



Practical Guidelines to Improve Service Accessibility for Families

East Gippsland Service Access Working Group



Acknowledgment

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Thank you to the families who provided feedback on their experience of using services in East Gippsland. The feedback provided helped to provide a local context to the document and provides greater understanding of the things which can make it easier for families to access services and also helps to highlight the barriers.

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Background

A body of research and local knowledge from service providers confirms that there are sections of the community that don't access services readily for a range of reasons. Sometimes families are described as 'hard to reach'¹, marginalised or vulnerable. There are a number of individual circumstances that create barriers to accessing support through services which can include; difficulties in communication, fear, resistance/lack of support from family members, complexities and challenges faced that take time and energy to deal with (Cortis, Katz and Patulny, 2009).

The way in which services are delivered makes a difference to how accessible they are. Important considerations include; the way in which the service is promoted, how families can access (are there outreach and multiple entry points?), and a way of working that allows for important relationship development to occur (Cortis, Katz and Patulny, 2009). Other considerations include linking with families at significant stages (pregnancy, birth), using a coordinated mix of services (targeted and universal) or a single entry point for a range of coordinated services and the flexible and supported delivery of services that provides transport, childcare and flexibility around time and location and the use of reminders (Cortis, Katz and Patulny, 2009).

Families that tend to use services less include; Aboriginal and Torres Strait Islander families, families from culturally and linguistically diverse communities, families with low-incomes, sole parent families, teenage and young parents, homeless families, families experiencing domestic violence, families experiencing substance abuse or mental health issues, families with parents or children who are physically ill or have a disability (Centre for Community Child Health, Policy Brief Number 18, 2010). These families are generally under-represented in communities and sometimes a key issue is service retention. The family may have initial access, but retaining the family in the service is difficult (Cortis, Katz and Patulny, 2009; Centre for Community Child Health, Policy Brief Number 18, 2010; Breaking Cycles, Building Futures, Victorian Department of Human Services, 2004).

The cost of failing to provide timely support to families can impact on functioning of the family and the developmental trajectory of their children (Centre for Community Child Health, Policy Brief Number 18, 2010).



¹ To label clients as 'hard to reach' puts the responsibility on clients, rather than the service. Services are funded to provide support and need to make sure they are accessible to families and children who need them the most



Good Practice Examples

1.

Active Lorikeets, Gippsland Lakes Community Health Service runs a program on the same day, time and location as the Physically Active Kids project, which is an Aboriginal specific group. This has increased the number of Aboriginal clients using our facility at this time and as a result we are developing a comfortable environment for clients who otherwise may not access our service. We use this time for opportunistic appointments with another practitioner if a need is identified and organise transport when required to support access.

2.






Little Green Frog, UnitingCare Gippsland uses a variety of mediums to contact and keep in touch with families. For some it is email, other visits or text messages. All the families are individual and relating to them need to be done in a way that is meaningful to them.








Principles of Practice to Improve Service Access

The following eleven strategies and actions to improve service access have been collated from a range of sources (see references and further reading at the end of this document).

The first three practice principles listed focus on **working in partnership** with families and highlight the importance of training for staff in this area. Some training available in this area includes; Partnerships with Parents (Parenting Research Centre, www.prc.org.au), there is also Family Partnership training delivered by Centre for Community Child Health at the Royal Children's Hospital, www.rch.org.au (developed by Professor Hilton Davis).

Develop inclusive, strength-based approach to working with families	
	<p>Meet Parent's Needs</p> <p>Be flexible to make service easier to access (avoid complex eligibility criteria) and provide crisis support if needed, prior to any other service. Get feedback from parents to see if service is meeting needs.</p>
	<p>Start where the Family is at</p> <p>Identify and build on strengths of the family. Be mindful that some parents do not have the confidence to access a service and can feel uncomfortable by perceived attitudes or judgments of staff or other parents. Work in a respectful way among the most critical factors is workers' ability to: establish a positive, non-judgmental relationship with all children and parents</p>
	<p>Every family is different</p> <p>It is important to understand that all families are inherently complex and diverse and many families are grappling with; low-incomes, lack of transport, housing issues, low education (and literacy and numeracy), big families, lack of social support, physical and/or mental health issues, substance abuse, family violence. All families have different values and some families don't understand or see the value of services- particularly for families juggling day to day stresses. A focus on survival means that accessing a service is not seen as a priority by some families. It is important that positive, non-judgmental relationship with all children and parents is fostered.</p>
	<p>Support to Access</p> <p>Think about transport- how easy is it for parents to get to the service? What support can be provided (pick up, taxi voucher, bus). Think about childcare - can the parent access the service without childcare? Can they afford it? Can childcare be provided on site? Proactively engage and sensitively follow-up vulnerable children and parents who are at risk of 'dropping out'.</p>
	<p>Accessible Locations and Times</p> <p>Flexible hours of operation that suit parents, with flexibility around appointments and reminders that best suit parents (phone, text message, social media). How accessible is the service? Does the location suit parents? Is outreach and home-visiting an easier option for families?</p>

