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# Keep Them Safe Workforce Survey – Final Report

Report to the Department of Premier  
and Cabinet

August 2012

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The findings in this report are based on a qualitative study and the reported results reflect a perception of the *Keep Them Safe* reforms, but only to the extent of the sample surveyed, being the Department Premier and Cabinet's (**Department**) approved representative sample of stakeholders. Any projection to wider stakeholders is subject to the level of bias in the method of sample selection.

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The findings in this report have been formed on the above basis.

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## Glossary

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|             |  |
|-------------|--|
| ABS         | Australian Bureau of Statistics  |
| CEO         | Chief Executive Officer  |
| CSC         | Community Services Centre (Regional Boundary)  |
| CWU         | Child Wellbeing Unit   |
| DEC         | NSW Department of Education and Communities  |
| DNR         | Did not respond (used in data tables)  |
| DPC         | NSW Department of Premier and Cabinet  |
| FaCS        | NSW Department of Family and Community Services  |
| FaCS - ADHC | NSW Department of Family and Community Services, Ageing, Disability and Home Care Division |
| FRS         | Family Referral Service  |
| KTS         | Keep Them Safe   |
| LGA         | Local Government Area  |
| LAC         | Local Area Command   |
| MR          | Mandatory Reporter   |
| MRG         | Mandatory Reporter Guide   |
| N/A         | Not applicable   |
| NGO         | Non-government organisation  |
| NSW         | New South Wales  |
| NSW Health  | NSW Ministry of Health   |
| OOHC        | Out-of-Home Care   |
| ROSH        | Risk of Significant Harm   |
| SEIFA       | Socio-Economic Index for Areas   |
| SES         | Socio-Economic Status  |

### 1 Executive Summary

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KPMG was engaged by the Department of Premier and Cabinet (DPC) to undertake a Workforce Survey as part of the Interim Review of *Keep Them Safe* (KTS). This report presents the findings of the survey.

In brief, the results of the survey suggest that that:

- the Mandatory Reporter Guide (MRG) has been a successful component of KTS, with evidence of high engagement with this Guide by many mandatory reporters. However the MRG appears to be being used by some mandatory reporters to confirm decisions about risk of significant harm (ROSH) rather than come to these decisions in the first place, and the results suggest that the MRG alone cannot provide adequate support for responding to vulnerable children, young people and their families in an ongoing way;
- many mandatory reporters have engaged well with the new information sharing and coordination legislation, and some increases to information sharing and collaboration attributable to KTS have occurred. There appears to have been strong organisational support for information sharing and collaboration, however barriers around other organisations' willingness to share information and collaborate, and client confidentiality, remain. Within organisations where information sharing and collaboration was reportedly high, the level of partnering was also reportedly high;
- there was variable awareness about FRSs reported including within areas where FRSs are operating, however despite this, mandatory reporters who have contacted an FRS have largely found them effective in linking families with services;
- KTS has had less of a positive impact in increasing the cultural appropriateness of services, and meeting the needs of Aboriginal children, young people and families. This is likely to be due to a combination of factors such as: limited engagement with Aboriginal clients and organisations by many mandatory reporters; service providers having poor knowledge of the local Aboriginal population; and the challenges associated with achieving change in this area;
- around half of all respondents thought that the KTS reforms have, overall, had a positive impact on their work practices and abilities in areas such as referrals, case management, information sharing and collaboration; and
- between a quarter and a half of all respondents thought KTS overall has positively impacted on meeting the needs of children, young people and families, and almost three-quarters of respondents agreed or strongly agreed with the statement *I believe that responding to child protection concerns is a shared responsibility*.

Drawing these findings together, the survey results suggest that KTS has had a positive impact on the workforce, but the progress of different elements of KTS has been variable. Largely this links with access, for example the less positive results about FRSs can be attributed in part to lack of access to FRSs in many parts of the state. In addition, KTS appears to have had varied impacts across different sectors, which can largely be attributed to the different circumstances in which mandatory reporters work within each sector.

The survey results overall align with the Deloitte Access Economics Spatial Mapping and Analysis project<sup>1</sup> which found that KTS expenditure has been highest in areas of need. The survey results suggest that the progress of many elements of KTS has aligned with this

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<sup>1</sup> A project undertaken as part of the Interim Review of KTS.

distribution of funding or level of investment (i.e. more positive results in areas with higher funding) including in the promotion of KTS, use of the MRG, collaboration and partnerships, and support of mechanisms for mandatory reporters such as the CWUs and FRSS.

The survey results suggest that a number of areas may warrant further investigation, including

- the impact of the new reporting threshold on children, young people and their families, and on mandatory reporters;
- the impact on NGOs of not having access to a dedicated CWU;
- the high number of respondents indicating ‘no change’ to information sharing has occurred—whether there are explanations for this, or whether this indicated limited impacts of KTS in this area;
- the reason why mandatory reporters from the Community Services and Disability sectors provided more positive ratings of KTS than other sectors;
- the level of consistency between advice / assistance provided by the CWU and the outcomes of the MRG – and the (potential) positive and negative impacts this has;
- how KTS has been supported and resourced, and whether this is adequate; and
- the impact of KTS on the processes and requirements associated with responding to children, young people at risk, and their families (i.e. whether KTS has increased the burden on mandatory reporters, and has led to a more bureaucratic child protection system).

Further exploration of the trend that use of the Mandatory Reporter Guide is decreasing are also warranted. This would complement the survey results which show that:

- being ‘new’ in a role does not mean someone is more likely to use the MRG (linking to the hypothesis that *mandatory reporters use the MRG as an initial decision making support tool, but as they become more used to reporting they use it less*); and
- some mandatory reporters reported using mechanisms other than the MRG, including CWUs, the Community Services Helpline, and their own professional judgement, to support them to make decisions about reporting (linking to the hypothesis that *mandatory reporters are using other mechanisms to make decisions about ROSH*).

### 1.1 Keep Them Safe

#### *Background to the reforms*

In 2007, the Hon James Wood QC was commissioned to lead a Special Commission of Inquiry into child protection services in NSW. The purpose of this Inquiry was to determine the level of change required to the current child protection system in order to cope with increasing levels of demand. In November 2008, the Inquiry handed down its findings, taking a holistic view of the needs of children, young people and their families, whereby child protection in New South Wales (NSW) was to be the collective responsibility of the whole of government and the community.

In response to the recommendations outlined in the report, the NSW Government released “Keep them safe: A shared approach to child wellbeing” (KTS). The goal of the KTS reforms, as outlined by the NSW Government, is to ensure that “all children in NSW are healthy, happy and

safe, and grow up belonging in families and communities where they have opportunities to reach their full potential.”<sup>2</sup>

### *The KTS Action Plan*

In order to support the implementation of KTS, the Government provided a \$750 million package of funding over five years to provide for services delivered by NGOs, the expansion of prevention and early intervention services, increased support for Aboriginal children, young people and their families, and funding to support children and young people entering out-of-home care (OOHC).

The KTS Action Plan<sup>3</sup> has 186 actions, some of which are new initiatives arising from the recommendations of the Wood Inquiry, others are adjustments to, or the expansion of, existing programs, and others involve the roll-out of federal programs at the state and local level. KTS is a complex schedule of reforms, which extends beyond the traditional child protection boundaries. KTS spreads across multiple program areas in both the government and non-government service systems.<sup>4</sup>

## 1.2 The KTS Interim Review and Workforce Survey

The KTS Interim Review was developed as an initial assessment of the progress of the reforms in line with the actions identified within the KTS Action Plan<sup>5</sup>. It proposes six inter-linked strategies for assessing current progress towards the overall goals of KTS. The KTS Workforce Survey forms one of these strategies.

The purpose of the survey is to understand the impact of KTS on the workforce of mandatory reporters across NSW (who are recognised as being the first level at which outcomes are likely to be achieved). Mandatory reporters are found in a range of workforce sectors including government agencies, local government, non-government organisations (NGOs) and the private sector. Through a census approach targeting the majority of mandatory reporters across the state, the survey:

- considers the impact of the components of KTS on the attitudes and behaviours of the mandatory reporter workforce, with a focus on:
  - KTS mechanisms aiming to support mandatory reporters including the Mandatory Reporter Guide, Child Wellbeing Units and Family Referral Services;
  - information sharing and collaboration including partnerships between government and non-government organisations;
  - working with Aboriginal children, young people and their families;
- seeks perspectives on the state, operation and effectiveness of the child protection system (as at May 2012), in relation to the implementation of KTS; and

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<sup>2</sup> Department of Premier and Cabinet 2012, *Principles supporting Keep Them Safe* (webpage), accessed May 2012, <[http://www.KeepThemSafe.nsw.gov.au/about/principles\\_supporting\\_kts2](http://www.KeepThemSafe.nsw.gov.au/about/principles_supporting_kts2)>

<sup>3</sup> Department of Premier and Cabinet 2009, *Keep Them Safe: A shared approach to child wellbeing*, NSW Government: Sydney, accessed 21 May 2012, <[http://www.dpc.nsw.gov.au/\\_data/assets/pdf\\_file/0004/57145/Keep\\_Them\\_Safe.pdf](http://www.dpc.nsw.gov.au/_data/assets/pdf_file/0004/57145/Keep_Them_Safe.pdf)>

<sup>4</sup> Department of Premier and Cabinet 2009, *Keep Them Safe: A shared approach to child wellbeing*, NSW Government: Sydney, p. 4, accessed 21 May 2012, <[http://www.dpc.nsw.gov.au/\\_data/assets/pdf\\_file/0004/57145/Keep\\_Them\\_Safe.pdf](http://www.dpc.nsw.gov.au/_data/assets/pdf_file/0004/57145/Keep_Them_Safe.pdf)>

<sup>5</sup> Keep Them Safe Evaluation Steering Committee n.d. *Keep Them Safe – A shared approach to child wellbeing Interim Review Plan*, Keep Them Safe Senior Officers Group, NSW Government: Sydney.

- looks at the degree of perceived change in response to the reforms, and how this is contributing to the achievement of the objectives of KTS.

### 1.3 Main findings

The discussion of survey findings aligns with the seven Interim Review questions the survey addressed (see Table 2 on page 12). The specific questions which the survey sought to address, and its findings, are summarised below.

#### *Are workers engaging with the Mandatory Reporter Guide and the new reporting threshold so that the statutory child protection system is more streamlined and focussed on children at greatest risk?*

Overall the survey results suggest that the Mandatory Reporter Guide is a successful component of KTS. The survey found that use of the MRG has been high, with around three-quarters of all respondents reporting they have used the MRG. However some mandatory reporters appear to have used the MRG more often than others; relatively frequent users include NGOs, management level staff and mandatory reporters in non-metropolitan locations. Around half of all respondents rated the importance of the MRG on their workplace practices as either 'Important' or 'Very Important'.

Most respondents had heard about the MRG from participating in training, and the majority reported they use the MRG to help them to make decisions about reporting, as is its intention. The vast majority of respondents who have not used the MRG report they have not needed to. The MRG is considered more helpful in identifying ROSH and in making decisions about reporting, than in determining next steps in responding to vulnerable children, young people and their families. The results suggest that alone, the MRG may not provide adequate support for mandatory reporters responding to vulnerable children, young people and their families.

The survey results suggest that some respondents use mechanisms other than the MRG to support them in assessing and identifying ROSH, making decisions about reporting, and determining next steps such as referral to the Child Wellbeing Units (CWUs). In addition, the results suggest that the MRG may be being used to confirm decisions about ROSH rather than to come to these decisions. Despite this not being the primary intention of the MRG, using the MRG in this way is likely to contribute to ROSH being appropriately identified.

Around half of all respondents thought increasing the threshold for reporting to ROSH was 'Important' or 'Very important' in changing their workplace practices. Many respondents indicated that KTS has had a positive impact on their ability to identify children and young people at ROSH. However there were concerns from a number of respondents<sup>6</sup> who provided commentary at the end of the survey, about the impact of the new reporting threshold on some groups of children and young people including teenagers, homeless children and young people, and children and young people with a disability, who respondents report may be 'slipping through the cracks'.

#### *To what degree is there coordination and information sharing amongst agencies?*

The survey results suggest that many mandatory reporters have engaged well with the new information sharing and coordination legislation. Mandatory reporters reportedly have high awareness of the Chapter 16A information sharing and coordination legislative provisions in the *Children and Young Persons (Care and Protection) Act 1998*.<sup>7</sup> Around 80 percent of respondents

<sup>6</sup> Note - only themes raised by a large number of respondents (e.g. over 100) are reported in this report.

<sup>7</sup> Chapter 16A of the *Children and Young Persons (Care and Protection) Act 1998*, Chapter 16A – available at: <http://www.legislation.nsw.gov.au/fullhtml/inforce/act+157+1998+FIRST+0+N>, allows information to be shared

reported knowing about the information sharing provisions, and around 76 percent reported knowing about the coordination provisions. Respondents also appear to hold positive attitudes towards information sharing and collaboration with other agencies. Many respondents indicated their organisation encourages and supports them to share information and collaborate, and they reported being moderately comfortable sharing information relating to vulnerable children and young people and their families.

However there are some clear barriers to mandatory reporters fully embracing this legislation. The most common barrier cited to information sharing and collaboration was that other organisations have not been willing to engage. Additionally, there remain concerns about confidentiality and consent amongst many mandatory reporters, and previous habits of not sharing information and collaborating remain within some sectors.

Many mandatory reporters indicated their organisation has made changes to information sharing and collaboration since the implementation of KTS. Around one-third of all respondents indicated the level of information sharing and collaboration has increased, with more positive responses from sectors with a high proportion of NGO respondents. Respondents who provided positive results about information sharing also provided positive results about coordination and partnerships, suggesting a link between these three areas.

### *What is the current state of partnerships between government and non-government services?*

In the survey, partnering was treated as a component of collaboration.<sup>8</sup> Around half of all respondents indicated their organisation is working in partnership with another organisation in supporting vulnerable children and young people and their families. There was evidence of both government and non-government organisations entering into partnership arrangements, and many organisations have dedicated time to building relationships and/or working with Aboriginal organisations, which may be a positive pre-cursor to partnerships.

Due to only a limited number of questions relating to partnerships the surveys is unable to provide a detailed response to this Interim Review question.

### *Do new systems effectively link families to services?*

There appears to be limited awareness about Family Referral Services (FRSs) amongst respondents, with one-third of all respondents<sup>9</sup> not knowing whether there is a FRS in their area. However, this limited awareness can be explained by the fact that FRSs are only operating in five locations across NSW, and widespread promotion has not yet occurred.

Between a quarter and a third of respondents working in regions where FRSs *are* operating have contacted an FRS. However high proportions of respondents have not, or appear to be unclear about what FRSs are (due to a high number not responding to questions about whether they have contacted an FRS). Where FRSs have been accessed, they appear to have been effective in linking families with services. Their performance around referrals seems to be more positive than around case management..

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between organisations for the aim of benefiting a child, young person or family, without their consent, and requires organisations to coordinate in providing services to children, young people and their families with the aim of benefiting the family.

<sup>8</sup> Collaboration refers to collaborative service delivery: to children reported to the Community Services Helpline; and to vulnerable children, young people and their families who have not been reported to the Community Services Helpline. This may involve informal and formal arrangements (such as partnerships).

<sup>9</sup> Including respondents in areas where there is a FRS and in areas where there is not a FRS.

Between a quarter and a half of all respondents thought KTS overall has positively impacted on meeting the needs of children, young people and families, however this leaves a number of respondents who were less positive, suggesting that many respondents are unwilling / unable to attribute changes to KTS, and/or that KTS has not yet had its intended impact. However it is important to remember that the outcomes identified for KTS are medium to long term; KTS is relatively new (having been in place since 2010); and there are a range of factors external to KTS that may inhibit the achievement of these outcomes.

### *Are services more available and better able to meet the needs of Aboriginal children, young people and families? Have services increased the levels of cultural awareness, cultural competence and partnerships with Aboriginal communities?*

KTS appears to have had less positive impact in this area than other areas. Over half of all respondents said their organisation has changed the way they work with Aboriginal clients – with results suggesting organisations that have more of a focus on Aboriginal clients<sup>10</sup> appear more likely to have made changes. Cultural competency training was the most common change implemented – reportedly resulting in increased cultural competency of services. However cultural competency is not part of KTS, meaning that many of the reported changes cannot be directly attributed to KTS.

The most common reason respondents provided for *not* having made changes was the fact that they had no or few Aboriginal people in their target group/area (however this may not be the case and in fact, lack of understanding may itself be a barrier). Of the organisations that have made changes, responses suggest that some gains have been achieved as a result, but there is still some way to go in improving outcomes for Aboriginal children, young people and their families. Given the current government focus on achieving outcomes for Aboriginal people, and various factors that can impact on outcome achievement, it is not possible to link changes in this area to KTS.

### *Have government and non-government services engaged positively in the process of workforce culture change?*

Overall mandatory reporters appear to have had moderately positive engagement with the process of workforce culture change since the implementation of KTS.

Around half of all respondents think that the KTS reforms have, overall, had a positive impact on their work practices and abilities in areas such as referrals, case management, information sharing and collaboration. Between 40-50 percent of respondents also indicated specific components of KTS, such as the Mandatory Reporter Guide and Child Wellbeing Units (CWUs), have had a positive impact on their work practices, however, there is some inconsistency across the elements. Generally these results aligned with the results for other survey questions about work practices and abilities, and workforce culture.

Respondents provided less positive ratings to questions about the impact of KTS on their ability to meet the needs of children, young people and families, with the majority of responses falling in the middle of the five point response scale (i.e. a rating of 3 out of 5) in answering questions such as *What impact has Keep Them Safe had on... your ability to make appropriate referrals; increased access to appropriate programs/services by vulnerable children, young people and their families; increased cultural appropriateness of programs/services?* Again there was apparent alignment between these results and other relevant survey questions.

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<sup>10</sup> Most respondents have between 1-19 percent of their work or role focussed on Aboriginal clients, with only 13 percent of all respondents indicating that they have no focus on Aboriginal clients through their role/work.

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Almost three-quarters of respondents agreed or strongly agreed with the statement *I believe that responding to child protection concerns is a shared responsibility*, suggesting positive attitudes about the shared responsibility message of KTS amongst most respondents.

## 2 Introduction

This section provides background and context to the Keep Them Safe Workforce Survey project.

### 2.1 *Keep Them Safe reforms*

In response to a quadrupling in the number of Child Protection reports received, and significant rises in the rate of children entering the Out-of-Home Care and Juvenile Justice Systems, a Special Commission of Inquiry into Child Protection Services in New South Wales was established in 2007.

The purpose of the Inquiry, which was conducted by the Hon James Wood AO, QC, was “to investigate changes needed in the child protection system to provide more effective services to protect children and to meet future levels of demand”<sup>11</sup>. The Inquiry handed down its findings (‘the Wood Report’) in November 2008. The Wood Report made 111 recommendations, underpinned by a number of principles focussing on collective responsibility, improved systems and ways of working and improved, more holistic and needs based service delivery.<sup>12</sup>

“Keep Them Safe: A shared approach to child wellbeing” (KTS) was the New South Wales (NSW) Government’s response to the recommendations in the Wood Report.

KTS consists of a \$750 million package of funding over five years, providing for supports, programs and initiatives across seven action elements:

- 1 **The universal service system** – a strong universal service system for all children in the community, providing essential education, healthcare and support for parents.
- 2 **Strengthening early intervention and community-based services** - enhanced early intervention and community based services to support children and families in the community and prevent children from entering the child protection system.
- 3 **Better protection for children at risk** - a streamlined statutory child protection system focusing on children at greatest risk.
- 4 **Changing practices and systems** - better systems to link families to the right services, and improved coordination and information sharing.
- 5 **Supporting Aboriginal children and families** - improving the support available to Aboriginal children, young people and families recognising the often complex and high needs of this group.
- 6 **Strengthening partnerships across the community services sector** –working better with the non-government sector; workforce and cultural change to encourage stronger partnerships; and an enhanced role for the non-government sector in service delivery.
- 7 **Delivering the plan and measuring our success** – monitoring the Action Plan for KTS to ensure actions are delivered and the desired outcomes for children, young people and their families are achieved.<sup>13</sup>

<sup>11</sup> Department of Premier and Cabinet 2009, *Keep Them Safe: A shared approach to child wellbeing*, Department of Premier and Cabinet: Sydney, accessed 21 May 2012, <[http://www.dpc.nsw.gov.au/data/assets/pdf\\_file/0004/57145/Keep\\_Them\\_Safe.pdf](http://www.dpc.nsw.gov.au/data/assets/pdf_file/0004/57145/Keep_Them_Safe.pdf)>

<sup>12</sup> State of NSW through the Special Commission of Inquiry into Child Protection Services in NSW 2008, *Report of the Special Commission of Inquiry into Child Protection Services in NSW: Vol 1.*, NSW Government: Sydney, accessed 24 May 2012, <[http://www.dpc.nsw.gov.au/data/assets/pdf\\_file/0010/33796/Volume\\_1\\_-\\_Special\\_Commission\\_of\\_Inquiry\\_into\\_Child\\_Protection\\_Services\\_in\\_New\\_South\\_Wales.pdf](http://www.dpc.nsw.gov.au/data/assets/pdf_file/0010/33796/Volume_1_-_Special_Commission_of_Inquiry_into_Child_Protection_Services_in_New_South_Wales.pdf)>

<sup>13</sup> Department of Premier and Cabinet 2009, *Keep Them Safe: A shared approach to child wellbeing*, NSW Government: Sydney, accessed 21 May 2012, <[http://www.dpc.nsw.gov.au/data/assets/pdf\\_file/0004/57145/Keep\\_Them\\_Safe.pdf](http://www.dpc.nsw.gov.au/data/assets/pdf_file/0004/57145/Keep_Them_Safe.pdf)>

The goal of KTS, as outlined by the NSW Government, is to ensure that “all children in NSW are healthy, happy and safe, and grow up belonging in families and communities where they have opportunities to reach their full potential”<sup>14</sup>.

### 2.2 Interim Review of *Keep Them Safe*

KTS includes a commitment to the ongoing monitoring, evaluation and review of the individual components of the KTS Action Plan and the reforms as a whole.<sup>15</sup>

The KTS Interim Review was developed as an initial assessment of the progress of the reforms in line with the actions identified within the KTS Action Plan.<sup>16</sup> The Interim Review aims to illustrate the current state of progress in the delivery of KTS, the effects of this progress, and whether the goals of KTS are on track to be achieved. It has a particular focus on workforce and cultural change, and practice and system changes, these having been identified as the likely first points of change in the system.

In addition to focusing on workforce and cultural changes, and practice and system changes, the Interim Review also aims to examine the differential effects that KTS is having on specific population groups – for example, Aboriginal children, young people and their families, and children and young people in the out-of-home care system. Draft and Final Interim Review reports will be developed by the Department of Premier and Cabinet (DPC) KTS Implementation Group in late 2012.

#### *Interim Review questions and objectives*

The objectives of the Interim Review are to:<sup>17</sup>

- describe the delivery of KTS to date;
- determine the degree to which the early stage goals of KTS have been achieved;
- analyse the impact of KTS implementation (particularly focusing on workforce practice and systems);
- learn about the drivers or inhibitors of change and progress;
- identify areas (be they geographic, issue or population) that require more targeted work;
- investigate the degree to which the conditions for achieving the overall outcomes of KTS are in place; and
- provide, for specific indicators, a baseline of information against which future change can be measured.

The broad questions that will be addressed in the Interim Review are set out in the table below.<sup>18</sup>

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<sup>14</sup> Department of Premier and Cabinet 2012, *Principles supporting Keep Them Safe* (webpage), accessed May 2012, <[http://www.keepthemsafe.nsw.gov.au/about/principles\\_supporting\\_kts2](http://www.keepthemsafe.nsw.gov.au/about/principles_supporting_kts2)>

<sup>15</sup> Department of Premier and Cabinet 2012, *Request for Tender Number: 1102640 Keep Them Safe Interim Review – Workforce Survey*, NSW Government: Sydney, p.5.

<sup>16</sup> Keep Them Safe Evaluation Steering Committee n.d. *Keep Them Safe – A shared approach to child wellbeing Interim Review Plan*, Keep Them Safe Senior Officers Group, NSW Government: Sydney.

<sup>17</sup> Keep Them Safe Evaluation Steering Committee n.d. *Keep Them Safe – A shared approach to child wellbeing Interim Review Plan*, Keep Them Safe Senior Officers Group, NSW Government: Sydney, p. 11.

<sup>18</sup> Keep Them Safe Evaluation Steering Committee n.d. *Keep Them Safe – A shared approach to child wellbeing Interim Review Plan*, Keep Them Safe Senior Officers Group, NSW Government: Sydney, p. 11.

# Keep Them Safe Workforce Survey – Final Report

Table 1: KTS Interim Review questions

| Interim Review Questions   |
|--|
| 1. To what degree is the universal service system stronger and more extensive?   |
| 2. Have early intervention services been enhanced?   |
| 3. Are early intervention services supporting children and parents in the community?   |
| 4. Are workers engaging with the Mandatory Reporter Guide and the new reporting threshold so that the statutory child protection system is more streamlined and focussed on children at greatest risk? |
| 5. Have out-of-home care and children's court processes improved?  |
| 6. To what degree is there coordination and information sharing amongst agencies?  |
| 7. Do new systems effectively link families to services?   |
| 8. Are services more available and better able to meet the needs of Aboriginal children, young people and families?  |
| 9. Have services increased the levels of cultural awareness, cultural competence and partnerships with Aboriginal communities?   |
| 10. What is the current state of partnerships between government and non-government services?  |
| 11. Have government and non-government services engaged positively in the process of workforce culture change?   |

Source: KPMG, based on: Keep Them Safe Evaluation Steering Committee n.d. *Keep Them Safe – A shared approach to child wellbeing Interim Review Plan*, Keep Them Safe Senior Officers Group, NSW Government: Sydney

## Strategies for assessing progress

The Interim Review proposes six inter-linked strategies for assessing current progress towards the overall goals of KTS:<sup>19</sup>

- **Review of Actions** – a desktop review identifying the extent to which the KTS Action Plan has been delivered.
- **Spatial Mapping and Analysis** - providing a geographic-based visual representation of KTS investment and activity across NSW.
- **Keep Them Safe Workforce Survey** (this project) – focussing on the impact of KTS on mandatory reporters.
- **Location Based Evaluation** – focussed and detailed evaluation in selected areas of NSW.
- **Project evaluations** – of specific KTS initiatives.
- **Indicators reporting** – analysis of progress by the KTS Evaluation Steering Committee against a working set of performance indicators.<sup>20</sup>

<sup>19</sup> Department of Premier and Cabinet 2012, *Request for Tender Number: 1102640 Keep Them Safe Interim Review – Workforce Survey*, NSW Government: Sydney, p.6.

<sup>20</sup> Keep Them Safe Evaluation Steering Committee n.d. *Keep Them Safe – A shared approach to child wellbeing Interim Review Plan*, Keep Them Safe Senior Officers Group, NSW Government: Sydney.

## 2.3 Links between the Workforce Survey and the Interim Review

The KTS Workforce Survey is a key component of the Interim Review and will inform the assessment of progress to date in achieving the reforms of the NSW child protection system as described in the KTS Action Plan.<sup>21</sup> The outcomes of this survey will be used to inform the Interim Review objectives relating to workforce changes and improved supports and services for families.

There is an explicit link between the Interim Review objectives and questions, and the areas for enquiry within the KTS Workforce Survey - the Workforce Survey questions are based on the following specific questions from the Interim Review Plan. These questions were identified by DPC in the Request for Tender for this engagement.<sup>22</sup> A mapping process was also undertaken to confirm which Interim Review questions the survey could be expected to answer, and to identify the areas of enquiry for the survey relevant to each of the Interim Review questions and the Interim Review objectives.

Table 2: KTS Interim Review questions that the survey will address

| Interim Review Questions   | Survey will address |
|--|---------------------|
| 1. To what degree is the universal service system stronger and more extensive?   |                     |
| 2. Have early intervention services been enhanced?   |                     |
| 3. Are early intervention services supporting children and parents in the community?   |                     |
| 4. Are workers engaging with the Mandatory Reporter Guide and the new reporting threshold so that the statutory child protection system is more streamlined and focussed on children at greatest risk? | ✓                   |
| 5. Have out-of-home care and children's court processes improved?  |                     |
| 6. To what degree is there coordination and information sharing amongst agencies?  | ✓                   |
| 7. Do new systems effectively link families to services?   | ✓ <sup>#</sup>      |
| 8. Are services more available and better able to meet the needs of Aboriginal children, young people and families?  | ✓                   |
| 9. Have services increased the levels of cultural awareness, cultural competence and partnerships with Aboriginal communities?   | ✓                   |
| 10. What is the current state of partnerships between government and non-government services?  | ✓                   |
| 11. Have government and non-government services engaged positively in the process of workforce culture change?   | ✓                   |

Source: KPMG, based on Keep Them Safe Evaluation Steering Committee n.d. Keep Them Safe – A shared approach to child wellbeing Interim Review Plan, Keep Them Safe Senior Officers Group, NSW Government: Sydney

<sup>#</sup>As a result of the mapping process, an additional question to the initial Interim Review questions was also considered in the survey – **Do new systems effectively link families to services?** – to assess the impact of KTS on mandatory reporters including on their ability to better support outcomes for children, young people and families.

<sup>21</sup> Department of Premier and Cabinet 2009, *Keep Them Safe: A shared approach to child wellbeing*, NSW Government: Sydney, accessed 21 May 2012, <[http://www.dpc.nsw.gov.au/\\_data/assets/pdf\\_file/0004/57145/Keep\\_Them\\_Safe.pdf](http://www.dpc.nsw.gov.au/_data/assets/pdf_file/0004/57145/Keep_Them_Safe.pdf)>

<sup>22</sup> Department of Premier and Cabinet 2012, *Request for Tender Number: 1102640 Keep Them Safe Interim Review – Workforce Survey*, NSW Government: Sydney.

The mapping process described above resulted in the development of a summary document setting out the links between the Interim Review objectives and questions, and the survey questions. More information on the mapping process can be found in Appendix A. The survey questions are also outlined in Appendix A.

The KTS Workforce Survey will additionally inform other components of the KTS Interim Review plan. Namely, it will:

- provide data on one item within the Population Outcome Indicators on how vulnerable children, young people and their families are supported by an integrated service system;
- cross reference the Spatial Mapping and Analysis which will provide a geographic-based visual representation of KTS investment and activity across NSW, and consider whether there are relational patterns between the differentials in (financial) investment and differentials in Workforce Survey results;
- feed into the Location Based Evaluation which seeks to map location of investment in KTS across different regions; and
- inform a preliminary strategic planning review of Child Wellbeing Units.<sup>23</sup>

### 2.4 Structure of this report

The remainder of this report is structured as follows:

- **Section 3** provides information about the KTS Workforce Survey including purpose, target group and methodology;
- **Section 4** presents an overview of the survey findings under three headings aligning with the Interim Review questions and objectives. These headings are:
  - Part 1 - Responding to children and young people at risk of significant harm and their families;
  - Part 2 - Responding to vulnerable children, young people and their families;
  - Part 3 - Mandatory reporters' perspectives on the impact of *Keep Them Safe*;
- **Section 5** presents conclusions and areas for further enquiry arising from the survey;
- **Appendix A** provides detail on the survey approach and methodology; and
- **Appendix B** provides detailed results of the survey via data tables.

#### *A word on terminology*

In this report (aligning with the language in the survey), the following definitions have been used:

- 'Child Protection Report' describes a statutory report made to the Community Services Helpline about children or young people at ROSH and their families.
- 'Vulnerable' refers to children or young people who may be at risk but who are not at ROSH (i.e. a Child Protection Report does not need to be made) together with their families.

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<sup>23</sup> A summative review of Child Wellbeing Units will be undertaken as part of the four-year Strategic Impact and Outcomes Evaluation of KTS.

## 3 Keep Them Safe Workforce Survey

This section provides an overview of the purpose, target group, design, format and content of the KTS Workforce Survey.

### 3.1 Purpose of the survey

The KTS Workforce Survey sought to understand the impact of KTS on the workforce of mandatory reporters across NSW. Mandatory reporters are defined as an individual required under Section 27 of the *Children and Young Persons (Care and Protection) Act 1998* to report to the Community Services Helpline when he/she has reasonable grounds to suspect that a child, or a class of children, is at ROSH from abuse or neglect, and those grounds arise during the course of or from the person's work.<sup>24</sup> Mandatory reporters are found in government agencies, local government, non-government organisations and the private sector.

The survey:

- considered the impact of the components of KTS on the attitudes and behaviours of the mandatory workforce, with a focus on:
  - KTS mechanisms aiming to support mandatory reporters including the Mandatory Reporter Guide, Child Wellbeing Units and Family Referral Services;
  - information sharing and collaboration including partnerships between government and non-government organisations; and
  - working with Aboriginal children, young people and their families;
- sought perspectives on the state, operation and effectiveness of the child protection system (as at 2012), in relation to the implementation of KTS; and
- looked at the degree of perceived change in response to the reforms, and how this is contributing to the achievement of the objectives of KTS.

### 3.2 Target group

The target population for the survey were mandatory reporters, working across the following sector groups:

- |   |                    |
|---|--------------------|
| • Health Services   | • Housing Services |
| • Education Services  | • Police           |
| • Community Services (including Child and Family Services and Child Protection) | • Justice Services |
|   | • Local Government |
| • Disability Services   |                    |

<sup>24</sup> *Children and Young Persons (Care and Protection) Act 1998*, Chapter 16A – available at: <http://www.legislation.nsw.gov.au/fullhtml/inforce/act+157+1998+FIRST+0+N>

There was no existing list of all mandatory reporters which could be reliably used to identify the total population of mandatory reporters in NSW, nor their geographic distribution or professional groupings. As such, the survey was a census survey – targeting the whole of the identified population of mandatory reporters – with the following exceptions based on advice provided by the Project Reference Group:

- In Education and Early Education and Care, Principals and school counsellors were targeted, because:
  - in most schools and Early Education services, Principals/Directors (rather than teachers/child care workers) are responsible for making a Child Protection Report if required; and
  - school counsellors are most regularly in close contact with vulnerable or at risk children and young people in schools.
- For Police, the survey was sent to all Police officers, with specific communication targeting Police in roles involving direct and frequent engagement with children, young people and their families, e.g. Youth Liaison Officers and Domestic Violence Liaison Officers – targeted emails were sent to these Police officers encouraging them to complete the survey.

Respondents in locations in which further KTS evaluation activity will be undertaken<sup>25</sup> were also targeted through specific communication (again with targeted emails), with the aim of developing a strong ‘baseline’ understanding of the impact of KTS on the workforce in those locations.

Table 3 provides a summary of the survey target population.

