

DoCS

corporate plan



NSW Department of
Community Services

Message from the Director-General

A new period in DoCS' history began in December 2002, when the NSW Government announced an extra \$1.2 billion over five years to build the capacity to deliver better service to the children, young people and families of the State. This huge project involves many individuals and organisations, with over half the money to go to service providers outside DoCS.

The period since then has mainly been a time of planning and constructing the platform to support a project of this size. 150 additional caseworkers commenced work during 2003/04, after a recruitment campaign which attracted over 1,000 applications.

We have also greatly enriched our policy and advisory base for serving Indigenous and Culturally and Linguistically Diverse clients. A new Economics Branch has been created to ensure that our resources are allocated efficiently in the future.

It is now more important than ever to have a solid planning basis. The culmination of our planning phase is the DoCS *Corporate Plan 2004/05 – 2008/09*. It will have annual reviews during its life to ensure we remain on track as conditions change and our data give us better information about what is working well and what requires adjustment.

Some key themes reappear repeatedly in the DoCS *Corporate Plan 2004/05 – 2008/09*. The first is demand management. Part of the \$1.2 billion is for prevention and early intervention programs designed to reduce the rate of growth in demand for statutory intervention by DoCS.

Research indicates that these programs can have exciting outcomes for children who are at risk in infancy.

The second theme is of process improvement.

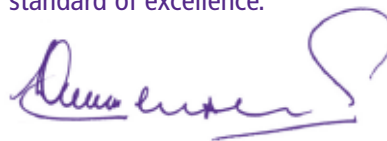
We will be reviewing everything we do, from when a child is first reported until they are safe with their family or in a permanent care placement. The Enhanced Service Delivery project will test new models of DoCS' service delivery to see which work best.

The third, and possibly most important theme, is that of working intensively with the service provision sector on all aspects of our work from prevention and early intervention to the permanent placement of children and young people in out-of-home care. This sector needs to grow, to become more flexible and to offer a wider range of options, particularly for Indigenous children and young people, and children with special needs. There are special challenges in serving clients in rural and remote areas of NSW where infrastructure is scarce. Resolving these issues is a major focus for DoCS and for its partner organisations as the field changes and expands.

DoCS' *Corporate Plan 2004/05 – 2008/09* provides the framework that shapes the services we provide and decisions we make. It sets out our objectives, and clearly establishes how we will continue to measure our performance over time, as well as the rationale behind these measures.

Of course, we can only achieve these objectives through the expertise and commitment of our staff and stakeholders, who play a key role in the delivery of community services in NSW. DoCS has multi-faceted partnerships – with its staff, government agencies, our clients, our funded services and the NSW community. These partnerships will only be facilitated and enhanced, to the benefit of communities now and in the future, by the successful implementation of DoCS' *Corporate Plan*.

I look forward to working closely with both staff and stakeholders to implement this plan. I am confident that it will guide us well in our efforts to provide the people of NSW with community services that meet the highest standard of excellence.



Neil Shepherd
Director-General
NSW Department of Community Services

“We will be reviewing everything we do, from when a child is first reported until they are safe with their family or in a permanent care placement.”

Values

Our corporate values underpin everything we do. As we implement this Corporate Plan, we will uphold our values in all our dealings with clients, stakeholders and each other.

INTEGRITY

- Be truthful, fair and reliable in all our dealings with clients and with each other
- Provide a service which is consistent, honest and equitable
- Apologise when we make mistakes and do what we can to fix them
- Protect the confidentiality of sensitive and personal information

EXCELLENCE

- Deliver high quality services consistently to all our clients
- Work professionally with children, young people and families to find solutions that are right for them
- Continuously improve our skills and knowledge with the support of high quality research and training

RESPECT

- Behave ethically and treat people as we would like to be treated
- Listen to the views of others and respond to requests for assistance

TRUST

- Do what we say we will do – deliver on promises to team members, clients and community partners
- Give clear reasons for the decisions we make
- Ensure our words and actions reflect our values

