

THE UNIVERSITY OF
NEW SOUTH WALES



**FAMILIES FIRST AREA REVIEW
FINAL SUMMARY REPORT**

FINAL REPORT

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Contents

1	Introduction and Background.....	1
1.1	Introduction.....	1
1.2	Outline of the Report	1
1.3	Description of Families First	1
2	Methodology.....	5
2.1	Area Review Approach and Aims	5
2.2	Overview of the Methodology	8
2.3	Limitations of the Methodology	9
3	Implementation Structures.....	10
3.1	State Structure Supporting Families First	10
3.2	Regional Structures Supporting Families First	11
3.3	Local Interagency Implementation Groups.....	11
3.4	Implementation Plans.....	11
4	Findings and Lessons from the Area Reviews	12
4.1	Managing Systems Change.....	12
4.2	Systems Approach to Early Intervention and Prevention	15
4.3	Family services system capacity	16
4.4	Aboriginal Participation and Access in Families First Processes	18
5	Conclusion	19
5.1	Organisational Capacity.....	19
5.2	Resource Capacity	19
5.3	Staff Capacity	20
5.4	Leadership Capacity.....	20
5.5	Network Capacity	20
5.6	Engaging Aboriginal Communities	20
5.7	Conclusion	21
	Appendix A: Methods.....	22
	References.....	26

List of Figures

Figure 2.1: Conceptual Approach to the Evaluation Design	5
Figure 2.2: Conceptual Approach to the Analysis - Goal-outcomes Model.....	8
Figure A.1: Summary of Data Collection Methods	22

Abbreviations

ATSI	Aboriginal and Torres Strait Islander
CALD	Culturally and linguistically diverse
CFN	Child and family nurses
DADHC	Department of Ageing, Disability and Home Care
DET	Department of Education and Training
DoCS	Department of Community Services
FOA	Fields of activity
LGA	Local Government Area
NGO	Non-government organisation
SAG	Statewide Advisory Group
TCO	The Cabinet Office
UNSW	University of New South Wales

UNSW Consortium Families First Evaluation Activities

This report is one in a series of seven undertaken by the UNSW Evaluation Consortium for The Cabinet Office as part of the evaluation of Families First.

The Cabinet Office's evaluation strategy considers whether Families First has been effective in supporting families and communities in NSW to care for children using an early intervention approach and in developing a coordinated, interagency approach to service planning and delivery. (TCO, 2002:3)

The UNSW reports include the Outcomes Evaluation Framework and Area Review components of the evaluation strategy. Other activities include local area evaluations, as determined by the Regional Officers Group and program evaluation of the Families First funded projects.

Families First Report	Key focus
Outcomes Evaluation Framework	Population outcomes measures at State and Families First Area levels using medium to long-term indicators designed to measure the health and wellbeing of children, families and communities in NSW.
Area Review Methodology	A detailed outline of the methodology of the Area Reviews that focus on the statewide development and implementation of Families First.
Area Review South West Sydney	Description and lessons learnt from the experiences of the first metropolitan Area where Families First was implemented.
Area Review Orana Far West	Lessons learnt from the experiences of a rural and remote Area with a high level of need in the middle stages of implementation.
Area Review Illawarra	Lessons learnt from the experiences of a regional Families First Area in moderate need for which the rollout was most recent.
State Level Review	Lessons learnt from the state level strategic policy implementation of Families First.
Area Reviews Final Summary Report	Summary of the lessons learnt from the three Area Reviews and the State Level Review.

Summaries of each of these reports and discussion papers will be available online at www.sprc.unsw.edu.au.

Executive Summary

Introduction

Families First was introduced in New South Wales in 1998. It is a State Government strategy that aims to increase the effectiveness of the early intervention services to support families and communities to care for their children. The broad aim of Families First is to develop a coordinated network of services to identify children and families who require further assistance and link them to appropriate support early, before problems become entrenched. The strategy combines universal service elements and screening to targeted services, with operational emphases on: service integration and networking; community outreach, especially via services such as home visiting by early childhood nurses and volunteers; and community development (TCO, 2002).

The University of New South Wales (UNSW) Evaluation Consortium was commissioned by The Cabinet Office (TCO) in NSW to conduct the Area Reviews of Families First. The Consortium consists of academics and representatives of a number of research centres and universities. The Social Policy Research Centre, UNSW manages the Consortium. This report summarises the main findings and the lessons learnt from the Area Reviews.

Area Reviews

Three Area Reviews form a set designed to examine the implementation of Families First at a state level. The Areas chosen represent different geographical locations, metropolitan, regional and remote, at different stages of implementation. Families First was established in 1998, 2000 and 2002 in South West Sydney, Orana Far West and Illawarra respectively. Within each Area, two fieldwork sites were selected representing different demographic characteristics. Each Review was conducted over a period of around four months. The State Level Review was designed to complement the Area Review findings and evaluate the strategic policy implementation of Families First. Its findings are included in the conclusion of this Report.

A triangulated methodology was employed to explore the process of development and implementation and the experience of key people in Families First including families, service providers from a wide range of government and non-government organisations and management representatives. The methodology included document reviews, surveys, interviews and focus groups.

Key Lessons from the Area Reviews

The main lessons emerging from the findings of the Area Reviews are organised according to the goal-outcome model (Figure 2.2). The model allows us to conceptualise Families First in the broader context of the family service system, which aims to improve child, family and community outcomes. It examines whether the capacity of each part of the Families First process enhances the capacity of the family service system to achieve this goal. The model encompasses five elements of capacity: organisations, resources, staff, leadership and networks. These are outlined in turn and discussion of other challenges in the service system identified in the Area Review follow. Specific lessons are included in Section 4 of the report.

Organisational Capacity

- Ongoing communication strategies are necessary to ensure the dissemination of information about Families First. These strategies must explain how Families First is distinct from, and complementary to, both existing strategies and practices and new strategies being introduced. Providing information and feedback about the implementation processes and achievements in Families First Areas is an effective way of increasing the understanding and commitment of agencies to the strategy. However, the historical strengths on which the achievements have developed and the contribution of other strategies should be acknowledged.
- Early intervention and prevention principles and service coordination must become incorporated into the core business and management practices of agencies at all levels if Families First is to be sustained.
- Management structures should include regional and local structures; and ensure participation of all agencies providing support to families and children, including NGOs. Management processes should allow time for the development of relationships and build on the particularities of existing networks and services.
- A simultaneous ecological approach to implementation across the four Fields of Activity should be employed, in order to secure the engagement at all levels of all relevant agencies.

Resource Capacity

- Families First funds are essential to develop and manage service change and to instigate innovative service delivery models to fill gaps. These resources increase the total capacity of the service network, which is fundamental to meeting the support needs of families earlier.
- Dedicated resources for the implementation process of Families First, such as project leaders and other key personnel, facilitates the planning and implementation processes.
- Families First infrastructure should support the identification of gaps in services in the core human service agencies and transport.
- Network development and enhancement requires dedicated resources and management to facilitate the active involvement of all relevant agencies, in acknowledgement of their differences in organisational size, power and unequal capacity to consistently participate in planning, implementation and tendering processes.

Staff Capacity

- Incorporating and sustaining Families First into the core business practices of agencies requires time and ongoing training and resources, for staff at all levels to understand the significance of Families First principles in their practice.
- The professional skills base, and skills development opportunities, should be considered in the development of future Area Plans.

Leadership Capacity

- Leaders at regional, local and network levels need to be identified and supported. The strong commitment of champions for Families First and its principles,

involved at all levels of the implementation, will help sustain the momentum needed for change.

