

Summary Report of the Request for Information

How can government improve results for our most
vulnerable (at-risk) children and their families?

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THE TREASURY

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Thank you

In November 2014 the Treasury put out a Request for Information (RFI) to help identify what we could do to make the biggest difference for the hardest to reach children and their families.

We especially wanted to hear from people who work directly with vulnerable New Zealanders, and are grateful for the help we had from a range of different social sector organisations letting people know about the RFI. We had a very positive response, with over 250 individuals and organisations making submissions, and we recognise the time and effort this required.

In addition to the formal responses, we had a lot of encouragement from people in the social services sector – people appreciated the effort we’re making to get a better understanding of the issues and the straight-forward process.

But there were questions too. Some people wanted to know why the Treasury is interested in children and families in need. Shouldn’t we leave this to social policy experts? Others pointed out that there is a wealth of existing research in this area – why run another information-gathering exercise? And why focus on the “most vulnerable” – isn’t there a bigger problem to fix? These are fair questions, and we take them seriously.

The reason we’re interested is that we want to raise living standards for all New Zealanders. We want people to be able to participate fully in the economy and society as a goal in itself. As the government’s lead economic and financial advisor we also want to be confident that the advice we provide about how the government can help achieve that goal, and how it spends money on behalf of taxpayers, is grounded in reality.

We have a lot of respect for the people and the agencies who work with New Zealanders in need. We recognise that the challenges are complex, that it will take a collective effort to get better results, and we want to be part of that.

It was reassuring to hear that the issues raised by RFI respondents match up with where the Government is already focusing its efforts and that the issues are consistent with those identified in the Productivity Commission’s draft report on More Effective Social Services. New initiatives to better integrate services and take account of local circumstances include Children’s Teams, Social Sector Trials and Whānau Ora Navigators. Government agencies are also using new streamlined contracting processes and trialling accreditation processes.

But there is more that can be done to improve the results from social services more generally. To that end, insights from the RFI are being used to inform our advice to the Government, and will continue to influence the Treasury’s work programme.

We hope that this concerted effort, together with wider research, and with further engagement with social service providers, will lead to better results for New Zealanders in need.



Gabriel Makhlouf
Secretary to the Treasury

Executive Summary

What did respondents think is working well?

The responses identified a wide range of initiatives already working well in communities across New Zealand to improve outcomes for at-risk children. These included community driven initiatives and government funded initiatives. Some respondents also had ideas about new programmes that could be implemented in New Zealand.

How can services better meet people's needs?

People in need can be found through existing services and informal networks. The best way to engage people is by focusing on their strengths. The two most commonly mentioned ways to identify people in need were through universal services (eg, schools and general practitioners) and informal networks (eg, a trusted member of the community). Responses noted that in order for providers to find and engage the people most at risk, they must understand the barriers that prevent or discourage people accessing services in the first place.

“Nothing about us, without us”. Respondents thought that the community could be better involved in the design, delivery, and evaluation of social sector services. Each community has different strengths and resources which can be applied to community led development and collective impact approaches.

The way social services work together could be improved. It is confusing for people to know how different services work together. Respondents identified issues with how services fit together in the social sector and how information is shared between government agencies and NGOs. Respondents saw opportunities to strengthen relationships between providers of social services. They also thought that it would be better if clients could have multiple issues addressed through a single point of contact with the social services system.

There are gaps in the existing range of services, and it can be hard to find out what services are available and how to access them. Responses noted that the way that services are currently organised can be confusing. People also identified restrictive opening hours and a lack of transport as barriers to accessing services. Responses considered that there are gaps in services in areas such as mental health and disability.

What are providers' concerns and challenges?

Contracting processes and arrangements are complicated, time consuming and generate competition between providers. Respondents thought that current arrangements don't adequately take account of the need for providers to collaborate to improve outcomes for clients or the fact that some clients have long-term needs that can't be addressed through short-term contracts. The short-term nature of contracts can also create uncertainty for providers and generate additional compliance costs for providers. The lack of evidence and evaluation practices underpinning some programmes was also raised as an issue.