OPENNESS

- Create an environment which fosters and encourages trust, change and growth
- Involve people in decisions that affect their job/life
- Provide transparency in the way we allocate resources
- Provide clear and honest feedback to others and accept feedback ourselves

FAIRNESS

- Take grievances seriously and work to resolve them promptly and without retribution
- Recognise, reinforce and reward positive outcomes
- Make decisions that are fair and unbiased

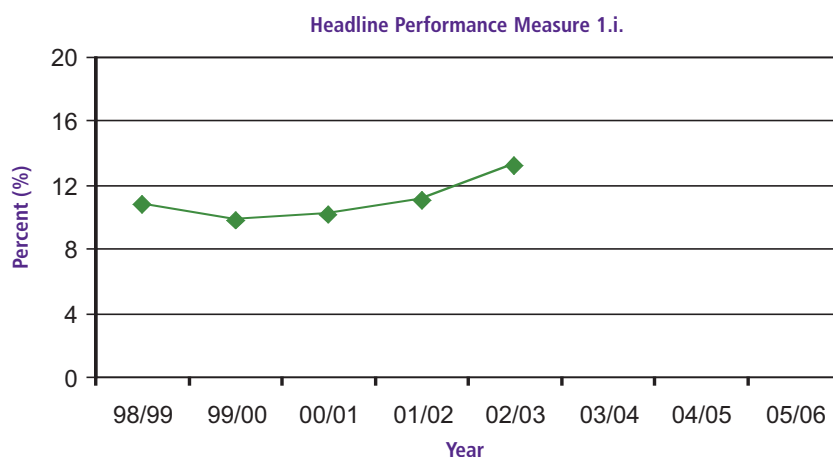
TEAMWORK

- Work cooperatively and in partnership with others
- Share recognition and achievement and acknowledge the interdependence of team members

DoCS' Headline Performance Measures

These measures provide an overview of how effectively DoCS works with its clients, and how well we provide our services. DoCS uses additional measures for day-to-day activities.

1. SUBSEQUENT SAFETY OF CLIENT CHILDREN AND YOUNG PEOPLE



Measures:

- i) **Percentage of children and young people who were the subject of a substantiated report in the previous year, and were the subject of a further substantiation within the following 12 months¹**
- ii) **Rate of investigation of re-reported cases that previously had a substantiation**

Rationale:

- i) Children and young people who have been the subject of a substantiation should have received attention from DoCS, which has attempted to ensure their safety. A new substantiated report after that suggests they are not safe.
- ii) At present not all cases reported are investigated, even where they relate to clients who have previously had a report substantiated. This measure is a cross-check on the meaningfulness of (i). Data for this measure are not yet available.

Measure

How we will know whether our work is effective

Rationale

Why we are measuring this

1. Note that this graph uses the same figures as the Australian Institute of Health and Welfare (AIHW); however, presentation of the data in the AIHW report is lagged by one year. That is, AIHW reports substantiations against the year of the original substantiation (the base year), whereas this version places them in the year in which the resubstantiation occurred.

2. STABILITY OF PLACEMENTS² IN OUT-OF-HOME CARE

Measure:

Percentage of

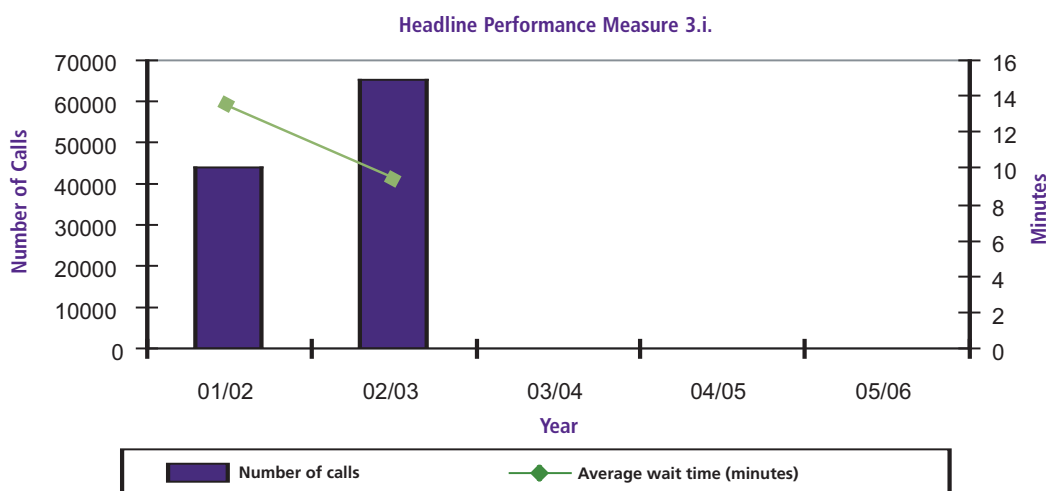
- i) All children and young people in out-of-home care, and
 - ii) Children under five years old in out-of-home care³
- on a final care and protection order, who have had five or more placements⁴

Rationale:

Placement breakdown is linked to poor outcomes for children and young people and significant direct costs. Multiple placement breakdowns exacerbate these effects and can lead to very high cost placements.

A degree of placement change is tolerated within this measure as some types of change can be beneficial (eg. if the new placement is more culturally appropriate, serves special needs better or is closer to the child's original location).

3. DOCS' RESPONSE



Measures:

- i) Volume of calls to the Helpline versus average waiting time to talk to a caseworker
- ii) Percentage of child protection reports assessed at the Helpline as requiring further investigation, which are actively managed by DoCS⁵

Rationale:

- i) Over 95 per cent of initial reports to DoCS are made via the DoCS Helpline. Helpline phones are answered very quickly, but callers may have to wait to talk to a caseworker who can make a detailed assessment. Callers who have a long wait may drop out without bringing a situation to DoCS' attention.
- ii) Historically, DoCS was unable to follow up a significant number of reports assessed as warranting attention. Ideally, this measure will come to show that a high percentage of reports requiring investigation are attended to.

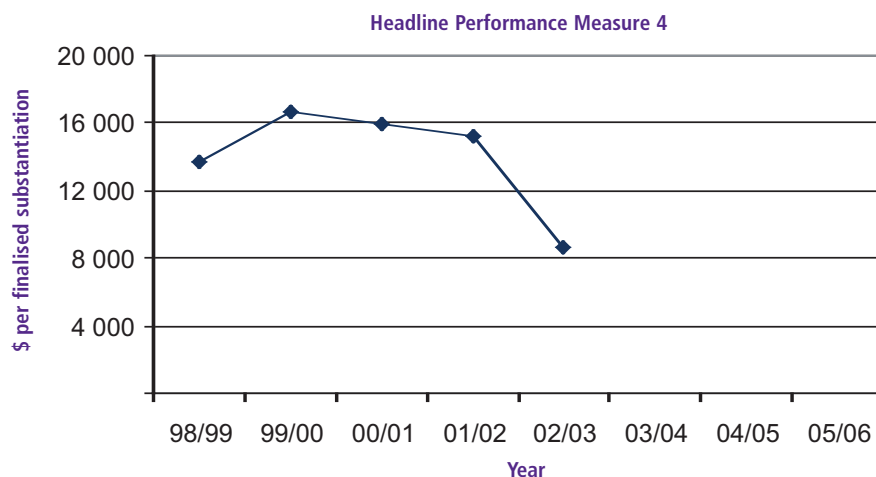
2 Although Stability of Placement is a Headline Performance Measure, DoCS is still working on the simplest accurate way to gauge this. This measure may require further amendment.

