AN OVERVIEW OF CHILD AND FAMILY CENTRES
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1. Tasmania’s Child and Family Centres

Child and Family Centres (CFCs) are a place-based early childhood service model for families and children from pregnancy to age 5.

The purpose of CFCs is to improve the health and wellbeing, education and care of Tasmania’s children in their early years by supporting parents, strengthening communities and enhancing accessibility of services in the local community.

There are 12 CFCs in Tasmania funded by the Department of Education (DoE). The CFC-based model provides a single point of contact for children and their families to connect with coordinated, universal, targeted and specialist services. CFCs connect users with both government and non-government services that address a wide range of needs including; child health (CHaPs are a key partner), education and development (for children and parents/carers), parenting assistance, nutrition, adjunct child care, family support and many more essential services.

CFCs are underpinned by Tasmania’s Strategy for Children Pregnancy to Eight Years 2018-2021. This strategy is directly linked to the Tasmanian Government’s policy priority of lifting education outcomes for all Tasmanian children. The CFC vision is that all Tasmanian children have the best possible start in life.

The goals of Child and Family Centres are to:

- Improve health and educational outcomes for children from birth to five years
- Provide a range of integrated early years services in the local community to support the development of children from birth to five years
- Build on the existing strengths of families and communities and assist in their educational needs.
- Increase participation in early years programs such as those offered through Launching into Learning (LiL)
- Build community capacity by developing partnerships with parents, carers and the community
- Respond to child and family needs in a seamless and holistic manner
- Support a successful transition from pregnancy through to the early years of school

(Any reference to ‘parents’ in this document refers also to carers, grandparents and legal guardians, however they are constituted within the community.)

2. Why Child and Family Centres?

The establishment of CFCs was announced by the Government in 2009 in response to the growing body of evidence from around the world about the critical importance of the early years and the need for a radical shift in the way services are delivered to children and families.

Evidence shows that it becomes increasingly difficult to change the trajectory of a child’s life course as they grow older. Investments in early childhood services are cost effective, yielding long term benefits to children and to the community. The earlier services are provided, the greater the benefits. In response to this evidence governments are now moving towards effective integration of services in an effort to improve outcomes for young children and their families.

Policy Brief No 17 2009.
"In order to deliver maximum community benefit, CFCs should provide a truly integrated service delivery model. The co-location of services for children and families should be situated within an overarching vision and set of goals that sees a fundamental re-engineering of the full range of services currently delivered by Government agencies, particularly those provided by the Department of Health and Human Services and the Department of Education, as opposed to simply moving services to a single site."

(The Hon. David Bartlett, Premier, 2009)

The Tasmanian results of the 2009 Australian Early Development Census (AEDC), showed a need to focus on early years’ service delivery in Tasmania’s most vulnerable communities. Easy-to-access pathways needed to be developed that engaged and supported families and children. Equally challenging was finding effective ways to engage service providers with each other and their communities. This transformation would happen through co-locating services and a carefully considered cultural shift in the early years’ service delivery model. The 2009 announcement of the development of Child and Family Centres (CFCs) in Tasmania marked the beginning of this whole-of-government work.

3. The essential features of Child and Family Centres

Child and Family Centres:

- Are a safe, welcoming place for all children and their families
- Offer local programs, information and support for families with children pregnancy to age 5
- Are places where all families and carers are supported in their vital parenting role and build parent competencies
- Have services which are co-designed in partnership with families and communities to meet and respond to changing local community needs
- Are centres where government and non-government services work in partnership
- Facilitate services working collaboratively to provide a continuum of seamless care over time
- Are underpinned by a philosophy and process that supports community development
- Provide shared learning and training for families and professionals
- Are outcomes/results oriented, primarily focused on children’s health, wellbeing, education and care outcomes

All services provided from a CFC:

- Are child and family centred
- Respect all cultures
- Acknowledge the importance of family in a child’s development
- Respect mothers, fathers and carers as partners in development.
- Build positive relationships
- Promote inclusive leadership and teamwork
- Are responsive to the needs of children, families and the community
- Involve families and community members in decision making and governance
4. **Staffing**

Currently each CFC has 3 fulltime equivalent (FTE) staff funded and line managed by the Department of Education. Staff include:

- Centre Leader – leads collaborative service delivery
- Community Inclusion Worker – facilitates community engagement
- Education Officer (0.6 FTE) – supports parent child relationships in quality early learning programs
- 0.4 FTE – is determined by community need and may include a social worker, family support worker.
- 7 CFCs also have Aboriginal Early Years Education (AEYEW) workers who work closely with Aboriginal families to support participation in early years activities and transition to school.