*Table 3: Summary of survey target population of mandatory reporters, by sector (ordered from highest to lowest numbers)*

| Sector  | Estimated MR population | Estimated target population | % of total target population |
|---|-------------------------|-----------------------------|------------------------------|
| <b>Health</b>                                     | 82,648                  | 82,648                      | 70.04%                       |
| <b>Education (incl. Early Education and Care)</b> | 106,501                 | 9,600                       | 6.65%                        |
| <b>Community Services</b>                         | 4,000                   | 4,000                       | 3.39%                        |
| <b>Disability Services</b>                        | 11,259*                 | 1,937*                      | 1.64%                        |
| <b>Housing</b>                                    | 2,485                   | 2,485                       | 2.11%                        |
| <b>Police</b>                                     | 15,700                  | 15,700                      | 13.21%                       |
| <b>Justice</b>                                    | 1,621                   | 1,621                       | 1.37%                        |
| <b>Local Government</b>                           | unknown                 | unknown                     | N/A                          |
| <b>Total</b>                                      | <b>224,000 approx</b>   | <b>118,000 approx</b>       | <b>100.00%</b>               |

*Source: KPMG, based on various information sources as described in Appendix A*

*\*Home Care Workers make up a large proportion of the total number of Disability Services staff. Home Care workers were not targeted for the survey because they typically work with older people rather than families with children.*

The lack of reliable information about the mandatory reporter population in NSW means that, although themes and patterns in responses and amongst respondents groups can be identified and discussed, it is not possible to rigorously estimate the validity, reliability or statistical

<sup>25</sup> Mayfield, Tamworth and Liverpool CSCs.

significance of these responses. The limitations of the survey are discussed below, and more detail about the survey methodology including census approach, is provided in Appendix A.

### 3.3 Format and content

The survey was an online survey, hosted by the site Survey Monkey. The survey ran from 1 May 2012 to 26 May 2012. It consisted of 51 questions with an approximate completion time of 20-25 minutes.

The survey questions comprised a mix of yes/no, selection from option lists, and ranking responses using Likert Scales.<sup>26</sup> Also included were some qualitative questions to capture other information relevant to the implementation of the reforms; however, these free text responses were kept to a minimum to ensure consistency in responses across the target groups.

The survey was divided into a number of sections, with each section linking to an Interim Review question, as outlined in the table below.

*Table 4: Workforce Survey outline and links to Interim Review questions*

| Sections and sub-sections   | Relevant Interim Review question(s)   |
|---|---|
| 1. Background<br><i>Initial questions</i><br><i>Demographic information</i>   | Not applicable  |
| 2. Responding to children and young people at risk of significant harm and their families<br><i>Use of the Mandatory Reporter Guide</i><br><i>Child Wellbeing Units</i> | <i>Are workers engaging with the Mandatory Reporter Guide and the new reporting threshold so that the statutory child protection system is streamlined and focussed on children at greatest risk?</i>   |
| 3. Responding to vulnerable children, young people and their families<br><i>Information sharing</i><br><i>Collaboration</i><br><i>Family Referral Services</i>          | <i>To what degree is there coordination and information sharing amongst agencies?</i><br><i>What is the current state of partnerships between Government and non-government services?</i><br><i>Do new systems effectively link families to services?</i>       |
| 4. Meeting the needs of Aboriginal children, young people and families  | <i>Are services more available and better able to meet the needs of Aboriginal children, young people and families?</i><br><i>Have services increased their levels of cultural awareness, cultural competence and partnerships with Aboriginal communities?</i> |
| 5. Impacts of Keep Them Safe<br><i>Staff behaviour, workforce and culture</i><br><i>Ability to meet the needs of children, young people and families</i>                | <i>Do new systems effectively link families to services?</i><br><i>Have government and non-government services engaged positively in the process of workforce culture change?</i>   |

*Source: KPMG*

The survey asked respondents to reflect on their experiences of working as a mandatory reporter since the implementation of KTS (January 2010). It also asked respondents to focus on their typical experience, rather than any one-off or unusual occurrences.

<sup>26</sup> The typical five-scale Likert item is: Strongly disagree, Disagree, Neither agree nor disagree, Agree, Strongly agree.

### 3.4 Limitations of the survey

In presenting the results of this survey, it is important to first discuss what the survey results cannot tell us.

The survey results provide information about individual, mandatory reporter perspectives only. These individual perspectives do not necessarily translate to the perspectives of organisations, sectors or any other mandatory reporter group, nor do they provide reliable evidence about behaviour change. Rather, they provide an indication of common attitudes and beliefs, information about the self-reported behaviours of individuals, and individuals' perceptions about organisational level change from January 2010.

Linked to this is the issue of causality. Respondents were asked a number of questions about changes beginning with the phrase *Since the implementation of Keep Them Safe...* However, as there are a range of factors that could impact the level of change (e.g. existing infrastructure, government policies, environmental factors), and not all of these factors are part of KTS, we cannot say that KTS alone (or at all) has led to the changes identified. It is important to note that respondents did not commonly, in their free text responses, identify other factors impacting on changes, suggesting a common perception that many changes respondents identified *are* as a result of KTS.

In terms of outcome measurement, the survey collected only high level information about the impacts of KTS, recognising that 1) it has only been two years since the implementation of KTS and the desired outcomes may take longer than this to be realised, and 2) respondents can only provide their individual perspectives on whether outcomes have been achieved. Results relating to outcomes should be considered in this context.

There were also some limitations with the survey sample frame and the survey communication strategy.

As noted previously, there is no existing list of mandatory reporters and, as such, the sample frame (or 'target population') was identified based on a range of data sources, with most likely varied accuracy and reliability. A detailed discussion of the development of the sample frame, including limitations is provided in Appendix A.

Use of an online survey meant that not all mandatory reporters would have been able to complete the survey, for example staff who do not have access to the internet, or staff whose work is primarily 'out of the office', such as outreach workers. An online survey was selected because it was the most practical way to reach the largest number of respondents and analyse a large data set.

It is probable that common survey biases are applicable to the survey results. Although the survey targeted all mandatory reporters, it is likely that more responses were received from particular groups of mandatory reporters who are motivated to complete the survey. For example mandatory reporters with an interest in KTS, those who have had high levels of involvement in KTS, or those who are generally inclined to participate in research. These types of biases cannot be avoided, regardless of the measures put in place to support broad and representative responding. And as per any survey asking respondents their opinions from a particular point in time, this survey is subject to recall bias.

Finally, there were a number of potential areas for enquiry that the survey purposely did not address.

Specific Interim Review questions relating to Out-of-Home Care, Children's Court processes, early intervention service enhancements, and impacts on the universal service system were not included in the survey. The rationale for this was threefold:<sup>27</sup>

- the survey focussed on impacts on the mandatory reporter workforce – the above questions are more related to the impacts of KTS on children, young people and families;
- there was an effort to contain the survey length to a 20 minute completion time; and
- during the 'mapping' process, it was suggested that only specific groups of mandatory reporters would be able to provide meaningful responses to these questions, particularly questions focussed on Out-of-Home Care and Children's Court processes.

These questions were deemed 'low' priority in this context.

Additionally, the issue of access to CWUs by the NGO sector was not addressed in the survey. The majority of stakeholders consulted in the initial consultations considered the fact that NGOs do not have a dedicated CWU, and cannot access all services from existing CWUs, to be negative. However in consultation with the Project Reference Group (which includes NGO representation), it was decided that a survey is not the best mechanism to explore the impacts of this issue in depth.

### 3.5 Overview of survey respondents

The total number of survey responses received was 6,144.<sup>28</sup> Prior to any analysis being undertaken, the data set containing these 6,144 responses was subject to a data cleansing process whereby ineligible responses were removed. This process resulted in a total of **5,753** responses for analysis. More detail about the data analysis process is provided in Appendix A.

The size of the respondent population is large, reflecting approximately 5 percent of the survey target population. Although the number of responses from:

- Police and Health staff were **lower** than the proportions in the respondent target population;<sup>29</sup> and
- Education, Early Education and Care, Community Services and Disability staff were **higher** than the proportions in the respondent target population.

Broadly, in terms of sector, there was consistency between the respondent profile and the survey target population.<sup>30</sup> Additionally, the distribution of responses across the NSW CSCs was also largely consistent with the distribution of mandatory reporters across NSW.<sup>31</sup>

The large number of respondents, and consistency in the distribution across sector groups and geographical locations provides an indication of the validity of the survey results (i.e. the results are likely to be broadly representative due to the alignment with the survey target population). However the generalisability of results may be limited for sector groups where there are varied

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<sup>27</sup> Appendix A sets out the rationale for excluding each of these questions from the survey.

<sup>28</sup> That is 6,144 surveys were 'started' resulting in 6,144 rows of data.

<sup>29</sup> Note, there was a risk that a high number of responses from Health sector staff would skew the survey data, as they represent over 70 percent of the target population. The fact that Health respondents comprise only 27.7 percent of survey responses is considered positive and unlikely to skew the data.

<sup>30</sup> For example, Health and Education sector staff represented the highest proportions of respondents and the highest numbers in the target population, and Justice sector staff represented one of the lowest proportion of respondents and lowest numbers in the target population.

<sup>31</sup> Understanding of the distribution of mandatory reporters across NSW is based on a database of Working with Children Checks, which provides location of work for a large number of mandatory reporters in NSW – this is the most comprehensive geographical overview of mandatory reporters' location of work available at the time of the survey.

roles within the sector, and where there were lower than expected survey responses (e.g. Local Government, Police). The limitations and biases explored above under section 3.4 must, however, be kept in mind in the context of result validity.

The following discussion provides a summary of the respondent population. Data is presented for each of the survey questions contained in the *Background* section of the survey (largely focussing on demographic information); by sector and other variables as relevant. More detailed data tables by sector and where relevant other variables (government / NGO, role and location) are provided in Appendix B (see Tables 6-21).

#### *Survey Q1.1 Are you a Mandatory Reporter?*

Of the 6,144 responses received to the survey, 5790 (94.2 percent)<sup>32</sup> indicated they were a mandatory reporter and 327 (5.3 percent) indicated they were not (as discussed above, and in more detail in Appendix A, all 'No' responses, along with other ineligible responses, were excluded from the data set analysed further). Detail about the characteristics of mandatory reporters who responded to the survey is discussed below. Refer Table 6 in Appendix B, for details of responses to question 1.1 by sector.

#### *Survey Q1.2 Since January 2010 (implementation of Keep Them Safe) have you made a Child Protection Report to the Community Services Helpline?*

Over half of all respondents indicated they had made a report to the Community Services Helpline since 2010. A high proportion of respondents working in the Police (70.5 percent) and Education (80.2 percent) sectors responded 'Yes' to this question, followed by Community Services (66.8 percent) and Housing (60.2 percent) sectors. This may reflect that:

- Police are likely to more commonly encounter high risk or acute situations (where abuse or neglect is observable) which may constitute ROSH / require Child Protection Reporting;
- Education, Community Services and Housing staff are in frequent and ongoing contact with children, young people and their families, providing them with insight into family circumstances and issues, providing a strong basis for informed identification of ROSH; and
- In Education, Principals often undertake all reporting activity on behalf of the school (e.g. if a teacher encounters a ROSH situation, the Principal is responsible for making the Child Protection Report), and therefore may be more likely to make a higher number of reports.

It is important to note that for some sectors, mandatory reporters may be more likely to be engaging with children and young people who have already been the subject of a Child Protection Report (for example Child and Family Services). Stakeholders engaged through survey design consultations noted that this may decrease the need for reporting amongst these mandatory reporters, and provide some explanation for the results (for example that Community Services had a lower proportion of 'Yes' responses than Education). Refer Table 7 in Appendix B, for details of responses by sector.

The survey data also shows quite different reporting patterns across regions:

- in metropolitan locations, more respondents in the Metro South West and Metro West FaCS regions indicated they have made a Child Protection Report, than in the Metro Central Region; and

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<sup>32</sup> The figure 5790 included some ineligible responses which, when discounted, resulted in the 5753 responses for analysis.

- in non-metropolitan regions, more respondents in the Hunter / Central Coast and Western regions indicated they have made a report than in other regions (this is consistent with the respondent population).

Of the respondents who had made a Report, 72.4 percent were from government organisations and 25.2 percent were from NGOs. This is slightly higher than the proportions of government and NGO respondents in the sample frame (which was 69.7 government and 26.2 percent NGO) suggesting that government respondents have undertaken more reporting than NGO respondents. Again, the fact that some sectors (particularly those with high NGO representation such as Community Services) are more likely to be engaged with children and young people who are already the subject of a report, may provide explanation for these responses.

Table 5: Since January 2010, have you made a Child Protection Report? By Government / NGO

| Q1.2 Since January 2010 have you made a Child protection Report? – By government / NGO |              |              |             |             |             |
|--|--------------|--------------|-------------|-------------|-------------|
| Government / NGO   | Yes          | No           | Unsure      | DNR         | Total       |
| <b>A government organisation?</b>  | 2487         | 1461         | 54          | 9           | <b>4011</b> |
|  | 62.0%        | 36.4%        | 1.3%        | .2%         | <b>100%</b> |
| <b>A non-government, for-profit organisation (i.e. private company)?</b>               | 94           | 154          | 6           | 1           | <b>255</b>  |
|  | 36.9%        | 60.4%        | 2.4%        | .4%         | <b>100%</b> |
| <b>A non-government, not for-profit organisation?</b>                                  | 775          | 462          | 15          | 1           | <b>1253</b> |
|  | 61.9%        | 36.9%        | 1.2%        | .1%         | <b>100%</b> |
| <b>Did not respond</b>   | 81           | 104          | 7           | 42          | <b>234</b>  |
|  | 34.6%        | 44.4%        | 3.0%        | 17.9%       | <b>100%</b> |
| <b>Total</b>   | <b>3437</b>  | <b>2181</b>  | <b>82</b>   | <b>53</b>   | <b>5753</b> |
|  | <b>59.7%</b> | <b>37.9%</b> | <b>1.4%</b> | <b>0.9%</b> | <b>100%</b> |

Source: KPMG based on analysis of KTS Workforce Survey data

### *If so, how many reports have you made?*

More respondents have made 1-3 reports than any other response option.<sup>33</sup> Only 5 percent of respondents have made more than 20 reports; most of these working within the Police and Education sectors. These responses may also reflect the fact that, as noted above, Police are frequently exposed to high risk or acute situations (where abuse or neglect is observable), staff working in the Education sector are in constant contact with children and young people, and in the Education sector, Principals and Directors (i.e. of childcare centres) usually undertake reporting on behalf of mandatory reporters. Therefore, these mandatory reporters may be required to undertake more reporting. Refer Table 8 in Appendix B for details of responses by sector.

Managers were more likely to have made had made more than 10 reports (i.e. 11-20 or 20+) than staff members, as the following table shows. The questions do not determine whether staff are bringing concerns to managers, who in turn lodge a report.

<sup>33</sup> Response options included 1-3; 4-6; 7-10; 11-20; or 20+.

Table 6: If so, how many reports have you made? By role

| Q 1.2 If so, how many reports have you made? By role |  |   |             |               |             |
|--|--|---|-------------|---------------|-------------|
| # of reports made                                    | I am a frontline Staff Member / Case Worker / Practitioner | I am a Team Leader / Manager / CEO / Principal / Director | DNR         | Total (count) | %           |
| 1-3  | 57.7%  | 37.2%   | 5.1%        | 1619          | 100%        |
| 4-6  | 56.8%  | 39.6%   | 3.6%        | 806           | 100%        |
| 7-10   | 55.0%  | 40.0%   | 5.0%        | 442           | 100%        |
| 11-20  | 45.9%  | 50.2%   | 3.9%        | 281           | 100%        |
| 20+  | 42.4%  | 52.1%   | 5.6%        | 288           | 100%        |
| DNR  | 49.1%  | 37.7%   | 13.2%       | 2317          | 100%        |
| <b>Total</b>   | <b>52.5%</b>   | <b>39.3%</b>  | <b>8.1%</b> | <b>5753</b>   | <b>100%</b> |

Source: KPMG based on analysis of KTS Workforce Survey data

Reporting patterns appear broadly consistent with Socio-Economic Status (SES) in metropolitan locations. In regions with a lower SES (Metro South West and Metro West), more respondents had made more reports (e.g. 20+) than in Metro Central, which has a higher SES overall. Other patterns relating to this question were consistent with the respondent population characteristics.

#### *Survey Q2.2 Do you work in? A government organisation? A non-government, not for profit organisation? A non-government, for profit organisation (a company)?*

The majority of respondents (69.7 percent) indicated they work in a government organisation (i.e. department, government service), with Health, Police and Justice sectors having the highest proportions of government respondents. 4.4 percent of respondents indicated they work in a private non-government organisation – and of these, the highest proportion of respondents worked in the Early Education and Care sector. 21.8 percent of respondents indicated they work in a not-for profit, non-government organisation – with a high proportion of these respondents working in the Early Education and Care and Community Services sectors. There was a higher proportion of NGO respondents in the non-metropolitan regions than proportions across the broader respondent population. This may reflect the constitution of the mandatory reporter workforce in non-metropolitan NSW. Refer Table 9 in Appendix B for details of responses by sector.

#### *Survey Q2.3 What is the postcode of the place where you do most of your work?*

The majority of respondents (91.7 percent or N=5,275) provided postcode information – 478 respondents did not provide a postcode in response to this question. More respondents who provided postcode information indicated they work in non-metropolitan locations as the following table shows.

Table 7: What is the postcode of the place where you do most of your work? Metropolitan / non-metropolitan locations

| Q2.3 What is the postcode of the place where you do most of your work? |                  |       |       |
|--|------------------|-------|-------|
| Metropolitan   | Non-metropolitan | DNR   | Total |
| 2,220  | 2,968            | 565*  | 5,753 |
| 42.8%  | 57.2%            | 9.8%* | 100%  |

Source: KPMG based on analysis of KTS Workforce Survey data

\*Note, some postcodes could not be mapped to a metropolitan or non-metropolitan FaCS region, which accounts for the discrepancy in numbers (565 here versus 478 that did not respond overall).

When considering responses to this question by sector and government/NGO, the proportions of respondents who did not provide postcode information did not deviate from the sample frame. Appendix B provides detail about the respondent population by CSC and FaCS regions (refer Tables 10 and 11). Appendix B also provides a detailed overview of respondent SEIFA ratings<sup>34</sup> by FaCS region (refer Table 12-14).

#### Survey Q2.4 Which of the following best described your current role (at the time of completing the survey)?

Just over half of all respondents indicated they are a frontline Staff Member/Case Worker/Practitioner (staff), and almost 40 percent indicated they are a Team Leader/Manager/CEO/Principal / Director (managers).

Table 8: Which of the following describes your current role (at the time of completing the survey)? By role

| Q2.4 Which of the following describes your current role (at the time of completing the survey)? |   |      |        |
|---|---|------|--------|
| I am a frontline Staff Member / Case Worker / Practitioner                                      | I am a Team Leader / Manager / CEO / Principal / Director | DNR  | Total  |
| 3023  | 2263  | 467  | 5753   |
| 52.5%   | 39.3%   | 8.1% | 100.0% |

Source: KPMG based on analysis of KTS Workforce Survey data

Respondents from Education and Care and Education represented the smallest proportion of frontline workers. This is consistent with the survey communication strategy which targeted Principals and Directors in these two sectors. Respondents from the Justice and Health sectors represented the highest proportion of frontline workers. Refer Table 15 in Appendix B for details of responses by sector.

#### Survey Q2.5 What sector do you work in?

Table 9 shows respondents by sector.

<sup>34</sup> To assess the SES of each metropolitan FaCS region, the Socio-Economic Index for Areas (SEIFA) 2006, published by the Australian Bureau of Statistics (ABS), were used. There are four different indexes, and the Index of Relative Socio-economic Disadvantage has been chosen for the purpose of this report. It divides the level of disadvantage in a postcode area into deciles, where 1 is the most disadvantaged and 10 is the least disadvantaged.

Table 9: What sector do you work in?

| Q 2.5 What sector do you work in?   |             |                             |  |
|---|-------------|-----------------------------|--|
| Sector  | Count       | % of all survey respondents | % of target population (from sample frame) |
| Health Services   | 1596        | 27.7%                       | 70.04%                                     |
| Education Services (school/ higher education)                                 | 1183        | 20.6%                       | 3.75%                                      |
| Community Services (including child and family services and child protection) | 1029        | 17.9%                       | 3.39%                                      |
| Early Education and Care Services   | 786         | 13.7%                       | 2.90%                                      |
| Disability Services   | 317         | 5.5%                        | 1.64%                                      |
| Other   | 232         | 4.0%                        | N/A  |
| Housing Services  | 133         | 2.3%                        | 2.11%                                      |
| Police  | 129         | 2.2%                        | 13.21%                                     |
| Justice Services  | 107         | 1.9%                        | 1.37%                                      |
| Local Government  | 15          | 0.3%                        | Not available                              |
| <b>Total</b>  | <b>5753</b> | <b>100.0%</b>               | <b>N/A</b>                                 |

Source: KPMG based on analysis of KTS Workforce Survey data

As this table shows, the highest proportion of respondents indicated they work in the Health sector, followed by the Education sector. As noted above, the number of responses from Police and Health staff were lower than the proportions in the sample frame and responses from Education, Early Education and Care, Community Services and Disability staff were higher than the proportions in the respondent target population.

Also as noted previously, the survey was a census survey with the exceptions that: for Education and Early Education and Care, Principals and school counsellors were targeted; and there was specific communication targeting Police in roles involving direct and frequent engagement with children, young people and their families. This led to high numbers of 'management' level staff from Education and Early Education and Care responding, however the impact on the Police respondent profile was minimal (i.e. there were not high proportions of the Police roles targeted). Where this communication strategy is relevant to the interpretation of results, this is noted.

In terms of regional distribution, sectors with more metropolitan respondents included Early Education and Care, Education, Housing, Justice and Police. Sectors with more non-metropolitan respondents included Community Services, Disability, Health, Local Government, and 'Other'. Table 16 in Appendix B, provides responses to this question in total numbers as well as proportions.

#### Survey Q2.6 Which of the following best describes your position?

Table 10 below sets out the 'top' (most common) positions for each sector. Table 17 in Appendix B presents proportions of respondents working in each position, by sector.

Table 10: Which of the following best describes your position? Top position – by sector

| Q 2.6 Which of the following best describes your position?                    |   |   |
|---|---|---|
| Sector  | Top position                                | % of respondents selecting 'top position' |
| Health Services   | Allied health professional                  | 36.1%                                     |
| Community Services (including child and family services and child protection) | Case worker / case manager / support worker | 73.6%                                     |
| Other   | Case worker / case manager / support worker | 51.6%                                     |
| Housing Services  | Client services                             | 67.5%                                     |
| Early Education and Care Services   | Childcare Director / Supervisor             | 70.2%                                     |
| Justice Services  | Case worker / case manager / support worker | 81.7%                                     |
| Education Services (school/ higher education)                                 | School Principal / Director                 | 56.1%                                     |
| Disability Services   | Case worker / case manager / support worker | 52.5%                                     |
| Police  | LAC uniform                                 | 44.2%                                     |
| Local Government  | Project officer                             | 50.0%                                     |

Source: KPMG based on analysis of KTS Workforce Survey data

As this table shows, the most common position across sectors was Case worker/case manager/support worker. In line with the survey target population, Principals and Directors represented the highest proportion of respondents in the Education and Early Education and Care sectors. Common responses from respondents selecting 'Other' are also provided in Appendix B– see Table 18.

### Survey Q2.7 How long have you been in this role?

Most respondents had been in their role for over five years, as Table 11 shows.

Table 11: How long have you been in this role?

| Q2.7 How long have you been in this role? |                    |                   |           |           |      |        |
|---|--------------------|-------------------|-----------|-----------|------|--------|
| 0-6 months                                | 7 months-12 months | 13 months-3 years | 4-5 years | > 5 years | DNR  | Total  |
| 368                                       | 360                | 1269              | 673       | 2808      | 275  | 5753   |
| 6.4%                                      | 6.3%               | 22.1%             | 11.7%     | 48.8%     | 4.8% | 100.0% |

Source: KPMG based on analysis of KTS Workforce Survey data

The fact that almost half of all respondents have been in their role a longer period than KTS has been in place (since 2010) means many respondents are likely to have a perspective on both the time pre-KTS, and the impact of KTS since its implementation. Additionally, respondents who have been in their role for a shorter period of time may also have perspectives on changes pre- and post-KTS, as length of time in role does not necessarily equal length of sectoral experience. Table 19 in Appendix B presents responses by sector to this question.

### 2.8 What proportion of your role/work is focused on Aboriginal clients?

The majority of respondents indicated their organisation has some focus on Aboriginal clients, as Table 12 shows.

Table 12: What proportion of your role / work is focussed on Aboriginal clients?

| Q2.8 What proportion of your role/work is focused on Aboriginal clients? |       |        |        |        |         |      |        |
|--|-------|--------|--------|--------|---------|------|--------|
| 0%   | 1-19% | 20-39% | 40-59% | 60-79% | 80-100% | DNR  | Total  |
| 758  | 3192  | 749    | 376    | 163    | 213     | 302  | 5753   |
| 13.2%  | 55.5% | 13.0%  | 6.5%   | 2.8%   | 3.7%    | 5.2% | 100.0% |

Source: KPMG based on analysis of KTS Workforce Survey data

The highest number of respondents indicated they have between 1-19 percent of their role/work focussed on Aboriginal clients. Only 3.7 percent of respondents indicated their role/work is between 80 and 100 percent focussed on Aboriginal clients. Larger proportions of respondents with a high focus on Aboriginal clients indicated they work in the Disability and Early Education and Care sectors. Respondents working in the Northern and Western FaCS regions also had a higher focus on Aboriginal clients than in other regions. It is likely that respondents with a 'high focus' of their role/work on Aboriginal clients are working within Aboriginal organisations, however the survey did not directly ask respondents whether they were working in an Aboriginal or other (mainstream) organisation. Table 20 in Appendix B presents detailed responses to this question by sector. A discussion of other questions relating to Aboriginal children, young people and families is provided in section 0 Meeting the needs of Aboriginal children, young people and their families.

#### Survey Q2.9 Do you have access to a CWU?

As a core part of the KTS reforms, CWUs were established in four NSW Government departments responsible for much of the Child Protection Reporting in the state: NSW Health, NSW Police, DEC and FaCS. The role of staff within CWUs is to assist mandatory reporters in using the MRG and determining whether a case is ROSH (and thus requires a Child Protection Report). CWUs, which commenced operation in January 2012, are contacted by telephone.<sup>35</sup> At present, CWUs are not available to mandatory reporters working in NGOs. Just over half of all respondents indicated they have access to a CWU, as the following table shows.

Table 13: Do you have access to a CWU?

| Q2.9 Do you have access to a Child Wellbeing Unit? |       |        |      |        |
|--|-------|--------|------|--------|
| Yes  | No    | Unsure | DNR  | Total  |
| 3102   | 1220  | 1094   | 337  | 5753   |
| 53.9%  | 21.2% | 19.0%  | 5.9% | 100.0% |

Source: KPMG based on analysis of KTS Workforce Survey data

Of the respondents who stated they have access to a CWU, larger proportions reported they work in the Education and Police sectors than in other sectors (this is likely to be reflective of the large proportion of respondents from these sectors working in government organisations who *do* have access to a CWU).

Conversely, of the respondents who do not have access to a CWU, larger proportions reported they work in the Community Services and Early Education and Care sectors than in other sectors (this is likely to be reflective of the fact that more staff in these sectors work in NGOs, which *do not* have access to a dedicated CWU).

<sup>35</sup> Department of Premier and Cabinet 2012, Child Wellbeing Units, (Keep Them Safe website), NSW Government: Sydney, accessed June 2012, available at: <[http://www.keepthemsafe.nsw.gov.au/initiatives/child\\_wellbeing\\_units](http://www.keepthemsafe.nsw.gov.au/initiatives/child_wellbeing_units)>

Aligning with these results, the responses by government / NGO show that:

- respondents who answered ‘Yes’ to this question (i.e. they do have access to a CWU) were mostly from government (88.3 percent), with only 9.9 percent from NGOs; and
- respondents who answered ‘No’ to this question (do not have access to a CWU) were mostly from NGOs (50.4 percent), followed by government (44.2 percent).

A discussion of the results to questions about CWUs is provided in section 4.2 *Child Wellbeing Units*. This discussion largely focuses on responses from government respondents, as currently, CWUs are available to government mandatory reporters only. Table 21 in Appendix B presents responses by sector.

## 4 Survey results

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This section presents the survey results as relevant to the Interim Review questions. As noted previously, the survey questions were organised under three overarching headings in the survey. It is around these headings and their relevant Interim Review questions that the results of the survey are discussed within this section.

This section contains the following sub sections:

- **Results from Part 1 of the survey** - *Responding to children and young people at risk of significant harm*. Findings relating to the Mandatory Reporter Guide (the MRG, or MRG) and the Child Wellbeing Units (CWUs) are presented in this sub-section.
- **Results from Part 2 of the survey** - *Responding to vulnerable children, young people and their families*. Findings relating to information sharing, collaboration and meeting the needs of Aboriginal children, young people and their families are presented in this sub-section.
- **Results from Part 3 of the survey** - mandatory reporters' perspectives on the *Impacts of Keep Them Safe*. Findings relating to staff work practices, workforce and culture, and ability to meet the needs of children, young people and their families are presented in this sub-section.

Note:

- this section largely presents analysis of survey quantitative data. However where relevant, results from the thematic analysis of free text responses are included. Only themes raised by a large number of respondents (e.g. over 100) are reported here; and
- only results that represent a difference across respondents (e.g. by sector, government/NGO, location or role) are presented i.e. where the survey responses are consistent with the proportions in the sample frame,<sup>36</sup> data is not explicitly reported.

### Part 1. Responding to children and young people at risk of significant harm and their families

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Part 1 of the survey focused on responding to children and young people who respondents suspected may have been at ROSH (i.e. those who may require a Child Protection Report). This section contained sub-sections on:

- use of the Mandatory Reporter Guide - *Are workers engaging with the Mandatory Reporter Guide and the new reporting threshold so that the statutory child protection system is more streamlined and focussed on children at greatest risk?*; and
- Child Wellbeing Units – *No Interim Review question* (however a discussion on these questions is provided in section 4.2 below).

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<sup>36</sup> E.g. the proportions of staff / manager selecting 'Yes' to a question are similar to proportions of staff / manager in the sample frame.

#### 4.1 Use of the Mandatory Reporter Guide - *Are workers engaging with the Mandatory Reporter Guide and the new reporting threshold so that the statutory child protection system is more streamlined and focussed on children at greatest risk?*

##### Main findings relating to this question

- Engagement with the Mandatory Reporter Guide has been high amongst respondents, however some mandatory reporters appear to have used the MRG more often than others including NGOs, management level staff and mandatory reporters in non-metropolitan locations
- Most respondents had heard about the MRG from participating in training, and the majority indicated they use the MRG to help them to make decisions about reporting, as intended
- The vast majority of respondents who have not used the MRG reported that they have not needed to. Some respondents indicated they use mechanisms other than the MRG to support them in identifying ROSH, make decisions about reporting, and determining next steps, such as CWUs and their own professional judgement
- Most respondents rated the importance of the MRG on changing their workplace practices as either 'Important' or 'Very Important'
- The MRG was considered more helpful in assessing and identifying ROSH and decision making, than in determining next steps in responding to vulnerable children, young people and their families
- Around half of all respondents thought increasing the threshold for reporting to ROSH was 'Important' or 'Very important' in changing their workplace practices, and many respondents indicated that KTS has had a positive impact on their ability to identify children and young people at ROSH
- There were some concerns from respondents about the impact of the new reporting threshold on some groups of children and young people including teenagers, homeless children and young people and children and young people with a disability – namely that these groups were not being picked up when they are at ROSH

This sub-section on the *Mandatory Reporter Guide* relates to the Interim Review question *Are workers engaging with the Mandatory Reporter Guide and the new reporting threshold so that the statutory child protection system is streamlined and focussed on children at greatest risk?* The areas of investigation relating to this Interim Review question included:

- the uptake/use of the MRG;
- how implementation of/engagement with the MRG has been supported (facilitators);
- the barriers that have been experienced regarding both use of the MRG and access to the MRG; and
- the value of the MRG.

Relevant outcome level areas for enquiry (e.g. the impact of the MRG on outcomes, and how these impacts have been achieved) are also explored below, and under Part 3 Mandatory reporters' perspectives on the impacts of KTS.

##### *Use of the Mandatory Reporter Guide*

The survey results suggest that use of the Mandatory Reporter Guide has been high. As Table 14 shows, just over 70 percent of all respondents, and almost 90 percent of respondents who have made a Child Protection Report, reported having used the MRG.

Table 14: Proportion of respondents who have made a Child Protection Report by Proportion who have used the MRG

| Q1.2 Since January 2010<br>have you made a Child<br>Protection Report? | Q3.1 Have you used the Mandatory Reporter Guide? |              |             | Total        |
|--|--|--------------|-------------|--------------|
|  | Yes  | No           | DNR         |              |
| <b>Yes</b>   | 89.7%  | 7.2%         | 3.1%        | <b>100%</b>  |
|  | 3,084  | 247          | 106         | <b>3,437</b> |
| <b>No</b>  | 42.0%  | 51.5%        | 6.6%        | <b>100%</b>  |
|  | 915  | 1,123        | 143         | <b>2,181</b> |
| <b>Unsure</b>  | 59.8%  | 29.3%        | 11.0%       | <b>100%</b>  |
|  | 49   | 24           | 9           | <b>82</b>    |
| <b>Did not respond</b>   | 20.8%  | 1.9%         | 77.4%       | <b>100%</b>  |
|  | 11   | 1            | 41          | <b>53</b>    |
| <b>Total (count)</b>   | <b>4,059</b>                                     | <b>1,395</b> | <b>299</b>  | <b>5,753</b> |
| <b>%</b>   | <b>70.6%</b>                                     | <b>24.2%</b> | <b>5.2%</b> | <b>100%</b>  |

Source: KPMG based on analysis of KTS Workforce Survey data

When considering proportions only, it appears a high proportion of respondents who have used the MRG did not respond (20.8 percent) or selected 'Unsure' (59.8 percent) to the question *Since January 2010 have you made a Child Protection Report?* However when considering counts, the numbers are low. This may reflect the fact that some respondents use the MRG but are not necessarily responsible for making the report itself, such as Teachers and Police.

The survey results also suggest that use of the MRG has been relatively consistent - across sectors, between staff and manager level mandatory reporters, and between government and NGOs, as set out in Table 15. However some small differences in use of the MRG can be observed (discussed further below).

When considering the results by sector, use of the MRG by the Justice and Local Government sectors was lower than other sectors as Table 15 shows. The sector with the highest proportion of 'Yes' responses was the Education sector suggesting more mandatory reporters in this sector have used the MRG.

