

**10 YEAR** **community  
services  
industry plan**





# community services industry plan

## Acknowledgment

The Victorian Council of Social Service acknowledges the Traditional Owners of country throughout Victoria, their diversity, histories and knowledge and their continuing connections to land and community. We pay our respects to all Aboriginal and Torres Strait Islander people, and Elders of past, present and future generations.

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# Foreword

Victoria's community services industry is strong, vibrant and mature with a proud history of supporting people facing poverty and disadvantage. Comprised of thousands of organisations spread throughout the state, the industry is diverse, resilient and adaptable.

As one of the biggest and fastest growing employers and workforces in the state, it is also a major contributor to the Victorian economy. In addition to this, it engages an army of volunteers, bringing people together and building inclusive, resilient communities.

The community services industry is undergoing rapid and substantial change due to an increasing and ageing population as well as government policies such as the National Disability Insurance Scheme and the government's response to the Royal Commission into Family Violence.

Our 10-year Community Services Industry Plan seizes the opportunity provided by this change. Developed by the industry, for the industry, it seeks to ensure all Victorians can live good lives in thriving communities.

Throughout their lives all Victorians may require community services at some time, whether it be via a community health service, an ageing service, or, for those who face vulnerability and disadvantage, wrap-around support to ensure their holistic needs are met.

By harnessing technological innovation, developing the evidence base, undertaking data innovation and implementing stronger information sharing regimes, we can better engage with people using our services and quickly identify demand for services and gaps in service provision. This will transform service practice into the future and ensure a higher quality service offering so Victorians can thrive.

The plan will also ensure Victorians have greater choice of and control over the services they receive, as well as make it easier for community service organisations to adapt to change, continue to improve services for people and employ the best staff.

Together, we can ensure all Victorians can access the resources and opportunities to lead good lives in thriving communities.



Jenny Mikakos MP  
Minister for Families and Children  
Minister for Early Childhood Education  
Minister for Youth Affairs



Emma King  
Chief Executive Officer  
Victorian Council of Social Service



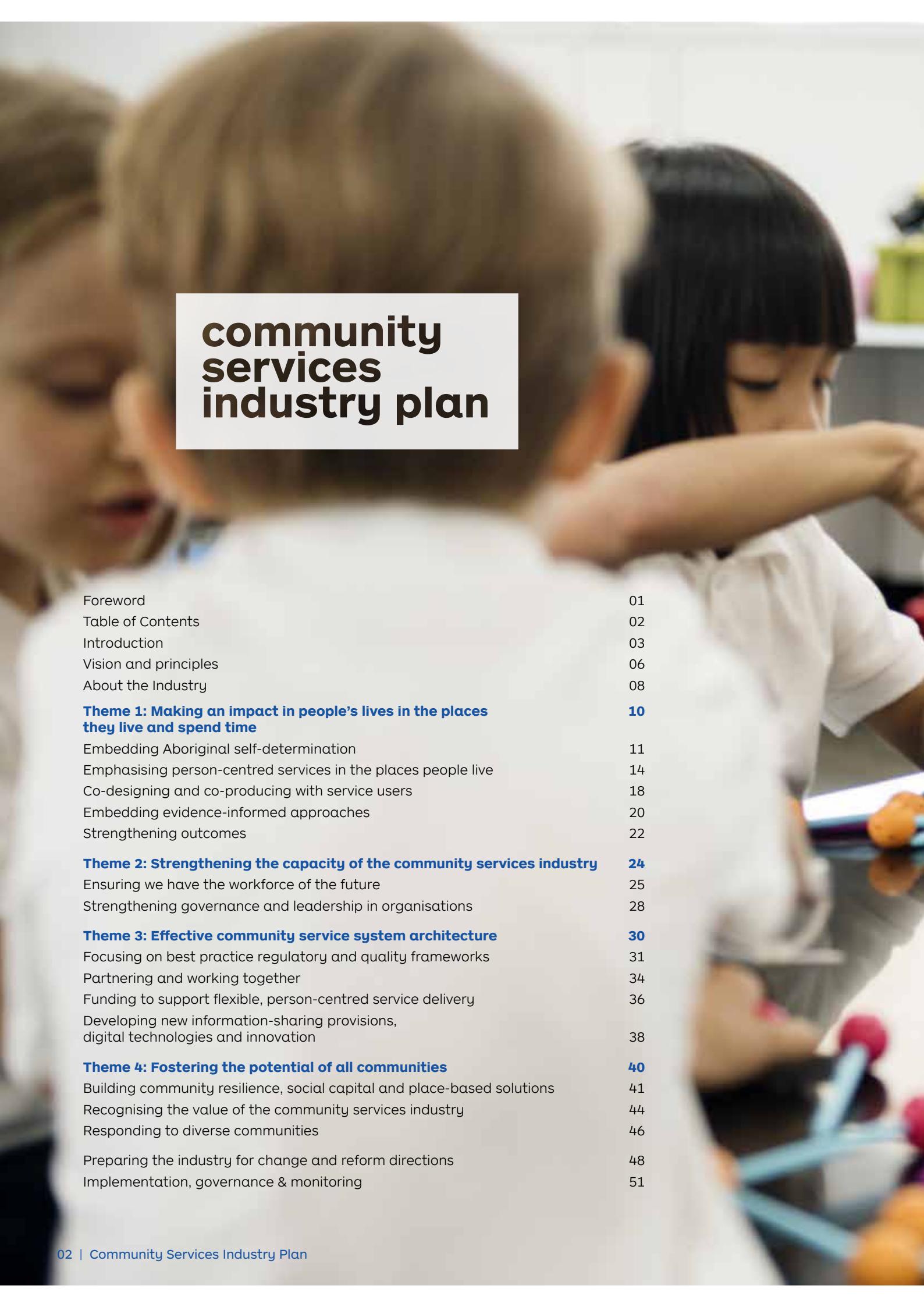
Martin Foley MP  
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Minister for Mental Health



Gavin Jennings MLC  
Special Minister of State



Hon Natalie Hutchins MP  
Minister for Women  
Minister for the Prevention of Family Violence



# community services industry plan

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# Introduction

The 10-Year Community Services Industry Plan presents a unified vision for the Victorian community services industry and the actions required to achieve this vision.

Victoria's community services industry is vibrant and mature, with a proud history of supporting people facing poverty and disadvantage. It is also a major contributor to the Victorian economy, projected to be one of the fastest growing industries in Victoria.<sup>1, 2</sup> The number of jobs in the healthcare and social assistance industry, in which the community services industry is embedded, will grow by 480,000 by 2022.<sup>3</sup> It is a diverse industry, comprised of around 4,700 organisations, ranging from extremely large state-wide and national services to very small, volunteer run community organisations.<sup>4</sup>

Right now we are in the middle of one of the busiest periods of change we have ever seen. Rapidly developing social, economic and technological trends are changing the industry's landscape, together with Commonwealth and State reforms, including the Royal Commission into Family Violence, National Disability Insurance Scheme, *Roadmap for Reform: strong families, safe children, Health 2040*, and Victoria's *10-Year Mental Health Plan*, as well as reforms in the homelessness and social housing sectors.

The 10 year community services industry plan is for:

- Government
- Peak bodies
- Community service organisations

It provides an overarching framework to guide industry development and transition planning.

As a result of this changing environment, the community services industry of the future will look different to today. To ensure it is well positioned to meet current and future needs, and enhance its economic and social contribution to the state, the industry needs new ways of working and doing business. It will need to partner with clients, communities, government departments and other community service organisations and adapt to new funding models. It will need to attract more people into the industry and build and support a workforce with diverse skills, performing a wide range of job roles. It needs a plan for transitioning to the new environment, to manage the many changes confronting it.

The purpose of the Community Services Industry Plan is to provide a shared platform for government and community services that both articulates and responds to opportunities and challenges facing the industry. It provides a clear vision for the future of the community services industry, and identifies the actions and commitments that will be required for successful implementation of its ambitious, long-term reform agenda and the capabilities, competencies and infrastructure required to deliver an integrated whole-of-society approach.

<sup>1</sup> Australian Bureau of Statistics, Labour Force, Australia. Detailed, Quarterly Cat. No. 6921.0.55.003, May 2017

<sup>2</sup> Australian Government, Department of Employment, Labour Market Information Portal, <http://lmip.gov.au/>

<sup>3</sup> Australian Government, Department of Employment, Labour Market Information Portal, <http://lmip.gov.au/>

<sup>4</sup> Australian Charities and Not-for-profits Commission, data from the Annual Information Statement (AIS) 2016, available at <http://australiancharities.acnc.gov.au/explore-the-report/sector/>

# community services industry plan

## A partnership approach

The plan has been developed by the industry, for the industry. The community services industry and government have worked together, supported by the Human Services and Health Partnership Implementation Committee (HSHPIC) and the Victorian Council of Social Service (VCOSS), to develop the 10-Year Community Services Industry Plan for Victoria.

Government provides an overarching system manager role for the plan, as a facilitator and enabler of the strategic directions identified. It will continue to work with the industry to provide an environment that supports information and data sharing, encourages strengthened governance and leadership and high quality service delivery.

The industry will need to embrace the vision, principles and strategic directions identified in the industry plan, incorporating them into planning, development and decision-making.

The plan is co-owned and governed by HSHPIC. Collaboration, partnership and consultation with a broad range of industry and government stakeholders, consumers, carers and peak bodies has been fundamental to its development. A discussion paper and consultation report, summarising the key themes from the conversations with industry, are available on the VCOSS website.

Parts of the industry have their own more detailed transition plans that align with the priorities of this overarching plan. For example, child and family services, specialist homelessness services and community housing have their own transition plans commencing in 2018. The specialist family violence sector launched its workforce focused industry plan in December 2017.<sup>5</sup> The Future Social Service Institute (FSSI) of RMIT University was commissioned to review the evidence relating to the strategic priority areas. The report of this evidence review is available on the VCOSS website.

## The vision, goals and principles

**Victorians live good lives in thriving communities supported through integrated, connected and sustainable community service organisations that are recognised as the central pillars of a vibrant, inclusive Victoria.**

The Community Services Industry Plan is guided by a vision for the future of the whole community services industry (see page 7). The vision establishes goals and directions for the Community Services Industry for the next 10 years. The plan is guided by a set of principles to which all parts of the community services industry are committed.

## Themes and strategic priorities

The Plan is structured around four main themes:

- Making an impact in people's lives in the places they live and spend time
- Strengthening the capacity of the community services industry
- Effective community service system architecture
- Fostering the potential of all communities

Under each of the four main themes, 14 strategic priorities provide a blueprint for how the industry and government can respond to the changes confronting them and build a strong, sustainable and vibrant community services industry. Although a separate section is devoted to each one, the strategic priorities are interrelated and act to reinforce and strengthen one another. The strategic priorities are:

- Embedding Aboriginal<sup>5</sup> self-determination
- Emphasising person-centred services
- Co-designing and co-producing with services users
- Embedding evidence-informed approaches
- Strengthening outcomes
- Ensuring we have the workforce of the future
- Strengthening governance, leadership and organisations
- Focusing on best practice regulatory and quality frameworks

- Partnering and working together
- Funding to support flexible, person-centred service delivery
- Developing information sharing provisions, digital technologies and innovation
- Building community resilience, social capital and place-based solutions
- Recognising the value of the community services industry
- Responding to diverse communities

The plan's strategic directions are based on the FSSI review of evidence and on extensive consultations with the industry, service users and carers.

## About HSHPIC

The Human Services and Health Partnership Implementation Committee (HSHPIC) is a joint committee of sector and peak body leadership representatives and representatives from the Department of Health and Human Services (DHHS). It was established in 2004 as a result of the partnership agreement between the then Department of Human Services and the health, housing and community services sector. It is co-chaired by the Victorian Council of Social Service (VCOSS) and the DHHS. HSHPIC's role is to promote and facilitate collaboration on policy priorities between the department and the community sector. It also promotes consultation and engagement between the department and the funded community services sector.

## HSHPIC members

HSHPIC Members include representatives from DHHS, Carers Victoria, Centre for Excellence in Child & Family Welfare, Community Housing Industry Association Victoria, Council to Homeless Persons, Domestic Violence Victoria, National Disability Services, Mental Health Victoria, Vicsport, Victorian Aboriginal Controlled Community Health Organisation, Victorian Alcohol & Drug Association, VCOSS, Victorian Healthcare Association, and the Youth Affairs Council of Victoria

## CSIP Working Group members

We also acknowledge the contribution and guidance of other members of the Community Services Industry Plan Working Group including Council of the Ageing, Federation of Community Legal Centres, Financial and Consumer Rights Council, Future Social Service Institute, Municipal Association of Victoria, Regional Development Victoria, Victorian Aboriginal Child Care Agency, Victorian Primary Care Partnerships and the Departments of Education and Training, Justice and Regulation, Premier and Cabinet and Economic Development, Jobs, Transport and Resources in the development of the plan.

<sup>5</sup> Family Safety Victoria, *Building From Strength: 10-Year Industry Plan for Family Violence Prevention and Response*, Victorian Government, 2017. [https://www.vic.gov.au/system/user\\_files/Documents/fv/FSV\\_Download.pdf](https://www.vic.gov.au/system/user_files/Documents/fv/FSV_Download.pdf)

<sup>6</sup> Throughout this document, the term 'Aboriginal' refers to all persons who identify as Aboriginal and/or Torres Strait Islander.

# Community Services Industry Plan

## vision

Victorians live good lives in thriving communities supported through integrated, connected and sustainable community service organisations that are recognised as the central pillars of a vibrant, inclusive Victoria.

