry to program as well as mid-term and exit re-assessments.

17. What kinds of data or information would be most valuable for you to share, to show how your service is positively impacting children and families?

SDN proposes that child wellbeing outcomes achieved and supports in place at exit from program would be beneficial data and information.

20. What does a relational contracting approach mean to you in practice? What criteria would you like to see included in a relational contract?

SDN understands that a relational contracting approach would be specifically between the Department of Social Services and the service providers. In practice this would consists of more meetings and more complex reporting to DSS in comparison with the current system.

SDN is experienced in working with Government departments using a relational contracting approach. From our experience, for this to be successful, it requires that Department colleagues have knowledge and experience in the practice of service delivery and operationalising outcomes.

The current reporting system involves service providers reporting data into DEX and reporting back on our AWP, this involves 2-4 contracting meetings each year, a relational approach would require additional meetings and resources from the Department. Relational contracting may present as an opportunity for providers to deliver services more effectively to communities with the greatest need rather than sticking to program requirements that exist from original contracts. SDN would like the opportunity to work with DSS to improve the model we use.

21. What's the best way for the department to decide which organisations should be offered a relational contract?

Consideration of organisation values and standards as well as the level of experience in delivering similar programs. Not only should the level of experience be considered but also the impact of working in communities. Also, organisations that historically have experience in incorporating innovation in practices should be considered for relational contracts. SDN is concerned regarding the longevity of the CAPS program as the program has been extended over short periods of time impacting staff engagement, job security and therefore, risks quality of practice over time.

22. Is your organisation interested in a relational contracting approach? Why/why not?

SDN is interested in a relational contracting approach but would need more information before agreeing to a relational contract. SDN is concerned about the risk of creating more work in terms of developing a relationship especially if CPO's do not have relevant skills and experience.