CHILD AND FAMILY INTEGRATED SERVICES ANNUAL REPORT

January 2019 to December 2019
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Background

The Northern Territory's Child and Family Centres (CFCs) are a focal point for the integration of services supporting children and their families within a community. Six purpose built child and family centres (CFCs) are currently operating in the Northern Territory at Yuendumu, Maningrida, Ngukurr, Gunbalanya, Larapinta and Palmerston.

CFCs can and do provide services for young children and their families e.g. Families as First Teachers; child care; maternal and child health; etc. but are not ‘one stop shops’. Rather they promote and facilitate a community wide ‘no wrong door’ approach to services for young children and their families.

CFCs foster

- shared understandings and model a collaborative and integrated mindset.
- shared practices that are evidence and outcomes-based, supporting service providers, families and community to reach agreements about aims and outcomes.
- an interdisciplinary teamwork model striving to provide universal core services to all families and children.
- leadership that is relational, effective, inspiring and supportive and able to work across traditional divides.
- co-design that is sensitive and responsive to diversity and to families' and communities' needs and priorities ensuring that families and communities are partners in planning and governance.

The CFC Integrated Service paradigm represents authentic community co-design, joined up service provision, sustainable local employment pathways and most of all better education, health and social outcomes for young children.

Child and Family Integrated Services Vision:

Families and communities support their children, pre-birth to five years of age, to have the best possible start in life and grow to be strong, healthy, safe, confident and capable learners.

Child and Family Integrated Services Mission:

To establish a community led, integrated service system focussed on children pre-birth to five years of age and their families

Child and Family Integrated Services Principles:

- Services are centred on the child and family and integrated
- Services and programs understand and privilege the local cultural context
- Services are committed to a long term, evidence informed approach
- Services are committed to prevention and early intervention
Definitions

Australian Early Development Census (AEDC)
The Australian Early Development Census (AEDC) is a nationwide data collection of early childhood development at the time children commence their first year of full-time school. The AEDC highlights what is working well and what needs to be improved or developed to support children and their families by providing evidence to support health, education and community policy and planning.

ASQ TRAK
The ASQ-TRAK is a developmental screening tool for observing and monitoring the developmental progress of Australian Aboriginal children at 2 months, 6 months, 12 months, 18 months, 24 months, 36 months and 48 months of age.

Child and Family Centre (CFC)
Child and Family Centres are a focal point for the integration of services focussing on children from before birth to 5 and their families within a community. They provide some services for young children and their families e.g. Families as First Teachers; child care; maternal and child health; etc. and connect families and children to other services in a community. CFCs foster:

- Shared understandings - Common principles in all program, policy and practice documents that are embedded in a common philosophy.
- Shared practices - Common evidence and outcomes-based practices across all services, with service providers and families reaching agreements about aims and outcomes characterised by a transdisciplinary teamwork model, universal core services to all families and children, and an inclusive and non-stigmatising approach to programming and planning.
- Leadership - Leaders that are well-trained and supported, effective in their roles, inspiring and supportive of all staff, and able to work across traditional divides.
- Co-design - Families and communities are partners in planning and governance. It is essential that any integrated centre is sensitive and responsive to diversity and to families’ and communities’ needs and priorities.

Child and Family Integrated Service
The CFC Integrated Service is model of authentic community co-design, joined up service provision, sustainable local employment pathways and most of all better education, health and social outcomes for young children. The CFC Integrated Service Model operates on the following principles:

- Services are centred on the child and family and integrated
- Services and programs understand and privilege the local cultural context
- Services are committed to prevention and early intervention
- Services are committed to a long term, evidence informed approach
Chronic Health Issues
The terms chronic disease, preventable chronic diseases, chronic conditions, long term disease/conditions are commonly used interchangeably. In this report the term ‘chronic health issues’ is used to refer to conditions that are influenced by the underlying social determinants of health that are largely preventable, and if addressed can minimise the onset of chronic conditions – please refer to the NTG Chronic Conditions Prevention and Management Strategy 2010-20201.

Collective Impact
CFCs have adopted a modern Collective Impact approach with the CFC being the ‘Back bone & Container for Change’ through which ‘Continuous Communication & Community Engagement’ supports the identification and articulation of a ‘Common Agenda & Community Aspiration’ and encourages ‘Mutually reinforcing & High Leverage Activities’ and ‘Shared Measurement & Strategic Learning’2 across all service providers.

