

Issue Raised	Respondents/Minister's Comments	FACS response
<p><b>Early intervention for children who have experienced domestic and family violence</b></p>	<p><b>Respondent 1</b> An increased level of early intervention is needed for those children who have experienced domestic and family violence, and those who are at risk of entering out of home care as a result of DFV.</p> <p><b>Minister Ward</b> Noted that there are some education related initiatives in this sphere and that \$1 billion has also been allocated to Specialist Homelessness Services. Funding is also provided to women's health centres.</p> <p>As Minister for FACS, he recognises the importance of preventing abuse against children in their home and in other environments.</p> <p>He also stressed that we need to look at what is working and where value can be added.</p>	<p>Their Futures Matter is implementing new evidence-based intensive family preservation models aimed at keeping families together.</p> <p>Functional Family Therapy through Child Welfare (FFT-CW) is a home-based treatment model for families with substantiated physical abuse and/or neglect of a child or young person aged between 0 and 17 years by providing a family therapy-focused model for high risk families.</p> <p>FFT-CW is available in the following areas:</p> <ul style="list-style-type: none"> <li>• Auburn</li> <li>• Bankstown</li> <li>• Blacktown</li> <li>• Blue Mountains</li> <li>• Burwood</li> <li>• Central Sydney</li> <li>• Charlestown</li> <li>• Eastern Sydney</li> <li>• Edgeworth</li> <li>• Hawksbury</li> <li>• Ingleburn</li> <li>• Lakemba</li> <li>• Leeton</li> <li>• Liverpool</li> <li>• Macarthur</li> <li>• Mayfield</li> <li>• MT Drutt</li> <li>• Nowra</li> <li>• Parramatta</li> <li>• Pennant Hills</li> <li>• Penrith</li> <li>• Shellharbour</li> <li>• St George</li> <li>• St Marys</li> <li>• Sutherland</li> <li>• Wagga Wagga</li> <li>• Wollongong</li> </ul>

		<p>Multisystemic Therapy for Child Abuse and Neglect (MST-CAN®) is also being delivered.</p> <p>MST-CAN is a 24/7 home-based treatment model for families with substantiated cases of physical abuse and/or neglect of children and young people between six and 17 years.</p>
	<p><b>Respondent 2</b>          Raised the related issue of young women who fall pregnant while in out of home care. The infant child is removed and the cycle continues. These young women need better support but there are few services available.</p> <p><b>Minister Ward</b>          Enquired as to potential numbers. Agreed that the Government needs to provide tailored approaches in this sensitive area.</p>	<p>FACS only removes a baby from a young person in OOHC if it was assessed that the child was unsafe. Caseworkers work closely with young people to meet their needs, including providing planning for the arrival of their child and accessing parenting supports.</p> <p>There is a need for increased service provision to young pregnant women in care as they transition to independence. For some young women they may be eligible to move into Semi-Independent Living provided within Intensive Therapeutic Care.</p> <p>In addition, there are a range of initiatives/services to support pregnant young women. Below are some examples:</p> <p><b>Mother and baby placement</b>          South Western Sydney District recruits their own pool of authorised carers who support the mother with the care of her baby (mother and baby placement).</p> <p><b>Red Cross - Young Parents Program:</b>          FACS allocated funding of \$1,792,771 in 2018/19 to the Red Cross to provide the Young Parent Program. The aim of the program is to improve the capacity of young parents with complex needs, aged 13 to 25 years, to live and parent independently.</p> <p>Not all participants in the program are from OOHC, however the majority of referrals to the service are from FACS.</p> <p><b>Launchpad Youth and Community:</b></p>

		<p>FACS funds Launchpad \$659,397 in 2018/19 to deliver the Sydney District Young Parents Homelessness Service. This service supports young parents aged under 25 years and their children who are experiencing homelessness or at risk of becoming homeless.</p> <p><b>HOPE Program (not funded by FACS):</b> HOPE program, operated by CatholicCare Sydney, provides individual help for young pregnant women, and young mothers with complex needs. The service organises one-on-one support for young pregnant women aged 16 to 25 years or who have a child under the age of two.</p> <p><b>Wiyanga House (Parramatta Mission):</b> Provides a service offering case management, and crisis supported accommodation to 16 to 24 year old expectant mothers and their children who are at risk of, or are experiencing, homelessness.</p> <p><b>SSESNS District Pregnancy Family Conferencing:</b> FACS SSES&amp;NS District operate Pregnancy Family Conferencing models across the three local Health districts present in our district. The program is run in partnership with the local Health district and brings women and their unborn children assessed as being at Risk of Significant Harm (ROSH) together with Health staff, FACS caseworkers to identify case plans to support their babies remaining with them at birth.</p> <p><b>Substance Use in Pregnancy and Parenting Service (SUPPS)</b> Delivered by Barnardos Australia and funded under Targeted Early Intervention, intensive assistance is available to pregnant women and their partners who are using drugs and/or alcohol. The program helps with birth and parenting preparation, drug and alcohol management, financial, housing and legal issues. The program also supports maternal health, neo-natal and post-natal care for up to 3 years.</p>

