

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

Organisation

Organisation name

Uniting Vic.Tas

What type of service or support do you mostly provide?

- Prevention or early intervention services
- Intensive family supports

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

Uniting VIC.TAS (Uniting) provides community services to reduce the impact of poverty, trauma, and disadvantage. Under the current Families & Children (FaC) activity, Uniting is the Communities for Children (CfC) Facilitating Partner (FP) in two Victorian regions – East Gippsland and Hume. We are a CfC Community Partner (CP) in Shepparton, Cardinia, and Cranbourne (Victoria), and Brighton and Southern Midlands (Tasmania). We deliver Children & Parenting Support (CaPS) programs in Gippsland and Southern Melbourne.

Uniting supports the new program vision. It aligns with our focus on supporting caregivers to confidently and safely support the children and young people in their lives. Uniting delivers a range of compassionate, evidence-informed children and family services grounded in our Therapeutic Model of Care, which prioritises safety and empowerment to strengthen caregivers' capacity to nurture their children. We also know 'it takes a village to raise a child' – research led by Uniting NSW.ACT has confirmed families rely on extended family, neighbours, peers, and local supports to help their children thrive (Uniting Families Report 2025).

Therefore, to enhance the vision, Uniting recommends retaining the reference to 'communities' from the current FaC activity goal. Maintaining a 'whole-of-community' focus in the vision would support continued investment in place-based, culturally safe, and coordinated responses that promote belonging and resilience for families.

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.

While Uniting is open to new approaches, we recommend enhancing these outcomes by retaining a focus on community and child voice.

Research consistently finds that place-based, community-led approaches strengthen local service systems, community capacity, and collective ownership of child and family outcomes. This is reflected in learnings from our CfC sites in Hume and East Gippsland, where programs grounded in whole-of-community, strengths-based, and culturally safe approaches improved child development, school readiness, and family functioning. The 'Messages from East Gippsland' CfC initiative further demonstrates how belonging and children's voices contribute to more resilient families and communities.

Uniting recommends that DSS draw on ARACY's framework for child and family wellbeing, 'The Nest', to strengthen the new program. 'The Nest' defines wellbeing across six domains – being loved and safe; having material basics; being healthy; learning; participating; and identity and culture. Across all six, strong communities are essential for children's wellbeing and development. Uniting applied 'The Nest' in our CfC strategic planning process in East Gippsland to ensure programs addressed all aspects of local wellbeing.

DSS could use 'The Nest' to enhance the two outcomes or add a third focused on community wellbeing. Both options would strengthen the new program's evidence base, maintain a focus on place-based approaches, and continue to support child-friendly communities.

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

Uniting recognises the intent of a single program is to reduce service fragmentation and administrative burden. We are concerned, however, that the associated commissioning model could inadvertently disadvantage some providers and reduce local responsiveness. Moreover, while we support the reduced burden a single-contract approach can offer, we believe this should be achieved without restricting organisations to a single tender response.

The Emergency Relief grant process in December 2024 (part of the Financial Wellbeing & Capability activity or FWC) showed that a one-size-fits-all approach to commissioning can disadvantage organisations that operate at scale while maintaining place-based, in-person delivery. By limiting providers' ability to describe local needs and tailored responses, the process favoured very large or very small providers. Applicants were limited to one submission per FWC program, making it difficult to show each Uniting Emergency Relief outlet's unique context and the value of extensive local partnerships.

For the new program, Uniting recommends a commissioning model that permits multiple submissions from each provider across the three funding streams. Application forms should also have sufficient word limits to include area-specific

evidence and clearly describe service models. This would prevent multi-region providers from being disadvantaged compared to single-site or larger, remote-delivery providers. It would also ensure local evidence, partnerships, and community-led solutions are valued, and that the new program delivers flexibility and local responsiveness as intended.

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?

Uniting's existing FaC programs align with the prevention and early intervention stream, and aspects of the intensive family support stream. However, we are concerned the proposed streams do not capture the community development and place-based work that underpins CfC and CaPS.