5. **Where are Child and Family Centres located?**

Sites for CFCs were chosen after extensive research to identify communities with both the need for and potential capacity to support a centre. The key factors underpinning the selection of locations were the level of disadvantage, the projected population growth and the number of 0-5 year olds in the immediate area.

There are currently 12 CFCs across the state located in the following communities:

- Beaconsfield
- Bridgewater – tagari lia
- Burnie
- Chigwell
- Clarence Plains
- Derwent Valley - ptunarra
- East Devonport
- George Town
- Geeveston - wayraparatee
- Queenstown
- Ravenswood
- St Helen’s

The tagari lia Centre at Bridgewater and wayraparatee Centre in Geeveston have a specific focus on supporting Aboriginal children and their families. There is a strong connection with the Aboriginal community with a broad range of cultural activities and education opportunities available to all centre users.

Georgetown and Queenstown are a Hub model integrated with Libraries Tasmania and Service Tasmania. These sites offer other government and non-government services delivered within the same site or from the same facility. These include services such as: Child Health and Parenting Services (CHaPS), Libraries
Tasmania, Service Tasmania, and education and child care services. These services are line managed within their own department.

**Contact information for the Centres**

It is a long-term objective to increase the number of CFCs in Tasmania and continue to forge strong connections with Tasmanian communities. In 2017 the Tasmanian Government committed to building additional CFCs in areas of high need to facilitate outreach services for Tasmanian families with children aged 0-5.

6. **CFC Strategic plan**

The direction of CFCs is guided by a strategic plan that is renewed every three years. The purpose of a strategic plan is to centre the vision for CFCs and create a set of common priorities which guide decision making and all aspects of work. The strategic plan clearly details priority areas, goals and measures to monitor progress. The 2015-17 Strategic Plan identified the following focus areas:

- Planning and delivering high quality education and care programs and services for babies and young children, so they develop as confident and curious learners prior to beginning school.
- Engaging, supporting and working with local children and families in a collaborative way by connecting to and working with relevant health, wellbeing, education and community services.
- Developing and maintaining strong relationships between families, schools, services and the broader community.
- Working with children and families using the Early Years Learning Framework for Australia.

[**Tasmania’s Child and Family Centres Strategic Plan 2015-2017**](#)

Each centre also produces an Annual Improvement Plan and an Annual Report each year. These documents collate current data, set targets and measure outcomes and successes.

7. **Child and Family Centre Model of Service Delivery**

Under the integrated service model of CFCs services in the local community come together with a shared vision for outcomes that support positive child development and strengthen community capacity. Joined up services include, Neighbourhood Houses, Health (CHaPs), Child Safety Services, Oral Health and not for profit organisations who work collaboratively so that parents only need to tell their story once.

Practitioners work in partnership to co-design and deliver services that are appropriate, responsive and support children, families and communities. The Family Partnership Model (Davis & Day 2010) underpins the CFC philosophy of building respectful and genuine partnerships with families and supporting quality professional practice.

Early learning programs are guided by principles of the Early Years Learning Framework (EYLF). These principles and CFC programs aim to:

- Foster secure, respectful and reciprocal relationships
- Form partnerships
- Promote high expectations and equity
- Respect diversity, ongoing learning and reflective practice

[Community engagement and participation](#) is an integral part of the CFC model and ensures people have the opportunity to shape decisions that may impact on young children’s lives, families and local communities.
CFCs have a set of community engagement principles that outline the ways parents, services, communities and individuals can connect and interact to develop and implement policies, programs, services and projects in CFCs. This includes information sharing, consultation and active participation of the community in decision-making.

In general centres are open 9am -5pm, 50 weeks of the year for drop ins or appointments. Service delivery is principally focused on pregnancy to age five. Overall, the service mix of a CFC is based on local needs as identified by the community and these will differ according to each community. At present there is an average of 28 programs on offer at each centre and these span the domains of early learning, health, family support and adult education.

