

Child Care Links Evaluation

Volume 1: Final Report

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1 Executive Summary

Introduction

- ❑ The Child Care Links (CCL) Initiative is one of the Early Childhood Initiatives under the National Agenda for Early Childhood. The CCL Initiative aims to improve the health and well-being of young children and to strengthen the resilience of their caregivers by using child care services to foster the development of child-friendly communities.
- ❑ The CCL Initiative was originally piloted at 19 sites across the States and Territories in July 2004. In late 2004 the project was extended to include the five Family Links sites in South Australia. All pilot projects were initially funded for a period of eighteen months which has since been extended until June 2006.

The CCL Model

- ❑ The CCL Model provides the theoretical framework for the application of the CCL Initiative. It aims to coordinate and integrate early childhood services in areas of high disadvantage, using Commonwealth funded child care services as community hubs.
- ❑ Each of the CCL projects is supported by a sponsor organisation that employed a CCL worker.
- ❑ The CCL worker works with families, community based organisations and services, and government agencies to implement service responses to identified gaps in the region and to link existing services.
- ❑ The CCL Model was expected to vary in operation from one community to another and to reflect local conditions, community needs and expectations.

Methodology

- ❑ The evaluation methodology employed quantitative and qualitative data collection approaches to measure both processes and outcomes for the CCL Initiative. The components of the evaluation process included a national workshop, work plan, quarterly reports (three reports), monthly activity records/calendars, site visits (two visits per site during the project period) and the development of a communication strategy.

Key Findings

- ❑ **Child care services as a community hub.** The CCL Model has shown that child care services are an effective platform from which to support families with young children.
- ❑ The CCL Model has proved to be an **effective means for developing social capital within local communities.**
- ❑ There is **evidence of progress across all sites** resulting in many outcomes relevant to the five objectives of the CCL Initiative. The degree and diversity of this work varies considerably and is a reflection of the uniqueness of the sites across the States and Territories. Some sites are already showing tremendous benefit from the project within the short period of operation, whereas other sites realise progress is going to be much slower. The pace of progress at each site is very much a reflection of the local conditions of each community such as the available resources and infrastructure.
- ❑ The **broad elements of the CCL Model were implemented across all sites.** Some CCL workers have followed the expected 'Model' of the project by community capacity building within the child care centre itself and then concentrating on external links. However there

are many variations on the application of this Model. For instance, some CCL workers have focussed less on the child care centre and more on networking local services. This difference in approach reflects the diverse needs presented by the range of communities included in the pilot. While there have been variations to the Model, it has generally been effective in achieving outcomes relevant to the project objectives across the target communities.

Types of Activities conducted by CCL workers

- ❑ The types of activities conducted by CCL workers included social events (e.g. barbeques), parent information and education sessions, staff training, the promotion and facilitation of greater networking and collaboration between local services, community needs analysis, the development of resources such as community service directories and the promotion of the importance of the early years in the local community.
- ❑ The benefits of these activities have included giving caregivers and their families' opportunities to socialise, increasing parenting skills and confidence, increasing staff knowledge and skills, networking local services, provision of activities and information relevant to community needs and increasing awareness of the importance of the early years.

Benefits of the CCL Initiative

- ❑ The CCL Initiative has been an effective means for capacity building within local communities.
- ❑ For communities, the main benefit of the CCL Initiative has been increased community awareness of the value of the early years.
- ❑ For services, the main benefits of the CCL Initiative have been more effective networking of child and family services and the development of an interagency approach to early childhood issues. There is evidence at some sites that the CCL Initiative is assisting in a cultural change in other services to an early intervention focus.
- ❑ For child care staff, the main benefits of the CCL Initiative have been an increase in the level of confidence and skills particularly around communicating with parents, greater professional development opportunities and feeling better supported in their role.
- ❑ For caregivers, the main benefits of the CCL Initiative have been a greater feeling of being welcome in child care centres, an appreciation of their views being canvassed and activities being provided that increasingly reflect their needs. There are increased educational and support activities for caregivers and more opportunities to socialise with other families. Caregivers reported feeling better informed about what is available to support them in their parenting role.

Issues for Indigenous sites

- ❑ Key achievements at Indigenous CCL sites have included the provision of staff training, the fostering of stronger links between the child care services and health clinics and schools, improved child health, development of regular newsletters, and a greater awareness of early childhood issues in the community.
- ❑ The nature of progress at Indigenous CCL sites reflects the individual context in which each community operates. Challenges facing many Indigenous sites include remote location, lack of resources and infrastructure, difficulties recruiting and retaining trained staff and a lack of transport.

- ❑ The CCL Model has worked best in Indigenous sites where the CCL has been aware of local cultural ways and the CCL worker is well supported by the sponsor, the advisory group and the local FaCS officer.
- ❑ The importance of community consultation and working at the communities' pace have been highlighted as key factors in successfully building community capacity in Indigenous communities.

Strengths of the CCL Model

- ❑ The CCL Model has proved to be an effective means for developing social capital within local communities.
- ❑ Child care services have been shown to be an effective platform from which to support families with young children.
- ❑ The CCL Model has been shown to be adaptable to the local circumstances of different communities.
- ❑ The CCL Model has been argued to be a cost effective model of funding as it links families to existing services and encourages an interagency approach which can cut down on the duplication of services.
- ❑ Having a designated worker to undertake activities related to the CCL objectives has been central to the success of the project. The discretionary funding allows the CCL worker to hold activities responsive to local community needs.
- ❑ The sponsor and the advisory group are effective means for the provision of support and direction to the project.

Limitations of the CCL Model

- ❑ Child care services often lack the resources and infrastructure to hold parent activities on site and projects can lose direction if the sponsor and the advisory group do not provide enough support to the CCL worker.
- ❑ It can be difficult to recruit and retain appropriately qualified staff for short-term projects.
- ❑ It can be difficult to encourage the involvement of caregivers and other services for short-term projects.

Factors that promote better project outcomes

- ❑ Generally, better project outcomes have been achieved when the CCL worker is located within the child care service is already a member of the local community and has both early childhood and community development skills.
- ❑ Where the CCL worker is well supported by the sponsor, the child care service, the advisory group and the local FaCS officer, better project outcomes are achieved.

Sustainable elements of the Model

- ❑ Elements of the CCL projects that have been identified as sustainable include child care staff knowledge and skills, networks that have been established between services, advisory group meetings and the maintenance of resources such as community directories.
- ❑ All sites stressed the importance of a designated worker to 'drive' the project. Without this worker, it was felt that activities generated by the Initiative would ultimately cease.

Applicability of CCL Model to other Government initiatives and strategies

- The key elements of the CCL Model could be adapted to fit within other relevant Government initiatives and strategies.
- The principles and elements of the CCL Model resonate strongly with the direction of the Stronger Families and Communities Strategy, and in particular, the Communities for Children component.

Recommendations

The CCL Initiative has demonstrated a number of benefits and indicators of success across a range of diverse communities. Based on the findings of the evaluation the following recommendations are proposed:

- Recommendation 1: Funding for the Child Care Links Initiative continue for the current sites until June 2008.
- Recommendation 2: The Minister gives consideration to the funding of further sites.
- Recommendation 3: The evaluation data collection is continued for the duration of the project.
- Recommendation 4: Further consultations be undertaken with Indigenous sites concerning the adaptation of the CCL Model to suit local communities.
- Recommendation 5: Processes be put in place to ensure that sustainable elements of the CCL projects are maintained beyond the funding period at each site.
- Recommendation 6: Any future development/extension of the CCL Model ensures the clear commitment of sponsor organisations.
- Recommendation 7: Any future development/extension of the CCL Model ensures that ongoing community consultation processes are implemented.
- Recommendation 8: That funding for any extension of the CCL Model give consideration to including sites with private/corporate child care services.
- Recommendation 9: Information be provided to the relevant training institutions concerning the profile of graduates required to work effectively in these environments.
- Recommendation 10: The principles and elements of the CCL Model be applied to other appropriate Commonwealth initiatives.

2 Introduction

2.1 Background to Project

The Child Care Links (CCL) Initiative is part of the Early Childhood Initiatives under the National Agenda for Early Childhood.

The Project aims to:

Improve the wellbeing of young children by strengthening the resilience of their caregivers by using child care services to foster the development of child-friendly communities.

There are five objectives for the CCL Initiative:

1. *Child care services have an increased role in fostering linkages between family capacity and community connectedness*
2. *Improved collaboration between child and family professionals*
3. *Caregivers of young children have increased opportunity to develop social networks*
4. *Caregivers of young children participate in activities which aim to increase their knowledge, skills and abilities*
5. *Strong linkages exist between child care services and broader community services to raise awareness of the importance of the early years*

Under the Initiative, a CCL worker was funded at each site to facilitate the development of networks and linkages between the child care service and other family and children's services. It was expected that there would be greater use of child care centres for community activities to promote community connectedness and stronger families. The projects work towards the establishment of child friendly communities, a key activity area of the National Agenda for Early Childhood.

Child Care Links was proposed as an early-intervention strategy to address the importance of the early childhood years in children's subsequent successful development. Research evidence now demonstrates that improvement on child health, development and well being is likely to impact on adolescents and adults as measured in a number of indicators including alcohol and drug use, rates of juvenile crime, rates of teenage pregnancy, graduation from high school and subsequent employment opportunities.

The CCL Initiative was originally piloted at 19 sites across the States and Territories in July 2004. In late 2004 the project was extended to include the five Family Links sites in South Australia (See **Appendix A** for the list of sites and CCL Workers). All pilot projects were initially funded for a period of eighteen months which has since been extended until June 2006.

2.2 The Child Care Links Model

The Child Care Links projects aimed to coordinate and integrate early childhood services in areas of high disadvantage, using Commonwealth funded child care services as community hubs. The CCL Model provides the theoretical framework for the application of the CCL Initiative. The CCL Model features a commitment to a community development approach to engage communities and develop and implement service models in keeping with community identified need and preference.

The CCL Model was implemented using FaCS funded child care infrastructure. This was primarily long day care but in some locations included family day care and mobile children's services. Sites were chosen to include metropolitan, rural and remote and Indigenous communities which were shown to experience disadvantage and which had at least one FaCS funded service in the area.

Each of the CCL projects was supported by a sponsor organisation that employed a CCL worker. The CCL worker worked with families, community based organisations and services (eg. community centres, child care services, schools, women's centres) and government agencies to implement service responses to identified gaps in the region and to link to existing services.

Some CCL workers were based at the child care sites, some were not. This depended on local conditions, and the service type and organisation that assumed sponsorship of the project. The CCL worker acted as an enabler to support service integration, and provide a 'road map' of services to help families access what they needed, when they needed it.

The CCL Model recognises that to develop capacity building within a community takes time. It was anticipated that the projects would be developed in the following three phases:

- Phase One: Community capacity building within the child care service itself.
- Phase Two: Community capacity building external to the child care service. The key feature of this phase was the identification and linking of existing services that would improve and strengthen family and children's resilience.
- Phase Three: Developing the Model in terms of sustainability, and capacity to maintain the network of services delivered to children and families.

2.2.1 Child Care Link Worker Activities

The CCL Model was expected to vary in operation from one community to another, to reflect local conditions and community needs and expectations.

However, it was anticipated that the CCL worker would engage in the following activities:

- Establish a working relationship and mutual understanding of the project with the identified child care site. Where appropriate this might include professional development concerned with the importance of the early years and early childhood development.
- Identify and approach stakeholders to establish a project advisory group.
- Develop networks with other child care services including family and children's services.
- Identify community needs (needs assessment) through a mapping exercise. This mapping would not be undertaken in circumstances where this information was readily available.
- Develop a project work plan and prioritise according to need.
- Identify and map local services and resources.
- Develop strategies to disseminate this information to community members, agencies, and service providers.
- Promote child care services as potential partners and as resources for local service providers and agencies to engage with parents/ caregivers in the community.
- Develop mechanisms for collaboration and partnership within the community to foster the on-going function of child care services as a community resource.
- Support child care services to establish links to parents/ caregivers in the local community.
- Develop targeted project activities with local stakeholders/partners.
- Develop, promote and implement strategies and practices for use of child care services as venues for local agencies to deliver programs and parenting resources eg. parenting education, nutrition programs and other relevant activities to the targeted community. This will also

include the provision of flexible child care in response to community need eg. supported playgroups.

- Develop mechanisms to improve linkages between families and local agencies.
- Develop strategies for families to increase their knowledge and understanding of existing social services and how to access them at their point of need.

2.3 Structure of current report

This Final Report is presented in four volumes:

- **Volume One:** Final Report (this report).
- **Volume Two:** Individual Site Reports.
- **Volume Three:** Quarterly Reports for April 2005 to July 2005.
- **Volume Four:** Activity Records and Calendars for April 2005 to July 2005.

3 Evaluation methodology

3.1 Evaluation approach and components

The evaluation framework for the CCL Initiative called for three levels of data collection:

1. Project level evaluation built into the plans for individual sites;
2. Amalgamation and analysis of the data collected by individual projects to give an overarching picture of the CCL key action areas; and
3. The evaluation and reporting of the overall National Agenda for Early Childhood. Note: As the National Agenda is still in the process of being finalised, this task was not able to be undertaken by the evaluation team.

The strategy adopted by the evaluation team involved an evaluation of both processes and outcomes for the CCL Initiative. The methodology employed quantitative and qualitative data collection approaches. The components of the evaluation process are:

- Quarterly reports (three Reports)
- Activity records/calendars
- Site visits
- Communication Strategy
- National Workshop
- Performance indicators/work plan.

3.2 Evaluation tools

3.2.1 Quarterly Report

An instrument was developed by the evaluation team in consultation with the CCL workers. This instrument provides a reporting format against the performance indicators for each site. It is referred to as the 'Quarterly Report' as initially it was planned to distribute four reports over the period of the Initiative. Discussions with FaCS staff resulted in this later being modified to three reports. The purpose of these reports was to collect much of the quantitative information required for each site. The Reports provide the opportunity to collect process and outcome information on a range of site activities and events and allow for similar data to be collected across each site.

The Quarterly Report was designed to be completed by the CCL worker with some specific questions requiring liaison with nominated child care centre staff.

The first Quarterly Report covered the activities, events conducted and networks developed by the CCL worker over the period July to October 2004. The second Quarterly Report covered the period November 2004 to March 2005. The third Quarterly Report covered the period April 2005 to July 2005.