Uniting's experience delivering FaC programs has shown that place-based, community-led approaches strengthen local service systems, build social cohesion, and create the conditions for children and families to thrive. For example, in East Gippsland, Uniting has collaborated with ACCOs to deliver three culturally safe programs for Aboriginal families and children, while in Hume, several CPs deliver initiatives addressing family violence and supporting young and migrant parents. As a CP in other regions, Uniting also provides Aboriginal family supports, school attendance support for primary school students, and bilingual assistance in Shepparton kindergartens (where 200 clients over two and a half years recorded an average Goal SCORE improvement of +1.7). The streams proposed by DSS do not fully reflect the collaborative, place-based work that underpins the success of these programs.

Uniting therefore recommends an additional place-based stream for whole-of-community approaches. Without this, the new program risks narrowing to individual outcomes and losing the collective, preventative impact achieved by CfC. A dedicated stream would maintain investment in connected, child-friendly communities, recognising that they are essential to children's wellbeing across all domains of ARACY's 'Nest' framework. It would also help preserve the voice of children and young people as a core program element. The current CfC model places children's perspectives at the centre, and initiatives such as 'Messages from East Gippsland' show how local consultation generates critical insights. If the emphasis on community and child voice is not retained, the new program risks losing vital place-based information.

Finally, Uniting recommends DSS clarify whether providers will be expected to transition existing FaC service models into the new streams or develop new, innovative models. If new models are required, final program guidelines should be released well in advance of commissioning to allow sufficient time for service redesign.

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

Uniting recommends three program changes. First, greater cultural safety is needed, with program design and reporting that reflects the iterative nature of community-led work. In Uniting's experience as a CfC FP, the evidence-based program requirements and rigid reporting limits flexibility for ACCOs and agencies working with CALD communities. These constraints undermine self-determination and make it harder to deliver programs aligned with community needs. Uniting recommends flexible, streamlined measures that allow culturally-adapted and community-developed programs to count toward evidence requirements.

Second, the relationship between state and federal systems should be clarified. With the new program's focus on families at risk and regions with higher child protection contact, the line between Commonwealth-funded services and state responsibilities is blurred. Several of Uniting's CfC programs, for example, support primary school children whose families are not at risk of child protection involvement. Clearer definition of roles will be essential to prevent families like this from falling between prevention and statutory systems.

Finally, the new program must recognise increasing complexity will continue. Uniting's soft-entry points, such as Bush Link (CaPS), are now seeing families present with challenges once seen in more intensive services. Retaining flexibility to adapt delivery to emerging needs will be critical to ensure early intervention remains effective.

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

Uniting broadly supports the four proposed priorities as the right areas for investment. They align closely with what works on the ground in our child, youth, and family programs across Victoria and Tasmania. 'Improving family wellbeing' should remain the overarching goal, enabled by evidence-informed, flexible services that respond to local needs and strengths. Again, we recommend retaining an explicit focus on place-based 'community wellbeing and voice' within these priorities, recognising that children and families thrive when they are part of safe, inclusive, and connected communities. While Uniting is open to new approaches, it is important that the redesigned program retains the community development principles that have underpinned CfC's effectiveness to date.

The proposed focus on connected services is particularly important. One of the core goals in Uniting's 2030 strategy is to deliver better connected, evidence-informed services that are easy for families to access and navigate. A key part of this ambition is developing Children & Families Hubs that bring together early learning, family services, and other local services providers, particularly in high-growth corridors where service gaps are most acute. By co-locating and integrating multiple services, hubs create a single, accessible entry point for families, reduce fragmentation, and enable seamless pathways between universal, early intervention, and targeted supports.

Uniting's experience as a CfC FP also shows that collaborative partnerships and

coordinated local networks reduce duplication and make services easier to navigate. For example, within our Hume CfC, Berry Street staff deliver family violence training to Council playgroup facilitators, strengthening relationships across services and enabling warm referrals for families who need additional support. However, achieving integration will require sufficient investment by DSS in local leadership and shared planning, not just service co-location.