- **Common Agenda & Community Aspiration**
  - A community led vision of a better future for children

- **Back Bone & Container for Change**
  - A team or individuals that mobilise stakeholders, demonstrate leadership, cultivate trust and empathy, facilitate change and sustain the process.

- **Shared Measurement & Strategic Learning**
  - A learning and evaluation process that provides real time feedback and robust processes for sense making and decision making

- **Continuous Communication & Community Engagement**
  - Authentic and inclusive involvement of a broad spectrum of stakeholders, particularly those most affected.

- **Mutually Reinforcing & High Leverage Activities**
  - Both mutual and independent activities that are adaptable, enable innovation and provide opportunities for change.

Cultural Identity
Cultural identity refers to a feeling of belonging to a group. It is part of a person’s self-conception and self-perception and is related to nationality, ethnicity, religion, social class, generation, locality or any kind of social group that has its own distinct culture. In this way, cultural identity is both characteristic of the individual but also of the group sharing the same cultural identity.

FaFT
Families as First Teachers program.

Formal Qualification
A qualification recognised under the Australian Qualification Framework for Education and Training.

Learning and development activities
Formal and informal activities that support the learning and development of children

Quality Formal Early Learning Programs
Quality Formal Early Learning Programs are planned and regular program delivered by qualified staff utilising recognized curriculum and evidence based practices.

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2 Tamarack Institute [https://cdn2.hubspot.net/hubfs/316071/Events/Multi-Day%20Events/Community%20Change%20Institute%20CCI%202016%20CCI%20Toronto/CCI_Pub...](https://cdn2.hubspot.net/hubfs/316071/Events/Multi-Day%20Events/Community%20Change%20Institute%20CCI%202016%20CCI%20Toronto/CCI_Publications/Collective_Impact_3.0_FINAL_PDF.pdf)
Collaborative Change Cycle

CFC Integrated Services are using the Collaborative Change Cycle developed by Collaboration for Impact to monitor and inform progress toward service integration.

The Collaborative Change Cycle articulates five interlinked phases of work each providing guidance and resources - the readiness runway; building the foundations for change; creating a shared vision for change; scaling up for systems change; and achieving transformation.

Each phase incorporates four layers, each of which is plays an important part in achieving and sustaining real progress. These are leadership, collaboration, community and measurement.

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2 Collaboration for Impact (CFI) is Australia’s leading organisation for learning how to respond to complexity through effective collaboration. http://www.collaborationforimpact.com
NT Child and Family Outcomes Framework

The Northern Territory Child and Family Outcomes Framework identifies six outcomes to measure and understand the progress, and impacts of integrated service delivery across the Northern Territory. An outcomes based approach enables integrated services to understand their impact on children, families and communities, and the real value families receive from services and programs provided, including developing a better understanding of the vulnerabilities and strengths for children and their families in community.

The NT Child and Family Outcomes Framework identifies objectives, strategies and actions under each outcome. It also describes the performance indicators which will enable communities and the system to determine whether the strategies and actions are improving outcomes for children and families in each of the key areas.

Each site has developed a place based outcomes framework that aligns with the overarching NT Child and Family Outcomes Framework. These Place Based Outcomes Frameworks acknowledge that every community is unique and may have different needs. They can also be used to address fragmentation and duplication of services, in order to foster more efficient use of resources and build better connections in improving access to services for families.

The Place Based Outcomes Framework will assist integrated services to fulfil the vision, objectives and strategies that underpin integrated service delivery and will use both formal and informal measuring tools to collate both qualitative and quantitative data.

The outcomes data will be used to measure the impact of change, determine which services are most needed, identify what services and programs are directly making an impact and ensure, where possible, resources and funding are not being duplicated.

The individual child and family centre reports below use the following symbols to demonstrate the progress against the outcomes in each community/ integrated service.

- **Positive change**
- **No significant change**
- **Negative change**
- **No data or only partial data available**
- **First collection of data**
**Palmerston Community Vision**

Palmerston Child and Family Centre (CFC) is a part of a larger collective in Palmerston, Grow Well Live Well. Broadly Grow Well Live Well is working together to facilitate community led action to improve the wellbeing of all children, young people and families in Palmerston.

We at the Palmerston Child and Family Centre are committed to enhancing the lives of almost 3,500 children aged 0-5 years old in Palmerston.

