

Program Specifications

Aboriginal Child and Family Centres

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1. Purpose

The purpose of the program specifications is to assist Aboriginal Child and Family Centre (ACFC) funded service providers and Department of Communities and Justice (DCJ) NSW contracting staff to understand the broad parameters of the ACFC Program, including program outcomes, the target group, and examples of activities that might be delivered under the program, in the context of the Departments contracting system and the NSW Human Services Outcomes Framework.

These program specifications may be amended or replaced from time to time by DCJ and Service Providers should comply with the current version of the program specifications.

2. Legislative framework

The Human Services Agreement (HSA) outlines obligations of the service provider, including the condition that services be provided in accordance with all applicable laws and accreditation requirements, including but not limited to the legislation, guidelines, frameworks and policies referred to at the Family and Community Services website.

The HSA also states that service providers must ensure that all personnel engaged in providing services are properly authorised, accredited, trained and experienced to provide the services, and have completed all mandatory pre-employment screening (i.e. working with children check clearance).

Please refer to the HSA for full details of the requirements under this contract.

The primary legislation that underpins DCJ provision of funding to non-government organisations under the TEI Program is the *Community Welfare Act 1987* (CW Act) and the associated regulations.

The *Community Welfare Act 1987* aims to protect and improve the wellbeing of the people of NSW, with a focus on promoting the welfare of the family, Aboriginal people, and those who are disadvantaged. The *Community Welfare Act 1987* enables the Minister for Family and Community Services to:

- provide grants
- coordinate the allocation of funds
- review, monitor and evaluate community welfare services and social development programs where the program objectives are consistent with those of the Act.

The *Children and Young Persons (Care and Protection) Act 1998* (Care Act) also impacts on the delivery of DCJ funded programs. The Care Act broadly aims to ensure that:

- children and young people receive care and protection necessary for their safety and wellbeing
- that services responsible for their care provide an environment free of violence and exploitation, and provide services that foster their health, developmental needs, spirituality, self-respect and dignity
- appropriate assistance is provided to parents and carers in the performance of child-rearing responsibilities to promote a safe and nurturing environment. Service providers

should be mindful of their mandatory reporting obligations under the Care Act, when delivering services under the TEI program. Mandatory reporters are those who deliver services directly to children and young people. The Care Act also requires any person who manages an employee or

children and young people. The Care Act also requires any person who manages an employee or volunteer from such services to report suspected risk of

3. Policy context

The Department of Communities and Justice (DCJ) is the leading provider of community services in NSW and the largest child protection agency in Australia. The Aboriginal Child and Family Centres provide a single point of access to a range of services, supports and information for Aboriginal families and children who are overrepresented in the child protection system. This contributes to the DCJ objective that Aboriginal people, families and communities have better outcomes.

The Aboriginal Child and Family Centres play a role in achieving the *Human Services Outcomes* for all children, young people, families and communities to:

- live a healthy life
- learn, contribute and achieve
- contribute to and benefit from our economy
- be safe
- participate and feel culturally and socially connected
- contribute to decision making that affects them and live fulfilling lives.

The Centres also broker and coordinate a range of integrated services, responsive to local needs and priorities, which is consistent with the *DCJ's Strategic Statement* in that these initiatives will ensure that Aboriginal children, families and communities thrive. The program also contributes to DCJ's mission to enable people to participate fully in NSW social and economic life and build stronger, more sustainable and inclusive communities.

Cultural issues in the provision of DCJ funded services

As a DCJ funded organisation, Aboriginal Child and Family Centre service providers are responsible for ensuring that the services provided are 'culturally capable'. This means that funded organisations will take account of cultural, linguistic and religious issues in the design and delivery of Aboriginal Child and Family Centre services so that services are appropriate to the characteristics and circumstances of Aboriginal children and their families. Some practical aspects of culturally capability include:

- the employees of the service reflect the cultural diversity of the Service's target population
- the service has clear policies and strategies in place for working with families from culturally diverse backgrounds
- employees are able to provide information to clients and to use resources that are linguistically and culturally appropriate
- training is provided for service staff in culturally reflective casework practices that are appropriate for communities.

If required, funded organisations will source interpreter services independent of DCJ. They are also required to report on their use of interpreter services through the annual DCJ acquittal/accountability process.

4. Program overview

4.1 Objectives

In the DCJ funded programs system, the Aboriginal Child and Family Centre (ACFC) program forms part of a wide range of prevention and early intervention initiatives delivered by non-government organisations and by NSW Government and Commonwealth Government agencies.

The ACFC Program is delivered as a universal service, geared toward the targeted service group of Aboriginal and Torres Strait Islander children and families. The shared broad objective of this program is to prevent the further escalation of issues that may potentially lead to vulnerabilities while delivering early childhood education and integrated child and family support services. These diverse services are designed to help children, young people and families across the spectrum of needs, from universal programs for families who need minimal basic support or guidance right through to intensive, integrated, multi-component programs for families with complex issues.

