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Message from the Premier and Minister

The State Government is committed to a strong plan to see every South Australian child grow up safe and healthy with a prosperous future.

Child abuse and neglect is a pervasive social problem throughout Australia and many Western countries, with devastating consequences for families and communities.

The hard reality is, some families struggle to provide safe and supportive environments for their children. This may be due to trauma, disadvantage and complexity which, in many cases, has carried through generations.

In South Australia, the 2016 Child Protection Systems Royal Commission found that one in four children are reported to Child Protection authorities by age 10. This is unacceptable.

The South Australian Government is undertaking large-scale reform of the state’s child protection system. But it is not enough to just improve outcomes for children once they enter the statutory system – we must support families and children to prevent them entering the system in the first place.

This strategy is focused on the system of services that work to prevent and reduce child abuse and neglect.

Historically, these services have been funded and managed by numerous government agencies and delivered by both government and contracted non-government service providers.

This strategy outlines how we will build a system that provides the right type and intensity of supports, intervening as early as possible where risk exists, to support families and keep children safe.

We are consolidating our efforts and ensuring everything we do is based on real evidence and achieving the best outcomes for children.

Over time, we will see a reduction in cases of child abuse and neglect, and healthier family environments where children can thrive.
Message from the cross-government Taskforce

This strategy outlines how, beginning immediately and continuing over the next three years, the State Government will create a new Child and Family Intensive Support System.

The approach has been developed by the cross-government Taskforce established to lead the redesign of the state’s child abuse and neglect early intervention and prevention system, with support from the Early Intervention Research Directorate (EIRD). Service providers across government and the non-government sector have been consulted in its development.

EIRD’s extensive research illustrates the urgent need for change to better support our state’s children and families at risk of child abuse and neglect, particularly those with multiple and complex needs, so that they can live safe and positive lives together.

It is critical that we deliberately intervene – strongly and now – to disrupt the patterns of intergenerational trauma. This is essential if South Australia is to increase the number of children able to be safely cared for in their home environment and decrease the number of children who need to enter out-of-home care.

While we currently have a collection of services aimed at preventing and reducing child abuse and neglect, they are not organised as a connected system. There are significant benefits to be gained by creating an evidence-based and data-informed system.

This strategy includes the establishment of a new Intensive Support Unit within the Department of Human Services (DHS) which will be focused on providing and commissioning intensive, evidence-based services. This will involve the consolidation of some efforts currently spread across different government departments.

We are also designing and trialling new services and refining existing services as well as directly connecting this system to other related services, such as those for domestic and family violence (DFV).

Recognising the importance of supporting our workforce in this vital area of work, we are also implementing a comprehensive workforce development strategy for the sector.

EIRD’s summary research report – published together with this strategy – describes in more detail the evidence that underpins this document.

NOTE: The term Aboriginal as used in this paper refers to all First Nations peoples across Australia
The new Child and Family Intensive Support System
part of the State Government’s broader child protection reforms

Aim: intervene now and intervene strongly to disrupt the pattern of intergenerational child abuse and neglect in South Australia

**Consolidating Efforts:**
Bringing services and commissioning currently spread across multiple Government departments into a new unit in DHS

**Investing in Better Services:**
Ensuring resources are directed to services, including new pilots, that are evidence-based and best practice

**Building a Connected System:**
Improving data sharing, referral pathways, mapping and tools for screening, assessment and case management

**Supporting Priority Populations:**
Targeting services at young parents, adolescents with trauma histories, Aboriginal families with multiple service needs and high-risk Infants

**Applying Cultural Considerations:**
Developing Aboriginal cultural governance, community co-design and adhering to the Family Matters principles

**Strengthening the Workforce:**
Increasing trauma-informed care and addressing attraction and retention, skills, morale and governance

**Linking to Other Service Systems:**
Connecting to systems that support similar population groups, such as DFV, mental health, DASSA, homelessness

**Focussing on Outcomes:**
Measuring real outcomes for families, continuous system improvement and reducing the need for children to enter out-of-home care

**Supported by the Sector**

**Underpinned by Evidence**
Why South Australia needs a new Intensive Support System for children and families

One in four children in South Australia are notified to the Department for Child Protection by age 10. While this statistic is alarming, the scale of the problem is similar to that in other Australian states and countries including New Zealand, the United Kingdom and the United States of America.