**Palmerston Community Population**

In the 2016 Australian Census it was recorded that 33,695 people populate Palmerston. Of these 11% being Aboriginal and 10.3% (3,465 people) of the overall population being 0-4 years of age.

According to the 2018 Australian Early Development Census (AEDC) in Palmerston children with vulnerability on one or more domains ranges from approximately 14% in Gunn to 43% in Moulden. This large variance in vulnerability is representative of the complex diversity found across the Palmerston community.

**Boundaries**

The City of Palmerston includes the suburbs and localities of Archer, Bakewell, Bellamack, Driver, Durack, Farrar, Gray, Gunn, Johnston, Marlow Lagoon, Mitchell, Moulden, Palmerston City, Pinelands, Rosebery, Woodroffe, Yarrawonga and Zuccoli.

**Focus families (priority access)**

To cater for those families at highest risk of vulnerability the Palmerston Child and Family Centre programs and service delivery focus on families within the following priority areas:

- Aboriginal and Torres Strait Islander Families
- Families with disadvantage/vulnerability
- Families within the suburbs with the highest child vulnerability according to the AEDC
  - According to the 2018 AEDC suburbs with the highest percentage of children developmentally vulnerable on one or more domains are:
    - Gray
    - Moulden
    - Drive/Marlow Lagoon
    - Woodroffe
- In addition, at the CFC we work with families on the local Aboriginal Community, Palmerston Indigenous Village.
Palmerston Collective Impact

The Palmerston Child and Family Centre is an Aboriginal focused centre available to all children and families of the Palmerston area. The centre commenced operation on 31 August 2015. The centre is located in Farrar and governed by Gray Primary School. The Child and Family Centre has a strong connection to the Gray Family Centre and values the ability to work seamlessly with its Coordinator to strengthen the connection between the Gray School community and the Child and Family Centre.

Back Bone & Container for Change

The local area of Palmerston has a large collective impact project, Grow Well Live Well which was established in 2014 to work together for the wellbeing of children and young people. Palmerston Child and Family Centre have worked closely with Grow Well Live Well since it began operation in 2015. This was initially through the Community Engagement Group which facilitated consultations with community to create a state of the children report for Palmerston. Further focus groups unpacked the data and from this three key priorities were identified:

- Youth Mental Health and Wellbeing
- Family Violence

Number of children

<table>
<thead>
<tr>
<th></th>
<th>0-1</th>
<th>1-2</th>
<th>2-3</th>
<th>3-4</th>
<th>4-5</th>
<th>5-6</th>
<th>Total</th>
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</thead>
<tbody>
<tr>
<td>All</td>
<td>684</td>
<td>726</td>
<td>746</td>
<td>627</td>
<td>685</td>
<td>614</td>
<td>4082</td>
</tr>
<tr>
<td>Male</td>
<td>346</td>
<td>375</td>
<td>402</td>
<td>316</td>
<td>350</td>
<td>330</td>
<td>2119</td>
</tr>
<tr>
<td>Female</td>
<td>337</td>
<td>354</td>
<td>345</td>
<td>315</td>
<td>333</td>
<td>284</td>
<td>1968</td>
</tr>
<tr>
<td>Indigenous</td>
<td>91</td>
<td>98</td>
<td>106</td>
<td>107</td>
<td>95</td>
<td>603</td>
<td></td>
</tr>
<tr>
<td>Non Indigenous</td>
<td>544</td>
<td>546</td>
<td>579</td>
<td>465</td>
<td>531</td>
<td>464</td>
<td>3129</td>
</tr>
</tbody>
</table>

To address these issues it was decided three Action Groups would drive initiatives to address these priorities. Grow Well Live Well's broad structure includes a Backbone, Leadership Group and three action groups:

- Empowering parents and families
- Working together with community
- Strengthening service delivery.

The Palmerston Child and Family Centre has representation on the Leadership group, and two of the Action Groups - Empowering parents and families; and Working together with community.

During 2019, as there was a change in leadership, the Palmerston Child and Family Centre’s focus was to review the integrated service delivery of the internal programs and services. As well as an introduction to and building connections within the broader existing collective impact project Grow Well Live Well.

Key achievements in 2019:

- Continued membership on the Grow Well Live Well Leadership Group
- Representation in two Action Groups
- Completed review of internal integrated service delivery.