Uniting strongly supports prioritising outcomes for Aboriginal children and families. Based on our extensive experience partnering with ACCOs, this requires a long-term commitment to collaboration, sustained investment in growing organisational capacity, flexible funding arrangements, and recognition of Aboriginal-led models as evidence in their own right. These have been key lessons in our role as CfC FP in East Gippsland, where three of our five CPs are ACCOs and, of the 993 clients supported in the 2024-25 financial year, 21% identified as Aboriginal or Torres Strait Islander.

7. Are there any other priorities or issues you think the department should be focusing on?

As detailed in Uniting's response to Question 9, families of children with disability should be a stronger priority within the new program. Across regional areas such as Gippsland and the Wimmera, and metropolitan areas like Hume, our families consistently highlight long waitlists, limited local supports, and difficulty navigating the NDIS. Parents often identify additional needs in their children early, but cannot access services or use allocated NDIS funding due to provider shortages. While the NDIS is a separate Commonwealth program, the new program should help strengthen early identification, inclusion supports, and family navigation. Better coordination between DSS and state education and early learning systems would also strengthen outcomes, given early learning is a critical early intervention entry point. Finally, DSS should clarify whether providers will be expected to transition existing FaC programs or design new models, with sufficient lead time for service redesign if required.

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?

Uniting supports the proposed focus areas, as they reflect key needs observed across our child, youth, and family programs, and align with our experience of where early intervention can have the greatest impact. Strengthening support in the early years is particularly important, as evidence consistently shows this period shapes lifelong outcomes for children. Notably, more than 18% of clients supported by our East Gippsland CfC site in 2024-25 were children aged 0 to 4 years. In the same period, this cohort represented 30% of clients at our Hume CfC site.

The focus areas could be strengthened by recognising families who fall outside these categories but remain vulnerable. Many of Uniting's CfC programs work with families of primary school-aged children or young people, supporting early

learning, family relationships, and school engagement before risk escalates. If the new program narrows eligibility too tightly, these families may lose access to preventive supports that reduce future involvement with child protection.

Proven models that align with these focus areas should also be prioritised. Newpin, for example is an evidence-based therapeutic restoration program that supports parents and children (aged 0-5) to reconnect, rebuild, and strengthen relationships. Uniting NSW.ACT is the Newpin licence holder, and Uniting VIC.TAS delivers the program in Southern Melbourne. In commissioning the new program, DSS should support the scaling of successful, evidence-based models like Newpin that address safety concerns and build parenting capacity.

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

Uniting's service delivery leaders note that families of children with disability should be a stronger focus within the new program's priorities. In East Gippsland and Hume, where Uniting leads CfC programs, the rates of children needing assistance are higher than the Victorian average. In East Gippsland, 1.4% of children aged 0-4, 5.2% aged 5-9, and 5.6% aged 10-19 require help with core activities, compared with 1.3%, 4.3% and 3.9% across Victoria (ABS 2021). In Hume, the figures are 1.4 %, 4.8% and 4.2% respectively, all above the state average (ABS 2021). This is reflected in our CfC program data – more than 5% of the 993 clients supported by our East Gippsland CfC site in 2024-25 reported living with a disability.

Families in our regional areas such as Gippsland and the Wimmera, as well as metropolitan areas like Hume, consistently report a lack of local supports, long waitlists, and significant challenges navigating the NDIS. They tell us that what matters most is that their children feel safe, supported, and happy. Parents often recognise additional needs in their children early (such as neurodiversity) but face difficulties accessing services or using allocated NDIS funding due to provider shortages. While the NDIS is a distinct Commonwealth funding stream, this new program should ideally play a role in strengthening early identification and inclusion supports, particularly in rural and regional areas.

Uniting recommends DSS prioritise investment in early intervention and family navigation supports for children with additional needs, alongside community capacity-building and sector development. Improved coordination between this new program and NDIS providers would help ensure children with disability and their families receive timely, connected, and culturally safe supports close to home.

Uniting also considers the intent of the new program would be strengthened by better coordination between state and federal systems for education and child care. As a major provider of early childhood education and care in Victoria and Tasmania, Uniting recognises that early learning is one of the most effective points to disrupt disadvantage linked to poverty, trauma, and family stress. When early learning services are well resourced and supported, they can function as critical

early intervention pathways, connecting parents and children to the supports they need and improving family outcomes.

