OVERVIEW OF THE PRACTICE FRAMEWORK FOR WORKING WITH VULNERABLE, CHILDREN YOUNG PEOPLE AND THEIR FAMILIES

VISION FOR THE PRACTICE FRAMEWORK
The government and community sector service system in the ACT will work collaboratively to provide support and services for vulnerable and in need children, young people and their families using practices that are evidence based and effective.

This will inform the development of a responsive, flexible service system designed to meet the individual needs people by providing early intervention services that will contribute to the safety and wellbeing of children and young people in our community.

CONTEXT AND RATIONALE FOR THE PRACTICE FRAMEWORK
In 2009 the Council of Australian Governments (COAG) published the Protecting Children is Everyone’s Business- A National Framework for Protecting Australia’s Children. The development of the National Framework was in response to the 55,120 reports of child abuse and neglect that were made to statutory authorities across Australia in 2007-08. The rate has more than doubled in 10 years with significant over representation of Indigenous children and young people. The goal of the National Framework is to achieve a national approach to child protection with two high level outcomes:

Australia’s children and young people are safe and well.

A substantial and sustained reduction in child abuse and neglect in Australia over time.

The high level outcomes are support by six supporting outcomes and strategies and indicators of change.

These are:

1. Children live in safe and supportive families and communities
2. Children and Families access adequate support to promote safety and intervene early
3. Risk factors for child abuse and neglect are addressed
4. Children who have been abused or neglected receive the support and care they need for their safety and wellbeing
5. Indigenous children are supported and safe in their families and communities
6. Child sexual abuse and exploitation is prevented and survivors receive adequate support.

In 2010 the Department of Disability, Housing and Community Services in consultation with the Community Sector developed a new Service Delivery Framework for the provision of youth and family support services funded by the Department. The new Service Delivery Framework is aligned to the goals of the National Framework and an understanding of the needs of vulnerable children, young people and their families in the ACT. This Practice Framework will support service providers to implement the key elements of the new Service Delivery Framework. It will provide the means through which theoretical and philosophical approaches are linked with evidence and research to inform practice that will best support positive outcomes for vulnerable children, young people and their families.

**KEY ISSUES THAT THE PRACTICE FRAMEWORK WILL SUPPORT SERVICES TO ADDRESS:**
1. Refusal by some vulnerable children, young people and their families to accept support and participate in services
2. Retention in services of some vulnerable children, young people and families
3. Real and perceived barriers faced by children, young people and their families in gaining access to services
4. To ensure that service users and their needs are central to service design and implementation
5. Development and implementation of effective strategies to promote engagement including:
• Active engagement strategies
• Assertive outreach strategies
• Strategies aimed at increasing recruitment or initial uptake of services
• Strategies aimed at retaining clients within the service

These strategies need to be implemented at a case worker and whole of agency level.

PRINCIPLES THAT UNDERPIN THE PRACTICE FRAMEWORK FOR SERVICE USER AND THE SERVICE SYSTEM

1. Child/young person centered
2. Family focused and culturally responsive
3. Strengths based, flexible and responsive
4. Collaborative and evidence informed

Benefits for the clients:
1. Children and young people are safe and supported
2. Families are supported
3. Wellbeing has been improved
4. Resilience has increased
5. Service users are supported while waiting to access services
6. Decrease in the need for child protection services

Outcomes for the Service System:
1. Collaborative, joined up services
2. Services are responsive and flexible
3. Services utilize common assessment processes
4. Single entry points to access services
5. Service demand is coordinated and managed
6. Increased uptake of early intervention and prevention services

PRACTICE FRAMEWORK PROGRAM LOGIC:
The program logic (Figure 1) is a visual representation of how the Practice Framework will contribute to the intended outcomes for the service system. It is
a road map that describes the assumptions and operational theories which underpin this initiative and acts as a reference point for future evaluations of the Practice Framework.

The program logic has been based on a review of documentation relating to the Practice Framework, a program logic workshop for stakeholders, the research literature and consultations with stakeholders. It is anticipated that as implementation of the Practice Framework progresses, the program logic will be modified.

The primary assumption is that for collaboration to work, there are three key elements that need to be considered and appropriate actions taken:\(^1\):

- **An authorizing environment** at all levels of government and community sector agencies that provides a mandate and legitimizes collaborative work;
- **Performance and accountability** – well defined shared goals and principles with agencies being accountable for common, desirable outcomes;
- **Capacity to implement** – staff need to have the knowledge and skills as well as access to sufficient resources.