The third Quarterly Report was distributed to the CCL workers in early June 2005 to be returned by the end of July 2005. Copies of the third Quarterly Reports received to date are provided in **Volume Three** of this Report. An overview and analysis of the data from these Reports is contained in **Appendix B** of this report.

3.2.1.1 Sections of the Quarterly Report

The Quarterly Report format is divided into five sections requiring the CCL worker to provide a response to specific questions which address different aspects of the performance indicators. These sections include:

1. Activities/ events
 - Asking about activities within the nominated child care centre to promote social networking and foster linkages.
 - Asking about the involvement of CCL worker, child care staff and other services.
 - Asking about activities within the nominated child care centre to increase caregivers' knowledge, skills and abilities.
 - Asking about the use of the child care centre by other family and community services.
2. Referrals
 - Asking about both formal and informal referral processes used by the child care service.
3. Networking between services
 - Asking about type and frequency of contact with other services by the CCL worker and the staff of the child care centre.
 - Asking about network/ relationship mapping.
4. Promotional activities
 - Asking about the type of promotional activities the CCL worker and the child care centre has engaged in to increase awareness about the importance of the early years.
 - Asking about the promotion of activities external to the child care centre.
5. Other comments
 - Inviting further comments and reflections from CCL workers.

3.2.2 Activity Record/Calendar

A calendar and activity record process was developed to document and track key activities and learning's throughout the pilot. CCL workers were asked to complete a monthly calendar of activities and to select one activity per month to describe in more detail.

Copies of activity records and calendars received from sites for the months April 2005 to July 2005 are provided in **Volume Four** of this Report.

3.2.3 Site Visits

The purpose of the site visits was to expand on the data provided through other tools used in the evaluation process, for example in the Quarterly Report, Activity Records and Calendar entries.

The majority of sites were visited twice during the period of the pilot. The first of these visits occurred during September–November 2004 and the second visits during August – September 2005. Most of these visits were also attended by the FaCS representative responsible for each site. The main focus of these visits was on discussions with the CCL workers. In most sites, discussions also took place with representatives for the advisory group, the sponsor and child care staff.

The Yarrabah Family Support Links site was only visited at the beginning of the project. The planned second site visit was cancelled due to illness. The Family Links Port Lincoln and Family Links East

(Unley) sites were only visited at the beginning of the project as these sites had ceased operation by the time of the second round of site visits. Both these sites recently recommenced operation in September 2005.

The site visits enabled the evaluation team to gather qualitative information about the processes applied in each site.

The evaluation team found the first visits invaluable in providing a context for the environment of each CCL worker and an understanding of the degree of infrastructure available to support the workers in their ongoing role.

A key feature of the second site visit was holding focus groups with caregivers and attending, if possible, a meeting of each advisory group.

3.2.4 Communication Strategy

One of the key features of the overall evaluation process is the creation of an ongoing working relationship between the CCL workers and the Evaluation Team.

At the commencement of the project the Evaluation Team developed certain mechanisms to facilitate this ongoing collaboration and connections.

There are three main components of the communication strategy:

- An electronic newsletter
- An interactive website
- Ongoing telephone/email support.

Details of the communication strategy are contained in **Appendix D** of this report.

3.2.5 National Workshop

A national workshop was held at the commencement of the evaluation process in Adelaide on the 12th and 13th of August 2004.

The purpose of the workshop was to assist with the skill development of the CCL workers. Given the majority of the information used in both the process and outcome evaluation requires CCL workers to collect data at their site, it was essential that they receive some preliminary training around the use of the tools for data collection. The aims of the workshop were to:

- Develop a shared understanding about data collection processes and the necessary skills to implement these processes at the local level.
- Sharing of tools and resources available for data collection by the CCL Workers.
- Facilitating discussion and gaining agreement about future communication processes between the CCL workers and the evaluation team.
- Development of peer support networks for staff involved in the Initiative.

3.2.6 Performance Indicators

The performance indicators for the CCL Initiative were originally developed by FaCS.

The performance indicators were discussed in some detail at the National Workshop and were revised slightly in consultation with the CCL workers and FaCS to better capture the key objectives of the project.

The revised performance indicators and the project objectives are provided in the **Table 1** below.

Table 1: Project Objectives and Revised General Performance Indicators

Project Objective	Revised General PI (without specific site changes)
Child care services have an increased role in fostering linkages between family capacity and community connectedness	1.1 Increase in the percentage of child care workers who have been involved in the planning of family activities.
	1.2 Increase in informal referrals from child care service staff to family and community activities and services.
	1.3 Increase in the number of family and community activities conducted by the child care service.
	1.4 Increase in the number of activities conducted by other community organisations at the child care service.
Improved collaboration between child and family professionals	2.1 Increase in the number of formal referrals made by the child care service.
	2.2 Increase in the number of relevant networks in which the CCL worker participates.
	2.3 Changes in child care service as a result of participation in networks by the CCL worker.
	2.4 Increase in the number of activities jointly managed by child care services and other community organisations.
	2.5 Family satisfaction with the quality of the integration between the child care service and other family and community services.
Caregivers of young children have increased opportunity to develop social networks	3.1 Increase in the number and type of new networking activities for caregivers initiated by the child care service/child care links worker.
	3.2 Increase in number of people at each type of social networking activity.
	3.3 Increase in number of community activities (external to service) promoted by the CCL worker/service.
Caregivers of young children participate in activities which aim to increase their knowledge, skills and abilities	4.1 Increase in the number and type of developmental activities managed by the child care service.
	4.2 Increase in the number of parents/caregivers who participate in each type of developmental activity.
	4.3 Increase in parents/ caregivers satisfaction with the outcomes of the activities.
Strong linkages exist between child care services and broader community services to raise awareness of the importance of the early years	5.1 Increase in the number of organisations including an early childhood focus in their planning and delivery.
	5.2 Increase in the number and type of early childhood promotional activities undertaken by the child care service/worker.
	5.3 Increase in the number of organisations where promotional material has been distributed or offered.

3.3 Evaluation procedure

The evaluation team commenced work on the project in July 2004. Since that time the evaluation team has undertaken the following:

1. Conducted a National Workshop, Adelaide 12 – 13 August 2004.
2. Developed an ongoing Communication Strategy.
3. Completed two rounds of site visits to sites.
4. Revised the performance indicators.
5. Designed and distributed three Quarterly Reports, activity records and calendar reports.
6. Received three sets of data from sites.
7. Analysed the early findings from each site against the evaluation methodology.
8. Provided two Progress Reports to FaCS.

This is the third and final Report for the evaluation of the Child Care Links (CCL) Initiative. It describes the progress and key findings of the CCL Initiative for the period July 2004 to October 2005 against the evaluation methodology. This report builds upon and reinforces the findings from the two earlier reports.

The first Report, covering the period July 2004 to October 2004, provided baseline data for each site. This data was used to measure performance in subsequent reports. The second Report provided comparative data for each site using the findings described in the first Report as the basis for measuring performance. This final Report describes key findings, analysis and reflections using the data collected from the previous two Reports, the third Quarterly Report completed by sites and information collected during the second site visits undertaken by the evaluation team during August – September 2005.

There will be a fourth data collection period from 1 August 2005 to 30 January 2006 which will capture the ongoing progress sites are making during the additional funding period. CCL workers will be required to complete a fourth 'quarterly report' for this period. Findings from this period will be submitted to FaCS at the end of March 2006 as a supplementary report.

4 Key Findings: Analysis and Discussion

This section of the Final Report provides an analysis of the key findings and general reflections of the CCL Initiative.

The section is organised into two parts:

Section 4.1 Findings from the quantitative and qualitative data collection processes

Section 4.2 Summary and discussion.

4.1 Findings from the quantitative and qualitative collection processes

These findings reflect:

1. The quantitative data collected throughout the evaluation process from the following sources:
 - Three reports (referred to as the Quarterly Reports) completed by the CCL workers at each site. These reports involved documenting each site's performance against the Performance Indicator's (PI's) set for each of the five program objectives. The first Quarterly Report covered the period July 2004 – October 2004, the second from November 2004 – March 2005 and the third report the period April 2005 – July 2005
 - Monthly Activity Records completed by the CCL Workers.
2. The qualitative data collected during the evaluation process involved two visits to the CCL sites by the evaluation team:
 - The first site visit was undertaken at the start of the project and provided the evaluation team with baseline data for each site.
 - The second site visit, undertaken during August and September 2005 involved detailed interviews with CCL Workers, sponsor organisations, child care staff, advisory group members, FaCS representatives and a focus group with caregivers. Questions were developed to focus these discussions (see **Appendix C**). While these questions were modified for various groups, the general intent was followed. This provided data to look at trends, outcomes and general issues associated with the Initiative across the sites.

The key findings that follow provide a synthesis of the qualitative and quantitative data grouped around the five program objectives for the CCL Initiative.

PROJECT OBJECTIVES:

1. **Child care services have an increased role in fostering linkages between family capacity and community connectedness**
2. **Improved collaboration between child and family professionals**
3. **Caregivers of young children have increased opportunity to develop social networks**
4. **Caregivers of young children participate in activities which aim to increase their knowledge skills and abilities**
5. **Strong linkages exist between child care services and the broader community services to raise awareness of the importance of the early years**

4.1.1 General comments

Since the commencement of the CCL Initiative there is evidence of progress across all sites around the key elements of community development and service coordination and enhancement. This key finding indicates the Project is an effective means for developing social capital within local communities.

The activities and initiatives undertaken across all sites have resulted in many outcomes relevant to the objectives of the Child Care Links Initiative. The degree and diversity of this work varies considerably and is a reflection of the uniqueness of the sites across the States and Territories. Some sites are already showing tremendous benefit from the project within the short period of a year, whereas other sites realise the progress is going to be much slower

There is evidence of better networks for families, but this is only just emerging as early in the project the CCL workers needed to focus on developing their own community networks. This is a significant outcome, as building caregivers awareness of and capacity to access community support is critical given the multi-dimensional nature of many social problems affecting families.

Some CCL workers have followed the expected 'Model' of the project by community capacity building within the child care centre itself and then concentrating on external links. However there are many variations on this Model, i.e. some CCL workers have focussed on networking services and have had less focus on the child care services. This reflects the location of various sites. For example some are in Family Day Care coordination units and others are in very remote isolated rural communities.

While there have been variations to the Model it has generally been effective across the target groups. However the Model needs reworking for appropriate use in indigenous communities. This will be discussed in more detail in Section 4.2.4 of the Report.

4.1.2 Project Objective 1

Child care services have an increased role in fostering linkages between family capacity and community connectedness

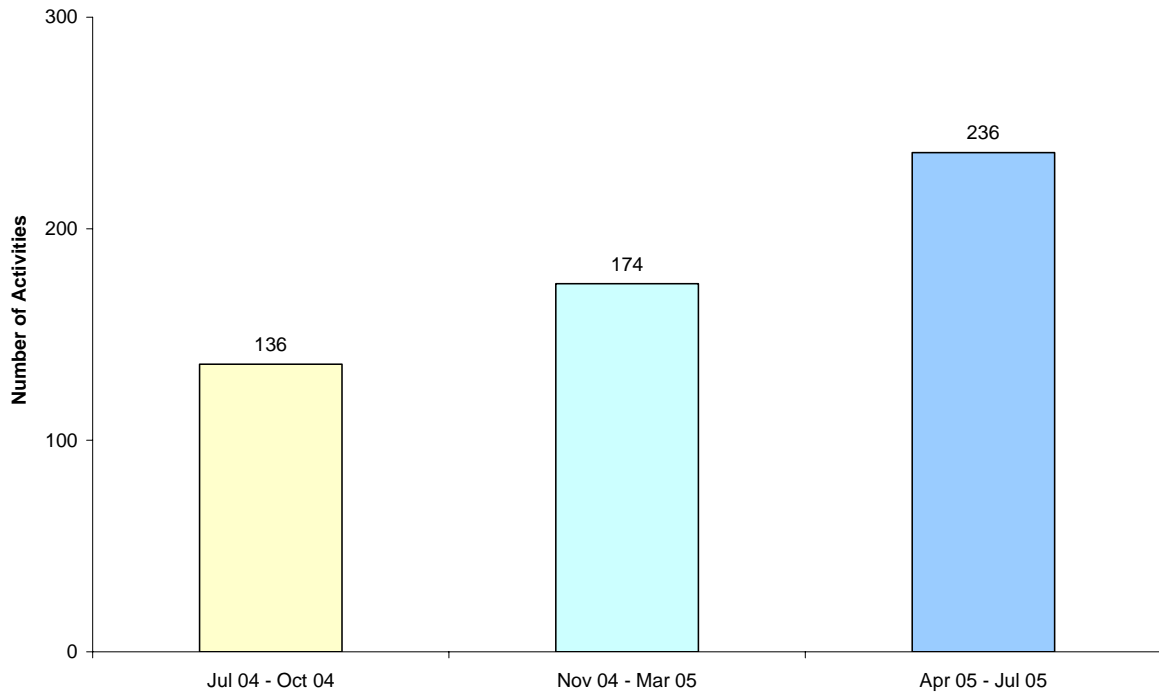
Performance Indicators:

- 1.1 Increase in the percentage of child care workers who have been involved in the planning of family activities
- 1.2 Increase in informal referrals from child care service staff to family and community activities and services
- 1.3 Increase in the number of family and community activities conducted by the child care services
- 1.4 Increase in the number of activities conducted by other community organisations at the child care service

4.1.2.1 Findings against Project Objective 1

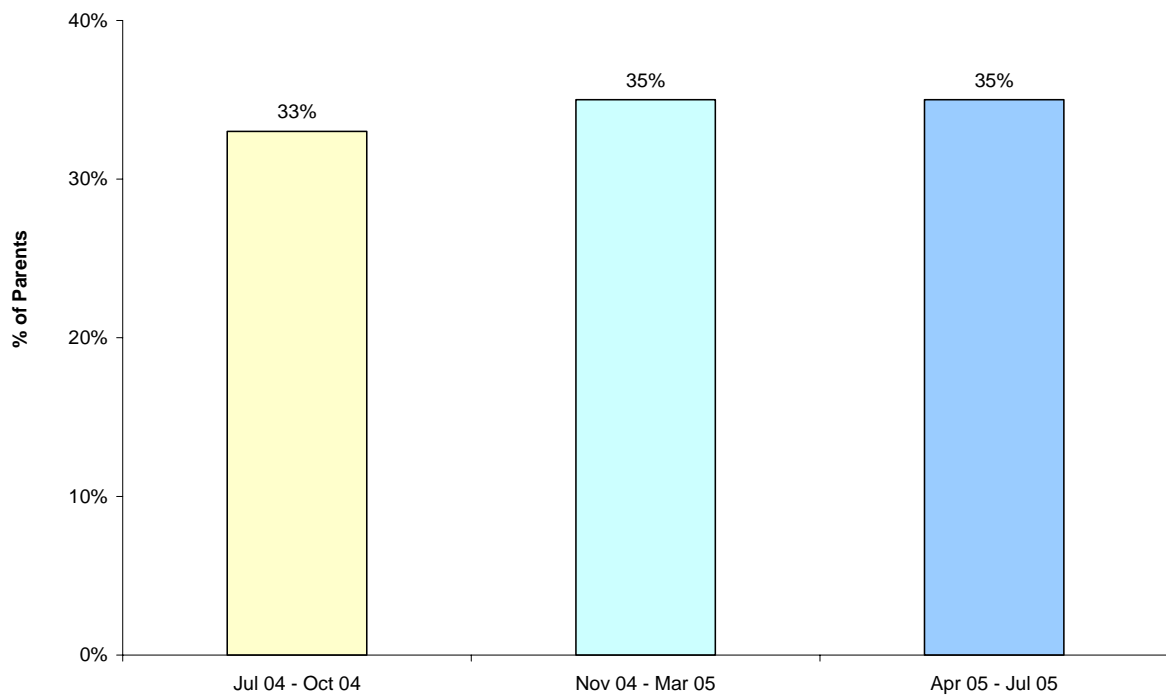
- ❑ Over the period of the project, the number of family and community activities conducted by the CCL sites has increased by around 50% with centres averaging around 2 activities each month (see **Figure 1** below).
- ❑ At the start of the project the majority of the activities were new to the child care services. Some of these activities are now ongoing, although there are still a consistent number of new activities occurring.