Finally, Uniting recommends DSS clarify whether providers will be expected to transition existing FaC service models into the new streams or develop new, innovative models. If new models are required, final program guidelines should be released well in advance of commissioning to allow sufficient time for service redesign.

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

Aside from co-location, Uniting's experience shows that service connection and coordination work best when flexibility, relationships, and local networks are supported. In regional areas, our teams often pool resources and operate as 'service connectors', linking families to supports through strong partnerships and shared outcomes. While this often occurs out of necessity, it delivers results and should be recognised and resourced as a core enabler of integrated delivery.

Centralised or shared intake models, such as those in community health, also strengthen integration. Roles like service navigators, key workers, or community concierges help families navigate complex systems and link to supports. These dedicated roles play an important part in building sector awareness, strengthening partnerships between service streams, and supporting education across the service system. State-funded family services alliances bring local agencies together to plan, coordinate, and integrate services (Uniting leads four of these alliances in Victoria). Similarly, place-based coordination initiatives, like the By Five Paediatric Project in the Wimmera, enable joined-up responses and shared planning. The Project delivers close-to-home paediatric consultations, builds local workforce capacity, and integrates service pathways for children.

Effective coordination also relies on funding the relational work that underpins integration. Across Uniting's programs, trusted relationships between workers and communities are essential to success. Investing in local coordination capacity makes integration more sustainable and ensures families experience a connected service system.

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?

In grant applications for this new program, Uniting would demonstrate strong community connection through – evidence of collaboration, trust, and shared decision-making with local partners; long-term investment in local infrastructure, assets, and staffing; and active participation in local service coordination structures such as alliances, networks, and emergency coordination groups.

A service connected to the community it serves listens to community voices, understands local needs, and works alongside families, councils, schools, and

ACCOs to design and adapt delivery. For example, Uniting's CaPS and CfC programs across metropolitan and regional Victoria and Tasmania often serve as trusted, safe entry points for families seeking support. Applicants should be assessed on how effectively they leverage these partnerships, their participation in local networks, and their use of data and community voices to shape service delivery.

As described previously, Uniting recommends a commissioning model that supports multiple submissions from providers across the three funding streams, allowing them to reflect the diversity of local contexts. Application forms should provide enough space for area-specific evidence and clear descriptions of service models. This approach would give equal opportunity to multi-region organisations with strong local connections and ensure the assessment process recognises the value of community-led, evidence-informed partnerships. It would also encourage more flexible and locally responsive program design that reflects the unique strengths of each community.

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

Aside from locational disadvantage, Uniting recommends DSS consider a broad range of factors that reflect how services operate and how communities engage with them. While indicators such as SEIFA, AEDC, census data, child protection reporting and engagement rates, and service demand are important, they do not fully capture the relational and systemic factors that shape community wellbeing and access to services.

Workforce availability, service coverage, and transport accessibility are particularly important in regional and rural areas, where 'thin' service markets and long distances create barriers to access. The strength of local partnerships, collaboration across sectors, and capacity for collaborative design with families are also key indicators of community need.

DSS's proposal for providers to demonstrate how they have considered their community's unique context, including through local partnerships, active volunteer bases, and local governance involving people with lived experience, should be clarified. While Uniting has a long-standing local presence and deep relationships in the regions in which we operate, these indicators are not consistently in every community. They should therefore complement, rather than replace, broader evidence of local knowledge, community engagement, and service responsiveness.

13. What's the best way for organisations to show in grant applications, that their service is genuinely meeting the needs of the community?

Uniting recommends grant applications allow organisations to demonstrate how they meet community need through both qualitative and quantitative evidence.

Current CfC reporting requirements, for example, are highly prescriptive and do not capture the relational, strengths-based work that drives genuine community impact.

In East Gippsland CfC, Uniting collects and evaluates impact through tools such as Most Significant Change and qualitative stories that show how relationships with CPs are evolving and supporting more open discussion about local priorities. Our CfC Hume site also asks CPs to gather case studies, quotes, and community feedback, and uses a regular community needs survey to identify emerging priorities for joint discussion and planning. This relational and narrative evidence provides a more holistic and culturally appropriate picture of change, particularly for Aboriginal and CALD communities.