## goals

- We provide people with genuine and meaningful choice about their lives and the kinds of support they want
- We provide holistic, integrated and wrap around supports for people
- We support vulnerable Victorians and work to break the cycle of disadvantage
- We work with people and communities to co-design and co-produce our services
- We understand our local community and its needs
- We build community resilience and social capital
- We provide a trusted voice for communities and people facing disadvantage
- We support Victorians to live good lives in their community
- We are leaders and drivers of change
- We have stable and sustainable organisations and partnerships
- We are innovative and collaborate with others to deliver the best outcomes for Victorians
- We have strong governance and leadership
- We have a workforce that is highly qualified and recognised for the work they do
- We attract and offer rewarding careers and professional pathways
- We collect and use evidence about what works and explore contemporary approaches
- We promote and support volunteering
- Our value to society, and as a contributor to the economy is recognised
- We are recognised and respected as integral to the community and considered an essential service
- Sectors within the industry are recognised for their expertise and professionalism
- We are committed to self-determination and Aboriginal communities that are empowered to make decisions about their future
- We work together with government and other partners to continually enhance the service system to deliver the best outcomes for Victorians
- We support the sustainability of Aboriginal Community Controlled Organisations

## our aspirations

## themes

Making an impact in people's lives

Strengthening capacity of the community services industry

Effective community service system architecture

Fostering the potential of all communities

## plan structure

## strategic priorities

- Embedding Aboriginal self-determination
- Emphasising person-centred services
- Co-designing and co-producing with people using our services
- Embedding evidence-based approaches
- Strengthening outcomes
- Ensuring we have the workforce of the future
- Strengthening good governance, and leadership
- Focusing on best practice regulatory frameworks
- Partnering and working together
- Funding to support flexible, person-centred service delivery
- Developing information-sharing provisions, digital technologies and innovation
- Recognising the role of community services in society
- Responding effectively to diverse communities
- Building community resilience, social capital and place-based solutions

## our principles

### **Human rights**

Community service organisations adopt human rights based approaches that respect and uphold human rights. Human rights are basic entitlements, based on the values of freedom, equality, respect and dignity, acknowledging the fundamental worth of each person.

### **Aboriginal self-determination**

Aboriginal self-determination is vital for improving Aboriginal people's health and wellbeing. The whole community services industry has a role to play in supporting self-determination.

### **Advocacy**

Community service organisations amplify the voices of people and communities and help governments identify and address complex social problems at a system level.

### **Equity, equality & inclusion**

Government, community services, community and partnerships strive to create the conditions where people can participate to the fullest extent, and promote fairness in educational, social, economic and cultural activities of life.

### **Service integration, collaboration & partnerships**

Through strong partnerships and collaboration, the community services industry improves service integration and deliver seamless services with people.

### **Prevention & early intervention**

The community service system works to keep people well and prevent people reaching crisis, by building capacity and strengthening people's and communities' resilience.

### **Whole of government industry approach**

The community services industry is a partner with government and others; we work together to ensure Victorians can lead good lives and our industry can grow and develop.

### **Innovation & adaptation**

The community services industry fosters new approaches to service delivery improving outcomes for people while adapting to changing environments.

### **Leadership**

There are strong community service peak bodies, community leaders and elders and leadership within organisations and across the community services industry that can support industry development.

### **Quality & safety**

The community services industry delivers high quality, safe services and is committed to continuous improvement in the design planning and delivery of services.

### **Diversity**

Community service organisations embrace diversity and challenge stigma and discrimination to support people in need of our services regardless of sex, gender, sexual identity, age, race, disability, cultural or linguistic background, religion or political beliefs.

### **Transparency & accountability**

Community services are transparent and accountable to our communities.

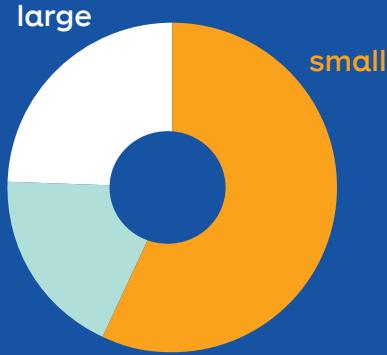
# The sector



Total number of organisations

2016  
**4689**

Organisation size



2016

Small (revenue less than \$250,000)  
Around 2,681 organisations

Medium (revenue between \$20,000 and \$1 million), 865 organisations

Large (revenue greater than \$1 million), 1,143 organisations

## Trends

Health and social services employment grew

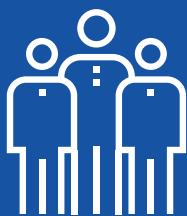
**3.9%**

per year on average between 2006 and 2016



This is compared to 1.7% across all industries

# The workforce



Total paid workforce

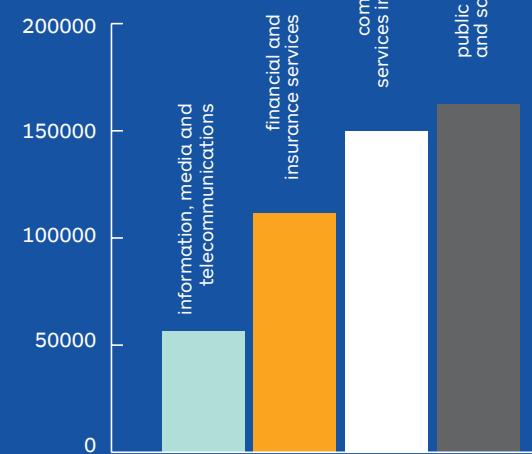
2015  
**150,000**  
2016  
**162,000**

Turnover

**35%**  
of employees indicated

they are considering leaving their workplace

Total paid workforce



Employment type



**51,600** full-time **32%**

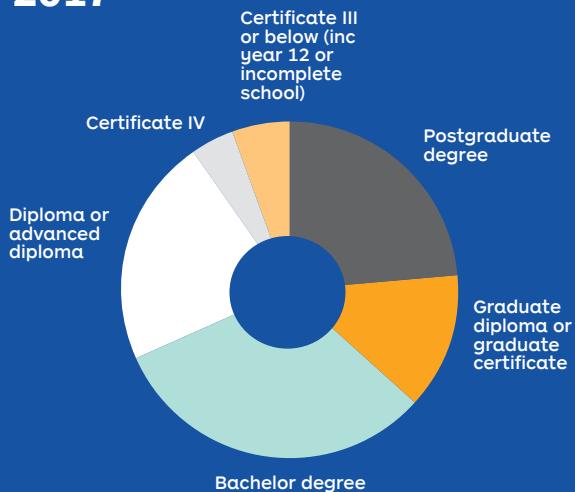
**70,900** part-time **44%**

**39,000** casual **24%**

Data sourced from Australian Charities and Not-for-profits Commission, *Australian Charities Report 2016*, <http://australiancharities.acnc.gov.au/> and Family Safety Victoria, *Census of Workforces that Intersect with Family Violence*, 2017 and DHHS and VCOSS, *Community Sector Workforce Knowledgebase Project*, 2012

# Volunteers

## Qualifications 2017



## Role 2012



**73%**

of Community Services staff work in client support roles (working directly with clients and supervising those who do)

Other job functions include: senior managers, advocacy, staff working in business units, and those working in areas such information management, human resources, policy, communications and research.

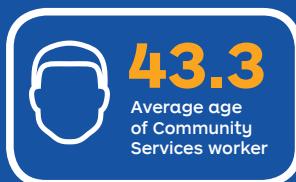
## Length of service 2012

**5.2 yrs**  
average



**3.1 yrs**  
medium

## Age 2012



## Gender split of workforce

**75%**  
are female

Males outnumber females in all pay brackets above \$60,000

## Number of volunteers

2016

**448,000**

volunteers across Victorian community services organisation

**87%** of organisations use volunteers

## Revenue

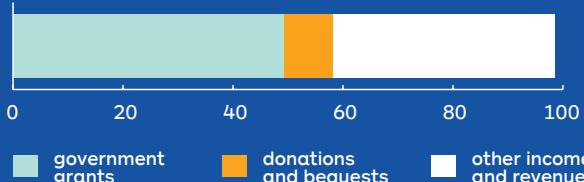
### Total industry revenue

2016

**\$14.8b** **3%** of the Victorian economy

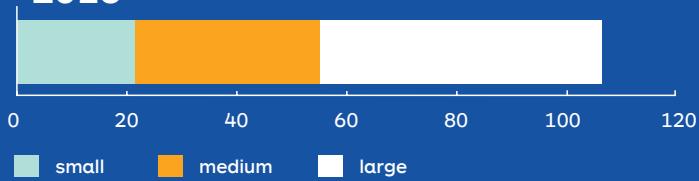
### Revenue sources

2016

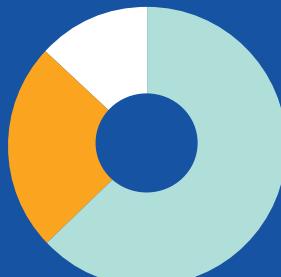


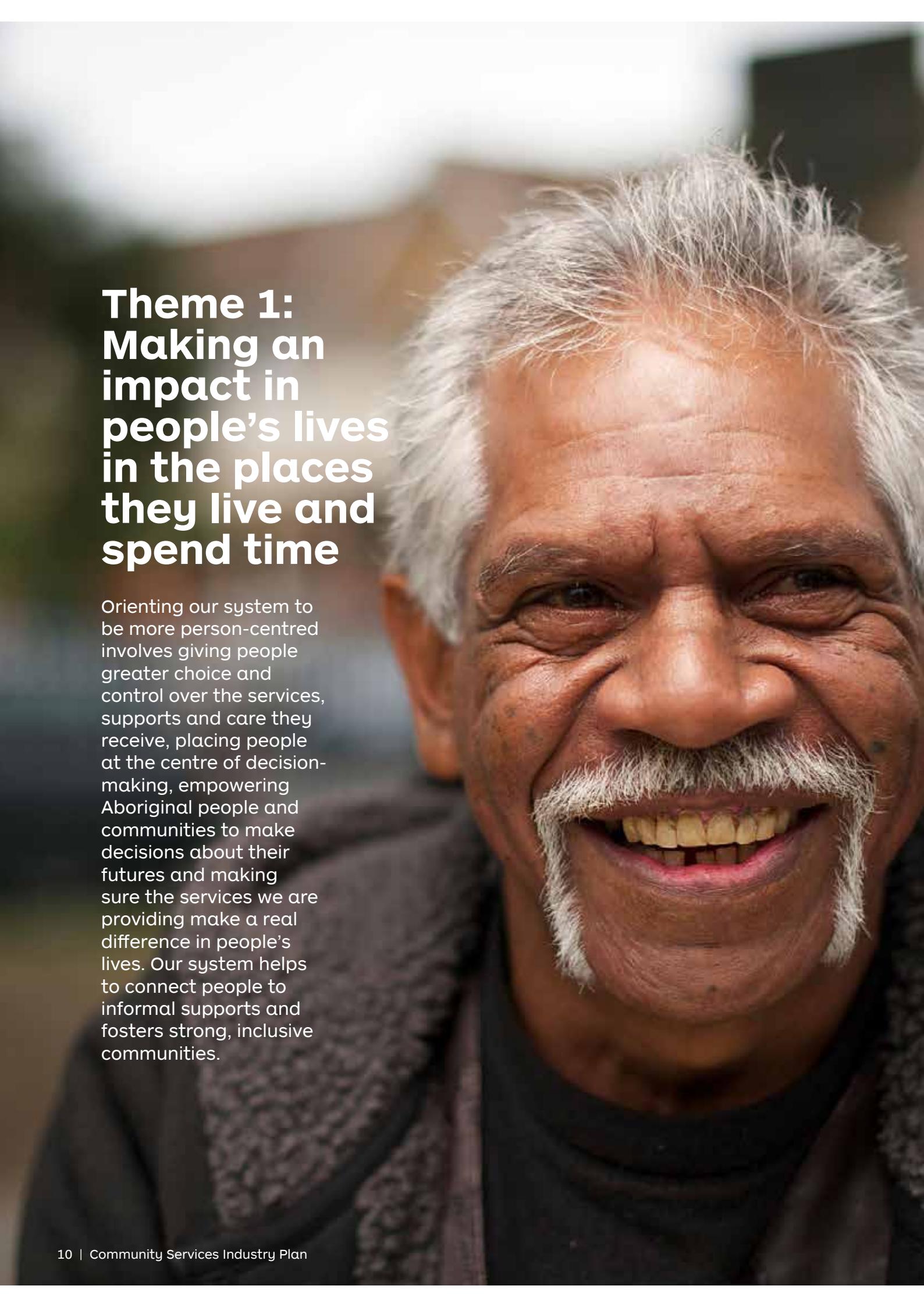
### % of revenue from government by organisation size

2016



## Budget position





# **Theme 1: Making an impact in people's lives in the places they live and spend time**

Orienting our system to be more person-centred involves giving people greater choice and control over the services, supports and care they receive, placing people at the centre of decision-making, empowering Aboriginal people and communities to make decisions about their futures and making sure the services we are providing make a real difference in people's lives. Our system helps to connect people to informal supports and fosters strong, inclusive communities.

# Embedding Aboriginal self-determination

The National Aboriginal Community Controlled Health Organisation (NACCHO) defines self-determination as: “The ability of Aboriginal people to determine their own political, economic, social and cultural development as an essential approach to overcoming Indigenous disadvantage”.<sup>7</sup>

Aboriginal self-determination is a human right, as detailed in the United Nations Declaration on the Rights of Indigenous Peoples, of which Australia is a signatory.

Aboriginal Victorians have long called for self-determination as the way to improve health, wellbeing and safety outcomes. That call is strongly supported by Australian and international evidence, showing that a policy of self-determination is the most effective way to deliver sustained improvements in health and social outcomes for Indigenous peoples.<sup>8</sup>

In the context of the health and human services system, self-determination means that, rather than Aboriginal people being ‘engaged’ or ‘consulted’ as ‘advisors’ or ‘co-designers’ of services and policies, they are authorised and empowered to own, direct and make strategic decisions about the following:

- values and motivations on which a policy or program is based
- strategic intent
- policy or program design
- funding and allocation of resources
- implementation and operations
- evaluation measures and definitions of success.<sup>9</sup>

The UN Declaration of the Rights of Indigenous Peoples and Article 3 says:

Indigenous peoples have the right of self-determination. By virtue of that right they freely determine their political status and freely pursue their economic, social and cultural development.

*Wungurilwil Gapgapduir* is the Aboriginal Children and Families Agreement that formalises the partnership between the Victorian Government, Aboriginal communities and the children

and families services sector. The agreement also formalises the commitment of these bodies to Aboriginal self-determination as the basis for improving outcomes for Aboriginal children and families.

*Wungurilwil Gapgapduir* embeds a commitment to the transition of services for Aboriginal children and families to Aboriginal Community Controlled Organisations, as well as commitment to the Aboriginal Children in Aboriginal Care initiative to transfer guardianship responsibility for Aboriginal children in care to Aboriginal community controlled organisations.

In 2014 the Victorian Auditor General explored the experiences of Aboriginal Victorians accessing mainstream services and identified the following barriers to service:

- a lack of culturally safe services
- a lack of awareness that services are available
- racism
- shame and fear
- complex administrative processes
- affordability.<sup>10</sup>

<sup>7</sup> National Aboriginal Community Controlled Health Organisation, cited in Victorian Department of Health and Human Services, *Korin Korin Balit-Djak: Aboriginal health, wellbeing and safety strategic plan 2017–2027*.