There are challenges in developing and maintaining a skilled workforce that can achieve good outcomes for clients. A common theme in responses from NGOs was the complex training needs of the workforce and difficulties in recruiting and maintaining staff. Responses identified that best practice delivery of services uses a positive approach and tailors treatment to the individual and their family.

Introduction

What is this document about?

In response to the Treasury's Request for Information (RFI), we received information about a wide range of issues from specific feedback on contracting practices, to descriptions of existing programmes, and comments about the social sector as a whole. This document summarises the most common themes in the feedback and uses real-life quotes and examples to illustrate the issues and solutions provided to us.

Background

The Government wants to improve results for New Zealanders most in need, so they can be successful and participate in their communities. While there are a lot of supports, services and programmes already available for New Zealanders, there is scope to improve the results that they deliver.

In December 2014, the Treasury released a RFI, inviting views about what the Government could do to make the biggest difference to the outcomes of the hardest to reach New Zealand children and their families. We collected this information to better understand the views of frontline staff and community groups and complement the existing policy and academic research in this area.

We asked for information

We want to focus on how to get better results for children and their families most at-risk of poor education, criminal justice and employment outcomes. The RFI asked for information and evidence about:

- ▶ Effective ways of identifying and engaging the children and families most at risk of poor education, criminal justice and employment outcomes.
- ▶ How existing services or support could be improved to deliver better outcomes for the most at-risk children and their families.
- ▶ Issues not currently being addressed that affect at-risk children and their families.
- ▶ New interventions, services or arrangements that could deliver better outcomes.

What is happening in government already?

The issues that respondents raised in the RFI are familiar to many people inside and outside government. The Government has activity underway to try to address some of these issues. Here are some of the areas of activity that are currently happening in government that relate to the RFI themes.

There is an emphasis on ‘joining up services’ through Social Sector Trials, Children’s Teams, and Whānau Ora navigators and commissioning agencies. Timely evaluation and sharing of lessons from these initiatives should enable more effective ‘joining up’ of services over time.

Community-led development is supported by the Department of Internal Affairs (DIA) through its regional community advisory service, grants for community projects, and the trial of a place-based community-led development approach in four geographic locations. DIA will be promoting discussion with other agencies and stakeholders about lessons learnt and government’s role in relation to community-led development.

Making it easier to share data is crucial for learning what works, prioritising resources, and improving service delivery. Government is tackling the challenge of making it easier to share data at many levels: from practical work on combining administrative data to reviewing policy and legislative settings. Much of this is happening behind the scenes. Government is also working on its detailed response to the recommendations of the Data Future Forum, which reported late last year and decisions are expected later this year (<https://www.nzdatafutures.org.nz/>).

Government funded programmes and interventions should be evaluated in a timely way. SuPERU has been established to increase the use of evidence by people across the social sector so that they can make better decisions – about funding, policies or services – to improve the lives of New Zealanders, New Zealand’s communities, families and whānau. SuPERU is still in its early stages but it will grow the quality, relevance and quantity of evidence in priority areas, and facilitate the use of evidence by sharing it and supporting its use in decision-making. An example of its work to date is the review ‘Effective Parenting Programmes’ which was a common topic in the RFI responses.

We received over 250 responses

The majority of responses were from non-government organisations (NGOs) that work in the social sector. We also received a number of responses from individuals with experience in this area, including representatives from the private sector, iwi, local government, and academics. This demonstrates that improving results for the most at-risk children is the focus of a large number of individuals, organisations, and communities across the country. We really appreciate the time and effort that went into preparing the RFI responses.

Main themes of feedback

What did respondents think is working well?

The responses identified several initiatives and services already working well in communities across New Zealand, and ideas from overseas that could be implemented here. A small selection of these ideas is outlined below.