Reducing the prevalence of child abuse and neglect – and the subsequent need for children to enter out-of-home care – is an intractable challenge but understanding the extent of the problem is the first step to responding to it.

We know that notifiers are consistently reporting real matters of concern – the high numbers of notifications are not a result of over-reaction or hyper-vigilance from reporters. We also know that there are high rates of repeat notifications of children and families over multiple years and intergenerationally.

This knowledge provides a foundation to intervene in a timely manner with targeted, evidence-based services as part of a coherent system. This new system represents a generational shift in South Australia’s effort to prevent and reduce child abuse and neglect and has the potential to change the lives of many families.

The impact of complexity

The need for support among South Australian families with child protection concerns is far more complex than previously understood.

In this context, “multiple and complex needs” refers to a combination of child protection concerns plus multiple other service needs including domestic and family violence, drug and alcohol abuse, mental and physical health, disability, homelessness, criminal activity and/or legal disputes. These families often have intergenerational trauma histories. There is also emerging evidence of the impact of brain injury amongst this population related to domestic and family violence.

A very large number of families reported to child protection are experiencing this kind of complexity, which places children at very high risk.

To date, a common assumption has been that families experience increasing complexity over time however evidence shows that, very often, children are born into highly complex environments and begin life with multiple and complex needs.

We know that many targeted intervention services originally designed for families with moderate risk have been actually providing services to families with high level, complex risks.
This increase in complexity means it is also important for universal services (such as schools and hospitals) to build their ability to identify and respond to these needs.

**What will the new system deliver?**

**Vision**

Within this new system, we will intervene strongly to provide the right type and intensity of supports, at the earliest possible time, in the places where children and families are living.

Over time, we will increase the number of children able to be safely cared for in their home environment and decrease the number of children who need to enter out-of-home care.

The Child and Family Intensive Support System will bring together government and non-government delivered services to create a connected, evidence-informed service system.

The new system will:

- Have a core aim of reducing the number of children experiencing child abuse and neglect
- Be integrated as a key component of the wider child protection system reform across government
- Situate service provision within the broader family context
- Focus new services to meet the needs of distinct priority populations
- Engage non-government and government service providers as partners in evidence-based service design and delivery
- Commission services with accountability for outcomes and continuous evaluation
- Be contextualised to meet local requirements in remote and regional areas
- Deliver culturally responsive services and prioritise Aboriginal families with multiple service needs
- Ensure trauma-informed practice underlies all service delivery including a health lens where appropriate
- Accurately and consistently assess client needs
- Implement fast, effective referral pathways that support client engagement and minimise gaps and duplication in service provision
- Create alternative pathways that enable a family to begin receiving services at the same time as a Child Protection notification is being processed
• Use data to monitor and evaluate service and system performance and support continual improvement and system planning
• Create strong links to Commonwealth funded services
• Support a confident, agile and skilled workforce

Consolidating efforts

Implementation of the new system will be led by a new Intensive Support Unit in the Department of Human Services, which will be established by mid-2019.

This unit will have responsibility for commissioning of family preservation, targeted intensive support and other intensive non-government services that have a child abuse and neglect early intervention and prevention function (noting that all existing contracts will be honoured).

The Child and Family Assessment and Referral Networks (CFARNs), Child Wellbeing Practitioner and Strong Start programs will be transferred from the Department of Education to the new unit in DHS. These are family-focussed services through which case management and connection to therapeutic services can be coordinated.

The Family Service Coordinators and Community Development Coordinators from Children’s Centres will also transfer to DHS but will remain embedded in Children’s Centres for service delivery.

Services within the Department for Health and Wellbeing that are integrated with other health services will remain in Health but will be closely aligned with the new DHS unit.

Investing in better services

The system will include some new pilot programs as well as refined commissioning for and design of existing intensive services.

A new intensive service for families with multiple and complex needs is currently being trialled in Adelaide’s northern suburbs. The learnings from this trial will inform future service planning across the state.