<sup>8</sup> L Behrendt, M Jorgensen & A Vivian, *Self-determination: Background concepts – Scoping paper 1 for the Victorian Department of Health and Human Services*, UTS Jumbunna Indigenous House of Learning, Sydney, 2016.

<sup>9</sup> Victorian Department of Health and Human Services, *Korin Korin Balit-Djak: Aboriginal health, wellbeing and safety strategic plan 2017–2027*, Melbourne.

<sup>10</sup> Victorian Auditor General, *Report into accessibility of mainstream services for Aboriginal Victorians*, 2014.

# community services industry plan

SNAICC (the national peak body for Aboriginal and Torres Strait Islander children) has developed the 'Partnership Training Manual' and the 'Partnership Audit Tool'. These are resources focused on creating, supporting and sustaining genuine inter-agency partnerships in service delivery for Aboriginal and Torres Strait Islander children and families. The partnerships training manual focuses on relationships between organisations and the processes that support and facilitate those relationships. The manual is specifically designed to support partnership leaders and 'champions' within organisations wishing to develop and strengthen partnerships in child and family service delivery. Partnerships are essential to better outcomes for Aboriginal and Torres Strait Islander children and families.

## What we heard from stakeholders

**Self-determination:** There was strong recognition that supporting and enabling Aboriginal self-determination must be a key pillar of the Community Services Industry Plan.

**Land and culture:** The plan should recognise that connection to language, spirituality, country, family and the community are central to Aboriginal identity and contribute positively to the lives of Aboriginal people.

**Community control:** Aboriginal people are best placed to design and deliver services that meet the needs of their own communities. Handing control back to communities can create real and lasting change but requires ongoing sustainable funding.

### Role of mainstream

**organisations:** The community services industry has an active and important role in encouraging Aboriginal self-determination by supporting the sustainability of Aboriginal Community Controlled Organisations (ACCOs) and support for Aboriginal staff in mainstream organisations.

**Cultural safety:** Developing a culturally safe service should be core business and an ongoing process – organisations need to constantly reflect on their policies and practice and make change as a result.

## What should we have by 2028?

- A strong Aboriginal community-controlled sector adequately resourced with a skilled Aboriginal workforce that responds effectively to the needs of their communities and determines the nature of community service delivery across the whole sector.
- An Aboriginal community-controlled sector driving the agenda, supported by strong partnerships with mainstream community service organisations, underpinned by a governance structure that is Aboriginal community driven.
- A qualified, skilled and expanded Aboriginal workforce across mainstream community service organisations and ACCOs.
- A culturally responsive service system in which the non-Aboriginal workforce is skilled and qualified in the importance of culture, country and community to Aboriginal health, wellbeing and safety, achieved by working with Aboriginal communities to design and deliver culturally responsive services.

## Priorities for the next one to two years

- In consultation with providers and communities, plan for resources and responsibility to ACCOs as part of a self-determined transition of services.
- As committed to in *Korin Korin Balit-Djak*, support Aboriginal self-determination by prioritising Aboriginal-specific funding to Aboriginal organisations so services address their communities' health and wellbeing needs and aspirations.
- Department of Health and Human Services (DHHS) develops and implements a *Cultural Safety Framework* to help mainstream organisations and workplaces provide culturally safe environments for all Aboriginal staff and all Aboriginal people accessing and receiving services.
- Accessible cultural safety training is available for mainstream organisations.
- Mainstream organisations will evaluate their cultural safety training and measure change.
- Develop or make available partnership resources and tools to develop, implement and maintain genuine partnerships between Aboriginal organisations and mainstream community service organisations.
- Ensure that cultural competency requirements are assessed by Aboriginal people and organisations.
- Build the evidence-base of what works for Aboriginal communities, including alternative service delivery models.

## Longer-term priorities

- Put in place culturally safe service standards for all mainstream services, with an accountability framework to ensure adherence.
- Implement workforce development initiatives, identified in the Aboriginal Workforce Strategy, that support recruitment, retention and career development of Aboriginal workers.

## Key facts

- Victoria's Aboriginal population is growing at a much faster rate than the non-Aboriginal population, increasing 12 per cent between the 2011 and 2016 Census.
- The Victorian Aboriginal population is young: 55 per cent are aged 25 years or under compared to 32 per cent of non-Aboriginal Victorians.
- Aboriginal children are more than 14 times more likely than non-Aboriginal children to be in out-of-home care in Victoria. A majority continue to be placed with non-Aboriginal families.
- Aboriginal Victorians are four times more likely to be homeless than non-Aboriginal Victorians.
- Aboriginal people are 2.4 times more likely to have a disability than non-Aboriginal people.
- 88 per cent of Aboriginal children in out-of-home care in Victoria have experienced family violence.

Source: *Korin Korin Balit-Djak: Aboriginal health, wellbeing and safety strategic plan 2017–2027*

Led by Aboriginal national peak bodies and the Australian Council of Social Service (ACOSS), Aboriginal organisations and mainstream community service organisations have committed to a set of actions and principles for a collaborative approach between Aboriginal and Torres Strait Islander and mainstream organisations, that recognise

Aboriginal organisations for their unique role in building community capacity and participation in the provision of essential services. Where Aboriginal and Torres Strait Islander organisations are willing and able to provide a service or development activity, mainstream organisations will not directly compete but seek to partner where appropriate.

# Emphasising person-centred services in the places people live

People who are supported by the community services industry can have complex needs which are often multi-faceted and require support from more than one program or support area.

The design of the current service system tends to lead to a ‘one-size-fits-all’ response or requires people to piece together individual programs to get the support they need. It can also be a confusing system: difficult for people to make sense of and find out what supports are available. There is often no opportunity for people to exercise choice or control.

Person-centred support is a way of considering an individual’s pathway through life and all of the influences on a person’s health and wellbeing. Starting with children and their families and continuing through the different stages of life, it is a way of designing services and broader community supports in the wider context of people’s lives to achieve long-term outcomes.

By thinking about individual pathways, person-centred support will take account of the interplay between universal and specialised support. Where a person’s needs are complex, consideration of how the range of services and supports are effectively coordinated, also becomes important.

Person-centred support provides accessible, responsive and flexible services that meet the needs and preferences of people and their carers in a holistic manner. The person is at the centre of the decision-making process and has a high degree of choice in and control over the support they need.

Person-centred support will also involve linking people to all of a community’s resources – not just targeted or universal services, but also the resources that exist within every community and neighbourhood. Professional services and supports will increasingly interact and intervene with peer networks and informal supports to strengthen safety, resilience and recovery.

Person-centred support can have a big impact on the quality and efficiency of care. It helps people be more engaged, motivated and empowered to make decisions about their own lives.

## What we heard from stakeholders

**Definition:** A model for person centred services needs to be developed to demonstrate how services will be informed by evidence and personal goals so they are effectively tailored to respond early and at an individual level. Such a model should ensure:

- People can get the help they need when and where they need it.
- There is no ‘wrong door’ to entering the service system.
- Information about services is easily available and culturally appropriate.
- The services system is easy to navigate and provides support for service navigation when needed.
- The service system ‘wraps around’ people according to their wishes.
- People actively participate in decision-making to their maximum ability.
- People have genuine choice and real control over how services are delivered.
- Broader community supports and social networks are involved. They surround people 24/7, physically and, increasingly, virtually.

**Collaboration:** No single organisation or program can provide all the services required to achieve all the desired outcomes for a person, so collaboration between services is critical to providing person-centred support. Factors that inhibit collaboration between services include funding and policy silos, competition between organisations for the delivery of programs and the associated funding, and concerns about for-profit service providers promoting profit over service quality.

**Resourcing:** The resources required for person-centred support are greater than can be provided under some current funding programs. In particular, funding needs to cover sufficient time with service users to develop plans, tailor services and supports and collaborate with others. Flexible and adequate funding would facilitate this. This should cover:

**Outputs vs outcomes:** Current targets that focus on service levels (for example, number of appointments) rather than client outcomes (for example, improvements in health and wellbeing) inhibit the development of person-centred services.

**Workforce skills:** Community service workers and workforce groups are likely to require additional skill development opportunities, including for joint training across specific sectors, so they can confidently provide person-centred services.

**Waitlists and demand:** High demand can inhibit person-centred care. If an organisation has a queue or waiting list of people, all of whom are in need, workers are less likely to be able to properly get to know and engage with individuals.

**Existing practice:** Many organisations provide person-centred care, although at different stages of development and with different approaches. Opportunities should be identified to showcase and share resources about existing good practice.

**Increased co-location:** Being located with other services, particularly in a specialist hub, can facilitate collaboration, shared intake and assessment between service providers, thereby improving person-centred care.

**Cultural focus:** Meeting the social and cultural needs of service users is essential. For example, providing person-centred support for Aboriginal people must consider the person's culture, language, family, kin and community in developing care plans and goals, as well as connecting various services and supports.

**Capacity building:** Support is needed for people to authentically participate in decision-making about their own care. As well as providing assertive outreach to engage people, services need funding and expertise to help people build health literacy, navigate service systems, advocate for their needs, and plan their care.

## **Co-design and participatory approaches:**

Involving service users in program design and delivery is critical to developing person-centred services. Consumer participation needs to be fully integrated into the service, not something that is ad-hoc or added-on. It should include participation at all levels including service design, organisational governance and the integration of peer and other practical supports.

# community services industry plan

## What should we have by 2028?

- The workforce is highly innovative and specialised in the delivery of person-centred services, guided by evidence and person-centred design.
- Leadership is focused on person-centred opportunities and collaboration is the norm. This is reflected in how programs are delivered.

## How will Victorians benefit?

- Victorians will be able to access flexible and tailored support suited to their personal needs and aspirations.
- Victorians are more likely to be able to make changes that make a difference to their overall quality of life because they are experiencing services that meet their needs and are easy to access.
- Aboriginal people, families and communities will be supported in culturally safe ways to better meet their needs.
- Victorian community service organisations will continually improve the way they deliver services by better responding to people's needs, being more collaborative, and incorporating the findings from pilot projects in service delivery and industry development.

## Priorities for the next one to two years

- Develop a set of industry principles and guidance about person-centred services to enhance understanding of what works for service users.
- Actively promote cultural awareness and safety for Victoria's diverse CALD and Aboriginal communities.
- Support the development of a range of capabilities across the industry that enable person-centred service delivery, including collaborative working, workforce capability, common assessment and intake, data collection, and information sharing.

## **Longer-term priorities**

- Embed person-centred services and mindset into service design and practice.
- Embed person-centred approaches and mindset in all professional and industry development activities.
- Develop the evidence-base for person-centred service models and practice through research and evaluation, and use findings to improve the experience and impact of services.



# Co-designing and co-producing with service users

**Co-design involves coming alongside people who experience vulnerabilities, to work with them in creating interventions, services and programs which will work in the context of their lives, and will reflect their own values and goals.<sup>11</sup>**

Historically, service provision has not been driven by people's needs. This has led to a service system that is often designed more for government and service organisations than for those who use it.

Service users rarely enter the system energised and ready to begin solving problems. To respond to this, it is vital that services recognise that people are not all the same, their views are formed by experience, and experiences are different. Ethnicity, cultural background, ability, sexual orientation, gender identity, religion and age all coalesce to contribute to a person's identity.

This is why services and supports need to be universally accommodating as well as tailored to specific needs. Intersectionality recognises that all of a person's characteristics must be considered when designing services as these intersecting characteristics create added complexity. The co-design process aims to achieve this goal by bringing together the

experiences of both the consumer and service provider to better meet everyone's needs. Service users and their communities influence, advise and contribute to the design of services, programs and responses.

Co-design requires going beyond the usual approaches of seeking feedback from people using services or asking them to rate their satisfaction. It embeds respect for service users and:

- brings people together and helps capture the essence of the service experience from multiple perspectives<sup>12</sup>
- works collaboratively with service users and providers to identify, test and ensure services work well for the people who use them
- generates new ideas to change processes, policies and environment
- builds ongoing collaboration and trust in a cycle of feedback, reflection and change
- results in tangible change and impacts.<sup>13</sup>

Co-production is an overarching term that can be broken down into specific activities or stages of service development and delivery. It encompasses:

- co-design (including service planning)
- co-decision-making (including about allocation of resources)
- co-delivery (of services)
- co-evaluation (of services and outcomes).<sup>14</sup>

While organisations can work alongside service users – incorporate 'co-' activities – at all or some stages of their work, only 'co-production' covers a shared process from beginning to end.<sup>15</sup>

## What we heard from stakeholders

### **Service user engagement:**

Service users want a much more active role in the development and design of services (co-design) as well as other elements of co-production. At an individual level, people want services that listen to them, as experts in their own needs, and that allow them to achieve their goals in the ways they want. They also want to participate in decision-making at all levels, including at the systematic level through advisory bodies and governance models.

### **Challenges to engagement:**

Opportunities for co-design and co-production are limited by a range of factors, including long waiting lists, limited hours of operation, inconvenient locations, complexity of services, high staff turnover and varying levels of commitment by services.

### **Peer workforce and peer support:**

Service users stressed the importance of peer support roles. People with lived experience can bring greater empathy and understanding to services. Developing a peer workforce is also a priority; people with lived experience should be engaged as both employees and volunteers in community service organisations, and work at all levels including reception staff, in personal support, as case managers and board members.

**Mental Health Victoria**, the peak body for mental health services, provides a suite of training products aimed at the **development of the mental health peer workforce**. A strong peer workforce builds better services because it holds valuable expertise arising from direct knowledge of mental illness and can share experiences of personal recovery with consumers.

The **Health Issues Centre** provides a consumer voice in health in Victoria and fosters meaningful partnerships between health consumers and the Victorian health sector. The centre offers a number of courses including a co-production in services workshop, a three-day course in consumer leadership and a course for consumers in clinical governance. These courses **strengthen the role of consumers in health services**, giving people the knowledge and skills they need to play an active role in the development, design, delivery and governance of services, all of which make services work better for people who use them.

## Priorities for the next one to two years

- Identify strategies that enable co-design and co-production of services and support, including sharing definitions and disseminating good practice examples. The strategies should respond to the cultural context for Aboriginal people.
- Develop and implement workforce training in co-production that is available and accessible.

## Longer-term priorities

- Embed co-production and co-design into government and industry policies and practice.
- Measure, evaluate and disseminate the effectiveness of co-production and co-design through trials and pilots.
- Establish and/or further harness the potential of formal organisations and structures to enable consumer involvement and consumer driven service design.
- Embed co-production and co-design as principles in all professional and industry development activities.
- Develop the peer workforce and peer education models, including strategies to support the employment of people with lived experience in all aspects of the community services industry (e.g., governance, administration and direct service delivery).