Responses highlighted locally-led initiatives that are **partnerships between communities, iwi and government agencies** to improve outcomes for children and young people. Examples include:

“Life to the Max believes their success in engaging with families is through establishing an appropriate and purposeful working relationship but also allowing the individual or families to take control of their own circumstances.”

▶ **Life to the Max:** A social work agency operating in Whanganui that has an intensive, early wrap around approach when working with young people. Families choose to become part of the programme, and the agency identifies their strengths and works to build on them. Life to the Max collaborates with many Whanganui social services including the District Health Board, Te Oranganui Iwi Health Authority, pastoral care staff at schools, Police, and Work and Income.

▶ **Iwi led intervention in Eastern Bay of Plenty with Police:** When tamariki (children) and rangatahi (youth) come to the attention of the Police, they consult iwi members to formulate a collaborative approach as to how the response will proceed. Iwi undertake their own assessments to identify underlying issues and formulate a plan alongside the child or young person and their whānau.

“Our unique approach works to include all community members as we develop capacity within the community.”

There were a number of suggestions from respondents about **using schools or other premises as community hubs** so that young people and families can access services in one place. One example is **Victory Primary School’s Community Centre**. This primary school is a hub of community activity in central Nelson and offers support, information, advocacy and guidance to the community. The hub is connected by trusting relationships to other activities, agencies and businesses which support the mission of the hub.

“The families and youth need to build a relationship with the NGO to obtain long term change within the family unit.”

A number of organisations highlighted the approaches they take in their business. One example is the **MANA Fresh Start (Christchurch Youth Development Programme)**. The programme focuses on offering young people previously at medium to high risk of reoffending an opportunity for a fresh start in their attitudes, values, behaviours and life skills. Throughout the programme staff work closely with the families, caregivers and key professionals in the young person's life.

This ensures a coordinated and holistic approach to achieving outcomes for the young person.

In the responses there was **positive feedback about some existing services**, including Strengthening Families, Family Start and Early Start. In some instances, respondents working with these programmes had suggestions for how they could be improved further. There were also a number of responses where some communities had identified **programmes that they wanted to introduce or expand into their own communities**, including HIPPY, Triple P Parenting, and Social Workers in Schools.

Some respondents had looked overseas for **ideas that could be tested in New Zealand** including:

“Rather than waiting for a referral relating to a specific child, staff actively provide in-reach services and support to schools.”

▶ **Tiered prevention and early intervention programme for children with disruptive behaviour:** In Melbourne, an initiative has been developed by a group of psychologists which pro-actively recruits children with challenging behaviour to receive therapy and support. The initiative aims to reduce conduct disorders in children by delivering sustainable evidence-based interventions in the early years of school and within the school setting.

“Of particular interest is the Foyer concept of a residential facility for at-risk youth – reengaging youth in education and employment and transitioning to independence with the cross sectoral support of agencies.”

▶ **Residential programmes for at-risk youth:** In the UK, the Foyer Federation provides an integrated learning and accommodation centre providing safe and secure housing, support and training for young people aged 16-25. These centres are typically owned and run by Registered Social Landlords.

▶ **Wraparound care:** Wraparound Milwaukee provides an individualised and strengths based system of care for children with serious emotional, behavioural and mental health needs.

How can services better meet people's needs?

People in need can be found through existing services and informal networks. The best way to connect with people is by focusing on their strengths and engaging early.

The two most commonly mentioned ways to identify people in need were through universal services (eg, schools and health services) and informal networks (eg, a trusted member of the community). Responses noted that in order for providers to find and engage the people most at risk, they must understand the barriers that prevent or discourage people accessing services in the first place.

“Many of our children are becoming hugely at risk as young as 2 and 3...the power to make meaningful change in these wee ones' lives should be available then.”

Responses highlighted the **importance of intervening early** - early in life and/or early in the life of the problem. For example, if services intervene before behaviour escalates, families are in a better frame of mind to make positive changes. A number of responses identified maternity care and an associated social work assessment when a child is born as an effective way to identify parents who need extra assistance early on.