Common Agenda & Community Aspiration
During 2019 Grow Well Live Well Leadership Group reviewed the common agenda and redefined it to create further clarity, it now states ‘Grow Well Live Well is working together to facilitate community led action to improve the wellbeing of all children, young people and families in Palmerston’.

Shared Measurement & Strategic Learning
Conversations within Grow Well Live Well in relation to shared measurement opportunities is ongoing. The capacity to demonstrate alignment between the work of Palmerston Child and Family Centre and Grow Well Live Well is limited. Accessing data for the Child and Family Centre Outcomes Framework from integrated services are proving challenging and currently results in limited to no base line data particularly in relation to children’s health.

Continuous Communication & Community Engagement
In 2019, Grow Well Live Well have built an independent website in order to keep the community informed and up to date. A community reference group has been established to guide the content development, with the aim of the site being inclusive and relatable for Palmerston’s diverse community.

The Grow Well Live Well Leadership Group aims to ensure a range of service representatives and local community members contribute to the common agenda. Participation within the leadership group by community representatives has been challenging and is an ongoing initiative.

The Child and Family Centre is working towards increasing the contribution of the wider communities’ voice in decision making and service provision. Aiming to achieve this through participation in community networking groups, surveys for decision making on large initiatives such as the Child and Family Community Fund and the re-establishment of the Palmerston Child and Family Centre’s Advisory Group. Community consultation through the Child and Family Community Fund will produce feedback that can be fed into Grow Well Live Well.

Mutually Reinforcing Activities & High Leverage Activities
It is anticipated that the ongoing Child and Family Centre’s work and Grow Well Live Well meetings in 2020 will strengthen and further align programs and service to create more opportunities for mutually reinforcing activities.
### Palmerston Collaborative Change Cycle Progress

<table>
<thead>
<tr>
<th></th>
<th>LEADERSHIP</th>
<th>COMMUNITY</th>
<th>COLLABORATION</th>
<th>MEASUREMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Large scale impact</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Building alignment</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Enabling the work</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brokering agreement</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Building shared understanding</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Building the container</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Understanding the System</td>
<td>✓</td>
<td></td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Calling for a new way of working</td>
<td>✓</td>
<td>✓</td>
<td>❌</td>
<td>✓</td>
</tr>
<tr>
<td>Recognising possibility for change</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Responding but not changing</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
</tbody>
</table>

**Note:** The table represents the view of the Child and Family Centre and does not represent the views of all involved in this collective.

Previous years progress  ➸  Current years progress

**Leadership – Understanding the system**
- Collective agreement that business as usual is insufficient to make large-scale impact. That systems required change to better align program, services and our centre with the broader community vision.
- Conversations through the network meetings are highlighting the need to work differently in the broader community perspective.
- Small pockets of change are occurring through partnerships and collective action. Grow Well Live Well Leadership are working to clarify roles and build a refreshed view of priorities and action.

**Community – Calling for a new way of working**
- Facilitating community members and families to share their experiences of how things work now and who they trust to participate in collaborative decision making and take action.
- Community members are being encouraged by Grow Well Live Well to join action groups and share their experiences to drive change.

**Collaboration – Building the container**
- Through the formation of action groups Grow Well Live Well have mobilised and engaged the community which is giving an understanding of working collaboratively with stakeholders.
- Established structures which promote community members to be active partners.
- The Child and Family Centre team continues to partner with other agencies, working collaboratively to meet the Palmerston community needs. As well as ensure program design and delivery is co-designed and based on community feedback.
Measurement – Understanding the System

- Grow Well Live Well mapping systems and networks to understand activity, power and operating dynamics across Palmerston.
- The Child and Family Centre has held discussions to understand what data is accessible and sustain efforts to plan for improved data access.
- Base line data has been collected from Child and Family Centre families to inform service provision.
**Palmerston Child and Family Integrated Service Outcomes Progress**

**OUTCOME 1: All children are strong, healthy, confident and capable learners and reach their full potential**

<table>
<thead>
<tr>
<th>Data Gap</th>
<th>Percentage of children 0-5 are diagnosed with chronic health issues.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data Gap</td>
<td>Percentage of children 0-5 have participated in all standard health screening.</td>
</tr>
<tr>
<td>Data Gap</td>
<td>Percentage of children 0-5 have an up to date immunisation record.</td>
</tr>
<tr>
<td>Data Gap</td>
<td>Percentage of children are developmentally on track in the Ages and Stages Questionnaire (TRAK) domains: of Communication, Gross Motor, Fine motor, Problem solving and Personal-social.</td>
</tr>
</tbody>
</table>