If one or more of these key elements does not exist, it is likely that collaborative activities will fail to deliver intended benefits for service users\(^2\).

The program logic also highlights those internal and external factors that have the potential to affect the attainment of intended outcomes.

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Figure 1: Program Logic for Practice Framework

**Long-term outcomes**
- Service demand is coordinated & managed
- Increased uptake of early intervention & prevention services
- Families & young people access services via single entry points
- Collaborative, joined up services
- Services are flexible & responsive

**Intermediate outcomes**
- Increased participation in communities of practice
- Increased use of information sharing protocols
- Increased & consistent use of successful practice mechanisms & approaches
- Common, simplified accountability & reporting requirements that support collaboration
- Increased use of common assessment processes
- Increase in joint planning & programming
- Policy statements endorse collaborative practice
- Stronger relationships between agencies/services
- Increase in managers’ change management skills
- Middle managers feel supported to lead & manage change
- Increase in practitioners’ & managers’ skills in practice framework principles
- Improved cultural competence of practitioners
- Practitioners feel supported through supervision

**Short-term outcomes**
- Clearer understanding of roles & responsibilities
- Higher levels of trust, reciprocity & respect between agencies/services
- Increased resources & funding incentives to collaborate
- More leaders championing system & practice change
- More middle managers committed to lead & manage change
- More inclusive communication
- Agreement by leadership on purpose & need for system & practice change
- Increased level of leadership engagement & commitment to changed practice
- Increased level of leadership engagement & commitment to shared outcomes

**Activities to support implementation of Practice Framework**
- Training needs assessment (re implementing framework)
- Training program for senior/middle managers & practitioners
- Induction for new staff
- Coaching and mentoring for managers & practitioners
- Sector wide implementation forums
- Consultation on shared outcomes
- Clear & flexible information sharing protocols
- Ongoing recruitment of staff with necessary skills & personal qualities
- Implementation of supervision guidelines
- Facilitation of joint planning by network coordinators
- Communities of practice
- Conflict resolution processes
- Review & evaluation (including pilot sites)
- Service agreements that promote practice framework principles & shared outcomes

**Outputs**

**Internal & external factors influencing implementation of Practice Framework**
- Absence of shared values & commitment
- Inadequate investment & support in change process
- Not sustaining the project for a period of 3 years
- Inadequate resources for coaching & mentoring
- Poor quality relationships between ACT government & community sector
- Lack of shared responsibility by ACT government & community sector
- Unrealistic expectations, e.g. timeframes for implementing change processes
- Inadequate resources to manage significant reforms in welfare sector
- Retention & recruitment of staff with appropriate skills, qualifications & experience

**Reach**
- # senior/middle managers & practitioners attending training
- # & type of services involved in training
- # training participants satisfied
- # & type of services using information sharing protocols
- # & type of services involved in joint planning
- # & type of services participating in forums & communities of practice
- # & type of services using supervision guidelines
GLOSSARY OF TERMS AND DEFINITIONS:

1. **Vulnerable children and young people:**

Any child or young person who is unable or unlikely to reach their full health, development, learning or wellbeing potential due to adverse experience or insufficient support to overcome those experiences.

2. **Vulnerable families:**

From time to time all families will require assistance to support their children’s health, learning, development and wellbeing. This often happens through natural supports in their extended family or community. Where children are vulnerable their families may not have those natural supports and will need assistance through targeted services designed to meet their needs.

3. **Hard to reach and engage children, young people and their families:**

There are three distinct groups of potential service users that are hard to reach and for some of these groups the fact that they are “hard to reach and engage” is because of characteristics of the service system. The three groups are:

   I. Community members who are service resistant sometimes because of previous negative experience of services.
   II. Community members who cannot access services because of barriers to services provision
   III. Community members who don’t believe that services can help them.

4. **Early Intervention:**

Responses to the needs of families, children and young people ‘who show the first indications of an identified problem and who are known to be at unusually high risk of succumbing to that problem’ (Little, 1999). This may occur early in the life of a child or it may be early in the development of the problem in an older child.
5. **Active engagement strategies:**

Active engagement strategies are designed to raise the rate of participation by vulnerable children, young people and their families who are likely to benefit from being involved in effective programs or services.