<p><b>Importance of data in making decisions</b></p>	<p><b>Respondent 3</b>          Noted that good data is potentially available from both the non-government and government sectors. However there is a need to share critical data, as well as a need to have a shared understanding of what the data means (including a more complete understanding of the work and the related outcomes).</p> <p><b>Minister Ward</b>          Need to focus on how you do the greatest good – looking at the data will assist with making evidence based predictions, as well as knowing when there is a need to act ‘early’ to provide children and their families with wrap around services.</p>	<p>FACS recognises the value of sharing data among a wider audience to increase transparency of services delivered to the family and community services sector. FACS recognises that having high quality data is crucial to delivery of government services and for achieving improved client outcomes.</p> <p>There is an ever increasing focus on effective sharing of data as FACS continues to mature as a commissioning organisation. FACS is leading a number of initiatives aimed at ensuring that FACS and the organisations it funds have access to the best possible information in order to drive the best possible client outcomes.</p> <p>FACS is cognisant of the need to provide greater data and information to the non-government sector whilst balancing this need against confidentiality and privacy issues, which would govern release of FACS administrative data related to vulnerable clients. In this context, FACS has implemented defined processes to manage the secure release of client data. FACS will continue to work with the non-government sector to develop quality and performance indicators as well as improved data sharing arrangements</p> <p>In the meantime, FACS continues to provide data on service delivery by non-government organisations, both within the state and also nationally. For example, FACS submits annual data on services delivered to the Productivity Commission, to be published in the Report on Government Services, which provides comparable data across all states and territories.</p> <p>In order to drive government transparency and accountability, FACS publishes data on service areas on its website. Quarterly dashboards are published on:</p> <ul style="list-style-type: none"> <li>• Social housing delivery</li> <li>• Housing rent and sales</li> <li>• Elder abuse</li> </ul>
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<p><b>Importance of considering the Aboriginal communities and CALD communities in all decisions</b></p>	<p><b>Respondent 4</b> A critical issue is the over representation of Aboriginal children in care. There is also the need to be aware of the issues being experienced by CALD communities.</p> <p>Overall, we need to lift our skills in these areas of work and also bring these communities into the conversation.</p> <p><b>Minister Ward</b> Acknowledged the truth of this and also added the importance of effectively engaging with, and responding to, children with a disability and their families.</p>	<p>FACS is working very closely with the NSW Child, Family and Community Peak Aboriginal Corporation (AbSec) to address the over-representation of Aboriginal children in the child protection and out-of-home care systems.</p> <p>AbSec is also a leading partner with the NSW Government to achieve growth in the Aboriginal child and family sector in NSW.</p> <p>AbSec and FACS have worked together to develop the Aboriginal Child and Family Investment Strategy. The strategy is an approach to build the capacity of the Aboriginal service sector to promote Aboriginal led service delivery and remove barriers to success for Aboriginal organisations.</p> <p>AbSec is currently funded by FACS to deliver a range of initiatives that contribute to ensuring there is a strong Aboriginal sector, and to enable needs of Aboriginal</p>