**Outcome 1: Community Narrative**

In the first quarter of the year Palmerston Child and Family Centre partnered with the Department of Health to establish a Community Hearing Worker within the Families as First Teachers (FaFT) program. The role of this integrated position is to educate children and families in the importance of ear health to ensure children have the best start to their education. Families are supported by the Hearing Worker through group information sessions and individual coaching. The position also offers a supportive pathway for families to access hearing services and assessments. The Community Hearing Worker can explain the service processes and attend appointment with families to ensure their needs are being met and they are comfortable in the clinical space.

Development of strong and trusting relationships is an integral benefit of the Community Hearing Worker position being integrated in to the FaFT program. Working closely with family ensures individualised knowledge of each child, resulting in assistance with identification and referral paperwork, targeted coaching of skills to prevent common hearing problems. During the course of 2019, 29 FaFT families were supported with hearing referrals.

On 22 October, services within the Child and Family Centre collaboratively planned and attended the Palmerston Children's Week event. The Child Australia Early Learning Centre, Young Strong Parents program, Deadly Little Learners group and FaFT team had a stall together providing information on the services available to the wider Palmerston Community. The Community Hearing Worker spent time building connections with families from the community resulting in an additional 19 hearing referrals for children not accessing FaFT.

The Palmerston Child and Family Centre programs are also supported by Department of Health Child Health Nurses. The nurses schedule appointments with patients from the ‘Healing Room’ (Clinic Room) and the ‘Family Room’. They also integrate into the FaFT and Young Strong Parents programs, supporting parents with increasing their knowledge around child health and development. Over the course of 2019, 109 clients have been formally seen in the Child and Family Centre. This number does not factor in the informal clients seen in the FaFT sessions that haven’t had a formal service event documented.
1 in 7 children vulnerable in 2 or more domains

<table>
<thead>
<tr>
<th>Domain</th>
<th>2018</th>
<th>Domain icon</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical health and wellbeing</td>
<td>13%</td>
<td>🧫</td>
<td>Children’s physical readiness for the school day, physical independence and gross and fine motor skills.</td>
</tr>
<tr>
<td>Social competence</td>
<td>14%</td>
<td>🧬</td>
<td>Children’s overall social competence, responsibility and respect, approach to learning and readiness to explore new things.</td>
</tr>
<tr>
<td>Emotional maturity</td>
<td>10%</td>
<td>🧥</td>
<td>Children’s pro-social and helping behaviours and absence of anxious and fearful behaviour, aggressive behaviour and hyperactivity and inattention.</td>
</tr>
<tr>
<td>Language and cognitive skills (school-based)</td>
<td>9%</td>
<td>🧥</td>
<td>Children’s basic literacy, interest in literacy, numeracy and memory, advanced literacy and basic numeracy.</td>
</tr>
<tr>
<td>Communication skills and general knowledge</td>
<td>7%</td>
<td>🧥</td>
<td>Children’s communication skills and general knowledge based on broad developmental competencies and skills measured in the school context.</td>
</tr>
</tbody>
</table>

Community trend of vulnerability on two or more domains overtime

<table>
<thead>
<tr>
<th></th>
<th>2009</th>
<th>2012</th>
<th>2015</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009</td>
<td>11.2%</td>
<td>11.8%</td>
<td>14.6%</td>
<td>14.3%</td>
</tr>
</tbody>
</table>

OUTCOME 2: All children have a strong cultural identity (measured by community survey)

<table>
<thead>
<tr>
<th>Base Line</th>
</tr>
</thead>
<tbody>
<tr>
<td>60 – 80% of families indicate that their 0-5 children have a strong cultural identity.</td>
</tr>
</tbody>
</table>

Outcome 2: Community Narrative

Of the sample families surveyed, collectively more than 70% indicated that their child has a strong cultural identity some of the time through to all of the time. The Palmerston Child and Family Centre plans for and encourages families and children to explore their culture and cultural identity and that of others.