Table 15: Have you used the MRG? By sector

| Q 3.1 Have you used the Mandatory Reporter Guide? - By sector                 |              |              |             |               |
|---|--------------|--------------|-------------|---------------|
| Sector  | Yes          | No           | DNR         | Total         |
| Health Services   | 66.2%        | 32.5%        | 1.3%        | 100%          |
| Community Services (including child and family services and child protection) | 72.3%        | 26.0%        | 1.7%        | 100%          |
| Other   | 72.4%        | 25.0%        | 2.6%        | 100%          |
| Housing Services  | 66.9%        | 33.1%        | .0%         | 100%          |
| Early Education and Care Services   | 72.6%        | 25.7%        | 1.7%        | 100%          |
| Justice Services  | 55.1%        | 43.9%        | .9%         | 100%          |
| Education Services (school/ higher education)                                 | 88.3%        | 10.7%        | 1.0%        | 100%          |
| Disability Services   | 75.1%        | 23.7%        | 1.3%        | 100%          |
| Police  | 62.0%        | 37.2%        | .8%         | 100%          |
| Local Government  | 46.7%        | 46.7%        | 6.7%        | 100%          |
| Did not respond   | .9%          | .0%          | 99.1%       | 100%          |
| <b>Total (count)</b>  | <b>4059</b>  | <b>1395</b>  | <b>299</b>  | <b>5753</b>   |
| <b>%</b>  | <b>70.6%</b> | <b>24.2%</b> | <b>5.2%</b> | <b>100.0%</b> |

Source: KPMG based on analysis of KTS Workforce Survey data

Considering the results by role, it appears a higher proportion of managers have used the MRG than staff. This may in part, reflect the responsibilities on some manager level staff (e.g. in Education and Early Education and Care) to undertake Child Protection Reporting as required. However as these sectors comprise only a proportion of all respondents, it may be that in other sectors managers are also more likely to report.

Table 16: Have you used the MRG? By role

| Q3.1 Have you used the Mandatory Reporter Guide? - By staff / manager |             |             |             |               |
|---|-------------|-------------|-------------|---------------|
|   | Staff       | Manager     | DNR         | Total         |
| <b>Yes</b>  | 70.6%       | 78.5%       | 31.7%       | <b>70.6%</b>  |
| <b>No</b>   | 28.2%       | 20.1%       | 18.8%       | <b>24.2%</b>  |
| <b>Did not respond</b>  | 1.2%        | 1.4%        | 49.5%       | <b>5.2%</b>   |
| <b>Total (count)</b>  | <b>3023</b> | <b>2263</b> | <b>467</b>  | <b>5753</b>   |
| <b>%</b>  | <b>100%</b> | <b>100%</b> | <b>100%</b> | <b>100.0%</b> |

Source: KPMG based on analysis of KTS Workforce Survey data

The results by government/NGO show that a higher proportion of non-government not for profit respondents have used the MRG than other respondents.

Table 17: Have you used the MRG? By government / NGO

| Q3.1 Have you used the Mandatory Reporter Guide? - By government / NGO |                            |   |  |               |               |
|--|----------------------------|---|--|---------------|---------------|
|  | A government organisation? | A non-government, for-profit organisation (i.e. private company)? | A non-government, not for-profit organisation? | DNR           | Total         |
| <b>Yes</b>   | 71.8%                      | 68.6%   | 79.3%  | 3.8%          | <b>70.6%</b>  |
| <b>No</b>  | 26.9%                      | 30.6%   | 18.8%  | 0.9%          | <b>24.2%</b>  |
| <b>Did not respond</b>   | 1.2%                       | .8%   | 1.9%   | 95.3%         | <b>5.2%</b>   |
| <b>Total (count)</b>   | <b>4011</b>                | <b>255</b>  | <b>1253</b>                                    | <b>234</b>    | <b>5753</b>   |
| <b>%</b>   | <b>100.0%</b>              | <b>100.0%</b>   | <b>100.0%</b>                                  | <b>100.0%</b> | <b>100.0%</b> |

Source: KPMG based on analysis of KTS Workforce Survey data

Finally, the results by location show that a slightly higher number of respondents from non-metropolitan locations have used the MRG as Table 18 shows.

Table 18: Have you used the MRG? Metropolitan / non-metropolitan

| Q3.1 Have you used the Mandatory Reporter Guide? – Metropolitan / non-metropolitan |              |                  |              |
|--|--------------|------------------|--------------|
|  | Metropolitan | Non-metropolitan | Total        |
| <b>Yes</b>   | 71.1%        | 75.8%            | <b>73.8%</b> |
| <b>No</b>  | 27.4%        | 23.1%            | <b>24.9%</b> |
| <b>Did not respond</b>   | 1.4%         | 1.1%             | <b>1.3%</b>  |
| <b>Total (count)</b>   | <b>2220</b>  | <b>2968</b>      | <b>5188</b>  |
| <b>%</b>   | <b>100%</b>  | <b>100%</b>      | <b>100%</b>  |

Source: KPMG based on analysis of KTS Workforce Survey data

The relative consistency in the use of the MRG across sectors and locations may reflect the fact that the MRG is publicly available on the KTS website and is thus available to all people, provided there is access to the internet. Tables 22-25 in Appendix B present detailed responses to this question by the above variables.

In interpreting the results about use of the MRG, it is important to note that respondents were asked *Have you used the Guide?* rather than *Do you use the Guide in an ongoing way?* or *How many times have you used the Guide?* The survey therefore cannot comment on the frequency of use of the MRG by respondents.

The largest number of survey respondents indicated they found out about the MRG from participating in training. This was followed by 'KTS promotional material' (second most commonly selected) and 'from the KTS website' (third most commonly selected). These results are set out in Table 19. These results may reflect that, for government employees working in the Health and Education sectors, training about the KTS reforms was mandatory<sup>37</sup> and also that many NGO respondents would have participated in training (as training was provided to both government and NGO mandatory reporters).

<sup>37</sup> As reported to KPMG by DPC, May 2012.

Table 19: How did you find out about the MRG? By sector

| Q 3.2 How did you find out about Mandatory Reporter Guide? |                          |                          |                  |                |                      |                       |
|--|--------------------------|--------------------------|------------------|----------------|----------------------|-----------------------|
| Sector   | KTS promotional material | Participated in training | From a co-worker | From a manager | From the KTS website | From the FaCS website |
| Health Services  | 29.2%                    | 79.8%                    | 9.8%             | 15.9%          | 25.0%                | 5.2%                  |
| Community Services   | 30.2%                    | 75.1%                    | 7.2%             | 16.9%          | 25.6%                | 20.7%                 |
| Other  | 37.3%                    | 75.9%                    | 8.4%             | 12.0%          | 30.7%                | 15.7%                 |
| Housing Services   | 23.9%                    | 79.5%                    | 6.8%             | 18.2%          | 23.9%                | 12.5%                 |
| Early Education and Care Services                          | 38.8%                    | 81.4%                    | 4.2%             | 10.4%          | 38.4%                | 15.4%                 |
| Justice Services   | 27.1%                    | 69.5%                    | 5.1%             | 16.9%          | 20.3%                | 6.8%                  |
| Education Services   | 33.3%                    | 85.5%                    | 4.5%             | 12.7%          | 25.9%                | 3.8%                  |
| Disability Services  | 38.3%                    | 84.7%                    | 8.9%             | 21.3%          | 34.9%                | 13.2%                 |
| Police   | 10.3%                    | 62.8%                    | 5.1%             | 9.0%           | 2.6%                 | 1.3%                  |
| Local Government   | 42.9%                    | 100.0%                   | 0.0%             | 0.0%           | 85.7%                | 42.9%                 |
| <b>Total (count)</b>                                       | <b>1,294</b>             | <b>3,229</b>             | <b>274</b>       | <b>585</b>     | <b>1,111</b>         | <b>410</b>            |
| <b>%</b>   | <b>32.2%</b>             | <b>80.3%</b>             | <b>6.8%</b>      | <b>14.5%</b>   | <b>27.6%</b>         | <b>10.2%</b>          |

Source: KPMG based on analysis of KTS Workforce Survey data. Note – respondents could select multiple responses to this question

Overall, respondents most commonly indicated they use the MRG because ‘It helps me to make decisions about reporting’ followed by ‘I am required to use it’. However broken down by sector, more Police, Education, Health and Community Services respondents selected the latter (‘I am required to use it’) than the former (‘It helps me to make decisions about reporting’).

Table 20: Why did you use the MRG? By sector

| Q 3.3 Why did you use Mandatory Reporter Guide? By sector |                         |   |   |   |  |
|---|-------------------------|---|---|---|--|
| Sector  | I am required to use it | My organisation / manager encourages me to use it | I have used it before and found it beneficial | It helps me to make decisions about reporting | I recognise the need for a guide like this |
| Health Services   | 62.8%                   | 32.0%   | 28.8%   | 61.0%   | 25.4%                                      |
| Community Services  | 59.2%                   | 33.7%   | 22.6%   | 53.8%   | 25.4%                                      |
| Other   | 45.8%                   | 31.3%   | 28.9%   | 59.0%   | 23.5%                                      |
| Housing Services  | 59.1%                   | 35.2%   | 27.3%   | 64.8%   | 28.4%                                      |
| Early Education and Care Services                         | 55.6%                   | 20.8%   | 30.0%   | 75.8%   | 37.7%                                      |
| Justice Services  | 61.0%                   | 52.5%   | 16.9%   | 66.1%   | 32.2%                                      |
| Education Services  | 70.3%                   | 30.0%   | 28.8%   | 64.5%   | 24.9%                                      |
| Disability Services                                       | 51.9%                   | 39.6%   | 34.0%   | 71.9%   | 33.6%                                      |
| Police  | 81.8%                   | 16.9%   | 7.8%  | 23.4%   | 18.2%                                      |
| Local Government  | 14.3%                   | 42.9%   | 42.9%   | 57.1%   | 71.4%                                      |
| <b>Total (count)</b>                                      | <b>2,483</b>            | <b>1,233</b>                                      | <b>1,106</b>                                  | <b>2,513</b>                                  | <b>1,103</b>                               |
| <b>%</b>  | <b>61.9%</b>            | <b>30.7%</b>                                      | <b>27.6%</b>                                  | <b>62.6%</b>                                  | <b>27.5%</b>                               |

Source: KPMG based on analysis of KTS Workforce Survey data. Note – respondents could select multiple responses to this question

For Police, there is a requirement to use the MRG for all child protection concerns. However for the other sectors, use of the MRG is not mandated at the sector level. This suggests that organisations or departments may be, at their own discretion, directing staff to use the MRG. Alternatively or in addition to this, there may be a perception amongst some mandatory reporters that they have to use the MRG when in fact, it is not mandated. This trend appears to be more applicable amongst government respondents, as they also more commonly selected ‘I am required to use the Guide’ than ‘It helps me make decisions about reporting’ (see Table 21).

Table 21: Why did you use the guide? By government / NGO

| Q 3.3 Why did you use Mandatory Reporter Guide? By government / NGO |                         |   |   |   |  |
|---|-------------------------|---|---|---|--|
| Government / NGO  | I am required to use it | My organisation / manager encourages me to use it | I have used it before and found it beneficial | It helps me to make decisions about reporting | I recognise the need for a Guide like this |
| A government organisation?  | 66.1%                   | 30.8%   | 26.3%   | 59.8%   | 26.0%                                      |
| A non-government, not for-profit organisation?                      | 50.2%                   | 32.2%   | 31.1%   | 69.5%   | 31.2%                                      |
| A non-government, for-profit organisation?                          | 57.9%                   | 21.1%   | 28.7%   | 71.3%   | 31.6%                                      |
| <b>Total (count)</b>  | <b>2,478</b>            | <b>1,232</b>                                      | <b>1,105</b>                                  | <b>2,510</b>                                  | <b>1,102</b>                               |
| <b>%</b>  | <b>61.7%</b>            | <b>30.7%</b>                                      | <b>27.5%</b>                                  | <b>62.5%</b>                                  | <b>27.5%</b>                               |

Source: KPMG based on analysis of KTS Workforce Survey data. Note – respondents could select multiple responses to this question

‘Other’ responses<sup>38</sup> to the question *Why did you use the Mandatory Reporter Guide?* suggest the MRG is also used for teaching or professional development purposes (N=48). Interestingly, a number of respondents selecting ‘Other’ also said the MRG provides them with evidence or justification to support their decisions about reporting (N=15), suggesting the MRG provides some legitimacy for decision making. This finding may be relevant to future training in use of the MRG; in particular there may be a need to explicitly state the purpose of the MRG is to guide rather than confirm decision making.

### Facilitators and barriers

The most common reason respondents<sup>39</sup> provided for not having used the MRG was ‘I haven’t needed to use the Mandatory Reporter Guide’, with the second most common being ‘I don’t know what the Mandatory Reporter Guide is’.

As Table 22 shows, there was a large difference in numbers of responses between the first and second most selected response options (73.4 percent haven’t needed to use the MRG, and 12.0 percent don’t know what the MRG is).

<sup>38</sup> Free text responses

<sup>39</sup> Who selected ‘No’ to the question *Have you used the MRG?*

Table 22: Have you used the MRG? If not, why not?

| Q3.1 Have you used the MRG? If not, why not?  |              |               |
|---|--------------|---------------|
| Response options  | Count        | %             |
| I don't know what the Mandatory Reporter Guide is   | 166          | 12.0%         |
| I haven't needed to use the Guide   | 1,016        | 73.4%         |
| I can't / don't know how to access the Guide  | 107          | 7.7%          |
| I have difficulties accessing the Guide   | 8            | 0.6%          |
| The Guide is not user friendly  | 9            | 0.7%          |
| I don't have time   | 22           | 1.6%          |
| I am not required to use the Guide  | 43           | 3.1%          |
| My organisation does not encourage me to use the Guide                                      | 19           | 1.4%          |
| I don't think there is need for a Guide like this   | 1            | 0.1%          |
| I used to use the Mandatory Reporter Guide, but I am more confident in identifying ROSH now | 12           | 0.9%          |
| I call my CWU instead   | 37           | 2.7%          |
| I call the Community Services helpline instead  | 94           | 6.8%          |
| I use my professional judgement instead   | 94           | 6.8%          |
| <b>Total</b>  | <b>1,628</b> | <b>117.6%</b> |

Source: KPMG based on analysis of KTS Workforce Survey data. Note – respondents could select multiple responses to this question

Interestingly, more NGO respondents, and more respondents from sectors with high NGO representation (such as Disability Services) selected the response option 'I have not needed to use the Guide'. This may reflect less perceived need to consult the MRG before determining ROSH by respondents working in the NGO sector, who may have more experience in undertaking Child Protection Reporting.

This aligns with responses such as:

- in response to question 1.2 *Since January 2010 have you made a Child Protection Report?*, high proportions of Community Services staff said they have made a report, and also, have made 20+ Reports – see section 3.5 *Overview of survey respondents*; and
- in response to this question (*Have you used the Guide? If not, why not?*) a higher proportion of NGO respondents, and respondents from sectors with high NGO representation (namely Community Services) also selected the response option 'I use my professional judgement instead'.

These results may also reflect that some respondents may not have needed to use the MRG because they have not encountered ROSH.

Finally higher proportions of NGO respondents and Community Services respondents selected the response option 'I call the Community Services Helpline instead' which suggests other mechanisms may be being used instead of the MRG in the NGO sector. Use of mechanisms other than the MRG are discussed further below.

The fact that 166 respondents did not know what the MRG is (10.2 per cent) suggests a need for improved promotion of the MRG. Few respondents identified difficulties about accessing the MRG and its user friendliness, and only one respondent selected 'I don't think there is need for a Guide like this'.

Thematic analysis of 'Other' responses to the question *Have you used the Mandatory Reporter Guide? If not, why not?* show that, commonly, respondents refer to others to report on their behalf, do not directly work with children and young people (and perhaps should not have responded to the survey) and access support from peers or their manager to make decisions about reporting. Table 26 in Appendix B provides more detailed responses by sector to this question. Table 27 in Appendix B provides an overview of 'Other' responses to this question.

Website based data collected through the Community Services Key Information Directory System (KiDS) show that use of the MRG has been decreasing over recent months<sup>40</sup>. Some hypothesised reasons for this are that:

- mandatory reporters use the MRG as an initial decision making support tool, but as they become used to the new reporting threshold and requirements, they require the MRG (and thus use it) less;
- use of the MRG has dropped off after initial enthusiasm (as it was new); and/or
- mandatory reporters are using other mechanisms to make decisions about ROSH, such as the CWU.

Analysis of two questions *How long have you been in your role?* and *Have you used the Mandatory Reporter Guide?* show that more respondents who have been in their role for longer, have used the MRG more than respondents who have been in their role for less time. However this is only applicable for staff who are very new (i.e. have been in their role 6 months or less) These results show that being 'new' in a role does not necessarily mean that someone is more likely to use the MRG.

Table 23: Length of time in role by use of the Mandatory Reporter Guide

| Q2.7 How long have you been in your role? | Q3.1 Have you ever used MRG? |              |             |               | Total        |
|---|------------------------------|--------------|-------------|---------------|--------------|
|   | Yes                          | No           | Unsure      | DNR           |              |
| <b>0-6 months</b>                         | 63.0%                        | 35.9%        | 1.1%        | 100.0%        | <b>63.0%</b> |
| <b>7 months-12 months</b>                 | 74.2%                        | 25.6%        | 0.3%        | 100.0%        | <b>74.2%</b> |
| <b>13 months-3 years</b>                  | 76.3%                        | 23.1%        | 0.6%        | 100.0%        | <b>76.3%</b> |
| <b>4-5 years</b>                          | 75.8%                        | 23.3%        | 0.9%        | 100.0%        | <b>75.8%</b> |
| <b>&gt; 5 years</b>                       | 74.0%                        | 25.6%        | 0.5%        | 100.0%        | <b>74.0%</b> |
| <b>DNR</b>                                | 1.8%                         | 1.1%         | 97.1%       | 100.0%        | <b>1.8%</b>  |
| <b>Total</b>                              | <b>70.6%</b>                 | <b>24.2%</b> | <b>5.2%</b> | <b>100.0%</b> | <b>70.6%</b> |

Source: KPMG based on analysis of KTS Workforce Survey data

Analysis of another two questions - *How long have you been in your role?* and *Have you made a Child Protection Report?* show that, respondents who have been in their role for longer than 6 months are more likely to have made a Child Protection Report than respondents who have been in their role for 6 months or less. These results show that being 'new' in their role means mandatory reporters are less likely to have made a report, however again this is only applicable for staff who are very new (i.e. have been in their role 6 months or less) as Table 24 shows.

<sup>40</sup> Information provided to KPMG by FaCS via email in June 2012.

Table 24: Length of time in role by Child Protection Reporting history

| Q2.7 How long have you been in your role | Q1.2 Have you made a child protection report |              |             |             | Total         |
|--|--|--------------|-------------|-------------|---------------|
|  | Yes  | No           | Unsure      | DNR         |               |
| 0-6 months                               | 45.7%  | 52.2%        | 1.6%        | 0.5%        | 100.0%        |
| 7 months-12 months                       | 63.3%  | 35.6%        | 0.8%        | 0.3%        | 100.0%        |
| 13 months-3 years                        | 63.7%  | 35.5%        | 0.6%        | 0.2%        | 100.0%        |
| 4-5 years                                | 62.7%  | 36.3%        | 1.0%        | 0.0%        | 100.0%        |
| > 5 years                                | 60.9%  | 37.1%        | 1.8%        | 0.2%        | 100.0%        |
| DNR                                      | 36.7%  | 45.5%        | 2.9%        | 14.9%       | 100.0%        |
| <b>Total</b>                             | <b>59.7%</b>                                 | <b>37.9%</b> | <b>1.4%</b> | <b>0.9%</b> | <b>100.0%</b> |

Source: KPMG based on analysis of KTS Workforce Survey data

As set out in Table 22 above, in response to the question *Have you used the Mandatory Reporter Guide? If not, why not?* 225 respondents indicated they use Child Wellbeing Units, the Community Services Helpline or their own professional judgement instead. This result suggests that, in some cases, other mechanisms may be used instead of the MRG, rather than in conjunction with the MRG. The trend of the decreasing use of the MRG could be investigated further in other Interim Review activity, such as through the Location Based Evaluation to see if issues emerge that need to be addressed.

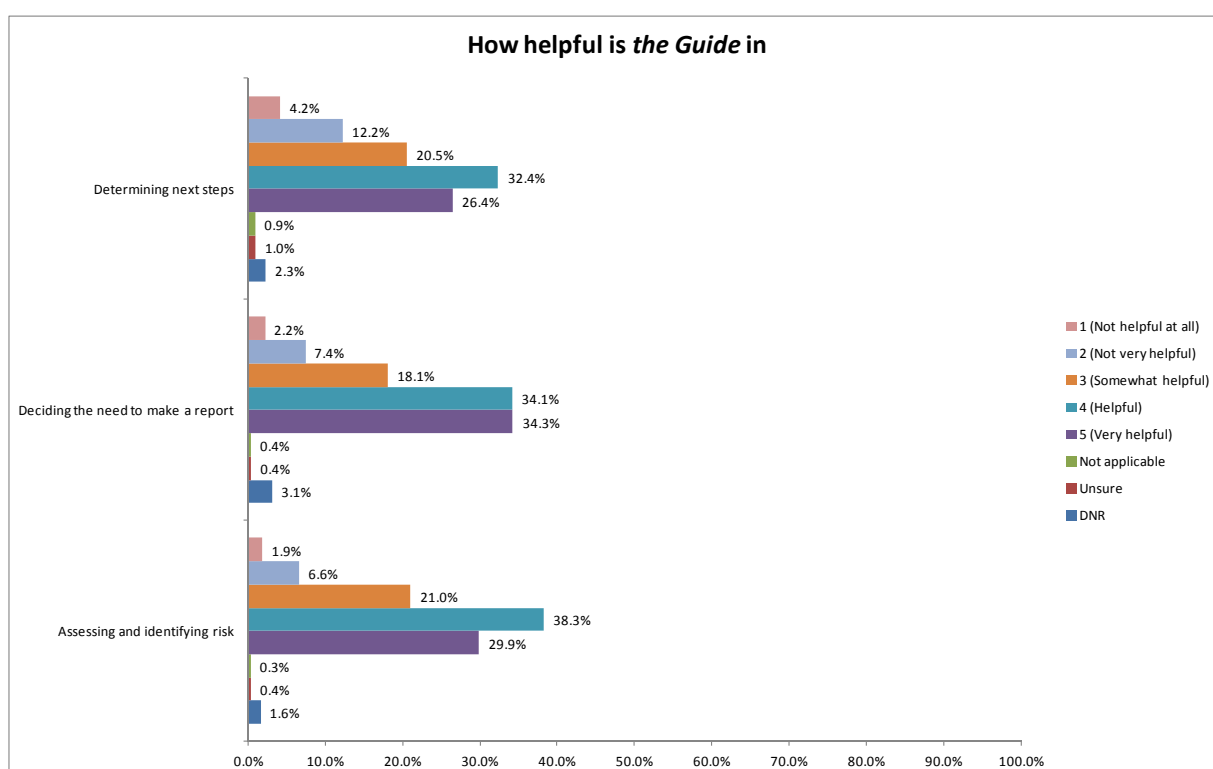
### Value of the MRG

Respondents were asked two types of questions relating to the 'value' of the MRG: questions relating to how helpful the MRG is in assessing and identifying ROSH, making decisions and determining next steps, and questions regarding how important the MRG has been in changing respondents' work practices. In developing the survey questions, it was intended that the concepts 'helpful' and 'important' represent the 'value' of the MRG. However in interpreting the results, it is important to consider that respondents may have different interpretations of these concepts and their link to value.

Responses to questions on how helpful the MRG is suggest that more respondents consider the MRG helpful than not helpful across the three domains: assessing and identifying ROSH; deciding whether to make a Child Protection Report; and determining next steps.

The figure below provides an overview of responses to these domains. Detailed results by sector are presented in Tables 31-33 in Appendix B.

Figure 1: How helpful is the Guide in: Assessing and identifying ROSH? Deciding whether to make a Child protection Report? Determining next steps?



Source: KPMG based on analysis of KTS Workforce Survey data

As this figure shows, the majority of respondents indicated that they thought the MRG was 'Helpful' or 'Very helpful' for each of the three domains, however regarding 'Determining next steps', more respondents provided ratings in the middle of the scale – 'Not very helpful'; 'Somewhat helpful'; and 'Helpful' (totalling 46 percent), suggesting respondents do not think the MRG is as helpful in determining next steps as it is in assessing and identifying ROSH and supporting decision making.

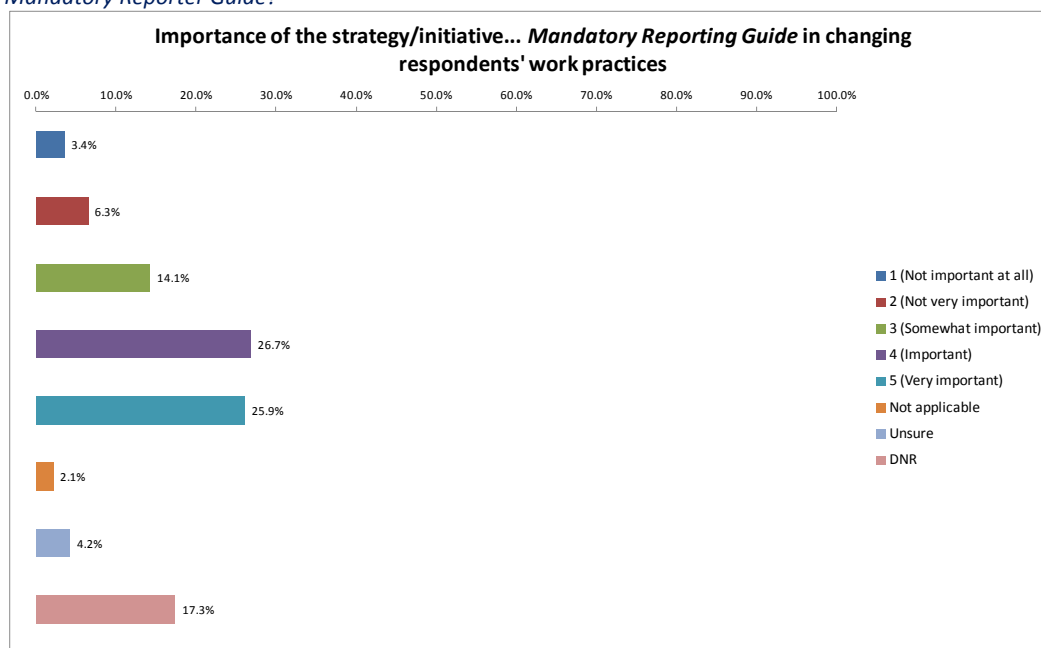
The overall poorer ratings to the last of the three domains ('Determining next steps') may reflect the fact that responding to a child protection concern (other than through making a Child Protection Report) is new for many staff and they may require a greater level of assistance in this area than the MRG alone can provide.

The consistency across the domains 'identifying ROSH' and 'deciding whether to make a Child Protection Report' (to which around 70 percent of respondents provided positive ratings, and only around a tenth provided negative ratings) is somewhat inconsistent with responses to other questions, which suggest that for some respondents the MRG may be being used to legitimise or 'check' their decisions about ROSH rather than come to these decisions in the first place. However different interpretations of what 'identifying ROSH' may provide some explanation for this inconsistency. For example some mandatory reporters may consider using the MRG to check or confirm their 'gut instinct' about ROSH as part of the process of identifying ROSH. It is reasonable to expect that experienced mandatory reporters may have a fine-tuned 'gut instinct' about assessing and identifying ROSH, use of the MRG in this way may be achieving similar objectives to those intended.

Police respondents rated the MRG as less helpful than other sectors across all three domains. For some Police, the MRG may be less relevant than across other sectors, as in many cases the ultimate decision about whether to make a Child Protection Report, and what the next steps will be, lies with the Police CWU.

In response to the second question relating to the ‘value’ of the MRG - *How important have the following strategies and initiatives been in changing your work practices The Mandatory Reporter Guide?* – around half (51.6 percent) of all respondents rated the importance of the MRG on their workplace practices as either ‘Important’ or ‘Very Important’, as Figure 2 shows.

*Figure 2: How important have the following strategies and initiatives been in changing your work practices The Mandatory Reporter Guide?*



Source: KPMG based on analysis of KTS Workforce Survey data

9.7 percent of respondents thought the MRG was ‘Not at all important’ or ‘Not very important’ in changing their practices. This (at least in part) is likely to be reflective of the number of people who do not use the MRG for reasons such as no perceived need to use it, or use of alternative support mechanisms such as the CWUs, as discussed previously. It is also consistent with other results showing that:

- not all respondents consider the MRG to be helpful in identifying ROSH, deciding whether to make a Child Protection Report, and in particular determining next steps (see Figure 1);
- some respondents are likely to already be experienced in assessing and identifying ROSH, deciding whether to report, and/or determining next steps – particularly those that have been working with vulnerable children, young people and their families in social service delivery and case management roles (e.g. NGOs); and additionally
- some respondents may be using the MRG to legitimise decisions that they would have already made, as discussed previously, and therefore it is likely to have had minimal impact on changing their practices.

Respondents who have made a Child Protection Report provided slightly higher ratings of importance, with approximately 56 percent selecting ‘Important’ or ‘Very important’ to this question compared to around 53 percent overall. These respondents may have provided higher ratings of importance due to a tangible outcome resulting from their use of the MRG (i.e. a Child Protection Report).

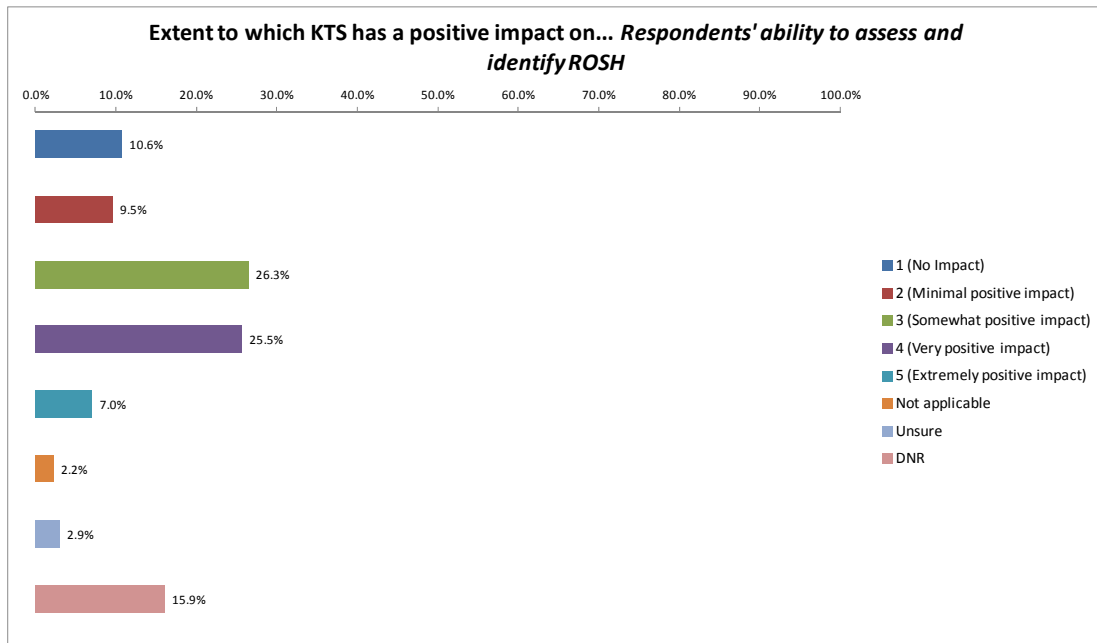
Respondents working in the Disability, Early Education and Care and Education sectors rated the importance of the MRG more highly than respondents from other sectors. Consistent with the question on the helpfulness of the MRG, Police respondents rated the MRG as less

important than any other sector. Table 87 in Appendix B presents data about the importance of the MRG by sector.

### *Impacts of the new reporting threshold*

In response to question 8.1 *To what extent has Keep Them Safe had a positive impact on my ability to identify risk of significant harm?* most respondents selected ‘Somewhat positive impact’ or ‘Very positive impact’, as Figure 3 shows.

*Figure 3: To what extent has Keep Them Safe had a positive impact on my ability to identify ROSH?*

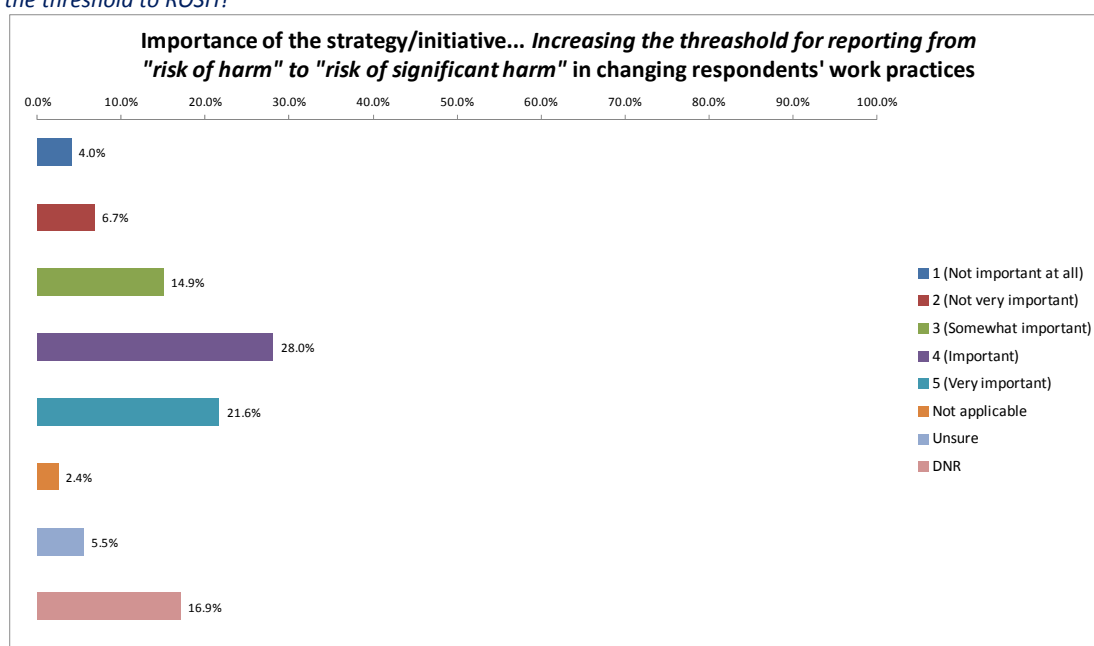


*Source: KPMG based on analysis of KTS Workforce Survey data*

This suggests that KTS has had positive benefits for respondents in the area; assessing and identifying ROSH. Table 80 in Appendix B presents results by sector.

Additionally, around half of all respondents thought increasing the threshold for reporting to ROSH was ‘Important’ or ‘Very important’ in changing their workplace practices.

Figure 4: How important have the following strategies and initiatives been in changing your work practices Changing the threshold to ROSH?



Source: KPMG based on analysis of KTS Workforce Survey data

For both of these questions, the highest levels of agreement were from the Education sector and the lowest levels were from the Police sector. This suggests that the component of KTS; raising the reporting threshold, has most supported and benefited Education respondents (in terms of changing their work practices).