- Central agency management has the capacity to facilitate the implementation of Families First due to its planning neutrality and freedom from the responsibility for program delivery.

Network Capacity

- Structural, historical and political differences of interest, power and opinion between and within agencies represent a complex challenge in bringing about change. Engaging with and strengthening pre-existing service networks at the levels of practice and planning is a vital component of a successful implementation strategy. This will ensure that management and planning of Families First funded services is based on local knowledge and will complement existing services.
- Clearly defining the role of and processes by which network groups and other interagency groups link into the planning and implementation of Families First will broaden the range of agencies engaged.
- A shared definition and understanding of the degree to which agencies should be networking around central budgeting and planning of agency core programs is required.

Engaging Aboriginal Communities

An important finding of the Area Reviews, which cuts across all of the components listed above, is the importance of effective strategies to engage Aboriginal communities in the Families First implementation process. In one Area in particular the Families First management processes demonstrated a commitment to recognising Aboriginal communities' knowledge of their service needs and how to meet them. The key lessons are:

- The investment of time, energy and resources are required to build and maintain relationships between Aboriginal and non-Aboriginal communities and organisations. Different approaches than are normally employed in planning and consultation processes may be necessary to engage Aboriginal communities in Families First.
- Aboriginal elders' and other community representatives' knowledge of the needs of their communities and the ways to meet these needs should be respected and acted on.
- Aboriginal communities are not homogeneous. Differences of opinion and views occur between individuals and communities, and the implementation of any new strategy must negotiate and work through these differences. It is important that all views are taken into account when working with Aboriginal people and their communities.

Conclusion

Overall Families First has made significant gains in developing structures and processes towards a coordinated service network system focused on prevention and early intervention support for families and children.

The findings of the Area Reviews identified a number of challenges that extend beyond the capacity of Families First processes into the broader context of the family services system continuum. At one end of the system, where support is targeted to families with higher needs, including crisis intervention, it is difficult for practitioners to determine where the boundaries between prevention, early intervention and crisis support begin and end. This becomes a problem when these parts of the system have high, unmet demand.

At the other end of the family services system are efforts to develop child friendly societies and sustainable communities, including universal service support for all families with young children. Limited understanding of a systems approach to coordinated planning and delivery of support to all children and families is present here. Some people and organisations still understand Families First as only being another funding program for particular services.

The challenge for Families First is to be recognised as a set of process principles that underpin effective system planning and delivery of support and intervention with all families. When all participants in the family services system understand and apply the principles of prevention, early intervention and service coordination to their practice in this way, we can expect improvements in outcomes for children and families.

1 Introduction and Background

1.1 Introduction

Families First was introduced in New South Wales in 1998. It is a government strategy that aims to increase the effectiveness of the early intervention services to support families and communities to care for their children. The broad aim of Families First is to develop a coordinated network of services to identify children and families who require further assistance and link them to appropriate support early, before problems become entrenched.

The University of New South Wales (UNSW) Evaluation Consortium was commissioned by The Cabinet Office (TCO) in NSW to conduct the Area Reviews of Families First. The Consortium consists of academics and representatives of a number of research centres and universities. The Social Policy Research Centre, UNSW manages the Consortium.

1.2 Outline of the Report

This report presents the main findings and lessons learnt from the Area Reviews. The first section of the report describes the background to Families First and its aims, objectives and strategies. Section 2 describes the methodology of the Area Reviews. Following this the implementation process and the infrastructure of Families First at State, regional and local levels are described. Section 4 outlines the key implementation issues and their implications. The final section of the report summarises the main lessons from the Area Reviews and the State Level Review.

1.3 Description of Families First

Background to Families First

Families First is concerned with the welfare of young children and the implications of early childhood experiences for long-term outcomes in health, education and social development in childhood and adult life. Using a prevention and early intervention approach, the program framework is based on developing regional linkages between specialised health, community welfare, educational and other services to ensure a coordinated approach to initial intervention, follow-up visits and other forms of support.

Since many future problems stem from influences in the child's environment, Families First is concerned with the factors affecting the biological and social development of children. Operationally, Families First contains a number of separate but interdependent elements. The strategy combines the elements of universal services and screening to targeted services, with an emphasis on service integration and networking, community outreach via services such as home visiting by early childhood nurses and volunteers and community development. Each of these key elements and the evidence on which they were based is discussed briefly below.

The early intervention approach. Studies both internationally and in Australia have shown that support for families during infancy and early childhood helps create a healthy environment that fosters children's lifetime development, educational attainment, minimises the risk of abuse or neglect, and reduces the likelihood of future criminality and addiction (Provence and Naylor, 1983; Weikart and Schweinhart,

1993; Johnson and Walker, 1987; Miller and Whittaker, 1988; Oates et al, 1995; Olds et al, 1997; National Crime Prevention Authority, 1999; McCain and Mustard, 1999). It has been estimated by one researcher that the financial benefits of taking early preventative steps outweighs the costs of providing remedial and custodial programs later by a ratio of 7:1 (Barnett, 1993).

Screening and referral. It has been argued that the development of effective screening instruments in the early postnatal period, and their use to enhance and streamline the referral process, will assist in the targeting of services to meet the specific support needs of the families. For example, prior to Families First it was evident that many of the parents of children in need of support did not regularly attend Early Childhood Clinics. Research has shown that home visiting programs comprehensively designed and targeted at families where there are certain vulnerability factors such as low income; young parents; or single parents, were likely to achieve positive outcomes when delivered by well-trained professional staff. It was also noted that flexibly designed contact enabling families to establish a trusting relationship with the visitor and the visitors to understand the families needs was also important (Olds and Kitzman, 1993).

Service integration and networking. Families First emphasises the coordination of existing specialist service providers into an integrated network, pooling information, eliminating duplication and maximising the effectiveness of existing resources by making appropriate referrals and through effective collaborative arrangements for follow-up support of client families over time. Improved coordination of services has the potential to enhance the effectiveness and efficiency of service delivery and to help provide cost-effective solutions within the levels of existing resources (O’Looney, 1993; Fine, 1997). However, research suggests that improving the coordination of otherwise independent services, particularly those from different sectors (health, welfare, education etc) is generally more difficult in practice than is anticipated (Bruner, 1992; Harbert, Finnegan and Tyler, 1997; Fine and Pancharatnam, 1999). The benefit is that groups that consciously collaborate with each other are more effective at providing a complex array of services than the same organisations can when operating independently (Provan and Milward, 2001).

Brown and Keast (2003) identify three network structures. First, ‘networking’ where relationships are short term and based on cooperation with each member having autonomous goals. The next level is ‘network’ where members are semi-autonomous as goals involve some joint planning and service provision through coordinated relationships. Finally, ‘network structure’ involves longer term and formal relationships based on collaboration where new systems are developed based on highly interdependent goals. Network forms generally comprise a mix of relationship types. Families First promotes the development of networks around evidence-based aims and objectives. An important strength of the strategy is that rather than being negotiated by the membership, which can cause conflict in relationships, the network goals are derived from those core objectives (Provan and Milward 2001:417).

Community development. The social context in which families live has been recognised as an important influence on human development over the life span. According to Bronfenbrener’s theory of human ecology the way in which parents care for their children is influenced by structural characteristics and the interactions between families, social networks, neighbourhoods, communities and cultures. In

more recent years Bronfenbrenner (1979) has emphasised the importance of personal characteristics, the nature of other relationships and processes on human development (Tomison and Wise, 1999). Gabarino argues that the wider social environment today, including the communities and neighbourhoods in which we live, encompass destructive factors such as violence, poverty, unemployment, poor housing and substandard schools. One of the long term aims of Families First is to enhance strengths in the community, develop relationships and reconnect communities so that those communities can better support families and children.