In quarter three an annual NAIDOC celebration was held at the Palmerston Child and Family Centre. The focus for 2019 was ‘Voice. Treaty. Truth... And with 2019 being celebrated as the United Nations International Year of Indigenous Languages, it’s time for our knowledge to be heard through our voice’. The Child and Family Centre teams reviewed the focus and considered oral and hearing health as essential wellness needs for young children to establish long term oral literacy strength, giving them a voice into the future. The event strengthened the Child and Family Centre’s existing relationships with local Aboriginal Traditional Owners Larrakia Nation and Aboriginal businesses, whilst establishing new partnerships with service providers such as Fred Hollows, Oral Health Team and the Aboriginal Hearing Team.

Children and families experienced Torres Strait Islander dancing and singing by Upai Purri, explored Aboriginal culture through music and movement facilitated by Dingo Cockatoo Aboriginal Culture as well as having hands on animal interactions.

Health promotions stalls set up by Fred Hollows, Oral Health Team and the Aboriginal Hearing Team were available. Families spent time talking with service providers about their child’s oral and hearing health. A number of services commented on the success of the morning and that a number of follow up appointments had been arranged with families from that event.

The event fostered opportunities for integration though collaborative planning. Child Australia Early Learning Centre, Families as First Teachers (FaFT), Deadly Little Learners, Young Mums Strong Mums and Child and Family Centre staff worked together to coordinate the event. Knowledge of best practice early learning and family needs was brought to the event planning to ensure interactive and developmentally appropriate experiences were available for the children, to explore at their own curiosity and pace. Families and children from the Child Australia Early Learning Centre, FaFT, Deadly Little Learners, and Young Mums Strong Mums programs attended the event along with local elders and local aboriginal community members.

OUTCOME 3: All families are strong and empowered as partners in their children's learning and development

| Base Line | Greater than 80% of families implement learning and development activities (inclusive of all non formal environments). |
| Base Line | Greater than 80% of families would seek assistance if they needed it. |
| Base Line | Greater than 80% of families indicate that they understand their children's learning and development needs. |
| Base Line | Relevant staff indicate that less than 40 - 60% of parents understand their children's learning and development needs. |
| Base Line | Greater than 80% of families report an increased capacity to understand and manage the needs of their family. |

Outcome 3: Case Story/Community Narrative

The Families as First Teachers (FaFT) program began focusing on strengthening parent partnership in relation to their child's learning and development during Term 2. This was targeted through the establishment of individual learning plans for a group of families.

Families were involved in discussions about the purpose of individual learning plans. Take home packs were created so that they could engage in Learning Games® with support at home. Parents were taught how to use the pack and some of the families regularly returned to FaFT to exchange their books and Learning Games®. Through this process families understood why and how the learning plan could support their child.

To build on from this, in Term 3, the FaFT team changed the program delivery model as they were not creating frequent and long term learning due to excessively large numbers of families in attendance. The model was amended to include smaller group/session sizes, foster increased frequency and support vulnerable families. This change brought about more opportunities to explicitly model 3a strategies to all families attending FaFT and coach individual families in 3a strategies to support their implementation at home.

Families reported greater understanding of the purpose of the FaFT program and the strategies being taught, the benefits to their child's learning and being able to see their child's growth and improvement in skills.
OUTCOME 4: All families have a voice and are active partners in the integrated services

<table>
<thead>
<tr>
<th>Data Gap</th>
<th>Percentage of families not currently engaged are represented in engagement activities.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data Gap</td>
<td>Percentage of families have active participants in programs.</td>
</tr>
<tr>
<td>Base Line</td>
<td>40 – 60 % of families believe that they contribute to decision making.</td>
</tr>
</tbody>
</table>

Outcome 4: Community Narrative

A number of the programs offered to the community by the Palmerston Child and Family Centre are delivered based on the needs of the participants. One such example is the Young Strong Parents programs, they are designed to ensure participants family and personal needs are being catered for.

The Young Strong Fathers (YSF) participants have input into the personal growth learning, topics delivered in 2019 included child development, brain development for babies and themselves (the fathers), and Circle of Security. Short courses chosen and attended included traffic management, rigging and working at heights.

The Young Mums Strong Mums program is similar in that the certificate delivered is based on the capabilities of the participants and the personal growth learning is determined by the group. Within the certificate components participants get to make choices as to which electives they will complete. Community partners aid in delivering personal growth sessions such as Smith Family – ‘Let’s Read’; Amity & Crossfit Palmerston – fitness; Team Health – Youth Mental Health first aid certificate; Families and Schools Together (FAST) – ‘Baby FAST’.