“Routine health checks build trust and create opportunities for the identification of other issues with both children and their whānau.”

Several respondents thought that at-risk children can be identified through **universal services**, like schools and health checks. This may also reduce the stigma associated with accessing social services because all New Zealand families use these services, not just those singled out as “vulnerable”.

“A stand-down, suspension or exclusion from school is a red flag for a high risk of adverse outcomes and should be seen as a cry for help.”

A number of responses emphasised the role of **schools** in identifying at risk children and young people. Responses cited studies that show that young people who drop out of school prematurely are more likely to engage in risky behaviours and to have negative health and social outcomes. Responses also suggested that students with chronic truancy, behaviour issues, stand-downs, and expulsions are likely to need social support.

Some responses suggested that there should be **incentives to motivate children and parents in hard to reach families to access services**. For example, reward systems for child health services such as immunisation and Well Child assessments.

“Communities are often better placed than government agencies to identify who within a community needs the most support.”

Responses also highlighted the effectiveness of **informal networks** within the community to identify children and families in need. This is particularly relevant where people have negative perceptions of government agencies, and have disengaged from services as a result. In this context, access to services can be facilitated by the intervention of skilled community leaders who already have the trust and respect of members of their community. A number of NGOs reported that they have begun to employ “community insiders” to understand

their target group better and identify people who may not proactively access services themselves.

“Very high need families prefer to keep below the radar, and want to keep to themselves. They are suspicious of agencies, and don’t easily open their doors to them.”

Negative perceptions towards social services can stop people from accessing support. Responses noted that these perceptions can arise from:

- ▶ An apparent lack of empathy in previous interactions with frontline workers in the profession.
- ▶ Distrust in the system and fear of subsequent state intervention, in particular the coercive powers of the Police and Child, Youth and Family.
- ▶ Previous difficulties navigating the complex and disconnected range of social service providers.
- ▶ The stigma associated with accessing community/social services.

“Barriers parents face include lack of cultural competency, appropriateness of program or system for one’s culture and perceived racism.”

Responses highlighted that it is difficult to access social services that are **culturally appropriate** and based on local data and knowledge (in particular tikanga Māori and Pasifika, migrant or refugee communities). Responses also noted that interventions need to be **tailored** for the individual needs of the person (eg, culture, age, gender) rather than providing a generic service.

“Experiences by hard-to-reach of feeling judged or disrespected are likely to reduce opportunities to engage them with services.”

Further **barriers to accessing support** mentioned include:

- ▶ Where families do not have the money, time, knowledge or confidence to engage with social services.
- ▶ Where environmental or social factors such as drug and alcohol use, family violence or gang connections prevent engagement.

“Nothing about us, without us”

Respondents thought that the community could be better involved in the design, delivery and evaluation of social sector services. Each community has different strengths and resources that can be applied to community led development and collective impact approaches.

“The development of culturally-responsive programmes fundamentally requires the adoption of each identified population group’s concepts, values and world view into the process of programme development, implementation and evaluation.”

A strong theme in the responses was the need for **greater community involvement in the design, delivery and evaluation of programmes**, because:

- ▶ The community knows its own needs, and can have better insights about designing a culturally appropriate service than the government.
- ▶ The community knows its own strengths, and can build upon them.
- ▶ Services for individuals need to incorporate their family and community context to be successful.
- ▶ Service providers must have knowledge and skills specific to the community they serve.

“The need to focus on the family collective unit, is in part reflecting cultural identity and the cultural context within which they live, whereby the family unit is an inseparable part of an individual.”

Responses noted that **services need to focus on the aspirations and health of families and the community** and move away from individual-oriented service delivery where appropriate. For example, providing specialised care for a vulnerable child can lead to rapid improvements in behaviour, but if the home environment has not changed then the same difficult behaviour can return when the child returns home.