Aims and objectives of Families First

Families First seeks to improve the health and welfare of children aged from birth to eight years, by supporting parents and carers, so that they may grow to their full potential. There is a special focus on children aged between birth and three years, when development is rapid. Details about the strategy were described in a document from The Cabinet Office (2002) and are summarised in the remainder of this subsection.

Outcomes for Families First

The overall outcomes sought are:

- healthier children and parents;
- better functioning families who are able to enjoy and learn from one another;
- children who are better prepared to learn and develop when they start school;
- reduction in the conditions that lead to mental health problems in children (such as conduct disorder);
- improved recognition and early intervention for post natal depression and other mental health problems in parents and new babies;
- greater parental participation in education and training;
- communities whose members interact more positively and which are friendly places to bring up children;
- reduction in the conditions that lead to child abuse and neglect; and
- reduction in juvenile and adult crime.

Fields of activity

The Statewide policy framework of Families First focuses on four fields of activity (FOA): babies, children, extra support and communities. Each is described below.

- FOA 1: Supporting parents who are expecting or caring for a new baby

Parents expecting or caring for a new baby need access to information to assist them to make choices about how to care for the baby. Maternity and child health services will broaden their services to a range of community settings and other venues, and in the parent's homes. Health professionals are to make assessments of the whole family with regard to stresses that may develop into more complex problems. Parents needing extra support will be linked with other services.

- FOA 2: Supporting families who are caring for infants or small children

Parents are to be supported in increasing their parenting skills and sense of control. This will help sustain their ability to foster their children's growth and development by making it easier for them to love and care for their children. Parents can be supported with practical assistance such as trained volunteers to provide practical support to parents in their homes, community services, or being in contact with other parents through playgroups and mothers'/fathers' groups.

- **FAO 3: Supporting families who need extra support**

Some families need extra support, whether for children with special needs or for parents struggling with their own problems and finding it difficult to sustain a healthy home environment for their child. The networks supported through Families First, through multidisciplinary teams and linked services, will enable professionals to work together to provide the range of assistance to parents and their children. This may take the form of agencies pooling funds or co-locating premises.

- **FOA 4: Strengthening the connection between families and communities**

It is intended that Families First will encourage communities to connect families by strengthening formal and informal neighbourhood networks. There will be a particular focus on disadvantaged communities. The forms of such connections will not be prescribed. Instead, communities will be supported to choose the form of interaction most appropriate to their circumstances.

Strategies of Families First

The strategy aims to achieve the objectives of Families First through the development of service networks that adopt a coordinated, interagency approach to service planning and delivery. It aims, through these broad networks, to support parents in raising children by assisting them to solve problems at an early stage, before they become entrenched.

Enhancements to the service networks are to be achieved by:

- building on and broadening existing structures so that a wider range of needs may be met;
- changing the practices of some services; and
- coordinated service planning and the establishment of new services where gaps have been identified and which have been proven to work for families.

The purpose of the networks is to develop linkages to collaboratively support families at different stages as outlined above in the fields of activities.

2 Methodology

This section describes the methodology used to design, conduct and analyse the research for the Area Reviews. The research questions are described, followed by a discussion of the evaluation framework and goal-outcome model for analysis. A brief description of the methods for data collection is included.

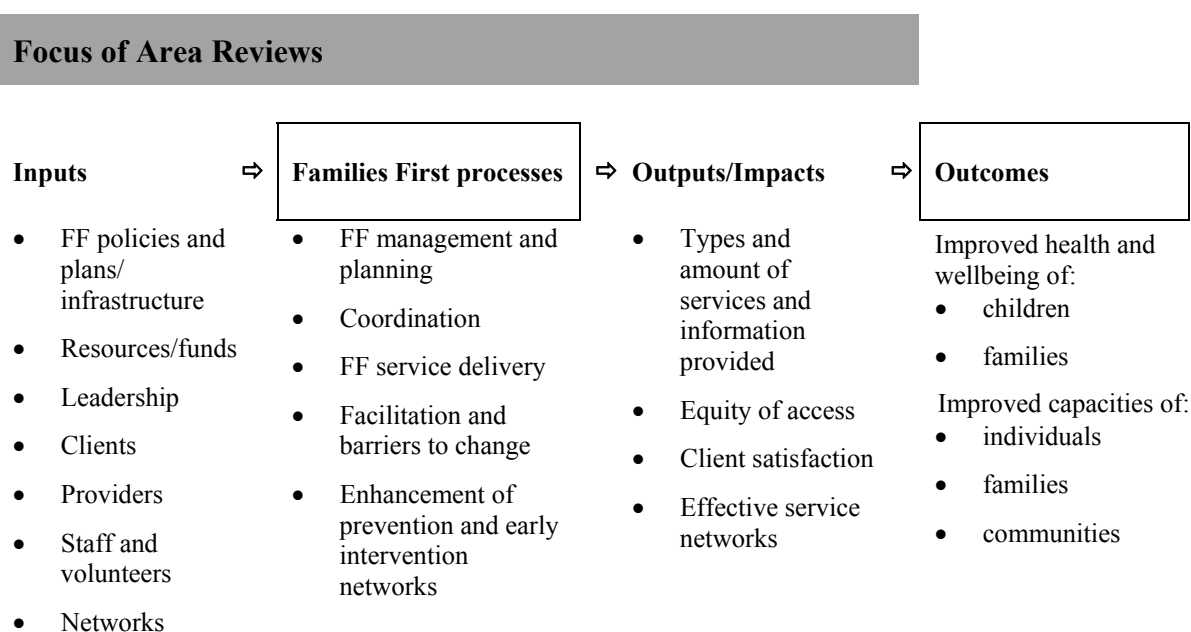
2.1 Area Review Approach and Aims

The Area Reviews are a type of formative or process evaluation, monitoring the extent to which services are delivered in the form envisaged by the agencies responsible for policy development. Where the results of the strategy are not those envisaged by the central authorities, the design, based on the principles of action research, seeks to inform current and future developments of Families First (Wadsworth, 1993).

Evaluation framework

The overall evaluation framework was based on concepts outlined in the production of welfare approach (Davies and Challis, 1986; Davies, Bebbington and Charnley, 1990). Derived originally from the economic analysis of the production processes, the approach links together service inputs, outputs and outcomes. Applying this approach to the evaluation of Families First the relationship between the different components of the project can be conceptualised in Figure 2.1. The approach draws attention to the importance of focusing on not only the outcomes, but also on the prior stages in the process of resourcing and providing supportive services to those families who will benefit most (Thomson et al, 2002).

Figure 2.1: Conceptual Approach to the Evaluation Design



Inputs and processes describe the resources of Families First, and the service system and how it operates (including how it links with other services). *Outputs* describe the Families First services that children and families receive as a result of being part of the program, the changes in patterns and integration of services received and

satisfaction with the support received. *Outcomes* measure the health and well-being and capacities of children, families and communities.

The Area Reviews methodology focuses predominately on the inputs, process and outputs stages. Outcomes from children, families and communities are being evaluated by TCO through the Families First Outcomes Evaluation Framework (Thomson et al, 2002; Fisher et al, 2002). The conceptual framework outlined here was used to determine the types of data and how they were collected in the review process to investigate the following research questions.

Research Questions

1. What have been the priority implementation issues in this region?
2. What have been the key changes to Families First agencies (those responsible for implementing Families First) and relevant non-government agencies, as a result of the implementation of Families First in this region? Identify key strengths and key challenges in each region?
3. What is the description of the current early intervention and prevention networks in this region? What is the description of Families First networks and quality of networks (measured by density of connections) as a baseline measurement for future comparison?
4. How, and in what ways, have the Families First Framework and the Area implementation plan strengthened and/or reoriented a prevention and early intervention network? Is Families First being implemented according to design, as outlined in the Families First Framework and Area implementation plan?
5. What are the factors both at central government (program and departmental) and regional levels that support or impede the implementation of Families First?