Figure 1: Number of family and community activities conducted by the child care service



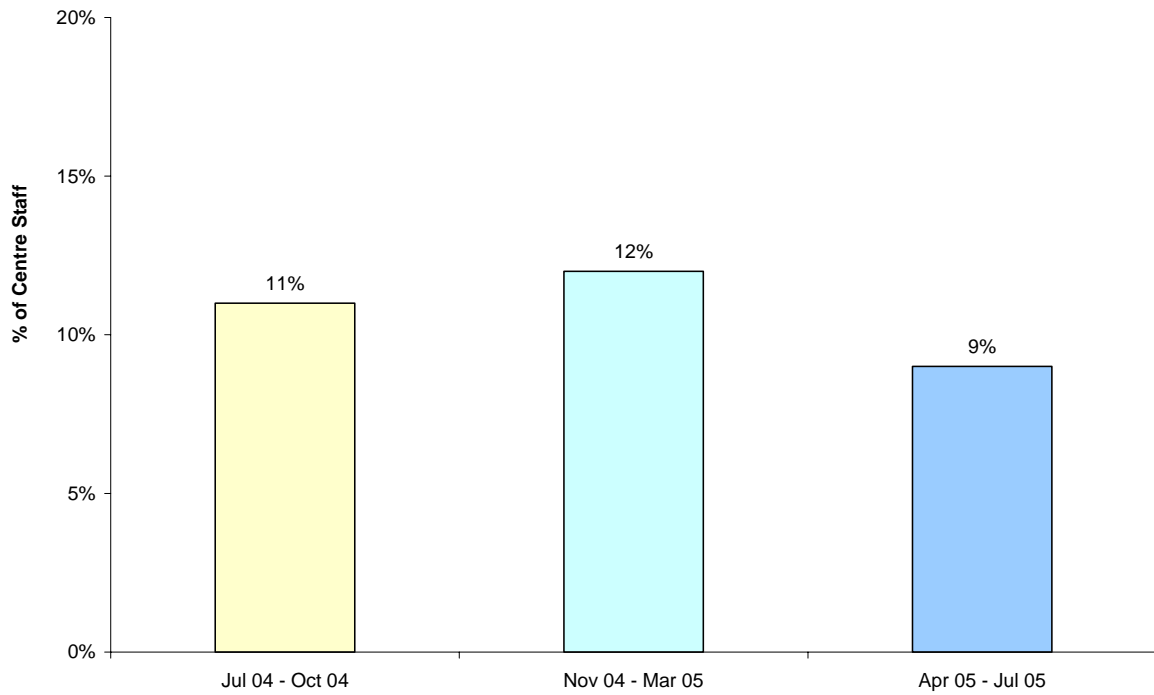
- The trend across sites has been to initiate large events such as Teddy Bears picnics and BBQ's at the start of the project and then move on to more specific events such as parent information sessions and staff training.
- Participation of caregivers in these activities has remained fairly constant with caregivers making up around 34% of participants at these events (see **Figure 2** below).

Figure 2: Caregiver participation in activities



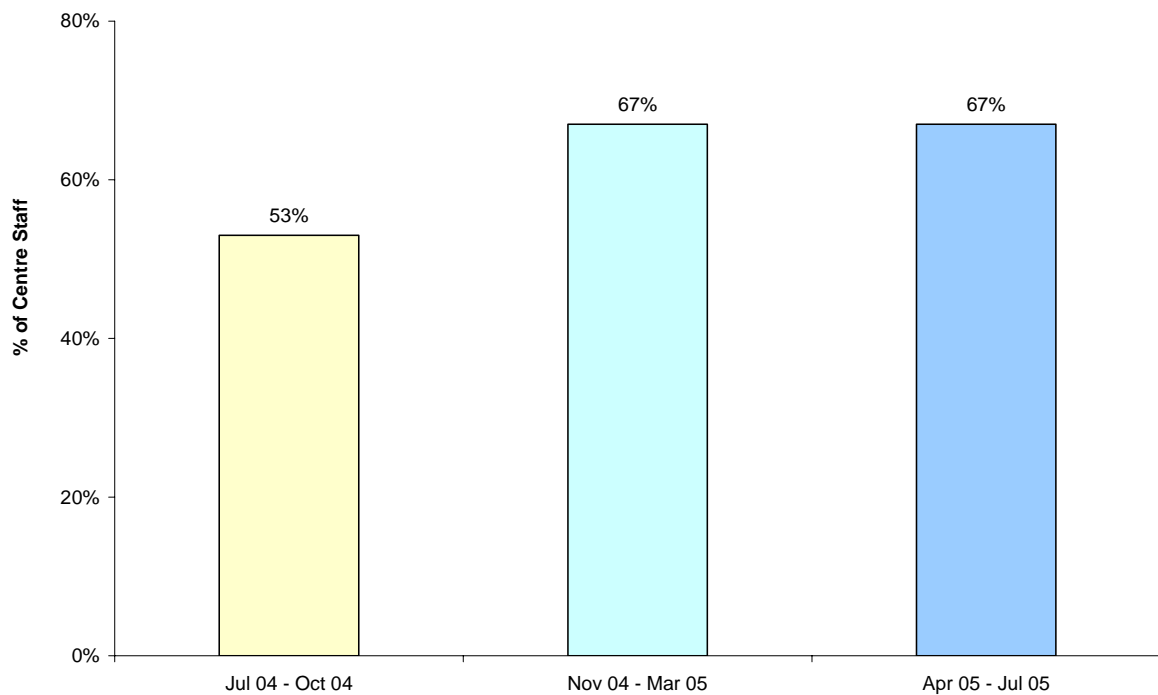
- Participation of child care centre staff in the activities has not changed throughout the period of the project, remaining around 10% (see **Figure 3** below).

Figure 3: Child care centre staff participation in activities



- However while staff have not necessarily attended the activities, their involvement in planning, promoting and facilitating activities has been over 60% (see **Figure 4** below). This figure has also remained fairly constant for the three report periods

Figure 4: Child care centre staff participation in planning and promotion of activities



- While the majority of child care centres have been used by community groups to conduct activities, the use of child care centres by these groups is rare. When this does occur the use has predominantly been through 'provision of venue'.

4.1.2.2 Key achievements against Project Objective 1

- ❑ Networking and encouraging the development of an interagency approach between services has been a key outcome of the CCL Initiative and an essential element to the success of the project. It has been general practice for specific agencies to operate within a silo mentality.
- ❑ Agencies, particularly members of site steering committees, have reported a growing understanding of the roles and responsibilities of various groups within their local communities and more awareness of how this knowledge can be used to establish more collaborative working relationships. For many of these services the CCL Initiative has been the first time they have come together to explore ways of linking.

“Everyone working together and maintaining a relationship has built capacity. Each organisation has its own agenda and it was an achievement for each to join together and understand what everyone’s role is. Eventually, the working group realised that everyone had the same goal.”

Member of site Steering Committee

- ❑ CCL workers have been a central point of contact for the child care service, other local community groups, government and non-government agencies and families. The CCL workers have devoted a considerable amount of their time to establishing these networks as well as to strengthening and maintaining them.
- ❑ Focus group discussions with various steering committee members noted that the CCL workers role in their communities was highly valued.
- ❑ Caregivers and child care staff report that they are now more aware of the availability of different services within the communities and how to access them as a result of the CCL Initiative.
- ❑ Some CCL workers saw turning around initial resistance to the Project from some child care staff as a key achievement.
- ❑ The Project has been seen as assisting with cultural change at some sites, for example health services are now coming into the child care centre to provide services.

Benefits to caregivers:

- ❑ Caregivers from most sites commented that they felt better supported in their parenting role and also better informed about what activities and services are available.
- ❑ Increased opportunities to socialise with other caregivers and other people in the community was seen by caregivers as a benefit arising from the CCL Initiative. Many caregivers reported feeling socially isolated and indicated the important role the child care centres now play in bringing people together. Also, some families that once felt excluded are reporting that they now feel more included.
- ❑ The project was seen as ‘giving caregivers a voice’ as caregivers saw the CCL Initiative as responsive to their needs.

Benefits to child care staff:

- ❑ Child care staff reported they are now more aware of what services are available in their local community and that this knowledge had widened their role. This is a significant change from the first site visits when most staff showed very little knowledge about what services were available.

Benefits for the community:

- ❑ CCL encourages an inter-agency approach and the networking of services.

- ❑ Increased networking opportunities.
- ❑ The development of a community directory at many sites.
- ❑ Better linking of services.
- ❑ The critical role the CCL worker plays in developing and maintaining the networks and links.
- ❑ In some sites the CCL Initiative is assisting the cultural change in services to an early intervention focus.

4.1.3 Project Objective 2

Improved collaboration between child and family professionals

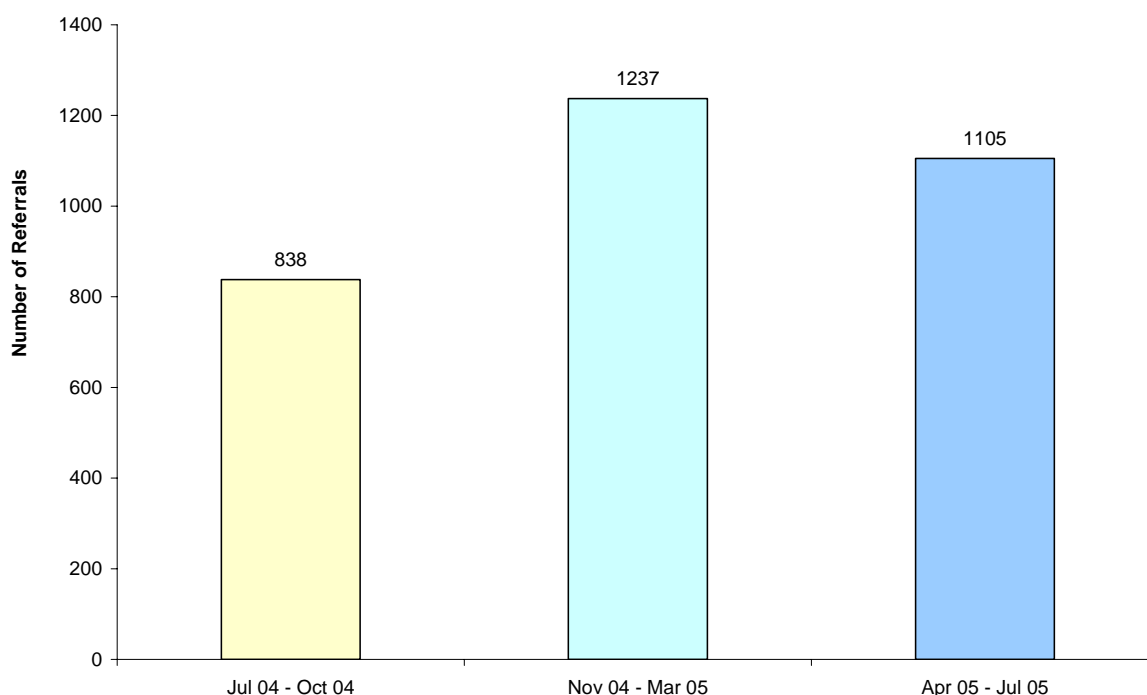
Performance Indicators:

- 2.1 Increase in the number of formal referrals made by the child care service
- 2.2 Increase in the number of relevant networks in which the child care links worker participates
- 2.3 Changes in child care service as a result of participation in networks by the child care links worker
- 2.4 Increase in the number of activities jointly managed by child care services and other community organisations
- 2.5 Family satisfaction with the quality of the integration between the child care service and other family and community services

4.1.3.1 Findings against Project Objective 2

- ❑ Formal referrals have remained high throughout the project ranging from 838 to 1,237 over the 3 reporting periods (see **Figure 5** below).

Figure 5: Referrals to local family and community services



- ❑ Over a third of these referrals are to Centrelink, a small percentage to other child care services, GP's and recreation venues.

- ❑ For Indigenous sites it is generally considered inappropriate to provide information about any formal referrals. Where sites have recorded referrals, they are usually to GP's, other community groups and child health nurses.
- ❑ The CCL workers have their most regular contact with child care centre staff and caregivers, usually on a daily basis. Other frequent contact (monthly) is with maternal/community health nurses, playgroups, and other local child care centres.
- ❑ The nature of the relationships with local services has shown little change throughout the project. The majority of these relationships (50%) are of a 'cooperating' nature. The move towards relationships that are 'collaborative' or 'partnership' in nature has remained at around 14% throughout the project. In terms of the nature of the relationships/ networking, these have been mainly of a 'cooperating' nature throughout the project with a small shift towards more 'collaborative'/'partnership'. Relationships/networks that are more 'collaborative' or 'partnerships' take time to develop
- ❑ For child care centre staff, their contact with other groups has probably not changed as a result of the project, being mainly with caregivers and other staff and sometimes with other child care centres in the area and local schools.
- ❑ Attendance at activities by other community agencies has shown little change since the start of the project, making up around 10% of participants.

