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Services Connect Forum

27 June 2014

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What we know so far…..

"At the end of June, the department will release an Advertised Call for Submissions seeking submissions to establish a Services Connect Partnership in a Department of Human Services' Area.

The purpose of creating these Partnerships is to further develop and test the Services Connect model of integrated human service delivery, through a collaborative process between government and non-government service providers."

Services Connect Communique 11 June 2014

A series of information forums have been held recently by the department.

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What we know so far…..

- There will be up to eight sites – with a site defined as one of the 17 DHS areas.
- Selected through an Advertised Call for Submissions with a six week response time.
- Based on the funding available, we predict approximately $600-650K per annum will be available per site.
- The Department have signalled that about half of these funds are for direct service delivery (i.e. FTE) and half towards network/governance/leadership development.
- Funds also provided to develop an IT platform to support the trial sites with an initial platform expected to be rolled out in late 2014.
- The department has clearly signalled that they do not expect submissions to have detailed and well formed service models – but more that the submissions should demonstrate the right partners, governance model, capability and potential to develop a working model that will test the Services Connect approach

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What we know so far…..

- Each partnership expected to provide 7 FTE (from combination of own program FTE and the new $) – but this may change in the final specs…
- Programs from which the FTE are sourced will not be required to meet program targets as it is assumed the work occurring in Services Connect will 'compensate' for any reduction in performance against target from the FTE source program
- Successful partnerships expected to have capacity to respond to all client groups within the Minister's portfolio: vulnerable children and families and individuals involved with homelessness services, family violence services, drug and alcohol services, disability services and community mental health services
- Successful partnerships also expected to have capacity to provide a focus on two priority client groups – young people leaving care and children and young people at risk of entering care
- Successful partnerships expected to have capacity to provide self, guided and managed responses
- Successful partnerships expected to *"build off"* existing networks
- Each successful partnership to provide a representative for a statewide implementation group

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What we know so far…..

- The Departmental Secretary and the Minister have both recently commented that they see a significant role for IFS/Child FIRST and the Alliances into the future
- The new Family Services demand funding is a positive development
- The Minister has also made a commitment to put a ‘stay’ on service recommissioning pending an evaluation of the impact of other recommissioning work in mental health and drug and alcohol services

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What we have requested …

- In early June the Centre and other peaks successfully requested that the submission process be delayed to allow information sessions to occur.
- We have recently requested that the response time for the Call for Submissions be extended to at least eight weeks to allow effective partnership formation – currently awaiting outcome of this request.
- We have been advised that the department is working on a strategy to provide additional advice and support to CSOs during the submission process – unclear at this stage what this means.

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What we have assumed….

- The department will be looking for partnerships that have the capacity and capability to deliver responses across the range of client cohorts
- Vulnerable children and families is by far the largest client cohort so logical to assume that existing services for this client group will need to be front and centre in the partnerships
- Based on the information sessions it is evident the department has not given a great deal of thought to client pathways into and out of Services Connect
- We suspect the eight sites will translate to two per DHS Division/one metro, one rural

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What we don't know ….

- A lot.
- The lack of specificity and detail provided at the information sessions is concerning although the department is keen to emphasise that these sites are for testing purposes. This could be a curse and/or a blessing.
- More detail may be available in the tender documentation
- We don't have access to the Services Connect evaluations that have been conducted
- We don't have access to data on client numbers and client types
- We don't know how the small and/or specialist and statewide orgs fit into the approach

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What we don't know ….

- We don't know how the department envisages the Services Connect trials will deal with confidential client information and information exchange between services
- We don't know how the new trial sites will relate to any existing Services Connect sites
- We don't have the detail yet on how and where the new Family Services and Family Violence funding will be rolled out
- We don't have an underpinning and credible narrative from the department that draws together the new initiatives and new funding other than the very high level themes about 'service integration' and 'single workers, single plans ….'

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So what can we do?

- We have a lot of material on the broad aims of Services Connect but very little of the data and detail required to develop a credible service proposal.
- But in the absence of such material there are potential opportunities for services to develop their own narratives and approaches to the delivery of Services Connect.
- The Centre's view is that Integrated Family Services/Child FIRST is the most logical platform for the Services Connect trials
  - They have an existing and effective legislative mandate covering both the receipt and transmission of reports and information exchange between services
  - They have wide experience in managing client pathways and referral protocols
  - They have good experience in partnership working and drawing disparate services together both in Integrated Family Services/Child FIRST and through the Alliances
  - Many alliances already have members and relationships with organisations that deliver services to the Services Connect client groups. Governance arrangements for the Service Connect site could be formed as a specific group within the Alliance
  - These approaches are consistent with the long term vision that Integrated Family Services /Child FIRST evolves into a multi-disciplinary platform capable of delivering and linking in to a wide range of services
- However, there may be other views of merit and we are keen to hear of any alternative suggestions.

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Whatever approach is taken by Centre members it is clear that new partnerships may need to be formed…. a time consuming and demanding process.