Framework for analysis

Program logic (Department of Finance, 1994) and program theory (Bickman, 1996) are the theoretical tools that were applied in the evaluation data analysis. Analysis through program logic involves identifying and taking into account the presumed logical and causal relationships between inputs, processes, outputs and outcomes. Program theory analyses two aspects of the program. First, the program implementation is assessed by examining whether the program inputs are in place as planned. Second, the program theory is investigated by considering whether the implementation occurs in the way it was envisaged and whether the outcomes are as predicted (Bickman, 1996).

Application of the analysis framework

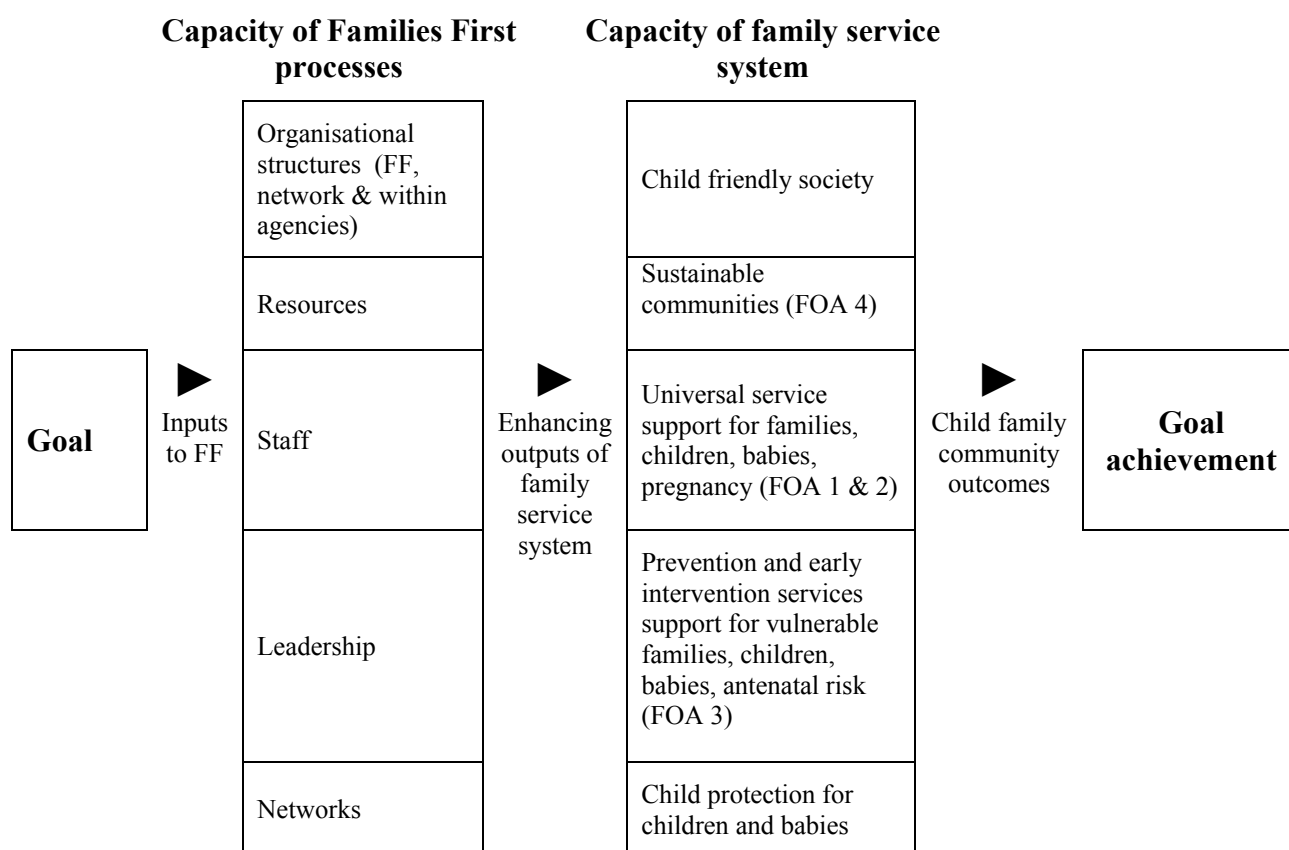
The research questions informed the development of the data collection instruments and the specific questions asked in the interviews and survey of service managers. The report on South West Sydney is framed around these questions and provides a detailed account of how Families First appeared five years after its initial implementation (Thomson et al, 2003).

However, extracting lessons learned from the analysis required a more integrative approach. As a way of synthesising and explaining the data gathered in the Area

Reviews, the program logic model was applied to the following goal-outcome model (Figure 2.2). The reports on Orana Far West, Illawarra and the State Level Review apply this framework to derive generalisable lessons for further implementation. The models consists of five elements including:

- *Organisational structures* - refers to processes such as policies, procedures, systems and practices that reflect the values and objectives of the organisation and enable change to be managed effectively (NSW Health, 2001:10);
- *Resources* – include people, physical space, administrative support, planning tools and financial support (NSW Health, 2001:14);
- *Staff* – refers to people working within the system with the necessary skills and commitment to contribute to the overall goals of the strategy (NSW Health, 2001:12);
- *Leadership* – Leadership refers to people who are system thinkers and champions. They engage, mobilise and inspire others to act in ways that are consistent with the program’s aims and objectives (NSW Health, 2001: 16);
- *Network* – refers to the development of coordinated network of services based on collaboration and partnerships between different government and non-government services.

Figure 2.2: Conceptual Approach to the Analysis - Goal-outcomes Model



Source: Harris, 2003

- Notes: FOA 1: Supporting parents who are expecting or caring for a new baby
- FOA 2: Supporting families who are caring for infants or small child
- FAO 3: Supporting families who need extra support
- FOA 4: Strengthening the connection between families and communities

The model is a means of conceptualising Families First in the broader context of the family service system, which aims to improve child, family and community outcomes (Bronfenbrenner, 1979). The model focuses the analysis on whether the capacity of each part of the Families First process enhances the capacity of the family service system more broadly to achieve that goal.

2.2 Overview of the Methodology

The Project Leaders from the three Areas involved in the Area Reviews, members of TCO and the UNSW Evaluation Consortium formed a working party to assist with the development of the methodology.

The Area Reviews were not designed to evaluate or compare the performance of individual services, Areas or sectors within them but rather to consider the issues emerging at an Area level. The focus of the Reviews was to report on examples of best practice drawn from the principles of Families First found in each Area, as well as the challenges.

Together the three Area Reviews form a set designed to examine the implementation of Families First at a state level. The Areas chosen represent different geographical locations, metropolitan, regional and remote, at different stages of the implementation

process. Families First was established in 1998, 2000 and 2002 in South West Sydney, Orana Far West and Illawarra respectively. Within each Area, two fieldwork sites were selected representing different demographic characteristics. Each Review was conducted over a period of around four months, and included interviews, site observations and surveys.

As outlined in the previous section, the Area Review methodology uses a process evaluation approach to examine whether Families First is being implemented according to the design, as outlined in the Families First Framework and Area implementation plans. The methodology was also designed to review the overall process of implementation and the strategies employed in working towards achieving the core objectives of Families First in each Area.