Working with EIRD and its research partners, government-run services that will form part of the new unit in DHS have been undergoing extensive development to ensure they align with the evidence.

In terms of non-government services contracted by government, EIRD’s research showed that service providers are delivering what they are contracted to do and, in many cases, have been developing their services through their own initiative, but there is room for improvement in how government commissions.
Historically, contracts for intensive services could be up to nine years long, so it is not surprising that service models can become out of date. Contracting for these services has been run out of several government departments without mechanisms in place to ensure consistency or coordination.

Some services have ended up working with families at imminent risk of child abuse and neglect when that is not what they were originally designed for. Disparate services have also not been encouraged or enabled to work as a cohesive service system.

The new system will make the following improvements:

• Form a coherent, overarching structure and vision that drives activity, against which performance can be objectively measured at a system level
• Ensure service provision is less fragmented and more coordinated
• Create a single point of government contracting to improve service integration, reduce service duplication, improve data quality and better identify service gaps
• Target services at the real level of need/complexity mapped by the research
• Ensure assessment and referral activities support families to successfully engage with the services they need and avoid circular referrals
• Design services with a whole-of-family approach

There is strong agreement that we must re-orient our system to better understand and respond to the reparative and developmental needs of traumatised children and parents. At a practice level this means embedding trauma-informed practice across all services.

**Building a connected system**

Focussing on families and being able to assess improvement in their outcomes requires the ability to monitor an individual family’s service interactions throughout the system.

This means we need to systematically capture accurate family and service provision data, and facilitate effective information sharing between different parts of the system.

The new system will allow for:

• more accurate assessment of families’ needs
• more efficient, effective and timely referral processes
• more accurate, agile and targeted system planning
• more objective and useful evaluation of services and overall system performance to support continuous improvement
This is likely to include the adoption of common screening tools across the system and a framework for better data sharing between government and non-government service providers.

**Supporting priority populations**

Given the need to focus efforts where we can have the most impact, distinct population groups will be targeted for service delivery in the new system. This will include designing services to meet their specific needs.

These groups have elevated risk of child protection system interaction (noting that they are not mutually exclusive).

**Young parents**

A very small number of young parents (mothers under 20 / fathers under 25 at the birth of their first child) account for a very large number of child protection concerns.

It is possible to reach these young parents through birthing hospitals to provide intensive, wrap-around supports.

**Vulnerable adolescents at risk of having children who will go on to enter the child protection system**

These are children aged 8-18 with complex trauma histories and multiple complexities who have been notified to child protection. We know that these children are statistically likely to have their own children very young but are not necessarily equipped for parenthood.

It is possible to reach these children through touch points such as the Youth Justice and Guardianship systems.

**Aboriginal families with multiple service needs**

Aboriginal children and families are over-represented in the child protection system; one third of children in out-of-home care in South Australia are Aboriginal.

Currently, many services across the state are under developed in their cultural governance and understanding, presenting a strong opportunity to develop services to better meet the needs of Aboriginal families with complex trauma histories.

**Families of infants at high risk in the first 1000 days of life**

These are infants with concerns reported to the child protection system before birth. Data shows that most babies with concerns raised before birth go on to have serious abuse and neglect issues again in their early years.

Further, there is strong evidence of the developmental impact of early trauma, highlighting the importance of intervening early.
Applying cultural considerations

The over-representation of Aboriginal families with child protection concerns is linked to factors including the intergenerational trauma of forced removal and the subsequent negative impacts on mental health, substance misuse, wellbeing, parenting practices, economic participation, cultural connection and identity.

EIRD’s research shows a great deal of the inequality between Aboriginal and non-Aboriginal children in the child protection system can be attributed to social and economic disadvantage experienced by the Aboriginal community.

This highlights the importance of designing a system that is culturally appropriate, continually assesses system inequity and includes the community in the design and delivery of services.

Cultural governance is essential to ensure services and programs are culturally safe and inclusive.

New service models for Aboriginal people will deliver more effective family-level supports. In addition, community capacity building programs will be implemented to strengthen Aboriginal communities’ ability to identify and support families at risk.