3 A number of studies have shown that placements are more likely to end prematurely, the older the child or young person, and the older they are when separated from their mother (Berridge & Cleaver, 1987; Fratter, Rowe, Sapsford & Thoburn, 1991; George, 1970; Holloway, 1997; Parker, 1966; Rowe, Hundleby & Garnett, 1989 – quoted in J. Cashmore, *What The Research Tells Us: Permanency Planning, Adoption and Foster Care*, Paper at CFWAA Symposium, Canberra, September 2003).

4 A recent Victorian study suggested that children and young people entering home-based care average 3.4 placement changes over five years; children and young people entering foster care average 4.4 placements. (*Public Parenting: a review of home-based care in Victoria*, State Government Victoria, Department of Human Services 2003).

5 In this measure, "actively managed" means "referred to a service, or sent for further investigation".

4. SERVICE DELIVERY COST – CHILD PROTECTION⁶



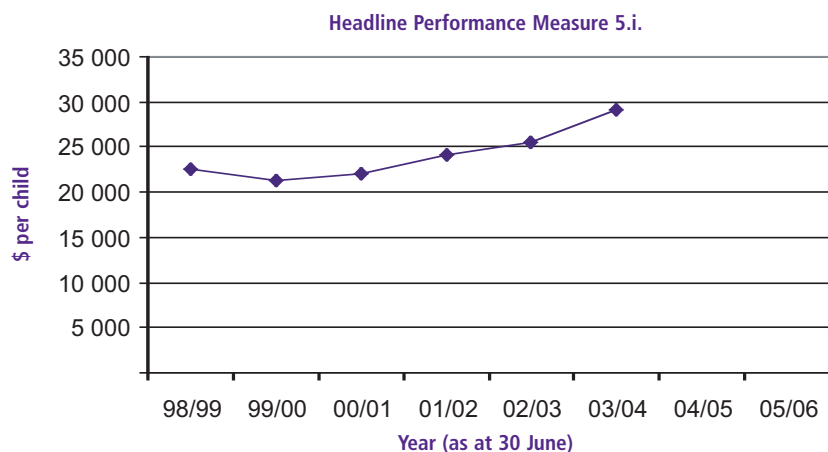
Measure:

Annual real⁷ recurrent expenditure on substantiated child protection notifications⁸

Rationale:

This measure provides a unit cost for child protection (excluding out-of-home care).

5. SERVICE DELIVERY COST – OUT-OF-HOME CARE⁹



Measures:

Annual real¹⁰ expenditure on:

- i) All out-of-home care, per child in out-of-home care**
- ii) All out-of-home care, per child in out-of-home care excluding children and young people with high needs**
- iii) Per child for children and young people classified as having high needs**

Rationale:

- i) This measure provides a unit cost for out-of-home care.
- ii) Due to a lack of suitable placement options some children and young people have been placed in high cost options without a corresponding high need. DoCS is also working to reduce the cost of both general and high needs services, as well as to ensure children and young people have access to services designed to meet their individual needs.

⁶ Measure as reported to Productivity Commission. Includes DoCS overheads on a pro-rata basis.

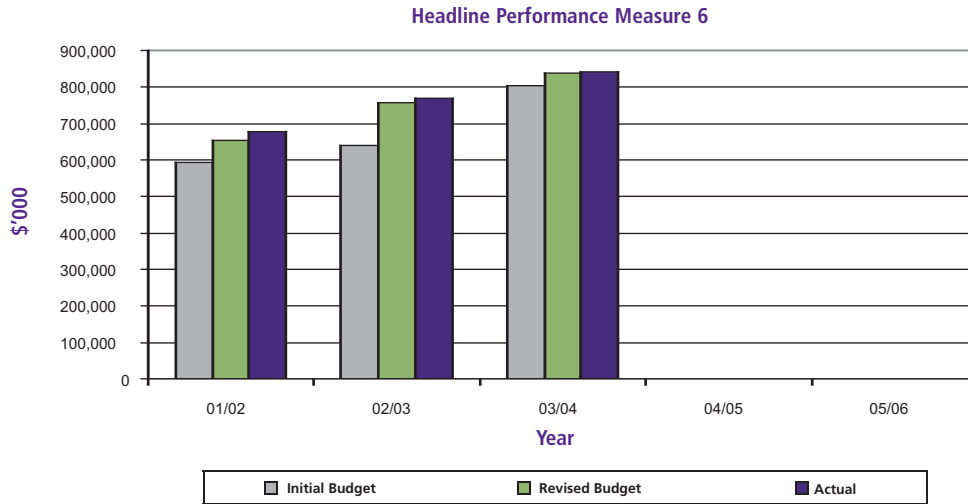
⁷ Base year for real dollars is 2002/03.