		<p>communities to be considered as part of program design and implementation including:</p> <ul style="list-style-type: none"> <li>• sector development and capacity building activities</li> <li>• activities in the area of permanency support such as the Aboriginal Foster Care Support service, developing the new Aboriginal Case Management Policy and Guidelines, and directly supporting Aboriginal organisations and partnerships to achieve and maintain accreditation by the Office of the Children’s Guardian to deliver the Permanency Support Program</li> <li>• activities in the area of family preservation such as providing Aboriginal consultation and cultural supports for new Their Futures Matter service delivery models</li> <li>• activities in the area of practice supports such as contributing to the Family Is Culture case review of children in out of home care</li> <li>• initiatives in the Aboriginal Child and Family Investment Strategy</li> <li>• activities within the Guardian Support Model to lead a commissioning approach to design a guardianship support system for Aboriginal children under guardianship orders.</li> </ul> <p><b><u>Aboriginal case management policy</u></b></p> <p>In 2017, AbSec was commissioned to develop FACS’ Aboriginal Case Management Policy (ACMP). The ACMP is a landmark policy that will transform the way we deliver culturally sensitive casework services, responsive to the needs of Aboriginal children, their families and communities. Staged implementation of the ACMP will help FACS reduce over-representation of Aboriginal children and young people in the child protection and OOHC system. This includes the development of plans that will enable FACS districts to implement the ACMP based on existing operational structures, local needs and conditions.</p> <p><b>CALD communities</b></p> <p>To support the achievement of permanency for children, FACS</p>
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		<p>published the <a href="#">Permanency Case Management Policy</a> in 2018.</p> <p>FACS is currently updating the policy to strengthen how we meet the needs of children with culturally and linguistically diverse backgrounds. For example, FACS’s policy has recently been updated in relation to respite care, to require children from CALD backgrounds are matched with respite carers of the same linguistic, cultural and religious background. When this is not possible, respite carers will receive cultural awareness training and support from the funded service provider.</p>
<p><b>ChildStory</b></p>	<p><b>Respondent 5</b>  ChildStory – this system produces incorrect data: eg the listing of clients is wrong, and this causes incorrect funding. This impacts on the business viability of organisations, particularly the smaller ones.</p> <p><b>Minister Ward</b>  While ChildStory is far from perfect, there had to be a change from the previous system. He is talking to the Secretary of FACS about this issue.</p>	<p>Improvements to data and functionality in ChildStory that affect the Permanency Support Program (PSP) funding is underway.</p> <p>All PSP providers have received advanced quarterly payments for children and young people in their care in 2018/19. A full reconciliation of 2018/19 PSP payments will be undertaken in December 2019. A sample reconciliation with two large organisations to verify and reconcile 2018/19 PSP payments is underway and on track for completion in mid-June. Preliminary findings from the largest provider indicates there is not a significant amount owed by, or to, FACS.</p>
	<p><b>Respondent 6</b>  There is a significant problem in the area of timely remuneration. As a sector, the non-government agencies have embraced the PSP reforms and have committed to implementing them. However, FACS is not clearing debts in this financial year and therefore the agencies are carrying significant debts through to the following financial year. There needs to be more collaboration and accountability in this area.</p> <p><b>Minister Ward</b>  Enquired as to what would make it work better. It was decided</p>	<p>There have been historical issues with the timely payment by FACS Districts of invoices related to exceptions supports and other fee-for-service items (e.g. temporary care arrangements). Monthly contract management meetings between FACS and PSP funded service providers create the opportunity to discuss concerns and issues and escalate matters to the Partnerships Directorate or the Program area where necessary.</p>

	<p>that this requires more detailed consideration.</p> <p><b>Respondent 6</b>          ChildStory is part of the issue, and the other is that there needs to be a better mechanism for having a robust conversation with FACS about these issues.</p>	
<p><b>Case management</b></p>	<p><b>Respondent 5</b>          Case management of the children is now being held by the non government agency but the decisions which are being made are not supported by FACS. Agencies are being asked to carry out tasks that are not funded by FACS, such as extra assessments and court appearances. This does not necessarily reflect the principles of child centred practice.</p> <p><b>Minister Ward</b>          Send a list of the top issues to him and he will take these up with the Department.</p>	<p>The Permanency Support Program (PSP) began being introduced on 1 October 2017. Implementation of the PSP means significant changes to the way we fund our service providers. The PSP funding model introduces an expectation that funded service providers collaborate closely with FACS to achieve each child’s case plan goal.</p> <p>During implementation, we expect to experience occasional conflict as a normal part of working collaboratively and playing different but complementary roles. This is a sign of a mature and resilient service system.</p> <p>FACS Permanency Coordinators (52 new Permanency Coordinators have been funded across all FACS districts) continue to support FACS and funded service providers to clarify expectations in relation to service delivery and roles and responsibilities.</p> <p>Additionally, FACS provides policy and practice advice to FACS and funded service providers through the Permanency Support mailbox – <a href="mailto:permanency.support@facs.nsw.gov.au">permanency.support@facs.nsw.gov.au</a></p> <p>The PSP funding model has been designed to be applied flexibly to support the needs of children and young people. A specialist package for complex needs is also available to funded service providers for additional funding to address extraordinary circumstances (upon application).</p>
<p><b>Temporary care</b></p>	<p><b>Respondent 5</b></p>	<p>A Temporary Care Arrangement (TCA) is a written agreement</p>