Services for pregnancy to age 5 children may include:
- Antenatal
- Launching into Learning (LIL) programs for early years
- Early childhood education and care
- Child Health and Parenting Services (CHAPs)
- Child and Family health
- Oral health
- Immunisation
- Nutrition in the early years Playgroups
- Children’s therapies e.g. speech and language, Early Childhood Intervention Service (ECIS)
- Visiting Paediatricians
- Adjunct care

Services for families and carers may include:
- Adult community education, and vocational learning
- Alcohol and drug services
- Coffee meeting place
- Family support including parenting programs
- Information on family issues like parenting, child development, healthy eating
- Mental Health
- Parent education programs
- Pathways to employment programs for parents

Opportunities for carers, community and professionals may include:
- Voluntary work and community building
- Training and support for early years services and practitioners
- Training for community members
- Fostering of local networks
8. **Working Together Agreements**

Working Together Agreements (WTA) are an integral part of the CFC service delivery model. These agreements are created through co-construction with staff, families and the community. They take into consideration the unique dynamics and cultural needs of each community, outlining values and behaviour expectations for everyone who comes into contact with a CFC. WTA’s are based on Family Partnership Model principles and create a common philosophy and framework. One of the aims of a WTA is to make sure that respective roles and responsibilities are understood.

Some examples of the values and expectations shared through CFC Working Together Agreements include: using open communication, being welcoming and friendly and non-judgemental, inclusiveness, having respect for everyone, taking responsibility, understanding diversity.

9. **Governance of CFCs**

Child and Family Centres sit within the Department of Education and the Department fund and manage the operation of the centres.

The place-based collaborative service delivery model facilitates communities to take a level of control and responsibility for the service design and governance of the local centre. Many CFCs have an Advisory Body or Board. Some of these Advisory Bodies evolved from Local Enabling Groups (LEGs) which were a crucial part of community engagement and decision making during the early establishment of CFCs. Advisory Boards have a representation of at least 50% community members, with the rest being managers or service providers from the CFC, government and non-government organisations. Advisory Bodies provide information and support to the Centre Leader to assist their leadership of the CFC.

10. **Statewide Forums**

CFC Statewide forums are the premier event on the CFC calendar. Held annually, each forum is hosted by two or three CFCs working in collaboration and is organised around a central theme. The forum usually runs across a day and is a chance for participants from across the CFC community to get together and participate in workshops, share knowledge and support one another.

The Learning and Development Team facilitated Statewide Forums from July 2009, in order to bring together CFC communities from all corners of Tasmania to share what had worked well and what had been learnt. As CFC communities became more confident and skilled, they began hosting, arranging and running the forums themselves, supported by the Department of Education. Whilst visiting guest speakers in the field of early childhood practice are invited, increasingly parents and community members have taken on more prominent roles, including guest speaking, participating in panel discussions, catering, facilitating and organising.

The first forums attracted around 70 registrations, mostly attendees from services. However, more recent forums have more than doubled this number of registrations with around half of the attendees made up of parents and/or community members.
Statewide CFC forums aim to:

- create a learning environment that is accessible to parents, educators and other service providers.
- build the confidence of parents to attend a forum alongside educators and other service providers.
- experience learning in an environment where no one person is the expert and parents are respected for being experts on their own children
- build relationships between educators, service providers and parents.

Statewide forums remain a point of difference in the operation of Tasmania’s CFCs with the events highly valued by the entire CFC community.

11. Implementing Child and Family Centres in Tasmania – A history

After the announcement of CFCs by the State Government in 2009, a CFC Project Team was developed which oversaw implementation and ensured genuine stakeholder engagement to deliver responsive family-centred services. CFCs were implemented in Tasmania using a number of strategies and frameworks to support the cultural shift required to move from an expert model to a partnership model.

11.1. Platforms - services redevelopment framework

Platforms, a framework developed by the Murdoch Children’s Research Institute in 2009 was used to guide communities, government agencies and service providers through a 6 step process to facilitate collaborative partnerships and early childhood service delivery. The Platforms redevelopment framework is based on compelling research about the impact of the early years on children’s life course. Platforms played a key role in the development of the Local Outcomes Framework. The Platforms six step process is:

1) Start: raise awareness of issues and gather support.
2) Build: establish/strengthen partnerships, create shared understanding of how you will work together to create a vision.
3) Learn: take an ecological approach collecting information and making sense of that information
4) Plan for change using an outcomes-based approach.
5) Implement
6) Review: analyse data and consider next steps.

11.2. CFC Statewide Outcomes Framework

During the implementation of CFCs, the CFC Project Team together with the Centre for Community Child Health (CCCH) developed a CFC Statewide Outcomes Framework through discussion with Local Enabling Groups in each community. The draft Framework was then endorsed by the Early Years Strategy Interdepartmental Committee (EYSIDC) and was helpful in assisting local communities to develop a Local Outcomes Framework for each CFC.