	<p>Coordination of Services to Meet Family Needs</p> <p>Develop agreed ways of working with other services to reduce the likelihood of families experiencing 'service fatigue' and having to repeat their story. Active and supported referrals for parents make it easier for parents. Establish strong reciprocal links with other relevant services (universal and specialist).</p>
	<p>Availability and Response</p> <p>Look at how to tackle waitlists or wait-times for services. The longer parents wait, the less likely they are to take up the service when offered. Respond quickly to requests for help (within 48 hours). Ensure vulnerable children and families are prioritised.</p>
	<p>Build Relationships</p> <p>Take time to build a quality relationship with the parent/s. Think about how to build trust in a comfortable, friendly atmosphere. Good listening and helping skills are important. Promote social connections and building of other relationships through informal supports.</p>
	<p>Comfortable Setting</p> <p>Ensure programs and activities are non-stigmatising and services are provided in a family friendly and culturally inclusive physical environment, by skilled and responsive staff working from a family-centred, culturally sensitive perspective.</p>

	<h2>Good Practice Examples</h2>
<p>1.</p>	<p>Good Beginnings Australia Bairnsdale Site maintains outreach and home based service as key service provision methods, have created relevant care plans and uses technology to help with engagement (texting, iPad apps, building literacy skills via child led play etc.).</p>
<p>2.</p>	<p>Parentzone, Anglicare Victoria Parent Support worker works with parents to assess their parenting needs and their preferred model to access parenting education. Parents are then linked based on their individual needs which may be a group program or individual sessions.</p>

Principles of Practice to Improve Service Access for Aboriginal and Torres Strait Islander Children and Families

Building relationships is a cornerstone to developing understanding and respect. Understanding the pivotal role that culture plays in Aboriginal and Torres Strait Islander communities is an important part of building respect. Understanding the traumas that families have been exposed to as a result of colonization is also fundamental in order to grasp the background and context of the lives of Aboriginal and Torres Strait Islander families. Another vital way of working is acknowledging the strength and resilience of Aboriginal communities (*Working and Walking Together- Supporting Family Relationship Services to Work with Aboriginal & Torres Strait Islander Families and Organisations*, Secretariat of National Aboriginal and Islander Child Care Inc- SNAICC, 2010).

The following excerpt from *Working and Walking Together* report- developed by SNAICC provides an overview of working in a strengths-based way with Aboriginal and Torres Strait Islander families.



Taking a strength based approach

“Taking a strengths-based approach and offering culturally appropriate services is not just about getting Aboriginal and Torres Strait Islander people through the doors of your services. It is about ensuring that your efforts are effective and supportive in assisting Aboriginal and Torres Strait Islander people to build their capacity, and sustain their strengths to support healthy relationships and families, and raise their children to be strong in their culture.”

Aboriginal and Torres Strait Islander culture is a great source of strength to Aboriginal and Torres Strait Islander children and their families, including the important connections to country, spirituality, family and community. It is crucially important for non-Indigenous service providers to recognise and to have this understanding and respect when working with Aboriginal and Torres Strait Islander people.

A strengths-based approach that supports Aboriginal and Torres Strait Islander people’s family and kinship structures is particularly important. This is crucial to building parenting capacity and assisting members of the community to strengthen family and other relationships. Aboriginal and Torres Strait Islander people draw on a wide range of kinship networks to share and co-operate in raising children who are strong in their cultural identity.”

(Working and Walking Together, SNAICC- www.snaicc.asn.au)

Whilst key points and a summary of key learnings from a mainstream agency’s perspective is presented in this document, it is critical to make a long-term commitment to working in partnership with Aboriginal and Torres Strait Islander communities. Part of this journey includes taking the time to develop a sound cultural awareness and absorbing resources developed to assist non-Indigenous organisations (like the Working and Walking Together resource cited above). Other key resources are listed at the end of this document. Developing a good understanding of your local community, the families, their history, strengths, and aspirations is a starting point for increasing support and service access for Aboriginal and Torres Strait Islander families.

Walking Together: Principles of Positive Practice - Learnings from a mainstream agency perspective

An excerpt from Walking Together Evaluation Report, UnitingCare Gippsland, 2011

Principles of positive practice have been developed over a period of time based on what has worked and not worked. Each Indigenous community is unique and diverse in its own right. Based on this fundamental aspect, the application of the following key practice principles (including the use of community development principles in this positive practice), have been essential for reaching positive outcomes in the work undertaken by UnitingCare Gippsland (UCG). These principles have evolved over time, initially developed by UnitingCare Gippsland CEO, John Lawrence for a presentation delivered to VCOSS in 2008 (in partnership with Gippsland & East Gippsland Aboriginal Cooperative Board member, Jeff Cooper), then further developed and presented in the *Communities for Children Program East Gippsland* Final Local Evaluation Report in 2008² and these principles of positive practice have been developed further over the life of the Walking Together Project.