The Area Review used a triangulated methodology comprised of multiple qualitative and quantitative data collection techniques including documents reviews, observation studies, interviews, focus groups and surveys. The methods used are outlined in more detail in Appendix A.

2.3 Limitations of the Methodology

It was evident in the preparation for the fieldwork that some services did not have a good understanding about Families First. Some participants questioned whether they should be involved in the Area Review process, particularly the service manager survey, because Families First did not fund them.

Another difficulty faced was the number of services and the size of the network in each Area. Compiling the lists of services to be included in the service manager survey was time consuming for key personnel, and it was not possible to gain a clear picture of all the network relationships.

3 Implementation Structures

This section briefly describes some of the common elements in the Families First implementation structures at a statewide level and in each Area.

3.1 State Structure Supporting Families First

Although the overall aims and objectives of Families First are quite straightforward, the structure that supports its implementation is complex. Families First operates at the State, Regional and local level. Within each of these levels, specific structures have been put in place to guide the overall direction of Families First and to ensure that processes the establishment of processes to facilitate its implementation.

The implementation of Families First is the responsibility of a number of agencies including the Departments of Community Services (DoCS), Ageing, Disability and Home Care (DADHC), Education and Training (DET), Housing and NSW Health through Area Health Services, and non-government agencies funded by Government to support families. Human Services Directors-General decide key issues in the implementation of Families First using information from project management and implementation groups (TCO, 2002).

The State structure developed to support the implementation of Families First at the time of the research consisted of a number of elements. The Directors-General of NSW Health, DoCS, DET, DADHC and the Department of Housing are jointly responsible for the overarching management of Families First at a State level. They were also responsible for setting directions on key strategic issues and approving the regional implementation plans.

TCO played a pivotal role in the management and implementation of Families First. At the State level, TCO was responsible for the daily management of Families First. TCO, on behalf of the Directors-General facilitated the processes to establish Families First, with coordination and development of the Families First Implementation plans.

A Head Office Group was established in 2002 to provide link in communication between the Head Officers of participating agencies. Key personnel from the head office of the five Human Services Agencies responsible for Families First, representing their Director-General, meet regularly with TCO. The responsibility of this group is to ensure implementation of the State Plan.

The Families First Statewide Advisory Group (SAG) was established by TCO to advise on statewide and regional issues. Membership of the SAG included organisations representing the interests of families including Aboriginal and Torres Strait Islander (ATSI) and culturally and linguistically diverse (CALD) families, families with a child with a disability and key peak organisations representing parts of the service system. Later, the membership was expanded to include key workforce professional groups from each of the FOAs. Representatives from the Regional Management Groups in each Area where Families First was operational were also included as members of the SAG.

Also operating at the State level is the Communication Group, a sub-group of the SAG. All Departments involved in Families First are represented on this group, which reports to TCO. This group coordinates the communication strategy for Families First

in three key matters: directly communicating with families; internal communication strategies to help staff understand more about Families First; and across ministerial roles and responsibilities. Products developed by this group go onto the Families First website and are distributed to the regional level groups.

3.2 Regional Structures Supporting Families First

Project Leaders appointed by TCO worked in each Area to facilitate the coordination and implementation of Families First. Project Officers are appointed for each region to provide secretariat support and facilitate processes on behalf of the regional management groups and TCO centrally. Project Leaders also assist in communicating information from the SAG to the regional level.

Regional management groups are comprised of Chief Executive Officers, senior officers or other managers of the State Government Departments responsible for the implementation of Families First. In some Areas agencies such as the Aboriginal and Torres Strait Islander Commission, Land Councils and other government departments are also represented on these regional groups. They are responsible for determining the broad priorities and approaches for effective implementation of the Families First and other state-wide strategies, ensuring integrated planning and management of these strategies and determining the Area Plans and budgets for Families First.

Operating below this level is another management group who is responsible for the operational implementation of the Families First Area Plans. Membership of this group, in all three Areas comprised senior personnel in the Government Agencies. In one Area this group also included Peak Groups, Local Government, and the Division of General Practice.

The regional management structure of some Areas is flatter than others. Some Areas devolve responsibility for the implementation of strategies across a number of groups; others centre responsibility primarily on one or two groups.

3.3 Local Interagency Implementation Groups

A number of Areas convene local network groups, comprising State Government Agencies, local government, NGOs and community representatives. These interagency implementation groups coordinate the planning for human services at the local level.

3.4 Implementation Plans

From the outset it was envisaged that each region would develop its own implementation plan that took account of the specific characteristics of the Area and its needs.

Area Plans are devised at local or regional level for a given time period. They describe the overall approach to implementing Families First in that Area, the budget, key outcomes and actions and time frame required. Area Plans are ratified at Area level before being approved at State level by directors-general.

4 Findings and Lessons from the Area Reviews

This section summarises the implementation lessons across the three Areas, which are generalisable to the remainder of the State, and the State Level Review. Emphasis is on the process achievements and lessons that will continue to enhance the capacity of the family services system to improve outcomes for children and families. The findings from each Area Review and the State Level Review were presented in individual reports, available separately to this Final Summary Report.

The Area Reviews found that the strategies employed in the implementation of Families First resulted in progress towards achieving the core objectives of Families First and addressing the priority issues in the Areas. However, the degree of goal achievement in a particular location depended on the stage of implementation, the historical context, pre-existing service network and the system capacity, relationships between family service agencies, and other characteristics such as geography and population size. Families First implementation aimed to take account of the local context through the application of one of the principles of Families First, a strengths-based approach to service change.

This section discusses four categories of implementation lessons for Families First that emerged from the Area Reviews, relating to: managing systems change; a systems approach to early intervention and prevention; family services system capacity; and Aboriginal participation.

4.1 Managing Systems Change

Managing systems change includes considerations of participation and communication; planning and implementation structures; and the incorporation of Families First principles into core business, each described in this section.

Participation and communication

Families First aims to effect change in the planning and operation of the child and family services system and the way parts of the system work together. The process for managing that change is integrated into the operation of agencies and relationships between agencies. It requires continued active management and communication of these relationships. Good examples of this observed in the Area Reviews were structures that included senior, middle and local participation; senior management support, leadership and champions; staff training; resourced local participation for representation from throughout the service system; and multiple forms of communication within the management structures and into the family services community.

Successful implementation also depends on the acknowledgement and recognition of existing structures. This is both positive, in terms of strengths of the system; and a potential point of inertia in terms of entrenchment of existing processes and service models. These structures affected the degree of local engagement and the level of understanding of Families First.

An implementation strategy of Families First was generally not to brand it as a separate strategy. The intention was to focus on developing systems change, and develop commitment to the principles of Families First. However, some concepts of

Families First are complex and difficult to communicate simply. These concepts include system planning processes and inclusivity of potential service network members. Some Families First key personnel faced difficulties in balancing the need to communicate Families First concepts with the need to ensure the demands made of participants, and the knowledge required for participation, remained reasonable.

Finally, some of the key personnel expressed concern that the promotion of Families First had raised expectations that it did not have the capacity to meet.

Planning and implementation

The second part of systems change attempted by Families First is in planning and implementation processes. Planning for Families First is a significant activity because it is an opportunity for visibility in the family services system. Decisions around the planning and priorities for service network development and service delivery have an impact on understandings of Families First.

Core Business

A successful systems change strategy observed in the implementation was the adaptation of agencies' core business to the principles of Families First. A stronger, more coordinated service network was visible where agencies had explicitly incorporated Families First principles into their core business. This enabled them to build a greater capacity to focus on early intervention and prevention. For example, some agencies had incorporated Families First principles into their business plans and written it into their job descriptions, performance indicators and service agreements. Support from management, review of organisational structures and staff training were crucial facilitators in this process. Without this, service providers struggled to integrate Families First into standard working practices.