Responses also noted that **community mentoring** programmes to support education and positive behaviour in young people are beneficial and can build community connections. Examples include developing mentor relationships with people from the same church or sports community.

Ideas to better involve the community in the **design, delivery and evaluation of programmes** include:

“‘Place’ can be seen as a neutral space around which hope, dreams and future plans can be gathered.”

- ▶ Use a “**place-based**” approach to engage people with local issues. This includes everyone within the community, and focuses on addressing the collective problems of the people within that community.
- ▶ Involve a **diverse range** of agencies, organisations and businesses in the design of programmes to create innovative solutions to issues.

“Families and children want to be seen. Their particular needs, community, ethnicity, experiences and strengths need to be recognized and taken into account. One-size does not fit all.”

“Design programmes and services that are non-judgmental and which do not negatively label the intended target groups.”

- ▶ **Use new ways to design programmes** that can better involve communities. For example, using ‘co-production’ techniques where the providers and users of the service share power equally in its design. Other ideas included collective impact approaches and the “Family 100 Empathy Tool” developed by the Auckland City Mission.
- ▶ Change the question that government agencies ask when developing policy solutions from ‘how can the agency help the community?’ to ‘**how can the community be empowered** to develop, design and deliver the support they need?’
- ▶ Focus on community-led development, where different skills within the community are recognised and used, to design or adapt traditional models to suit their own needs.

The way social services work together could be improved. It is confusing for people to know how different services work together.

Respondents identified issues with how services fit together in the social sector and how information is shared between government agencies and NGOs. Respondents saw opportunities to strengthen relationships between providers of social services. They also thought that it would be better if clients could have multiple issues addressed through a single point of contact with the social services system.

“NGO service providers’ data is generally not easily accessible or useable. This data could give us a wider picture of the lives of some of New Zealand’s most at-risk people and help us to find and engage those most at risk.”

“Cross sector services lack a centralised database to be able to store and share key information on children and families they commonly work with.”

“Increase education of inter-sectoral agencies around the Privacy Act and its implications related to information sharing when child protection issues are of concern.”

There are opportunities to improve information sharing.

Responses showed that information sharing between and amongst NGOs and government agencies is not always working well, resulting in inefficiencies and a poor experience for people using several services. People are required to supply the same personal information multiple times as they access different services – this is time consuming, and it keeps people focused on their problems, rather than their aspirations.

Some suggested ways to improve information sharing, include:

- ▶ Trial Memoranda of Understanding to formalise information sharing between organisations.
- ▶ Use the same simple and strengths based assessment form for all social services. This could be shared, which would prevent people having to provide the same information at each service.
- ▶ Encourage regular networking with other providers in the region to strengthen relationships between different organisations working with the same group of people.
- ▶ Train staff on what sharing is permissible under the Privacy Act to avoid blocking appropriate linkages between organisations.

There are opportunities to improve users’ experience of multiple services.

Responses noted that one barrier to integration between services is the lack of common language between agencies, and suggested that there needs to be a joint understanding of terms, such as “child in need of care and protection”. It was suggested that currently agencies define terms differently for funding purposes.

The most commonly suggested ideas to **improve the integration between service providers** are described below.

“Any one family may have WINZ, Corrections, mental health services, housing issues, budgeting, court processes, school and early childhood education. Multiply that by a high needs caseload of twenty and the ringing around for setting up a hui gets crazy.”

▶ Use ‘**Navigator**’ roles to match people up with the services they need and accompany them to appointments. Navigators could be used where a person/family has multiple risk factors, as it is likely there will be several agencies involved. The Navigator can work as a central “go-between” to coordinate all the relevant people and organisations. Several responses made reference to Whānau Ora Navigators working well in this area.