4.1.3.2 Key achievements against Project Objective 2

Benefits to child care staff:

- ❑ Many child care centre staff commented that they felt better supported in their role and better resourced. This has increased their level of confidence and skills particularly around communication with caregivers.
- ❑ Child care centre staff are becoming more attuned and responsive to the needs of families and better equipped to help them.

Benefits to communities:

- ❑ Services are becoming more involved in the child care centres and have opportunities to socialise informally with families and child care staff at activities.
- ❑ The CCL worker can maintain the networks between the child care centre and other family and community services which often cease if child care staff or service staff change.

4.1.4 Project Objective 3

Caregivers of young children have increased opportunity to develop social networks

Performance Indicators:

- 3.1 Increase in the number and type of new networking activities for caregivers initiated by the child care service/child care links worker
- 3.2 Increase in number of people at each type of social networking activity
- 3.3 Increase in number of community activities (external to the service) promoted by the child care links worker/service

4.1.4.1 Findings against Project Objective 3

- Promotion by CCL workers of activities external to the centre has remained fairly constant. The majority of centres promote activities by way of noticeboards, newsletters and by 'word of mouth'.
- The types of activities external to the centre promoted by CCL workers include parenting courses, community festivals, immunisation clinics and Children's week.

EXAMPLES FROM CCL SITES PROVIDED BY CCL WORKERS

"Our service is accessed by a range of organisations that support families in the community. The centre's foyer and also the community café are always inundated with posters and flyers for upcoming events or courses. Although it is only a minority of families who access outside programs I believe it is valuable for us to continue to advertise these events, if we can encourage one family to attend a valuable course then it is worth it".

"Since the acquisition of a specific notice board for the CCL Initiative we have been able to promote activities for parents run by other organisations as well as CCL activities".

"Our centre readily promotes community events in its foyer area, but word of mouth is an important tool for disseminating information in the indigenous community".

4.1.5 Project Objective 4

Caregivers of young children participate in activities which aim to increase their knowledge skills and abilities

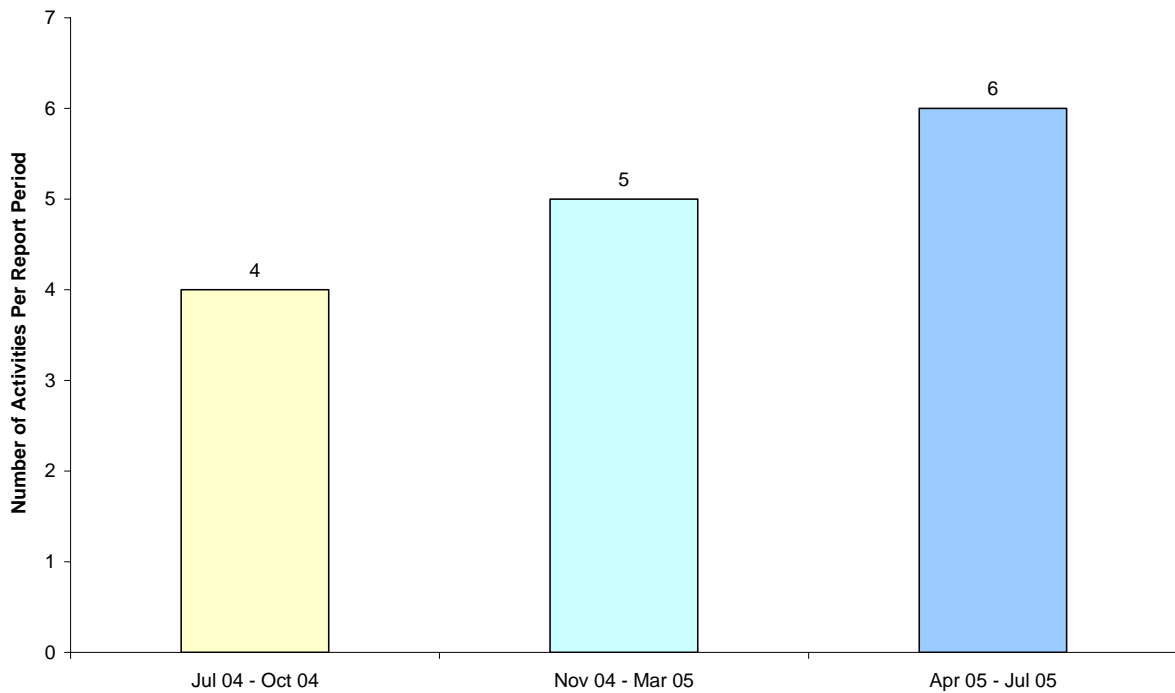
Performance Indicators:

- 4.1 Increase in the number and type of developmental activities managed by child care service (e.g. parent education; language programs; literacy programs; caregiver/child interactive activities; health and nutrition programs)
- 4.2 Increase in the number of parents/caregivers who participate in each type of developmental activity
- 4.3 Increase in parents/caregivers satisfaction with the outcomes of the activities

4.1.5.1 Findings against Project Objective 4

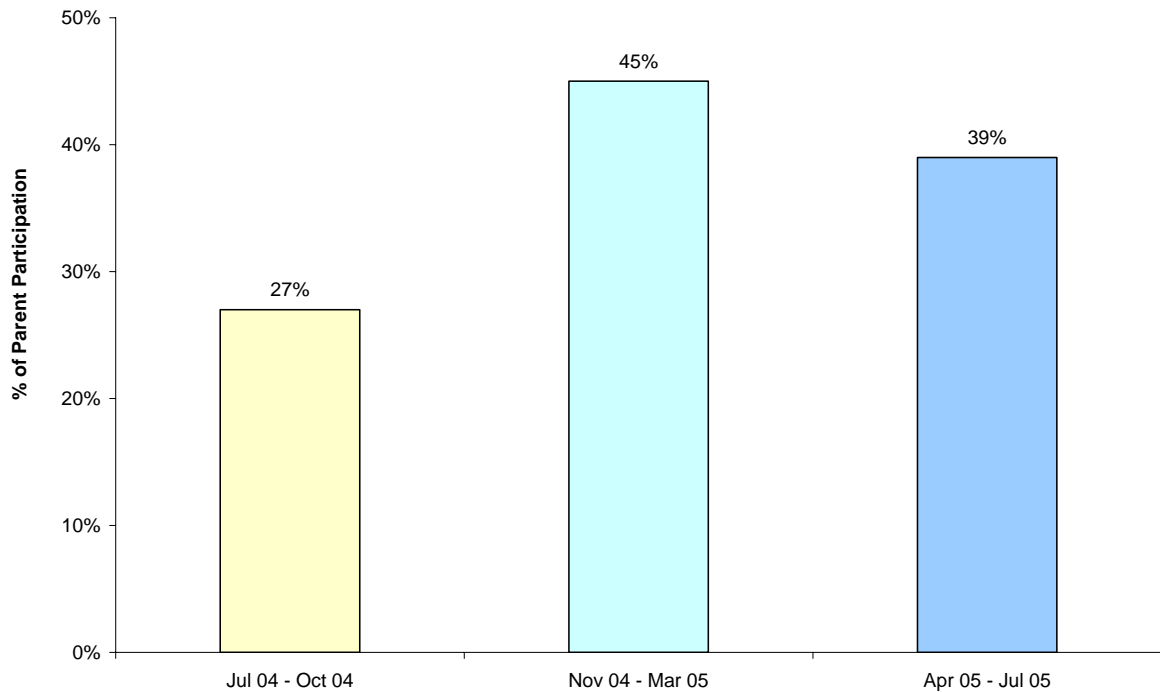
- There has been a small increase in the number of activities conducted at each site to increase caregivers' knowledge, skills and abilities from an average of 4 activities to an average of 6 activities (see **Figure 6** below).
- As the project has been implemented there has been a trend towards the provision of more formal activities to increase caregivers' knowledge and skills.

Figure 6: Activities and events to increase caregivers' knowledge, skills and abilities



- Parent/caregiver participation at these events has risen by over 10%. Parents/caregivers making up close to 40% of participants at these events.

Figure 7: Participation of caregivers in activities to increase knowledge, skills and abilities



- Attendance by staff aimed at increasing caregivers' knowledge, skills and abilities has dropped by 10% from the first report period.
- Child care centre staff have been very involved in the planning, promotion and facilitation of activities aimed to increase caregivers' knowledge, skills and abilities.

4.1.5.2 Key Achievements

- ❑ The development and delivery of courses tailored to caregivers needs which aim to increase their knowledge, skills and abilities.

Benefits to caregivers:

- ❑ Caregivers are feeling more welcome and involved in their child care centres as child care centre staff are making more effort to engage caregivers. At many child care centres this includes staff training in culturally appropriate and inclusive behaviour.
- ❑ Some caregivers commented that they were more satisfied with their child care centre over the past 12 months as they feel more informed about services in their community and have confidence in the professional recommendations of the CCL worker.
- ❑ Increased educational and support activities for caregivers. Many of these sessions had been developed in direct response to identified family needs. Activities that have been most popular have been on topics that cause caregivers stress, for example managing their children's behaviour, sleep, safety and nutrition. Such sessions have increased caregivers confidence in their parenting skills.
- ❑ Better access to information. Many caregivers reported they liked receiving regular newsletters.
- ❑ Caregivers can raise issues of concern with the CCL workers and felt confident that this would be acted upon.

Benefits to child care centre staff:

- ❑ Change in attitudes of how many child care centre staff perceived their role, particularly for untrained staff i.e. not just 'babysitting'.
- ❑ Staff feel better supported in their role and are better resourced (i.e. knowledge of services, more training).
- ❑ Staff are becoming more attuned and responsive to the needs of families and better equipped to help them.
- ❑ Directors of the child care centres feel better supported and less pressured.

4.1.6 Project Objective 5

Strong linkages exist between child care services and the broader community services to raise awareness of the importance of the early years

Performance Indicators:

- 5.1 Increase in the number of organisations including an early childhood focus in their planning and delivery
- 5.2 Increase in the number and type of early childhood promotional activities undertaken by the child care service/worker
- 5.3 Increase in the number of organisations where promotional material has been distributed or offered

4.1.6.1 Findings against Project Objective 5

- ❑ Promotional activities initiated by both CCL workers and child care centre staff to increase community awareness of the importance of the early years have more than doubled since the commencement of the project (see **Figure 8** and **Figure 9** below).

Figure 8: Promotional activities initiated by the CCL worker

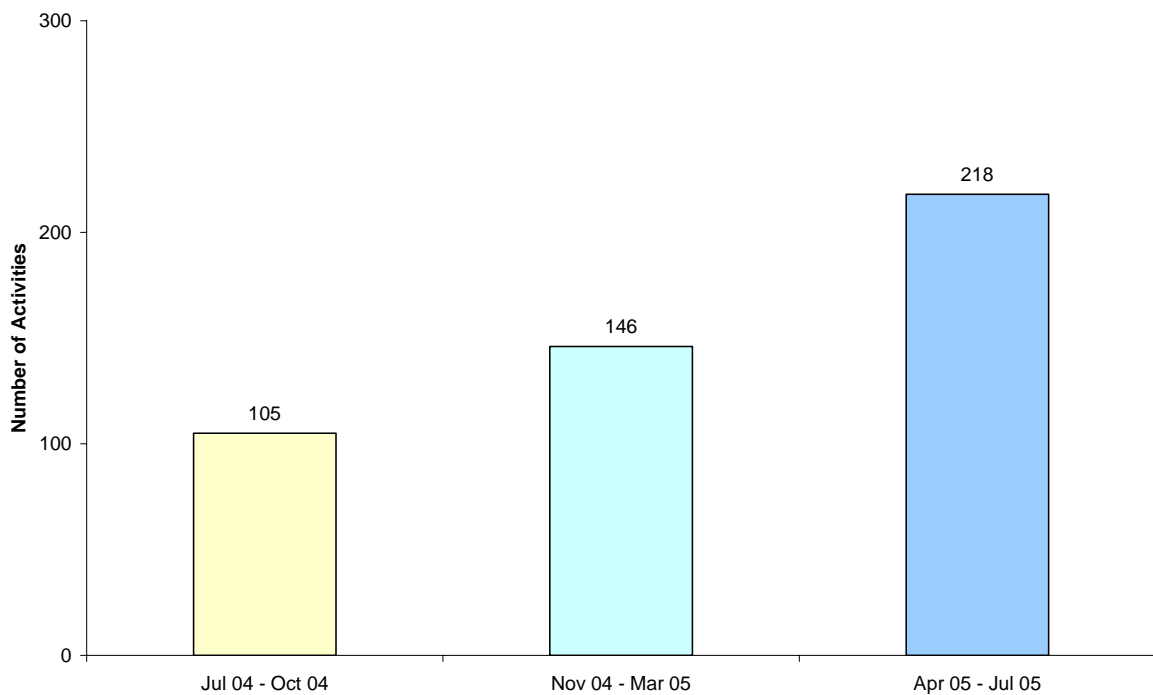
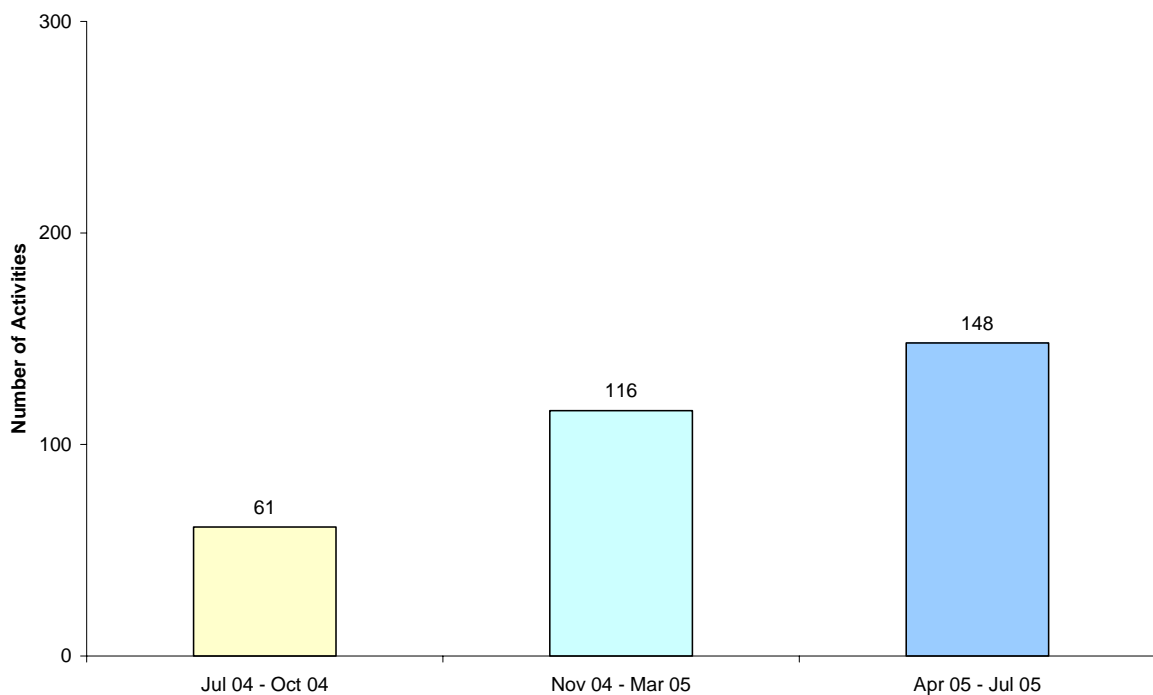


Figure 9: Promotional activities initiated by child care centre staff



- ❑ The most popular promotional activities have been newsletters, fliers, articles in local newspapers, meetings attended by the CCL workers and presentations.
- ❑ Many child care centres have also made effective use of the local media, some having regular columns explaining aspects of early childhood development.
- ❑ For the Indigenous sites a lot of promotional activities have been by word of mouth.