The objectives for the program are:

- increase the proportion of Aboriginal and Torres Strait Islander children participating in quality early childhood education and care
- increase the number of Aboriginal and Torres Strait Islander people accessing parent and family support services
- increase integration of services delivered through the centre by partner organisations
- ensuring Aboriginal and Torres Strait Islander children's health checks and vaccinations are delivered through the Centres.
- ensuring Aboriginal and Torres Strait Islander people with disability have access to appropriate co-ordinated wrap around services, well designed programs that are fully inclusive of all participants.
- ensuring service provision in supporting Aboriginal and Torres Strait Islander children and young people at risk
- ensuring there is an emphasis on the value of cultural diversity and strengthen its commitment to cultural inclusiveness

Aboriginal service providers are to develop and implement programs and provide services tailored to the needs of the community.

4.2 Program model

ACFCs deliver a cultural model of care, based on Aboriginal and Torres Strait Islander ways of knowing, being and doing. The services that exist within an ACFC are delivered by Aboriginal people, for Aboriginal people through an Aboriginal Community Controlled Organisation (ACCO). This increased access to culturally safe services directly contributes to Closing the Gap.

The provision of a regulated early childhood education and care (ECEC) service is a mandatory component of the ACFC service model. ACFCs should provide a mix of long day care or preschool, which is targeted to address gaps in existing service system. The ECEC service needs to be a new service, that creates new ECEC places. The ECEC must be operated from the ACFC asset.

The ACFC must also:

- support Aboriginal and Torres Strait Islander families in accessing a range of other integrated services such as immunisations, health checks, disability screening and medical assessment checks such as speech pathology and paediatric services.

It may also:

- provide support services for families and parents, including parenting programs, adult and child counselling, literacy programs, occupational therapy and other allied health services.

4.3 Program logic

The Aboriginal Child and Family Centre Program Logic has been developed to illustrate the expected results from the program (Appendix A).

The Service Activity Description at Appendix B includes higher order population results sought from Aboriginal Child and Family Centres are:

- Aboriginal and Torres Strait Islander children are born and remain healthy
- Aboriginal and Torres Strait Islander children have the same health outcomes as non-Aboriginal children
- Aboriginal and Torres Strait Islander children acquire the skills for life and learning; and
- Aboriginal and Torres Strait Islander families have ready access to suitable and culturally inclusive early childhood and family support services.

Note: These are desired population-level results that ACFC programs may contribute to. It is not expected that ACFCs are solely responsible for achieving these outcomes. Performance reporting on the Objectives and Service Activities listed at Appendix B will contribute to achieving higher order population results.

5. Program Description

The Aboriginal Child and Family Centre Program was funded under the Indigenous Early Childhood Development National Partnership Agreement as a Closing the Gap initiative, over the period 2008-2014. The National Partnership Agreement expired on 30 June 2014 with residual funding ending on 30 June 2016. The NSW Government commenced funding the program from 1 July 2016. The Centres coordinate a mix of culturally safe services and supports, responsive to community needs, including early childhood education and care, parent and family support and maternal and child health.

Aboriginal Child and Family Centre funding will be provided to non-government service providers in six DCJ Districts to coordinate supports and services and provide early childhood education and care which address the needs of and improve the outcomes for Aboriginal and Torres Strait Islander children and their families.

The Aboriginal Child and Family Centre program will contribute to the following priorities:

Premiers and NSW State Priorities

- Providing the highest quality education
- Well connected communities with quality local environments
- Putting the customer at the centre of everything we do
- Breaking the cycle of disadvantage.

Specifically:

- Increase the proportion of Aboriginal students attaining year 12 by 50 per cent by 2023, while maintaining their cultural identity.
- Decrease the proportion of children and young people re-reported at risk of significant harm by 20 per cent by 2023.
- Increase the proportion of public school students in the top two NAPLAN bands (or equivalent) for literacy and numeracy by 15 per cent by 2023

DCJ Strategic Statement

- Aboriginal people, families and communities have better outcomes
- Children and young people are protected from abuse and neglect
- People are assisted to participate in social and economic life

Other priorities the program contributes to are in partisan with various NSW Government agencies such as NSW Health and Department of Education NSW.

Specifically:

NSW Health:

- comprehensive and regular antenatal health checks
- referral and support to access other services
- health promotion and community development activities
- postnatal checks and support

- information on infant feeding and nutrition

Department of Education NSW:

- Ensuring that Aboriginal students have access to quality learning and training environments.
- Supporting parents and/or carers and families, within the context of improving education outcomes for children.
- Ensuring that Aboriginal children have skills for learning by the time they start school by providing access to a variety of relevant and culturally inclusive prior to school and preschool programs.
- Targeting efforts to ensure that Aboriginal students develop appropriate reading, literacy and numeracy skills that reflect parity with their non-Aboriginal peers throughout the successive stages of learning

Evidence shows that early childhood is a vital time to detect and address any factors that can compromise a child's health and development. There is substantial proof that by preventing health and developmental problems, or intervening early when they occur, we can improve the health that child experiences across the rest of their lifespan. This also aids in improving a child's chances of engaging with education and getting the best learning outcomes possible as well as enhancing their capacity to live fulfilling and productive lives that contribute to the economic and social wellbeing of their communities.