▶ Co-locate services within one building, known as a “**Community Hub**” where health, education and social services can easily communicate with each other, refer people, collaborate on shared projects, and share facilities. Using hubs also means that people don’t have to spend time, energy and money going to different places to access a variety of services. People often suggested schools, or early childhood education centres as places for Community Hubs. This approach would also help to engage parents in their children’s education.

“The system response should connect whānau to the right services, at the right time, and regardless of the point/place of presentation.”

▶ Have a **single point of assessment** for people accessing social services. This would mean that people, and their information, are referred on to the right services – avoiding the need to keep repeating information to each social service used.

There are gaps in the existing range of services in some areas. Knowing what services are available and how to access them is a challenge.

Responses noted that the way that services are currently organised can make them hard to access. People also identified restrictive opening hours and a lack of transport as practical barriers to accessing services. Responses considered that there are gaps in delivery of social services in areas such as mental health and disability.

“Good quality, secure and affordable housing improves the ability of households in greatest need to provide a healthy and stable environment for their children, with consequent longer term improvements in health, employment and educational outcomes.”

Responses identified some **underlying causes of poor outcomes for at-risk children**, including poverty, low quality housing, alcohol and drug issues, and the presence of family violence. The education level of parents and their ability to engage in employment were also highlighted in the responses as contributing to poor outcomes. Respondents outlined how these factors increase the complexity of family situations, and the approaches to addressing them.

Other issues raised were a lack of tailored support to identify Foetal Alcohol Spectrum Disorder, poor nutrition, disability, and mental health issues. The presence of several needs was seen to greatly increase a person or family’s chance of poor outcomes in education, health and other areas.

Early intervention was a common theme. Several responses suggested there should be more investment in preventative programmes and building resilience, for example through improving understanding about health.

“The lack of knowledge of entitlements ... could be because the service is not promoting itself appropriately, advertising in the wrong locations or using language or display that do not grab the attention of potential clients.”

Knowing what services exist and how to access them can be difficult. Responses noted that there needs to be a better way of communicating to people what is available to them and how to access services. The information needs to have a common language and be consistent across agencies. Some responses also highlighted practical problems with accessing services, including:

- ▶ Travel costs (especially for people in rural areas).
- ▶ Services not being offered in some areas (often rural).
- ▶ Inability to access services around non-standard work hours.
- ▶ Working around competing priorities such as Work and Income appointments and doctors’ appointments.

“There is a real lack of services for new parents and families such as PAFT [Parents as First Teachers] and Family Start in rural towns.”

Geographical boundaries of service provision can also limit access to those in need. Responses provided examples where services are funded regionally but only available in the main

centres. There were also issues raised about services tagged to a specific location, which means the service stops if the family moves outside of that area – a particular issue with transient families.

“10% of children born have disabilities but only the top 1-2% with the highest needs have access to services ... access to services for the other 8% is difficult.”

There are gaps in some service areas. A gap that was frequently identified in responses was low availability of **mental health services** (for parents and children) and **addiction support services** (such as for alcohol and drugs). Another gap identified was the availability of **social supports** including advocacy, counselling, budgeting and relationship support. Further gaps identified related to education, and the support available for children with learning difficulties and intellectual or physical **disabilities**.

There was a theme in the responses around **inadequate support for vulnerable people at ‘transition points’ (when their circumstances change)**. Examples of transitions include when young people are excluded from school, transitioning out of Child, Youth and Family care, moving from primary to secondary school, or moving between regions.

“A significant gap in services exists for 4-10 year old children with conduct problems, but who do not also have mental health issues.”

People reported that “**tick-box” access and eligibility criteria can prevent people in need from accessing services**. For example children might need to be attending a low decile school or have committed a crime before they can access services that they might need.

Parenting courses were mentioned frequently. While a range of different courses exist, and many of these are viewed positively, people identified a gap in specialised parenting support for particularly at-risk groups (for example, parents who had harsh parents themselves, and victims or perpetrators of family violence).

What are providers' concerns and challenges?

Contracting arrangements are complicated, competitive rather than collaborative, and contracts are too short-term.