4.1.6.2 Key Achievements

- ❑ Increasing the profile of early childhood in the community.

Benefits to caregivers:

- ❑ Better access to information about early childhood education and the importance of the early years.

Benefits to staff:

- ❑ Profile of child care centres has been raised in the community.

Benefits to the community:

- ❑ Raised profile of early childhood.

4.2 Summary and discussion

This section is organised into the following areas:

- Section 4.2.1: Introduction
- Section 4.2.2: Overview of activities held by sites
- Section 4.2.3: Benefits of the CCL Initiative
- Section 4.2.4: Themes and issues: Indigenous sites
- Section 4.2.5: Issues associated with pilot projects
- Section 4.2.6: Strengths of the CCL Model
- Section 4.2.7: Limitations of the CCL Model
- Section 4.2.8: Factors influencing project outcomes
- Section 4.2.9: Sustainable elements of the CCL Model
- Section 4.2.10: Applicability of the CCL Model to other Government initiatives and strategies

4.2.1 Introduction

The activities and initiatives undertaken across all sites have resulted in many outcomes relevant to the objectives of the CCL Initiative.

The CCL workers continue to initiate many new activities recording strong parent participation. The degree and diversity of this work varies considerably and is a reflection of the uniqueness of the sites across the States and Territories. There has been a high level of involvement of child care centre staff in the planning and promotion of these activities although their attendance at these events has been low.

Sites have been engaged in a variety of interesting activities to promote the importance of the early years. The local media has been used very effectively for this purpose at many sites.

The first Progress Report noted the general approach adopted by the evaluation team. This is not a comparative evaluation study, but rather an evaluation of each CCL site against its own performance indicators. However it is possible to draw out a number of common themes and issues. Some of these issues started to emerge early in the project and were identified in the first Progress Report. The evidence of these issues has become more significant in data provided by the sites for the second and third Quarterly Reports.

4.2.2 Overview of activities held by sites

Most sites have offered a number of **large social events** such as barbeques and picnics to encourage caregivers to socialise. Many of these activities have celebrated specific local or national events such as Children's Week and National Aboriginal and Islander Children's Day. The benefits of holding these types of events have included:

- CCL workers have been able to raise awareness of the CCL Initiative and canvass parent needs.
- Provision of free, family friendly events with lots of activities for children in areas where there may not be many social activities for families.
- At some sites caregivers have had the opportunity to meet staff from local family and community services in a relaxed social setting.
- Caregivers have reported that they have valued these opportunities to socialise.

Regular social activities have also been offered at the majority of sites. These smaller, targeted social activities include playgroups, mobile playgroups, parent support groups and weekly drop in mornings at the child care centres. The benefits of holding these activities have included:

- ❑ Regular opportunities for caregivers to socialise and build up friendships over time.
- ❑ Provision of social activities for caregivers facing similar issues.

A variety of **parent information and education sessions** on topics around needs identified by caregivers have also been offered. These topics have included behaviour guidance, toilet training, cooking, budgeting, dealing with separation, first aid and CPR, safety in the home, nutrition, food hygiene and sewing. Some of the benefits of holding these activities have included:

- ❑ Increasing parenting skills and confidence.
- ❑ Providing opportunities for caregivers to share their experiences and knowledge and offer support to each other.
- ❑ Some of the courses offered have gained participants certificate qualifications.
- ❑ Provision of a range of practical and fun activities that caregivers have expressed an interest in learning.

A number of CCL activities aimed to build capacity within the child care service such as **staff training**, staff information sessions, **networking** with staff from other child care services and meeting and visiting local service providers. Topics covered in staff training included communicating with families, cultural awareness, planning for parental involvement and behaviour guidance. The benefits of conducting these activities have included:

- ❑ Increased staff skills and knowledge in communicating with families.
- ❑ Increased staff knowledge of early childhood and family services available in their area often leading to increased referrals.
- ❑ Increased networking opportunities for staff.
- ❑ Raising awareness that staff have a role in encouraging and educating caregivers.
- ❑ Many staff have reported increased confidence and that they feel better equipped to help caregivers.

Sites have also developed a number of **resources** for staff and caregivers such as community directories, fact sheets, resources for families to borrow such as books or kits that encourage play with children at home and visual aids (photo books) that show caregivers what their children do at child care. The benefits of developing these resources have included:

- ❑ The information provided is responsive to and adapted to community needs.
- ❑ The information is often provided in a variety of community languages.
- ❑ The resources developed will continue to be available beyond the life of the project.
- ❑ Families can borrow resources to use at home.

CCL workers and child care staff have also undertaken a range of **activities to increase awareness of the importance of the early years**. These activities have included newsletters, community discussions, displays, art exhibitions, door knocks, articles in local newspapers, radio publicity, information packages and conference presentations. Many indigenous sites have reported that the most effective form of promotion has been word of mouth by 'talking up' the importance of early childhood in their community. The benefits of these promotional activities have included:

- ❑ A significant proportion of this information is distributed to the larger community rather than just those families using the child care service.
- ❑ Child care staff see that they have a role to play in promoting the importance of early years.
- ❑ Increases parent knowledge and skills
- ❑ Communities become better informed about available local services and upcoming events relevant to families.

4.2.3 Benefits of the CCL Initiative

The CCL Initiative focuses on the extension of the role child care services can play to work more effectively with children and families. The CCL Model has shown that child care services are an effective platform from which a range of services can be provided and supported. It also reflects a growing national and international shift towards a more integrated model of service delivery with an emphasis on building social capital within local communities.

Since the commencement of the Initiative, the Model has demonstrated a number of indicators of success or benefits. There is evidence of progress across all sites resulting in many outcomes relevant to the project's objectives. However it is also important to note that while the CCL Initiative has demonstrated a number of indicators of success or benefits, these require further implementation of the Initiative to enable more definitive conclusions to be drawn. Projects of this nature usually require 3 to 5 years implementation to allow time for more sustainable outcomes to be measured.

The main benefit of the CCL Initiative to date has been the progress around the key elements of community development, service coordination and enhancement. This is a key finding as it indicates the Initiative is an effective means for capacity building within local communities.

The key element of the Model that has led to these positive outcomes has been the **networking activities** generally undertaken by the CCL workers at each site. These networking activities have facilitated and supported the development of **an interagency approach**. This approach has been central to the success of the Project and has resulted in benefits to communities, child care centre staff and caregivers. These benefits are outlined below:

For Communities

- ❑ Greater number of activities to increase community awareness of the value of the early years.

For Services

- ❑ External agencies have reported an increased knowledge and understanding of the roles and responsibilities of various groups within the local community and how this knowledge can be used to establish more collaborative working relationships.
- ❑ In partnership with a range of providers the CCL workers have developed a Community Directory for each site which has proved to be a very valuable resource.
- ❑ The nature of networks has remained largely at the 'cooperative' level. It takes more time to build 'collaborative and partnership' relationships. Some agencies have reported that they can now see ways in which they can move towards these types of relationships. This outcome has been a significant change in most sites.
- ❑ There is evidence that at some sites the CCL Initiative is assisting in a cultural change in other services to an early intervention focus.

For Child Care Staff

- ❑ There has been an increase in confidence in relationships with caregivers. This has particularly been the case in sites where professional development activities have been

initiated to assist in skills development. Staff report being both more attuned and responsive to the needs of families and also better equipped to help them.

- ❑ Participation rates in professional development activities have also significantly increased.
- ❑ Staff are now more knowledgeable with regard to the availability of different services within local communities and use this knowledge to provide appropriate information to caregivers.
- ❑ Staff are most likely to benefit from the CCL Initiative when they understand the objectives of the CCL Initiative and the role of the CCL worker.
- ❑ Staff are also more likely to benefit when the CCL worker works to empower staff rather than 'come up with all the good ideas themselves' and when they have had ownership over a task or activity that has engaged caregivers.
- ❑ Many centre directors noted a reduction in their work load as a result of having the CCL worker's involvement. Given children's services are currently experiencing a very high staff turnover and recruitment problems, the presence of another worker to assist with aspects of the workload may well in the long term contribute to increased morale and reduction in staff turnover.

For Caregivers

- ❑ The strength of better networks for families is only beginning to emerge. As these networks and relationships take time to build, the fact that they are starting is a key outcome. There has been a trend across most sites to initially focus on providing networking opportunities for families to build relationships with other families. Caregivers have reported that they have valued these opportunities to socialise. Activities are now starting to shift towards workshops and seminars around the identified needs of caregivers.
- ❑ Caregivers report feeling better supported and better informed about what is available to support them in their parenting role.
- ❑ The CCL worker has been a central point of contact in terms of giving caregivers information, providing referrals and linking with other agencies.

4.2.4 Themes and issues: Indigenous sites

The work undertaken at the Indigenous sites is very much a reflection of site location, access to transport and cultural matters. For example, referrals by centre staff are not considered culturally appropriate. The specific issues experienced by the CCL workers continue to strongly influence outcomes for the project. These include:

- ❑ The distance to the child care centre and the use of transport often means that the CCL worker has no direct contact with caregivers (i.e. at other CCL sites workers can rely on caregivers drop off and pick up times) and must develop other methods to initiate contact.
- ❑ Indigenous workers are often relied on by services and communities to perform more than their employment position i.e. being seen as community resource. This may create workload issues for the CCL workers who are Indigenous.
- ❑ Some of the contact and promotional work performed by Indigenous CCL workers may be more 'informal' and hence difficult to 'count' for the purposes of reporting formats, yet is highly important in terms of making contact with Indigenous families and building trust.
- ❑ Formal based child care:

"This is still a mainstream concept in many indigenous communities"

CCL Indigenous worker

- To leave your children with others to look after them outside the family group is a non-indigenous concept.
- ❑ Child care services in remote indigenous communities differ vastly from mainstream services in urban settings. They tend to be family centres where mothers bring along their children often staying with them and participating in their learning. Families access the centre according to their needs.

"You can't have expectations as you need to be where the community is at and let them set the pace"

Nareen Carter, Integrated Early Childhood Project Manager – CCL worker

"We need to take real baby steps"

Nareen Carter, Integrated Early Childhood Project Manager – CCL worker

- ❑ Many sites experience challenges in maintaining standards with current available resources.
- ❑ Attendance patterns may vary considerably.
- ❑ Sites experience difficulties in staffing both in terms of recruitment and also appropriate staff to fulfil their cultural requirements.

4.2.4.1 Key achievements of Indigenous Sites

- ❑ Better working relationships have been established between the school and child care centre at most sites.
- ❑ Some sites reported continuity of service as a key achievement considering the difficulties in staffing child care centres.
- ❑ Establishing working relationships with staff, particularly if the worker is non-indigenous.
- ❑ Working alongside other stakeholders eg. government and non government.
- ❑ Some CCL workers reported improvement in hygiene standards at child care centres by training and mentoring alongside child care centre staff.
- ❑ Health of children has improved in some sites.
- ❑ Some sites have reported the regular newsletter as something that has worked well.
- ❑ Provision of staff training.
- ❑ Child care centre staff reported an increase in ownership and self esteem, being involved in decision making processes regarding the child care centre eg. the purchase of equipment.
- ❑ Increased awareness in the community of early childhood issues.
- ❑ Stronger links with child care centre and health clinic have been reported which allow growth and developmental assessments to be maintained.

4.2.4.2 Challenges for Indigenous sites

- ❑ The enormity of the role of the CCL worker and understanding the role and how to apply the project to an Indigenous community.
- ❑ Continuous turnover of staff. While this is an issue for all sites, it is more prevalent in Indigenous communities.
- ❑ Confusions about what the CCL project was about in the community and how it fits in with other government support/agencies.

- ❑ Communication difficulties ie. English is often the third or fourth language and literacy levels can be low.
- ❑ Distance and remoteness of most sites.
- ❑ The internal politics of communities, this can be particularly difficult if the CCL worker is not from that community.
- ❑ With sites that have had turnover of CCL workers, the lack of continuity has been large challenge and barrier.
- ❑ Some CCL workers commented that there has been some resistance to the project partly attributed to a belief that “*if something good happens it gets taken away and used in the cities*”.
- ❑ Lack of transport.
- ❑ Some sites saw the logo for the project as offensive. It reminded them of handcuffs and strongly influenced their engagement with the project.
- ❑ Short term projects set up expectations in the communities.

“Short term projects set up communities to fail” “You need longer term funding and commitment. If you try to push them it undermines the community.”

Nareen Carter, Integrated Early Childhood Project Manager – CCL worker

4.2.4.3 Factors that contributed to success of Indigenous Sites

- ❑ When the CCL worker has been aware of local cultural ways. Knowing the way to show respect was seen as critical in gaining respect.
- ❑ Skilled CCL workers who support and work with staff. Many see this as essential for the sustainability of the project.
- ❑ When the CCL worker is well supported by the sponsor, the advisory group and the local FaCS officer.
- ❑ The importance of community consultation and working at the communities' pace have been highlighted as key factors in successfully building community capacity in Indigenous communities.