The Aboriginal Child and Family Centre service model is based on the evidence of the importance of providing a coordinated system of supports and services for children and families from prenatal to school entry so as to remove the burden on parents of identifying and seeking out different programs and to integrate the early childhood assets of a community.

There is often a lack of continuity of care, for example, between maternity services, and the child and family health services that operate in the community. The Aboriginal Child and Family Centre service model bridges this gap through the integration of existing services in the community, delivering better outcomes for families and children. This builds on a strong evidence base to suggest that a combined (or family) approach to intervention is effective.

While there are examples of high quality, innovative service provision in Australia in some locations, early years services are fragmented and access to some services, particularly for allied health and specialist services, can be limited.

The Aboriginal Child and Family Centres have been the focus of two evaluations at a national and state-wide level. The national evaluation, conducted by Urbis found that:

- services provided through Centres are integrated and coordinated
- there are demonstrated effective partnerships between Indigenous and non-Indigenous early childhood and related service providers
- there is an increased supply of early childhood workers
- early childhood services are perceived to be culturally secure
- the local community is engaged in the design and delivery of services
- Indigenous women report fewer barriers to accessing services
- engagement leads to more relevant service design, higher levels of trust and higher service usage when supported by an overarching strategy

5.1 Services

Aboriginal Child and Family Centre service providers will deliver early childhood education and care service coordinate the delivery of a range of other integrated services and interventions that accord with the local service system. These are further detailed in the Service Activity Description at Appendix B and are categorised into the following activity types:

- Early childhood education and care (delivered)
- Parent and family support (coordinated)
- Maternal and child health (coordinated)
- Other relevant early childhood support services (coordinated).

Additional service provision (optional):

- Disability support services (coordinated)
- Family support advocacy (coordinated)
- Housing related advocacy (coordinated)

5.2 Priority Cohort

The priority client groups for this program are:

- Aboriginal and Torres Strait Islander children aged 0–8 years
- Parents of Aboriginal and Torres Strait Islander children aged 0–8 years
- Service providers to parents of Aboriginal and Torres Strait Islander children aged 0–8
- Service providers to Aboriginal and Torres Strait Islander children aged 0–8
- Their communities.

6. Performance and outcome measures

The overarching higher order results sought from Aboriginal Child and Family Centres are:

- Successful engagement of families as well as good outcomes in relation to parenting skills and child development.
- Every child attending the centre has access to of high-quality early childhood education delivered by an early childhood educator.
- Increased proportion of Aboriginal and Torres Strait Islander three and four years old participating in quality early childhood education and development and childcare services.
- Increased school readiness – Aboriginal and Torres Strait Islander children go on to attend school regularly.
- Increased proportion of Aboriginal and Torres Strait Islander children have had all age-appropriate health checks and vaccinations.
- Increased proportion of Aboriginal and Torres Strait Islander children and families accessing a range of services offered including but not limited to childcare, early learning, child and maternal health and parent and family support services.
- Services and programs understand and privilege the local cultural context.
- Services are committed to a long term, evidence informed approach.

The Aboriginal Child and Family Centre program performance measures will establish whether the program is achieving the intended program results.

The performance measures will help inform how well the individual service models are performing in each site and will form part of the minimal data set for reporting purposes. These are outlined in the ACFC Service Activity Description at Appendix B and are consistent with a Results Based Accountability framework measuring performance across three domains:

- How much?
- How well?
- Is anyone better off?

7. Contract and Performance Framework

Managing and monitoring performance is critical to achieving better outcomes for our clients. The DCJ contract management framework aims to support organisations to deliver high performing services throughout the duration of the contract lifecycle.

Providers have a broader obligation to comply with the requirements of DCJ's contract and performance management framework. Sitting under the Framework is the Aboriginal Child and Family Centre Program performance and outcome framework.

This framework is intended to monitor the delivery of performance and outcomes.

7.1 Program data collection and reporting

Aboriginal Child and Family Centre service providers are required to report to DCJ annually between 1 – 31 July on the previous financial year data that respond to the performance measures contained in the ACFC Service Activity Description in Appendix B, using a data collection tool/process provided by DCJ. This means measuring the number of activities provided through the Centre, the numbers of children families accessing ACFC services, the quality of activities and service provided, and the percentage of services and activities overall that contributed to achieving the program results.

Service providers are also required to provide updates to DCJ and participate in program evaluations as required.