The system will adhere to the national Family Matters Principles:

- Applying a child-focused approach
- Ensuring that Aboriginal and Torres Strait Islander people and organisations participate in and have control over decisions that affect their children
- Protecting Aboriginal and Torres Strait Islander children’s right to live in culture
- Pursuing evidence-based responses
- Supporting, healing and strengthening families
- Challenging systemic racism and inequities

Strengthening the workforce

South Australia is fortunate to have a very dedicated and hard-working child protection and family support workforce. Frontline workers in this sector face immense challenges in their work as they strive to keep our most vulnerable children safe.

As we transition service delivery to focus more on multiple and complex needs, we need to ensure our workers have the skills and support they need to deliver these services successfully. A key element of implementing the new system will be a dedicated workforce development strategy.

The strategy will have three work streams:
• **Expanding workers’ core knowledge and capabilities** – increasing trauma informed practice, cultural understanding and the capabilities required to work with families with multiple and complex needs

• **Improving service design and governance** – ensuring resources are directed towards evidence-based services designed for specific populations that are integrated and centrally managed

• **Workforce planning** – to build the future workforce needed to achieve sustainable reductions in child abuse and neglect, including addressing recruitment and retention issues and regional workforce capacity

**Linking to other service systems**

It is also critical that the new system is integrated with other targeted service systems to deliver real change for families.

Given the significant overlap with domestic and family violence (DFV) among the populations notified to child protection, the new system will align intensive family support service delivery with domestic and family violence services. This will include ensuring more effective local service coordination and case management.

Families receiving intensive support services must have timely access to other programs that address issues contributing to child protection notifications, such as mental health and drug and alcohol services. As such, families receiving intensive supports will require priority access to these services.

**Focussing on outcomes**

Far too often we see the same children and families being repeatedly notified to child protection over numerous years. We need to ensure that families and children are receiving services that improve their outcomes over the longer term, and that interrupt intergenerational patterns of child abuse and neglect.

The new system will have a clear focus on service provision that means immediate issues of concern are addressed, but also ensures families are supported to have greater capacity to keep their children safe over the longer term.

This will require the implementation of more effective models of intensive family support as well as linking families to lower intensity services that can sustain family stability. For example, services like financial counselling can help to reduce stressors and risk factors and instead build protective factors for families.

The Department for Human Services will be responsible for monitoring and evaluating the performance of the new system, including achievement of short, medium and long term family outcomes. It will also work with other agencies and
NGO service providers to ensure the system identifies and responds to emerging trends in need so that performance can be maintained over time.

**Implementing change**

A significant amount of work has already been undertaken by government and non-government service providers to improve their services based on the evidence.

New pilot programs are being developed, as are workforce capability-building efforts which include a new cultural competency training program being developed in consultation with South Australia’s Aboriginal community.

As the system develops, EIRD will be responsible for monitoring system performance and answering questions such as:

- Has child abuse and neglect been prevented for children in the system?
- How is the system performing overall?
- How are particular program types performing?
- What is the ongoing demand for services?
- Are we seeing a reduction in notifications and need for out-of-home care?

The timeline on the next page describes milestones as they will roll out.
By July 2019 we will:
- Consolidate services and commissioning in DHS
- Commence pilot programs
- Commence co-design of referral pathways
- Commence co-design of family outcome measurement methods
- Commence modelling future workforce requirements
- Commence development of a cultural competency training program

By December 2019 we will:
- Co-design new service models and evaluation methodologies
- Commence development of common screening tools
- Complete co-design of new referral pathways
- Begin roll out of cultural competency training
- Agree on data capture and sharing arrangements

By December 2020 we will:
- Design integrated models of support with key adult services
- Implement and monitor new screening tools and referral pathways
- Implement service-level and family-level outcomes monitoring and evaluation
- Be developing trauma informed practice across the sector
- Implement a future workforce strategy

By December 2021 we will:
- Review pilot programs and new service models
- Ensure all funding is going into evidence-based services
- Integrate system with overlapping adult and family services (particularly DFV services)
- Finalise centralised data management
- Support ongoing sector development programs
## List of services to be consolidated in the new unit

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