Uniting welcomes DSS's commitment to include more qualitative reporting under the new program, which will better reflect the lived experience of families and the collaborative work that strengthens communities and keeps children safe.

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

Uniting would benefit from more longitudinal, relational, and qualitative data to better capture how families' wellbeing changes over time. DSS's existing Data Exchange (DEX) reporting system, which includes SCORE (Standard Client/Community Outcomes Reporting), tends to focus on individual circumstances and shorter-term outputs. It does not sufficiently reflect the strength of relationships, community connections, or system-level outcomes.

Take for example our DEX SCORE data for the Hume CfC site, where Uniting is the FP. From July 2022 to June 2025 more than 2,300 individual clients recorded an average positive movement of 1.06 points across the eleven SCORE Client Circumstance domains (from 2.85 pre-intervention to 3.91 post-intervention) and 1.15 points across the six SCORE Client Goals domains (from 2.61 pre-intervention to 3.76 post-intervention). This site also recorded an average client satisfaction score of 4.57, with all measures assessed on a five-point scale. While these outcomes are impressive, SCORE alone cannot capture the broader relational, community, and system impacts that are fundamental to place-based, community development work like CfC.

For programs like Bush Link, Uniting supplements demographic and SCORE data with qualitative tools and narrative reports to show long-term and relational impact. Enhancing pre- and post-measures within SCORE, alongside integration of qualitative data, would enable us to track family functioning, wellbeing, and developmental milestones more accurately.

Uniting has defined strategic consumer outcomes, is developing a Consumer Outcomes Framework, and is continuing to strengthen our data systems. In this context, flexibility in how outcomes are reported and measured is essential. We envisage working collaboratively with DSS, under a relational contracting approach, to align our measures and tools with the outcomes sought under the

new program. DSS should avoid rigid outcomes frameworks that require providers to build new data systems or use specific tools solely to fit prescribed metrics, particularly where existing, closely aligned measures can be utilised. A collaborative approach to outcomes measurement would prevent unnecessary duplication and administrative burden.

A culturally sensitive and streamlined reporting system would also improve data quality by reducing barriers for Aboriginal and CALD families who are often reluctant to share identifiable information. This is particularly important in areas with large CALD populations, such as Hume, where almost 40% of residents are born overseas and come from 156 different countries (ABS 2021).

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?

The most valuable data for Uniting to share with DSS combines quantitative outcomes with qualitative stories of change. For our CfC and CaPS programs, we already provide detailed narrative reporting alongside DEX SCORE data, thereby capturing family experiences and community impact that quantitative data alone cannot reflect. Sharing measurable indicators together with lived experience stories provides a more complete understanding of outcomes. Uniting also supports the use of flexible reporting templates that allow ACCOs to present their impact in culturally safe ways, aligned with self-determination and reflective of local strengths and priorities.

As described, DSS should avoid an overly prescriptive outcomes framework for the new program. Uniting would prefer to work collaboratively with DSS, under the relational contracting approach, to align our existing measures and tools with the outcomes sought under the new program. We recommend DSS enable providers to draw on a broad range of data sources – such as data from state funded programs, local needs assessments, and outcomes of Uniting service models – to present a holistic picture of family needs and service impact. To enable this, we'd welcome DSS support to explore how data collected through state contracts can be used to strengthen reporting for Commonwealth programs. Furthermore, to support connected service provision, the new program should include mechanisms for shared or cross-program outcomes, rather than requiring strict attribution to a single intervention. This would better reflect how families access support and how providers like Uniting coordinate multiple services around the whole family.

Finally, adequate resourcing will be essential for the more sophisticated outcomes and qualitative reporting that DSS has proposed for the new program. Uniting employs dedicated Evaluation Officers for each CfC site we lead, and this has been vital for managing data collection, supporting CPs, and embedding continuous improvement. Similar resourcing should be built into the new program to support meaningful service evaluation.