Similarly to previous questions, the rating of importance was slightly higher for respondents who have made a Child Protection Report (around 54 percent compared to around 50 percent overall), which may also be due to the achievement of a tangible outcome (the Report) for these respondents. Respondents who have made a report may also perceive that raising the threshold makes the decision clearer about whether or not to report.

The results to this question include a relatively high proportion of respondents selecting 'No impact' or 'Minimal positive impact' (around a quarter of respondents), which is somewhat inconsistent with the investment in training and resources around the new reporting threshold under KTS (e.g. training for staff, the Mandatory Reporter Guide).<sup>41</sup> These results may suggest that not all mandatory reporters have had access to these supports, and/or that for some mandatory reporters the supports have been inadequate. Table 86 in Appendix B presents detailed data relating to this question.

The responses to these questions do not provide information about the elements of KTS that have supported respondents to identify ROSH. However, results to other questions about the components of KTS that are intended to support identification of ROSH (the MRG and CWUs) show that:

- around half of all respondent rated the importance of the MRG on changing their workplace practices as either 'Important' or 'Very Important'; and
- around half of all respondents also rated the importance of CWUs as 'Important' or 'Very important' on changing their work practices.

As assessing and identifying ROSH is a new or changed work practice for many respondents, these results suggest that the MRG and CWUs may have contributed to respondents' ability to

<sup>41</sup> Based on information collected through stakeholder consultations.

identify ROSH. A more detailed discussion of responses to questions about the importance of the MRG and CWUs in changing workplace practices is provided in section 4.7. Table 86 in Appendix B presents data about the importance of raising the threshold to ROSH, by sector.

Thematic analysis of responses to the final question in the survey: *Is there anything else you would like to add?* highlight some concerns about the new reporting threshold amongst respondents. A number of respondents indicated they were concerned that children, young people and their families who do not meet the threshold of ROSH would not ‘be serviced’ and may be ‘slipping through the cracks’. Some respondents indicated that these impacts are particularly significant for some groups including children and young people with a disability, homeless children and young people and youths (i.e. teenagers). Other respondents raised concerns that there is no current understanding or measurement of the impact of the new reporting threshold on children and young people. The impact of the new reporting threshold, with specific reference to these issues, should be considered in future KTS evaluation activity.

## 4.2 Child Wellbeing Units

There is no Interim Review question relating to Child Wellbeing Units. However, the survey included questions on CWUs to enable specific analyses using variables relating to CWUs to be undertaken where they are relevant to the Interim Review questions (for example, it is useful to consider whether access to the CWU influences use of the MRG). Additionally, an initial strategic planning review of Child Wellbeing Units is currently being undertaken<sup>42</sup> and the survey results will provide data to inform this review. Below is a summary of responses to questions concerning the CWU.

The majority of the data presented below considers a sub-set of survey respondents – that is, mandatory reporters in government agencies. This is because at present CWUs are generally utilised by government mandatory reporters only.

### Contacting a CWU

Almost half of all government respondents answered ‘Yes’ to the question *Have you ever contacted a Child Wellbeing Unit?*, as the following table shows. This compares to just 17 per cent of non-government not-for-profit respondents and 10 per cent of non-government, for-profit respondents (who typically do not have access to CWUs).<sup>43</sup>

Table 25: Have you contacted a CWU? All respondents

| Q 4.1 Have you contacted a CWU? All respondents |       |       |        |
|---|-------|-------|--------|
| Yes   | No    | DNR   | Total  |
| 2224  | 1767  | 1762  | 5753   |
| 38.7%   | 30.7% | 30.6% | 100.0% |

Source: KPMG based on analysis of KTS Workforce Survey data

<sup>42</sup> This is preliminary to the summative review of Child Wellbeing Units, which will be undertaken as part of the four-year Strategic Impact and Outcomes Evaluation of KTS.

<sup>43</sup> Because a subset of data is considered, the numbers presented are in some cases small – impacting on the proportions reported (i.e. small numbers may represent a large proportion).

Table 26: Have you contacted a CWU? By government / NGO All respondents

| Q 4.1 Have you contacted a CWU? By government / NGO All respondents |       |       |       |       |
|---|-------|-------|-------|-------|
| Government / NGO  | Yes   | No    | DNR   | Total |
| A government organisation?  | 1978  | 862   | 1171  | 4011  |
|   | 49.3% | 21.5% | 29.2% | 100%  |
| A non-government, for-profit organisation                           | 27    | 142   | 86    | 255   |
|   | 10.6% | 55.7% | 33.7% | 100%  |
| A non-government, not for-profit organisation?                      | 214   | 759   | 280   | 1253  |
|   | 17.1% | 60.6% | 22.3% | 100%  |
| TOTAL   | 2224  | 1767  | 1762  | 5753  |
|   | 38.7% | 30.7% | 30.6% | 100%  |

Source: KPMG based on analysis of KTS Workforce Survey data

In some cases, NGO staff (e.g. staff working in community service organisations, non-government schools, private child care centres etc) contact CWUs for advice, for example, around information sharing, or to provide/request information about a child, young person or family under the 16A information sharing legislative protocol.<sup>4445</sup> This is likely to provide some explanation for these results. However there could also be some confusion amongst survey respondents about what a CWU is (e.g. some respondents could be confusing CWUs with the Community Services Helpline – which is open to NGOs). Table 34 in Appendix B presents data by sector, and Table 35 presents data by metropolitan/non-metropolitan locations.

Government respondents who answered 'No' to the question *Have you contacted the Child Wellbeing Unit?* were then asked *If not, why not?* As Table 27 shows, the largest number of government respondents selected 'I have not needed to' in response to this question. In contrast to this, overall the most common reasons for not accessing the CWU were 'I don't know what CWUs are', 'I don't have access to a CWU', 'I don't know how to contact them', and 'I don't have time'. This suggests that for government respondents who *do* have access to a CWU, the primary reason they are not contacted is because mandatory reporters perceive there to be no need.

Table 27: Have you contacted the CWU? If not, why not?

| Q4.1 Have you contacted the CWU? If not, why not? Government respondents who have NOT contacted a CWU only |                   |                                  |                            |                     |   |   |
|--|-------------------|----------------------------------|----------------------------|---------------------|---|---|
| I don't have access to a CWU   | I don't have time | I don't know how to contact them | I don't know what CWUs are | I haven't needed to | I use my professional judgement instead | They are not open during my hours of work |
| 109  | 2                 | 30                               | 52                         | 549                 | 37                                      | 3   |
| 13.9%  | 0.3%              | 3.8%                             | 6.6%                       | 70.2%               | 4.7%                                    | 0.4%                                      |

Source: KPMG based on analysis of KTS Workforce Survey data. Only responses from respondents who answered 'No' to 'Have you contacted the CWU?' were considered.

### Value of the Child Wellbeing Units

Consistent with the questions about the value of the MRG, questions about 'helpfulness' and 'importance' were used to assess the 'value' of CWUs.

<sup>44</sup> Which allow information to be shared between organisations without the consent of the child, young person and/or family - see *Children and Young Persons (Care and Protection) Act 1998*, Chapter 16A – available at: <http://www.legislation.nsw.gov.au/fullhtml/inforce/act+157+1998+FIRST+0+N>

<sup>45</sup> As reported by stakeholders engaged through consultations.

As the following table shows, more respondents from government (who had contacted a CWU) thought the advice/assistance received from the CWU was 'Very helpful' followed by 'Helpful'. This suggests government respondents find the advice / assistance provided by the CWUs to be largely helpful.

*Table 28: How helpful was the advice/assistance you received from the CWU in understanding whether to make a Child Protection Report?*

| <b>Q4.2 How helpful was the advice/assistance you received from the CWU in understanding whether to make a Child Protection Report? - Government respondents who have contacted a CWU only</b> |                             |                             |                    |                         |                       |               |             |               |
|--|-----------------------------|-----------------------------|--------------------|-------------------------|-----------------------|---------------|-------------|---------------|
| <b>1 (Not helpful at all)</b>  | <b>2 (Not very helpful)</b> | <b>3 (Somewhat helpful)</b> | <b>4 (Helpful)</b> | <b>5 (Very helpful)</b> | <b>Not applicable</b> | <b>Unsure</b> | <b>DNR</b>  | <b>Total</b>  |
| <b>54</b>  | <b>145</b>                  | <b>333</b>                  | <b>625</b>         | <b>752</b>              | <b>53</b>             | <b>4</b>      | <b>12</b>   | <b>1,978</b>  |
| <b>2.7%</b>  | <b>7.3%</b>                 | <b>16.8%</b>                | <b>31.6%</b>       | <b>38.0%</b>            | <b>2.7%</b>           | <b>0.2%</b>   | <b>0.6%</b> | <b>100.0%</b> |

*Source: KPMG based on analysis of KTS Workforce Survey data*

Only 0.6 percent (N=12) of government respondents did not answer the question *How helpful was the advice/assistance you received from the Child Wellbeing Unit in understanding whether to make a Child Protection Report?* These respondents came from the Community Services, Housing, Health and Education sectors. This compares to 61.2 percent of respondents overall who did not answer this question (which is likely to reflect the fact that a large proportion of respondents have not accessed a CWU).

The survey also included a question about the consistency of the advice provided by the CWU with the outcomes of the MRG.<sup>46</sup> Although one of the functions of the CWUs is to provide expert advice about reporting where it may be unclear whether a case constitutes ROSH, stakeholders engaged through consultations pointed out that there may be both positive and negative impacts if the MRG is not consistent with the advice from the CWU, for example:

- mandatory reporters may benefit from having access to expert advice from the CWU in reaching their decision about whether to make a Report, rather than making the decision alone or solely relying on the outcome of the MRG (a positive impact); and
- mandatory reporters may lose faith in the MRG if it does not identify ROSH but the CWU advises a case is ROSH (a negative impact).

Again only a small proportion of government respondents did not answer this question (0.5 percent of N=9), and again these respondents were from the Community Services, Housing, Health and Education sectors as well as Police. This compares to 61.2 percent of respondents overall who did not answer this question.

As Table 29 shows, the majority of government respondents (who had contacted a CWU) considered the MRG was 'Consistent' or 'Very consistent' with the outcomes of the CWU.

<sup>46</sup> I.e. the advice about whether a case is ROSH based on information inputted into the Guide by a mandatory reporter.

Table 29: How consistent was the Guide with the outcome of the consultation with the Child Wellbeing Unit?

| Q4.3 How consistent was the Guide with the outcome of the consultation with the Child Wellbeing Unit?- Government respondents who have contacted a CWU only |                         |                         |                |                     |                |        |      |        |
|---|-------------------------|-------------------------|----------------|---------------------|----------------|--------|------|--------|
| 1 (Not consistent at all)   | 2 (Not very consistent) | 3 (Somewhat consistent) | 4 (Consistent) | 5 (Very consistent) | Not applicable | Unsure | DNR  | Total  |
| 32  | 182                     | 500                     | 843            | 291                 | 78             | 43     | 9    | 1,978  |
| 1.6%  | 9.2%                    | 25.3%                   | 42.6%          | 14.7%               | 3.9%           | 2.2%   | 0.5% | 100.0% |

Source: KPMG based on analysis of KTS Workforce Survey data

Table 38 in Appendix B presents data by sector (government respondents only).

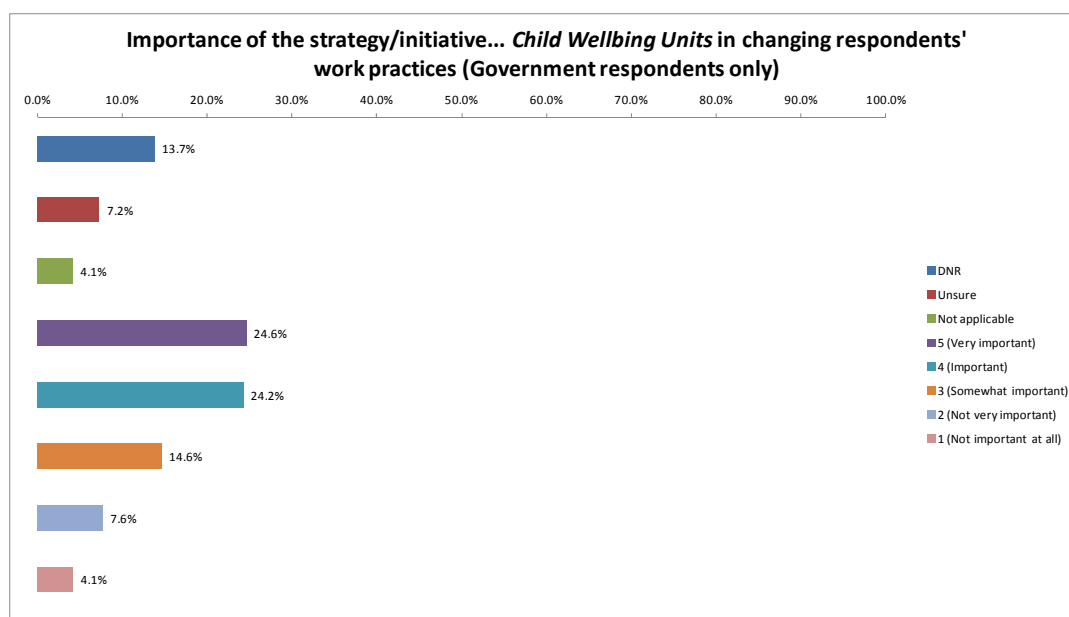
In responding to the final survey question: *Is there anything else you would like to add?* some respondents raised concerns about inconsistencies between the Mandatory Reporter Guide and the advice provided by the CWU in making a Report. In particular, responses falling into this common theme indicated:

- there is a lack of consistency across CWUs (however given respondents only have access to their own sector's CWU, it is unclear on which basis this perspective was formed); and
- in some CWUs, there is inconsistency between staff members in the advice provided; and

Respondents also raised concerns that cumulative information is not recorded by the CWUs, and information across CWUs is not recorded centrally. However this is incorrect, as cumulative information is recorded by CWUs, on WellNet, and information across CWUs is recorded on a shared database accessible by all CWUs, suggesting a lack of knowledge of the coordination across CWUs.

Around half of all government respondents rated CWUs as being either 'Important' or 'Very Important' in changing their workplace practices. As Figure 5 shows a total of 11.7 percent of respondents provided negative responses to this question (combination of 'Not at all important' and 'Not very important'). The most negative responses to this question came from the Early Education and Care and Police sectors (i.e. the highest proportion of respondents selected 'Not at all important').

Figure 5: How important have the following strategies and initiatives been in changing your work practices – CWUs?



Source: KPMG based on analysis of KTS Workforce Survey data

Around 13 percent of respondents did not respond to this question, with high proportions of Justice and Housing staff (as well as moderately high proportions of Health staff) not responding. Although there is some sectoral consistency in ‘Did not respond’ across questions relating to CWUs (namely Housing and Health), the numbers are not high enough to come to conclusions about whether (and if so what) meaning this may have.

As discussed previously, CWUs are not available to all mandatory reporters. This is reflected in the fact that when looking at responses overall (i.e. including government and NGO responses):

- 18 percent of respondents did not respond to this question; and
- the most commonly selected response from two sector groups (Early Education and Care 18.4 percent, and Other – 19.4 percent) was N/A.

## Part 2. Responding to vulnerable children, young people and their families

Part 2 of the survey asked respondents to reflect on their experiences of responding to vulnerable children, young people and their families, but those that do not require a Child Protection Report (i.e. no ROSH). This section contained sub-sections on:

- information sharing - *To what degree is there coordination and information sharing amongst agencies?;*
- collaboration - *To what degree is there coordination and information sharing amongst agencies?;* and
- meeting the needs of Aboriginal children, young people and families - *Are services more available and better able to meet the needs of Aboriginal children, young people and families? Have services increased the levels of cultural awareness, cultural competence and partnerships with Aboriginal communities?*

### 4.3 Information sharing - *To what degree is there coordination and information sharing amongst agencies?*

#### Main findings relating to this question

- There appears to be high awareness of the Chapter 16A information sharing provisions in the *Children and Young Persons (Care and Protection) Act 1998* amongst respondents
- Most respondents indicated they hold positive attitudes towards information sharing and report being moderately comfortable sharing information relating to vulnerable children, young people and their families
- Many respondents indicated that their organisation encourages and supports them to share information
- Around one-third of respondents reported that the level of information sharing between their organisation and other organisations has increased since the implementation of KTS.

This sub-section on *Information sharing* asked respondents to reflect on their experiences in sharing information with other organisations since the implementation of KTS.

This sub-section relates to the Interim Review question *To what degree is there coordination and information sharing amongst agencies?*<sup>47</sup> The areas for investigation relating to this Interim Review question included:

- awareness of information sharing legislation;
- how information sharing has been supported/facilitated under KTS (facilitators);
- the barriers that have been experienced;
- changes that have occurred in relation to information sharing;
- how these changes have been achieved; and
- the impact of these changes.

Outcome level areas for enquiry (e.g. the impact of information sharing on outcomes) are explored in this sub-section, and under Part 3 Mandatory reporters' perspectives on the impacts of KTS.

#### *Awareness of information sharing legislative provisions*

Awareness of the 16A information sharing legislative provisions, which allow information to be shared between organisations without the consent of the child, young person and/or family,<sup>48</sup> appears to be high.

As Table 30 shows, over 80 percent of respondents indicated they were aware of the 16A legislative provisions. The highest number of 'Yes' responses were from the Community Services and Education sectors, however, awareness appears fairly consistent across sectors, as the following table shows.

<sup>47</sup> Note, the following section of the survey on Collaboration also relates to this Interim Review question.

<sup>48</sup> For example to assess ROSH, or identify services currently being accessed – see the *Children and Young Persons (Care and Protection) Act 1998*, Chapter 16A – available at:  
<<http://www.legislation.nsw.gov.au/fullhtml/inforce/act+157+1998+FIRST+0+N>>

Table 30: Are you aware of the 16A legislative provisions for information sharing? - By sector

| Q 5.1 Are you aware of the 16A legislative provisions for information sharing? By sector |       |       |       |        |
|--|-------|-------|-------|--------|
| Sector   | Yes   | No    | DNR   | Total  |
| Health Services  | 80.7% | 10.7% | 8.6%  | 100.0% |
| Community Services (including child and family services and child protection)            | 88.9% | 2.6%  | 8.5%  | 100.0% |
| Other  | 84.1% | 6.9%  | 9.1%  | 100.0% |
| Housing Services   | 82.0% | 9.8%  | 8.3%  | 100.0% |
| Early Education and Care Services  | 83.3% | 6.2%  | 10.4% | 100.0% |
| Justice Services   | 75.7% | 16.8% | 7.5%  | 100.0% |
| Education Services (school/ higher education)  | 89.0% | 6.1%  | 4.9%  | 100.0% |
| Disability Services  | 86.8% | 7.6%  | 5.7%  | 100.0% |
| Police   | 86.8% | 4.7%  | 8.5%  | 100.0% |
| Local Government   | 80.0% | 6.7%  | 13.3% | 100.0% |
| Did not respond  | .9%   | .0%   | 99.1% | 100.0% |
| Total (count)  | 4697  | 397   | 659   | 5753   |
| %  | 81.6% | 6.9%  | 11.5% | 100.0% |

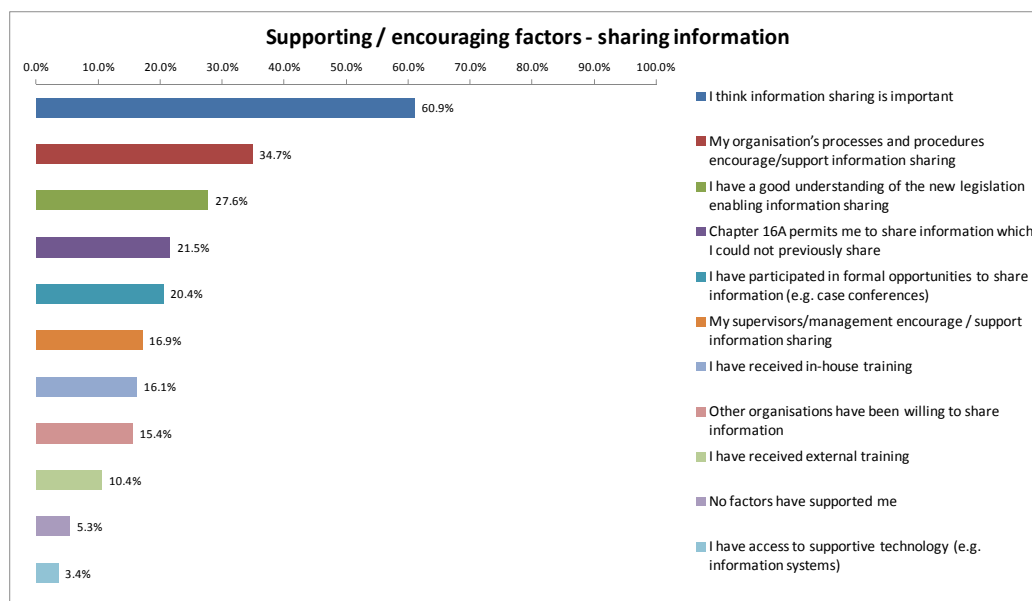
Source: KPMG based on analysis of KTS Workforce Survey data

Responses by staff member/manager, metropolitan/non-metropolitan and government/NGO were largely consistent with the sample frame. Tables 39-41 in Appendix B present data by government/NGO, staff member/manager and metropolitan/non-metropolitan locations.

#### *Facilitators and barriers*

It appears attitudinal factors and organisational support/encouragement have most significantly facilitated information sharing since the commencement of KTS. In response to the question *What factors have supported you or encouraged you to share information?* most respondents said 'I think information sharing is important', followed by 'My organisation's processes and procedures encourage/support information sharing'. Responses to this question are presented in Figure 6.

Figure 6: What factors have supported you or encouraged you to share information?

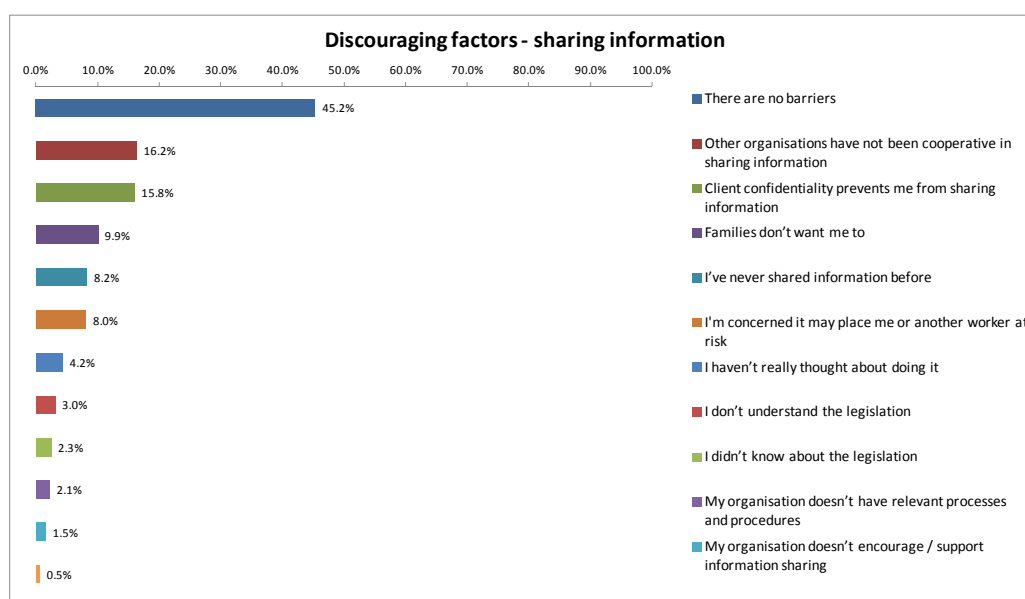


Source: KPMG based on analysis of KTS Workforce Survey data. Note – respondents could select multiple responses to this question

Respondents' awareness of the 16A legislation appears to have facilitated information sharing, with the third most common response to this question being 'I have a good understanding of the new legislation enabling information sharing' (27.6 percent), and over 1000 responses (21.5 percent) stating 'Chapter 16A permits me to share information which I could not share previously'.

Overwhelmingly, respondents indicated there are no barriers to information sharing (45.2 percent of responses). This broadly aligns with the proportion of respondents who said the level of information sharing by their organisation has increased since the implementation of KTS (see Figure 9). Figure 7 presents the number of responses to each barrier.

Figure 7: Since the implementation of Keep Them Safe, what factors have discouraged or prevented you from sharing information?



Source: KPMG based on analysis of KTS Workforce Survey data. Note – respondents could select multiple responses to this question

As this figure shows, the most commonly identified barrier was ‘Other organisations have not been cooperative in sharing information’. This is consistent with other results that show respondents report the level of information sharing by their organisation has increased more than the level of information sharing by other organisations (see Figure 9 and Figure 10). The third and fourth most commonly raised barriers were ‘Client confidentiality prevents me from sharing information’ and ‘Families don’t want me to’.

Analysis of ‘Other’ responses to the question *Since the implementation of Keep Them Safe, what factors have discouraged or prevented you from sharing information?* show that mostly, respondents think they have not needed to share information. Some respondents raised ethical concerns about sharing information without consent (e.g. ‘I must seek approval from the family first’), with 7.9 percent of respondents raising such concerns. These ‘Other’ responses align with the broader data, showing that:

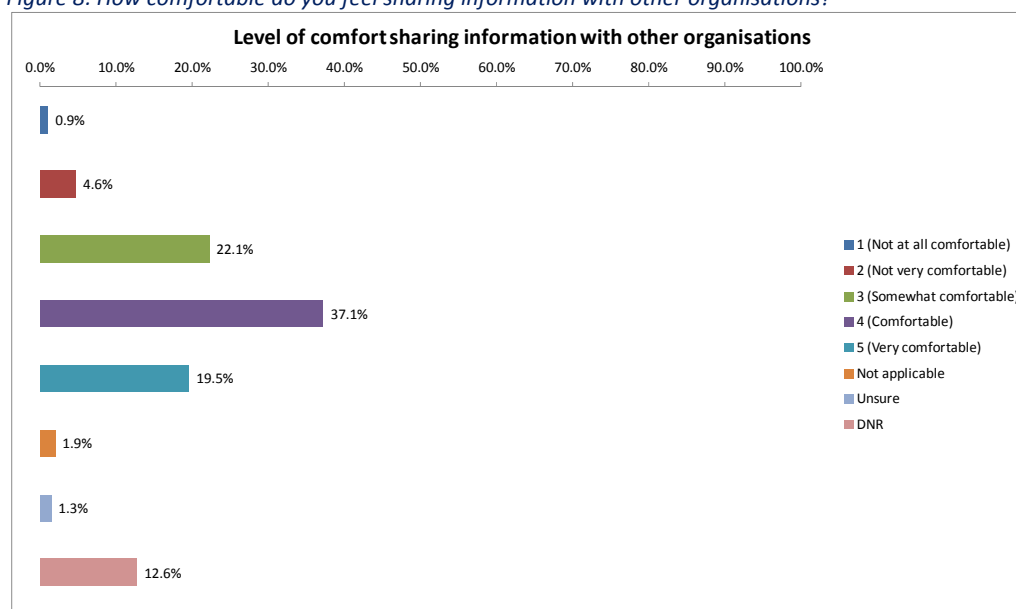
- mandatory reporters are willing to share information but perceive other organisations to be unwilling (see Figure 9 and Figure 10 below); and
- concerns about client confidentiality and family wishes may be barriers to information sharing (as illustrated in Figure 7 above).

These results suggest that the barriers to information sharing are largely cultural (e.g. attitudinal, organisational) as opposed to more ‘formal’ barriers such as legal or procedural barriers.

In response to the final survey question: *Is there anything else you would like to add?* some respondents reported the 16A legislation is not being adequately enforced. This may impact on its uptake amongst some mandatory reporters.

Responses to the question *How comfortable do you feel sharing information with other organisations?* are presented in Figure 8 below.

Figure 8: How comfortable do you feel sharing information with other organisations?



Source: KPMG based on analysis of KTS Workforce Survey data

As this figure shows, the majority of respondents provided a rating of either ‘Comfortable’ or ‘Somewhat comfortable’ (almost 60 percent) in response to this question. Only 0.9 percent of respondents indicated they felt ‘Not at all comfortable’ sharing information with other organisations. Quite a high 12 percent did not respond.

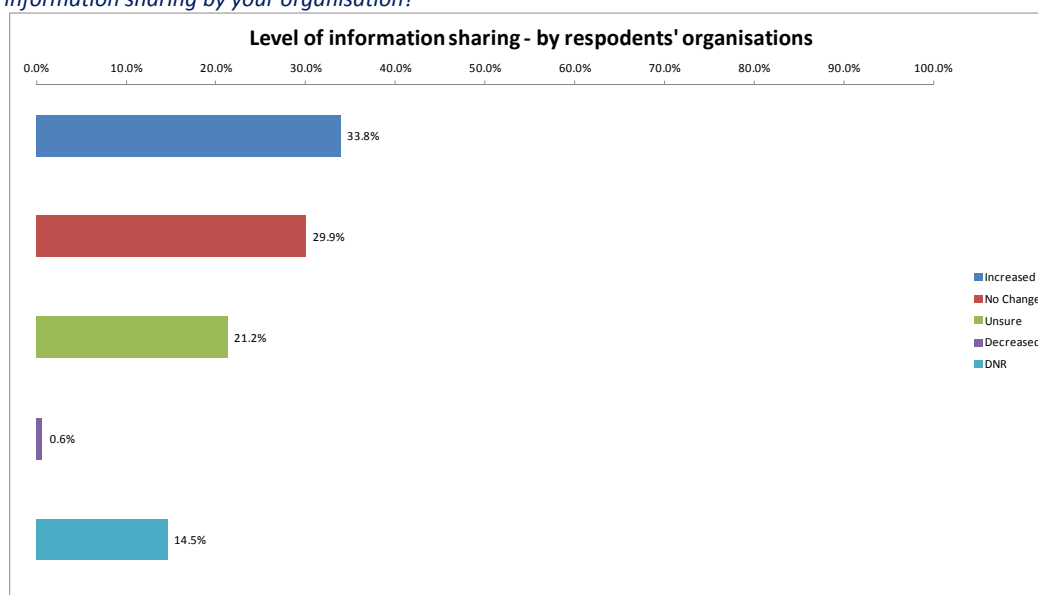
There is a possibility that, as information sharing may be a relatively new role within some sectors, or something that has not historically been encouraged, mandatory reporters within some sectors may feel less comfortable sharing information and/or may not know which organisations to share information with. This is reflected in the results by sector, for example Justice sector staff reported feeling less comfortable sharing client information than other sectors. In this sector (and in other sectors such as Police, Health) historically, information has been kept confidential and formal information sharing may have been limited. Tables 45 and 46 in Appendix B provide detailed results by sector and role.

Although the question *How comfortable do you feel sharing information with other organisations?* does not directly ask about comfort as a facilitator, it is reasonable to assume that feeling comfortable with information sharing is likely to result in more information sharing, provided other organisations are willing to engage (which the results on ‘barriers’ suggest may not always be the case). These results suggest that a large proportion of organisations may be engaging, or likely to engage with information sharing.

### Changes to information sharing

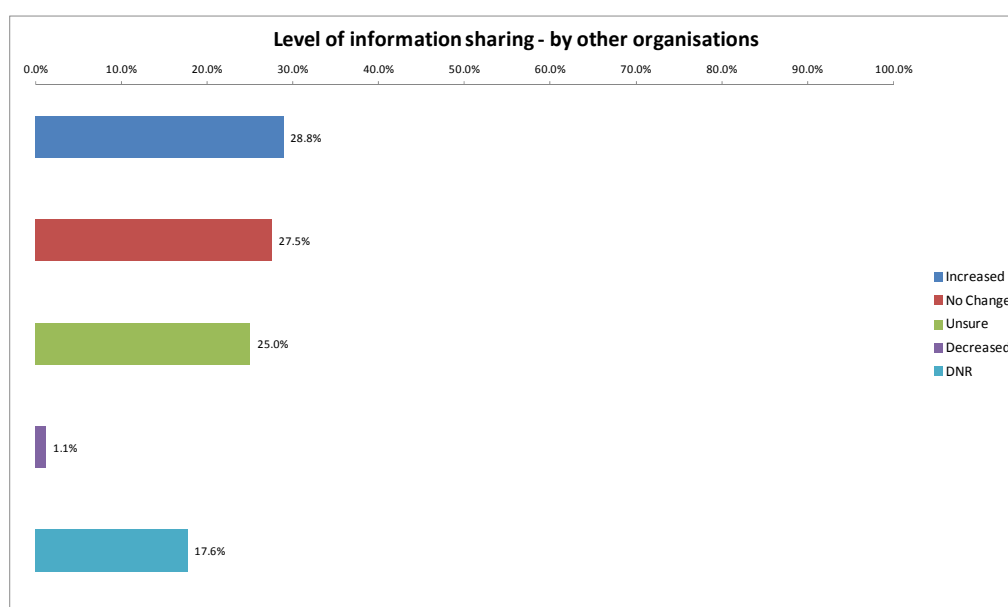
The following figures present responses to the question *How, in your experience, have the new information sharing legislation and processes affected: The level of information sharing by your organisation; and The level of information sharing by other organisations?*

Figure 9: How, in your experience, have the new information sharing legislation and processes affected: The level of information sharing by your organisation?



Source: KPMG based on analysis of KTS Workforce Survey data

Figure 10: How, in your experience, have the new information sharing legislation and processes affected: The level of information sharing by other organisations?



Source: KPMG based on analysis of KTS Workforce Survey data

As these figures show, around a third of respondents thought information sharing by *their* organisation has increased and just under one-third thought it has not changed as a result of the legislation. Around one-fifth of respondents were unsure. Similarly regarding the level of information sharing by *other* organisations, almost 30 percent of respondents considered that information sharing has increased and similarly almost 30 percent reported it has not changed since the implementation of KTS. A larger proportion of respondents were unsure (25.0 percent compared to 21.2 percent for changes within respondents' organisations).

Higher proportions of respondents from the Community Services and Housing sectors thought information sharing has increased than across other sectors. The results for government/NGOs show that a higher proportion of NGO respondents thought information sharing by their organisation has increased (57.5 percent) than government respondents (35.4 percent). Additionally, more respondents in non-metropolitan locations indicated the level of information sharing by their organisation *and* by other organisations has increased, than metropolitan respondents. Within these sectors and in non-metropolitan locations, there are a higher proportion of NGO respondents. Tables 48-51 in Appendix B present data by sector and metropolitan/non-metropolitan locations.