The reporting requirements of the DCJ *HSA Schedule* referenced in clause 19.4(a)(i) and the supplementary conditions in clauses 12, 13 and 14 must be adhered to. Service providers must ensure that adequate financial and operational records are kept and maintained while delivering Aboriginal Child and Family Centre services, and that these records are made available to DCJ upon request. These include but are not limited to:

- Financial records
- Program level performance records
- Records of workflow
- Maintenance and repairs, including compliance with legislative and statutory obligations (i.e. smoke alarm testing and replacement, and Annual Fire Safety Statements)

Please note: these reporting requirements can change from time to time and service providers will be notified of any changes should they occur.

8. Notified policies and standards

Service providers need to follow the following policies and standards in the delivery of services:

- Working with Children Check
- Requirements of the Department of Communities and Justice Funded Contract Management Framework.
- Principles for working with families experiencing family or domestic violence (Attachment C)
- All early childhood education service requirements administered by the regulators

Please note: these policies can change from time to time and service providers will be notified of any changes should they occur.

9. Tenure Arrangements

Tenure arrangements may vary for each ACFC site and will be negotiated and set out in the Funding Agreement.

ACFCs operating on Crown Land: Lease or Sub-lease Agreement

Those ACFCs operating on crown land or from a government asset will need to enter into a Sub-Lease Agreement.

The Sub-lease Agreement will cover your occupancy of the land and/or premises (owned by the NSW Government) from where you will deliver ACFC services.

Sub-lease Agreements are mandatory for services operating on government land and should cover the term of your funding agreement and will be renewed in-line with funding contract renewals.

The Department will charge the Service Provider NIL rent during the tenancy period, with the proviso that the Service Provider is responsible for the following:

- Payment of relevant council rates and charges.
- Maintenance and repairs, as set out below.
- Hold a current Contents Insurance Policy for the property.

ACFCs operating on Private Land: Restriction on Title

Where an ACFC is built on land owned by a third party or the ACCO, the ACCO must agree to a restriction on title as a precondition for funding.

Note that the Funding Agreement cannot be executed, or funds paid until a restriction on title has been agreed and is in place.

- The restriction on title will be in place up for a period of 10 years;
- ACCOs with a restriction on title cannot sell the land and/or asset without ministerial permission,
- DCJ has the right to appoint another ACCO to operate the ACFC service if for any reason the ACCO is unable to deliver the services for the 10 year period.

ACFCs operating on private land, will be responsible for:

- Maintenance and repairs, as set out below.
- Hold a current Building and Content Insurance Policy for the property.

10. Asset Maintenance Responsibilities

Below sets out the Asset Maintenance and Repairs obligations for ACFC Service Providers and DCJ. Further detail on the maintenance and repair responsibilities of ACCOs operating an ACFC are set out in the Funding Agreement.

ACFCs need to develop appropriate capability and competencies to properly maintain their sites during the lifespan of service delivery. This is important to ensure that an ACFC can deliver essential services, including but not limited to early childhood and care services and health services, to the families and children.

Annual service delivery funding of up to 1 million per year is expected to be utilised for the provision of asset maintenance and repair, as detailed below. DCJ recommends a proportion of annual spending (10% of annual funding) to be quarantined for building and equipment upkeep and maintenance.

As per the funding Agreement DCJ will monitor compliance with the maintenance and repair requirements, including compliance with legislative and statutory obligations (i.e. smoke alarm testing and replacement, and Annual Fire Safety Statements).

| | ACFCs operating on Crown Land: Lease or Sub-lease Agreement | ACFCs operating on Private Land: Restriction on Title |
|------------------------------|---|--|
| ACFC Responsibilities | <ul style="list-style-type: none"> General Maintenance, this is for day-to-day upkeep of the property including regular internal and external cleaning and garden maintenance. Reactive Maintenance, this is for the day-to-day repair or replacement of items that have failed or broken. This includes items that break in service or items that may be vandalised. Preventative Maintenance, this includes: <ul style="list-style-type: none"> ○ Servicing of air conditioning; ○ Electrical Test and Tagging of equipment in the facility; ○ Pest control activities, ○ Fire extinguishers and kitchen blankets. Essential Services, this includes: <ul style="list-style-type: none"> ○ Fire safety items including smoke alarms and fire panels; ○ Termite inspections; | <ul style="list-style-type: none"> Planned maintenance, this is for cyclic maintenance of the facilities and is associated with items reaching the end of their effective life. General Maintenance, this is for day-to-day upkeep of the property including regular internal and external cleaning and garden maintenance. Reactive Maintenance, this is for the day-to-day repair or replacement of items that have failed or broken. This includes items that break in service or items that may be vandalised. Preventative Maintenance, this includes: <ul style="list-style-type: none"> ○ Servicing of air conditioning; ○ Electrical Test and Tagging of equipment in the facility; ○ Pest control activities, ○ Fire extinguishers and kitchen blankets. |