<p><b>arrangements</b></p>	<p>Temporary Care Arrangements – these were not mentioned in the OOHC transition discussions and are not included in the contracted numbers, but agencies are still expected to place these children. This impacts on the number of foster carers available to take children in the contracted placements, and causes financial pressures, as these placements aren't funded upfront.</p> <p><b>Minister Ward</b> Acknowledged the question and also noted that one of the urgent needs in the system is to stop motel placements as care arrangements. We noted that this is now a standing item on the agenda with FACS.</p>	<p>(<a href="#">section 151</a>) between FACS and the child's parents where the parent's consent to their child entering a <i>supported</i> out-of-home care arrangement.</p> <p>The Permanency Case Management Policy notes that provision of a TCA placement by an FSP is by agreement with the funded service provider (not mandatory) and in addition to contracted volume.</p> <p>In 2018 (internal unpublished data) indicates there were 1,279 TCA placements. Of these, 34% were provided by funded service providers. This has risen from 13% in the previously year (2017).</p> <p>FACS provides separate funding for TCA placements (in addition to PSP funding), based on pro-rata application of Permanency Support Program (PSP) package costs and invoiced on a fee-for-service basis.</p> <p>A Temporary Care Arrangement Practice Minute has been drafted to clarify how FACS and funded service providers work together in relation to TCA placements. It is anticipated this practice minute will be published in June/July 2019 and will address the apparent confusion about these care and funding arrangements.</p>
<p><b>FACS/ACWA taskforce</b></p>	<p><b>Steve Kinmond – CEO – ACWA</b> FACS and ACWA are close to agreeing on a taskforce that will be established to work through these types of business and broader reform issues.</p>	<p>FACS appreciates ACWAs offer of resources to support the Department's Change Management Group to collaboratively resolve reform challenges and promote best practice across the sector.</p>
<p><b>National Disability Insurance Scheme (NDIS)</b></p>	<p><b>Respondent 7</b> There are still large gaps in the delivery of the NDIS funding. One issue is that of poor quality plans – about 70% of the children with disabilities in the questioner's agency experience this.</p>	<p>Between 1 January and 31 March 2019, 48% of new NDIS participants were children aged between 0 and 6 years. Overall during that period, NSW had a participant satisfaction rating of 95% - the highest in Australia.</p>

	<p>They are also still waiting for the full rollout of Complex Participant Pathway.</p> <p>How will the Minister work with federal government and the NDIA to address these issues?</p> <p><b>Minister Ward</b> The recent Bill instituting the Commission for Ageing and Disability demonstrates the government’s commitment to people with disabilities.</p> <p>The minister noted that the Department has been asked to compile a list of issues to give to the Federal Minister.</p> <p>He is also aware of other issues, such as substantial funding of \$1 billion not being spent in our state. The Minister indicated that he is very keen to ensure that critical issues affecting children with disability are the subject of careful consideration and that the right outcomes are achieved.</p>	<p>The rate of unscheduled plan reviews – appeals against planning decisions – fell for eight quarters in a row, indicating improvements in satisfaction with final plans.</p> <p>There is still more work to be done to ensure that NDIS plans meet the needs of participants. Minister Ward, along with the Treasurer, sits on the COAG Disability Reform Council. NSW Officials also participate in a number of working groups that relate to both NDIS implementation in NSW and influence the outcomes of broader policy issues, such as interfaces with mainstream services, such as education and child protection.</p>
<p><b>Federal and state funding overlaps</b></p>	<p><b>Respondent 8</b> There are overlaps between federal and state funding. There needs to be sector involvement as we look at partnership with DSS and work towards joined up services.</p> <p><b>Minister Ward</b> The Minister is working on bringing the state ministers for disability together so that they can approach the Federal government with a united voice. There is a need to work collaboratively more generally.</p>	<p>Disability funding in NSW for the 2018/2019 period is an estimated \$6.5 billion. The Commonwealth contribution is an estimated \$3.3 billion, and the NSW contribution an estimated \$3.2 billion per year.</p> <p>One hundred percent of the previous FACS budget for specialist disability supports (\$2.7 billion) will contribute to supports for people with disability under the NDIS.</p> <p>When the NDIS is fully operational around Australia, in 2019/20, \$130 million will be provided each year for Information, Linkages and Capacity building (ILC) supports.</p> <p>Unlike the rest of the NDIS, ILC doesn’t provide funding to individuals. ILC provides grants to organisations to carry out</p>