18. If your organisation currently reports in the Data Exchange (DEX), what SCORE Circumstances domain is most relevant to the service you deliver?

Broadly, the SCORE Client Circumstances domains most relevant to Uniting's CfC and CaPS programs are – age-appropriate development; community participation & networks; and family functioning. These align closely with our trauma-informed Therapeutic Model of Care, which promotes healing for children, young people, and families through safety, connection, and community.

Measurement also varies between our programs. For example, our CfC-funded School Attendance Support Program (SASP) in Cardinia and Cranbourne assess Client Circumstances across – mental health, wellbeing, & self-care; family functioning; and education. Similarly, in our Hume CfC, CPs assess against – mental health, wellbeing, & self-care; family functioning; community participation & networks; and age-appropriate development. Within Uniting's East Gippsland CfC, CPs assess Client Circumstances across all eleven domains as relevant, with the majority of clients who have paired pre and post SCOREs recorded in the 'family functioning' domain. These variances highlight the need for flexible tools that reflect different program intents and cohorts.

However, DEX currently has known limitations. In Uniting's experience, many Aboriginal families and people from CALD backgrounds are reluctant to provide identifiable information, resulting in underreported or de-identified data. This affects the accuracy of DEX outputs and restricts our ability to accurately demonstrate outcomes. For the new program, we therefore recommend a more culturally safe approach that includes relational and community-level measures, alongside individual data points.

Furthermore, Uniting's CfC CPs frequently work with children and families experiencing intergenerational trauma and report that SCORE does not reflect the complexity of this work. For these cohorts, wellbeing indicators such as social/emotional conduct and dysregulation often shift in small, incremental ways. CPs note that SCORE is too broad to capture these nuanced changes, including improvements in children's interactions with teachers, peers and support staff, or the subtle shifts in family relationships that signal meaningful progress.

19. What kinds of templates or guidance would help you prepare strong case studies that show the impact of your service?

Uniting would value guidance that supports case studies combining qualitative and quantitative evidence, with templates that allow providers to reflect on outcomes (aligned with DSS priorities) and include family and child voice, program learnings, and contextual factors. Templates should be simple and culturally adaptable.

Our experience using Most Significant Change and other participatory evaluation tools shows that storytelling is essential for demonstrating long-term impact and illustrating how child-friendly communities support wellbeing. By definition, these communities foster strong social connections, quality services, and a supportive environment where families feel included and able to help children thrive. Clear DSS guidance, including examples of strong case studies and how qualitative evidence will be assessed, would promote consistency and reduce administrative

burden.

Uniting encourages DSS to recognise the importance of children's voices in demonstrating program impact. Uniting is currently undertaking a project to embed best practice children's engagement and participation across our early learning and child, youth, and family services. Children's voice involves listening to, supporting, and acting upon children's perspectives through everyday interactions and structured methods, while children's partnerships extend this to collaboration on service design and environments. Embedding these methods within the new program would strengthen its ability to understand impact from the perspective of children themselves and ensure services reflect what children value.

Through a relational contracting model, we also trust DSS will be open to adapting its guidance over time as providers share insights from implementation. For example, Uniting is committed to working closely and flexibly with DSS to demonstrate the impact of connected service models for families, a core focus of our 2030 strategy. We would welcome opportunities to share these insights with DSS so that program design and guidance can evolve to reflect emerging evidence and consumer experiences.

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

Uniting welcomes a shift to relational contracting as a platform to drive genuine partnership, deeper collaboration, and shared accountability for outcomes. Relational contracting means building partnerships with DSS based on shared purpose, trust, and joint responsibility rather than transactional compliance. It means establishing clear governance, data-sharing, and quality-improvement mechanisms that allow both funder and provider to respond to emerging issues and continuously learn. The success of these types of contracts should be measured through collaboration and transparency, rather than rigid performance metrics.

Considine & Bonyhady (2025) describe relational contracts as formal agreements that recognise mutual responsibility and incentivise the generation of 'public value', rather than short-term outputs. In practice, Uniting believes this would involve regular partnership meetings with DSS, narrative-based performance discussions, and flexibility to adjust targets while maintaining standards.