| | | |
|-----------------------------|--|---|
| | <ul style="list-style-type: none"> ○ Thermostatic mixing valves (TMV); and ○ Electrical switchboards. | <ul style="list-style-type: none"> • Essential Services, this includes: <ul style="list-style-type: none"> ○ Fire safety items including smoke alarms and fire panels; ○ Termite inspections; ○ Thermostatic mixing valves (TMV); and ○ Electrical switchboards. • Undertake regular property inspections to ensure the property is maintained to a suitable standard. • Repair of major structural defects or damage to the building. • Building Insurance – as the building owner, the ACCO or third party insures the building. |
| DCJ Responsibilities | <ul style="list-style-type: none"> • Planned maintenance, this is for cyclic maintenance of the facilities and is associated with items reaching the end of their effective life. • Planned Maintenance is not expected during the life of this program, DCJ will monitor and advise Service Providers if planned maintenance activities are required. • Undertake regular property inspections to ensure the property is maintained to a suitable standard. • Repair of major structural defects or damage to the building, unless intentionally caused by the service provider or other parties. • Building Insurance – as the building owner, DCJ insures the buildings through Treasury Managed Funds (TMF) and the Self Insurance Corporation. | |

Support for ACFC service providers

Where the Service Provider requires advice about engagement of a contractor or general property management advice, state-wide program team is able to provide this advice, however it is not the role of the DCJ to engage a consultant or contractor on behalf of the service provider.

Communication channel

The representative who maintains regular contact with ACFC service providers are usually the Commission and Planning Officers (CPOs) and/or Directors. It is anticipated that the service provider would escalate unresolved property issues to their DCJ District representative or the state-wide program team.

Asset Locations:

There are 9 existing Aboriginal Child and Family Centres in the following locations:

| District | Suburb | Centre |
|----------------------|-----------------|---------------------------|
| Western Sydney | Mt Druitt | Yenu Allowah |
| Western Sydney | Doonside | VACANT |
| South Western Sydney | Minto | WaranWarin |
| Hunter New England | Gunnedah | Winanga-Li |
| Hunter New England | Toronto | Nikinpa |
| Western NSW | Brewarrina | Dhirraway Dhaarun Bawu |
| Western NSW | Lightning Ridge | Warranbaa Dhurrali |
| Illawarra/Shoalhaven | Nowra | Cullunghutti |
| Northern NSW | Ballina | Jarjum Bugal Nah |

11. End of contract requirements

Handover

The Service Provider must do all things reasonably required of the Program by the Department to ensure there is a smooth and efficient transfer of responsibility for the performance of the obligations outlined in the Humans Services Agreement.

Program Management

The program management function within DCJ will be performed by Transforming Aboriginal Outcomes (TAO) in partnership with the DCJ Districts who will be responsible for contract management functions.

Financial Acquittal and reporting

Upon end of the program contract term Service Providers are to comply with the department's annual accountability process, this includes identifying and returning any unspent funds. The statement is required to be provided to the local Commissioning and Planning Officer, in writing as part of the contract management process.

Assets Register

Service Providers are required to account for any assets purchased using DCJ funding. Assets above \$5,000 must also be recorded on your Asset Register and submitted with your accountability information.

Transfer of assets and information

Please ensure that all keys to DCJ owned assets are handed over to the relevant Commissioning and Planning Officer upon the end of the contract term. Service providers are also required to ensure all information containing sensitive client data are quarantined, transferred to DCJ or if not required by DCJ, have all data permanently deleted using the appropriate technology.

Exercising an extension option

For DCJ and the Service Provider an extension option must be exercised in accordance with the terms of the program agreement. This can, for example, be achieved by notifying the Program or Contract management team of the intention to exercise the option if specified within the agreement.

Evaluation

Service providers will be required to contribute to both quantitative and qualitative evaluation activities. Wherever possible, data will be sourced from existing data collection systems and activities.