In summary, lessons for managing systems change from Families First implementation include the following.

Participation and communication

1. Management processes should build on the strengths and particularities of existing networks and services; ensure that time is allowed for the building of relationships; and facilitate the presence of advocates who will champion Families First.
2. Management should be devolved over both regional and local structures; and ensure the participation of all agencies providing support to families and children, including NGOs.
3. Leaders at regional, local and network levels should be identified and supported. The strong commitment of champions for Families First and its principles, involved at all levels of the implementation, will help sustain the momentum needed for change.
4. Communication strategies should be in place to ensure the dissemination and reception of information about Families First. These strategies should clarify how Families First is distinct from, and complementary to, both what is already in place in an Area and any other new strategies being introduced. Sustained communication should also be directed at encouraging the participation of key family service system agencies in the planning and implementation of Families First.

5. Differences in organisational size, power and capacity to participate in Families First planning, implementation and network enhancement should be addressed through facilitated support and multiple forms of participation. The development and resourcing of strategies to promote and facilitate the active involvement of all relevant agencies is required. Organisations have unequal capacity to participate in planning, implementation and tendering processes. Commitment of dedicated resources to engage networks and agencies is necessary.

Planning and implementation

6. Planning, funding and management of network development and new services should reflect a locally relevant, strength-based approach, focusing on early intervention and prevention. Planning for Families First funded services should be based on local knowledge and needs, not standard models.
7. Families First management processes should be communicated within and across all relevant agencies. Clearly defining the role of and processes by which network groups and other interagency groups link into the planning and implementation of Families First will increase the level of engagement of a broad range of agencies.
8. Planning processes should aim for broad representation and engagement and re-engagement of agencies. Management and communication should aim to maintain engagement from agencies that do not receive funds from Families First to deliver services. In addition, management of Families First should include the participation of those who will be involved in tendering for Families First funding for services, and strategies to accommodate any conflicts of interest that arise from this involvement put in place.

Core business

9. To ensure the sustainability of Families First, early intervention and prevention principles and service coordination must be incorporated into the core business and management practices of agencies at all levels. The principles can be included in job descriptions, performance indicators, orientation packages and training.
10. Managers and other key personnel should be responsible for initiating and managing the changes in processes necessary to adopt Families First as core business. These processes should include reviews of existing practices and infrastructure and the introduction of new structures and processes.
11. Consistent with Families First, a move towards early intervention and prevention is apparent in many services, and the importance of networks is also recognised. However, the explicit adoption of Families First as new core business is more likely to effect stronger outcomes than merely recognising Families First as a confirmation of extant organisational strategies without reallocation or relabelling processes, resources and activities.
12. The adoption of Families First into core business requires time, training and other resources. Sustaining Families First as core business requires that these resources are ongoing.

4.2 Systems Approach to Early Intervention and Prevention

Generally there was support for the Families First principles of early intervention and prevention and developing a more coordinated service system. However, we found debate about the boundaries to early intervention and prevention and their relationship to Families First.

Understanding of Families First

Stakeholders saw the aims and objectives of Families First as logical and linked to evidence-based practice. They appreciated that Families First was an opportunity for agencies and the community to come together in a coordinated systems approach to early intervention and prevention. However, the research found some people understood Families First as a funding source rather than principles of practice and system change. The process of Families First implementation had not successfully clarified this for all stakeholders, including in some cases, government agencies.

Adding to this confusion was that some agencies viewed themselves as already practising in a manner consistent with Families First principles and thought their practice was unrecognised. Other agencies were unclear how their services related to Families First and felt excluded from the implementation process.

Conceptualisation of early intervention and prevention

Stakeholders held conflicting views about the boundaries between early intervention and crisis intervention, which raised difficulties in the implementation process. The boundary between preventing and intervening early versus support when problems were already embedded was highly contested. A system that cannot meet current demands exacerbates this issue. Resource shortages also created gaps in the support network for particular groups, such as families experiencing domestic violence or where there was concern about neglect, as they fell between the boundaries of early intervention and crisis service practice (Section 4.3).

Changes in the relationship of the service system and all families are the first goal of Families First. If changes to services are brought about only in terms of who delivers them, then the current public recognition of DoCS as the agency responsible for scrutinising and controlling the lives of vulnerable people could simply be transferred to other agencies. It is difficult to measure changes to the perceived place of families within the family services system; and to what extent that system is organised around the centrality of families' needs.

In summary, lessons relating to integration of the principles of Families First into the family services system include the following.

Understanding Families First

13. Ongoing education and training strategies to increase knowledge of the research basis and philosophical framework of Families First are necessary to sustain engagement in its implementation. Increasing this knowledge should be a specific implementation priority, particularly the differences between applying the principles within an organisation and within the families services system.

14. Providing information and feedback about the implementation processes and achievements in Families First Areas is an effective way of increasing the understanding and commitment of agencies to the strategy. In doing so, it should acknowledge the historical strengths upon which the achievements have developed and the multifarious strategies that contribute to them.

4.3 Family services system capacity

Families First operates in a system where broad socio-economic determinants, such as employment, income and poverty play a pivotal role in the health and wellbeing outcomes for families and children. Families First operates in the context of the capacity of the family services system in terms of available services; available staff, professional skills and understanding of their place in a service system; and service networks at the professional, interagency and planning levels. Although Families First attempts to enhance each of these aspects of capacity, it can only do so within its own capacity and contribution in the system.

This section discusses lessons in system capacity in two respects: enhancement of the system capacity; and unmet demand for services, gaps in service types and staff capacity.

Enhancements to system capacity

Families First operates within a broad system that it cannot directly control. Factors such as service availability, demographics, distance, current and past political context and expectations acted as barriers to implementation if they were not considered in the planning process. Concerns about the capacity of agencies and the service network to meet current demands and to introduce changes also affected the implementation process.

All Areas have existing service networks independent of Families First. Successful examples of network development built on these structures and extended them towards early intervention and prevention and system planning. The Area Reviews identified a number of challenges to the development and expansion of service networks. Many service providers recognised the potential benefits of collaboration but lacked the resource required to undertake it. As the implementation of Families First rests on a few key shoulders, a sense of ‘implementation fatigue’ was experienced among some key stakeholders. Other challenges included resource sharing, distance and size.

Some locations have less robust networks than others in terms of sustainability, inclusion and systems approaches. The capacity and robustness of the pre-existing service network to meet current demands and to introduce changes significantly impacts on the Families First implementation process.

Gap between early intervention and crisis support

The Area Reviews found universal support for the principles of prevention and early intervention. However, translating these principles into practice raised a number of difficulties relating to unmet demand in chronic and critical intervention and a gap between early intervention and chronic support. Network blockages as a result of unmet demand inhibited the capacity of networks to intervene early.

Although Families First is intended to reduce the demand on crisis services in the long-term, it does not expect to eliminate the need for them. It was evident that the Families First implementation was occurring within the context of crisis and chronic support services being unable to meet current demand. Planning for Families First implementation needs to be able to take account of that context. Where the wider family service system was unable to meet these needs, it caused conflict and resentment towards resource allocation to families accessing Families First services.

Some practitioners could not accept that families with more intense problems were excluded from the early intervention and prevention services. A number of the services funded under the Families First strategy were not accessible to families who were notified to DoCS, while families suffering domestic violence were ineligible for home-based services because of safety reasons.

In the context of unmet demand for other services, conflict over access to limited support appears to be an inevitable problem for Families First that should be addressed in planning and communication about Families First.