Respondents thought that current arrangements don't adequately take account of the need for providers to collaborate to improve outcomes for clients or the fact that some clients have long-term needs that can't be addressed through short-term contracts. The short-term nature of contracts can also create uncertainty for providers and generate additional compliance costs for providers. The lack of evidence and evaluation practices underpinning some programmes was also raised as an issue.

A number of issues were identified with current social sector contracting arrangements.

“We are working with families of young people that have had a lifetime of dysfunction ... eight hours gets eaten up pretty quickly, and in this time we're meant to achieve major life changes.”

Respondents reported that **short term contracts** (1-5 years) between the government and service providers do not provide an opportunity to address multiple and complex needs. Responses noted it takes time to build up the trusted relationship necessary to work on personal issues. Further to this, some responses commented that short-term contracts create further work to tender for new contracts, which diverts organisations' resources from frontline services. Respondents also commented that stopping initiatives after a year or two doesn't allow time for changes to emerge, and means that potentially effective programmes are stopped.

“Resistance to collaboration can be heightened if NGOs feel that sharing their intellectual property will jeopardise future funding.”

Responses from NGOs often stated that the current way of bidding for service contracts is a **barrier to collaboration**, and incentivises NGOs to build their own competitive advantage by not sharing their ideas and work practices. Many responses suggested it should be clear whether the funding system is about competition or collaboration. One suggestion was that organisations could be funded to work together, and rewarded for work on collective outcomes.

Respondents noted that the current approach to funding services based on one issue results in **disconnected service delivery** and a lack of collaboration. For example, services may be divided according to whether a child's needs relate to mental health or trauma. However, in practice the child's needs usually cover both domains.

“[Evaluation] is of fundamental importance to delivering effective and efficient social services, and the realisation of improved outcomes.”

“The chronic nature of the problems for our population mean that a short-term service model does not work.”

“There needs to be robust inquiry into what is happening in the name of social service, what the money is spent on and why, and to what extent the initiatives have met the needs. [This needs to be] streamlined and well understood by all.”

“Outcomes-based contracts is a great idea, but careful thought needs to be given to the outcomes sought, and that the outcomes are not competing.”

Responses highlighted **patchy evidence** underpinning some interventions and **inconsistent evaluation** of existing programmes. Responses identified gaps in organisations’ evaluation capacity, both in regard to resources and skills.

There are a number of opportunities to improve the current processes of funding, commissioning and evaluating services. A large number of people considered that there needs to be **longer term contracts** between service providers and government. A common response from organisations was that existing activities could be enhanced by asking “what more could we do while this family is with us?” A number of people commented that current social services need to ‘do their job’ before new programmes are added, and that efforts to improve performance should focus on building capacity to ensure that current services deliver.

Many responses thought the **monitoring and evaluation of contracts** could be overhauled. Some of the suggestions included changing contracts to take into account:

- ▶ What matters to the service users.
- ▶ The quality of service: the coverage, impact and experience for the user.
- ▶ The long-term nature of the outcomes sought.
- ▶ Intangible benefits eg, reconnecting with cultural identity.

A common response from NGOs was that **collaboration** between organisations in the interests of customer outcomes needs to be factored into how the contracting process works. Cross-sector services need to have coordinated planning, funding and delivery of services to achieve the best outcomes. One example provided was Children’s Teams, which are made up of practitioners and professionals from government agencies, iwi and non-government organisations, and where there is flexibility to share the workforce in the best interests of the child.

Several responses commented that **outcomes-based contracts are a good way to move the focus from inputs to outcomes, but they need to be evaluated and monitored appropriately.**

Responses highlighted the following issues that need to be considered when designing and implementing outcomes-based contracts:

“Flexibility of outcome markers acknowledges that ... an improved educational outcome (measurable) has the potential to result in avoidance of the criminal justice system (immeasurable).”