The Yuendumu community has identified the following Model as more appropriate for an Indigenous early childhood service

- Employment of an early childhood mentor
- Employment of staff from each camp
- Establish playgroups in each camp, to operate one morning a week and fortnight
- Staff to work at both centre and camp, their own camp playgroup and the EC centre
- Child care centre to become the hub of early childhood services
- Mentor to assist and support child care workers at each of the camps to set up structured programs with input from preschool teacher
- Health Clinics to visit playgroups
- Preschool to be involved with playgroups
- Training and support for workers
- Early childhood service as a place for families to stop, sit down and help out with their children's activities

- A place where older people can tell stories
- A place to watch kids play and learn

Nareen Carter, Integrated Early Childhood Project Manager – CCL worker

4.2.5 Issues associated with 'pilot projects'

By far the most significant limitation of the project has been its pilot nature. Combined with this has been the short timeframe within which the Initiative has operated. The nature of short term projects creates a number of issues that have been recognised in other evaluations of pilot projects and these issues have also emerged in the CCL project. These include:

- ❑ The setting up time needed (and allowed) for the project. Some CCL workers experienced many challenges in getting the project off the ground. This meant that the work of the project around the objectives did not get under way until well into the period determined for the CCL Initiative. All pilot projects face time demands to set up and commence operation as soon as possible. Inevitably some details of planning and implementation may not be considered or may be compromised with the pressure of 'getting the project up and running'.
- ❑ Difficulties associated with community capacity building and empowering families, particularly vulnerable and disadvantaged groups, within short timeframes. This issue was raised by all sites either directly or indirectly. It takes time to build up trust and respect within communities. This is a much longer process if the CCL worker is now known within the local community. While there is definite evidence of this starting to emerge, for many sites it is only 'early days'.
- ❑ It can be difficult for the CCL worker to encourage the involvement of caregivers and other services when it is unclear whether the project will be sustainable or how long it will be in place.
- ❑ The short timeframe seriously impacts on the ability to evaluate or measure success, particularly when a large portion of the time will be utilised in the establishment of the project. In some locations, where there is a real lack of services and support, the 'set-up' time may well consume a large portion of the period of the pilot. At best you can identify emerging indicators of success or indicators of promising practice.
- ❑ Often pilot projects are launched in a competitive environment for funding, this may mean that other services who think they may have been in a better/similar position to support the project may feel resentment which may influence their willingness to engage in collaboration. Some CCL sites reported initial difficulties engaging local agencies to participate on steering committees.

4.2.6 Strengths of the CCL Model

During the evaluation, a number of strengths of the CCL model have been identified. These include:

- ❑ The CCL Model has proved to be an effective means for developing social capital within local communities.
- ❑ The CCL Model has demonstrated that child care services are an effective platform from which to support families with young children.
- ❑ The CCL Model has encouraged a number of networking activities which has led to the greater networking of local services and the development of an interagency approach in some communities.

- ❑ The CCL Model has been shown to be adaptable to the local circumstances of different communities including differences in community needs and the resources and infrastructure available to support the project.
- ❑ The flexibility of the CCL Model has been demonstrated through positive outcomes and benefits recorded across a diverse range of rural, remote, indigenous and metropolitan communities.
- ❑ The sponsor arrangement has proved to be a good mechanism for overseeing the project and providing support and infrastructure for the CCL worker.
- ❑ The discretionary funding has allowed the CCL worker to hold local activities which are responsive to community needs.
- ❑ An effective advisory group can provide valuable support and direction for the project. The advisory group can also help to link organisations that are otherwise 'siloes'.
- ❑ Having a designated worker to undertake activities related to the CCL objectives has been central to the success of the project. The extension of the role of the sites would not have been possible within general staffing ratios.
- ❑ The role of the designated CCL worker has been essential to developing networks between services and encouraging an interagency approach. Developing these networks has taken up a large amount of the CCL workers time, particularly in the early stages of the Project.
- ❑ The CCL Model has demonstrated that building capacity within the child care services generates better outcomes for child care staff and families.
- ❑ The CCL Initiative is a cost effective Model of funding as it links families to existing services and encourages an interagency approach (which can cut down on duplication of services by different agencies).
- ❑ There is evidence that at some sites the CCL Initiative is assisting in a cultural change in other services to an early intervention focus.
- ❑ Networking and publicity activities undertaken by the CCL worker and child care staff have lead to the raised profile of early childhood in communities.

4.2.7 Limitations of the CCL Model

Whilst the CCL Model has been shown to produce a number of positive outcomes and benefits in a diverse range of communities, some limitations have been identified. These include:

- ❑ It can be hard to recruit and retain appropriately qualified staff for short term projects, particularly in remote areas.
- ❑ It can be difficult for CCL workers to encourage the involvement of caregivers and other services when it is unclear how long the project will be in place.
- ❑ At a few of the CCL sites the commonwealth funded child care service wasn't the most appropriate community hub to engage the target population.
- ❑ Child care services often lack the resources or infrastructure to hold parent activities within the centre, particularly during the day when the centre is operating.
- ❑ Community development work is slow and it takes time to build relationships and trust with caregivers, child care staff and local services.
- ❑ Projects can lose direction if the sponsor and the advisory group do not provide enough support and direction to the CCL worker.

4.2.8 Factors influencing project outcomes

A number of factors have been shown to influence project outcomes. These differences include:

- ❑ **The level of support the CCL worker receives from the sponsor organisation.** The overall success of the CCL Initiative depends a great deal on the level of support received from the sponsor. This level of support has varied across the sites. A few CCL workers consider they have not had adequate support and direction.
- ❑ **The degree of engagement of the child care centre staff in the Initiative.** The first two Quarterly Reports from many sites indicated centre staff had been slow to become directly involved in the project. Asking a child care centre generally to do more can be challenging and difficult to sell. Child care centre staff knowledge about the CCL Initiative has varied. The degree of engagement of centre staff has increased as is evident from data in the third Quarterly Reports.
- ❑ **Child care staff are most likely to benefit from the CCL Initiative when:**
 - The CCL worker is located on site. This gives staff the opportunity to develop a relationship with the CCL worker that is not mediated by the centre Director or sponsor organisation.
 - The child care centre staff understand the objectives of the CCL Initiative and the role of the CCL worker.
 - The CCL worker acts to support and empower staff rather than *'come up with all the good ideas themselves'*.
 - Child care staff have had ownership over a task or activity that has engaged caregivers.
 - A genuine effort had been made towards community capacity building within the child care service itself such as offering staff training and development opportunities.
- ❑ **The level of acceptance of the CCL worker in the centre and community.** The level of acceptance has varied across sites and CCL workers who reported initial difficulties are now noting shifts towards more acceptance. It has helped, particularly in the early phases of the project, if the CCL worker has already been known in the local community. This gives the CCL worker local knowledge and in some cases, pre-established connections with local services.
- ❑ **The knowledge and skills of the CCL worker.** Ideally the position calls for a combination of early childhood and community development knowledge and experience.
- ❑ **The willingness of community groups to engage in the project.** In some sites it has been difficult to engage with other services or government departments – there can be a 'silo' approach that it is not part of their core work and so on.
- ❑ **In some sites there is a real lack of services.** This has meant that the CCL worker is providing more intensive contact with families than has been anticipated (where the Model emphasises referrals). It may also be difficult if the CCL worker is the 'first contact' to be able to refer a family on to another service, particularly if that service has a long waiting list.
- ❑ **Location of some sites.** Providing opportunities for developing social networks and collaborating with other professional groups/agencies is difficult if the site is located long distances from towns.

- ❑ **Lack of space in child care centres** has meant that it is difficult to hold activities on site for caregivers, particularly during the day when the child care centre is operating. Some CCL workers have had to be located offsite due to space restrictions.
- ❑ Some **rural and isolated communities** reported difficulties in engaging caregivers in the project given the often transient and ever changing population.
- ❑ **Location of the CCL worker.** Generally outcomes for the project are higher when the CCL worker is located at the child care centre. In some sites where the CCL worker is located offsite, visits may be weekly and in some instances where the site is remote, these visits may be monthly. Where the CCL worker is located off site there are fewer opportunities to build strong relationships with caregivers.
- ❑ The **level of support and direction** given to the project and the CCL worker by the **Advisory Group** and the **local FaCS officer**. The project can lose direction without this support.
- ❑ **Where the CCL project is based**, whether in FDC or a child care centre, changes the nature of the Initiative. Also those sites that cover multiple child care centres have experienced a degree of variability in engagement with the project.
- ❑ The **high turnover of centre staff**. Many of the CCL sites have experienced high staff turnover within their centres. While this is a fairly common issue for child care centres in general, it has created difficulties for CCL workers in establishing relationships and support for the project. Some CCL sites have also had turnover with the CCL worker with new workers often having to start all over again in building up networks and relationships.

4.2.9 Sustainable elements of the CCL Model

The issue of sustainability is a concern for all CCL sites. Sites have identified some elements of the Initiative that could continue but there is a very strong view that without the designated worker to continue in the Links role, the project 'will fall over'. All sites emphasised the importance of a designated worker to undertake the tasks associated with these types of initiatives. There needs to be a 'driver' and this means a person.

All sites stressed the importance of ongoing funding. There was a general view that activities generated by the Initiative would ultimately cease at the end of the funding period.

Elements that were seen by some sites as sustainable include:

- ❑ The increase in child care staff knowledge, experience, confidence and changed attitudes. This feature was reported by many sites as the most sustainable aspect of the CCL Initiative.
- ❑ Some of the networks that have been established could continue. Some sites saw an ongoing role for the advisory group.
- ❑ The majority of sponsor organisations have demonstrated a strong commitment to the project. These organisations are giving attention to sustainable elements of the project and/or taking the knowledge and experience gained from participating in the Initiative to strengthen their work with families.
- ❑ Services have a better understanding of different ways of working.
- ❑ Some resources that have been developed such as the community directory will remain useful although these are time limited in terms of currency if they are not updated.
- ❑ All sites indicated continued funding was required in order to enable more work to occur around sustainability.

4.2.10 Applicability of the CCL Model to other Government initiatives and strategies

The CCL Initiative reflects a growing national and international trend towards multi-component programs. There is a shift away from stand alone services such as child care centres, preschools, parent programs and child and family health services, towards integration of various forms of service delivery. In some countries the school system is becoming the focal point for service delivery, for example the Extended School project in the UK and Schools of the 21st Century (21C) in the USA.

For vulnerable/high risk families, research has shown that programs using multiple interventions work better than those using a single intervention strategy. For example, programs that combine family-focused and child-focused elements have been shown to be the most effective in reducing risk and strengthening pro-social behaviour.

The CCL Model focuses on the extension of the role child care services can play to work more effectively with children and families. It reflects this shift towards a more integrated model of service delivery with an emphasis on building social capital within local communities. Various terminology is used to describe multi-component models including, co-location, hubs, child and family centres and multi-purpose centres.

As a model, the CCL Initiative has demonstrated a number of benefits and indicators of success. These indicators or elements could be used to further build on the model or link key elements with other government initiatives or strategies. The principles and elements of the CCL Model resonate strongly with the direction of the Stronger Families and Communities Strategy, and in particular, the Communities for Children component.

5 Recommendations

Recommendation 1: Funding for the Child Care Links Initiative continue for the current sites until June 2008.

The CCL Model has shown that child care services are an effective platform from which to support families with young children. Since the commencement of the Initiative in July 2004, the evaluation has found that the CCL Initiative has had a number of benefits for caregivers of young children, child care staff and child and family services. It is important to note that community development models have a long establishment or set-up time and require 3 to 5 years funding before sustainable outcomes can be measured.

Recommendation 2: The Minister gives consideration to the funding of further sites.

The findings in this report show that the CCL Model has achieved positive outcomes in a wide range of communities. The CCL Model therefore has demonstrated applicability in different settings and could be transferred to other sites.

Recommendation 3: The evaluation data collection is continued for the duration of the project.

It will be important to continue to measure the further progress and outcomes of the CCL Initiative as community development models often take 3 to 5 years to show sustainable outcomes. Further data collection, including site visits will also ensure that potential future sites benefit from the experience of other sites in similar circumstances.

Recommendation 4: Further consultations be undertaken with Indigenous sites concerning the adaptation of the CCL Model to suit local communities.

The nature of progress at Indigenous sites reflects the individual context in which each community operates. The CCL Model has worked best in Indigenous sites where the CCL worker is well supported by the sponsor, the advisory group and the local FaCS officer. The importance of community consultation and working at the communities' pace have been highlighted as key factors in successfully building community capacity in Indigenous communities.

Recommendation 5: Processes be put in place to ensure that sustainable elements of the CCL projects are maintained beyond the funding period at each site.

A number of elements of the CCL projects have been identified as sustainable such as resources developed during the project and advisory group meetings. Consultation should occur between the sponsor, CCL worker, the advisory group and FaCS officer to develop processes to ensure that the sustainable elements of the project will continue.

Recommendation 6: Any future development/extension of the CCL Model ensures the clear commitment of sponsor organisations.

The level of support the sponsor organisation provides has been shown to be central to the successful application of the CCL Model. Where the sponsor organisation is very supportive and committed to the project, the CCL worker has been able to achieve a greater number of positive outcomes.

Recommendation 7: Any future development/extension of the CCL Model ensures that ongoing community consultation processes are implemented.

One of the key features of the CCL Model is that it is responsive to the identified needs of the community. Conducting further 'community needs analysis' and surveying parents/caregivers will ensure that projects stay focused on community priorities and reflect the changing needs of the community. The consultation processes need to emphasise genuine engagement with the community.

Recommendation 8: That funding for any extension of the CCL Model give consideration to including sites with private/corporate child care services

Some CCL sites have demonstrated effective engagement of and positive outcomes for private/corporate sector services.

Recommendation 9: Information be provided to the relevant training institutions concerning the profile of graduates required to work effectively in these environments.

The CCL Model reflects the changing ways of engaging and working with communities. The CCL worker position calls for a combination of early childhood and community development knowledge and experience. It would be beneficial to inform relevant training institutions of the skill base required by graduates to work effectively in these environments.

Recommendation 10: The principles and elements of the CCL Model be applied to other appropriate Commonwealth initiatives.

The CCL Model reflects a growing national and international shift towards a more integrated model of service delivery with an emphasis on building social capital within local communities. The key elements of the CCL Model could be adapted to fit within other relevant Government Initiatives and Strategies. In fact, the principles and elements of the CCL Model resonate strongly with the direction of the Stronger Families and Communities Strategy, and in particular, the Communities for Children component.