Staff capacity

Staff recruitment and retention presented another challenge in building the service network, enacting service change within existing services and developing new services. In addition to problems finding sufficient skilled staff, the demands of the Families First approach required new skills in facilitating strengths-based approaches to supporting families. Providers identified difficulties in recruiting, retraining and retaining staff as recurring barriers to effective implementation.

Agencies highlighted health services and early childhood education as struggling to find sufficient appropriately trained and experienced staff. They described their capacity for building networks and coordination as limited in the absence of long-term staff.

The capacity of smaller agencies and NGOs to become directly involved in Families First is also affected by the type and size of their organisational skills base. These services may also be ill equipped to accommodate the additional obligations that Families First funding or other involvement brings.

In summary, systems capacity lessons included the following.

Family service system capacity

15. Families First funds are essential to develop and manage service change and to instigate innovative service delivery models to identify and fill gaps. Increasing the total capacity of the service network is fundamental to meeting the support needs of families earlier.
16. Dedicated resources for the implementation process of Families First, such as the presence of project leaders and other key personnel, facilitate the planning and implementation processes.
17. Families First infrastructure should identify gaps and service shortages in core human service agencies and transport for the purpose of allocation and reallocation of core human service funding.

18. The professional skills base, and skills development opportunities, should be considered in the development of future Area Plans.
19. Families First management structures should support the development of networks as well as complementary services.

4.4 Aboriginal Participation and Access in Families First Processes

The engagement of Aboriginal people in the planning, management and implementation of Families First is acknowledged as crucial to its success. Improved service delivery to Aboriginal families and communities is identified as a priority for Families First.

We found that many of the forces that affect the overall implementation of Families First are relevant to Aboriginal communities. Local management structures and processes foster increasing recognition of Families First throughout organisations and communities, and smaller as well as larger organisations should be supported towards sustained participation in these structures. We also found factors that are particular to Aboriginal communities' experience of Families First.

Flexibility in planning, coordination and delivery are crucial to the successful implementation of services to the Aboriginal families and communities. Commitment to the sustained engagement of elders, community representatives and others as appropriate in the management of planning and implementation is critical. Another key element in Aboriginal and non-Aboriginal collaboration is a commitment to the time it takes to build and maintain relationships and trust.

In summary, lessons from the involvement of Aboriginal communities included the following.

Aboriginal participation and access

20. The implementation of Families First is enhanced by the continued involvement of key individuals, including local elders, community representatives and others in the management of the strategy. Aboriginal elders and other community representatives hold knowledge about the needs of Aboriginal communities and the best ways to address these needs, and this knowledge should be respected and acted on. This may require a different approach to service provision than is usually taken.
21. Aboriginal engagement in Families First is achieved when time, energy and resources are invested in building and maintaining relationships between Aboriginal and non-Aboriginal people and organisations.
22. Aboriginal communities are not homogeneous. Differences of opinion and views occur between individuals and communities, and the implementation of any new strategy must negotiate and work through these differences. It is important that all views are taken into account when working with Aboriginal people and their communities.
23. Collaborative service delivery between Aboriginal and non-Aboriginal organisations should build on the accessibility of Aboriginal organisations and groups (such as peak bodies and steering committees) to Aboriginal people and communities.

5 Conclusion

The final section of the report summarises the main lessons emerging from the findings of the Area Reviews in relation to improving the capacity of Families First to enhance the effectiveness of the family services system.

The goal-outcome model (Figure 2.2) is applied to the main findings to synthesise and interpret the data. It allows us to conceptualise Families First in the broader context of the family service system, which aims to improve child, family and community outcomes. The model examines whether the capacity of each part of the Families First process enhances the capacity of the family service system to achieve this goal. The model encompasses five elements of capacity: organisations, resources, staff, leadership and networks. These are outlined in turn and discussion of other challenges in the service system identified in the Area Review follow.

5.1 Organisational Capacity

- Ongoing communication strategies are necessary to ensure the dissemination of information about Families First. These strategies must explain how Families First is distinct from, and complementary to, both existing strategies and practices and new strategies being introduced. Providing information and feedback about the implementation processes and achievements in Families First Areas is an effective way of increasing the understanding and commitment of agencies to the strategy. However, the historical strengths on which the achievements have developed and the contribution of other strategies should be acknowledged.
- Early intervention and prevention principles and service coordination must become incorporated into the core business and management practices of agencies at all levels if Families First is to be sustained.
- Management structures should include regional and local structures; and ensure participation of all agencies providing support to families and children, including NGOs. Management processes should allow time for the development of relationships and build on the particularities of existing networks and services.
- A simultaneous ecological approach to implementation across the four Fields of Activity should be employed, in order to secure the engagement at all levels of all relevant agencies.

5.2 Resource Capacity

- Families First funds are essential to develop and manage service change and to instigate innovative service delivery models to fill gaps. These resources increase the total capacity of the service network, which is fundamental to meeting the support needs of families earlier.
- Dedicated resources for the implementation process of Families First, such as the project leaders and other key personnel, facilitates the planning and implementation processes.
- Families First infrastructure should support the identification of gaps in services in the core human service agencies and transport.
- Network development and enhancement require dedicated resources and management to facilitate the active involvement of all relevant agencies, in

acknowledgement of their differences in organisational size, power and unequal capacity to consistently participate in planning, implementation and tendering processes.

5.3 Staff Capacity

- Incorporating and sustaining Families First into core business practices of agencies requires time and ongoing training and resources, for staff at all levels to understand the significance of Families First principles in their practice.
- The professional skills base, and skills development opportunities, should be considered in the development of future Area Plans.

5.4 Leadership Capacity

- Leaders at regional, local and network levels need to be identified and supported. The strong commitment of champions for Families First and its principles, involved at all levels of the implementation, will help sustain the momentum needed for change.
- Central agency management has the capacity to facilitate the implementation of Families First due to its planning neutrality and freedom from the responsibility for program delivery.

5.5 Network Capacity

- Structural, historical and political differences of interest, power and opinion between and within agencies represent a complex challenge in bringing about change. Engaging with and strengthening pre-existing service networks at the levels of practice and planning is a vital component of a successful implementation strategy. This will ensure that management and planning of Families First funded services is based on local knowledge and will complement existing services.
- Clearly defining the role of and processes by which network groups and other interagency groups link into the planning and implementation of Families First will broaden the range of agencies engaged.
- A shared definition and understanding of the degree to which agencies should be networking around central budgeting and planning of agency core programs is required.

5.6 Engaging Aboriginal Communities

An important finding emerging from the Area Reviews, which cuts across all of the components listed above, is effective strategies to engage Aboriginal people in the Families First implementation process. In one Area in particular the Families First management processes demonstrated a commitment to recognising Aboriginal communities' knowledge of their service needs and how to meet them. The key lessons are:

- The investment of time, energy and resources are required to build and maintain relationships between Aboriginal and non-Aboriginal communities and organisations. Different approaches may be necessary to engage Aboriginal communities in Families First.

- Aboriginal elders' and other community representatives' knowledge of the needs of their communities and the ways to meet these needs should be respected and acted on.
- Aboriginal communities are not homogeneous. Differences of opinion and views occur between individuals and communities, and the implementation of any new strategy must negotiate and work through these differences. It is important that all views are taken into account when working with Aboriginal people and their communities.

5.7 Conclusion

Overall Families First has made significant gains towards developing structures and processes to support and extend the service network system that is coordinated and focused on prevention and early intervention support for families and children.

The findings of the Area Reviews identified a number of challenges that extend beyond the capacity of Families First processes into the broader context of the family services system continuum. At the one end of the system, where support is targeted to families with higher needs, including crisis intervention, it is difficult for practitioners to determine where the boundaries between prevention, early intervention and crisis support begin and end. This becomes a problem when these parts of the system have high, unmet demand.