- ▶ That outcomes recognise that work with a measurable outcome in one area of life may positively affect an immeasurable outcome in another area of life.
- ▶ That there is a way to measure the client’s views of the service.
- ▶ That outcomes are realistic to meet in a short time frame, particularly where there are intergenerational issues in a family.
- ▶ That the design of outcomes for complex needs may need to be flexible to change over the contract period.

Responses identified opportunities to improve outcomes-based contracting by:

“Social services outcomes are incredibly complex because of the multitude of factors relevant to family wellbeing, many being beyond the control of a single service provider.”

- ▶ Using inter-agency funding to purchase multiple, integrated outcomes-based services for families – this approach would look at the outcomes for a child/family as the total of all the interventions by the different providers rather than through an outcome in each provider’s contract.
- ▶ Improving the reporting framework to have consistency between national and regional reporting requirements.
- ▶ Ensuring that the measurement of success is based on all aspects of the intervention including what the user of the service thinks is important.

There are challenges in developing and maintaining a skilled workforce that can achieve outcomes.

A common theme in responses from NGOs was the complex training needs of the workforce and difficulties in recruiting and maintaining staff. Responses identified that best practice delivery of services uses a positive approach and tailors treatment for the individual and their family.

Training and experience can make a big difference to achieving outcomes. Responses identified **training needs** within the social sector workforce, including:

“Staff within the education system also form part of the family violence workforce.”

▶ **Multidisciplinary training** to ensure that social sector professionals (in particular the health and education workforce) can identify, assess and address a diverse range of issues at a single point of contact. For example, at school, a teacher can identify the signs of family violence and then be able to refer to appropriate support.

▶ **Communication** training to work effectively with people who have complex and special needs.

“Staff who work from solution-focused cultural appropriateness, strength-based practice could put hard-to-reach families and whānau at ease.”

The workforce is critical for achieving outcomes for at-risk children and families. Responses identified several **changes that the social sector workforce could make** that would improve outcomes and the customer experience. A very common theme within responses was the need for providers to use a ‘**strength-focus**’ in service delivery. This means that the provider is positive, non-judgmental and builds upon the person’s existing strengths or ‘protective factors’ (eg, a supportive family environment, resourceful budgeting and trading skills) rather than focusing on the person or family’s problems.

“What needs to change: the assumption that one intervention fits all.”

Respondents suggested that another way in which the workforce could improve services is by **tailoring them to the individual, in both design and delivery**. For example, responses emphasised the need for the social sector to deliver treatment that relates to their culture, personal attributes, and family context. Professionals should be flexible enough to meet the individual/family in an environment where they feel comfortable (eg, their home, their marae, a mobile clinic at the shopping mall), and that this could make services more accessible.

“Staff most difficult to recruit and retain include those in Auckland, rural areas, male and Māori staff.”

Responses from NGOs often highlighted the difficulties they face **recruiting and retaining appropriate staff**, because of issues such as uncompetitive pay rates, role overload, stress and poor working conditions. The effect of high staff turnover includes limiting the opportunity to build trusted relationships between staff and client, as well as losing institutional knowledge and leadership expertise.

“It is important that staff don’t constantly turn over and that families have the opportunity to work with staff members with whom they ‘click’.”

Respondents highlighted the need for **highly trained and experienced staff** due to the complex issues of people accessing social services. Along with qualifications and training, a specific need identified was employing staff that are approachable and can make people feel at ease. Respondents expressed concern at the shortage of trained staff and reported that in some areas volunteers with minimal training are supporting services due to high demand and that this can put both the client and the volunteer at risk.

“Organisations cannot fully utilise workforce capacity ... eg, social workers from MSD contracts cannot support whānau in crisis that may have been hooked through a GP service unless they have care and protection issues.”

Responses noted that there is **separate workforce training and development** between different, but related parts of the social sector. This means that there is no shared workforce planning, no overall coordination of training or ways to measure its effectiveness, and no understanding of the workforce as a whole.