The proportion of respondents selecting 'Unsure' was fairly consistent across sectors, with fewer Community Services staff members selecting 'Unsure' than across other sectors. Respondents in government organisations more commonly selected 'Decreased' than NGO respondents, and similarly sectors with high government representation (e.g. Health, Police) selected 'Decreased' than across other sectors. However the numbers of respondents selecting 'Decreased' overall were low (e.g. 19 respondents from the Health sector selected 'Decreased' to question 5.7, and this was the highest number from any one sector). These results may reflect existing practices of information sharing amongst NGOs, or more willingness to share information amongst NGOs (see section 5 for a more detailed discussion of this trend). Additionally in non-metropolitan locations, where fewer services exist (e.g. schools, community services), relationships between services may be stronger and thus more conducive to information sharing. Even with such explanations, the high number of respondents selecting 'No change' and similarly, the high number of respondents who did not respond, may warrant further exploration.

These results suggest that the practice of seeking consent from families still exists – for example, around one-quarter of respondents still ‘Always’ seek the family’s consent. This appears to be more relevant in some sectors, such as the Disability sector which has a high proportion of ‘Always’ responses. This is consistent with the large proportion of respondents who identified concerns about confidentiality and consent as barriers to information sharing.

These results also suggest that the legislation may have had different impacts across different sectors. For example, the highest proportions of ‘Never’ responses came from Police respondents. For Police, this may reflect one or a combination of the following factors:

- Police are likely to engage with families on a more one-off basis than other sectors;
- Police are often dealing with acute cases (such as domestic violence callouts) and therefore stabilising the event may be a higher priority than discussing families’ access to services; and
- In domestic violence situations, Police can (and frequently do)<sup>49</sup> provide the identified ‘victim’ of the violence with a ‘Yellow Card’ which provides details of relevant service providers, and also seeks their consent for their information to be provided to these services -however, Police may not realise this Yellow Card seeks consent.<sup>50</sup>

Respondents were also asked *Do you inform the family or seek their consent before you seek/share information with another organisation?* As Table 31 shows, more respondents ‘Sometimes’ inform the family or seek their consent than other response options. Around one-tenth of respondents indicated they never inform the family or seek their consent.

Table 31: Do you inform the family or seek their consent before you seek / share information with another organisation?

| Q5.5 Do you inform the family or seek their consent before you seek / share information with another organisation? |           |       |        |       |        |
|--|-----------|-------|--------|-------|--------|
| Never  | Sometimes | Often | Always | DNR   | Total  |
| 550  | 1728      | 1254  | 1456   | 765   | 5753   |
| 9.6%   | 30.0%     | 21.8% | 25.3%  | 13.3% | 100.0% |

Source: KPMG based on analysis of KTS Workforce Survey data

It is important in considering these results to note the information sharing legislation does not intend to eliminate all consent seeking practices – rather, it is intended as an enabler to assess and manage risk (for example linking families with services as required, including where barriers such as family reluctance, exist).

### *Linking knowledge, attitudes and behaviours*

The issue of the difference between knowledge, attitudes and behaviour must be considered when interpreting the results about information sharing.

There were over 1000 (20.3 percent of total) responses suggesting mandatory reporters have participated in formal opportunities to share information since the implementation of KTS<sup>51</sup> – which reflects a *behavioural* impact. This suggests that information sharing is occurring within at least some organisations. The result suggests a large number of respondents believe there are no barriers to information sharing and reflects an *attitude* amongst respondents. Although

<sup>49</sup> This is a Key Performance Indicator for all Police LACs

<sup>50</sup> Based on a discussion with the Police CWU

<sup>51</sup> Responses to question 5.2 – selecting ‘I have participated in formal opportunities to share information (e.g. case conference).

there were over 2000 (45.2 percent of total) responses selecting ‘There are no barriers’<sup>52</sup>, the same conclusions about changes to information sharing behaviour cannot be drawn.

What the results *are* showing is that many respondents hold attitudes to information sharing that are likely to facilitate behaviour change (i.e. believe it is important, feel comfortable) and that there is some evidence that changes to behaviour have occurred since the implementation of KTS.

#### **4.4 Collaboration - To what degree is there coordination and information sharing amongst agencies?**

##### **Main findings relating to this question**

- There appears to be high awareness of the Chapter 16A coordination provisions in the *Children and Young Persons (Care and Protection) Act 1998* amongst respondents
- Respondents indicated they hold positive attitudes towards collaboration with other agencies
- The current level of collaboration amongst respondents’ organisations appears to be moderate with some variation amongst sectors in the level of collaboration occurring
- Many respondents feel their organisation encourages and supports them to collaborate
- Around half of all respondents indicated their organisation is working in partnership with another organisation in supporting children and young people at risk and their families
- There is evidence of both government and non-government organisations entering into partnership arrangements
- Around one-third of respondents thought the level of collaboration has increased since the implementation of KTS.

This sub-section on *Collaboration* asked respondents to reflect on their experiences of collaborating with other organisations since the implementation of KTS. ‘Collaboration’ referred to collaborative service delivery to both children and young people reported to the Community Services Helpline, and vulnerable children, young people and their families. Collaboration included both informal and formal arrangements (such as partnerships). In the survey, the term ‘collaboration’ did not include information exchange/sharing (as this had been addressed in the previous sub-section).

This sub-section also relates to the Interim Review question *To what degree is there coordination and information sharing amongst agencies?*<sup>53</sup> The areas for investigation relating to this Interim Review question included:

- awareness of coordination legislation;
- how collaboration has been supported/facilitated under KTS (facilitators);
- the barriers that have been experienced;
- current collaboration;
- changes that have occurred in relation to collaboration;
- how these changes have been achieved; and
- the impact of these changes.

<sup>52</sup> Responses to question 5.3 – selecting ‘There are no barriers’

<sup>53</sup> Also addressed in the previous section on information sharing.

Outcome level areas for enquiry (e.g. the impact of information sharing on outcomes) are explored in this sub-section, and under Part 3 Mandatory reporters' perspectives on the impacts of KTS.

### *Awareness of coordination legislative provisions*

Awareness of the legislative provisions requiring organisations to coordinate with other organisations<sup>54</sup> appears to be high.

As set out in Table 32 below, almost 76 percent of all respondents said 'Yes' to the question *Are you aware of the legislative obligation to coordinate with other organisations under the Care and Protection Act, Chapter 16A?* This compares to 81.6 percent of respondents who knew about the information sharing legislation; suggesting the level of awareness about the coordination legislation is slightly lower than the level of awareness about the information sharing legislation.

*Table 32: Are you aware of the 16A legislative provisions for coordination? By sector*

| Q 5.1 Are you aware of the 16A legislative provisions for coordination? By sector |       |       |       |        |
|---|-------|-------|-------|--------|
| Sector  | Yes   | No    | DNR   | Total  |
| Health Services   | 1,288 | 171   | 137   | 1,596  |
|   | 73.7% | 17.2% | 9.1%  | 100.0% |
| Community Services  | 915   | 27    | 87    | 1,029  |
|   | 86.8% | 5.5%  | 7.7%  | 100.0% |
| Other   | 195   | 16    | 21    | 232    |
|   | 81.0% | 9.9%  | 9.1%  | 100.0% |
| Housing Services  | 109   | 13    | 11    | 133    |
|   | 74.4% | 19.5% | 6.0%  | 100.0% |
| Early Education and Care Services   | 655   | 49    | 82    | 786    |
|   | 74.6% | 13.1% | 12.3% | 100.0% |
| Justice Services  | 81    | 18    | 8     | 107    |
|   | 68.2% | 21.5% | 10.3% | 100.0% |
| Education Services (school/ higher education)                                     | 1,053 | 72    | 58    | 1,183  |
|   | 82.0% | 13.3% | 4.7%  | 100.0% |
| Disability Services   | 275   | 24    | 18    | 317    |
|   | 85.2% | 10.4% | 4.4%  | 100.0% |
| Police  | 112   | 6     | 11    | 129    |
|   | 76.0% | 15.5% | 8.5%  | 100.0% |
| Local Government  | 12    | 1     | 2     | 15     |
|   | 66.7% | 20.0% | 13.3% | 100.0% |
| Did not respond   | 2     | 0     | 224   | 226    |
|   | .9%   | .0%   | 99.1% | 100.0% |
| Total (count)   | 4366  | 719   | 668   | 5753   |
| %   | 75.9% |       | 11.6% | 100.0% |

Source: KPMG based on analysis of KTS Workforce Survey data

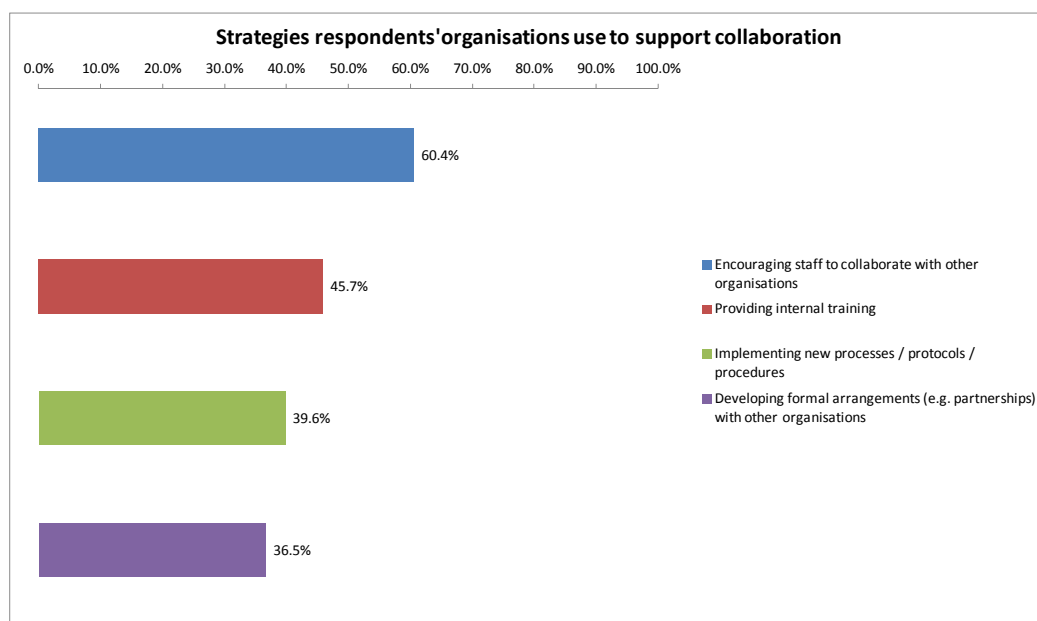
<sup>54</sup> *Children and Young Persons (Care and Protection) Act 1998*, Chapter 16A – available at: <http://www.legislation.nsw.gov.au/fullhtml/inforce/act+157+1998+FIRST+0+N>

More Community Services, Disability and Education sector respondents were aware of the coordination legislation than respondents from other sectors. Again, a higher proportion of respondents working in non-metropolitan areas knew about the coordination legislation than in metropolitan areas. However inconsistent with awareness of the information sharing legislation, awareness of the coordination legislation varied across sectors, with lower levels of awareness amongst Health, Justice and Early Education and Care Sectors. Tables 52-54 in Appendix B present data relating to awareness of the coordination legislation, by sector, location and government/NGO.

### Facilitators and barriers

Organisational level support and respondent attitudes and beliefs have reportedly been common facilitators to collaboration. In response to the question *What (if any) strategies has your organisation used to support collaboration?* respondents most commonly indicated their organisation had ‘Encouraged staff to collaborate with other organisations’ as a way of supporting collaboration, followed by ‘Providing internal training’. However, responses across all four response options were high suggesting that collaboration has been supported consistently and in a number of ways, as Figure 11 shows.

Figure 11: *What (if any) strategies has your organisation used to support collaboration?*



Source: KPMG based on analysis of KTS Workforce Survey data. Note – respondents could select multiple responses to this question

Thematic analysis of ‘Other’ responses showed that mandatory reporters also have opportunities to collaborate through events at which they engage with other organisations, such as external training and networking (71 respondents in total provided such responses).

In response to the question *Which (if any) of the following have supported you to collaborate with other organisations?* respondents commonly indicated they have been supported to collaborate through positive previous experiences (‘I have coordinated with other organisations before and thought it was beneficial’), their own attitudes (‘I think coordination is important’) and by their organisation (‘My organisation supports/encourages me to work with other organisations’).

Similarly to information sharing, the vast majority of respondents indicated there is nothing preventing them from collaborating. This was followed by the barrier ‘Other organisations have

not cooperated in collaboration', however, the number of responses to this barrier represent around one-quarter of the number of respondents stating there are no barriers. Thematic analysis of 'Other' responses similarly showed that the largest number of responses relate to 'there is no need to collaborate'. Other commonly raised barriers include competing priorities, lack of time and resources, and ethical concerns (e.g. client confidentiality and consent). The latter is consistent with previous results for information sharing highlighting similar concerns Tables 56 and 57 in Appendix B, present data on facilitators and barriers, by sector.

### *Collaboration – current practices*

Respondents' current level of collaboration appears to be mixed but moderate. As Table 33 shows, most responses to the question *How often does your role involve collaboration with other organisations to deliver services to vulnerable children, young people and their families?* were distributed across the middle of the response scale: 'Not very often'; 'Sometimes'; and 'Often'.

*Table 33: How often does your role involve collaboration with other organisations to deliver services to vulnerable children, young people and their families?*

| <b>Q6.2 How often does your role involve collaboration with other organisations to deliver services to vulnerable children, young people and their families?</b> |                       |                  |              |                     |              |               |
|--|-----------------------|------------------|--------------|---------------------|--------------|---------------|
| <b>Never</b>   | <b>Not very often</b> | <b>Sometimes</b> | <b>Often</b> | <b>All the time</b> | <b>DNR</b>   | <b>Total</b>  |
| <b>322</b>   | 1195                  | 1278             | 1400         | <b>902</b>          | 656          | <b>5753</b>   |
| <b>5.6%</b>  | <b>20.8%</b>          | <b>22.2%</b>     | <b>24.3%</b> | 15.7%               | <b>11.4%</b> | <b>100.0%</b> |

*Source: KPMG based on analysis of KTS Workforce Survey data. Note – respondents could select multiple responses to this question*

Additionally there was some variation across sectors and locations. A higher proportion of Community Services sector respondents indicated their role involves collaboration with other organisations 'All the time' and a higher proportion of respondents in the Early Education and Care Sector indicated that their role 'Never' involves collaboration, than respondents in other sectors. Collaboration also appears to be more common in non-metropolitan locations than in metropolitan locations, as Table 58 in Appendix B shows.

Additionally, respondents in the Metro Central region indicated less collaboration was occurring with other organisations than in any other FaCS region. This region has a higher socioeconomic status (and higher SEIFA scores) than other metropolitan regions, and this result may reflect less client complexity, thus less need for clients to access multiple services and, as a result, inter-organisational collaboration in this region.

### **Partnerships**

Just under half of all respondent organisations are working in partnership with another organisation (45.1 percent).

*Table 34: Is your organisation currently working in partnership with another organisation (relating to vulnerable children, young people and their families)?*

| <b>Q6.4 Is your organisation currently working in partnership with another organisation (relating to vulnerable children, young people and their families)?</b> |              |               |              |              |
|---|--------------|---------------|--------------|--------------|
| <b>Yes</b>  | <b>No</b>    | <b>Unsure</b> | <b>DNR</b>   | <b>Total</b> |
| <b>2593</b>   | 773          | 1255          | 1132         | <b>5753</b>  |
| <b>45.1%</b>  | <b>13.4%</b> | <b>21.8%</b>  | <b>19.7%</b> | <b>100%</b>  |

*Source: KPMG based on analysis of KTS Workforce Survey data*

More respondents working in the Community Services, Disability and Housing sectors answered ‘Yes’ to the question *Is your organisation currently working in partnership with another organisation (relating to vulnerable children, young people and their families)?* than across other sectors, suggesting that more formal partnerships are occurring within these sectors.

This is consistent with:

- higher reported levels of information sharing among these sectors (results for question 5.7); and
- higher reported levels of collaboration amongst these sectors (discussed further below – results for question 6.8).

Slightly more respondents indicated their partners were government organisations than non-government organisations (50.1 percent of respondents had between 1-5 partners in government organisations, and 46.9 percent had between 1-5 partners in non-government organisations). More manager level staff appear to be aware of whether their organisation is currently working ‘in partnership’ (with a higher proportion of staff level respondents selecting ‘Unsure’ than managers) as would be expected. Tables 60 and 61 in Appendix B present data tables relating to this question.

### *Changes to collaboration*

Survey responses suggest that, in most cases, the level of collaboration between respondents’ organisations and other organisations has either increased or remained the same since the implementation of KTS.

As Table 35 shows, around one-third of respondents indicated collaboration between their organisation and other organisations has increased since the implementation of KTS. A higher number (44 percent) indicated the level of collaboration has remained the same (‘No change’). Only 0.8 percent or 47 respondents indicated the level of collaboration has decreased. Broadly, this is consistent with patterns in changes to information sharing.

*Table 35: Since the implementation of Keep Them Safe, has the level of collaboration between your organisation and other organisations..?*

| Q6.8 Since the implementation of <i>Keep Them Safe</i> , has the level of collaboration between your organisation and other organisations..? |           |           |       |        |
|--|-----------|-----------|-------|--------|
| Increased  | No Change | Decreased | DNR   | Total  |
| 1909   | 2555      | 47        | 1242  | 5753   |
| 33.2%  | 44.4%     | 0.8%      | 21.6% | 100.0% |

*Source: KPMG based on analysis of KTS Workforce Survey data*

Collaboration appears to have increased more in non-metropolitan areas than in metropolitan areas. Additionally, the analysis of responses by sector suggest that the Community Services and Disability sectors have experienced the most increases in collaboration since the implementation of KTS. This is consistent with the results for information sharing, which show that these sectors have also had more increases in the level of information sharing since the implementation of KTS. Respondents from the Justice, Health and Early Education and Care sectors provided proportionately fewer ‘Increased’ responses to this question, and similarly respondents from these sectors also reported less often that:

- information sharing had increased since the implementation of KTS; and
- their organisation is currently working in partnership with another organisation.

Tables 62-63 in Appendix B present detailed data about responses to this question.

The consistency in results for questions about information sharing, collaboration and partnerships suggests a link between these three ‘outcome’ areas. Where organisations have reportedly high awareness of the information sharing legislation, and have increased their level of information sharing, collaboration has also increased, and there are reportedly high levels of partnering occurring.

The issue of causality is relevant here (and also to results relating to changes in information sharing). Although around one-third of respondents indicated that collaboration has increased since the implementation of KTS, 98.7 percent of respondents did not answer the question *Is this decrease primarily due to Keep Them Safe?* meaning these increases in collaboration cannot be attributed solely to KTS. This response suggests either a reluctance or inability to answer this question amongst respondents, which may reflect the fact that KTS is one of a number of factors influencing change.

## 4.5 Family Referral Services - *Do new systems effectively link families to services?*

### Main findings relating to this question

- Between a quarter and a third of respondents working in regions where FRSs are operating have contacted an FRS. However high proportions of respondents have not, or are unclear about what FRSs are (due to a high number not responding to questions about whether they have contacted an FRS)
- Where FRSs have been accessed, they appear to have been effective in linking families with services. However their performance around referrals seems to be more positive than around case management, and generally outcome achievement.

This sub-section included questions relating to Family Referral Services, which relate to the Interim Review question *Do new systems effectively link families to services?* Note, questions relating to this Interim Review question are also addressed under Part 3 of the survey. Specific areas for investigation included: how workers have engaged with the FRSs to link families to services; and the effectiveness of FRSs.

Note that the majority of the data presented below considers a sub-set of respondents only – that is, respondents in the five locations in which FRSs are currently operating.<sup>55</sup>

### *How workers have engaged with Family Referral Services*

Around 40 percent of respondents indicated there is a FRS in the area in which they work. Only 12.3 percent said there is not. Around one-third of all respondents were unsure, suggesting awareness of the FRSs amongst a large proportion of responding mandatory reporters is low. Table 64 in Appendix B presents detailed data tables relating to this question.

Table 36: *Is there a FRS in the area you work? All respondents*

| Q 6.9 Is there a FRS in the area you work? All respondents |       |        |       |        |
|--|-------|--------|-------|--------|
| Yes  | No    | Unsure | DNR   | Total  |
| 2282   | 705   | 1955   | 811   | 5753   |
| 39.7%  | 12.3% | 34.0%  | 14.1% | 100.0% |

Source: KPMG based on analysis of KTS Workforce Survey data

In interpreting these results, it is important to note a number of points. Firstly, FRSs are located in five areas across NSW: Mount Druitt, Dubbo, Tamworth, Wollongong and Newcastle.

<sup>55</sup> Because a subset of data is considered, the numbers presented are smaller, which impacts on the proportions (i.e. small numbers may reflect large proportions).

Therefore, it is not expected that all respondents would know about FRSs and particularly not those working in metropolitan locations, as the data has shown. The planned state-wide rollout of FRSs over 2012-13 will involve the development of seven additional FRSs with the aim of achieving coverage across NSW. Finally, FRSs will be promoted, and public reporting will be undertaken on FRSs and their performance by a Performance and Accountability Framework which is currently under development. However despite these explanations, the large proportion of respondents selecting 'unsure' still suggests low levels of awareness about FRSs amongst the broader respondent population.

The data below considers a sub-set of respondents based on the locations in which FRSs were operating at the time of the survey:

- Dubbo and surrounds (the Western FRS);
- Newcastle and surrounds (the Hunter Central Coast FRS);
- Mount Druitt and surrounds (the Mount Druitt FRS);
- Wollongong and surrounds (the Illawarra FRS); and
- Tamworth and surrounds (the New England FRS)<sup>56</sup>

Analysis of this subset of data shows that the number of respondents who have contacted an FRS is variable across these nominated regions. As the table below shows, the highest proportion of 'Yes' responses were from respondents in the New England FRS region, and the highest proportion of 'No' responses were from respondents in the Hunter Central Coast FRS region.

Table 37: Have you contacted the FRS? – FRS regions only

| Q 6.10 Have you contacted the FRS? – FRS regions only |       |       |       |       |
|---|-------|-------|-------|-------|
| Region  | Yes   | No    | DNR   | Total |
| Hunter Central Coast                                  | 189   | 202   | 326   | 717   |
|   | 26.4% | 28.2% | 45.5% | 100%  |
| Illawarra   | 110   | 108   | 182   | 400   |
|   | 27.5% | 27.0% | 45.5% | 100%  |
| Mount Druitt  | 65    | 55    | 79    | 199   |
|   | 32.7% | 27.6% | 39.7% | 100%  |
| New England   | 65    | 43    | 60    | 168   |
|   | 38.7% | 25.6% | 35.7% | 100%  |
| Western   | 87    | 70    | 121   | 278   |
|   | 31.3% | 25.2% | 43.5% | 100%  |
| Total   | 516   | 478   | 768   | 1,762 |
|   | 29.3% | 27.1% | 43.6% | 100%  |

Source: KPMG based on analysis of KTS Workforce Survey data

Across all regions there were a high proportion of respondents who 'Did not respond' – between 35.7 and 45.5 percent. This may suggest low awareness of FRSs amongst these respondents, as not responding is likely to reflect respondent confusion about whether they have contacted an FRS or not.

<sup>56</sup> See: [http://www.dpc.nsw.gov.au/\\_data/assets/pdf\\_file/0009/83646/06\\_Family\\_Referral\\_Services.pdf](http://www.dpc.nsw.gov.au/_data/assets/pdf_file/0009/83646/06_Family_Referral_Services.pdf) for an overview of the regional areas FRSs cover.

When considering responses for the FRSs that were established first (the 'older FRSs' - Western, Mount Druitt and Hunter Central Coast) and those that have more recently been established (the 'newer FRSs' – New England and Illawarra), there were more 'Yes' responses from the newer FRSs (30.8 percent had contacted an FRS) than the older FRSs (28.6 percent had contacted an FRS). Additionally, a higher proportion of respondents did not respond from the older FRS group (44.1 percent) than the newer FRS group (42.6 percent). Appendix B (Tables 65 and 66) presents data separately for older FRS regions and newer FRS regions.

It appears FRSs have been contacted most frequently by sectors with higher proportions of NGO respondents (Community Services, Housing), than sectors with more government respondents (Health, Police). Most commonly, respondents contacted the FRS to refer a family, as would be expected.

### *Effectiveness of Family Referral Services*

The result to questions about the effectiveness of FRSs are presented in the following tables. Note, the results presented below only include respondents who answered yes to the question *Have you contacted the FRS?*

Across the FRS regions, more respondents thought FRSs are 'Effective' or 'Very effective' than any other response option in: accepting referrals; and identifying appropriate services to refer to. However responses in relation to: providing case management support; and in meeting the needs of vulnerable children were less positive. In addition, there were variations across regions and across each of the separate domains to this question, as the following tables show.

#### ***Accepting referrals; identifying appropriate services to refer to***

In terms of accepting referrals *and* identifying appropriate services to refer to, the majority of responses were across the higher end of the response scale – 'Somewhat effective', 'Effective' and 'Very effective' (see Table 38 and Table 39 below).

Respondents in the New England and Western FRS regions were the most positive (i.e. they provided the highest proportion of positive responses based on a combination of 'Effective' and 'Very effective'). Conversely, the Hunter and Illawarra respondents had less positive results. Mount Druitt FRS region respondents had mixed results, with a higher proportion of respondents selecting 'Very effective' and also, higher proportions of respondents selecting the less positive options 'Not at all effective' and 'Not very effective'.

*Table 38: How effective was the Family Referral Service in accepting referrals?*

| <b>Q6.12 How effective was the FRS in...accepting referrals? – FRS regions, and respondents who have contacted an FRS only</b> |                                 |                               |                               |                      |                           |             |               |             |              |
|--|---------------------------------|-------------------------------|-------------------------------|----------------------|---------------------------|-------------|---------------|-------------|--------------|
| <b>Region</b>  | <b>1 (Not at all effective)</b> | <b>2 (Not very effective)</b> | <b>3 (Somewhat effective)</b> | <b>4 (Effective)</b> | <b>5 (Very effective)</b> | <b>N/A</b>  | <b>Unsure</b> | <b>DNR</b>  | <b>Total</b> |
| <b>Hunter CC</b>   | <b>4.2%</b>                     | <b>8.5%</b>                   | <b>21.2%</b>                  | <b>38.1%</b>         | <b>17.5%</b>              | <b>5.8%</b> | <b>2.6%</b>   | <b>2.1%</b> | <b>100%</b>  |
| <b>Illawarra</b>   | <b>0.9%</b>                     | <b>6.4%</b>                   | <b>17.3%</b>                  | <b>40.9%</b>         | <b>24.5%</b>              | <b>5.5%</b> | <b>4.5%</b>   | <b>0.0%</b> | <b>100%</b>  |
| <b>Mount Druitt</b>  | <b>4.6%</b>                     | <b>10.8%</b>                  | <b>23.1%</b>                  | <b>12.3%</b>         | <b>32.3%</b>              | <b>7.7%</b> | <b>7.7%</b>   | <b>1.5%</b> | <b>100%</b>  |
| <b>New England</b>   | <b>0.0%</b>                     | <b>6.2%</b>                   | <b>27.7%</b>                  | <b>40.0%</b>         | <b>18.5%</b>              | <b>4.6%</b> | <b>1.5%</b>   | <b>1.5%</b> | <b>100%</b>  |
| <b>Western</b>   | <b>2.3%</b>                     | <b>4.6%</b>                   | <b>19.5%</b>                  | <b>35.6%</b>         | <b>34.5%</b>              | <b>3.4%</b> | <b>0.0%</b>   | <b>0.0%</b> | <b>100%</b>  |

*KPMG based on analysis of KTS Workforce Survey data. Only responses from respondents who answered 'Yes' to the question 'Have you contacted the FRS' are included here.*

Table 39 How effective was the Family Referral Service in identifying appropriate services to refer to?

| Q6.12 How effective was the FRS in...identifying appropriate services to refer to? FRS regions, and respondents who have contacted an FRS only |                          |                        |                        |               |                    |      |        |      |        |
|--|--------------------------|------------------------|------------------------|---------------|--------------------|------|--------|------|--------|
| Region   | 1 (Not at all effective) | 2 (Not very effective) | 3 (Somewhat effective) | 4 (Effective) | 5 (Very effective) | N/A  | Unsure | DNR  | Total  |
| Hunter CC  | 4.2%                     | 7.9%                   | 22.8%                  | 34.4%         | 19.0%              | 4.2% | 3.7%   | 3.7% | 100.0% |
| Illawarra  | 0.9%                     | 5.5%                   | 22.7%                  | 35.5%         | 25.5%              | 4.5% | 3.6%   | 1.8% | 100.0% |
| Mount Druitt   | 4.6%                     | 10.8%                  | 18.5%                  | 16.9%         | 35.4%              | 1.5% | 9.2%   | 3.1% | 100.0% |
| New England  | 0.0%                     | 7.7%                   | 27.7%                  | 41.5%         | 13.8%              | 3.1% | 4.6%   | 1.5% | 100.0% |
| Western  | 1.1%                     | 6.9%                   | 23.0%                  | 37.9%         | 25.3%              | 4.6% | 0.0%   | 1.1% | 100.0% |

KPMG based on analysis of KTS Workforce Survey data. Only responses from respondents who answered 'Yes' to question 'Have you contacted the FRS' are included here.

### Providing case management

Overall responses about the effectiveness of FRSs in providing case management were less positive, with lower proportions of respondents selecting 'Very effective' and more spread in responses across the lower ends of the response scale ('Not at all effective', 'Not very effective' and 'Somewhat effective'). Mount Druitt and New England FRS region respondents provided more negative ratings than respondents from other regions. This may reflect the fact that Mount Druitt FRS is a telephone based service and therefore is likely to do less case management.

Table 40: How effective was the Family Referral Service in providing case management?

| Q6.12 How effective was the FRS in...providing case management support? FRS regions, and respondents who have contacted an FRS only |                          |                        |                        |               |                    |       |        |      |        |
|---|--------------------------|------------------------|------------------------|---------------|--------------------|-------|--------|------|--------|
| Region  | 1 (Not at all effective) | 2 (Not very effective) | 3 (Somewhat effective) | 4 (Effective) | 5 (Very effective) | N/A   | Unsure | DNR  | Total  |
| Hunter CC   | 4.2%                     | 11.1%                  | 25.4%                  | 23.3%         | 12.2%              | 11.1% | 9.5%   | 3.2% | 100.0% |
| Illawarra   | 1.8%                     | 10.9%                  | 23.6%                  | 30.0%         | 20.0%              | 6.4%  | 6.4%   | 0.9% | 100.0% |
| Mount Druitt  | 10.8%                    | 9.2%                   | 15.4%                  | 13.8%         | 13.8%              | 21.5% | 12.3%  | 3.1% | 100.0% |
| New England   | 1.5%                     | 12.3%                  | 29.2%                  | 32.3%         | 13.8%              | 4.6%  | 4.6%   | 1.5% | 100.0% |
| Western   | 4.6%                     | 11.5%                  | 26.4%                  | 31.0%         | 17.2%              | 6.9%  | 1.1%   | 1.1% | 100.0% |

KPMG based on analysis of KTS Workforce Survey data. Only responses from respondents who answered 'Yes' to question 'Have you contacted the FRS' are included here.

### Meeting the needs of children, young people and their families

Again, the responses about the effectiveness of FRSs in meeting the needs of vulnerable children, young people and their families were less positive than responses relating to referrals, with responses more evenly spread across the response scale. The highest proportion of negative responses were again from respondents in the Mount Druitt FRS region. Given the fairly general nature of this question, this suggests that some respondents believe FRSs could perform better.

Table 41: How effective was the Family Referral Service in meeting the needs of vulnerable children, young people and families?

| Q6.12 How effective was the FRS in...meeting the needs of vulnerable children, young people and their families?<br>FRS regions, and respondents who have contacted an FRS only |                          |                        |                        |               |                    |       |        |      |        |
|--|--------------------------|------------------------|------------------------|---------------|--------------------|-------|--------|------|--------|
| Region   | 1 (Not at all effective) | 2 (Not very effective) | 3 (Somewhat effective) | 4 (Effective) | 5 (Very effective) | N/A   | Unsure | DNR  | Total  |
| Hunter CC  | 4.2%                     | 6.9%                   | 27.0%                  | 25.9%         | 13.8%              | 5.3%  | 11.1%  | 5.8% | 100.0% |
| Illawarra  | 1.8%                     | 11.8%                  | 25.5%                  | 29.1%         | 20.0%              | 4.5%  | 5.5%   | 1.8% | 100.0% |
| Mount Druitt   | 7.7%                     | 6.2%                   | 24.6%                  | 13.8%         | 12.3%              | 15.4% | 15.4%  | 4.6% | 100.0% |
| New England  | 0.0%                     | 9.2%                   | 32.3%                  | 33.8%         | 12.3%              | 3.1%  | 7.7%   | 1.5% | 100.0% |
| Western  | 3.4%                     | 8.0%                   | 27.6%                  | 32.2%         | 18.4%              | 1.1%  | 5.7%   | 3.4% | 100.0% |

KPMG based on analysis of KTS Workforce Survey data. Only responses from respondents who answered 'Yes' to question 6.10 are included here.

Overall, this data suggests that, where FRSs have been accessed, they have been effective in linking families with services. However their performance around referrals seems to be more positive than around case management, and generally outcome achievement. Regarding the latter, this may be due to the fact that FRSs have not been in place for a long period (some less than 2 years) and therefore, may not have been able to achieve the longer term outcome of meeting the needs of children, young people and their families.

However contradicting this, the results for newer FRSs compared to older FRSs show that across each of these domains, respondents in the new FRS regions were more positive (i.e. higher proportions selected 'Effective' and 'Very effective'). Interestingly, the largest difference in responses were for the domains around case management and meeting the needs of children, young people and their families. This suggests that the results are more likely to be linked to the FRSs themselves, rather than the length of time they have been in place. Tables 67 to 74 in Appendix B present responses to the questions about FRS effectiveness for newer and older FRSs.

#### 4.6 Meeting the needs of Aboriginal children, young people and their families - Are services more available and better able to meet the needs of Aboriginal children, young people and families? Have services increased the levels of cultural awareness, cultural competence and partnerships with Aboriginal communities?

##### Main findings relating to this question

- Most respondents indicated they have between 1-19 percent of their work or role focussed on Aboriginal clients
- Over half of all respondents indicated their organisation has changed the way they work with Aboriginal clients, however there remain some (apparently knowledge and attitude based) barriers to improving service delivery to Aboriginal clients
- Cultural competency training is the most common change implemented and, as a result, the most common impact arising from this change has been increased cultural competency of services, however organisations in different sectors have implemented different strategies focussed on improving Aboriginal service delivery
- The most common reason respondents provided for *not* having made changes was the fact that they

have no or few Aboriginal people in their target group / area, which may be a perception rather than a reality. Additionally it appears organisations within some sectors are not being supported to make changes to the way they work

- Of the organisations that have made changes, responses suggest that gains have been achieved as a result, however due to a range of factors, there is still some way to go in improving outcomes for Aboriginal children, young people and their families.