The Families and First Teachers (FaFT) program also ensures that the communities voice and needs determine program delivery. This is achieved through surveys asking families about the strengths and areas of improvements for the program, days and times which suit best for program delivery or additional areas of learning the families may feel they need to strengthen. The FaFT program services the Palmerston Indigenous Village, families from the village provide feedback in relation to what they would like to learn and where they would like this to occur, they particularly like to explore safe new spaces. Sessions take place at Howard Springs School or off site at a local parks, the Territory Wildlife Park or the Larrakia Nation building.

The Palmerston Child and Family Centre’s Aboriginal Coordinator in collaboration with the Smith Family runs the Deadly Little Learners Playgroup for Aboriginal families at Gray Primary School. Parents attending this group guide the planned engagement options. The sessions that have been delivered based on parent requests include topics such as ear health, child development, nutrition, gardening and financial literacy to name a few.
OUTCOME 5: Community voice informs service provision in the integrated service (broader community e.g. Aboriginal organisations, employees with lived experience in that community, respected community members, local government)

<table>
<thead>
<tr>
<th>Base Line</th>
<th>Greater than 80% of the community think their community is child friendly.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data Gap</td>
<td>Local groups, organisations and/or programs are governed by local community members but have minimal decision making input.</td>
</tr>
</tbody>
</table>

Outcome 5: Case Story/Community Narrative

Of the sample families surveyed, collectively 100% indicated that they feel Palmerston is a child friendly community. The feeling ranged from 16% being most of the time, 38% almost all of the time, to 46% feeling Palmerston is child friendly all of the time.

The Child and Family Centre is working towards increasing the contribution of the wider communities’ voice in decision making and service provision. Aiming to achieve this through participation in community networking groups, surveys for decision making on large initiatives such as the Child and Family Community Fund and the re-establishment of the Palmerston Child and Family Centre’s Advisory Group.

The Palmerston Child and Family Centre Advisory Group is made up of families who attend services within or connected to the CFC, service providers within or connected to the CFC and community members from Palmerston. The ongoing role of the advisory group is to provide support and strategic advice in relation to the operation of the Child and Family Centre ensuring that collaborative and integrated service delivery is provided to families which supports with the health, education, well-being and care required for children from birth to age five. In the infancy of the Child and Family Centre the advisory group met often and was a critical conduit for community voice. Over time as decisions were made, policies were developed and guidelines were established the frequency of the group was not required, it has been inactive for an extended period of time.

With the introduction of the Northern Territory Governments Child and Family Community Fund the CFC Leadership team determined that the Palmerston Child and Family Centre Advisory Group would be best suited to assist in the funding process. In the third quarter the advisory group was re-established. In relation to the Child and Family C Community Fund, the group is responsible for calling for submissions from potential stake holders, collating current data and providing community feedback to the Funding Panel.
OUTCOME 6: A strong Aboriginal workforce enables sustainable local communities

<table>
<thead>
<tr>
<th>Data Gap</th>
<th>Percentage of employees across all service providers are Aboriginal.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Base Line</td>
<td>80% of Aboriginal employees have formal qualifications.</td>
</tr>
<tr>
<td>Base Line</td>
<td>40 - 60% of Aboriginal employees are actively working towards a relevant formal qualification.</td>
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</tbody>
</table>

Outcome 6: Community Narrative

The data above only represents employees directly employed by the CFC. The percentage of employees across all service providers operating within the Palmerston Child and Family Centre which are Aboriginal is not able to be ascertained, due to data sharing agreements in relation to staff details having not being established.

However, of the staff employed directly by the Child and Family Centre:

- 71% of the full time Child and Family Centre staff are Aboriginal.
- 80% of the Aboriginal employees have formal qualifications.
- 40% of the Aboriginal employees are completing studies towards initial or additional formal qualifications.

Child and Family Centre staff are given opportunities to extend their learning through professional development which aligns to their roles and professional growth plans. In the second quarter, four staff members inclusive of the Integrated Early Childhood Services Leader, Young Mums Coordinators and the FaFT Assistant undertook Abecedarian 3a training. Though not all team members are working directly in the FaFT program which is based around the Abecedarian approach, the staff learnt key skills that could be applied to each of their roles. For example the Young Strong Parents Coordinators are now able to support participants with enriched caregiving practices and child development information, overall offering a consistent approach and messages around children and learning.