Principles of Positive Practice	
Cultural Respect and Competence	Build cultural respect and competence into your organisation's structure- have regular ways for staff to develop cultural understanding of local Aboriginal communities. Immerse yourself in cultural respect training in the context of poverty- many families are dealing with poverty and this adds additional pressures to families and creates different priorities, be respectful of this when working with families/communities.
Partnerships	Partnerships are essential, but can be about power – and you need to promote partnerships of equality through respect, communication and understanding. Work as a team as isolated workers will not have enough support. Having other people to work with, provide support and talk about what you are doing and what has worked and hasn't is really important.
Flexible Approach	Allow your immediate needs to be fluid and take a flexible approach in everything you do. Agree to work towards broad outcome areas (like children are healthy and developing well), but get the community to determine how to work towards achieving it (establishing local playgroup/kindergarten program) including community involvement in program design and delivery. Allow lots of time for any program activities- there is a need to progress at a pace that suits the community. For example, when deaths occur in the community, do not expect activities to progress as normal.
Support to Access	Pay sitting fees (where relevant), provide good tucker, assist with transport and provide child care- understand that if you expect community members to participate in programs/activities that support to get there is important. Also understand that many community members who are not in paid positions- are not getting reimbursed for their time and their time is valuable.

² Prepared by Kilmany UnitingCare (now known as UnitingCare Gippsland) and the Centre for Community Child Health, Royal Children's Hospital, Melbourne and East Gippsland Community Partners, September 2008

<p>Develop Relationships</p>	<p>Develop relationships and get to understand the local Aboriginal community. Make sure you get a good understanding of the context of individuals and families that you are working with. Take the time to get to know their background, issues and connections within the community. Ask questions to understand the family and develop trust to get to know family dynamics and issues. Learn about a family/community situation first before offering any support. Be mindful of what you say/offer before having a good knowledge of the individual/family/community.</p>
<p>Respect</p>	<p>Respect how busy people are and the number of commitments that they juggle (work, family, community). When working with role models/leaders in the community are mindful of whether that is a role they seek or are happy to be in. Understand the family/community commitments that community members/leaders are dealing with and be mindful about placing extra expectations.</p>
<p>Leadership to Lead Positive Practice</p>	<p>Strong organisational leaders are essential to promoting and supporting work with Aboriginal communities. Respect and understanding need to be developed at all levels of the organisation. Strong leadership gives staff role models and assists to facilitate healthy partnerships with Indigenous and non-Indigenous organisations.</p>
<p>Respond to Community Needs</p>	<p>Work from the ground up and let the community develop ideas- rather than taking a developed program to a community and trying to get the community to take it on.</p>
<p>The Application of Community Development Principles</p>	<p>In any work with community, apply community development principles, these principles include: community participation, ownership, empowerment and accountability, lifelong learning, long-term commitment, inclusion, access and equity, social action, advocacy, networking, self-help and trust.</p>



Family Views on Service Access in East Gippsland

An important component in the development of the guidelines was to get feedback from families across East Gippsland on their experiences of accessing services for their families. 58 parents and carers (mothers, fathers, young parents, Aboriginal parents and parents with children with additional needs) provided feedback through interviews (via phone and in person), surveys and group focus groups. The follow summary highlights the key themes from the feedback.

Positive Experiences – things that help families to access services

- | | |
|---|---|
| <ul style="list-style-type: none"> • Friendly, approachable and welcoming staff (7) • Right people in the right jobs (1) • Low cost/affordable (3) • Each child being treated as an individual (1) • Encouragement to be involved (1) • Small communities – people help each other (1) • Promotion of services (2) • Hearing about services from other parents/friends/family (2) • Experienced staff (well educated in field) (1) • Good location important (3) • Contact prior to appointment via phone helped to settle nerves (1) • Providing reassurance (1) | <ul style="list-style-type: none"> • Right balance between professionalism and friendliness (1) • Providing transport to get to service (7) • Social opportunities (playgroup, library activities, mum's group etc.) (10) • Other parents friendly/supportive in group 8 • Immediate follow up (1) • Helpful and supportive (13) • Accommodating with appointments times/flexible hours (5) • Home visits/outreach (6) • Provision of childcare (1) • Providing supports with individual family needs (1) |
|---|---|

Barriers – things that make it hard for families to access services

33% (19) of families indicated that transport (no drivers license/limited public transport) made it hard for their family to use services.

- | | |
|--|---|
| <ul style="list-style-type: none"> • Waiting lists (6) • Distance/travel to services (5) • Work commitments preventing ability to attend services (4) • Not hearing about services/not knowing what services are around (3) • Remoteness (2) • Availability/lack of services (2) | <ul style="list-style-type: none"> • Cost (2) • Getting to early appointments (1) • Service criteria changes (no longer eligible to access) (1) • Coordinating case meeting between professionals (1) • Timing of groups (during child's sleep time) (1) • No coordination between services (1) |
|--|---|

18 families indicated that there wasn't anything that made it hard for their family to use services.