At the upper end of the family services system are efforts to develop child friendly societies and sustainable communities, including universal service support for all families with young children. At this end, there remains limited understanding of a systems approach to coordinated planning and delivery of support to all children and families. Some people and organisations still understand Families First as only being another funding program for particular services.

Families First is an attempt to enhance the capacity of the family service system to address the service needs of children and families. These Area Reviews have examined the elements of the capacity of Families First processes to achieve that goal: the Families First organisational structures, resources, leadership, staff and networks.

The challenge for Families First is to be recognised as a set of process principles that underpin effective system planning and delivery of support and intervention with all families. When all participants in the family services system understand and apply the principles of prevention, early intervention and service coordination to their practice in this way, we can expect improvements in outcomes for children and families.

Appendix A: Methods

The following methods were used in the Area Review and State Level Review research. More detail is available in Thomson et al, 2003.

Data Collection Methods

A triangulated methodology was used in the Area Reviews. This involved multiple qualitative and quantitative data collection techniques including documents reviews, observation studies, interviews, focus groups and surveys. Using multiple data to explore the experiences of a variety of stakeholders from different perspectives overcomes the limitations of using only one method (Dockrell, 1995; Sarantakos, 1993). The methods used are outlined below:

Figure A.1: Summary of Data Collection Methods

Area Review component	Description
Document review	Analysis of documents relating to Families First at a local and central level
Service census	A survey of child and family organisations to detail the types of services and level of involvement in Families First
Questionnaire for service managers/coordinators	A detailed survey of organisations directly involved in Families First on service inputs, aspects of the service network and service outputs
Observations and site visits	Site observation to observe the processes of service delivery and connections with other services
State Level Interviews	Interviews with Directors-General, members of the Head Office Group, the Statewide Advisory Group and staff within The Cabinet Office discussing the management of Families First at a central level
Regional Officers Group and key personnel interviews	Interviews discussing the process of managing Families First, the perceived impact and barriers implementation
TCO interviews	Interviews discussing the management of Families First at the State level, perceived impact and barriers to implementation
Project Leader interview	Interviews reviewing the development of Families First, the achievements and barriers to implementation
Interviews with middle managers	Interviews reviewing the development of Families First, the achievements and barriers to implementation
Fieldworker interviews	Interviews exploring their experience with Families First, differences between process goals and practice.
Family interviews	Interviews with families in each sector to explore their experience of the service process and network

The Area Review methodology captured a picture of the implementation of Families First at one point in time. Before and after measures were not collected so the analysis only reports on the current operation of the service network. The methodology was designed so that it can be replicated within and across Areas in the future.

Document analysis

Documentation relating to Families First at a local and central level was analysed as a means of determining the intentions of Families First and the reflection of those intentions in relation to network development in written records. The documents reviewed included minutes of key meetings relating to Families First such as the Project Management Group and Implementation Groups in each sector, Families First briefing papers, project briefs and reports from projects funded by Families First.

Service census

Initially a service census of child and family organisations in each Area was proposed. However, due to time constraints and the lack of readily available contact details, this component of the Area Reviews has not been completed. It is envisaged that it will be conducted at a later stage and the results will be incorporated into a final report. The aim of the Census was to describe the service landscape in terms of the types of services and level of organisational involvement in Families First. The Service Census will be conducted with service managers from the following service sectors: health services, education, child care and early childhood support services, disability services and community facilities.

Survey of service managers

The survey of service managers collected information on the service inputs, aspects of the organisational procedures and processes, network activities and service outputs of organisations in the service network. Detailed data were collected from organisations directly involved in Families First.

Regional management groups identified the organisations included in the sample for the service manager survey. The criteria for inclusion were organisations that received and made referrals to other organisations. Some agencies for which it was appropriate to only make referrals to other agencies, for example hospital antenatal clinics, were also included.

The first part of the survey asked managers to collect some service statistics over a period of a week. These statistics provided a snapshot of the characteristics of families with children aged 0-8 years using services. Information collected included the following:

- the number of new and ongoing clients;
- characteristics of new families referred to the organisation;
- referrals received and made by the organisation; and
- informal consultation and information sharing with other agencies.

The second part of the survey focused on the operation of the network and the perceived impact of Families First.

A modified version of Dillman's method was used to distribute the survey, which involved sending the surveys twice and a reminder note (Dillman, 1978).

Observations and site visits

Site visits and observations of meetings were conducted in each sector. Researchers visited groups including supported playgroups, parents groups and child care groups, and attended interagency meetings in each sector. The aim of these visits was to observe Families First in operation, specifically in relation to services with a prevention and early intervention focus, links within and between agencies and the potential for community building activities.

State Level Review interviews

Representatives from each of the five human services agencies involved in Families First participated in the interviews. Each was involved in Families First through membership of the HOG or the SAG or as Director-General of the department. In addition individual or group interviews were conducted with other key personnel, including members of the SAG not attached to a department, and staff within the Cabinet Office, including Project Officers who had been involved with Families First since its introduction.

Key personnel interviews

Interviews were conducted with key personnel involved in the implementation process of Families First. The manager and a former Senior Project Officer, Office of Children and Young People were interviewed to gain the State level perspective on the Families First implementation process. The regional perspective on the implementation process was gathered from senior managers involved in Families First management groups and Project Leaders.

Regional Officers interviews

Interviews were conducted with members of regional management groups from the five human services departments: NSW Health, the Department of Community Services, Department of Ageing, Disability and Home Care, Department of Education and Training and the Department of Housing. The topics covered in the interview included identifying the priority issues for implementation in the Area, the perceived impact of Families First and factors that facilitated or impeded the implementation process.

Middle manager interviews

Middle manager interviews focused on the perspective of managers implementing Families First in each Area. The aim of the interviews was to examine the intersection point of policy implementation and change in practice as middle managers are expected to lead the change process. Middle managers from the human service Departments involved in Families First were interviewed in addition to representatives from local government and NGOs.

Fieldworker interviews

Interviews were conducted with fieldworkers in different agencies to examine the differences between the process goals of Families First and what happened in practice working with families. The selection of service fieldworkers was made in consultation with the Area Review Working Party, the Project Management Group and the Implementation Groups in each sector and included people in the following positions:

- allied health worker;
- early childhood and parenting nurse;
- Aboriginal community midwife;
- paediatrician;
- General Practitioner;
- multicultural children's worker;
- Ethnic Obstetric Liaison Officer/Aboriginal Home Visitor;
- Client Services Officer (Department of Housing);
- antenatal midwife;
- Child Protection Specialist (DoCS);
- family support worker;
- volunteer home visitor;
- Schools as Community Centres Coordinators; and
- Children Services Director.

Fieldworkers were also asked to draw a diagram to represent their links with other agencies working with families and children. Workers were asked to indicate the types of links they had with other agencies, for example referral, joint assessment and intake or case planning, undertaking joint projects or joint training and information sharing. In addition information was sought on the strength and direction of links from other agencies. For example, referral links with an agency could be in one direction but joint project work and training or shared intake would be two-way.

Family interviews

Families were interviewed about their experience of the service system, including attempting to access services, receiving support and referrals to other services. Each of the fieldworkers interviewed were asked to approach a family to participate in the research. Although there are inherent biases associated with this method of recruitment, it was felt that in order to maintain the confidentiality of these vulnerable families, researchers should not approach them directly. It was difficult for some services to recruit families due to the nature of their client base. However, the interviews provided case study material on the impact of Families First and allowed for some comparison of the service providers' perceptions of the operation of the network to the direct experience of clients.

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