Appendix A. Aboriginal Child and Family Centre Program Logic

| 1. PROBLEM | 2. OBJECTIVE | 3. EVIDENCE | 4. PROGRAM: core component & flexible activities | 5. MECHANISM OF CHANGE | 6. OUTPUTS & OUTCOMES | | | |
|---|--|---|--|---|--|--|---------------------------------|----------------------------------|
| | | | | | Immediate outputs (within 1 st yr) | Short term outputs/outcomes (within first 3 yrs) | Medium- term outcomes (3-5 yrs) | Long- term outcomes (6+ yrs) |
| <p>Early childhood inequalities between Indigenous and non-indigenous people in Australia are well documented. These inequities set in motion the beginning of significant lifelong discrepancies – in health, educational achievement and wellbeing – between these groups</p> <p>Parents are not using mainstream health and well-being services. As Parents cannot access specialist medical services for themselves and their children due to high costs and lack of transport.</p> | <p>Aboriginal children have the same health outcomes as non-Aboriginal children</p> <p>Aboriginal children acquire the skills for life and learning (Increase in proportion of Aboriginal children participating in quality early childhood education and care)</p> <p>Aboriginal families have access to relevant services and support (Increase number of Aboriginal people accessing parent and family support services; Increase integration of services through the ACFC by partner organisations; ensuring that a range of maternal and child health services are delivered to</p> | <p>High-quality early intervention/ education improves children's lifelong outcomes across all areas – education, health (mental and physical) and wellbeing</p> <p>Early intervention/ education is more effective, particularly for vulnerable families, when it is holistic – i.e addresses children's and families' learning needs taking into account the contexts in which they live</p> <p>Services are more effective for Indigenous children and families when they are aware of and address cultural competence/cultural safety in their service delivery</p> | <p>Core:</p> <p>Quality early childhood education and care</p> <p>Culturally safe environment for children and families</p> <p>Integrated service model, including access to range of maternal and child health services</p> <p>Person centred service delivery</p> <p>Aboriginal-led organisations</p> <p>Data management systems for monitoring and quality improvement (developed by DCJ)</p> <p>Flexible: Services provided responsive to local community needs and priorities</p> | <p>Centre (and services provided at the centre) is a trusted, comfortable, culturally safe community hub</p> <p>Quality early childhood education and care and parent support services are provided to support development and health and wellbeing of the children</p> <p>Barriers for families in accessing early childhood education and care, and family support services are addressed (cost, lack of trust, transport, complexity of navigating service systems, etc.)</p> <p>Holistic and flexible support for children and families</p> | EDUCATION & SKILLS | | | |
| | | | | | Quality early childhood education and care provided | Improved development and cognitive outcomes in early years | Successful transition to school | Increase in academic achievement |
| | | | | | | Improved language and communication skills | | |
| | | | | | Children 0-3 attend ECEC | Improved school readiness | Regular school attendance | |
| | | | | | | Families feel early learning is important, and confident in their role in parenting and early learning | | |
| | | | | | Children 3-5 attend 15 hrs per week | Improved parenting skills and techniques | | |
| | | | | | HEALTH | | | |
| | | | | | Health needs of children are identified and access to health services facilitated by the ACFC (including immunisation and child health checks) | More children have <u>timely</u> age appropriate immunisation and receive child health checks | | |
| | | | | | | Improved maternal health and wellbeing | | |
| | | | | | | Improved physical, psychological and emotional wellbeing of children (and carers) | | |
| Increase in health services received by children | | | | | | | | |
| Families engage with maternal health services | | | | | | | | |

| | | | | | | | |
|---|---|---|--|--|---|--|--|
| <p>Parents do not have the support to find affordable, safe housing.</p> <p>Parents cannot work if their children are not in care. Additionally, parents may not have the confidence or support needed to obtain employment or commence further education and training.</p> <p>Mainstream local services often ignore the cultural and personal needs of their Aboriginal clients, sometimes taking a deficit approach rather than strengths-based.</p> <p>Children and their families who are at risk of harm require safe environments.</p> | <p>Aboriginal families)</p> <p>Service providers are culturally capable (Aboriginal families have ready access to suitable and culturally inclusive and early childhood family support services)</p> <p>Build the social capital of the Aboriginal communities ⁴</p> | <p>Honest engagement, building trust, working with community members is essential</p> <p>A focus on empowerment and working from strengths makes a difference</p> | <p>Wide range of support and services available such as employment, housing, money management, legal services, transport, play groups, cultural activities, community events, mental health, disability support, supervised child protection contact visits, parenting skills, etc</p> | SOCIAL & COMMUNITY | | | |
| | | | | ACFC links parents/carers to range of services and support | Families have increased connections to social networks/identity/land/culture (feel culturally and socially connected) | Feelings of belonging | |
| | | | | Families participate in social/community activities | | | |
| | | | | EMPOWERMENT | | | |
| | | | | Access to services facilitated by trusted networks | Parents/carers have sense of ownership and control over services received | Increased choice and control over life decisions | Improved self-efficacy and self-esteem |
| ACFC provides opportunities for parents to contribute to decision-making | The ACFC contributes to decision-making at the community and sector level | Development of strong Aboriginal-led organisation | | | | | |
| Families contribute to decision making within the ACFC | | | | | | | |
| ACFC employs Aboriginal staff | | | | | | | |
| ACFC participates in inter-agency meetings | | | | | | | |
| SAFETY | | | | | | | |