Special needs and gaps

35 families indicated that there weren't any services that they have needed and couldn't access. Of those who had needed a service that they couldn't access the types of services included;

- | | |
|--|--|
| <ul style="list-style-type: none"> • Childcare (5) • Doctor (4) • Dental (3) • Housing (3) • Specialists (eye, skin, neurologist) (3) | <ul style="list-style-type: none"> • Child Psychologist (1) • Playgroup (1) • Sleep School (1) • Allied Health (1) • Pediatrician (1) |
|--|--|

Service feedback

One of the most effective ways to monitor and evaluate the actions around improving service access is to ask clients and the community for feedback. 27 families indicated that they had not been asked for feedback previously about a service that they have accessed for their family. 19 had been asked for feedback on a service they have used with five indicated this had been through surveys.

- | | |
|--|---|
| <ul style="list-style-type: none"> • First time 1 • No 27 • Sometimes 2 | <ul style="list-style-type: none"> • Yes – through surveys 5 • Yes 12 • No response – 11 |
|--|---|



Agency Self-Assessment Checklist and Action Plan

This checklist is designed to get agencies to reflect on current practice around service access. Use this checklist to identify what you are committed to changing/improving. The checklist can be completed as an agency, team or program.

Principles of Practice to Improve Service Access

Meet parents' needs

Be flexible to make service easier to access (avoid complex eligibility criteria) and provide crisis support if needed, prior to any other service. Get feedback from parents to see if service is meeting needs.

Current Practice		National Quality Standards	Community Care Common Standards	Quality Improvement Council	Department of Human Services	Evidence Examples	Review Date	Progress and Evaluation (how will you monitor and evaluate your actions?)
Do this well	Need to improve							
Practice Examples <ul style="list-style-type: none"> Agency/team/program keeps criteria for service access simple Agency/team/program provides support for families to address barriers which may prevent them from accessing our service Agency/team/program has a system in place to obtain client feedback 			3.3	1.1 1.2 2.2 2.4 2.5	1.2 2.1 2.3 3.4 4.2 4.3	Evidence Examples <ul style="list-style-type: none"> Feedback from parents, formal and informal Feedback register Case notes Policy/procedures/Guidelines on – Feedback, Intake, Eligibility criteria, Crisis support, Service evaluation Service brochures, flyers 		
		What are you currently doing well?				What are you going to commit to change/improve?		
		What evidence do you have to support this?						

Start where the family is at

Identify and build on strengths of the family. Be mindful that some parents do not have the confidence to access a service and can feel uncomfortable by perceived attitudes or judgments of staff or other parents. Work in a respectful way- among the most critical factors is workers' ability to: establish a positive, non-judgmental relationship with all children and parents.

Current Practice		National Quality Standards	Community Care Common Standards	Quality Improvement Council	Department of Human Services	Evidence Examples		
Do this well	Need to improve							
		6.3.3	2.2 2.3 3.5	2.1 2.4	3.1 3.2 3.4 4.6	<ul style="list-style-type: none"> Policy/procedures/Guidelines on – Referral, Access, Intake, Eligibility criteria, Crisis support, Service evaluation, Feedback Feedback from parents, formal and informal Case notes Service brochures, flyers Friendly, safe and culturally appropriate locations Staff are trained, including cultural awareness Staff training records Staff supervision and support systems Case conferencing 		
		What are you currently doing well?				What are you going to commit to change/improve?	Review Date	Progress and Evaluation (how will you monitor and evaluate your actions?)
		What evidence do you have to support this?						

Every family is different

It is important to understand that all families are inherently complex and diverse and many families are grappling with; low-incomes, lack of transport, housing issues, low education (and literacy and numeracy), big families, lack of social support, physical and/or mental health issues, substance abuse, family violence. All families have different values and some families don't understand or see the value of services- particularly for families juggling day to day stresses. A focus on survival means that accessing a service is not seen as a priority by some families. It is important that positive, non-judgmental relationship with all children and parents is fostered.

Current Practice						What are you going to commit to change/improve?	Review Date	Progress and Evaluation (how will you monitor and evaluate your actions?)
Do this well	Need to improve	What are you currently doing well?						
		What evidence do you have to support this?						
Practice Examples <ul style="list-style-type: none"> Agency/team/program understands the diversity of families and provides services with respect to family values and diversity Agency/team/program provides training and resources for staff 		National Quality Standards 5.2.3 6.2.1 6.3.3 6.3.4	Community Care Common Standards 2.1 2.2	Quality Improvement Council 2.2 2.4	Department of Human Services 3.1 3.3 3.4 4.2 4.6	Evidence Examples <ul style="list-style-type: none"> Policy/procedures/Guidelines on – Access, Intake, Feedback Feedback from parents, formal and informal Case notes Information provided in a number of mediums Service brochures, flyers Friendly, safe and culturally appropriate locations Staff are trained, including cultural awareness Staff training records Provision of Home visits and outreach service Use of advocates or coordination of services where required Staff supervision and support Case conferencing 		

Accessible locations and times
Flexible hours of operation that suit parents, with flexibility around appointments and reminders that best suit parents (phone, text message, social media). How accessible is the service? Does the location suit parents? Is outreach and home-visiting an easier option for families?