## What should we have by 2028?

- People with lived experience, people using services and/or people who have used services are directly involved in all aspects of service design and delivery.
- Peer-led services are an important and valued part of the community services industry.
- Both the industry and people who access services have the capacity and mechanisms to realise, foster and embed co-production in all aspects of industry functions and operation.
- There is no 'one-size-fits-all' approach to service delivery, with services adapted to local contexts and diverse local groups.
- The knowledge of co-production is highly evolved, with continued development of the concept and its application guided by evidence.

## How will Victorians benefit?

- Victorians, including those from diverse communities, will receive services that are responsive to them and their needs.
- Victorians will experience improved service quality as co-design and co-production approach is embedded. Services will continually improve this approach by listening more to service users and incorporating evidence into service delivery and industry development.
- Victorians will have their rights respected in co-designed services.
- Through co-design, Aboriginal people, families and communities will experience services that are culturally safe and better meet their needs.
- Victorians will have confidence that community services as an industry and system have their best interests at heart.

<sup>11</sup> Victorian Council of Social Service, *Walk alongside: Co-designing social initiatives with people experiencing vulnerabilities*, VCOSS, July 2015, available at [http://vcoss.org.au/documents/2015/08/Codesign-paper-Jul15\\_Final.pdf](http://vcoss.org.au/documents/2015/08/Codesign-paper-Jul15_Final.pdf)

<sup>12</sup> Adjunct Prof Paresh Dawda and Dr. Andrew Knight, *Experience based co-design - a toolkit for Australia*. accessed at [www.prestantiahealth.com](http://www.prestantiahealth.com) on 6 February 2018

<sup>13</sup> Adjunct Prof Paresh Dawda and Dr. Andrew Knight *Experience based co-design - a toolkit for Australia*. accessed at [www.prestantiahealth.com](http://www.prestantiahealth.com) on 6 February 2018

<sup>14</sup> S Pollock, 'Shifting the power: are we ready to embrace the full potential of co-production?', *Insight*, edition 15, VCOSS, Melbourne. June 2016

<sup>15</sup>Ibid.

# Embedding evidence-informed approaches

Evidence-informed decision-making and practice should be at the heart of the service system to provide services that are high quality, effective and can demonstrate improved outcomes. However, there are many barriers to evidence-informed approaches in Victorian community services.

All types of evidence, such as administrative and program data, outcomes data, service-user feedback, research, evaluation and analytics, can be used at every level of the service system to help:

- understand the problem we are trying to address
- choose an appropriate response
- determine whether the chosen response had the intended impact by measuring outcomes.

All this information contributes to building an evidence base that enables high quality decision-making and helps to address increasing service demand, complex needs and limited resources.

A commonly accepted definition of an evidence base is:

**The integration of best research evidence with practice expertise and client values.<sup>16</sup>**

This definition suggests that evidence-informed practice should draw on multiple sources of evidence, be likely to achieve better outcomes for service users, and align to their values and preferences.<sup>17</sup> This definition also acknowledges that we cannot solely rely on evidence-based interventions and that practices, processes and systems must also be informed by evidence.

To move towards an evidence-informed service system, we need to explore opportunities to improve:

- the way evidence is used
- the quality of the data collected and evaluations undertaken
- the capability and capacity of the industry to embed evidence into process and practices.

## What we heard from stakeholders

**Lack of coordination:** Data collection, research and evaluation across the industry is not well coordinated. This inhibits the sharing and use of evidence by community service organisations seeking to embed evidence in their programs.

### Prescriptive guidelines:

Program guidelines are not necessarily based on evidence. For example, funding for specialist homeless services is short-term and driven more by rationing than by evidence of what works.

**Local/cultural contexts:** Some programs, although evidence-based, are not appropriate for all locations or for particular population groups (for example, Aboriginal or culturally and linguistically diverse communities). Programs need to be adapted to the local context.

### Research translation:

Community service organisations do not always have the capability or resources to translate evidence from academic research or program evaluations into practice.

**Emerging evidence:** Innovation and agility are important characteristics of community service organisations, enabling them to respond to emerging priorities for which the evidence base is non-existent or still developing. Innovative services need to embed evaluation from their commencement.

<sup>16</sup>Adapted from the Institute of Medicine, *Crossing the quality chasm: A new health system for the 21st century*, National Academy Press, Washington, 2001.

<sup>17</sup>An excerpt from the Centre for Evidence and Implementation, *Framework for a menu of evidence-informed programs and practices. Consultation paper for discussion*. Prepared for the Victorian Department of Health and Human Services 2017.

## Priorities for the next one to two years

- Identify gaps in the community services industry evidence base and the industry's capacity to collect, analyse and translate evidence.
- Develop community services evidence strategies for the industry to address capability gaps and embed the use of evidence in service delivery and practice.
- Develop a mechanism to share, translate and disseminate evidence relevant to the community services industry.
- Develop data linkage capacity to more effectively measure outcomes and for research.

## Longer-term priorities

- Identify and make recommendations for the use of 'big data' in the community services industry using government and research datasets for analysis, strategic planning, targeting services and measuring outcomes.
- Embed strategies for evidence-informed practices and programs.
- Develop a robust evidence base by addressing identified evidence gaps, prioritising research and evaluation of services and including experiences of service users.
- Build effective partnerships between community service organisations, research bodies and communities to promote collaboration, build capability and address research priority areas.
- Develop a coordinated research approach for the industry, in partnership with research bodies and government.
- Develop strategies to include client experience of services in the further development of the evidence base.
- Build the capacity of senior leaders and workers in the industry in evidence-informed practice.

## What should we have by 2028?

- There is a robust evidence base for the community services industry.
- There is a strategic approach to building the evidence base and embedding the use of evidence across the community services industry.
- Research priorities are developed collaboratively between the community services industry, research bodies and government.
- The community services industry operates in a collaborative environment that promotes the sharing of evidence.
- High-quality evidence is available to community service organisations, including outcomes data, research and evaluation, and evidence on best practice.
- Organisations are able to translate evidence into practice, with support available when needed.
- Evidence-informed practice is embedded into community services policy, programs and processes.

## How will Victorians benefit?

- More effective services that can demonstrate improved outcomes and the impact of services on people's quality of life and wellbeing.
- Services will support people when and how they are needed to improve outcomes.
- Funding will be directed to services that are evidence-informed.
- Evidence-informed services will help deliver support before people's problems escalate.

**Sacred Heart Mission's Journey to Social Inclusion (J2SI)** used a **randomised control trial** to evaluate the effectiveness of a three-year pilot that provided intensive support designed to break the cycle of long-term homelessness. The evaluation used a randomised controlled trial to track and compare the outcomes of the J2SI participants with those of an equivalent group of long-term homeless people who were supported by existing services.

The evidence from J2SI shows that breaking the cycle of long-term homelessness is possible and that intensive support coupled with stable housing can reduce demand on expensive health, justice and welfare services. However, some of the successes and improvements were not sustained and some individuals subsequently became homeless once J2SI support ended.

# Strengthening outcomes

To make a real impact on people's lives, it is vital that we shift from just measuring what is delivered – such as the number of hours of service provided to individuals and families – to a greater focus on what is achieved, for example in relation to health, safety or education outcomes at an individual, service or population level.

This represents a move to an outcomes-based approach to the way services are structured and delivered, the way program data is collected, and how success is measured.

Outcomes need to be stated in plain, positive and compelling language and be specific enough to be measured. Defining, measuring and working to achieve outcomes is central to creating a more targeted, innovative and effective community services system.

A clear focus on outcomes:

- encourages service providers and users to identify what is important, including their end goals
- enables the effectiveness of programs and policies to be measured, at both the individual and service system level, to better understand what is and isn't working
- becomes a basis for service providers to adjust and improve their services as they better understand what works, where, when and for whom
- identifies gaps in services or policy changes required at the population level
- helps build the evidence base for the community services industry about the best ways to support people and communities.<sup>18</sup>

## What we heard from stakeholders

**Defining outcomes:** Coming to agreement on which outcomes should be measured can be difficult, as different stakeholders may be focused on achieving different outcomes. Service users need to participate in identifying and articulating the outcomes to be measured for them.

**Data collection:** Although a lot of data is already being collected, much of this measures outputs, not outcomes, and is not comparable across time or funding streams as reporting requirements differ for each program. Governments and funding bodies request a lot of data, but often do not provide adequate data back to organisations.

**Attribution:** While services can influence an individual's outcomes, there are also many other influences, so attributing long-term outcomes to specific interventions may be difficult, especially when clients are supported by a service for only a brief time.

### Funding and outcomes:

There was concern around the industry's readiness for tying funding to outcomes, and the potential for outcomes-related funding models to lead to perverse incentives.

## What should we have by 2028?

- The service system is achieving positive outcomes for people at local, service organisation and population levels.
- The impact of community services is consistently measured and reported, based on outcomes rather than solely on activities and outputs.
- There are consistent and accepted approaches to measuring outcomes, which are jointly defined by those who use the service, community organisations and government.
- We understand how services are affecting outcomes for clients, and can chart impacts at the organisation, service system and population levels.
- Accountability for achieving outcomes is shared by government and community organisations.
- Data collection is streamlined, efficient and integrated with IT systems and organisational processes, and effectively measures outcomes without over-burdening organisations.

<sup>18</sup>S Andrews, 'Strengthening outcomes', In P Ramcharan and S Thompson (eds), *Community services of the future: An evidence review*, Future Social Services Institute, Melbourne, 2018.

The **Victorian public health and wellbeing outcomes framework** provides a transparent approach to monitoring and reporting progress to improve the health and wellbeing of Victorians. The outcomes framework includes a comprehensive set of indicators drawn from multiple data sources. These indicators track whether our combined efforts are improving the health and wellbeing of Victorians over time.

## Priorities for the next one to two years

- Develop a holistic and consistent approach to defining and measuring outcomes across the community services industry, incorporating input from those who use services, by building on existing outcomes approaches.
- Streamline and integrate outcomes data collection and sharing across the industry and with government.
- Undertake a change management process for the community services industry's transition to an outcomes approach.

## Longer-term priorities

- Embed the use of a holistic and consistent approach to defining and measuring outcomes across the community services industry.
- Develop the capacity of the community services workforce to create shared understanding, strong capability and support for using a consistent outcomes approach.

- Resource allocation methods and funding mechanisms are more strongly linked to outcomes performance.
- The service system adopts a fundamental focus on outcomes, following a well-managed change process that includes adequate workforce development.

## How will Victorians benefit?

- Victorians will receive better quality of service from the community services industry as an outcomes approach is embedded. Services will be continually improving as they adapt in line with the evidence that is generated from measuring outcomes.
- With better evidence of what works, for whom, and why, the community services system will be able to provide effective support for people at the right time. Ideally, this will result in fewer people falling into crisis and needing more intensive support.
- Community services industry resources will also be directed to where they have the most impact. Services will be able to clearly demonstrate their impact, and ensure that investment in community services is efficient and provides high value for the community.



## **Theme 2: Strengthening the capacity of the community services industry**

To build the industry and workforce of the future, we need a pipeline of highly skilled, professional workers, and a clear pathway for emerging leaders, who will guide community service organisations through the challenges ahead.

# Ensuring we have the workforce of the future

The Victorian healthcare and social assistance industry (which includes most community services) employs about 402,000 people and is the state's largest industry by employment.<sup>19</sup> It has also experienced the fastest employment growth of any industry in Victoria; in the five years to 2015, jobs in this industry have increased by 62,000.<sup>20</sup> This growth will continue, with an additional 78,000 healthcare and social assistance jobs projected by 2022, an almost 19 per cent increase.<sup>21</sup> The community services workforce is expected to grow at similar, if not greater, rates.

At the same time, broader trends in employment could impact on the industry, including trends towards shorter hours and more insecure work, plus the growth of labour hire and 'third party' agencies.<sup>22,23</sup>

The community services industry sees its workforce as committed, compassionate and highly skilled. Over the next 10 years the industry will change and grow significantly.

Creating workforce growth, maintaining and enhancing workforce quality and developing the new skills and qualifications needed to deliver high quality, person-centred services requires careful planning. It must take account of the broad spectrum of occupations across community services and build a pipeline of workers with a wide range of skills to meet growing demand in the professions as well as for the delivery of practical supports. Planning must also consider the immense role played by volunteers across the community services industry.

To ensure the industry is ready for change and its impact on the workforce, a collaborative, industry-wide approach to workforce planning and development is needed.

## What we heard from stakeholders

**Availability:** The community services industry workforce needs to grow to meet future demand, and be better distributed to give all Victorians access to services. While pay and conditions play a substantial role in attracting and retaining workers, there is a lack of knowledge about the industry in the general population, making it harder to attract applicants to

vacant positions.

**Capability:** Through training and support, workers and organisations need to build the skills, capabilities and structures (e.g., workforce planning, supervisory supports, career pathways) required for a better-performing, integrated system. The education and training system needs to develop so graduates better meet the needs of the industry.

**Integration:** The current service system can be fragmented with 'silied' workforces, which prevents Victorians from being able to seamlessly access the full spectrum of services they require. Funding silos contribute to service fragmentation, as does pre-service vocational education and training.

**Casualisation:** Work in the community services sector is often casual or fixed term, which is a disincentive for the sector to invest in training and provides little long-term certainty for workers. The short-term nature of many funding contracts contributes to this, as does other uncertainty relating to individualised funding and competition for clients.

<sup>19</sup> Australian Bureau of Statistics (Feb 2018), Labour Force, Australia. Detailed, Quarterly Cat. No. 6921.0.55.003.

<sup>20</sup>Ibid.

<sup>21</sup>Australian Government Department of Employment, Labour Market Information Portal, <http://lmip.gov.au/>.

<sup>22</sup>Australian Bureau of Statistics (2017), Labour Force, Australia, September 2017, Cat. no 6202.0, ABS, Canberra.

<sup>23</sup>Australian Bureau of Statistics (2016), Characteristics of Employment, Australia, August 2016, Cat. no 6333.0. ABS, Canberra.

# community services industry plan

The **Careers in Community Services & Health Program** run by the Geelong Region Local Learning and Employment Network **raises awareness among school-aged young people** of the community services and health industry. It aims to interest more young people in the Geelong region to work in community services and health, including those who may experience social or educational exclusion. The Program promotes pathways through VET in Schools or School-based Traineeships into further education, training or employment in the community services and health industry. Raising awareness of the employment prospects in community services and identifying pathways to employment assists the industry to meet the growing demand for workers.