Appendix A: Child Care Links Workers (As at 1 October 2005)

NAME	PROJECT/ORGANISATION	EMAIL	PHONE/FAX
CHILD CARE LINKS WORKERS			
Jacinta Harper	Child Care Services - Links Project Hartnett House, VIC	jharper@mcm.org.au	(03) 9385 3207
Melissa Borrett	Cooper Pedy Child Care Links, SA	mborrett@cpccouncil.sa.gov.au	(08) 8672 5298
Kelly Johnston	Moulden Park Child Care Links, NT	kelly.johnston@goodbeginnings.net.au	(08) 8932 3232
Nareen Carter	Integrated Early Childhood Project (Alice Springs), NT	nareen.carter@nt.gov.au	(08) 8951 7007
Jodie Bell	Fitzroy Crossing Child Care Links, WA	mww@bigpond.com	(08) 9191 5089
Judith O'Donnell	Davoren Park Child Care Links, SA	jodonnell@anglicare-sa.org.au	(08) 8209 5469
Jacqui Hunt-Smith	Ngala Child Care Family Links, WA	jhunt-smith@ngala.com.au	(08) 9305 0749
Kathy Kent	Child Care Services Links Project Dandenong, VIC	kkent@cgd.vic.gov.au	(03) 9769 2457
Senimelia Kingsburra	Yarrabah Family Support Links, QLD	senimelia@gyhsac.org.au	(07) 4056 9388
Samantha Agars	Athol Park Child Care Links, SA	samantha.agars@ucwb.org.au	(08) 8447 6333
Melissa Edwards	Titjikala Intergenerational Child Care Links Project, NT	mel.edwards@bigpond.com	(08) 8956 0844
Nikki Keefe and Julie Coffin	Port Hedland Child Care Links, WA	cclinks@starwon.com.au	(08) 9172 3397
Beata Racz	Penrith Children's Services Connecting Communities, NSW	bracz@penrithcity.nsw.gov.au	(02) 9670 6276
Jacqui Phillips	Caboolture Indigenous Child Care Links, QLD	j.phillips@candk.asn.au	(07) 5428 3661
Nicole Pollock	Richardson Family Links, ACT	nicole.pollock@commsatwork.org	(02) 6292 7488
Susan Reid	North Launceston Child Care Links, TAS	susan.reid@mrcltn.org.au	(03) 6332 2218
Kellie Ryng	Riverwood Child Care Connections, NSW	riverwood@sdn.org.au	(02) 9534 3157
Ellen Fisher	Cabonne Family Links Project, NSW	familylinks@cabonne.nsw.gov.au	(02) 6392 3266
Terry Wernecke	North Burnett Child Care Links, QLD	nbcl@burnettinteractive.net	(07) 4165 4591
FAMILY LINKS WORKERS			
Karen Olesk	Family Links North (Playford), SA	kolesk@playford.sa.gov.au	(08) 8256 0191
Cheryl Wadsworth/ Leanne Symonds	Family Links Southern Fleurieu, SA	familylinks@victor.sa.gov.au	(08) 8551 0539
Shelley Nelson	Family Links West (Charles Sturt), SA	snelson@ucwpa.org.au	(08) 8241 0211
Faye Davis	Family Links Port Lincoln, SA	cclinkspl@westnet.com.au	(08) 8682 6633
Michelle Webbe	Family Links East (Unley) SA	mwebbe@burnside.sa.gov.au	(08) 8366 4133

Appendix B: Progress against the performance indicators: Aggregate level

Appendix B to the report provides a brief overview of the progress achieved by the CCL Initiative against the performance indicators, based on data provided in the third Quarterly Reports. This analysis is provided in Table B1 to Table B7 on the following pages. For the reader's information, corresponding data tables, for the two previous data collection periods are presented in the first Progress Report and the second Progress Report.

These tables have been divided into four categories: (1) CCL sites (excluding Indigenous and Family Links sites); (2) Indigenous CCL sites; (3) Family Links sites and (4) Totals across these sites. Following a review of the data provided in this early stage of the evaluation process distinct differences have emerged between these categories that warrant separate examination and may be useful for determining future policy directions.

To assist with understanding of the data included in each column:

1. CCL sites include data from 16 centres across 13 sites (all centres and sites were also represented in the first Quarterly report and the second Quarterly Report).
2. Indigenous CCL sites include data from 7 centres across 5 sites. Data for Fitzroy Crossing has not been included because it has not been submitted to date. Data from the first Quarterly report was for 8 centres across 6 sites and data for the second Quarterly report was for 4 centres across 2 sites.
3. Family Links sites include data on 6 centres across 3 sites (data from the first Quarterly Report was for 4 centres across 2 sites and data from the second Quarterly Report was for 6 centres across 3 sites). The two remaining sites - Family Links East site (St Morris and Unley & Parkside Community) and Family Links Port Lincoln discontinued in late 2004. These two sites recently recommenced operation in September 2005.

NOTE: It is critical to note that while an overview of progress against performance indicators has been provided at this aggregate level, it is inappropriate to compare data between the site categories or indeed between individual sites. Each site differs too greatly to allow such comparisons – for example, in a given community the level of involvement of the CCL worker, the size of the target population, number of child care centres, the number of staff and level of parents involvement varies dramatically – therefore, comparisons are best made on a site-by-site basis over time – as per the analysis presented in Volume 2 of this report.

Table B1: Activities and events to promote social networking

CCL Sites (excluding Indigenous & Family Links)	Indigenous	Family Links	Total sites
Q 1.1 Activities/events within the nominated child care centre to promote social networking and foster linkages: <i>Types of activities/events and attendees (PI 1.3; 3.2 and 3.2)</i>			
<p>A total of 154 activities were held.</p> <p>On average each centre ran at least 10 activities.</p> <p>53% were new activities.</p> <p>Children made up the largest number of participants at 46%, followed by Parents at 32%, Child Care staff at 10%, Grandparents at 6% and Grandparents at 2%.</p>	<p>A total of 51 activities were held.</p> <p>On average each centre ran at least 7 activities.</p> <p>39% were new activities.</p> <p>Children made up the largest number of participants at 35% followed by Parents at 32%, Other Service Providers at 14%, Grandparents at 10% and Child Care staff at 8%.</p>	<p>A total of 32 activities were held.</p> <p>On average each centre ran 5 activities.</p> <p>69% were new activities.</p> <p>Children made up majority of participants at 40%, followed by Parents at 39%, Child Care staff at 8%, Grandparents at 6% and Other service Providers at 4%.</p>	<p>A total of 237 activities were held.</p> <p>On average each centre ran 8 activities.</p> <p>52% were new activities.</p> <p>Children made up majority of participants at 42%, followed by Parents at 34%, Child Care staff at 9%, Other Service Providers at 8% and Grandparents at 5%.</p>
Q1.2 Activities/events within the nominated child care centre to promote social networking and foster linkages: <i>Involvement of CCL workers, child care staff and other services (PI 1.1 and 2.4)</i>			
<p>Involvement of CCL workers in these activities: 65% in planning, promotion 66%, facilitation 58% other 29% and not involved 5%.</p> <p>Involvement of child care staff in these activities: 51% in planning, 'promotion' 55%, facilitation 45%, other 32% and not involved 19%.</p>	<p>Involvement of CCL workers in these activities: 59% in planning, promotion 65%, facilitation 57%, other 22% and not involved 2%.</p> <p>Involvement of child care staff in these activities: 55% planning, 49% promotion, 35% facilitation and 39% other role and not involved 0%.</p>	<p>Involvement of CCL workers in these activities: 59% in planning, promotion 56%, facilitation, 53% other 22% and not involved 3%.</p> <p>Involvement of child care staff in these activities: 75% planning, 78% promotion, 75% facilitation, 16% and not involved 13%.</p>	<p>Involvement of CCL workers in these activities: 66% in planning, promotion 68%, facilitation 58%, other 27% and not involved 4%.</p> <p>Involvement of child care staff in these activities: 54% planning, 56% promotion, 47% facilitation, 31% other role and 14% not involved.</p>

Table B2: Activities and events to increase caregivers' knowledge, skills and abilities

CCL Sites (excluding Indigenous & Family Links)	Indigenous	Family Links	Total sites
Q2.1 Activities/events within the Child Care Centre to increase caregivers knowledge, skills and abilities: <i>Types of activities/events and attendees</i> (PI 1.3, 4.1 and 4.2)			
<p>A total of 91 formal activities were held.</p> <p>On average each service ran 6 activities.</p> <p>63% were new.</p> <p>Parents made up the majority of participants at 49%, followed by Children at 19% and Child Care staff at 13%, Other Service Providers at 12%, Grandparents at 1% and Other Caregivers at 6%.</p>	<p>A total of 37 formal activities were held.</p> <p>On average each service ran 5 activities.</p> <p>30% were new.</p> <p>Childcare staff made up the majority of participants at 5%, followed by Children at 34%, Parents at 34%, Grandparents at 19%, Other Service Providers at 7%.</p>	<p>A total of 32 formal activities were held.</p> <p>On average each service ran 5 activities.</p> <p>69% were new.</p> <p>Children made up the majority of participants at 40%, followed by Parents at 29%, Other Service Providers at 13%, Child Care staff at 12%, Grandparents at 3% and Other Caregivers at 1%.</p>	<p>A total of 160 formal activities were held.</p> <p>On average each service ran 6 activities.</p> <p>56% were new.</p> <p>Parents made up the majority of participants at 39%, followed by Children at 29%, Child Care staff at 9%, Other Service Providers at 9%, Grandparents at 10% and Other Caregivers at 2%.</p>
Q2.2 Activities/events within the Child Care Centre to increase caregivers knowledge, skills and abilities: <i>Involvement of CCL workers, child care staff and other services</i> (PI 1.1 and 2.4)			
<p>Involvement of CCL workers in these activities: 62% in planning, promotion 68%, facilitation 43%, other role 35% and not involved 8%.</p> <p>Involvement of child care staff in these activities: 48% planning, 52% promotion, 33% facilitation, 32% other role and not involved 23%.</p>	<p>Involvement of CCL workers in these activities: 76% in planning, promotion 76%, facilitation 68%, other role 27% and not involved 11%.</p> <p>Involvement of child care staff in these activities: 73% planning, 65% promotion, 38% facilitation, 43% other role and 5% not involved.</p>	<p>Involvement of CCL workers in these activities: 56% in planning, promotion 56%, facilitation 47%, other role 16% and not involved 16%.</p> <p>Involvement of child care staff in these activities: 63% planning, 72% promotion, 50% facilitation, other role 25% and not involved 44%.</p>	<p>Involvement of CCL workers in these activities: 64% in planning, promotion 68%, facilitation 49%, other role 29% and not involved 10%.</p> <p>Involvement of child care staff in these activities: 57% planning, 59% promotion, 38% facilitation, 33% other role and not involved 23%.</p>

Table B3: Use of the child care centre by other family and community services

CCL Sites (excluding Indigenous & Family Links)	Indigenous	Family Links	Total sites
Q3.1 and Q3.2 Use of the child care centre by other family and community services to conduct activities for families and young children: <i>Type of activities the child care centre has been used for (PI 1.4)</i>			
<p>Out of 16 centres, 11 were used by other services to hold activities.</p> <p>A total of 44 activities were held: 17 were new, and 14 were regular activities.</p> <p>'Provision of venue' was the most popular mode of support (36), followed by 'Assisting with facilitation of activities' (25) and 'child care' (9).</p>	<p>Out of 7 centres, 1 was used by other services to hold activities.</p> <p>A total of 5 activities were held: 3 were new, and 2 were regular activities.</p> <p>'Provision of venue' (5) & 'Assisting with facilitation of activities' (5) were the mode of support for all activities.</p>	<p>Out of 6 centres, 2 were used by other services to hold activities.</p> <p>A total of 4 activities were held.</p> <p>The most common support was 'Provision of venue' (4), followed by 'Assisting with facilitation' (2).</p>	<p>Out of 29 centres, 14 were used by other services to hold activities.</p> <p>A total of 53 activities were held: 20 were new, 16 were regular and 16 existed prior to the CCL project.</p> <p>'Provision of venue' was the most popular mode of support (44), followed by 'Assisting with facilitation of activities' (32) and 'child care' (9).</p>

Table B4: Referrals to local family and community services

CCL Sites (excluding Indigenous & Family Links)	Indigenous	Family Links	Total sites
Q4.1 Referrals to local family and community services/activities: <i>No. of families formally referred by the child care centre to local family and community services (PI 2.1)</i>			
<p>Out of 16 centres, 729 referrals were reported.</p> <p>22% were made for Centrelink, followed by 14% to local recreation venues and 11% to other local Child Care Centres.</p>	<p>Of the 7 centres, 37 referrals were reported.</p> <p>22% were made to Maternal/ Community Child Health Nurses, followed by 14% to Centrelink, 14% to local Community Groups and 14% to local recreation venues.</p>	<p>Out of 6 centres 428 referrals were reported.</p> <p>25% were made for Playgroup Coordinators, followed by 21% to Centrelink.</p>	<p>Out of 29 centres 1194 referrals were reported.</p> <p>22% were made for Centrelink, followed by 13% to Playgroup Coordinators and 12% to local recreation venues.</p>

Table B5: Type and frequency of contact with other services

CCL Sites (excluding Indigenous & Family Links)	Indigenous	Family Links	Total sites
Q5.1 Type and frequency of contact with other services: <i>Contact by Child Care Links Worker (PI 2.2)</i>			
<p>The most regular contact was with the 'Child Care Centre' and 'Parents'.</p> <p>Regular contacts were 'Maternal/Community Child Health Nurses', 'Playgroups', 'Community Groups' and 'Other Local Child Care Centres'.</p>	<p>The most regular contact was with the 'Child Care Centre' and 'Parents'.</p> <p>Regular contacts were 'Other Local Child Care Centres', 'Local Community Groups' and 'Preschool'.</p>	<p>The most regular contact was with the 'Child Care Centre' and 'Parents' and 'Local Government Stakeholders'.</p>	<p>Overall the most regular contact was with the 'Child Care Centre'.</p> <p>Overall regular contacts were with 'Other local Child Care Centres', 'Parents', 'Local Community Groups', 'Playgroups' and 'Preschool/ Kindergarten staff'.</p> <p>Overall the least contacts were with 'GP's', 'Paediatricians', and 'Hospitals'.</p>
Q5.2 Type and frequency of contact with other services: <i>Contact by Child Care Staff (PI 2.2)</i>			
<p>The most regular contact was with 'parents/ caregivers', 'Preschool/ Kindergarten staff'.</p> <p>Regular contacts were identified with 'Maternal/Community Child Health Nurses', 'Local Government Stakeholders and 'Centrelink'.</p>	<p>The most regular contact was with 'parents/ caregivers', 'playgroup', 'Preschool/ Kindergarten staff' and Primary School Staff.</p>	<p>The most regular contact was with 'parents/ caregivers', and 'Preschool/ Kindergarten staff'.</p> <p><i>NB. There were a large number 'not stated'.</i></p>	<p>Overall the most regular contact was with 'parents/ caregivers' followed by 'Preschool/ kindergarten staff'.</p> <p>Overall some regular contacts were identified with 'Maternal/ Community Child Health Nurses', 'Local Community Groups', 'Playgroups', 'Primary school staff' and 'Local Government Stakeholders' and Centrelink.</p> <p>Overall little or no regular contacts were identified with 'Hospitals', and Paediatricians'.</p>