This sub-section on *Meeting the needs of Aboriginal children, young people and their families* asked respondents to reflect on their experiences of working within their sector as a mandatory reporter since the implementation of KTS, with a focus on service delivery to Aboriginal clients.

This sub-section relates to the Interim Review questions *Are services more available and better able to meet the needs of Aboriginal children, young people and families?* and *Have services increased the levels of cultural awareness, cultural competence and partnerships with Aboriginal communities?* The areas of investigation relating to these Interim Review questions included:

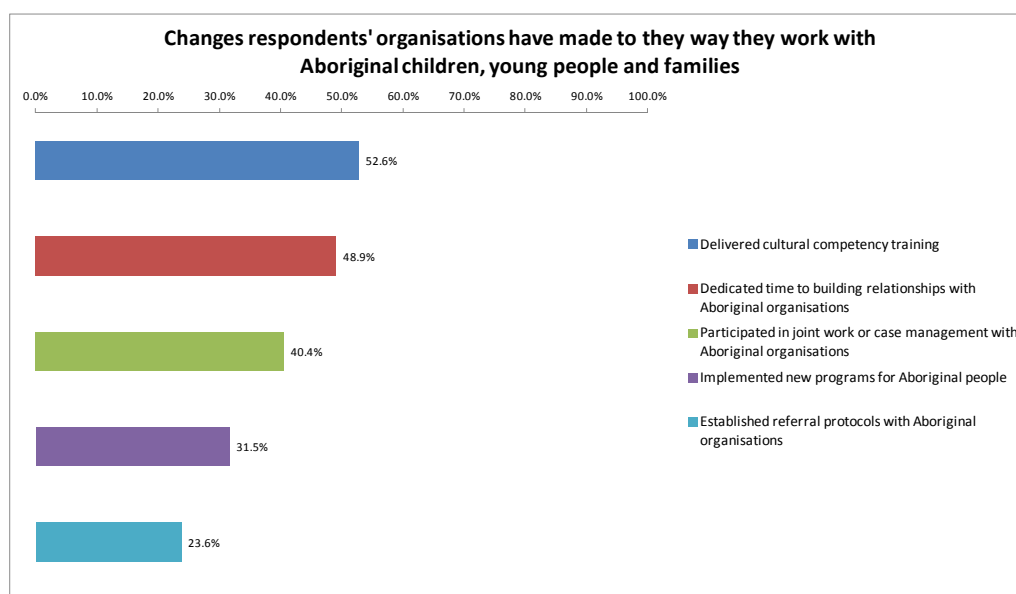
- changes to support improved service delivery to Aboriginal clients;
- barriers to making changes; and
- links between these changes and outcomes for Aboriginal children, young people and their families.

#### *Improved service delivery to Aboriginal clients – changes occurring*

Around 58 percent of respondents indicated they have made changes to the way they work with Aboriginal clients - providing at least one example of a change they have made in response to the question *Which (if any) of the following changes has your organisation made in the way it works with Aboriginal children, young people and their families since the implementation of Keep Them Safe?*

As the following figure shows, delivering cultural competency training was the most common change respondents reported their organisation has implemented in terms of the way they work with Aboriginal clients. Other commonly cited changes include building relationships with Aboriginal organisations, and participating in joint work or case management with Aboriginal organisations.

Figure 12: Which changes has your organisation made to the way it works with Aboriginal children, young people and their families?



Source: KPMG based on analysis of KTS Workforce Survey data. Note – respondents could select multiple responses to this question

The types of changes organisations have reportedly made vary by sector, for example more respondents working in Disability and Community Services said their organisation provided cultural competency training than across other sectors, whereas more Justice services respondents said their organisation has established referral protocols with Aboriginal organisations and implemented new programs for Aboriginal people.

Organisations in the Community Services and Disability sectors appear to have made a range of changes to the way they work with Aboriginal clients, whereas other sectors appear to have made more specific changes. For example more Early Education and Care respondents have participated in joint case work or case management with Aboriginal organisations than other sectors, but had proportionately lower responses across other response options.

Additionally, the results suggest that NGOs are more likely to have implemented more changes to the way they work with Aboriginal clients than government organisations – with between around 10 and 30 percent more NGO respondents selecting each of the response options (i.e. ‘Delivered cultural competency training’, ‘Implemented new programs for Aboriginal people’ etc). Table 75 in Appendix B presents results to this question by government/NGO.

Cultural competency training may be one of the more readily available changes to implement, as it is relevant to most staff and can be provided within a discrete period of time (often a matter of hours) with relatively low effort/resourcing. Other changes, such as improving relationships with Aboriginal organisations, may take more time and effort, and gains are not necessarily guaranteed. This may provide some explanation for these results. Table 78 in Appendix B presents responses by sector to this question.

It is important to note however that cultural competency training was not provided under KTS and therefore the changes resulting from cultural competency training cannot be directly attributed to KTS. However KTS does involve a number of programs encouraging engagement between Aboriginal organisations and mainstream organisations – which these results reflect. As noted under section 4.4 Partnerships, these changes may provide a basis on which partnerships between mainstream and Aboriginal organisations can be built going forward.

There is evidence that some organisations have been able to increase their level of partnering with Aboriginal communities – the Community Services, Education and Disability sectors appear to have most often dedicated time to building relationships with Aboriginal organisations.

### Barriers

For respondents working in organisations that have not made changes, the fact that there are no or few Aboriginal *people* (i.e. potential clients) in their target group/area was the key barrier reported. More respondents from the Education and Disability sectors said there were no/few Aboriginal people in their organisation's target group/area than across other sectors.

This was followed by 'This is not a high priority for my organisation', and 'There are no/few Aboriginal *organisations* (i.e. potential partners) in my catchment area' - the highest proportion of respondents selecting the latter option were from the Justice sector.

Table 42: Why haven't changes been made? By sector

| Q7.2 Why haven't changes been made to the way you work? Please tick all that apply |   |  |   |   |
|--|---|--|---|---|
| There are no/few Aboriginal people in my organisation's target group/area          | There are no/few local Aboriginal organisations | My organisation has difficulties engaging local Aboriginal organisations/communities | This is not a high priority (for a reason other than the above) for my organisation | This is not encouraged within my organisation |
| 791  | 223   | 195  | 239   | 72  |
| 63.0%  | 17.8%   | 15.5%  | 19.0%   | 5.7%  |

Source: KPMG based on analysis of KTS Workforce Survey data. Note – respondents could select multiple responses to this question

More Housing services respondents selected 'This is not a high priority for my organisation' than respondents across other sectors, and more Health staff selected 'This is not encouraged within my organisation' than other sectors. This is interesting given the large focus on Indigenous outcomes (particularly in health) across all areas of government, and may warrant some further exploration and identification of solutions.

Respondents from the Police and Disability sectors more commonly reported that their organisation has difficulties engaging with local Aboriginal organisations/communities. For Police, this may reflect the historical tension between Police and some Aboriginal communities.

Respondents in the Early Education and Care and Education sectors appear to have made fewer changes and experienced more barriers overall than across other sectors. This may reflect the lesser relevance of some response options to these sectors, such as those around joint work and case management – not traditionally undertaken within education organisations. It may also reflect the availability of Aboriginal specific Early Education and Care services across parts of the state, meaning there may be less imperative for mainstream services in this sector to make changes. Table 77 in Appendix B presents data by sector.

These results suggest that a large number of respondents think that there is no demand for services from Aboriginal people in their area (N= 791) and/or there are few Aboriginal organisations with which to deliver joint services (N=223). There are some possible explanations for this.

Firstly, these results may reflect perceptions rather than reality – the response option 'There are no/few Aboriginal people in my organisation's target group/area' relies on staff having knowledge of their target catchment, and does not account for the fact that some staff may not have accurate knowledge of the Aboriginal population and Aboriginal organisations in their target group / catchment area. A good example of this is that, of the respondents who selected

'There are no/few Aboriginal people in my organisation's target group/area', a higher number were from metropolitan areas where in fact the highest number of Aboriginal people in NSW live. This lack of understanding in itself may be a barrier. This result may also reflect poor practices of identifying Aboriginal clients – it is possible that some organisations are already providing services to Aboriginal clients but are not aware of their clients Aboriginal status. Further these results may also suggest that the accessibility of some services is not inclusive and as such barriers may restrict access for Aboriginal people.

These results warrant further, more in-depth exploration - however there may be a need for further education of mandatory reporters about their local Aboriginal community, and processes of identification of Aboriginal clients.

### *Improved outcomes for Aboriginal children, young people and their families*

Within organisations that *have* reportedly made changes to the way they work, the most common reported result of these changes is 'Improved cultural competency of the services provided'. This is closely followed by improved links between respondents' organisations and Aboriginal organisations. These results link directly with the reported changes respondents' organisations have made and suggest that services have increased their level of cultural appropriateness and cultural competency (regardless of whether this is a result of KTS).

The focus of KTS for Aboriginal children, young people and their families is ultimately to provide better support and thus improve outcomes for these families.<sup>57</sup> To seek respondent perspectives on the achievement of outcomes as a result of KTS, the survey asked questions about the impact of KTS on meeting the needs of Aboriginal children, young people and families, and the impact of KTS on the cultural appropriateness of programs and services.

### *Impact of KTS on meeting the needs of Aboriginal children, young people and families*

A large proportion (40.4 percent) of respondents did not answer the question *As a result of these activities<sup>58</sup>, my organisation is able to better meet the needs of Aboriginal children, young people and their families within my organisation's target group/area?* The table below provides an overview of responses to this question.

*Table 43: As a result of these activities, my organisation is able to better meet the needs of Aboriginal children, young people and their families within my organisation's target group/area?*

| <b>Q7.4 As a result of these activities, my organisation is able to better meet the needs of Aboriginal children, young people and their families within my organisation's target group/area?</b> |                 |                                  |              |                       |              |               |
|---|-----------------|----------------------------------|--------------|-----------------------|--------------|---------------|
| <b>Strongly disagree</b>  | <b>Disagree</b> | <b>Neither agree or disagree</b> | <b>Agree</b> | <b>Strongly agree</b> | <b>DNR</b>   | <b>Total</b>  |
| <b>58</b>   | 132             | 1413                             | <b>1662</b>  | 163                   | 2325         | <b>5753</b>   |
| <b>1.0%</b>   | <b>2.3%</b>     | <b>24.6%</b>                     | 28.9%        | <b>2.8%</b>           | <b>40.4%</b> | <b>100.0%</b> |

*Source: KPMG based on analysis of KTS Workforce Survey data.*

The largest number of 'Did not respond' to this question came from Early Education and Care, Local Government, Health and Police respondents. This is interesting given that respondents from these sectors:

<sup>57</sup> NSW Government 2009, *Keep Them Safe A shared approach to child wellbeing 2009-14*, NSW Government: Sydney, accessed May 2012, <

[http://www.community.nsw.gov.au/docswr/\\_assets/main/lib100040/keep\\_them\\_safe.pdf](http://www.community.nsw.gov.au/docswr/_assets/main/lib100040/keep_them_safe.pdf)>

<sup>58</sup> Changes identified by respondents in Q7.1

- were just as likely as other sectors to report their organisation *had* made changes to the way they work with Aboriginal clients; and
- were no more likely than other sectors to identify reasons their organisation *has not* made changes to the way they work with Aboriginal clients.

The large number of 'Did not respond' is therefore likely to reflect the fact that respondents are unwilling or unable to link these changes to outcomes, rather than reflecting the fact that these respondents have not made changes.

Just under one-third of all respondents 'Agreed' with the statement 'As a result of these activities<sup>59</sup>, my organisation is able to better meet the needs of Aboriginal children, young people and their families within my organisation's target group/area' and around one-quarter 'Neither agreed nor disagreed'. There were very low responses to 'Disagree' (2.3 percent), 'Strongly disagree' (1 percent) as well as 'Strongly agree' (2.8 percent).

Respondents selecting 'Agree' were fairly consistent across sectors, with the exceptions being Health and Police which had higher proportions of 'Neither agree nor disagree' than 'Agree'. This aligns with the large number of Police and Health respondents who 'Did not respond' to this question. Table 79 in Appendix B presents responses by sector to this question.

These results suggests that the majority of respondents believe some gains have been achieved in this area, but that there is still some way to go. The take away message is however, than only respondents who chose to respond to this question provided these positive results. The large number of 'Did not respond' suggests that these changes may not have led to any clear or measurable impacts.

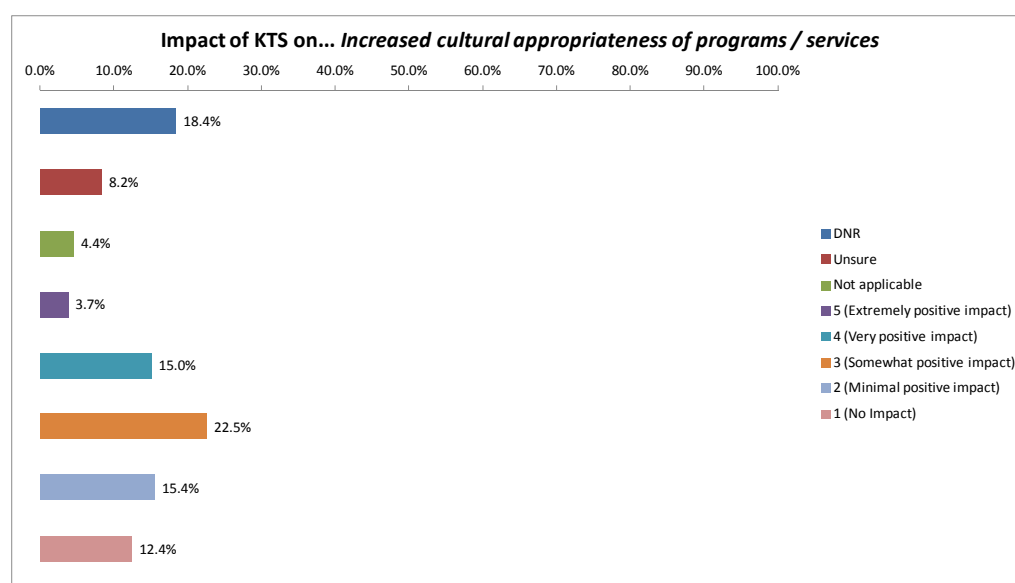
#### *Impact of KTS on cultural appropriateness of programs and services*

In response to the question *Thinking about changes in services and practice that have occurred over the past 2 years, what impact has Keep Them Safe had on increased cultural appropriateness of programs/services?*, more respondents selected 'Somewhat positive impact' than any other option, and more respondents selected response options on the lower end of the scale (i.e. 'No impact' 'Minimal positive impact') than on the higher end of the scale ('Very positive impact' and 'Extremely positive impact'). Again, this suggests that only some respondents believe changes have occurred in this area, and there may still be some work to do.

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<sup>59</sup> Changes identified by respondents in Q7.1

Figure 13: Impact of KTS on increased cultural appropriateness of services



Source: KPMG based on analysis of KTS Workforce Survey data.

The high number of respondents that did not respond or were unsure suggests that respondents may be unwilling or unable to attribute any changes that have occurred, to KTS (alone or at all). Table 99 in Appendix B presents responses by sector for this question.

Aligning with the number of 'Did not respond' responses to question 7.4 (discussed above) the highest proportion of respondents selecting 'Unsure' were Housing, Police, Health and Local Government sectors. Interestingly, these sectors also had higher proportions of 'No impact'. Considering these results in conjunction with the results to other previous questions about Aboriginal clients, it appears that many respondents are unable to link changes to impacts, and are either unwilling or unable to attribute changes to KTS, or (a smaller number) believe the changes are not linked to KTS at all. Analysis of responses to the background sections of the survey show that 6.5 percent of respondents have 60 percent or more of their work focused on Aboriginal clients (see page 24). Additionally, more organisations in non-metropolitan areas have more focus on Aboriginal clients than in metropolitan areas. Of the respondents who have a high focus on Aboriginal clients:

- about three-quarters of respondents with 60-100 percent of their work focussed on Aboriginal clients indicated they have made some changes to the way they work with Aboriginal children, young people and their families (this compares to 57.9 percent across the broader respondents) – as noted previously it is likely that many of the respondents with a high focus on Aboriginal clients are Aboriginal organisations;
- around half of respondents with 60-100 percent of their work focussed on Aboriginal clients indicated they strongly agree with the question *As a result of these activities, my organisation is able to better meet the needs of Aboriginal children, young people and their families within my organisation's target group/area* This compares with just 2.8 percent of all respondents strongly agreeing;
- a higher proportion of non-metropolitan respondents' organisations have made changes to the way they work with Aboriginal clients (33.8 percent, compared to 21.1percent in metropolitan areas); and
- more respondents in non-metropolitan locations thought that the activities their organisation implemented have led to their organisation being able to better meet the

needs of Aboriginal clients, than in metropolitan locations ('Agree' – 63.1 percent and 36.9 percent respectively, and 'Strongly agree' - 65.3 percent and 34.8 percent respectively).

What these results suggest is that, where organisations have more Aboriginal clients, they have made more changes, and more strongly believe they can now better meet the needs of Aboriginal clients.

### *Interpreting the results relating to outcomes*

It is important to acknowledge a number of factors when interpreting these results.

The first is that achieving improved outcomes for Aboriginal children, young people and their families is not a short term goal, and it is likely to take a number of years to change what are often entrenched social problems.<sup>60</sup>

The second is that currently, there are a number of other factors that are likely to impact on outcome achievement for Aboriginal children, young people and their families. These include factors inhibiting outcome achievement (e.g. social factors such as income, employment, and family situation) and factors supporting or aiming to support outcome achievement (e.g. government investment at local, state and commonwealth levels)<sup>61</sup>. What this means is that the achievement of outcomes is not straightforward, and when outcomes are achieved, they are likely not to be solely linked to KTS alone.

Linked to this is the third factor – that some of the changes that are observed may have occurred anyway (i.e. in the absence of KTS).

The survey is unable to definitively address whether outcomes have been achieved because, as previously discussed, the results reflect perceptions of individual mandatory reporters only, and factors other than KTS which may influence outcome achievement have not been measured.

## **Part 3. Mandatory reporters' perspectives on the impacts of *Keep Them Safe***

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Part 3 of the survey asked respondents to reflect on the changes that have occurred as a result of KTS (the impacts).

This section contained two sub-sections:

- staff work practices, workforce and culture - *Have government and non-government services engaged positively in the process of workforce culture change?;* and
- ability to meet the needs of children, young people and families - *Do new systems effectively link families to services?*

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<sup>60</sup> Productivity Commission 2011, *Overcoming Indigenous Disadvantage Key Indicators 2011*, Australian Government: Canberra.

<sup>61</sup> See KTS Action Plan for examples of current policies and investment: Department of Premier and Cabinet 2009, *Keep Them Safe: A shared approach to child wellbeing*, NSW Government: Sydney, accessed 21 May 2012, <[http://www.dpc.nsw.gov.au/\\_data/assets/pdf\\_file/0004/57145/Keep\\_Them\\_Safe.pdf](http://www.dpc.nsw.gov.au/_data/assets/pdf_file/0004/57145/Keep_Them_Safe.pdf)>

#### 4.7 Staff work practices, workforce and culture - *Have government and non-government services engaged positively in the process of workforce culture change?*

##### Main findings relating to this question

- Around half of all respondents reported that KTS overall has, at least moderately, positively impacted on their work practices and abilities in areas such as referrals, case management, information sharing and collaboration
- Between 40-50 percent of respondents also indicated specific components of KTS, such as the MRG and CWUs, have had a positive impact on their work practices, however there is some inconsistency across the elements, for example there were less positive ratings overall about FRSs
- Generally there was alignment between the responses to questions about work practices and culture, and other relevant questions in the survey (such as questions around the MRG, information sharing and collaboration)
- These results suggest that mandatory reporters have engaged positively with changes to the way they work under KTS
- Almost three-quarters of respondents agreed or strongly agreed with the statement *I believe that responding to child protection concerns is a shared responsibility.*

This sub-section on *Staff work practices, workforce and culture* asked respondents to reflect on the impacts of KTS on their work practices as a mandatory reporter and the way their organisation works with children and young people who are vulnerable or at ROSH and their families.

This sub-section relates to the Interim Review question *Have government and non-government services engaged positively in the process of workforce cultural change?* The areas of investigation relating to this Interim Review question include:

- the extent to which KTS has impacted on staff and organisational work practices; and
- mandatory reporter attitudes and beliefs about responding to child protection concerns.

##### Impacts of KTS on work practices

Respondents were asked two questions relating to the impact of KTS on work practices. These questions relate to the impact of KTS overall on respondents' abilities and work practices and the importance of specific components of KTS on changes to mandatory reporters' work practices.

##### *Impact of KTS overall on respondents' abilities and work practices*

The first question asked respondents *To what extent has Keep Them Safe had a positive impact on the following:*

1. *My ability to identify children and young people at risk of significant harm (that is, cases which require a Child Protection Report)?*
2. *My ability to make appropriate referrals?*
3. *My ability to support vulnerable children, young people and their families using case management?*

4. *The level of information sharing between my organisation and other organisations about vulnerable children, young people and their families?*
5. *The effectiveness of collaboration between my organisation and other organisations in delivering services to vulnerable children, young people and their families?*
6. *Increased cultural appropriateness of programs / services?*

Overall, around one-third of respondents provided positive results – selecting ‘Extremely positive impact’, or ‘Very positive impact’ across each of the domains listed above. Around one-quarter of all respondents selected ‘Somewhat positive impact’ - and this was the most commonly selected option across all domains. This suggests that, overall, respondents think KTS has had some positive impact on the domains.

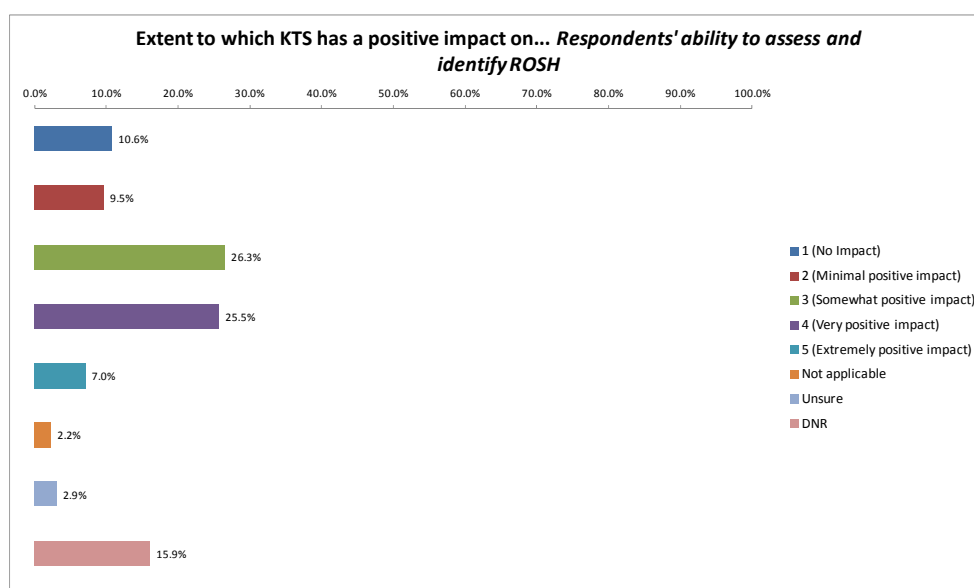
Across most of the domains, responses from the Community Services and Disability Services sectors were more positive, and responses from Police were less positive. The reasons behind these sectoral impacts are discussed further below, and in section 5. In addition, slightly more respondents from government organisations, and fewer from NGOs provided positive ratings compared to the proportions within the sample frame.

The responses to some of these domains have been discussed previously under results relating to both Part 1 and Part 2 of the survey. The figures below provide an overview of responses to this question. Tables 80-84 in Appendix B present detailed responses to each domain, by sector.

***My ability to identify children and young people at risk of significant harm (that is, cases which require a Child Protection Report)***

This domain was discussed previously in Section 4.1 under the heading *Impacts of the new reporting threshold*. As previously noted, it appears KTS has had a positive impact on respondents’ ability to identify ROSH, as the figure below shows (however the relatively high proportion of respondents selecting ‘No impact’ or ‘Minimal positive impact’ is somewhat inconsistent with the investment in training and resources around the new reporting threshold).<sup>62</sup>

*Figure 14: To what extent has Keep Them Safe had a positive impact on the following – my ability to assess and identify ROSH?*



Source: KPMG based on analysis of KTS Workforce Survey data

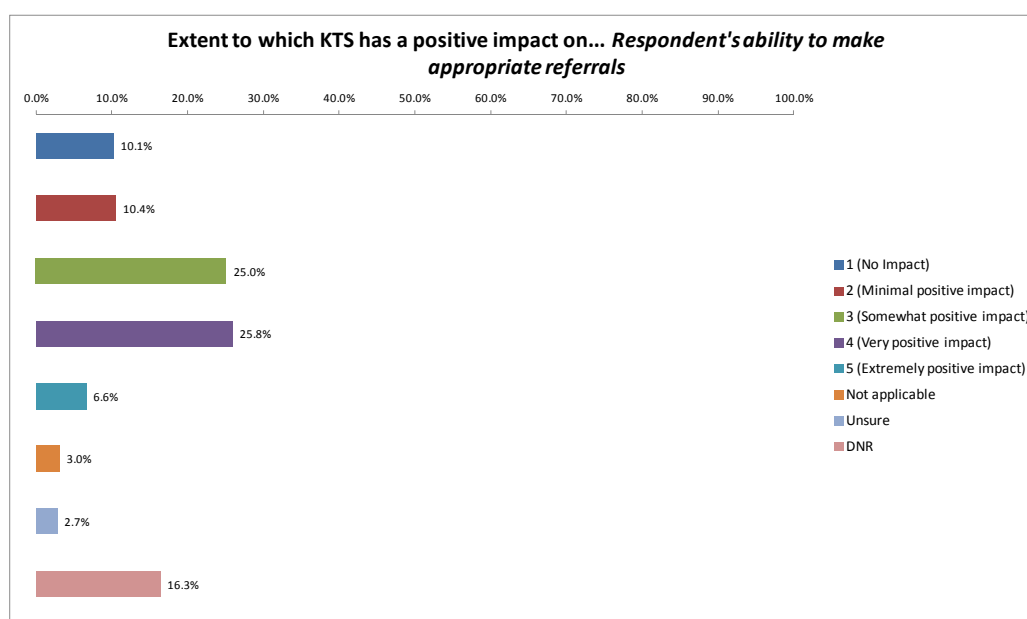
<sup>62</sup> Based on information collected through stakeholder consultations.

The highest proportion of respondents selected ‘Somewhat positive impact’ about this domain, closely followed by ‘Very positive impact’. This aligns with responses showing that 69.3 percent of respondents indicated the MRG was either ‘Helpful’ or ‘Very helpful’ in assessing ROSH, and 70.6 percent stating the same for deciding whether to make a Child Protection Report(see Figure 1). For both of these questions, the highest levels of agreement were from the Education sector and the lowest levels were from the Police sector.

### ***My ability to make appropriate referrals***

A higher proportion of respondents selected ‘Very positive impact’ about this domain than any other response option. This suggests that KTS is positively contributing to linking families to services.

*Figure 15: To what extent has Keep Them Safe had a positive impact on the following – my ability to make appropriate referrals?*



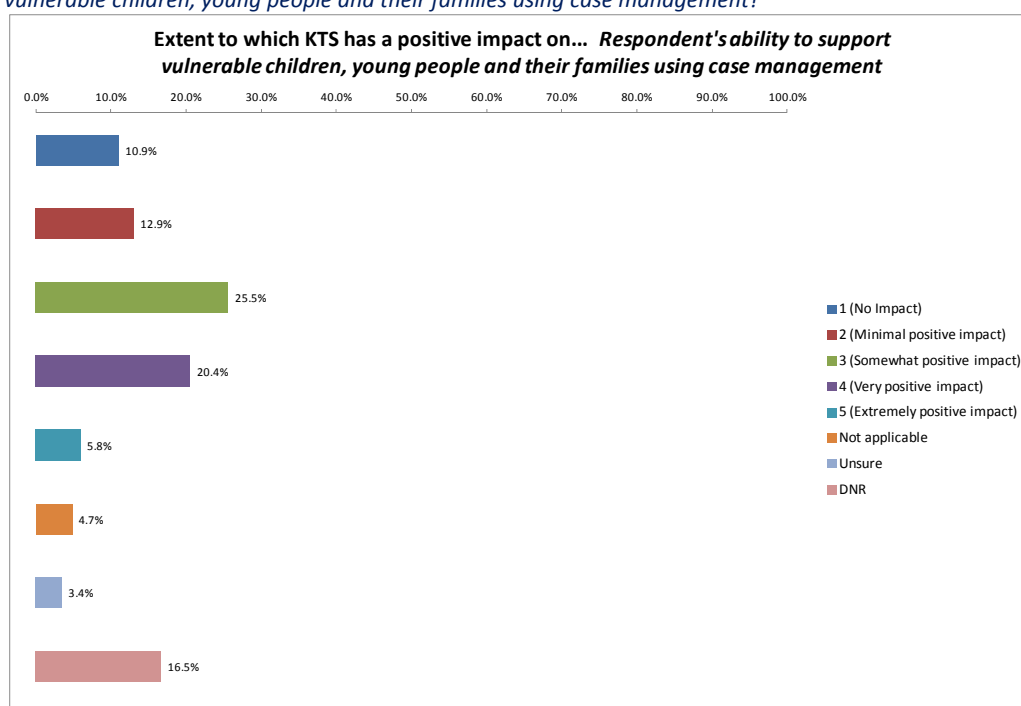
*Source: KPMG based on analysis of KTS Workforce Survey data*

This positive results was consistent across the sectors, with the highest response of all ten groups being either ‘Very positive’ (eight sector groups) or ‘Somewhat positive’ (Health and Justice services). Within this Disability Services had the highest response for ‘Very positive’ (35.3 percent), and the Police sector responded the least positively to this domain, with the highest responses to ‘No impact’ (18.6 percent) and ‘Minimal impact’ (14 percent) - consistent with the generally positive results from Disability Services respondents, and less positive results from Police overall. The small proportion of response rates to ‘No impact’ (10.1 percent), ‘Minimal positive impact’ (10.4 percent) and ‘Extremely positive impact’ (6.6 percent), were in line with the previous and next domains.

### ***My ability to support vulnerable children, young people and their families using case management***

As Figure 16 shows, these results are somewhat similar to the domain above but slightly less positive overall. More respondents selected ‘Somewhat positive impact’ about this domain than any other response option, however quite a high number of respondents selected the less positive options: ‘Minimal positive impact’ and ‘No impact’. This suggests KTS has had less of a positive impact on respondents’ ability to support vulnerable children, young people and their families using case management than it has on their ability to make appropriate referrals.

Figure 16: To what extent has Keep Them Safe had a positive impact on the following – my ability to support vulnerable children, young people and their families using case management?



Source: KPMG based on analysis of KTS Workforce Survey data

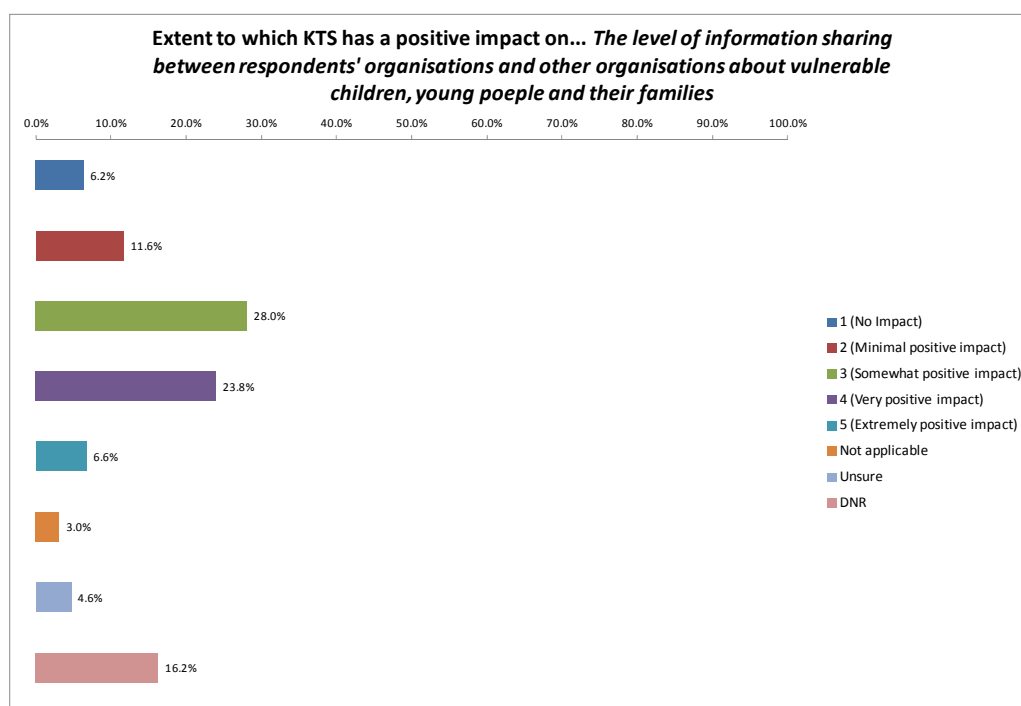
Again these results were consistent across the sectors, with highest response of all ten groups being either 'Somewhat positive' (seven sector groups) or 'Very positive' (Community Services; Police; and Other), suggesting this is an area of uniformly positive impact across the mandatory reporter population. Disability Services respondents again provided the most positive responses and Police had the highest proportion of 'No impact' responses. This result may reflect that for Police (and other respondents from sectors such as Education and Health), case management is not part of their primary or core role.

Based on the similarity in responses across the first of the three domains (including when considering responses by sector), it appears these three domains were considered in largely similar ways by respondents i.e., the ability to identify children at ROSH equates with the ability to make appropriate referrals, and to support vulnerable children.

#### ***The level of information sharing between my organisation and other organisations about vulnerable children, young people and their families***

To this domain, a higher proportion of respondents selected 'Somewhat positive impact' than 'Very positive impact'. However, fewer or similar numbers of responses of 'Minimal positive impact' were provided for this domain than other domains, as Figure 17 shows. This suggests positivity overall about the impact of KTS on the level of information sharing.

Figure 17: To what extent has Keep Them Safe had a positive impact on the following – The level of information sharing between my organisation and other organisations about vulnerable children, young people and their families??