## What should we have by 2028?

- The community services industry is the industry of choice for job seekers, particularly in rural areas, because it provides:
  - rewarding career opportunities
  - secure employment
  - good pay and conditions.
- The workforce is person-centred, high quality, safe and capable.
- The workforce reflects the community in its diversity and taps into under-represented labour sources in community services such as people with disability, people with lived experience, Aboriginal people, people from culturally and linguistically diverse backgrounds and young people.
- Community services workplaces are culturally safe for Aboriginal people.
- Volunteers are connected, valued and recognised.
- Workers have adapted to the cultural changes in the industry and adopted practices to support person-centred service delivery.
- Staff and volunteers are supported to manage their own mental health and emotional wellbeing, including dealing with vicarious trauma.

## How will Victorians benefit?

- Service users will benefit from high quality, well qualified and skilled workers.
- Employment pathways for Victorians seeking work in the industry will be clear, with secure employment and opportunities for career progression.
- Victorians will have enhanced job opportunities to work in one of the fastest growing industries in the state.

## Priorities for the next one to two years

- Examine the development of a robust, accessible industry-wide dataset on the community services workforce, comparable across sub-sectors and tracked over time.
- Use industry workforce data to plan and implement industry recruitment, retention and workforce development strategies.
- Develop initiatives with schools, VET providers and universities to support workforce supply, including in regional areas, that:
  - build pathways to the industry through increased partnerships with schools, the VET and university sectors
  - ensure that funding settings and policies allow for low-fee or fee-free training to meet specific, targeted or rapid spike needs and wrap-around supports for vulnerable learners wanting to enter the industry
  - develop qualifications, curriculum and teaching practice to meet emerging needs in conjunction with the industry and people with lived experience
  - build the diversity of the workforce by targeting groups with low representation
  - streamline placements of students into the industry.
- Develop and begin to implement a regional workforce development strategy and an Aboriginal workforce development strategy.
- Ensure community services workplaces are culturally safe for Aboriginal employees.

## Longer-term priorities

- Develop statements and assessments that map the capabilities critical for universal, secondary and tertiary services of the future. Provide support to individual organisations to map the capabilities of their own workforces against these statements.
- Create formal partnerships with the VET and higher education sectors to align their research efforts with the knowledge base of what works and use this to influence course design, teaching and placement programs.
- Work with industry partners to build a highly skilled and professional community services industry workforce.
- Develop worker quality assurance for the community services industry.
- Develop strategies to encourage people with lived experience to become community services industry employees and to support them in their roles.
- Build professional development opportunities to upskill existing staff in the industry.
- Promote pathways to volunteering in the industry, e.g., volunteer coordination.

# Strengthening governance and leadership in organisations

To continue to meet community expectations and people's needs, the community services industry will need to undergo significant change, placing responsibility and pressure on boards and organisational and industry leaders to be adaptive and to manage ongoing change in the social, economic and policy environment.

Community service organisations are mainly well-governed and achieve outstanding results. One of their strengths is that they endeavour to represent the communities they serve, including through governing bodies that reflect community diversity. Strong organisational governance and leadership practice is vital for achieving the overall vision for community services and maintaining a sustainable and strong industry. It is particularly important during periods of transition to ensure not only continuation of services and activities, but to ensure services remain connected, effective, safe and high quality. Industry leaders, including chief executive officers, board members, managers and other organisational leaders must have the skills to:

**Plan and organise:** Focus on future directions and adapt to change under community services industry planning. Establish an organisational vision and plan for sustainability by anticipating and responding to factors that shape the future of the sector.

**Monitor, review and develop:** Oversee operations to ensure compliance, monitor budgets and manage risks. Fill gaps in skills and capabilities.

**Collaborate:** Communicate and work effectively with others, such as with the communities that organisations serve, key partners and other relevant stakeholders.

**Be agile:** Quickly adapt to changing environments and lead the workforce in the changes.<sup>24</sup>

Additionally, boards must have the skills to:

**Be strategic:** Develop and implement the organisation's strategic directions and goals.

**Drive quality improvement:** Monitor outcomes and embed quality systems to ensure organisations deliver high quality, safe and effective services.

**Be effective and accountable:** Ensure that governance processes support all aspects of decision-making and that decisions are ethical and respect confidentiality.

For the community services industry to be sustainable and high quality, industry leaders must be able to draw on emerging innovations and trends to pursue new opportunities and drive innovative practice. The Victorian community services industry mainly consists of small

and medium sized organisations – 57 per cent have an annual revenue of less than \$250,000 and 19 per cent have a revenue between \$250,000 and \$1 million.<sup>25</sup> Therefore, it is especially important that small and medium sized organisations are able to adapt in the future and have the governance and leadership to support them.

## What we heard from stakeholders

### Leadership development:

Participants identified this as a gap in the industry and highlighted the need for organisations to recruit or grow leaders with skills in change management and resilience. Collaborative cross-sector leadership development from a range of sectors would be valuable. This could include mentoring, conferences, networking events, research projects and collaboration on innovative projects.

**Evidence:** There is also a lack of evidence to guide good governance and leadership in the community sector, supporting organisations to transition in the new environment.

**Board training:** Having trained, skilled board members is crucial for organisations' sustainability and effectiveness; however, training is expensive and difficult to access for regional and rural people.

<sup>24</sup>H Dickinson 'Governance and Leadership' In P Ramcharan and S Thompson (eds), *Community services of the future: An evidence review*, Future Social Services Institute, Melbourne, 2018

<sup>25</sup>Victorian Council of Social Service (VCOSS), *A growing industry*, VCOSS, 2017, available at <http://vcoss.org.au/document/a-growing-industry/>.

**RMIT FSSI Executive Masterclass:** The Executive Masterclass Program supports community service executives and senior managers of community service organisations to adapt to the changing environment and learn new skills to benefit their organisations and clients. The masterclass helps community service leaders consider the changing context of community services and how their organisations can adapt while maintaining high quality services.

The United Kingdom's Charity Commission, **Good Governance code**, developed in 2005, was substantially revised in 2016 and a new toolkit was released in 2017. The code was developed following a call from community service organisations for greater guidance around best practice in governance. The code is not a legal or regulatory requirement. It is a practical tool to help community service organisations boards engage in continuous improvement towards higher standards. Such practical tools can assist community organisations improve their governance capability.

## Priorities for the next one to two years

- Develop strategies to coordinate and build capability of established and emerging community services industry leaders, including through peak bodies.
- Provide accessible governance training and support for boards, including by continuing to support organisations that currently help to build governance capacity, and giving priority for regional communities.
- Develop stronger connection between DHHS and boards.
- Identify and develop resources on good corporate and quality governance in the community services industry, including a review of the existing governance resources.

## Longer-term priorities

- Ensure high quality and accessible corporate and quality governance training is conducted for all community service organisation boards.
- Recognise and share exemplary leadership capability and achievement from other industries.
- Develop a capacity building program that promotes service user participation in service governance and training for potential consumer representatives about governance responsibilities and skills.
- Promote research on governance and leadership in the community services industry.
- Identify a mechanism for organisations to secure pro bono assistance, building on the Justice Connect legal pro bono model, in areas like accounting, change management, and business planning; and support the development of these skills within organisations.

**Board recruitment:** It is particularly difficult in regional areas to find people willing and able to serve on boards, so qualified people often sit on multiple boards. The preference for skills-based boards can make it harder for local community members or people with lived experience of services or disadvantage to serve, leaving organisations at risk of losing the local knowledge and understanding that these board members can bring. Building the skills base and capacity of local community members would broaden the pool of people from which board members can be recruited.

**Representation:** There is growing evidence to suggest that more diverse organisations and greater diversity in senior leadership positions and boards enhances the performance of organisations. Diversity can take a number of different forms including geography, sex, race and ethnicity. Board membership also builds community understanding of the industry and of community service organisations. Community service organisations could do more to ensure service users are encouraged and supported to participate in organisational governance.

## What should we have by 2028?

- Community services industry leaders have the vision, skills, capacity and networks to draw on emerging innovations and trends, recognise new opportunities and determine priorities for their organisations and the industry.
- There are clear pathways for advancement for emerging and developing community services industry leaders from a diverse range of backgrounds and experiences.

- Community services leadership training is affordable and accessible. The community sector has a streamlined set of standards for corporate and quality governance.
- High-quality governance ensures the community services industry is operating at the forefront of best practice and innovation.
- The boards of community service organisations are highly skilled and have diverse membership; they are supported through induction processes with information on roles and responsibilities and have access to training and specialist expertise when required.
- Service users are supported to have an increasing role in organisational governance and in ensuring organisations and boards remain connected to local communities and those who use their services.
- Boards understand service users and their communities.

## How will Victorians benefit?

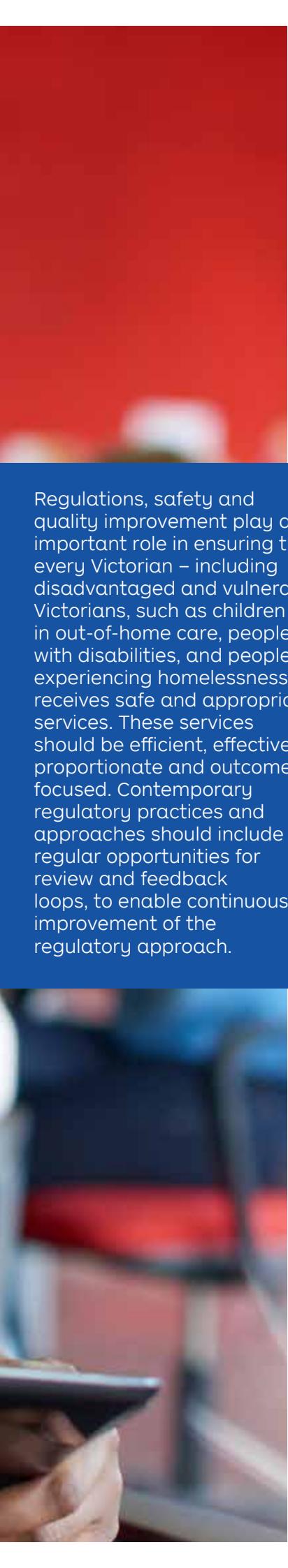
Stronger leadership and governance in the community services industry means that organisations will be better equipped to provide safe, high quality, more innovative services to the Victorian community.

- Community members will have greater influence on the organisations that serve them as boards begin to reflect the diversity of the people they represent, including those with lived experience.



## **Theme 3: Effective community service system architecture**

Appropriate and sustainable funding and regulatory arrangements will help enable the community services industry to fulfil the vision of the Industry Plan. Sharing information, embracing innovation and working collaboratively will help deliver better integrated and joined-up services for Victorians.



# Focusing on best practice regulatory and quality frameworks

Regulations, safety and quality improvement play an important role in ensuring that every Victorian – including disadvantaged and vulnerable Victorians, such as children in out-of-home care, people with disabilities, and people experiencing homelessness – receives safe and appropriate services. These services should be efficient, effective, proportionate and outcomes focused. Contemporary regulatory practices and approaches should include regular opportunities for review and feedback loops, to enable continuous improvement of the regulatory approach.

## Regulations

Regulatory frameworks generally refers to obligations that are a result of legislation (such as the *Children, Youth and Families Act 2005*), regulations (such as the Children, Youth and Families Regulations 2017), and associated legislative instruments (such as the Human Services Standards gazetted as Department of Health and Human Services Standards).

The community services industry in Victoria is undergoing significant legislative and regulatory changes, including transitioning to the National Disability Insurance Scheme (NDIS), the introduction of minimum compulsory child safety standards, and the establishment of a reportable conduct scheme to better protect children from abuse and child-related misconduct.

## Contracts

As well as meeting regulatory framework obligations, community services are also required to meet obligations that may be the result of funding and contractual arrangements. When obligations from these different elements intersect, there may be duplication and cumulative impacts on community services, such as varying reporting requirements.

## What we heard from stakeholders

The sector has provided feedback on both regulatory obligations and non-regulatory contractual obligations such as reporting requirements. In summary, this feedback relates to:

### **Reporting burdens and ‘red tape’:**

There is widespread concern that reporting requirements are burdensome and not related to scale of service or risk. Community service organisations are facing growing levels of regulatory burden across federal and state levels, due to the large number of current reform processes, including the NDIS, aged care reforms, primary health networks and family violence reform. Each new process brings with it additional reporting and regulation requirements, often introduced in silos instead of building on existing frameworks.

**Duplication:** Different, duplicated and contradictory reporting and accreditation processes are imposed via multiple standards, acts and regulations. Compliance imposes a significant cost on organisations, in both money and valuable staff resources, taking them away from frontline service delivery.

**Ad hoc requests:** A lack of clarity on reporting requirements, often until the end of the funding period, means community service organisations risk collecting the wrong data and information.

Funding bodies need to provide clear expectations and guidance about information requirements and data collection.

# community services industry plan

## What should we have in 2028?

- Obligations, both regulatory and contractual, are streamlined where appropriate to minimise reporting duplication and allow services and government to focus their time and effort on achieving outcomes for Victorians.
- Reporting requirements for both regulation and contractual management are commensurate with risks to achieving desired service outcomes, such as Victorians having access to high quality, appropriate and safe services.
- Data and feedback is made available to services and the broader industry to allow them to meet internal reporting obligations, continue to improve service delivery and planning, and undertake benchmarking.
- During the development of new regulatory schemes or changes to existing schemes, the industry is able to advise on the potential regulatory burden likely to occur and opportunities to streamline obligations.

## How will Victorians benefit?

- Victorians will have access to services that are safe and have strong quality oversight.
- Reduced ‘red tape’ will allow services to focus more on service users.

## Priorities for the next one to two years

- DHHS will work with industry to develop options to minimise regulatory duplication and unnecessary state level regulatory burden. This includes advising on an appropriate balance between the collection of meaningful data from organisations for reporting and compliance purposes and streamlining data collection by using it for multiple purposes.
- Develop and provide clear compliance-related assistance and advice such as guidelines, education and training, to support the industry to respond to regular and ad hoc information requests.

## Longer-term priorities

- Work with the Federal Government and other states to encourage recognition of a set of consistent standards, such as the Human Services Standards, preventing the need for multiple accreditation processes for organisations across jurisdictions.
- Review reporting guidelines and requirements, to ensure that systemic issues are being identified and responses monitored appropriately.
- Investigate regulatory options and incentives that encourage continuous quality improvement, recognise good compliance records and support innovation.
- Work with the industry to explore information technology and digital innovation solutions to enhance capacity across the community services industry to share data more effectively and efficiently.