<p>Practice Examples</p> <ul style="list-style-type: none"> Agency/team/program has flexible hours of operation that suit parents Agency/team/program provides reminders in a way which is suitable for families Agency/team/program offers outreach and home-visiting services where possible and appropriate 	National Quality Standards	Community Care Common Standards	Quality Improvement Council	Department of Human Services	<p>Evidence Examples</p> <ul style="list-style-type: none"> Reminder systems for appointments Policy/procedures/Guidelines on – Access, Home visiting and outreach services Office hours Location of offices Case notes
		3.5	2.4	2.1	

Current Practice		What are you currently doing well?	What are you going to commit to change/improve?	Review Date	Progress and Evaluation (how will you monitor and evaluate your actions?)
Do this well	Need to improve				
		What evidence do you have to support this?			

Coordination of services to meet family needs

Develop agreed ways of working with other services to reduce the likelihood of families experiencing 'service fatigue' and having to repeat their story. Active and supported referrals for parents make it easier for parents. Establish strong reciprocal links with other relevant services (universal and specialist).

Practice Examples		National Quality Standards	Community Care Common Standards	Quality Improvement Council	Department of Human Services	Evidence Examples			
<ul style="list-style-type: none"> Agency/team/program has agreed ways of working (sharing information/case management) with other services so clients don't have to repeat their story Agency/team/program provides active/warm referral processes, where clients are supported to access other services in person and follow up afterwards to see how they went with the service 		6.1.1	2.3	2.4	2.3	<ul style="list-style-type: none"> Interagency protocols Internal and external referral systems Intake systems Service brochures, flyers Consent forms Referral consent Case conferencing 			
		6.1.2	2.5	2.5	3.4				
		6.2.2		3.2	3.5				
		6.3.1		3.4	4.4				
					4.5				
Current Practice					What are you going to commit to change/improve?	Review Date	Progress and Evaluation (how will you monitor and evaluate your actions?)		
Do this well	Need to improve	What are you currently doing well?							
		What evidence do you have to support this?							

Availability and response

Look at how to tackle waitlists or wait-times for services. The longer parents wait, the less likely they are to take up the service when offered. Respond quickly to requests for help (within 48 hours). Ensure vulnerable children and families are prioritised.

Current Practice		National Quality Standards	Community Care Common Standards	Quality Improvement Council	Department of Human Services	Evidence Examples		
Do this well	Need to improve							
<p>Practice Examples</p> <ul style="list-style-type: none"> Agency/team/program prioritises according to need and follows up with families within 48 hours Agency/team/program advocates for more resources for programs to reduce waitlists 			2.1 2.3 3.1 3.5	2.2 2.4	2.1 2.2 2.3 3.2	<p>Evidence Examples</p> <ul style="list-style-type: none"> Demand management/wait list processes Demand management policy/procedure Triage for vulnerable families/children process Consumer engagement policy/procedure 		
Current Practice		What are you currently doing well?				What are you going to commit to change/improve?	Review Date	Progress and Evaluation (how will you monitor and evaluate your actions?)
Do this well	Need to improve							
		What evidence do you have to support this?						

Build relationships

Take time to build a quality relationship with the parent/s. Think about how to build trust in a comfortable, friendly atmosphere. Good listening and helping skills are important. Promote social connections and building of other relationships through informal supports.

Current Practice		National Quality Standards	Community Care Common Standards	Quality Improvement Council	Department of Human Services	Evidence Examples		
Do this well	Need to improve							
Practice Examples <ul style="list-style-type: none"> Agency/team/program listens to the needs of families Agency/team/program assists to develop informal supports for families 		5.1.1	3.3	2.5	3.2	Evidence Examples <ul style="list-style-type: none"> Location Friendly, safe and open environment in which clients are seen Staff training and training records Support groups Advocacy and support services Case conferencing 		
		6.1.1	3.4		4.5			
		6.1.2	3.5		4.6			
		6.2.1						
Current Practice		What are you currently doing well?				What are you going to commit to change/improve?	Review Date	Progress and Evaluation (how will you monitor and evaluate your actions?)
Do this well	Need to improve							
		What evidence do you have to support this?						

Comfortable setting

Ensure programs and activities are non-stigmatising and services are provided in a family friendly and culturally inclusive physical environment, by skilled and responsive staff working from a family-centred, culturally sensitive perspective.