Table B6: Relationship mapping

CCL Sites (excluding Indigenous & Family Links)	Indigenous	Family Links	Total sites
Q6.1 Networking/Relationship Mapping: <i>Child Care Links Worker Perspective</i>			
<p>47% of relationships identified were considered of a 'cooperating' nature.</p> <p>Approximately 22%, 15% & 16% were 'coordinating', 'collaborating' or 'partnership' respectively.</p>	<p>29% of relationships were identified as 'cooperating' & 30% 'coordinating'.</p> <p>While approximately 22% & 19% were 'partnership' or 'collaborating' respectively.</p>	<p>51% of relationships were considered of a 'cooperating' nature.</p> <p>Approximately 19%, 19% & 11% were 'coordinating', 'collaborating' or 'partnership' respectively.</p>	<p>44% of relationships identified were considered of a 'cooperating' nature.</p> <p>Approximately 23%, 16% & 16% were 'coordinating', 'collaborating' or 'partnership' respectively.</p>
Q6.2 Networking/Relationship Mapping: <i>Child Care Centre Staff Perspective</i>			
<p>47% of relationships identified were considered of a 'cooperating' nature.</p> <p>Approximately 29%, 14% & 10% were 'coordinating', 'collaborating' or 'partnership' respectively.</p>	<p>43% of relationships identified were considered of a 'cooperating' nature.</p> <p>Approximately 21%, 15% & 21% were 'coordinating', 'collaborating' or 'partnership' respectively.</p>	<p>41% of relationships identified were considered of a 'cooperating' nature.</p> <p>Approximately 29%, 16% & 13% were 'coordinating', 'collaborating' or 'partnership' respectively.</p>	<p>45% of relationships identified were considered of a 'cooperating' nature.</p> <p>Approximately 27%, 15% & 12% were 'coordinating', 'collaborating' or 'partnership' respectively.</p>

Table B7: Types of promotional activities

CCL Sites (excluding Indigenous & Family Links)	Indigenous	Family Links	Total sites
Q7.1 Types of promotional activities: <i>Promotional activities undertaken by CCL worker to increase the awareness of the importance of the early years (PI 5.2 and 5.3)</i>			
<p>There were 103 promotional activities listed.</p> <p>The most popular activity was information sheets/package/resources' 20%, 'flyers' 19%, 'articles' 17% and 'meetings/presentations/site visits' 13%.</p>	<p>There were 45 promotional activities listed.</p> <p>The most popular activity was 'flyers' 20%; 'community discussion/word of mouth' 18%, 'meetings/presentations/site visits' 18% and 'newsletters' 13%.</p>	<p>There were 71 promotional activities listed.</p> <p>The most popular activity was 'flyers' 23%; 'community discussion/word of mouth' 20%, information sheets/package/resources' 14% and 'meetings/presentations/site visits' 14%.</p>	<p>There were 219 promotional activities listed.</p> <p>The most popular activity was 'flyers' 21%; 'information sheets/ package/resources' 16%, 'community discussion/word of mouth' 15% and 'meetings/presentations' 14%.</p>
Q7.2 Types of promotional activities: <i>Promotional activities undertaken by child care staff to increase the awareness of the importance of the early years (PI 5.2 and 5.3)</i>			
<p>There were 91 promotional activities listed.</p> <p>The most popular activity was 'newsletters' 24%, followed by flyers' 13%, community discussions/word of mouth' 13% and 'meetings/presentations/site visits' 12%.</p>	<p>There were 15 promotional activities listed.</p> <p>The most popular activity was 'community discussion/ word of mouth' 27%, followed by meetings, presentations/site visits 20%, 'information sheets/package/resources' 13% and display/art exhibition 13%.</p>	<p>There were 53 promotional activities listed.</p> <p>The most popular activity was meetings/presentations/sites visits' 19%, community discussions/word of mouth 17%, 'information package/resources' 15%, and display/art exhibition 13%.</p>	<p>There were 148 promotional activities listed.</p> <p>The most popular activity was 'newsletter' 19%, followed by community discussions/word of mouth' 17%, 'meetings/presentation/ site visits' 16% and 'information package/resource' 14%.</p>
Q7.3 Types of promotional activities: <i>Promotion of community activities external to the child care centre (PI 3.3)</i>			
<p>15 of the 16 centres listed activities.</p>	<p>3 of the 7 centres listed activities.</p>	<p>5 of the 6 centres listed activities.</p>	<p>Overall, 23 of the 29 centres listed activities.</p>

Appendix C: Round Two Site Visit Interview Questions

INTERVIEW WITH THE CHILD CARE LINKS WORKER (approx 2 hrs)

Clarification of previous data

- Discuss site profile [refer site notes] and ask if demographics or other elements of the project have changed since last site visit.

Have initial expectations of the project been met?

- Recap on CCL worker's initial expectations of the CCL Initiative [refer site notes] and discuss whether they feel the CCL Initiative has met their expectations.

Key achievements and learning's of the CCL Initiative

- Discuss what they consider to be the key achievements of the CCL Initiative.
- Can they think of any outcomes from this project that were unexpected (outside Work Plan and Performance Indicators)?

Perceived changes

- Discuss what changes they think have occurred due to the CCL Initiative for-
 - staff
 - parents/ caregivers
 - services
 - the wider community

Usefulness of Tools

- Discuss how site conducted initial community needs analysis. Does the CCL worker think current community and parents/ caregivers needs have changed since the project commenced? If so, how?
- Discuss how they have used the work plan they developed for the project and how useful they have found it.
- Ask if a map of services or community directory was developed. Discuss how they have disseminated this information and how useful it has been.
- Discuss how they found the evaluation tools - Quarterly Report, Activity Records, and Calendars.
- Discuss how FACS has supported the site to carry out the project. Did they feel this support was important for the project?

Reflections

- Reflecting on the project as a whole, what factors helped/hindered the CCL worker in implementing the CCL Initiative?
- Can they think of any other factors that have contributed to the success of the project?

Strategies

- Discuss which strategies they found to be the most effective (ie. promotion, activities, events) for engaging parents/ caregivers and getting them involved.

Future directions

- Discuss what they think still needs to be done to achieve the aims of CCL?

DISCUSSION WITH ADVISORY GROUP MEMBERS (approx 1.5-2 hrs)

Have initial expectations of the project been met

- Recap on initial expectations of the CCL Initiative [refer site notes] and discuss whether they feel that the CCL Initiative has met AG expectations.

Key achievements and learning's of the CCL Initiative

- Discuss what contribution their organisation has made (as an AG representative) to the CCL Initiative.
- Discuss what they consider to be the key achievements of the CCL Initiative.
- Can they think of any operational issues that helped or hindered the project?

Unexpected outcomes

- Can they think of any outcomes from this project that were unexpected? (outside Work Plan and Performance Indicators)

Sustainability of initiatives beyond the life of the project

- What role has the AG had in ensuring the sustainability of the focus of the CCL Initiative?
- Is there an opportunity for the group to have an ongoing role once the formal aspect of the project ceases?

Factors that contributed to the success of the project

- What factors contributed to the success of this project? [Get each AG member to list one]

DISCUSSION WITH STATE AND TERRITORY FACS OFFICER (approx 1 hr)

- How do you think the project has gone?
- Has the project got to where you thought it would?
- What level of support has the STO provided?
- Frequency of contact?
- Has the project achieved what you thought it would?
- Issues

DISCUSSION WITH THE SITE SPONSOR (approx 1 hr)

Have initial expectations of the project been met

- Recap on initial expectations of the CCL Initiative [refer site notes] and discuss whether they feel that the CCL Initiative has met their expectations?

Key achievements and learning's of the CCL Initiative

- Discuss what they consider to be the key achievements of the CCL Initiative?
- Ask if they think of any operational issues that helped or hindered the project?

Unexpected outcomes

- Ask if they can think of any outcomes from this project that were unexpected? (outside Work Plan and Performance Indicators).

Value of role

- What have they seen as the value of the CCL Initiative
- What have they seen as the value of the position (designated worker)?
- What skills were they looking for when they appointed the CCL worker?
- Are they still the skills they think they needed?

Sustainability of initiatives beyond the life of the project

- Is there an opportunity for your organisation to have an ongoing role once the formal aspect of the project ceases?
- Has the CCL Initiative influenced any future directions your organisation will take?

Evaluation Process

- Did they appoint a local evaluator? Can you talk about their role and any issues? Benefits?
- How have they found the evaluation process?
- Discuss how FACS has supported the site to carry out the project. Did they feel this support was important for the project?

CHILD CARE STAFF (approx 1 hr)

Introduction

- How long have they been working at the centre?
- Which room / in what capacity?

Impressions of CCL Initiative

- Discuss their impressions of the CCL Initiative.

Involvement in CCL events and activities

- What involvement have they had in CCL events and activities?
- How did they feel that about their level of involvement (too low, too high)? Has it affected their workload?

Outcomes

- Do they think the Centre has changed in the past 12 months as a result of the CCL Initiative?
 - impact on staff (ie. skills, knowledge).
 - impact on parents/ caregivers (ie. skills, knowledge, socialising with other parents/ caregivers).
- What opportunities have staff had to network/link with other agencies and organisations (CCS, Council, Kinder etc)?

Relationship with CCL worker

- Value of having a designated person to do the CCL role.

- What do staff think the CCL worker has done?

FOCUS GROUP WITH PARENTS (approx 1 hr)

Introduction

- How long have you been using the Centre?
- What services/activities do you use at the Centre?

Awareness of CCL Initiative

- Have you noticed any changes at the Centre in the last 12 months-
 - activities and events offered at the Centre?
 - the sort of information the Centre is providing to you?
 - other changes?
- Have you heard about the CCL Initiative?

Participation in CCL Initiative

- Have you participated in any activities or events offered within the Centre in the last 12 months? If so-
 - Which activities/events did you attend?
 - What motivated you to attend? What did you enjoy most and like least about the activity/event?
 - What do you think you learnt?
- Do you feel that you have opportunities to meet other parents and caregivers? Is this different to before?

Links

- Have you participated in any activities held by other services in the area that you have heard about through the Centre? Which activities?
- Have you become aware of any services in the local area that you didn't know about before?
- Has the Centre encouraged you to contact other services?
 - Have you contacted these services?
 - Did you find them helpful?

Level of satisfaction with the Centre

- Has your level of satisfaction with the Centre changed in the past year?
- Can you think of any services or information you would like the Centre to offer that they are not currently offering?

Appendix D: Communication Strategy

Website

The Centre for Community Child Health has set up a web page specifically for CCL workers to keep in touch with the evaluation and with CCL workers from different sites. The site is accessible to CCL workers via the Early Childhood Connections website (<http://www.ecconnections.com.au>) using the username and password provided to all CCL workers. Ecconnections is an Australian website, managed by the Centre for Community Child Health, containing more than 400 Australian and 350 International website links. The CCL Evaluation web page has been updated regularly since the evaluation commenced and will be continually updated during the project. It is the evaluation team's perception that the information has been well received.

During the period between 24 June 2004 to 7 July 2005 there has been total of 1,298 download requests from the CCL Evaluation web page.

The CCL Evaluation website site currently contains pages with the following information:

Project description	In addition to presenting downloadable version of the Child Care Links Initiative - The Model and the Child Care Links Project - Description , this page offers a description of most of the sites. Where new CCL workers have been appointed, photos have been updated or are in the process of being updated.
Evaluation plan	<p>This page contains details of the plan that CCCH is following for the evaluation of CCL as at October 2004.</p> <p>This page also includes a downloadable copy of the Quarterly Report, the Activity Record and Calendar for each respective month.</p>
Contact details for sites	This provides the contact details for each Child Care Links Worker – this is due to be updated in the coming days as some workers have changed since this list was posted.
Human Interest and Good News Stories	<p>This section contains two parts: one section seeks Human Interest Stories that often come with the type of community development work each CCL worker is engaged in. Sites are invited to forward such stories to the team for posting on the webpage.</p> <p>The second part presents Good News Stories – as provided to the evaluation team by FaCS. Earlier this year, FaCS informed the evaluation team that some sites had drafted good news stories for the FaCS Media Unit -however, these had not been published.</p>
Map of Sites	A map highlighting where all the Child Care Link Sites (including ex-Family Links Sites) are located is provided.
Newsletter	Downloadable versions of the Newsletters completed for July 2004, September 2004, February 2005, May 2005 and September 2005.

National workshop	A summary of the findings of the National Workshop in August 2004 and a copy of the Family Links Evaluation completed in May 2004 are accessible on this page.
Site stories and photos	This section contains stories and photos based on the experiences of Child Care Links workers. Some of these stories are based on comments made by workers in Activity Records while other stories are based on the interactions of CCL and evaluation team members during site visits.
The Links Kit	The Links Kit was developed to assist children's services in developing social capital among families and provides many practical examples of how this can be achieved. Child Care Links Workers may find it a valuable resource to refer to in planning and implementing components of their project and therefore a downloadable copy has been posted here.
Tips/ideas	Several tips and ideas have been submitted by sites as the evaluation has been underway. Where provided, these have been posted to allow other sites access to key learning's others have made!

Newsletter

To date, five editions of the Evaluation Newsletter have been developed and distributed to CCL workers: July 2004, September 2004 and February 2005, May 2005 and September 2005. Further newsletters will follow in 2005 as per the agreed workplan.

Telephone/email support

Ongoing telephone and email support has been provided to CCL workers since the project commenced. The majority of CCL workers have been utilising this support.