# Partnering and working together

**People seeking help from the community services industry often experience multiple and complex needs, impacting on their life in a range of different ways.**

Due to a range of factors such as funding, culture, policy and program design, community services can be fragmented and are often difficult for people to access, understand and navigate.

Responding to that complexity with integrated care involves the provision of seamless and effective support that takes into account all of a person's health and wellbeing needs, in partnership with the person and their family. Community service organisations can work together to identify and address the range

of needs that enable people to live a good life and engage in their community. Coordinated and integrated services mean people will find it easier to access services when they need them and therefore be more likely to receive early, preventative support before problems reach crisis levels or become entrenched and intractable.

Partnering and working together to provide seamless support to people needing services is multi-faceted and can occur at a number of levels, including:

- the organisational level: where organisations work effectively with each other through partnerships and consortia
- the functional level: such as sharing back office support, intake, and client records
- the service or program level: through providing integrated/multi-disciplinary teams

- the clinical or person level: where care is integrated in a single and coherent process that wraps around the person requiring service.<sup>26</sup>

There can also be a continuum of coordination and integration, as outlined in the following table.<sup>27</sup>

There are a number of enabling factors for coordinated and integrated support, including government/policy integration – based on the recognition that wellbeing is beyond the responsibility of any one program – and integration with regional and local planning.

Regional and local planning integration includes mapping community assets and needs, developing an integration plan, and simplifying access to services through single entry points.<sup>28</sup> An important focus is the linking of specialist services with mainstream or universal services.<sup>29</sup>

Autonomy	Cooperation	Coordination	Collaboration	Integration
Agencies act without reference to each other, although the actions of one may affect the other(s).	Agencies establish ongoing ties and provide limited support to an activity undertaken by the other agency. Communication and sharing information is emphasised. Requires a willingness to work together for common goals, goodwill and some mutual understanding. Examples include learning and information sharing networks and open access to each others' facilities and services.	Separate partners plan the alignment of their activities. Duplication of activities and resources is minimised. Requires agreed plans and protocols or the appointment of a coordinator or manager. Examples include the appointment of a hub coordinator to provide strong links between existing child care services, or developing joint funding proposals for new coordinated programs.	Partners put their resources into a pool for a common purpose, but remain separate. Responsibility for using the pooled resources is shared by each of them. Requires: - common goals and philosophy - agreed plans and governance - agreed administrative arrangements. Examples include the establishment of shared service centres or developing joint management structures.	Links between separate agencies draw them into a single system. Boundaries between the agencies dissolve as they merge some or all of their activities, processes or assets. Examples include preventative or community-based place management programs. It can also involve the merger of similar agencies to form a single larger organisation.

## Working with our clients

Agencies work with clients without reference to other agencies who may, or could, be involved. Referrals may occur, but it is largely between the client and the next service to determine their work/relationship, if any.	Agencies share information through networks and other means so they understand what others can offer, actively refer clients, might work together to conduct a program for common clients/client needs.	Agencies working with a similar target group undertake joint planning around needs of the target group, unmet needs and may form a consortium or partnership to plan and fund new or extended services to meet these needs. Agencies may also consider their own operations and processes and how these work together to impact clients; agree to streamline their own, or develop common processes (such as a common assessment tool) to benefit clients, make services more seamless.	Agencies agree to work in partnership to deliver a service to meet an identified need, at least in part, using resources they already have. They plan together; develop processes so that clients can be supported seamlessly by the group of agencies. Obviously, there has to be a high level of trust between, and accountability to, the partners for this to work.	Agencies agree to work together with the focus on the client's needs. Participant organisations agree on the "rules" around these arrangements, and to be accountable to them. New systems or processes may emerge, and the group works together to find solutions for the client. As far as possible, finding these solutions is more important than the needs or rules of the individual organisations
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## Priorities for the next one to two years

- Work with the community services industry to support the capacity and capability of the workforce and seamless pathways of support across universal and targeted support.
- Build the evidence on effectiveness of partnerships, shared services, collaborative models, seamless support, service coordination and integration approaches.
- Fund services according to criteria that recognise local knowledge, partnership and connections.

## Longer-term priorities

- Develop alternative approaches to funding and financing services and programs that acknowledge the importance of partnerships and local connections.
- Embed the capacity of universal and community service organisations to work together for streamlined client responses by:
  - developing referral pathways for universal and community service organisations
  - determining the requirements of the best model/system components
  - mapping existing infrastructure; for example, Support and Safety Hubs and other emerging or aligning infrastructure across health
  - identifying governance structures (accreditation/affiliation/professional bodies) to strengthen capability and capacity.

## What we heard from stakeholders

### Role of universal services:

Universal services, like schools, hospitals and early learning providers, are often the first point of contact for people and families experiencing disadvantage. Professionals in these services need skills to identify the range of complex issues people may be experiencing, undertake assessment of risk and needs, and respond with appropriate support and referrals.

**Referral pathways:** The community services system often lacks clear referral and care pathways for people. Individual organisations don't always know what is available or how it can be accessed for people needing help. Service mapping can be piecemeal and poorly understood by service providers.

**Competition:** Funding models that include competitive approaches, such as tendering processes and market-based models, can act as a disincentive to collaboration and integration. Organisations competing with each other for funding are less likely to undertake joint planning and share information.

## What should we have by 2028?

- Community service organisations work together and with universal services, volunteer and advocacy groups, peer networks and local community governance structures to ensure integrated responses and better outcomes for people.

- The service system infrastructure promotes seamless services for people – service users do not need to worry about from who or where the support is coming.
- The community services industry, government and other stakeholders, including service users, provide system oversight and respond to improve integration and coordination.
- The value of system coordination is recognised and measured.
- The service system infrastructure is designed in a way that supports organisations to provide integrated and coordinated services.
- The service system is designed with people at the centre, with input from all stakeholders including consumers, industry and government.

## How will Victorians benefit?

- Victorians will be able to access support and services when and where they need them. They will know where to go for support and easily navigate the system.
- Accessing integrated and joined-up support earlier will prevent issues escalating or becoming entrenched, reduce crisis responses and improve outcomes for people.
- Victorians will know that the supports available to them are world class as increased investment and innovation drive improvements in service design and delivery, quality and safety.

<sup>28</sup>T Moore & A Skinner, *An integrated approach to early childhood development*, Centre for Community Child Health, Melbourne, September 2010.

<sup>29</sup>Ibid.

# Funding to support flexible, person-centred service delivery

When funding models are designed and implemented well in the community service system, they can contribute to better outcomes for people by addressing individual needs and supporting innovative, integrated and effective services.

The way that some Victorian community services are currently funded makes it difficult for organisations to tailor support to meet the range of people's needs. This results in people having to navigate multiple services, and encourages interventions that are short-term, disconnected and crisis-driven, rather than focused on improving outcomes for people in the long term.

There are a number of ways that funding can be restructured to support flexible, person-centred service delivery. Examples include:

- bundling existing funding streams that are currently separate, so that organisations have more choice in how to allocate the funds
- individualised funding models that allocate 'portable' funds to the service user to control how they purchase their support needs
- linking funding approaches to outcomes, to ensure people are receiving services that have the desired impact.

The evidence shows that funding models that enable person-centred services are successful when critical factors are in place: adequate funding, enough information and support for service users to make informed decisions about the support they need, and appropriate services to access.<sup>30</sup>

Implementing new funding models can bring cultural and operational changes for organisations and funders.<sup>31</sup> For example, financial systems and business models require changes to accommodate new models, and the community services workforce and organisational practices may need to adapt to a person-centred way of working. Strong sector leadership and peer support can be effective in assisting with change management.<sup>32</sup>

## What we heard from stakeholders

**Restrictive funding:** Current funding guidelines are restrictive for person-centred care and do not account for the differences between population groups or geographic areas (for example, the additional costs of travel and providing services in regional areas, and the need for long-term support for some individuals or groups of people).

**Burdensome reporting:** There are too many funding streams, each with associated reporting requirements. If people have more than one need, it can mean multiple reporting on different activities for one person. This inhibits person-centred services as organisations have to ensure that they are meeting the requirements of the funding stream, not the needs of the person.

**Individualised funding:** Concerns about individualised funding (as is being delivered now under the National Disability Insurance Scheme) included the pricing of services, the risk of organisations 'cherry picking' people who have less complex needs and are easier to support, and the limited capacity for outreach and engagement with marginalised communities. There is also concern that individualised packages depend on consumers being able to articulate and identify their needs and coordinate their support.

**Streamlining funding and pricing:** Improved flexibility in funding could be achieved by streamlining funding streams – for example, through 'broadbanding', where similar funding lines or programs are bundled into consolidated streams – alongside reforming funding guidelines to better support person-centred care. Another recommendation was to develop and implement a community services industry pricing framework that reflects the costs of providing high quality person-centred care, including all back office costs, infrastructure needs and depreciation on capital.

<sup>30</sup>C Laragy, 'Flexible person-centred funding models'. In P Ramcharan and S Thompson (eds), *Community services of the future: An evidence review*, Future Social Services Institute, Melbourne, 2018.

<sup>31</sup>Ibid.

<sup>32</sup>Ibid.

## Priorities for the next one to two years

- Government to work with sector peaks and industry to examine pricing for community services which considers the reasonable costs of person-centred service delivery.
- The bundling of funding streams will be trialled and evaluated – for example, through grouping similar activities – to encourage flexibility and promote person-centred service delivery.
- DHHS will adapt funding and accountability guidelines to ensure they reflect changes in funding and service delivery approaches to encourage person-centred service delivery.

## Longer-term priorities

- Implement evidence-based mechanisms for funding that have been trialled across the industry to promote person-centred service delivery.
- Implement funding models underpinned by the measurement of outcomes rather than the measurement of inputs and outputs.

## What should we have by 2028?

- Community services industry funding models promote person-centred services based on an individual's range of needs.
- People have access to services at the right time to address their needs.
- The funding system ensures access and interconnected support for people who have multiple and complex needs.
- Community services industry business models are sustainable and incorporate person-centred funding models. They are sophisticated in terms of decision-making and allocating funds proportionate to need.
- Business and funding models incorporate the reasonable cost of delivering effective person-centred services.

## How will Victorians benefit?

- Services will be more responsive to people's individual circumstances and needs, and will be able to offer a range of solutions under one roof.
- Greater flexibility will empower organisations to provide more effective and personalised support, which will promote earlier intervention so that in turn, fewer people falling into crisis.

**Consumer Directed Care** aged care packages are one approach to flexible funding that gives recipients and their carers more choice and control over what services they receive, and where and when they are delivered.

For example, Emma, an 83-year-old widow who received a Consumer Directed Care package, regularly attended her local church services and functions until her mobility decreased. Church members provided her with car transport until she needed more support than they could provide. She was distressed at the prospect of being unable to attend church and losing her social network.

Emma spoke to her service provider about changing her support arrangements and having a support worker accompany her to church services and functions. These changes were not able to be made, so Emma explored her options and found another service provider that was able to address her change in needs and priorities. By changing her provider and accepting a reduction in overall support hours to enable assistance on weekends, Emma was able to continue her social participation and maintain her social network.

# Developing new information-sharing provisions, digital technologies and innovation

Investment in advancing technology can improve people's outcomes by augmenting existing services, providing new ways of reaching out to marginalised populations and meeting the increasingly digital expectations of citizens.

- improved efficiency
- a mobile workforce
- stronger partnerships and networking through information sharing
- faster and better-informed decision-making.

These benefits result in financial and resource savings that can be invested into other parts of the service system.

Innovations in technology will also benefit the people who use services. With new digital tools, people will be able to more easily access information and link up with the services they need. They will be able to have a more streamlined and efficient experience of the service system. Technology can also help overcome barriers of distance – for example, for those living in rural and regional areas – and applications could also assist clients to self-manage, such as through scheduling and managing appointments.

Currently, information sharing across the community services sector is fragmented, and technology innovation and capability varies widely between organisations and sectors. The

industry will need guidance and support to make the transition to new technologies. This is especially important for small organisations that may have less capacity to invest in the required infrastructure and human resources.

Digital innovations have the potential to transform how the community services industry operates. For example, 'big data' and analytics can be used to provide insight through analysis of current and historical information to identify patterns and trends in society and communities, and predict future events such as demand for services. This can assist in service planning, development and investment in areas of high demand and service availability. Improving operability of systems and implementing cloud-based tools and infrastructure can also improve the mobility of the workforce. This is important not just for rural and regional areas, but also to support more responsive outreach and reduce the need for office-based follow up. Digitally enabled back offices offer the opportunity to complete paperwork digitally off site, look up historical notes and access databases to retrieve information in real time. This increases service user and staff safety by giving workers access to critical information on the move.<sup>33</sup>

Technology also has the potential to transform how workers grow and develop and become more effective. For example, technology could be used to facilitate supervision and coaching and enable more collaborative planning. As

clients enter and move through the system, technology could also facilitate the sharing of information on risks and needs.

## What we heard from stakeholders

**Interoperability:** Inconsistencies in IT systems across the industry make information sharing, electronic referrals and data analysis difficult. IT systems within and across community service organisations and government need to talk to each other.

**Ageing IT infrastructure:** Substantial infrastructure costs prevent the development and implementation of new information sharing platforms and digital technologies.

**Privacy and consent:** Concerns about privacy and consent have been a barrier to asking for and sharing information between organisations.

**Human interface:** Digital innovation cannot replace the essential 'face-to-face' relationships needed to assist people in seeking help and taking steps to improve their wellbeing. Digital innovation also requires skilled people with the capability to support true innovation.

**Efficiency:** Technology has the potential to increase efficiency for community service organisations by streamlining reporting and data collection requirements. It can help avoid doubling up of information collection, and prevent people falling through the cracks by sharing information about risk and access.

<sup>33</sup>Future Social Service Institute, Community Services of the future: An evidence review, January 2018

**Medway Youth Trust** is a small charity with 55 staff members in the United Kingdom, invested in predictive analytics software to identify young people at risk of unemployment after leaving school. The charity provides advice and guidance to young people who are at risk of disengagement from employment, education or training to help them through education and work.

## Priorities for the next one to two years

- Conduct an IT and information systems situational analysis across the Victorian community services industry to understand the legacy, systems and issues organisations face.
- Develop advice on options for an interoperability framework for client databases across the system.
- Build the capacity of the community services industry in digital technology opportunities through training and dissemination of good practice.

## Longer-term priorities

- Develop a community services industry IT strategy to enhance the industry's capacity for digital innovation and generate improvements in technology and service operating models.
- Explore options for developing shared client records across the health and community services industry (e.g., expansion of My Health Record).
- Develop new technological innovations in the community services industry.
- Develop capability in 'big data' and analytics to guide decision-making in the community services industry.
- Explore options for innovative mobile apps and technological solutions that improve service accessibility and empower service users.
- Investigate and trial innovative approaches that use new digital technologies for service delivery.