Current Practice		National Quality Standards	Community Care Common Standards	Quality Improvement Council	Department of Human Services	Evidence Examples	
Do this well	Need to improve						
Practice Examples <ul style="list-style-type: none"> Agency/team/program provides services in an environment that is friendly (reception and other staff) and provides a space for children to play Agency/team/program is welcoming to all cultures and includes diversity of information Agency/team/program ensures staff undertake Aboriginal cultural awareness training 		1.1.5 5.1.1 5.2.3 6.1.2 6.3.2 6.3.3	2.2	2.2 2.3 2.4	3.2 4.1 4.4 4.5	Evidence Examples <ul style="list-style-type: none"> Culturally appropriate sites ATSI and CALD friendly Cultural diversity plan Cultural diversity policy/procedure Cultural diversity working group 	
Current Practice		What are you currently doing well?			What are you going to commit to change/improve?	Review Date	Progress and Evaluation (how will you monitor and evaluate your actions?)
		What evidence do you have to support this?					

Affordable service

Ensure service is no cost and think about the 'hidden' costs for parents to access a service- transport to get there and the cost and time with arranging childcare.

Practice Examples

- Agency/team/program provides services that are free and considers the hidden costs for parents (transport/childcare)

National
Quality
Standards

Community
Care Common
Standards

Quality
Improvement
Council

Department of
Human
Services

2.1

2.4

2.1

Evidence Examples

- Fees policy
- Service brochures, flyers
- Signs in the waiting area
- Crisis policy/procedure/guidelines

Current Practice		What are you currently doing well?	What are you going to commit to change/improve?	Review Date	Progress and Evaluation (how will you monitor and evaluate your actions?)
Do this well	Need to improve				
		<p>What evidence do you have to support this?</p>			

Principles of Practice to Improve Service Access for Aboriginal and Torres Strait Islander children and families

Cultural Respect and Competence

Build cultural respect and competence into your organisation's structure- have regular ways for staff to develop cultural understanding of local Aboriginal communities. Immerse yourself in cultural respect training in the context of poverty- many families are dealing with poverty and this adds additional pressures to families and creates different priorities, be respectful of this when working with families/communities.

Practice Examples

- Provide opportunities for staff to participate in cultural awareness and cultural competence training.
- Provide opportunities for staff to participate in celebrations and events which mark significant events for the Aboriginal community.

National
Quality
Standards

1.1.1
1.1.2

Community
Care Common
Standards

Quality
Improvement
Council

2.3
2.4

Department of
Human
Services

2.1
4.4
4.5

Evidence Examples

- Cultural awareness training
- ATSI and CALD friendly sites
- Cultural diversity plan
- Cultural diversity policy/procedure
- Cultural diversity working group
- Staff training records

Current Practice		What are you currently doing well?	What are you going to commit to change/improve?	Review Date	Progress and Evaluation (how will you monitor and evaluate your actions?)
Do this well	Need to improve				
		<p>What evidence do you have to support this?</p>			

Develop Relationships

Develop relationships and get to understand the local Aboriginal community. Make sure you get a good understanding of the context of individuals and families that you are working with. Take the time to get to know their background, issues and connections within the community.

Practice Examples

- Learn about a family/community situation first before offering any support.
- Ask questions to understand the family and develop trust to get to know family dynamics and issues.

National
Quality
Standards

5.1.1
5.2.3
6.1.1

Community
Care Common
Standards

2.5

Quality
Improvement
Council

2.5

Department of
Human
Services

2.2
3.1
4.4
4.5

Evidence Examples

- Culturally appropriate sites
- Cultural diversity plan
- Cultural diversity policy/procedure
- Cultural diversity working group
- Aboriginal Liaison officers
- Positions descriptions
- Staff supervision

Current Practice		What are you currently doing well?	What are you going to commit to change/improve?	Review Date	Progress and Evaluation (how will you monitor and evaluate your actions?)
Do this well	Need to improve				
		<p>What evidence do you have to support this?</p>			

Respect

Respect how busy people are and the number of commitments that they juggle (work, family, community). When working with role models/leaders in the community be mindful of whether that is a role they seek or are happy to be in. Understand the family/community commitments that community members/leaders are dealing with and be mindful about placing extra expectations.

Practice Examples		National Quality Standards	Community Care Common Standards	Quality Improvement Council	Department of Human Services	Evidence Examples	
		5.2.3 6.3.4		2.3	4.4 4.5		
Current Practice		What are you currently doing well?			What are you going to commit to change/improve?	Review Date	Progress and Evaluation (how will you monitor and evaluate your actions?)
Do this well	Need to improve						
		What evidence do you have to support this?					

Leadership to Lead Positive Practice

Strong organisational leaders are essential to promoting and supporting work with Aboriginal communities. Respect and understanding need to be developed at all levels of the organisation. Strong leadership gives staff role models and assists to facilitate healthy partnerships with Indigenous and non-Indigenous organisations.

Practice Examples		National Quality Standards	Community Care Common Standards	Quality Improvement Council	Department of Human Services	Evidence Examples	
		7.1.1 7.1.4		3.2		<ul style="list-style-type: none"> • Culturally appropriate sites • Cultural diversity policy/procedure • Cultural diversity plan • Aboriginal Liaison officers • Staff support and supervision • Staff training 	
Current Practice		What are you currently doing well?			What are you going to commit to change/improve?	Review Date	Progress and Evaluation (how will you monitor and evaluate your actions?)
Do this well	Need to improve						
		What evidence do you have to support this?					