6. **Assertive community outreach:**

Assertive community outreach is when support and assistance is provided to vulnerable children, young people or their families in their local community and community settings. This can be in the home, the local school or community centre. Assertive community outreach employs active engagement strategies.

7. **Soft entry points for accessing services:**

Soft entry points refer to ways of introducing services to service users in informal environments in their own communities rather than expecting families to come to services.

8. **“First to know” agencies:**

“First to know” services are those services that vulnerable children, young people and their families readily access in the community. This includes services like early childhood services, child and family centres, schools, general practitioners, housing providers and Centrelink.

9. **Differential response:**

Differential response is a Care and Protection Service practice that allows for more than one method of initial response to reports of child abuse and neglect. This recognizes variation in the nature of reports and the value in responding differently to different types of abuse and neglect.

10. **Supported referrals:**

Supported referrals are sometimes referred to as warm or friendly referrals and are referrals where the person referring a person to another service makes
contact with the service first. This is done either through a telephone call to make the referral or by introducing the client to the other service.

11. “No wrong door”- single entry points for accessing services:

“No wrong door” approaches refer to a service system that welcomes people in need of services regardless of the agency where they try to gain access to services. This requires the service system to commit to responding to the needs of individuals either through direct service delivery or supported linkages to other appropriate services.

12. Child/young person centred practice:

Child /young person centred practice means that decisions and actions are founded on an understanding of how they will affect the child or young person and their development, wellbeing and safety. To do this you have to engage with the child or young person and actively involve them wherever possible in issues that concern them.

13. Family focused practice:

Family focused practice considers each family member holistically and in the context of their lives. Practitioners work in partnership with families and support them to identify their concerns and priorities, to recognise their strengths and to make informed decisions. Control over the goals and content of intervention always remains with the family. In addition, the extended family and community networks provide potential resources and support, which will be taken into account in service planning and delivery.

Strengths based practice:

This is practice that does not focus on problems but recognizes the strengths that children, young people and their families have and works to build on those strengths and abilities and on the progress that is achieved. At the same time however, strengths based practice acknowledges the issues and barriers that prevent service users from achieving their goals.
14. Evidence based, evidence growing practice:

Evidence based practice refers to those practices or programs that have proven to be successful through research methodology and evaluation and have produced consistently positive outcomes. Evidence based practices and programs that have shown the greatest levels of effectiveness are those that are able to be applied to different settings and population groups and through research and evaluation proved to be effective.

15. Cultural competence:

Cultural competence is the knowledge, awareness and skills that are utilised by practitioners to provide services that promote and advance cultural diversity and recognize the uniqueness of individuals and their culture background and beliefs.

16. Culturally responsive practice:

Culturally responsive practice acknowledges the diverse social, cultural and economic backgrounds of clients and considers these factors when designing interventions that meet their individual needs.

17. Lead agency:

The lead agency is the agency that takes on the main role of case management for people.

18. Case management:

Case management is a collaborative process of assessment, case planning, case work and case coordination, facilitation and advocacy for service options to meet the individual needs of clients. Case management can utilise of a variety of active engagements strategies including telephone contact, email, assertive out-reach drop in and appointment based interactions.

19. Case work:

Case work is the regular direct, contact with people that supports them to implement their case plan.
20. Case coordination:

Case coordination is a feature of case management and reflects the role often adopted by the case manager in the lead agency. Their role is to collaboratively manage and coordinate the multiple services that a client may require.

21. Collaborative practice:

Collaborative practice is when individuals or organizations work together to address common problems and deliver outcomes that are not as easily or effectively achieved by working alone. It is characterized by strong interdependent relationships between organizations underpinned by high levels of trust. Integrating services to provide a “one stop shop” for people with multiple needs to provide a single point of access to services is one way of working collaboratively.

GUIDELINES TO SUPPORT THE IMPLEMENTATION OF THE PRACTICE FRAMEWORK:

The guidelines are designed to support agencies implement the Practice Framework. They are not prescriptive but articulate specific areas for practice development across the service system.

1. Active engagement and assertive outreach with vulnerable and hard to engage children young people and their families – strategies to increase service participation, retention and deliver services to hard to reach children, young people and their families
2. Active holding – strategies to maintain connections and provide support to clients who are waiting to access a service/s
3. Supervision and reflective practice
4. Collaborative leadership
5. Information sharing and client confidentiality.