⁴ Social capital is defined as “the networks of relationships among people who live and work in a particular society, enabling that society to function effectively”

| | | | | | | | |
|--|--|--|--|--|--|--|---|
| | | | | | <div>Culturally safe services and support provided</div> <div>Families who have been personally involved in ROSH & OOHC access support from the ACFC (e.g. accredited to deliver OOHC services, facilitating parent contact, kinship care, etc)</div> | <div>Families perceive that the ACFC provides a culturally safe place where they can go for services and support</div> <div>Families who have been personally involved in ROSH and OOHC feel the ACFC has enhanced parenting skills and helped strengthen family relationships</div> | <div>Improved perceptions of safety</div> <div>Reduced likelihood of children entering the child protection system (preservation & restoration)</div> |
| | | | | | ECONOMIC | | |
| | | | | | <div>Parents/Carers engage with training and employment services through ACFC</div> | <div>Increase in work ready skills</div> <div>Increased number of parents/carers enrolled in education and/or employed</div> | <div>Improved employment/capacity for employment</div> |
| | | | | | HOME | | |
| | | | | | <div>Families access housing support</div> | <div>Increased number of families in secure housing / Increased housing stability</div> | |
| <div>↓ Feeds into ↓</div> <div>Process Evaluation: Reach, acceptability, service delivery & referrals & Cost Monitoring For economic evaluations</div> | | | | | <div>HUMAN SERVICES OUTCOMES FRAMEWORK</div> <div><div><div>SOCIAL & COMMUNITY</div><div>EDUCATION & SKILLS</div><div>ECONOMIC</div><div>HEALTH</div><div>HOME</div><div>SAFETY</div><div>EMPOWERMENT</div></div><div><div>Primary Impacts (DIRECT Client-level outcomes)</div><div>Secondary Ripples (Related individual/family-level outcomes)</div><div>Tertiary Ripples (Broader community-level outcomes)</div></div></div> | | |

Appendix B. Aboriginal Child and Family Centre Service Activity Description

| | <i>Aboriginal Child and Family Centre</i> |
|-----------------------------------|---|
| Population results* | <ul style="list-style-type: none"> Aboriginal and Torres Strait Islander children are born and remain healthy Aboriginal and Torres Strait Islander children have the same health outcomes as non- Aboriginal children Aboriginal and Torres Strait Islander children acquire the skills for life and learning; and Aboriginal and Torres Strait Islander families have ready access to suitable and culturally inclusive early childhood and family support services. <p><i>*Note: these are desired population-level results that ACFC programs may contribute to. It is not expected that ACFCs are solely responsible for achieving these outcomes. Performance reporting on the Objectives and Service Activities listed in this document will contribute to high order results.</i></p> |
| Objectives | <ul style="list-style-type: none"> Increase the proportion of Aboriginal and Torres Strait Islander children participating in quality early childhood education and care Increase the number of Aboriginal and Torres Strait Islander people accessing parent and family support services Increase integration of services delivered through the centre by local partner organisations Ensuring Aboriginal and Torres Strait Islander children's health checks and vaccinations are coordinated and delivered through the Centres. |
| Client Group | <ul style="list-style-type: none"> Aboriginal and Torres Strait Islander children aged 0–8 years Parents of Aboriginal and Torres Strait Islander children aged 0–8 years Service providers to parents of Aboriginal and Torres Strait Islander children aged 0–8 Service providers to Aboriginal and Torres Strait Islander children aged 0–8 Their communities. |
| Sub-group for this project | <ul style="list-style-type: none"> Children aged 0–8 years Parents of children aged 0–8 years. |

Aboriginal Child and Family Centre Service Activities

| | |
|---|---|
| Parent and family support (coordinated) | <ul style="list-style-type: none"> • Provide information about parenting, children's health and development and relevant services available. • Facilitate the delivery of adult learning and mentoring activities to assist with skill development. • Support Aboriginal families to build connections with appropriate services, community forms of supports and informal social networks with other families. • Establish and maintain linkages within the local Aboriginal networks and broader child and family network with active referrals to and from this network of services. • Provide innovative, flexible and culturally competent initiatives within the Centre and in convenient outreach settings in order to engage Aboriginal children and families who do not usually access services. • Manage and support an integrated intake and referral process and a multi-disciplinary group of services. • Build the capacity of existing local services to enable partner agencies to provide culturally competent services to Aboriginal families. • Use a wide range of planning and consultative mechanisms to involve Aboriginal children and families, Aboriginal Elders, Aboriginal and non-Aboriginal community members and local agencies from across the LGA in planning and decision making. |
| Maternal and child health (coordinated) | <ul style="list-style-type: none"> • Broker and coordinate a range of existing services and supports to families based on the existing service system and increase access to antenatal maternal and child health. • Provide a culturally competent and safe coordination and integration point for child and family services. • Facilitate and initiate connections between the Aboriginal community, Aboriginal families, organisations and local service providers. |
| Early childhood education and care (delivered) | <ul style="list-style-type: none"> • Provide a mix of long day care, preschool or occasional care which is targeted to address gaps in existing service system in order to avoid duplication. • Prioritise access to childcare for Aboriginal children, especially those not attending any type of formal care, and also provide access to non-Aboriginal children where appropriate. • Incorporate best practice models in providing children's services for Aboriginal children and families to deliver a culturally competent service. • Deliver a culturally responsive curriculum based on a strong cultural identity, and create a safe environment that supports families to engage with the service and the Centre as a whole. • Develop partnerships and networks within the early childhood service sector to facilitate better coordination and integration of services. |