Source: KPMG based on analysis of KTS Workforce Survey data

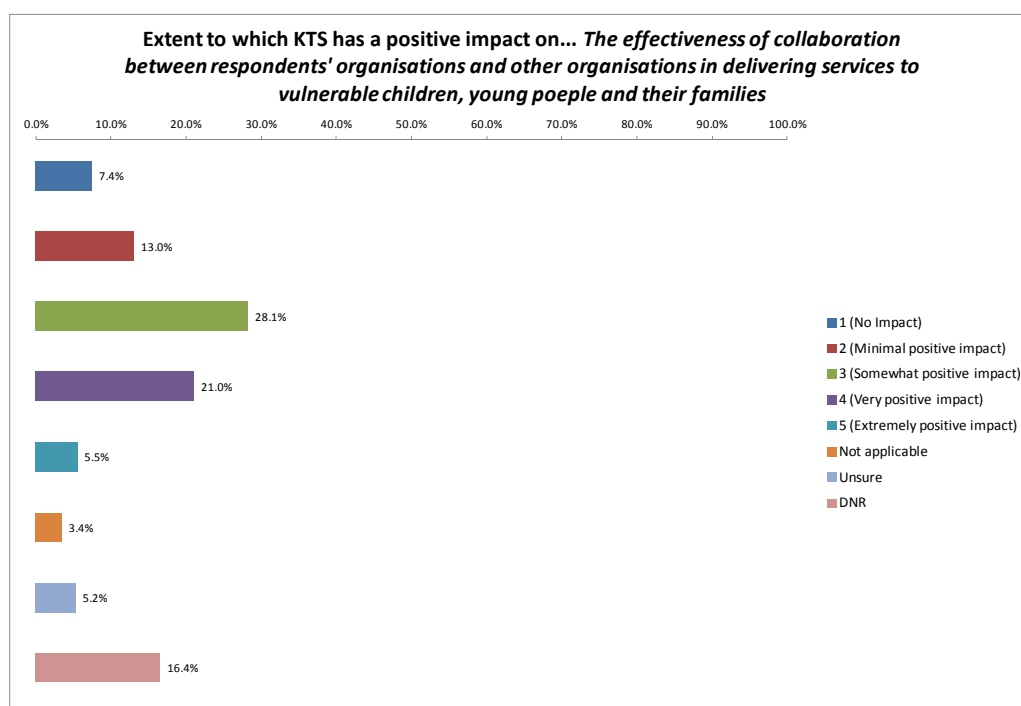
Community Services and Disability Services respondents were more positive than other sectors - the highest response rate across Community and Disability sectors was 'Very positive impact' (as it was for Early Education and Care), and for the other seven groups it was 'Somewhat positive impact'.

The results to this domain are consistent with the results discussed previously, that showed respondents' awareness of the 16A legislation appears to have facilitated information sharing (Figure 6); there were high levels of comfort in sharing information (Figure 8); and increases to the levels of information between many organisations have occurred (Figure 9 and Figure 10) – with consistently positive results from Community Services and Disability respondents across the questions. Although there was a common attitude amongst many respondents that there are no barriers to information sharing, the above result may be influenced by the fact that, for a number of respondents, there is a perception that other organisations have not been willing to share information, and that barriers exist relating to client confidentiality and consent.

#### ***The effectiveness of collaboration between my organisation and other organisations in delivering services to vulnerable children, young people and their families***

Similar to the results for domain 4 – information sharing - more respondents selected 'Somewhat positive impact' than 'Very positive impact' and moderate numbers of respondents selected 'Minimal positive impact', as Figure 18 shows, suggesting overall positivity.

Figure 18: To what extent has Keep Them Safe had a positive impact on the following – the effectiveness of collaboration between my organisation and other organisations in delivering services to vulnerable children, young people and their families?



Source: KPMG based on analysis of KTS Workforce Survey data

Again, Community Services respondents provided more positive results than other sectors, whereas Police rated highest for 'No impact' (15.5 percent) and Education Services were highest for 'Minimal positive impact' (20.2 percent). This is consistent with the results from Table 33 and 34, as discussed previously, that showed high levels of collaboration and partnerships across the Community Services, Disability and Housing sectors. These results may be consistent with the type of work undertaken by Community Services around collaboration and service delivery; and the potentially greater impact KTS has had in this area than in other areas such as Police.

### **Increased cultural appropriateness of programs / services**

This domain, previously discussed in section 4.6 Meeting the needs of Aboriginal children, young people and their families indicates that more respondents selected 'Somewhat positive impact' than any other option, however more respondents selected response options on the lower end of the scale (i.e. 'No impact' 'Minimal positive impact') than on the higher end of the scale ('Very positive impact' and 'Extremely positive impact'). This suggests that only some respondents believe changes have occurred in this area, and there may still be some work to do. This is consistent with section 4.6 which, as noted previously, showed that around half of all respondents said their organisation has *not* made changes to the way the work with Aboriginal people, and a very high proportion of respondents either did not respond (40.4 percent), or neither agreed or disagreed (24.6 percent) with *As a result of these activities, my organisation is able to better meet the needs of Aboriginal children, young people and their families within my organisation's target group/area?* (see Table 43).

### **Overall themes**

As noted above, overall, relating to this question specific sector effects include:

- Disability sector staff tended to provide more positive responses across the majority of domains, consistent with the sector's positive responses to questions on information sharing and collaboration;
- Community Services sector staff also had generally positive responses across all domains, with particularly positive responses to domains 3, 4 and 5 – suggesting a high level of collaboration within this sector, again consistent with the sector's positive responses to questions on information sharing and collaboration; and
- Police staff tended to provide less positive responses, particularly relating to domains 1, 2 and 5. The exception is domain 3, where a high proportion of responses from Police were to 'Very positive'.

### *Importance of specific components of KTS on work practices.*

The second question relating to the impact of KTS on work practices asked respondents *How important have the following strategies been in changing your work practices:*

1. *Increasing the threshold for reporting 'risk of harm', to 'risk of significant harm'?*
2. *The Mandatory Reporter Guide?*
3. *Child Wellbeing Units?*
4. *Family Referral Services?*
5. *Increasing the role of non-government organisations?*
6. *Being supported / encouraged to work in different ways with Aboriginal children, young people and their families?*
7. *Being supported / encouraged to work more collaboratively?*
8. *Legislative changes?*
9. *Enhanced service provision?*

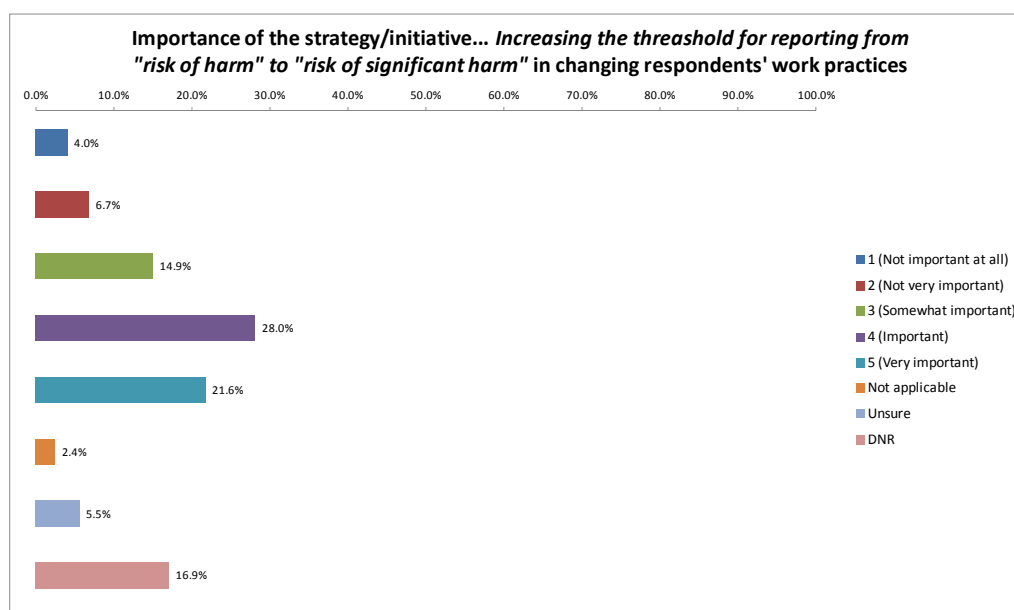
The majority of respondents selected either 'Important' or 'Very important' to each of these domains (generally between 40-50 percent of respondents) suggesting many respondents thought the strategies identified have been generally important. However, there was less consistency across domains in allocation of the remaining responses across the scales as the below figures show.

The responses to some of these domains have been discussed previously under results relating to both Part 1 and Part 2 of the survey. As such, summary detail (including data for each domain) is presented below. More detailed data tables are provided in Appendix B (see Table 86-94).

### ***Increasing the threshold for reporting 'risk of harm', to 'risk of significant harm'***

As discussed in Section 4.1 Use of the Mandatory Reporter Guide, most respondents selected 'Somewhat positive impact' or 'Very positive impact' to this domain than other response options, suggesting KTS has had a positive impact on changing work practices around assessing and identifying ROSH for many respondents. Disability responses ranked highest for the sum of 'Important' and 'Very important' followed by Community Services.

Figure 19: How important have the following strategies been in changing your work practices? – increasing the threshold to ROSH



Source: KPMG based on analysis of KTS Workforce Survey data

These results are consistent with the responses to the question *How helpful is the Guide in assessing and identifying ROSH?* (see Figure 1), that showed positive responses from the Disability and Community Services sectors.

A total of 10.7 percent of respondents rated this domain as either 'Not Important' (4 percent) or 'Not very important' (6.7 percent). Justice ranked highest for the sum of these responses (a total of 16.8 percent), followed by Education Services (14.6 percent).

Overall, these responses suggest that the change to threshold reporting has been a significant strategy across most sectors.

### **The Mandatory Reporter Guide**

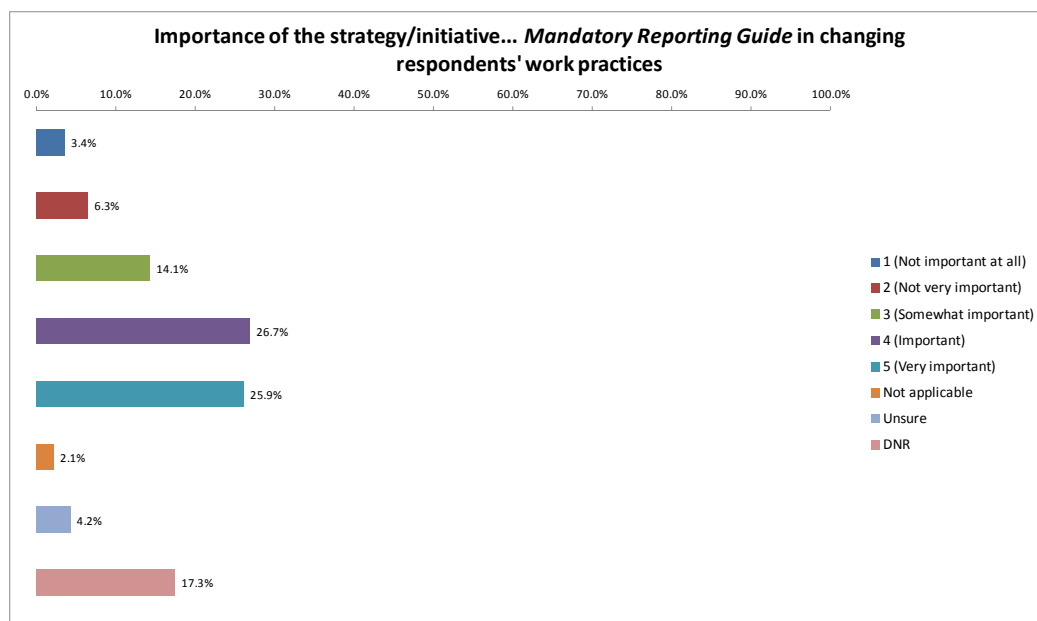
Also as discussed in Section 4.1, around half of all respondent rated the importance of the MRG on their workplace practices as either 'Important' or 'Very Important'. This is consistent with the strong use of the MRG amongst respondents; and as illustrated previously in Figure 1, that the majority of responses indicated that they thought the MRG was 'Helpful' or 'Very helpful' for each of the three domains (assessing and identifying ROSH; deciding whether to make a Report; and determining next steps).

The responses to this domain were more evenly divided across the sector groups than the previous question, however:

- Disability Services ranked highest for the sum of 'Important' and 'Very important' (a total of 71 percent), followed by Early Education and Care (63.6 percent) and Education (61 percent); and
- Police ranked highest for the sum of 'Not important' and 'Not very important' (a total of 15.5 percent), followed by Health (a total of 12.2 percent) and Community Services (12.1 percent).

These results suggest that the MRG has had a significant impact on the mandatory reporter population across sectors, particularly the Disability sector. This is consistent with the previous domain.

Figure 20: How important have the following strategies been in changing your work practices? – the MRG



Source: KPMG based on analysis of KTS Workforce Survey data

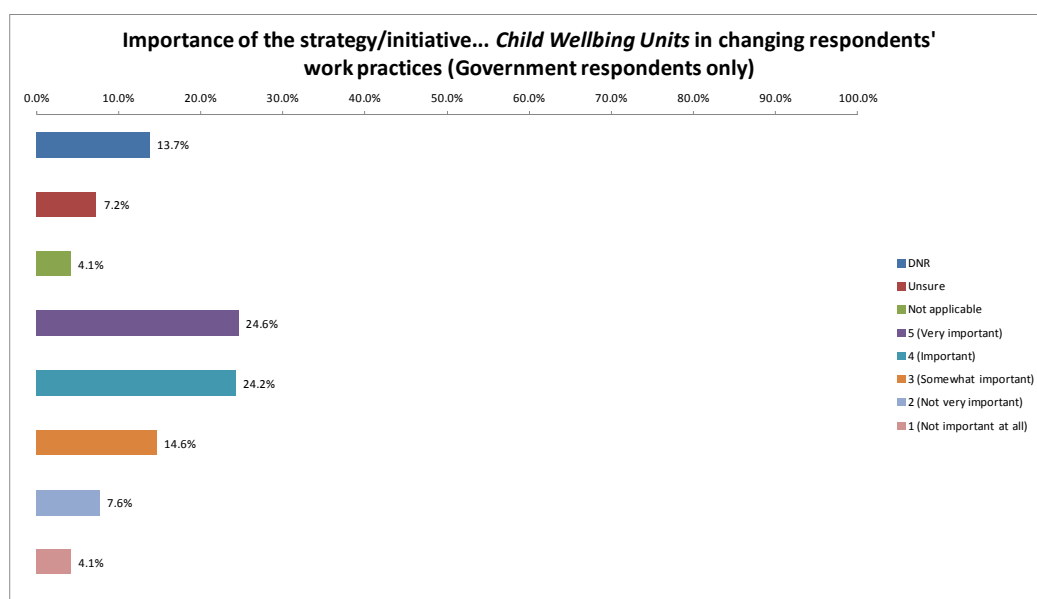
Again, Disability ranked highest for the sum of 'Important' and 'Very important' followed by Early Education and Care and Education.

### Child Wellbeing Units

The results for this domain include government respondents only.

This domain is also discussed in section 4.2 Child Wellbeing Units. As noted, around half of all government respondents rated CWUs as being either 'Important' or 'Very Important' in changing their workplace practices, as the following figure shows

Figure 21: How important have the following strategies and initiatives been in changing your work practices – CWUs?



Source: KPMG based on analysis of KTS Workforce Survey data

The most negative responses to this question came from the Early Education and Care and Police sectors (i.e. the highest proportion of respondents selected 'Not at all important'), and

around 13 percent of respondents did not respond to this question, with high proportions of Justice and Housing staff (as well as moderately high proportions of Health staff) not responding – consistent with other questions about CWUs (Q4.2 and 4.3).

### **Family Referral Services**

*The results for this domain consider respondents in areas where FRSs are operating only.*

Responses to this domain were fairly evenly spread across the response scales from ‘Not important at all’ to ‘Very important’ as the table below shows.

*Table 44: How important have the following strategies and initiatives been in changing your work practices – FRSs? FRS regions only*

| Q8.3 How important has FRS been in changing your work practices? FRS regions only |                          |                        |                        |               |                    |                |              |              |
|---|--------------------------|------------------------|------------------------|---------------|--------------------|----------------|--------------|--------------|
| FRS   | 1 (Not important at all) | 2 (Not very important) | 3 (Somewhat important) | 4 (Important) | 5 (Very important) | Not applicable | Unsure       | DNR          |
| Hunter Central Coast FRS  | 5.7%                     | 8.8%                   | 16.7%                  | 21.5%         | 13.9%              | 6.6%           | 13.4%        | 13.4%        |
| Illawarra FRS   | 8.5%                     | 10.3%                  | 15.8%                  | 15.5%         | 15.5%              | 7.5%           | 14.8%        | 12.3%        |
| Mt Druitt FRS   | 6.5%                     | 14.6%                  | 14.6%                  | 20.6%         | 19.1%              | 4.5%           | 10.1%        | 10.1%        |
| New England FRS   | 5.4%                     | 6.5%                   | 20.8%                  | 20.2%         | 22.6%              | 6.0%           | 10.1%        | 8.3%         |
| Western FRS   | 7.9%                     | 5.4%                   | 16.2%                  | 22.3%         | 19.4%              | 5.0%           | 10.4%        | 13.3%        |
| <b>Total</b>  | <b>6.8%</b>              | <b>9.0%</b>            | <b>16.6%</b>           | <b>20.0%</b>  | <b>16.6%</b>       | <b>6.2%</b>    | <b>12.5%</b> | <b>12.3%</b> |

*Source: KPMG based on analysis of KTS Workforce Survey data*

Respondents from regions with older FRSs provided more positive responses to this domain, with 53.9 percent selecting the top three response options (‘Somewhat important’, ‘Important’ or ‘very important’) compared to 41.8 percent of respondents in regions with newer FRSs. This is inconsistent with other results (discussed in section 4.5) that showed higher ratings of effectiveness amongst respondents from regions with newer FRSs. These results suggest that:

- older FRSs may have had more of an impact on changing respondents work practices; but
- newer FRSs are considered more effective in undertaking their core tasks.

These results may warrant further exploration.

Around a quarter of respondents selected ‘Unsure’ or did not respond to this question, which, considering these respondents are from regions in which FRSs are operating, is quite high. This suggests that a large proportion of respondents are unable to comment on FRSs, perhaps because they do not know about FRSs or have not accessed one. This is consistent with responses to the question *Have you contacted the FRS?* To which almost half of respondents from FRS regions did not respond. Table 134 in Appendix B presents results by FRS region.

### **Increasing the role of non-government organisations**

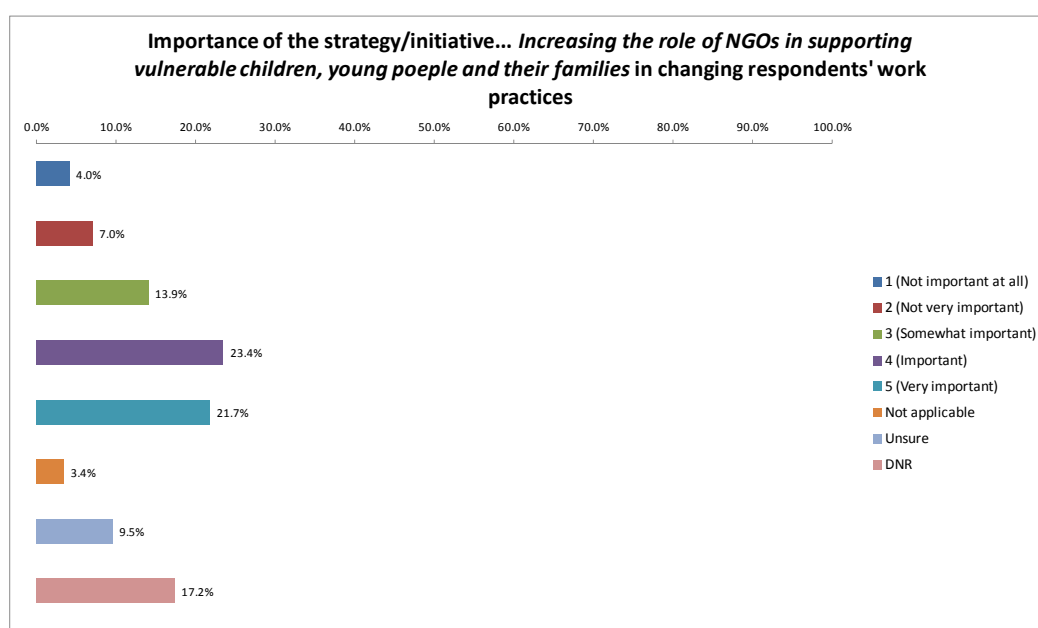
As Figure 22 shows, almost half of all respondents see increasing the role of NGOs as being either ‘Important’ or ‘Very important’. As the data by sector in Appendix B shows (see Table 89), these were the highest responses for all 10 sector groups.

Community services ranked highest for the sum of these (a total of 62.7 percent), which is consistent with the sector having high NGO representation in respondent populations, as well as reporting the highest number of NGO organisational partners; with 28.6 percent of respondents selecting more than 5.

The Education sector ranked highest for the sum of 'Not important' and 'Not very important' (a total of 19.9 percent), followed by Police (17.8 percent). This is consistent with these sectors having lower NGO representation, as well as low number of reported NGO partners (4.2 percent of Education and 9.3 percent of Police reporting more than 5). This may be due to the limited interaction these sectors have with NGOs in the context of KTS.

Additionally, regions with a higher proportion of NGO respondents, such as the Metro South West FaCS region, also provided more positive responses to this domain.

*Figure 22: How important have the following strategies been in changing your work practices? – Increasing the role of NGOs*

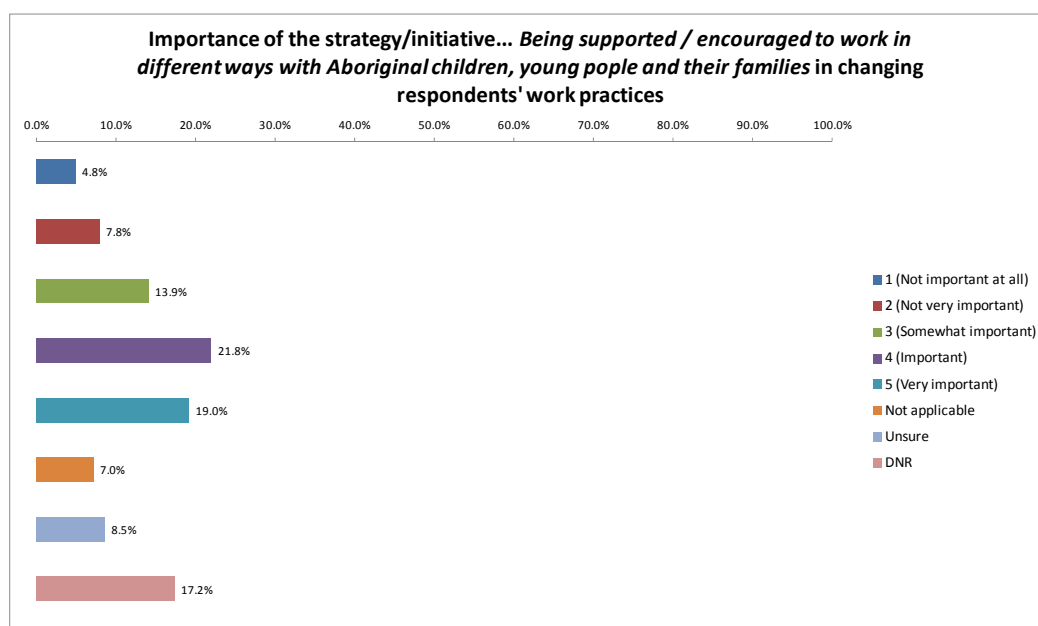


*Source: KPMG based on analysis of KTS Workforce Survey data*

### ***Being supported/encouraged to work in different ways with Aboriginal children, young people and their families***

Around 40 percent of all respondents rated being encouraged or supported to work in different ways with Aboriginal people as important in changing their work practices, as Figure 23 shows.

Figure 23: How important have the following strategies been in changing your work practices? – Being encouraged to work in different ways with Aboriginal children, young people and their families



Source: KPMG based on analysis of KTS Workforce Survey data

As with the previous question, these were the highest responses for all ten sector groups ('Important' – three groups; 'Very important' – seven groups).

Again like the previous question, Community Services ranked highest for the sum of 'Important' and 'Very important' (a total of 56.4 percent) followed by Disability (53.6 percent), and Police ranked highest for the sum of 'Not important' and 'Not very important' (a total of 18.6 percent), followed by Education Services (17.8 percent). This is consistent with the responses to previous questions around better meeting the needs of Aboriginal children and families, and the increased cultural appropriateness of services that showed less positive responses from the Police sector.

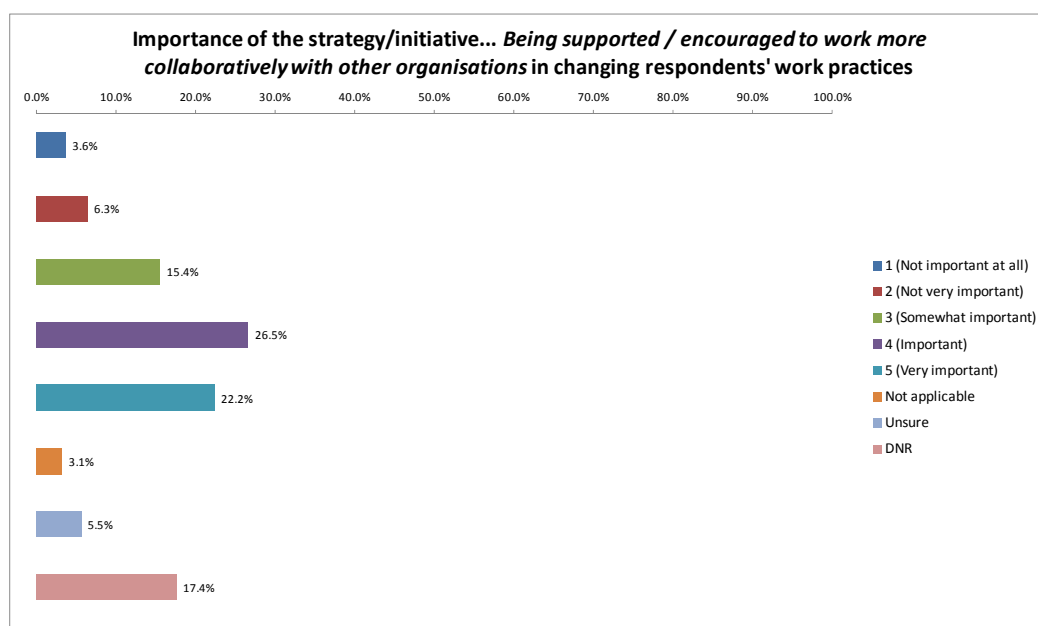
Most responses about this domain fell on the higher end of the response scale suggesting respondents found being supported to work in different ways with Aboriginal clients, important.

#### ***Being supported / encouraged to work more collaboratively***

Again, most responses about this domain fell on the higher end of the response scale, however notably, all 10 sector groups ranked above 42 percent for the sum of the two most positive responses ('Important' and 'Very important'), which is higher than the previous two domains which have otherwise shown similar results.

This indicates a high level of agreement on this strategy, consistent with responses to previous questions that show that attitudinal factors and organisational support/encouragement have most significantly facilitated information sharing since the commencement of KTS, (see Figure 6 to Figure 8), and collaboration (see Figure 11 and Table 33 to 35.)

Figure 24: How important have the following strategies been in changing your work practices? – Being encouraged to work more collaboratively



Source: KPMG based on analysis of KTS Workforce Survey data

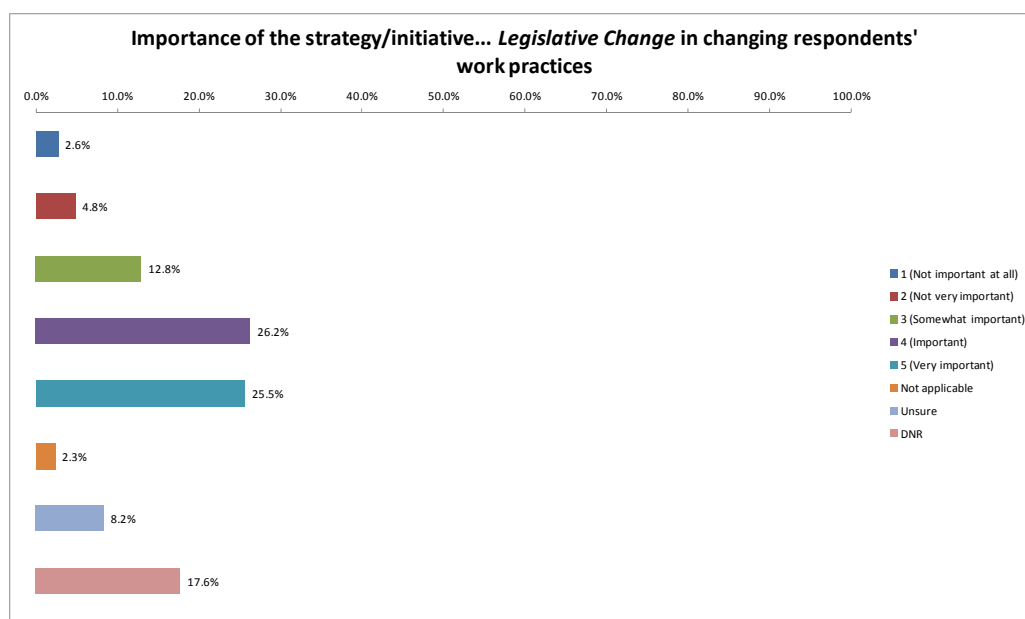
Again like the previous question, Community services ranked highest for the sum of 'Important' and 'Very important' (a total of 66.2 percent), followed by Health Services (57.9 percent). Education ranked highest for the sum of 'Not important' and 'Not very important' (a total of 16.9 percent), followed by Police (14.7 percent).

The relatively low numbers of negative responses are consistent with the results of Figure 7 and Figure 11, which show that the vast majority of respondents indicated there is nothing preventing them from sharing information or collaborating.

### Legislative changes

Responses about this domain were again largely positive, with high proportions of respondents selecting 'Important' or 'Very important'. This is consistent with the strongly supported response that 'There are no barriers' to information sharing and coordination – the two key areas of legislative change under KTS.

Figure 25: How important have the following strategies been in changing your work practices? – Legislative changes



Source: KPMG based on analysis of KTS Workforce Survey data

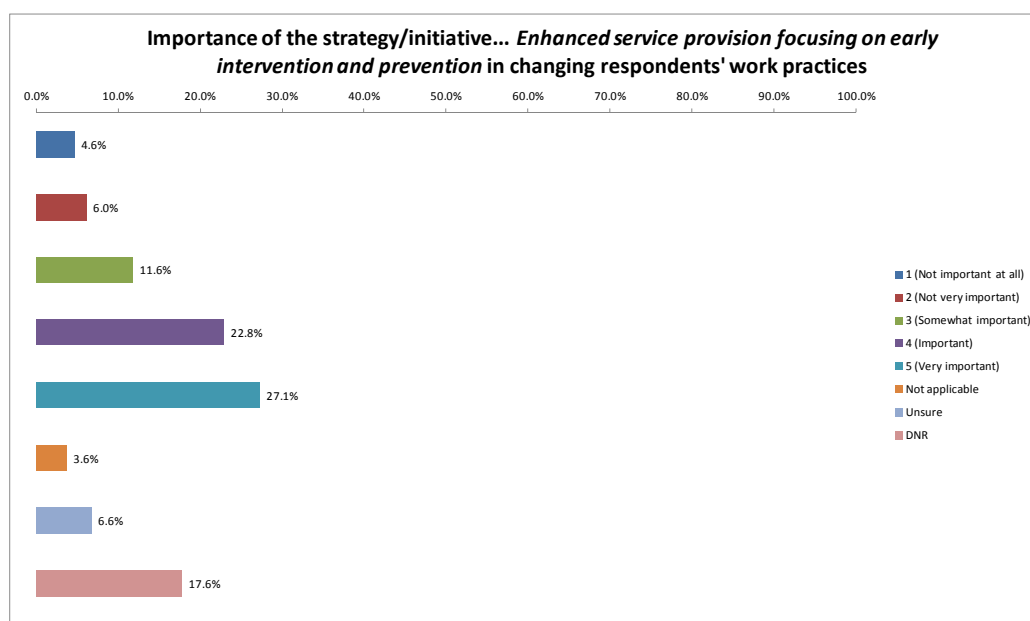
Again like the previous question, Community services ranked highest for the sum of 'Important' and 'Very important' (a total of 65.6 percent), followed by Disability Services (64.4 percent). This was consistent with the highest levels of awareness of 16A legislation for both information sharing and coordination coming from these two sectors (see Table 30 and Table 32).

The lowest level of agreement was within the Justice sector (38.3 percent), which was consistent with relatively low levels of reported awareness of the provisions of the 16A legislation as shown in the same tables. This was followed by Health services (46.4 percent) and Police (49.6 percent).

#### **Enhanced service provision focusing on early intervention and prevention**

Around half of all respondents rated enhanced service provision as 'Important' or 'Very important' to changing their work practices. Notably, all ten sector groups ranked above 43 percent for the sum of these two responses - which similarly to the domain on being supported to work collaboratively, is higher than the other domains in this group that have shown similar results. This indicates a high level of positive feedback on this strategy.

Figure 26: How important have the following strategies been in changing your work practices? – Enhanced service provision



Source: KPMG based on analysis of KTS Workforce Survey data

Again, More Disability and Community Services sector respondents provided higher ratings of importance, as the data by sector in Appendix B shows (see Table 94). Education ranked highest for the sum of ‘Not important’ and ‘Not very important’ (a total of 18.7 percent), followed by Police (12.4 percent).

Further enquiry into enhanced service provision may be warranted through the Location Based Evaluation as this was the only survey question explicitly relating to enhanced service provision.

### Overall themes

Overall relating to this question, respondents from the Disability and Community Services sectors again provided the most positive responses overall. In addition, metropolitan FaCS regions provided a more positive rating across the domains. Within this, the Metro South West and Metro West FaCS region respondents provided more positive ratings than did the Metro Central respondents. Given the higher SES of the Metro Central region, these results may suggest that KTS has had more of a positive impact in areas with a lower SES.

Responses from the non-metropolitan FaCS regions were less positive overall, with more respondents selecting ‘Important’ than ‘Very important’ across the domains. This may suggest that these elements of KTS have had less of a positive impact in non-metropolitan FaCS areas. This is inconsistent with some of the other survey results that suggest higher levels of information sharing and collaboration in these non-metropolitan regions.

### Mandatory reporter attitudes and beliefs

The survey responses suggest that mandatory reporters *do* believe that responding to child protection concerns is a shared responsibility – one of the cornerstones of KTS.

In response to the question *I believe that responding to child protection concerns is a shared responsibility* - half of all responses indicated ‘Strongly agree’ with all 10 sector groups ranking this as their highest response, as the data by sector (see Table 85 in Appendix B) shows.

The second highest response to this question was ‘Agree’ (22.4 percent); however the third highest was ‘Did not respond’ (20.7 percent). This is a significant proportion of all respondents

who did not provide a response, as well as representing a significant proportion of each sector with rates of non response ranging from 10.6 percent ( Education) up to over 20 percent (26.2 percent Justice; and 23.9 percent Early Education and Care).