## What should we have by 2028?

- Improved information sharing and record-keeping enables integrated and targeted services without the need for people to tell their story multiple times.
- People experience a streamlined service system and find services and information to be easily accessible.
- The industry has embraced digital innovations and modern, linked-up IT systems to improve efficiency, access and outcomes for people.
- Organisations use technology to help more people access support and overcome barriers, including remoteness to service delivery. At the same time, the 'human interface' that is crucial to building trust with community services remains.
- Organisations and government departments share service user information and data horizontally and vertically across the system. Data is stored securely, shared, analysed and used in planning to improve prevention and early intervention and respond to disadvantage.
- Community service workers have access to real-time information, improving their capacity to provide timely and appropriate responses, and improving safety for them and the people they support.

## How will Victorians benefit?

- People will have more control over their own information and greater choice of the services that would meet their needs.
- People will be able to access services more easily as digital technologies enable greater access, and enhanced information sharing means organisations will be better able to respond to their needs.
- The use of data analytics will generate better insights into services and the problems they address, leading to better decision-making by governments and community services and resulting in more effective services.
- People will be less likely to 'fall through the cracks' as risks will be better understood and responded to earlier.

A photograph showing three people working in a vibrant community garden. In the foreground, a man with grey hair and a woman wearing a straw hat are bending over, tending to plants. Another person's hand is visible on the right, holding a large metal watering can. The garden is lush with various flowers and leafy green vegetables. A wooden planter box is visible in the background.

## Theme 4: Fostering the potential of all communities

The community is a central pillar of a vibrant, thriving Victoria. Thriving communities are those in which people are engaged, resilient and connected, and where their diversity is recognised and embraced.



Where people live and spend their time (their community, workplace, school or other setting) affects their health and wellbeing. The conditions in which people are born, live, work and age are intimately linked to place and recognised by the World Health Organization as the major cause of avoidable and inequitable health conditions.<sup>34</sup>

Some communities are more resilient and able to thrive, while others experience deep and entrenched disadvantage and need support to find solutions.

Resilient communities are able to cope with and manage change, stress and shock. This can include resilience to:

- individual circumstances, such as family breakdown, mental illness and drug or alcohol abuse
- community-level events, including social unrest, unemployment or other economic challenges
- drought, bushfire or flood.

Resilience-building has been the core focus of community services for decades, seen as a major protective factor for both individuals and communities in times of personal and external stress and trauma.

## Building community resilience, social capital and place-based solutions

The evidence is also compelling that the social connections and relationships we form at an individual and community level impact on health and wellbeing. Social isolation – that is, feelings of loneliness, and having small social networks and low level of community participation – has been associated with poorer outcomes.<sup>35</sup> Social networks provide the infrastructure for social interaction and are a protective factor for all people, but especially those facing poverty and disadvantage. They can prevent personal or family problems and crises and, in turn, reduce reliance on tertiary services.

The Victorian community services industry itself provides an important role in building social networks and participation through supporting volunteering. The vast majority of Victorian community service charities (3,877 or 86 per cent) are supported by unpaid volunteer workers.<sup>36</sup> Community service organisations reported an unpaid volunteer force of about 486,000 people.<sup>37</sup>

Place-based approaches are defined as ones that aim to help communities deliver local solutions to entrenched poverty and disadvantage by bringing local people, community organisations, businesses, government, and public services together. People work together to design and deliver innovative initiatives that address local gaps and build on strengths. They tap into opportunities present in their communities and address specific challenges, drawing on the rich body of evidence to work towards short and long-term goals.

Place-based approaches develop and implement community-driven local solutions to build resilience and social capital as well as achieve health and wellbeing outcomes. They respond to complex issues in a way that suits local needs and conditions, drawing on local, state and national resources.

Effective place-based approaches recognise that, like most other jurisdictions, Victoria is too diverse for a ‘one-size-fits-all’ model when tackling complex issues of disadvantage.

Not all local solutions are place-based approaches and not all existing services and programs would shift to a completely place-based approach.

<sup>34</sup>Commission on the Social Determinants of Health, *Closing the gap in a generation: Health equity through action on the Social Determinants of Health*, World Health Organization, Geneva, Switzerland, 2008.

<sup>35</sup>VicHealth, *Opportunities for social connection: a determinant of mental health and wellbeing*, 2005, available at <https://www.vichealth.vic.gov.au/media-and-resources/publications/social-inclusion-as-a-determinant-of-mental-health-and-wellbeing>

<sup>36</sup>Victorian Council of Social Service (VCOSS), *A growing industry: A snapshot of Victoria's community sector charities*, VCOSS, Melbourne, 2017.

<sup>37</sup>Ibid

# community services industry plan

A review of the evidence found the common elements that are shared in place-based interventions are:

- All relevant stakeholders being engaged to foster collaborative decision-making.
- A partnership-based approach between all stakeholders including the community services industry, the broader community, businesses, other supportive organisations and government.
- A particular emphasis on developing local skills and capacity building.
- Services and systems that are willing and able to learn and adapt.
- Adequate time, investment and resourcing focusing on long-term outcomes.

## What we heard from stakeholders

### **Under-valuing prevention:**

The work of community service organisations in building community resilience and social capital, and therefore intervening before issues escalate into crisis, is not widely recognised.

### **Volunteer recruitment:**

Community resilience is often built by engaging volunteers in activities, yet the resulting participation and community connectedness are not measured and therefore not valued, funded or encouraged by decision-makers. It is also getting harder in Victoria to recruit volunteers and the existing volunteer workforce is ageing.

**Duplication of effort:** Some communities report multiple place-based partnerships in a single location, leading to duplication of effort and costs both money and time. Rather than create new place-based initiatives, existing partnerships should be used to develop and better integrate any new place-based activities.

**Inflexible funding:** Existing funding models are not flexible enough to allow for proper, responsive, place-based approaches. Dedicated funding to support place-based systems and services is needed. Smaller organisations, in particular, can find it difficult to participate without financial support.

### **Community control:**

Governments should avoid imposing place-based initiatives on communities. Ideally, they should emerge through community leadership and

collaborative decision-making by community members, informed by government insights and data. Community members have knowledge of their communities not available to often remote decision-makers in government and non-government bodies. Success will be maximised when community and government values and priorities are aligned and the evidence for action is compelling.

**Long term approach:** Evidence points to the need for long-term development approaches to build place-based responses to achieve outcomes. The development of partnerships, the involvement of people with lived experience in decision making and solutions, and agreement on goals and development measurable targets all take time. Investment in place-based approaches needs to be long-term for them to be able to achieve good demonstrable outcomes.

### **Short term evaluation:**

Evaluations for place-based approaches are often short-term. Evaluation methods need to address five critical elements lacking in previous evaluations: causality, theory of change, attribution, residential mobility, and cost effectiveness.<sup>38</sup> Lessons from successful place-based approaches need to be shared across the state.

<sup>38</sup>S Wilks, J Lahausse & B Edwards, *Commonwealth place-based service delivery initiatives: Key learnings project*, Australian Institute of Family Studies, Canberra, 2015.

## Priorities for the next one to two years

- Recognise and support the role of community service organisations in designing and delivering prevention programs that target the causes of disadvantage; support organisations that mobilise communities to participate in place-based responses.
- Showcase existing place-based initiatives that are making a difference and establish a repository of information.
- Map place-based initiatives in Victoria and learn from these to inform future place-based models.
- Establish a process to build evidence and facilitate the adaptation, replication and scaling of local service initiatives where appropriate.
- Develop actions to better connect/integrate referral networks and community development activity with service responses.
- Develop the ability of community service organisations to prepare for, respond to and recover from emergencies, for themselves and people who use their services.

## Longer-term priorities

- Advance place-based approaches to respond more flexibly, effectively and efficiently to local needs including emerging issues, and taking a preventative approach.
- Demonstrate the value of place-based approaches so they are recognised by the community, ensuring long-term investment and stakeholder buy-in.
- Measure people's participation in community and their connectedness as part of an outcomes approach.
- Undertake comparative evaluation of and research into existing place-based initiatives to further develop the evidence base.
- Measure and report on outcomes from place-based initiatives.

- Communities are engaged, with high rates of volunteering and participation in community activities.

- Community members help develop solutions to social problems by mobilising local action to support social and economic participation and developing innovations in service delivery.
- The community services industry promotes people's participation in community life.
- Community service organisations have strong links to and are embedded in their communities.

## How will Victorians benefit?

- Victorians will be able to access holistic, better integrated services and local supports that improve outcomes for people when they need them.
- Service planning and decision-making will enable tailored responses to local needs and conditions.
- Entrenched social and economic disadvantage will be addressed, leading to reduced crime and better opportunities for employment, education and housing.
- Strong and resilient communities will be able to recover quickly from disaster.
- Community members will have high levels of social connection contributing to personal health and wellbeing.

## What should we have by 2028?

- Place-based approaches to services, community development and strengthening informal networks of support are embedded and integrated.
- Community partnerships tailor local solutions that are developed and implemented to meet issues and goals.
- The strengths of local communities are leveraged effectively, to mobilise community action and ensure services exist where people need them and are responsive to emerging issues.

# Recognising the value of the community services industry

**Victoria's community services industry is vibrant and mature with a proud history of supporting and empowering people who are experiencing a range of challenges. The industry is a diverse collection of community service organisations and people who all have the common goal of enabling every Victorian to be safe and healthy and to live a life they value.**

The industry has strong connections to other industries and services, such as those in education, health, economic development, justice, police, local government, transport, utilities, infrastructure and employment. It reduces social disadvantage and increases productivity by improving inclusion, addressing inequality, promoting wellbeing, reducing health and welfare costs, enabling and empowering people and communities, and building resilience and social cohesion.

Yet the industry is often undervalued, largely due to the challenge of measuring its economic and social contribution and outcomes, and to perceptions of it as 'draining the public purse', rather than ensuring and enhancing community wellbeing.

It should be recognised and valued as an essential and growing industry, providing vital services for the many Victorians who will need support at some stage in their lives.

As outlined earlier in this plan, the community services industry is a major contributor to the Victorian economy, contributing around \$15.0 billion in 2015-16.<sup>39</sup>

Its role as an employer is particularly important. The Victorian healthcare and social assistance industry (which includes most community services) employs about 412,000 people and is the state's largest industry by employment<sup>40</sup> – similar in size to the transport industry.<sup>41</sup>

Community services alone employed an estimated 161,000<sup>42</sup> people – mostly women – in Victoria in 2016, with approximately 448,000 volunteers.<sup>43</sup> That is a bigger workforce than other key industries such as mining, energy, water and waste, wholesale trade, information technology, media and telecommunications, financial and insurance services, real estate services, and arts and recreation.

Due to population growth, an ageing population and the implementation of the National Disability Insurance Scheme (NDIS) and multiple other government reforms, the industry is projected to be one of the fastest growing industries in the state<sup>44</sup> – with annual jobs growth for 2017-2027 forecast to be 3 per cent.<sup>45</sup> It needs to attract a diverse, skilled and qualified workforce in locations where jobs are expanding.

## What we heard from stakeholders

**Workforce:** The Victorian community services industry is large, complex and rapidly growing. To ensure a workforce of the future, it needs to be recognised and resourced as an employer of choice so it can attract the best and brightest.

**Valued contribution:** Better investment in and goodwill about the community services industry will accrue when all stakeholders – including members of the public, government, business and other industries – understand and value the enormous contribution the industry makes to society, as an essential and growing industry that provides vital services to support vulnerable Victorians.

**Partnership values:** At the heart of the community services industry is the goal to improve outcomes for people in need of support. Government, private and not-for-profit partnerships should be based on such shared values.

## Priorities for the next one to two years

- Form new alliances and strong stakeholder and community partnerships to leverage resources and raise the profile of the community services industry, for example by hosting a series of industry roundtables/forums with government, university, and business partners to discuss translating evidence to recognise and value the role community service organisations plays in society.
- Sustain and strengthen existing partnership arrangements across community services to support the development of social policy in Victoria.

## Longer-term priorities

- Develop the community services industry brand and undertake marketing and communication activities to raise its profile and increase understanding of its work among all segments of the Victorian community and potential employees.
- Sector peak bodies identify partners (e.g., business) and actively promote the community services industry's contribution to society and develop approaches to influence the workforce of the future.
- Sector peak bodies and organisations establish new advocacy partners and alliances, further raising the profile of the community services industry's contribution to society and securing support and investment.
- Sector peak bodies inform State and Commonwealth data and intelligence sources to recognise and report on the defined classification of the community services industry and its contribution to society.

## What should we have by 2028?

- The community services industry is valued and recognised as an essential service in the community, equal with and alongside the police, fire services, hospitals, etc.
- The community services industry influences all levels of government and broader society, including investment and sustainability.
- The community services industry is an industry of choice, attracting a high quality, professional workforce.
- The community services industry provides high quality, safe and universally accessible services to those most in need.
- Victoria is leading Australia's thinking about innovative social policy.

## How will Victorians benefit?

- More opportunities will emerge for employment and rewarding careers, as the industry's capability and capacity building needs are identified.
- Victorians will have holistic, integrated and wrap-around supports, with strong connections to universal services.
- Victorians will have access to high quality and safe services when and where they need them, to improve outcomes.
- Community resilience and social capital will be strengthened by progressing proposals designed to achieve improved social outcomes.
- A stronger industry that is adequately resourced will better mitigate and respond to arising social issues and emergencies.

<sup>39</sup>Australian Charities and Not-for-profits Commission, data from the Annual Information Statement (AIS) 2016, available at <http://australiancharities.acnc.gov.au/explore-the-report/sector/>.

<sup>40</sup>Australian Bureau of Statistics, *Labour Force, Australia*. Detailed, Quarterly Cat. No. 6921.0.55.003, May 2017.

<sup>41</sup>November 2015 figures, Australian Bureau of Statistics, *Labour Force, Australia*. Detailed, Quarterly Cat. No. 6921.0.55.003, May 2017.

<sup>42</sup>Australian Charities and Not-for-profits Commission, data from the Annual Information Statement (AIS) 2016, available at <http://australiancharities.acnc.gov.au/explore-the-report/sector/>

<sup>43</sup>Ibid.

<sup>44</sup>Australian Government, Department of Employment, Labour Market Information Portal, <http://lmip.gov.au/>

<sup>45</sup>Deloitte Access Economics Macroeconomic forecasts, Internal Department of Health and Human Services document, 2017.