Respond to Community Needs

Work from the ground up and let the community develop ideas - rather than taking a developed program to a community and trying to get the community to take it on.

Practice Examples		National Quality Standards	Community Care Common Standards	Quality Improvement Council	Department of Human Services	Evidence Examples		
		6.3.4	1.4	3.4	3.1 4.1 4.4 4.5	<ul style="list-style-type: none"> Community development policy/procedure Community engagement policy/procedure Links with ACCO Protocols with agencies Interagency referrals Aboriginal Liaison Officers position description Staff training 		
Current Practice		What are you currently doing well?				What are you going to commit to change/improve?	Review Date	Progress and Evaluation (how will you monitor and evaluate your actions?)
Do this well	Need to improve							
		<p>What evidence do you have to support this?</p>						

The Application of Community Development Principles

In any work with community, apply community development principles, these principles include: community participation, ownership, empowerment and accountability, lifelong learning, long-term commitment, inclusion, access and equity, social action, advocacy, networking, self-help and trust.

Practice Examples		National Quality Standards	Community Care Common Standards	Quality Improvement Council	Department of Human Services	Evidence Examples	
		6.3.3 6.3.4	1.4	3.4	4.3 4.4 4.	<ul style="list-style-type: none"> • Community development policy/procedure • Community engagement policy/procedure • Links with ACCO • Protocols with agencies • Interagency referrals • Aboriginal Liaison Officers position description • Staff training 	
Current Practice		What are you currently doing well?			What are you going to commit to change/improve?	Review Date	Progress and Evaluation (how will you monitor and evaluate your actions?)
Do this well	Need to improve						
		What evidence do you have to support this?					

Support to Access

Pay sitting fees (where relevant), provide good food, assist with transport and provide child care- understand that if you expect community members to participate in programs/activities that support to get there is important. Also understand that many community members who are not in paid positions- are not getting reimbursed for their time and their time is valuable.

Current Practice		National Quality Standards	Community Care Common Standards	Quality Improvement Council	Department of Human Services	Evidence Examples		
Do this well	Need to improve							
		6.1.2 6.3.3	2.1	2.1	2.1 2.2	<ul style="list-style-type: none"> • Examples of services provided to support parents/families • Access support such as vouchers, emergency relief • Feedback from parents, formal and informal • Information provided in a number of mediums • Service brochures, flyers • Friendly, safe and culturally appropriate locations 		
		What are you currently doing well?				What are you going to commit to change/improve?	Review Date	Progress and Evaluation (how will you monitor and evaluate your actions?)
		What evidence do you have to support this?						

Flexible Approach

Allow your immediate needs to be fluid and take a flexible approach in everything you do. Agree to work towards broad outcome areas (like children are healthy and developing well), but get the community to determine how to work towards achieving it (establishing local playgroup/kindergarten program) including community involvement in program design and delivery. Allow lots of time for any program activities- there is a need to progress at a pace that suits the community. For example, when deaths occur in the community, do not expect activities to progress as normal.

Current Practice		National Quality Standards	Community Care Common Standards	Quality Improvement Council	Department of Human Services	Evidence Examples		
Do this well	Need to improve							
		6.2.1 6.3.1 6.3.4		2.2	2.1 4.1 4.4 4.5	<ul style="list-style-type: none"> • Examples of services provided to support parents/families • Access support such as vouchers, emergency relief • Feedback from parents, formal and informal • Information provided in a number of mediums • Service brochures, flyers • Friendly, safe and culturally appropriate locations • Provision of Home visits and outreach service • Access policy/procedure • Case notes • Referral systems 		
Current Practice		What are you currently doing well?				What are you going to commit to change/improve?	Review Date	Progress and Evaluation (how will you monitor and evaluate your actions?)
		What evidence do you have to support this?						

Partnerships

Partnerships are essential, but can be about power – and you need to promote partnerships of equality through respect, communication and understanding. Work as a team as isolated workers will not have enough support. Having other people to work with, provide support and talk about what you are doing and what has worked and hasn't is really important.

Practice Examples		National Quality Standards	Community Care Common Standards	Quality Improvement Council	Department of Human Services	Evidence Examples			
		6.1.1 6.1.2 6.1.3 6.2.1 6.3.1 6.3.4			4.4 4.5	<ul style="list-style-type: none"> • Protocols with other agencies • Memorandum Of Understanding (MOUs) • Service Agreements • Care planning process • Advocacy policy/procedure 			
Current Practice		What are you currently doing well?				What are you going to commit to change/improve?	Review Date	Progress and Evaluation (how will you monitor and evaluate your actions?)	
Do this well	Need to improve								
		What evidence do you have to support this?							

Making Changes

Making changes within an organisation is not always easy. In most cases, getting organisations (no matter how small or large) to embrace change requires significant change management. Here are some phases of organisational change that may be helpful.