⁸ Productivity Commission definitions are used. Note that the graph shows only substantiations which have led to a finalised case, so that the decline shown in cost may not be due to increased efficiency. More relevant data are expected from Key Information and Directory System (KiDS).

⁹ Measure as reported to Productivity Commission. Includes DoCS overheads on a pro-rata basis.

¹⁰ Base year for real dollars is 2002/03.

6. FINANCIAL MANAGEMENT



Measure:

DoCS' performance against original and revised budgets

Rationale:

DoCS' aim is to manage its resources as close to initial budget as possible. Revisions can occur for a variety of reasons, including new incoming programs. In recent years, DoCS has managed very close to budget with the exception of costs for children and young people with high and complex needs.

Headline Five Year Objectives

- *Major expansion and upgrade of child protection and out-of-home care services, matched to the needs of diverse client groups*

- *Greater emphasis on prevention and early intervention programs*

- *Delivery of a strategic community-building agenda*

- *Better DoCS processes and systems to support frontline service delivery*

- *Stronger partnerships with other agencies, service providers and peak bodies*

- *Policy making and service delivery based on sound research and analysis*

- *Excellent internal and external communication*

- *Recognition of DoCS as an employer of choice*

Service Group Objectives and Performance Measures

Community Services ¹¹

SUPPORTED ACCOMMODATION ASSISTANCE PROGRAM (SAAP)

Result:

People who access SAAP services cease to be homeless, or do not become homeless in the first place

Objectives:

1. Ensure that the State's new five-year SAAP agreement with the Commonwealth reflects the needs of NSW clients, particularly increased access for Indigenous people.
2. Make the service system more flexible, to streamline costs and better serve clients.
3. Improve the situation of young SAAP clients.

DISASTER RECOVERY

Result:

Disaster Recovery clients return to their usual way of living as soon as possible

Objectives:

1. Contribute to NSW's response to the Council of Australian Governments (COAG) *Review of Natural Disaster Relief Arrangements* to safeguard or improve service to NSW clients.
2. Participate in planning for disasters with national and international impact.
3. Build the profile of disaster recovery services and how they operate so that people know what to expect during and after disasters.
4. Improve regional planning (including staffing options) for disasters.

UNIVERSAL SERVICES

Results:

- *Communities are supported to prevent social breakdown*
- *Families and individuals vulnerable to isolation, risk or harm have support to avoid or emerge from that situation*

Objectives:

1. Improve whole-of-government approaches to strengthening communities at risk.
2. Provide and align universal services to underpin new early intervention programs for families who require more intensive support.

PERFORMANCE MEASURES

- **Capacity of client(s) to live without SAAP support after receiving service**

Percentage of SAAP clients who return to a SAAP service within 12 months/five years of exit

- **Eligibility for Disaster Recovery assistance**

Percentage of Disaster Recovery applicants who are given ongoing assistance from government funds, per disaster and per annum

¹¹ This section does not include the full range of functions transferred to DoCS in July 2004 to form Communities Division. This includes programs such as Families First, Community Solutions, the Area Assistance Scheme and Better Futures. It also includes Aboriginal Child, Youth and Family Strategy, the Violence Against Women Specialist Unit and Youth Policy. This Plan will be updated when they are fully integrated.

Prevention and Early Intervention

CHILDREN'S SERVICES

Result:

Children's developmental outcomes are enhanced in a safe, well-regulated environment

Objectives:

1. Provide a framework which encourages the delivery of quality children's services in NSW.
2. Ensure an adequate number of places in high quality children's services are available for children of families from early intervention programs, to support healthy child development.