Ultimately, we consider a relational contracting approach should create space for consumers to share their experiences with DSS. This aligns with our 2030 strategy, which commits to strengthening how we elevate the voices and stories of children, young people, and families, and ensuring lived experience meaningfully informs service design and delivery. For the new program, this would further enhance responsiveness to the experiences of the families it is intended to support.

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

Based on Uniting's experience, DSS should identify organisations with a proven record of collaboration, transparency, and deep community partnerships. Considine & Bonyhady (2025) explain that relational contracting works best where trust and reliable performance already exist. Suitable providers demonstrate shared problem-solving capacity, sound governance, and an ability to balance accountability with innovation and responding to community evolving needs. Under this new program, the selection process for relational contracts should value experience in joint planning and cross-sector partnerships, along with community credibility and workforce capability. Evidence of outcomes evaluation, a learning culture, and readiness to share data should also be considered.

For example, Uniting would be a strong candidate for relational contracting because – we lead and operate within collaborative structures such as multi-agency family services, family violence, and homelessness alliances in Victoria; we have mature outcomes measurement processes, including an emerging Consumer Outcomes Framework; and as a CfC FP in two Victorian regions, we have experience working towards shared goals, managing joint governance, and fostering partnerships grounded in trust.

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

Yes. Uniting strongly supports relational contracting as outlined by Considine & Bonyhady (2025) and introduced to the sector by DSS leadership at the 2025 UnitingCare Australia CEO Advocacy Day. A relational model would create the flexibility to adapt delivery, manage shared risks, and improve outcomes collaboratively with DSS. It would also strengthen shared responsibility between DSS and providers so both parties are accountable when service approaches or outcomes or require adaption. This approach aligns with Uniting's collaborative, imaginative, and impact-focused way of working and with our aspiration to meaningfully contribute to 'an inclusive, connected, and just future'. As described in our response to Question 21, Uniting is also a strong candidate for a relational contract because we demonstrate the key attributes for success.

23. Is there anything else you think the department should understand or consider about this proposed approach?

DSS should consider several unintended consequences of the new program. With the proposed focus areas and funding streams, primary school-aged children are at particular risk of being overlooked. Many families in this cohort will not meet a threshold of being at risk of child protection involvement – yet they often require early intervention supports such as those delivered through Uniting's SASP, which has demonstrated strong outcomes in preventing school disengagement. SASP shows that early support for primary-aged children is both necessary and effective, and should remain a feature of the new program. At the other end of the intervention spectrum, current CfC settings have at times discouraged work with families experiencing complexity, and this gap should not be replicated in the new model.

As described, CfC FPs use community development principles to drive a whole-of-community approach that strengthens the wellbeing of children and families. This focus on community voice, collaboration, and place-based planning is central to giving children the best possible start in life. While Uniting is open to new approaches, it is important that the new program retains the community development focus that has underpinned CfC's effectiveness.

There is also a risk the commissioning strategy for this new program, if not carefully designed, may unintentionally shift services to providers without the capacity to deliver the outcomes DSS is seeking. The 2024 Emergency Relief grants process (FWC) showed that simplified commissioning models can inadvertently privilege very small or very large providers, leaving place-based, multi-region organisations such as Uniting to withdraw. This would undermine continuity and weakens local service systems.

The new program should integrate the recommendations Uniting has raised in this submission. These include – maintaining an explicit focus on community wellbeing and children's voice; enabling culturally safe and locally adapted delivery; scaling proven models; clarifying and leveraging the interface between Commonwealth and state-funded services; prioritising supports for families of children with disability; flexibility in how outcomes and community needs are measured, assessed, and reported; clarifying whether providers are expected to transition existing service models or design new ones; and allowing providers to submit multiple funding applications, along with supporting evidence. The new program should also adequately resource the relational, coordination, and evaluation work needed for integrated, outcomes-driven service delivery.

Uniting's recommendations complement those made by UnitingCare Australia, the national body for Uniting Church community service agencies. Our submission broadly aligns with their emphasis on drawing on insights from current program delivery (built over years of local engagement and practice knowledge), and on ensuring effective elements of existing interventions are retained.