Phase 1: Motivating change

Not everyone wants to change. One of the key strategies is to build on self-interest. Workers and the organisation as a whole need to be convinced that partnership development will have something in it for them, otherwise it may be perceived as an extra burden. Strategies can include the following:

- Introduce people to the possibilities and value of making changes to improve the accessibility of the agency.
- Outline the current position of the organisation and where it could be in the future. 'Visions' can be powerful motivators.
- Involve staff in the development of the action plan.
- Highlight some realistic approaches to change and how they could be implemented. Start small.
- Address resistance and the reasons for it, including feelings of inadequacy, lack of conviction that change is necessary or that there may be negative impacts on existing jobs.
- Listen to people's concerns and take them into account.

Phase 2: Developing support for change

This phase of change management is often overlooked, yet it is a phase that often stops successful change occurring. Some people in organisations have a vested interest in preserving the status quo. Strategies can include the following:

- Ensure senior management and the board have an understanding of the importance of service accessibility and are committed at every level, from policies to individual interactions.
- Recognise that improving service access may change the existing power structures and address this. For example, clients or others may make more decisions.
- Engage the key power players to lead, manage and embed changes and practice into the organisation and, if they have concerns, address them promptly.

Phase 3: Managing the transition

This phase occurs when the organisation works to make the actual transition from the current state to the future state. This establishes changes and makes them work.

Strategies can include the following:

- Engage in ongoing coaching, training and reiteration of new policies and procedures.
- Undertake formal professional development.
- Design clear milestones and celebrate their achievement.
- Adjust plans on the basis of feedback and changed circumstances.
- Design work plans that embed the actions and changes.
- Communicate to stakeholders about where you are as an organisation, what the next step is, and how everybody's efforts are contributing to the ultimate goal.

Phase 4: Sustaining Momentum

Often this is the most difficult phase in managing change. It is difficult because staff move jobs, people get bored, they cannot see the 'pay-off' or they feel under-resourced for any extra work they are expected to do. Strategies can include the following:

- Provide support, often in the form of resources, along with professional development and coaching.
- Affirm efforts and celebrate successes.
- Reward successful activities and change.

Policy Template

Improving Service Accessibility for Families

PURPOSE

For all clients to have access to services that are non-discriminatory and are provided in the least restrictive way.

POLICY STATEMENT

(Name of Agency) recognises the way in which services are delivered makes a difference to how accessible they can be. To ensure that our services are accessible we will:

- Create and maintain an environment that supports staff to provide flexible services to clients
- Assist clients to access a range of coordinated services
- Providing information to people about the services available
- Ensure services are accessible, non-discriminatory and culturally appropriate
- Work in partnership with families
- Work in partnership with other agencies

POLICY PRINCIPLES

We will foster the eleven principles of practice to improve service access:

1. Meet parents needs
2. Start where the family is at
3. Every family is different
4. Support to access
5. Accessible location and times
6. Coordination of services to meet family needs
7. Availability and response
8. Build relationships
9. Comfortable setting
10. Parents know service is available
11. Affordable service

Principles of positive practice to improve service access for Aboriginal and Torres Strait Islander children and families:

- Cultural respect and competence
- Partnerships
- Flexible approach
- Support to access
- Develop relationships
- Respect
- Leadership to lead positive practice
- Respond to community needs
- The application of community development principles

DEFINITIONS

(Insert definitions here)

REFERENCES, KEY LEGISLATIONS AND STANDARDS (examples below)

Practical guidelines to improve service accessibility for families – East Gippsland Service Access Working Group

ASSOCIATED DOCUMENTATION, POLICIES AND PROCEDURES (examples below)

- Access and Equity Policy
- Intake processes
- Client rights and responsibilities
- Service Delivery Policy

Monitoring and Evaluation

The actions identified need to be reviewed and evaluated regularly to ensure that:

- What was planned was implemented and in the way that was intended
- That progress towards the identified outcome is measured/monitored

Family Feedback

One of the most effective ways to monitor and evaluate the actions around improving service access is to ask clients and the community for feedback. Most agencies already have a process in place for obtaining client and community feedback. There may be opportunity to embed questions around the service access principles within existing systems. Key questions could include:

- Did the staff/service/program take enough time to understand your needs?
- Are staff/service/program friendly and welcoming?
- Did you feel staff/service/program were respectful to you and your family?

The following is a list of techniques which can be used to obtain feedback:

- Comment Forms
- Computer-Based Polling
- In-Person Surveys
- Web-based Response Polls
- Interviews
- Mailed Surveys and Questionnaires
- Telephone Surveys/Polls
- Focus Groups
- Social Media

Staff Feedback

- Supervision
- Team Meetings

What to do with Feedback and Evaluation

Action should be taken on the findings gathered through the monitoring and evaluation process. This could include:

- Prioritising areas of action
- Updating the actions in the checklist
- Re-engaging leadership and staff
- Provide feedback back to clients on actions and outcomes

References and Further Reading

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