EARLY INTERVENTION

Result:

Client children are supported so that they have age-appropriate development without ongoing involvement in the child protection system

Objectives:

1. Intervene as early as possible to strengthen families and provide high quality childcare so at-risk children have optimal development.
2. In conjunction with our partners, plan and fund services that provide a range of appropriate support options for vulnerable families.
3. Reduce re-reporting by making children safe earlier.
4. Establish a robust evaluation framework and adapt the program to respond to what we learn as it is implemented.

PERFORMANCE MEASURES

- ***Use of children's services***

Percentage of children aged zero to five years old in NSW accessing licensed childcare places (broken down by Indigenous and Culturally and Linguistically Diverse clients)

- ***Subsequent safety of children receiving early intervention***

Percentage of (child) service recipients who were assessed as not requiring to be placed in out-of-home care but are later placed in out-of-home care¹²

- ***Development of children receiving early intervention***

Percentage of children receiving early intervention services under five years old who reach appropriate developmental milestones by school entry age, with particular emphasis on:

- i) school readiness
- ii) physical and mental health.

- ***Cost of early intervention service delivery***

Annual real¹³ recurrent expenditure per child admitted to the early intervention program

¹² This measure counts children who have been accepted as clients needing early intervention services, but despite the intervention, finally need to be placed in out-of-home care. It does not count children who are placed in out-of-home care prior to receiving an early intervention.

¹³ Base year for real dollars is 2002/03.

Statutory Child Protection

Result:

Client children and young people and their siblings are safe following intervention

Objectives:

1. Ensure that DoCS establishes and maintains systems to capture, record and reliably assess reports of child abuse and neglect.
2. Provide interventions appropriate to the assessed risk of harm.
3. Work to ensure that children and young people who have received an intervention have a reduced rate of substantiation, and where resubstantiation occurs, it is at a reduced level of harm or risk.
4. Attain better quality interventions for clients of the child protection system by ensuring interagency collaboration in justice, health, education and community services.

PERFORMANCE MEASURES

- ***Subsequent safety of client children and young people***

- i) Percentage of children and young people who were the subject of a substantiated report in the previous year, and were the subject of a further substantiation within the following 12 months
- ii) Rate of investigation of re-reported cases that previously had a substantiation

- ***Intensive Family Based Services (IFBS)¹⁴***

Percentage of children and young people placed in out-of-home care from IFBS-referred families at 12 months after completion of an IFBS program

- ***Service cost delivery***

- i) Annual real¹⁵ recurrent expenditure on substantiated reports
- ii) Annual real¹⁶ recurrent expenditure per report assessed at the Helpline as requiring further investigation/intervention

¹⁴ This only relates to Indigenous Intensive Family Based Services.

¹⁵ Base year for real dollars is 2002/03.

¹⁶ Base year for real dollars is 2002/03.

Out-of-Home Care

CHILDREN AND YOUNG PEOPLE IN PERMANENT PLACEMENTS

Result:

Children and young people are in a safe, well-functioning, stable placement and are developing optimally

Objectives:

1. Expand the quality and range of placement options available to children and young people in out-of-home care, including foster care, residential care and new models of care.
2. Simultaneously expand the quality and range of services to children, young people and their families to support these placements.
3. Ensure maximum utilisation of permanency planning provisions, so that children and young people have long-term stability when they cannot live at home.

CHILDREN AND YOUNG PEOPLE RESTORED TO THEIR FAMILY

Result:

Children and young people are successfully restored to their parental family

Objective:

Improve the range and quality of services provided to children, young people and their families to support restoration, so that children's and young people's lives are not disrupted by unsuccessful attempts at restoration.