Slightly more respondents from the government, and fewer from NGOs, generally agreed with this statement as compared to the proportions within the sample frame. This may suggest greater adoption of the ‘shared responsibility’ message of KTS amongst the government sector. The differences between staff members’ and managers’ responses to this question were minimal.

Thematic analysis of responses to the final survey question: *Is there anything else you would like to add?* shows that, despite these positive results, some respondents feel that a lack of shared responsibility remains amongst mandatory reporters.

## 4.8 Ability to meet the needs of children, young people and their families - *Do new systems effectively link families to services?*

### Main findings relating to this question

- Respondents indicated KTS has had a somewhat positive impact on their ability to meet the needs of children, young people and families, including linking families to services through making referrals, and earlier and more appropriate provision of services to families.
- Around 50 percent of respondents thought KTS has a positive impact on meeting the needs of children, young people and their families
- The less positive nature of responses overall, compared to the results reported in the previous section, suggest KTS has had more impact on staff work practices and workforce culture than it has on outcomes for children, young people and their families.

This sub-section asked respondents to reflect on the impacts of KTS on meeting the needs of children, young people and their families. This sub-section relates to the Interim Review question *Do new systems effectively link families to services?* The key area of investigation relating to this Interim Review question is the impacts of *Keep Them Safe* on meeting the needs of children and their families.

Respondents were again asked two questions relating to the impact of KTS on meeting the needs of children, young people and their families. These questions related to: the impact of KTS on respondents’ abilities to undertake tasks to meet the needs of children, young people and families (such as referrals, access to services); and the extent to which KTS overall has supported the outcome ‘the needs of children, young people and their families are met’.

### *Impact of KTS on respondents’ abilities to undertake tasks to meet the needs of children, young people and their families*

The first question was *Thinking about the changes in services and practice that have occurred over the past 2 years, what impact has Keep Them Safe had on:*

1. *Your ability to make more timely referrals?*
2. *Your ability to make more appropriate referrals?*
3. *Increased access to appropriate programs / services by vulnerable children, young people and their families?*
4. *Earlier provision of services to vulnerable children, young people and their families?*
5. *Increased cultural appropriateness of programs / services?*

More respondents selected ‘Somewhat positive impact’ (around 22-24 percent) than any other response option across all domains. Overall, around one-quarter of respondents selected the most positive response options ‘Very positive impact’ and ‘Extremely positive impact’. This is lower than the proportions of respondents providing positive results (i.e. total selecting the two highest options on the response scale) for the questions about staff work practices and workforce culture, to which around one-third to one-half of all respondents provided positive results. This suggests that KTS has had more impact on staff work practices and workforce culture than it has on outcomes for children, young people and families.

However, it is important to remember that KTS is relatively new (having been in place only since 2010), that the domains under this question reflect medium to long term outcomes that may take some time to achieve, and there are a range of factors external to KTS that may influence the achievement of these outcomes.

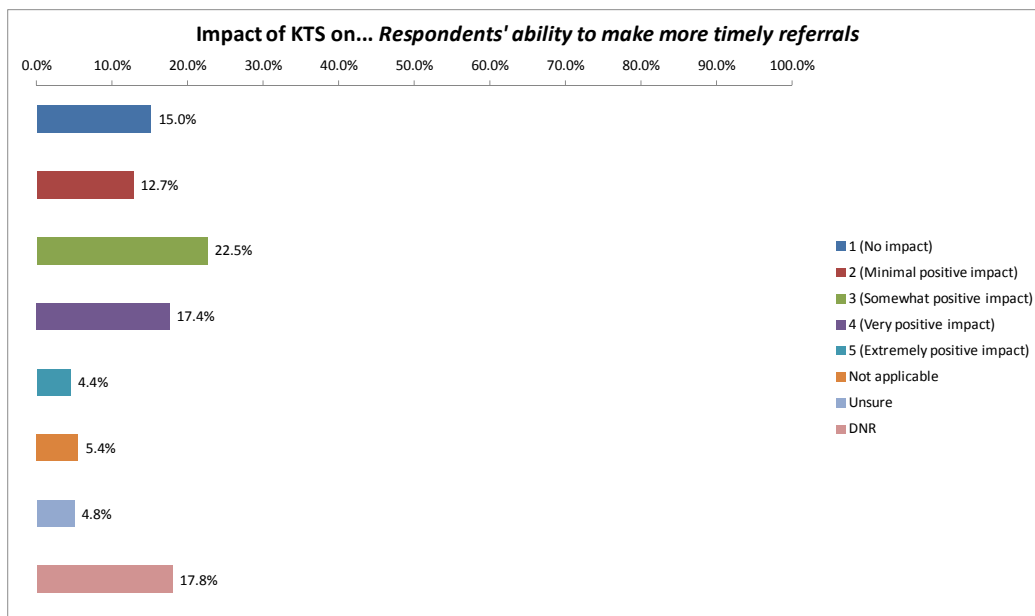
Detailed data relating to this question is contained in Tables 95-100 in Appendix B, including breakdown by sector.

### ***Your ability to make more timely referrals***

As Figure 27 shows, the highest response to this domain was ‘Somewhat positive impact’. This was the highest response for nine out of 10 sector groups. The second highest response was ‘Very positive impact’ followed by ‘No Impact’.

A higher proportion of respondents selected ‘No impact’ than across other domains and within this the highest responses were from Health (33.7 percent), followed by Education (24.5 percent) and Community Services (21.1 percent). This may indicate some mixed views about the impact of KTS in this area. Compared to some of the other impacts of KTS as outlined in questions above, its impact on the ability to make more timely referrals, at least for some sector groups, appears to have been less significant.

*Figure 27: Thinking about the changes in services and practice that have occurred over the past 2 years, what impact has Keep Them Safe had on – my ability to make more timely referrals?*



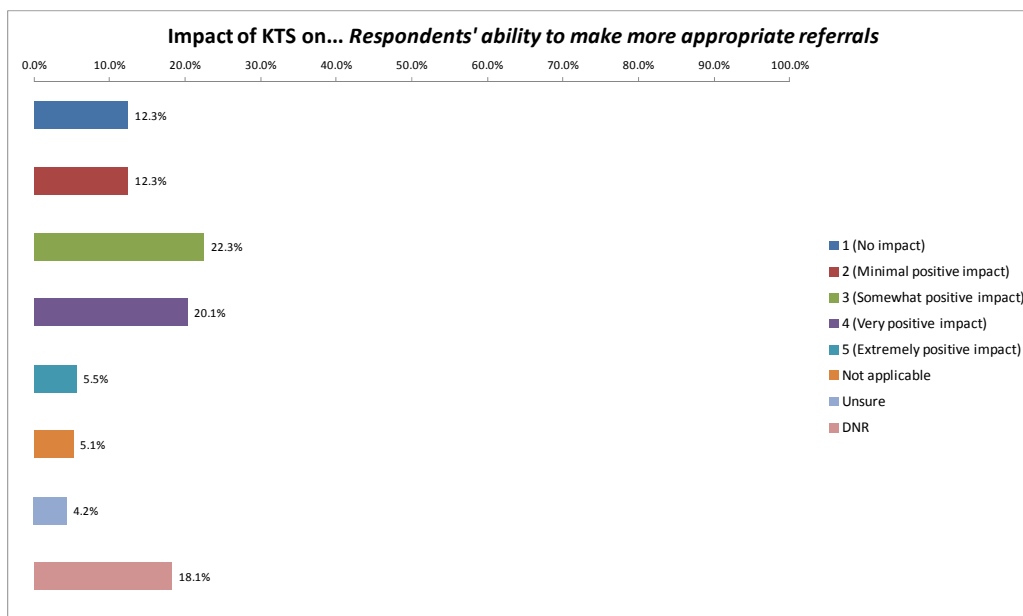
*Source: KPMG based on analysis of KTS Workforce Survey data*

### ***Your ability to make more appropriate referrals***

As Figure 28 shows, there were similar numbers of responses across the lower and higher ends of the response scale. This suggests some mixed views about the impact of KTS on respondents' ability to make appropriate referrals.

There were less negative responses to this domain compared to the previous question, with the highest responses within 'No impact' coming from Local Government (20 percent); Other (17.2 percent) and Community Services (15.5 percent).

*Figure 28: Thinking about the changes in services and practice that have occurred over the past 2 years, what impact has Keep Them Safe had on – my ability to make more appropriate referrals?*

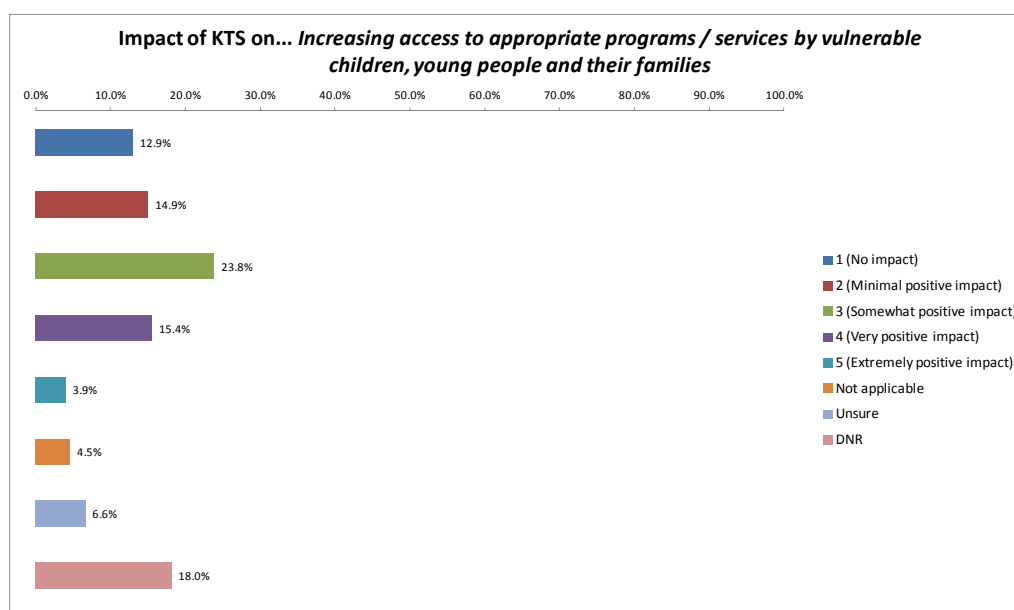


*Source: KPMG based on analysis of KTS Workforce Survey data*

### ***Increased access to appropriate programs / services by vulnerable children, young people and their families***

As Figure 29 shows, in responding to this domain, more respondents selected options at the lower end of the response scale than at the higher end. There was also a high proportion of 'Did not respond' - the highest being from Justice Services at 22.4 percent.

Figure 29: Thinking about the changes in services and practice that have occurred over the past 2 years, what impact has Keep Them Safe had on – increased access to programs / services by vulnerable children, young people and their families?



Source: KPMG based on analysis of KTS Workforce Survey data

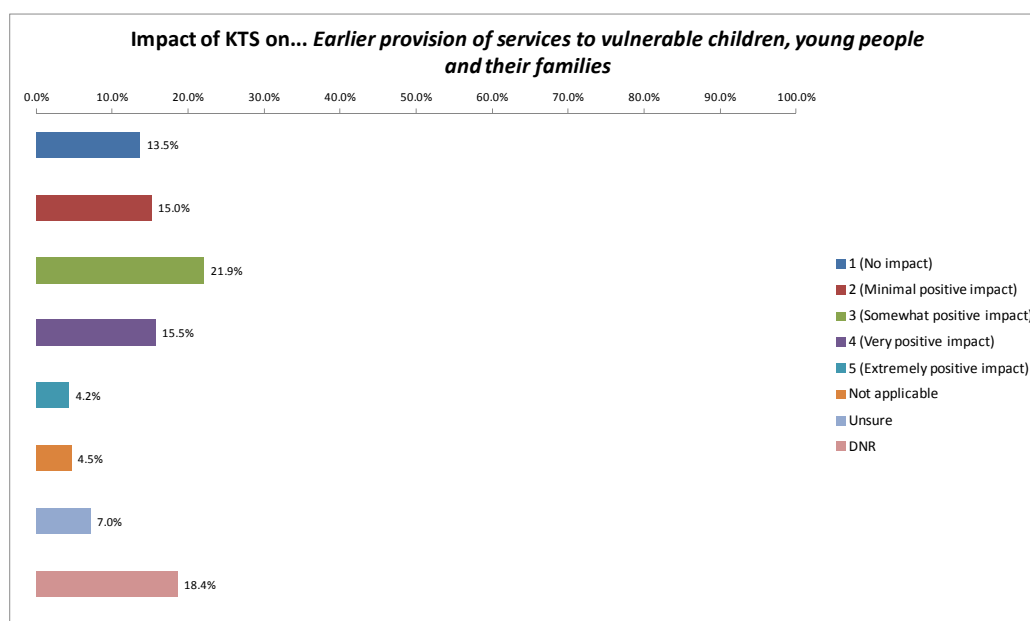
More respondents from the Early Education and Care and Education sectors selected 'Extremely positive impact' than other sectors. This is interesting given the greater emphasis for educators on linking children, young people and their families with other (non-education) services under KTS, and may suggest that changes in the way these respondents deal with vulnerable children, young people and families, are occurring. The survey results for other questions show strong engagement with some components of KTS by Education sector respondents that may have influenced this result, for example high levels of awareness of information sharing, and the increases in information sharing reported. Disability Services had the highest proportion of respondents selecting 'Somewhat positive,' at 31.5 percent.

These results suggests that overall respondents may think KTS has had less of a positive impact on increased access to programs than it has on timely referrals and more appropriate referrals.

#### **Earlier provision of services to vulnerable children, young people and their families**

Again, responses to this domain suggest that respondents think KTS has had less of a positive impact on earlier provision of services than on referrals, with more respondents selecting 'No impact' or 'minimal positive impact', than selecting 'Very positive impact' or 'Extremely positive impact'.

Figure 30: Thinking about the changes in services and practice that have occurred over the past 2 years, what impact has Keep Them Safe had on - Earlier provision of services to vulnerable children, young people and their families?



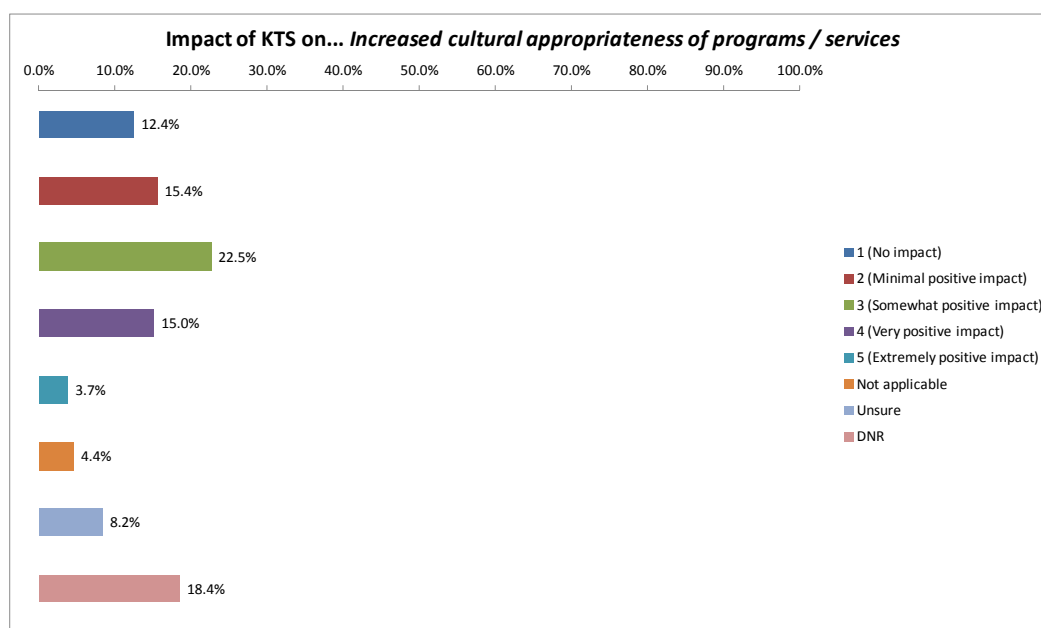
Source: KPMG based on analysis of KTS Workforce Survey data

Again, more respondents from the Early Education and Care and Education sectors favoured more positive responses to this domain, however Education Services represented the second highest proportion of 'No Impact' responses (19.9 percent). While this result could reflect the fact that Educational institutions may have more capacity to provide services (given they are in constant contact with children and young people), they may also be more attuned to the limited effects that KTS has had in this area to date.

#### **Increased cultural appropriateness of programs / services**

As Figure 31 shows, fewer respondents selected 'Extremely positive impact' for this domain than for the previous domains. More respondents also selected response options at the lower end of the response scale than at the higher end. These results suggest that only some respondents believe changes have occurred in this area, consistent with the fact that around 50 percent of respondents reported their organisation has not made changes to service provision to Aboriginal clients. Note, this question is also discussed in section 4.6.

Figure 31: Thinking about the changes in services and practice that have occurred over the past 2 years, what impact has Keep Them Safe had on – increased cultural appropriateness of programs / services



Source: KPMG based on analysis of KTS Workforce Survey data

### Overall themes

The results in relation to this question were overall, less positive than results relating to staff work practices and workforce culture (see section 4.7) suggesting KTS has had more impact on staff work practices and workforce culture than it has on outcomes for children, young people and their families. In terms of sectoral impacts, generally:

- responses from Early Education and Care respondents were more positive than other sectors; and
- responses from Disability and Community Services sector respondents were less positive in comparison to their very positive results to questions within other parts of the survey.

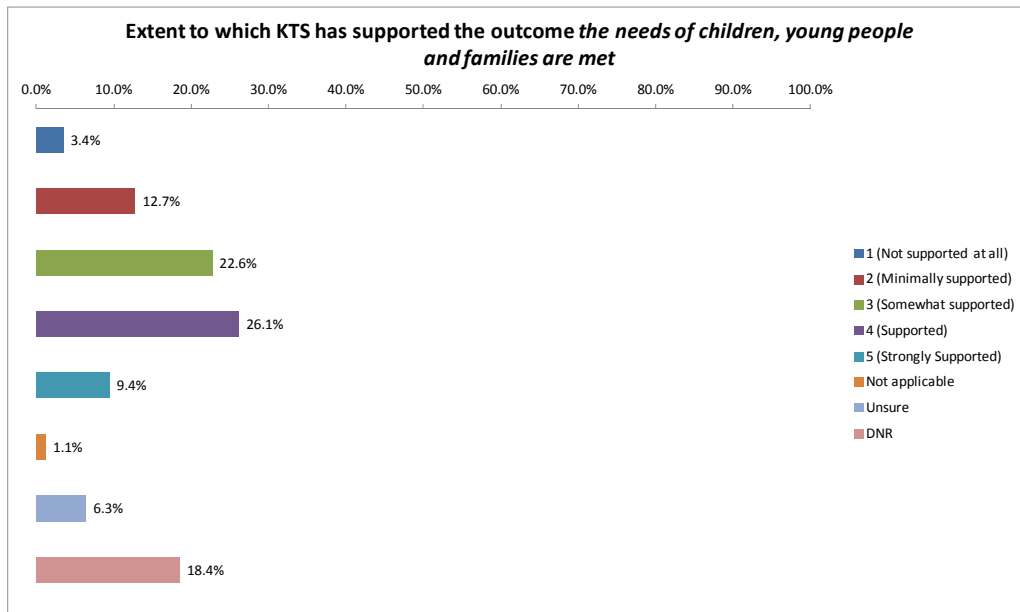
### Impact of KTS overall on the outcome 'the needs of children, young people and their families are met'

The second question respondents were asked relating to the impact of KTS on meeting the needs of children, young people and their families was *To what extent do you think Keep Them Safe has supported the outcome 'the needs of children, young people and families are met'?*

The most common responses to this question were 'Supported' and 'Somewhat supported' comprising almost 50 percent of responses. 'Supported' was the highest response for seven out of 10 sector groups. The exceptions were Health and Other sectors, whose highest responses were 'Somewhat supported', and Police whose responses to 'Supported' and 'Somewhat supported' were equally split. These slightly less positive results than overall are consistent with less positive results from these sectors throughout the survey.

Of the remaining responses, the majority were distributed across the lower response scales of 'Not at all supported' and 'minimally supported', as Figure 32 shows.

Figure 32: To what extent do you think Keep Them Safe has supported the outcome ‘the needs of children, young people and families are met’?



Source: KPMG based on analysis of KTS Workforce Survey data

This data suggests that, while respondents believe KTS has positively impacted the outcome ‘the needs of children, young people and families are met’, there is still some way to go. With the considerations previously raised about outcome achievement in mind, this could be interpreted as a positive result at this relatively early stage.

## 5 Overarching themes and areas for further enquiry

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This section provides a discussion of:

- overarching themes relevant to the impacts of KTS on different sectors and across different regions (with particular reference to the findings of the Spatial Mapping and Analysis);
- the progress of the different components of KTS; and
- other impacts commonly raised by respondents in answering the question *Is there anything else you would like to add?*

It also lists areas for further enquiry arising from the survey results.

### 5.1 Overarching themes

#### *Sectoral impacts*

The survey results show that KTS has had varied impacts across different sectors. This can largely be attributed to the different circumstances in which mandatory reporters work, within each sector.

Generally, Police and Justice sector respondents provided less positive responses to various questions about KTS. As discussed throughout Section 4 of this report, these sectors have a number of unique characteristics - for example, they may more commonly have one-off encounters with children, young people and families and be exposed to more acute situations. This may impact on their ability to implement changes such as collaboration and information sharing, to work with families in an ongoing way, and generally make gains in terms of outcomes.

Many staff across a number of sectors have altered roles and responsibilities under KTS, for example there is a greater emphasis for staff in the Education, Early Education and Care, Health and Housing sectors on working with children, young people and their families in an ongoing way, such as to determine next steps where there is a child protection concern. Mandatory reporters in these sectors may have more difficulty adopting some of the elements of KTS, because it requires them to undertake tasks not previously part of their work (such as determining next steps where a child protection concern is identified as non ROSH). This is reflected in the results to other survey questions.

Conversely, it appears that the existing practices of some sectors may prove advantageous to implementing some components of KTS. For example, the Community Services sector had some of the most positive results relating to levels of current collaboration, and more respondents from this sector indicated their organisation is working in partnership with five or more other organisations, than from other sectors. However, fewer Community Services respondents indicated the level of collaboration has increased since KTS. This may reflect pre-existing practices of collaboration amongst these respondents (and thus no need to increase the current level of collaboration).

Overall, respondents from the Disability and Community Services sectors tended to have a more positive view of KTS than respondents from other sectors. Apart from pre-existing practices, there is no clear reason for this trend.

#### *Regional impacts and links with expenditure*

Overall, the survey results suggest that KTS has had more impact in areas that have received higher levels of funding or resources.

The Spatial Mapping and Analysis project undertaken by Deloitte Access Economics found that “expenditure has generally been highest in areas of the State with the highest levels of need” based on level of disadvantage within regions. Specifically, the Spatial Mapping and Analysis found that in the western and northern regions of NSW, and within Sydney, in the west and south west Sydney areas, funding per capita has been higher than across other areas (these areas have lower SES than other parts of NSW). These findings formed the rationale for ‘cutting’ the survey data by FaCS regions, to enable comparison of results across the state.

For some survey questions, there were clear regional impacts aligning with the patterns around funding and investment identified in the Spatial Mapping and Analysis project, whereas for other questions, the results by region did not deviate from the overall survey results. Some of the key regional differences, which may relate to the level of KTS investment, are summarised below.

*Table 45: Summary of themes relevant to regional KTS investment*

| Area / element of KTS  | Theme   | Detail / example   |
|--|---|--|
| <b>Child Protection Reporting</b>                              | Reporting appears to be consistent with SES and population – the lower the SES and the higher the population, <sup>63</sup> the more people that have made a Child Protection Report. | <p>In metropolitan locations, more respondents in the Metro South West and Metro West FaCS regions have made a Child Protection Report, than in the Metro Central region where the SES is higher, and there has been less KTS funding.</p> <p>In metropolitan regions with a lower SES (and more KTS funding - Metro South West and West regions) more respondents have made more reports (e.g. 20+).</p> <p>In non-metropolitan regions, more respondents in the Hunter / Central Coast and Western Regions have made a Child Protection Report, consistent with the high respondent population, and the total population within these regions.</p> |
| <b>Use of the MRG</b>  | In some regions with a higher level of KTS funding, use of the MRG has been stronger.   | <p>In Metro South West and Northern FaCS regions (which have had more KTS funding), more respondents have reportedly used the MRG.</p> <p>However, there are other regions (e.g. Southern) that have had less KTS funding that also showed high use of the MRG.</p>  |
| <b>Partnerships</b>  | The level of partnerships appears to be higher in regions with more KTS funding.  | Respondents from the Metro South West, Metro West and Northern regions (regions receiving more KTS funding) reported higher levels of partnering than in other regions.  |
| <b>Collaboration</b>   | There appears to be more collaboration in regions with lower SES.   | Respondents reported higher levels of collaboration within the Metro South West and Metro West regions (regions with more KTS funding) than in the Metro Central region. This result may reflect less client complexity (and thus less need for clients to access multiple services) in higher SES regions.  |
| <b>KTS initiatives (e.g. MRG, CWUs, FRSs, increasing role)</b> | The elements of KTS appear to have had the most impact in the lower SES regions of Sydney than anywhere else.   | Metro South West and Metro West FaCS region respondents (regions with more KTS funding) provided more positive ratings across the domains relating to the elements of KTS, than other  |

<sup>63</sup> Total regional population – based on CSC population data provided by DPC.

| Area / element of KTS | Theme | Detail / example   |
|-----------------------|-------|--|
| of NGOs)              |       | <p>respondents.</p> <p><i>Note, the results also provide some (albeit limited) evidence that regions with less funding have experienced less positive impacts regarding some components of KTS. For example, respondents working in the Southern FaCS provided less positive ratings about the impact of KTS, and also appeared to have lower levels of access to some KTS initiatives, including the CWU.</i></p> |

Source: KPMG based on analysis of KTS Workforce Survey data

The survey results also show some alignment between investment in KTS promotional activity and impacts on the workforce, for example a large amount of time and resources were invested in providing training on KTS to mandatory reporters working in government, and respondents most commonly identified ‘training’ as the way they found out about the Mandatory Reporter Guide.

## 5.2 Progress of the components of KTS

A summary of the findings of the survey against the relevant Interim Review questions is provided in the Executive Summary (see page 5). The discussion below highlights key points relating to the interpretation of the survey results.

*Are workers engaging with the Mandatory Reporter Guide and the new reporting threshold so that the statutory child protection system is more streamlined and focussed on children at greatest risk?*

Overall the results suggest that the Mandatory Reporter Guide is a successful component of KTS. The survey results suggest that use of the MRG has been high and relatively consistent based on the ‘cuts’ applied to the survey data. However the results highlight some mandatory reporters are more likely to use the MRG (e.g. NGOs, manager level staff and people in non-metropolitan locations) than others. While there are some explanations for this (e.g. manager level staff are responsible for undertaking Child Protection Reporting in the Education sector), this suggests a need for strategies to increase uptake amongst government staff, staff level mandatory reporters and in metropolitan areas.

It appears the MRG may be being used by mandatory reporters to legitimise their own decisions about ROSH rather than to come to these decisions in the first place. This may be due to the previous experience many mandatory reporters have in undertaking Child Protection Reporting. Despite this not being the primary intention of the MRG, using the MRG in this way is likely to contribute to ROSH being appropriately identified. The positive results from respondents about their ability to identify ROSH support this.

The results highlight that the MRG is considered less useful in determining next steps than other functions. In addition many mandatory reporters use the MRG in conjunction with other decision making supports. These results suggest that the MRG alone cannot provide adequate support for responding to vulnerable children, young people and their families in an ongoing way.

### *To what degree is there coordination and information sharing amongst agencies?*

While there is high awareness of the new legislation around information sharing and coordination and mandatory reporters appear to have the right attitudes and organisational supports in place, there are some clear barriers to mandatory reporters fully embracing this legislation. Namely that there remain concerns about confidentiality and consent, and previous habits of not sharing information and collaborating remain within some sectors. However despite this, some groups of mandatory reporters appear to be embracing information sharing and collaboration, in particular in sectors with a high proportion of NGO respondents. Whether this is a result of KTS (or whether it links to other factors such as a pre-existing culture of sharing information and collaborating) is not clear and warrants further investigation.

It appears that where organisations have positive information sharing practices (i.e. a high level of information sharing), positive collaborative practices are also evident.

### *What is the current state of partnerships between government and non-government services?*

Due to only a limited number of questions relating to partnerships the surveys is unable to provide a detailed response to this Interim Review question. However similarly to information sharing and collaboration; where collaboration is high the level of partnering is also high.

Questions about service delivery to Aboriginal children, young people and their families show that some mandatory reporters have dedicated time to building relationships and working with Aboriginal organisations, which may be a positive pre-cursor to partnerships.

While there was evidence of both government and non-government organisations entering into partnership arrangements, there is no way to identify whether an increase in partnerships between government and non-government services has occurred as a result of KTS.

### *Do new systems effectively link families to services?*

There appears to be limited awareness about Family Referral Services amongst many respondents which is not unexpected given that they are located in only five locations across the state. However there was also a large proportion of respondents in areas in which FRSs *are* located that either had not contacted a FRS or did not respond to questions about contacting FRSs. This suggests that FRSs have not been contacted by large numbers of mandatory reporters even where they are available.

Although where FRSs have been accessed, they appear to have been effective in linking families with services (i.e. making and receiving referrals) respondents provided less positive ratings about FRSs impact on meeting outcomes for children, young people and their families.

Around half of all respondents thought KTS has supported the outcome 'the needs of children, young people and families are met' and around a quarter provided positive or extremely positive ratings about the impact of KTS on children, young people and families. However this leaves a significant amount of respondents who were less positive.

It is unclear whether these results reflect: an unwillingness/inability amongst respondents to attribute changes to KTS; or that KTS has not yet had its intended impact. However it is important to remember that the outcomes identified for KTS are medium to long term; KTS is relatively new (having been in place since 2010); and there are a range of factors external to KTS that may inhibit the achievement of these outcomes.

*Are services more available and better able to meet the needs of Aboriginal children, young people and families? Have services increased the levels of cultural awareness, cultural competence and partnerships with Aboriginal communities?*

It appears KTS has had less impact in relation to these Interim Review questions than it has in other areas.

While over half of all respondents said their organisation has made changes to the way they work with Aboriginal clients, the most commonly identified change – cultural awareness training – cannot be attributed to KTS (as KTS did not involve cultural awareness training). Other changes cited by respondents such as joint service delivery with Aboriginal organisations, are relevant to KTS which includes a number of specific programs aiming to support increased engagement between mainstream and Aboriginal services. However a large proportion of respondents could not link changes their organisation had made to outcomes or impacts, nor could they link the impacts back to KTS (alone or at all).

It appears that (not unexpectedly) organisations that have an existing focus on Aboriginal clients have seen more changes since 2010 when KTS was implemented, but given the whole of government focus on achieving better outcomes for Aboriginal people, it is unlikely that these changes can be linked to KTS alone.

*Have government and non-government services engaged positively in the process of workforce culture change?*

Overall mandatory reporters appear to have had moderately positive engagement with the process of workforce culture change since the implementation of KTS. As discussed previously, the results reflect the fact that some sectors have more positively engaged than others. This can largely be explained by the circumstances in which mandatory reporters operate within sectors, and whether KTS represents additional or new roles and responsibilities for mandatory reporters.

It appears mandatory reporters hold positive attitudes relating to both the underlying objectives of KTS (e.g. that *child protection is a shared responsibility*) and the key changes under KTS that have been implemented (e.g. information sharing). These attitudes are likely to provide a strong basis for change going forward.

Largely mandatory reporters answered 'linked' questions (e.g. questions on similar issues in different parts of the survey) consistently, suggesting some validity to the survey results.

## 5.3 Other impacts

A number of overarching themes that relate to the ability of KTS to meet the needs of children, young people and families were raised in response to the final survey question: *Is there anything else you would like to add?*

A number of respondents indicated that the changes under KTS have not adequately been supported or resourced. Common responses relating to service delivery included that there is still poor availability of programs and services especially in remote areas, the availability of services is inadequate to meet demand, and the quality of services is low in some areas. Some respondents indicated that their workload has increased under KTS (due to additional requirements to work with vulnerable children, young people and their families) but there have been no additional resources provided in line with this. Respondents indicated more training is required, and additional support for people now performing new tasks in working with children and young people (e.g. teachers and medical staff) would be beneficial.

Linked to this, some respondents indicated KTS has increased the level of bureaucracy within the child protection system by requiring additional steps in the decision making and reporting process. Confounding this, some respondents also raised issues such as fragmentation and lack of coordination / alignment between parts of the system, such as between departments.

These themes suggest a need for more in-depth exploration of how KTS has been supported and resourced, and the impact of KTS on the processes and requirements associated with responding to children and young people at risk, and their families.

## 5.4 Areas for further enquiry

A number of areas for further enquiry were identified throughout the survey data analysis process. The survey data alone cannot provide adequate detail about these areas, but the survey results suggest that these areas may warrant further investigation. Areas for further investigation include:

- the impact of the new reporting threshold on children, young people and their families, and on mandatory reporters;
- the impact on NGOs of not having access to a dedicated CWU;
- the high number of respondents indicating 'no change' to information sharing has occurred – whether there are explanations for this, or whether this indicated limited impacts of KTS in this area;
- the reason why mandatory reporters from the Community Services and Disability sectors provided more positive ratings of KTS than other sectors;
- the level of consistency between advice / assistance provided by the CWU and the outcomes of the MRG – and the (potential) positive and negative impacts this has;
- how KTS has been supported and resourced, and whether this is adequate; and
- the impact of KTS on the processes and requirements associated with responding to children, young people at risk, and their families (i.e. whether KTS has increased the burden on mandatory reporters, and has led to a more bureaucratic child protection system).

Further exploration of the trend that use of the Mandatory Reporter Guide is decreasing are also warranted. This would complement the survey results which show that:

- being 'new' in a role does not mean someone is more likely to use the MRG (linking to the hypothesis that *mandatory reporters use the MRG as an initial decision making support tool, but as they become more used to reporting they use it less*); and
- some mandatory reporters reported using mechanisms other than the MRG, including CWUs, the Community Services Helpline, and their own professional judgement, to support them to make decisions about reporting (linking to the hypothesis that *mandatory reporters are using other mechanisms to make decisions about ROSH*).

Finally, the Interim Review questions not addressed by this survey should be addressed by other Interim Review activities. These questions include:

- Have out-of-home care and children's court processes improved?
- Are early intervention services supporting children and parents in the community?
- To what degree is the universal system stronger and more extensive?
- Have early intervention services been enhanced?