		<p>activities in the community that will help to link people with disability to mainstream services and supports.</p> <p>Because ILC targets funding to where it is useful, it is not prescriptive about the services it funds, so there is a risk of duplication of effort in some areas.</p> <p>As the ILC program matures NSW will work to map any funding duplications or gaps to ensure that people with disability, regardless of whether they qualify for the NDIS, can access mainstream services and supports as needed.</p> <p>Through NSW's membership of the COAG Disability Reform Council, it is in a position work towards a coordinated inter-jurisdictional voice on where service gaps and duplications need to be addressed.</p>
<p><b>Collaboration</b></p>	<p><b>Respondent 9</b>  Collaboration can be hindered between non-government agencies and between the non-government and government sectors, particularly when looking at the fidelity of programs. For example – within the ITC program the only model is for 4 people in a house and this represents a blockage for dealing with certain children/young people.</p> <p>The lack of collaboration makes it difficult to resolve these issues. The issues and initiatives highlighted by NGOs need to be acknowledged and worked on.</p> <p><b>Minister Ward</b>  The Minister supported the need for collaborative practice. On a related note, he observed that is good that Juvenile Justice has now come under FACS, because we can now focus on the broader needs of these young people. The minister also noted that it is pleasing there has been a reduction in young people in JJs care.</p>	<p>FACS is committed to working collaboratively with funded service providers on the delivery of the PSP.</p> <p>FACS has been fundamentally committed to collaboration, flexibility and innovation in the development, procurement and implementation of the Intensive Therapeutic Care (ITC) reform.</p> <p>ITC providers are able to implement tailored therapeutic trauma-informed models of care, which are delivered by their highly qualified and trained staff, in line with the ITC service requirements.</p> <p>Only the ITTC and ITC Homes are '4-bed models', with some ITTCs providing services to up to 6 children and young people. These placements are intensively staffed with therapeutic specialists, house managers, case workers and direct care staff to meet the needs of individual children and young people. In addition, the ITTC has an 8 FTE multidisciplinary allied health</p>

		<p>team to undertake assessments for new children and young people entering ITC.</p> <p>The other ITC placement types are not ‘4-bed models’ and are intended to be tailored to the needs of individual children and young people, while still providing additional therapeutic supports.</p> <p>The Therapeutic Home Based Care (THBC) placement type, for example, is a carer-led individualised placement in ITC which is delivered by a suitable carer. The placement is supported by therapeutic specialists, therapeutic care plans and additional casework delivered by the ITC provider.</p> <p>In addition, ITC also recognises the need for time-limited individualised placements with direct care staff for children and young people in ITC Homes, for example in relation to managing behaviours that present risks to others that cannot be immediately mitigated. However, these are expected to be for a short-term basis and plans should be in place to develop the child or young person’s capacity to move safely back into an ITC Home or carer-led placement.</p> <p>A key objective for ITC is that the intensive therapeutic supports in ITTCs and ITC Homes work to de-escalate the needs of children and young people, to step them down into less intensive placements over time, such as the TSIL placement type.</p>
<p><b>Leaving Care</b></p>	<p><b>Leaving Care</b>  The Homestretch campaign calls for the funding of young people in care until the age of 21, if they agree to take certain actions relating to study, employment and setting up for independence. The Deloitte’s study proves that this will save money in the longer term.</p>	<p>FACS considers targeted support packages based on assessed needs as the best approach to the provision of extended care, and where services are commissioned based on a better understanding of the life trajectories of vulnerable young people.</p>

**Minister Ward**

The Minister noted that he has not examined this issue at this time. However, he noted the comment made and said that this is an issue that requires examination.

An untargeted extension of placements of young people will only benefit those with stable placements where it would have already been the intention for the young person to remain part of the family and work towards their future. Care leavers with more complex needs would not benefit from such an untargeted approach.

**Their Futures Matter: Futures Planning and Support initiative pilot**

The NSW Government is piloting an approach to extended care for young people through the Their Futures Matter: Futures Planning and Support initiative pilot.

The pilot will commence late-2019 in Mid North Coast and Western NSW and offer young people tailored extended care responses based on need, capacity, strengths and opportunities including access to a 'futures coach', flexible brokerage and intensive casework support. It will target young people aged 17-24 who have left OOHC and support will intensify according to the needs of young people.