CHILDREN AND YOUNG PEOPLE WITH HIGH NEEDS

Result:

A system is developed and implemented that provides quality, cost-effective care for children and young people with high needs and improves their longer-term outcomes

Objectives:

Better support children and young people with high needs by:

1. Using effective screening tools, which are employed as early as possible and are consistent over time, to identify those children and young people who fit the target group
2. Having a range of appropriate placement options and support services to meet the needs of the target group in a cost-effective manner.

Out-of-Home Care (Continued)

IMPROVING THE OUT-OF-HOME CARE SYSTEM

Result:

The out-of-home care service system provides an appropriate quantity and range of cost-effective, efficiently run and well coordinated services to meet the needs of all children and young people in the system.

Objectives:

1. Ensure the out-of-home care service system is evidence-based and developed in partnership with the out-of-home care sector.
2. Provide an effective assessment tool for use with all children and young people who enter out-of-home care to ensure that the appropriate range of support services for them are identified.
3. Improve the education and mental health outcomes for children and young people in out-of-home care, so that those who have been in long-term out-of-home care have similar development to their peers in the general population.
4. Increase the knowledge and skills of DoCS staff to achieve consistency in operation and improve service to clients.

PERFORMANCE MEASURES

- **Stability of placement**

Percentage of:

- i) all children and young people in out-of-home care
- ii) children under five years old in out-of-home care

on a final care and protection order, who have had five or more placements.

- **Children and young people restored to their parents**

Percentage of children and young people in out-of-home care with a caseplan goal of restoration who:

- i) are restored to their parents within 12 months of entering care
- ii) do not return to out-of-home care during the subsequent 12 months.

- **Safety of placement – high needs**

Percentage of substantiated reports to DoCS of risk of harm to the children and young people in care who are classified as having high needs.

- **Service delivery cost**

Annual real¹⁷ expenditure on:

- i) all out-of-home care, per child in out-of-home care
- ii) all out-of-home care, per child in out-of-home care excluding children and young people with high needs
- iii) per child or young person identified as having high needs.

Capacity Building

Result:

DoCS has the resources and skills to deliver effectively the desired results in all its core functions

Objective:

Improve corporate services and systems to support the delivery of the DoCS programs set out in this Corporate Plan and deliver financial performance within budget.

¹⁷ Base year for real dollars is 2002/03.

Demand for Child Protection in NSW: Population Indicators

DoCS has a lead role in coordinating the NSW Government's response on child protection, and has developed some primary indicators and high-level strategies to ensure this is on track. However, many organisations and factors influence child protection in NSW and the outcomes are beyond the influence of DoCS alone.

<p>Performance Indicators</p>	<ol style="list-style-type: none"> 1. Rate of increase/decrease of children and young people who are: <ol style="list-style-type: none"> i) the subject of child protection reports¹⁸ ii) the subject of reports assessed by the Helpline as requiring further assessment. 2. Rate of children and young people in out-of-home care (per 1,000 population).¹⁹
<p>Population Strategies</p>	<p>DoCS will:</p> <ol style="list-style-type: none"> 1. Work as lead agency to identify and resolve the drivers of child abuse and neglect in the general community (with human services, central agency and non-government partners). 2. Specifically address the issues of Indigenous communities and families by: <ol style="list-style-type: none"> i) participating in whole-of-government planning ii) raising awareness of child abuse and family violence within communities, and of services available for victims and perpetrators iii) participating on the Aboriginal Child Sexual Assault Taskforce. 3. Work with NSW Health and the Department of Education and Training to enhance the access of children and young people in care and their families to necessary services and support. 4. Improve coordination of the Government's response to family violence, ensuring that victims and children and young people receive adequate support. 5. Contribute to the Government's response to the Drug and Alcohol Summits.

¹⁸ This indicator is counted over the complete year, but each child is only counted once annually for each of 1i and 1ii.

¹⁹ This indicator is an annual snapshot on a specific date, usually 30 June.

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This report is also available on DoCS'
website www.community.nsw.gov.au

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DoCS' Results Logic Diagram

A map of what we do according to the results that we are aiming to achieve for the community.