# Responding to diverse communities

The community services industry seeks to develop communities where all people can participate in the social, cultural, political and economic life of Victoria. Community service organisations therefore need to foster inclusive, engaged and harmonious communities in Victoria.

People from culturally and linguistically diverse backgrounds, including refugees and people seeking asylum, Aboriginal people, people with disabilities and people from lesbian, gay, bisexual, trans and gender diverse, intersex and queer (LGBTIQ) communities can all face barriers to participation in the social, cultural, political and economic life of Victoria. These barriers can be based on:

- lack of access to responsive services
- physical inaccessibility
- discrimination based on racism, bias, stereotypes and stigma
- low levels of English or other communication challenges
- psychological issues such as trauma.

People from diverse communities can also experience overlapping forms of discrimination, vulnerability and disadvantage, which can further exacerbate barriers to engagement and services, leading to poorer health and wellbeing outcomes.

A diverse range of community service organisations of different sizes, service models and missions may provide services to diverse populations. All need to be responsive and flexible as well as welcoming and safe to all population groups, and to meet needs in a person-centred way – that is, a way that responds to the person's religion, ethnicity and culture, language and communication, gender, gender identity, sexual identity, disability, age, socio-economic status, geographic location or visa status.

Some community service organisations do focus on specific groups; for example, some multicultural organisations are embedded in local communities and have developed long-term, trusted relationships and networks with multicultural people and communities, best placing them to work with isolated, marginalised people. Other organisations respond to the needs of a group of people – such as those with a particular disability (e.g., the deafblind community) or members of the LGBTIQ community. However, while specialist skills are vital, no single organisation can respond to the complexity of needs, many of which sit outside the scope of a specialist organisation. Therefore all organisations need to be inclusive and respond to diversity.

## What we heard from stakeholders

**Mainstream gaps:** Some 'mainstream' community service organisations were reported to lack the cultural or language skills required to engage and support migrant communities, particularly more recent arrivals. Building inclusive services requires deep cultural shifts, to embrace and respond to diversity.

**Specialist support:** People should be able to choose whether they would like to access a generalist service or a 'specialist' organisation with expertise in supporting particular cultural groups or groups of people.

**Funding and procurement:** When new funds are allocated they are perceived to favour 'mainstream' organisations rather than 'specialist' organisations. There is a lack of recognition of the relationships and trust that specialist organisations have developed over time.

**Trauma-informed approaches:** Many newly arrived refugees have suffered trauma. Community service organisations need training in trauma-informed approaches to help prevent and address mental and physical illness, social and relational difficulties, and poor academic and employment outcomes. Effective services for this group can develop trust and understanding for newly arrived refugees accessing services.

<sup>46</sup>Australian Bureau of Statistics, *Census of Population and Housing 2016*, Cat No 2002.0.

<sup>47</sup>ibid

<sup>48</sup>ibid

<sup>49</sup>Australian Bureau of Statistics, *Disability, Ageing and Carers, Australia 2015*, cat No.4430, 2016.

### **Victoria's diversity**

- Around 28 per cent of Victorians were born overseas and come from around 200 countries.<sup>46</sup>
- More than 260 languages other than English are spoken in Victorian homes.<sup>47</sup>
- A total of 47,788 Victorians identify as Aboriginal or Torres Strait Islander, an increase of 9,796 people, or around 25 per cent, in five years.<sup>48</sup>
- Almost 1.1 million Victorians have some form of disability, representing about 18.5 per cent of the population.<sup>49</sup>
- Victoria receives approximately a third of the country's refugee intake.

### **Priorities for the next one to two years**

- Develop and enhance engagement and partnership with diverse communities through, for example, the development and implementation of Disability Action Plans, and cultural engagement strategies.
- Provide access to services and information with materials produced in a range of languages and access to interpreters and translators, including Auslan.
- Investigate and improve physical access to community services for people with disability.
- Build the capacity of the industry to meet accessibility standards, including by improving access to training, resources and support on web and document accessibility.
- Develop pathways for people from diverse backgrounds to work in the community services industry through workforce development activities.
- Provide community service organisations with affordable and accessible cross-cultural training as well as training in cultural safety and trauma-focused responses.

### **Longer-term priorities**

- Support and monitor participation of diverse communities in the community services workforce, for example via a workforce census.
- Recognise and incorporate standards and quality processes that build safe organisations for diverse service users.
- Enable further improvements in physical access to community services for people with disability.
- Adopt industry-wide approaches to identifying diversity in data collection systems, to ensure data is comparable and consistent.
- Ensure funding processes incorporate participation in existing networks, partnerships and local service provision into criteria.

**Workforce gaps:** Within the community services industry, there is a lack of workers from culturally and linguistically diverse backgrounds. One of the main barriers is lack of access to appropriate training and qualifications, because of cost and inadequate support.

### **What should we have by 2028?**

- Community service organisations are welcoming and inclusive of people from diverse backgrounds, able to respond to people whatever their cultural background, preferred language of communication, religion, disability, gender or sexual identity.

- Strong specialist services are supporting specific communities, including those based on nationality, religion, disability, gender, and sexual identity, and others with demand for such services.
- Information about services is readily accessible and user-friendly, making it easier for people to navigate the industry.
- People from diverse communities make up a significant part of the community services volunteers and workforce and are empowered to participate in governance and leadership in the community services industry.
- Service delivery reflects the fact that there is no one-size-fits-all response to the challenges Victorians face.

### **How will Victorians benefit?**

- People from diverse communities will have equitable health and wellbeing outcomes.
- Victorians will be able to choose the types of services that best meet their diverse needs.
- Victorians will feel that community service organisations respect their individual circumstances and understand their lived experience.
- Services will be responsive to everyone in the community.



## **Preparing the industry for change and reform directions**

The Community Services Industry Plan seeks to guide the community services industry through the many changes and challenges it faces now and into the future.

Many of the reform processes described in this plan share the aspiration to give individuals more choice and control. However, reforms also bring with them the potential for greater competition between providers, funding uncertainty, workforce demand issues and new ways of demonstrating quality, safety and performance. Demographic changes will mean that new and increased demand will place added pressure on services. Community service organisations must remain effective, attractive and sustainable to survive the transition to embedding individualised approaches.

A range of supports and enablers will be required to help the industry through this transition. Peak bodies will have an important role to play in supporting the industry through the change process. They provide information to community service organisations about changes to government policy and programs and the broader environment in which the industry operates. Peak bodies also provide valuable advice and input to government regarding the impacts of change on community service organisations and service users and opportunities for future innovation.

Government and industry have identified the need to continue to work together, through a range of collaborative and partnership arrangements, to further develop and implement a number of policy and service system reform priorities and to adjust and adapt as the policy landscape evolves. This work will build on and complement the actions in this plan. This ongoing collaborative approach is particularly evident in the areas of: increasingly flexible, outcomes-focused funding arrangements; providing community service organisations with greater security to ensure they can operate sustainably; a staged transition to outcomes-focused performance management; drawing on evidence of what works in

designing and improving services; and new regulatory models informed by strong engagement with the industry.

Government will play an important role in helping to facilitate this adjustment. Government's position means that it is able to provide system-wide information and data to organisations to inform decision-making. Government will also continue to invest in the workforce and support strengthened governance and leadership.

Research is another key pillar that will make this plan a success. The community services industry is 'research poor.' There is a lack of evidence about how it operates, what it achieves and the best path forward for the industry.<sup>50</sup> What evidence does exist is often not robust and high quality. The industry is seldom at the top of research agendas, despite its status as the fastest growing sector in Australia. A new commitment to research and evidence will be required in the future.

New collaborations and partnerships with tertiary institutions are already being developed, which will help shape the workforce of the future. These partnerships will need to explore what skills community service workers and leaders will require, including business skills and marketing, to help them thrive in the new environment.

<sup>50</sup>Future Social Services Institute, Evidence Review, 2018.

# community services industry plan

Strong leadership and engagement from the community services industry and government will be needed to guide the implementation of the plan, and maintain the commitment to the broad cultural and systems change identified in the plan. The governance group of this plan (described below) will be a key provider of this leadership.

## What should we have by 2028?

- The community services industry is responsive to change and open to exploring new business models and cooperative arrangements to build their sustainability and improve service delivery.
- The community services industry is recognised as a vibrant world-class industry providing effective services and value for money.
- Strong peak bodies provide leadership and support the community services industry through the reforms and changes.
- Government and the community services industry remain committed to the industry planning process and the implementation of strategic priorities.

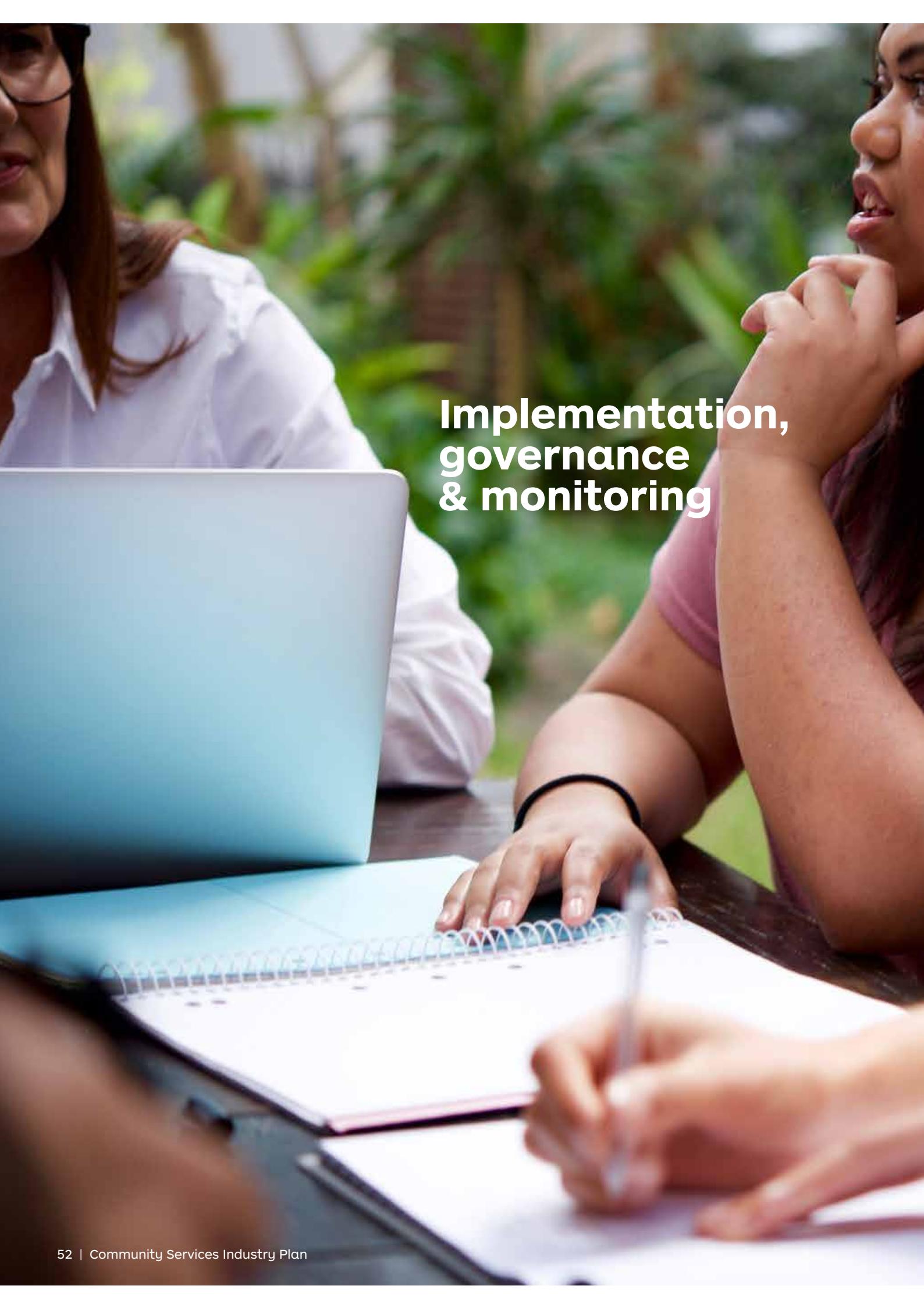
## Priorities for the next one to two years

- Explore opportunities for funding to support implementation of actions identified in the Community Services Industry Plan.
- Share information with community service organisations about the impact of future changes and reform, how the industry will need to adapt, and the support available to do so.

## Longer-term priorities

- Develop and share new business and operational models for community service organisations, based on evidence and achieving positive outcomes through integrated services, in response to new funding systems that support person-centred services.
- Build new partnerships within and across industries, and with tertiary and research institutions to help strengthen the future of the community services industry.



A photograph showing two women from the side, working together at a table. One woman, wearing glasses and a white shirt, is looking down at a laptop screen. The other woman, wearing a pink shirt, has her hands clasped near her chin and is looking towards the right. On the table between them are several open notebooks and a pen.

## Implementation, governance & monitoring

## Implementation approach

The Community Services Industry Plan (CSIP) defines a 10-year vision, priority areas and industry outcomes to achieve over the life of the plan. The next key step is to implement and monitor actions.

Given the fast-changing nature of the community services industry and the social, economic and technological contexts in which it operates, an agile and phased approach should be taken to implementing the CSIP.

This means rolling action plans that outline specific actions under the priorities; clarify roles, responsibilities and resourcing requirements; outline the timetable, milestones what will be delivered, and key performance indicators; and develop structures for continued communication and engagement with the industry.

Some actions are substantial in size and scope and will require longer than three years to fully realise. These actions have been highlighted in the longer-term priorities and will roll over to the next action plan.

## Implementation next steps

Partners including peak body members, organisations and workforces across the state will have opportunities to participate in developing and monitoring the plan and reporting on the impact of actions. The partners responsible for actions will be required to report progress to HSHPIC at regular intervals.

The next steps for the CSIP include developing the first action plan for 2018-21. The action plan will focus on key initiatives that need to be pursued in the first instance to build the industry's capabilities and capacities to achieve its goals and improve its overall sustainability, with longer-term directions in mind.

Key performance indicators will be developed to measure and demonstrate change against the plan's actions. Timelines for delivery of the actions will keep the action plan on track.

## Governance and monitoring

Implementation of the CSIP needs to be supported by good governance and leadership arrangements. HSHPIC is the governance committee that has led industry planning. It includes representatives from the industry and government, including senior leadership representation from across community services peak bodies. Implementation of the plan and monitoring and oversight will be driven through this existing structure.

**community  
services  
industry plan**