| | |
|--|--|
| Other relevant early childhood support services coordinated | <ul style="list-style-type: none"> • Engage and actively participate in local cultural events and activities. • Provide early literacy support to parents and/or children aged 0–8 years and supports parents and/or children in transition to school. |
| Disability wrap around services (coordinated) - <i>OPTIONAL</i> | <ul style="list-style-type: none"> • Support services to children and families to develop the skills and capabilities they need to gain independence and participate in society by enabling support networks and opportunities for choice, and inclusion. |
| Family support advocacy (coordinated)- <i>OPTIONAL</i> | <ul style="list-style-type: none"> • Providing support services to families to promote the rights & interests of people with complex family matters |
| Housing related advocacy (coordinated)- <i>OPTIONAL</i> | <ul style="list-style-type: none"> • Housing and Homelessness Advocacy support services to people needing assistance to resolve their housing and accommodation concerns. |

| Performance Measures |
|--|
| How much? |
| <ul style="list-style-type: none"> Number of parents⁵ and children⁶ who have received a service⁷ at or through the Centre Number of parents and children who have received a service at or through the Centre by activity⁸ type Number of initiatives by initiative⁹ type delivered at or through the Centre Number of occasions of delivery by activity type Number and type of service providers¹⁰ participating in the Centre integrated service system¹¹ |
| How well? |
| <ul style="list-style-type: none"> Number of parents and children who have received a service at or through the Centre by service/activity and Aboriginality. Number of parents satisfied that: <ul style="list-style-type: none"> The Centre is accessible The services delivered at or through the Centre are culturally competent. Number of parents reporting they have accessed a service at or through the Centre that they have not previously accessed. Number of service providers reporting increased capacity to assist parents and children as a result of their participation in the Centre integrated service system Number of service providers reporting increased collaborative practice resulting from their participation in the Centre integrated service system Number of service providers reporting satisfaction with the Centre integrated service system |

⁵ All references to parents include carers and extended family members.

⁶ The term 'children' is defined as those aged 0 to 8 years of age.

⁷ Includes the following service categories: childcare; early learning activities; Maternal and family health services; parenting and family support; information and referral support and advice; other services.

⁸ Activities are a subset of services and may include: supported playgroups; family support; parenting programs; occasional care; long day care; mobile care; ante-natal and post-natal care services.

⁹ Initiative includes *community engagement initiatives* such as: community events, family fun days, newsletters and *integration support initiatives* such as: interagency network co-ordination; service capacity building; professional learning and development; information sharing initiatives.

¹⁰ Defined as a team/unit delivering services at or through the Centre.

¹¹ Participation includes being a party in a formal partnership agreement; participating in cultural competency training offered at or through the Centre; provision of service activities at or through the Centre; participating in strategic planning activities relating to the Centre.

Is anyone better off?

- Number of Aboriginal children who are developmentally on track in Australian Early Development Index (AEDI) domains
- Number of parents reporting increased supportive connections to their local community
- Number of parents reporting increased knowledge of and participation in community activities, services and programs
- Number of parents reporting increased knowledge of and skills to support children's health and development needs

APPENDIX - C

ACFC CONCEPT DESIGN

The concept design for an ideal ACFC, includes:

- early learning centre (50 children)
- health zone separated from the multipurpose spaces
- new area added to be used as a sensory room and computer hub
- outdoor community facilities expanded to include a separate commercial kitchen
- staff area separated and supported with more facilities
- many rooms have the same sizes throughout the centres.

ACFC CONCEPT DESIGN

The required minimum services which have guided the concept design are:

- The provision of an early learning centre with its own outdoor play space for early childhood education and care which is the core delivery responsibility of ACFCs. The early learning centre is located at the back of the ACFC, separated from main street access to provide a safe and secure space for children. The early learning centre includes a sensory room which provides a stimulating environment to support development.
- A health area which can be used for various services, including maternal and child health services, depending on the individual requirements of communities.
- Multipurpose community area and an outdoor area which can be used for ceremonies and other community activities.
- A foyer at the front of the centre to welcome visitors and act as a common access point for the other areas in the ACFC.
- A staff room in the centre of the ACFC to allow staff to access the different areas. The staff room also includes a computer hub to be used by the staff.

Individual ACFCs may choose to deliver additional services depending on the distinct requirements of the Aboriginal and Torres Strait Islander communities they service. The concept design allows for the new centres to be used for additional services such as:

- disability support services
- family support advocacy
- housing related advocacy.

PRELIMINARY FRAMEWORK

Rollout & Delivery

- Respond to shape of land
- Respond to specific requirements to be identified by each community
- Respond to topography of the site
- Respond to demand of each location / Functional Brief to be localised
- Respond to Demographics and population size
- Opportunity to standardise some functional elements
- Different delivery management for remote verse metropolitan areas
- Off site prefabrication combined with local trades to be explored