The Framework identified broad outcomes, objectives, strategies and activities of the CFC initiative together with impact and progress indicators. Its main role was to establish a common framework and point of reference to guide a consistent approach to the planning, reviewing and monitoring for CFCs.
The Centre for Community Child Health (CCCH) was contracted to undertake the Action Research Project which supported the CFC initiative. CCCH worked with Local Enabling Groups (LEGs) to plan, deliver and evaluate the CFC initiative using an outcomes-based approach in order to answer the following questions:

- What are the outcomes we want for children and families as a result of a CFC being established in our community?
- How do we know we are making progress towards these outcomes?
- Have we actually delivered what we said we would and was this done as intended and according to best practice?
- How can we make changes to improve our practice and reach better outcomes?

An outcomes-based approach encouraged a focus on the difference that we wish to make, not just on the activities that we undertake.

The desired long term broad outcomes were defined as:

- Children are born healthy and are confident and curious learners.
- Families nurture healthy development and wellbeing of their children.
- Communities support, value, honour and respect children and childhood.
- Supports and services respond early to the identified needs of young children and their families in culturally appropriate ways.

Documents below which help explain what the Statewide Outcomes Framework is:

- CFC Statewide Outcomes Framework
- CFCs - Development of a Local Outcomes Framework
- CFCs - Development of a Local Outcomes Framework - State and National Activity

### 11.3. CFC Learning and Development Strategy

The Early Years Strategy Interdepartmental Committee (EYSIDC), which was later known as the Interdepartmental CFC Steering Committee, was responsible for strategic oversight of the project.

Integral to the development of CFCs was a strong Learning and Development Strategy for both service providers and community members in all CFC communities.

### 11.4. Why a Learning and Development Strategy?

The CFC Project aimed to fundamentally change the way our system provides services for families, particularly those that often find services difficult to access. This is not achieved by simply co-locating services in one physical space, but involved changing the way services are designed and delivered.

Aside from the infrastructure demands of the CFCs, the most significant challenge was to ensure genuine community engagement in the vision and co-production of the desired outcomes for children and families - as well as in the design, building and governance of centres.

The objective of the Learning and Development Strategy was to provide a planned professional development program for staff and community members who were involved in the establishment and operation of CFCs.
11.5. Philosophy of the Learning and Development Strategy

The Learning and Development Strategy put significant emphasis on genuine engagement with the local community in the visioning, planning, design, implementation and functioning of the CFCs. Wherever possible, all meetings and workshops were planned and held in a way that supported access by interested parents and other community members. The Tasmanian CFC approach to engaging community was heavily influenced by Dr. Margy Whalley (Pen Green Centre for Children and Families, Corby, UK. www.pengreen.org). Dr Whalley acted as a Critical Thinker in Residence for the duration of the project and reiterated the importance of co-design. The CFC Project recognised that co-production of service models, between community and services, is the most respectful and sustainable approach to service re-development.

“Most public services are beginning to see that co-production is the way forward to ensure the most effective use of resources, greater personalisation, community cohesion and satisfaction. Co-production is defined as a strong and equal partnership between the users and providers of public services to achieve a valued outcome. Within a philosophy of co-production everyone has something to contribute, reciprocity is important, social relationships matter and social contributions (rather than financial contributions) are encouraged.”


The ultimate aim of CFC’s is to not only improve outcomes for children but also to assist their parents and other community members to increase their local community participation through volunteerism, further training and skill development, networks of support, and future employment opportunities.

The Learning and Development Strategy was formally concluded in 2015 after playing a pivotal role in community engagement and the establishment of CFCs. The Department of Education continues to recognise the importance of maintaining high standards of people and change management in a number of ways. Just a few of these include:

- Implementing professional support and training through the Professional Learning Institute.
- The continuation of Family Partnership Model Training and,
- Using reflective practice to guide the delivery of services and supports in CFC communities.

11.6. Local Enabling Groups

A critical community leadership initiative was the establishment of Local Enabling Groups (LEGs) as governance bodies in all communities. LEGs were chaired by a senior member of either DoE or DHHS and had representation from the local council, community, parents, government and non-government service providers.

LEGs helped to directly inform the location and design of each CFC, participating in a continuous dialogue throughout the design process ensuring relevant parties were represented and that the end result responded to local community needs. LEGs were crucial in providing community feedback to the CFC Project Team and EYSIDC/IDSC about the CFC implementation process.

Community engagement principles were used to harness community awareness, enthusiasm and co-participation. The guiding principles of the CFC Project:

- Connecting with those hardest to reach - inclusiveness
- Changing the ways government and the community work together – reaching out
- Listening, understanding and acting on experiences different from our own – mutual respect
• Using open and accountable practices and processes - integrity
• Incorporating diverse values and interests – affirming diversity
• Working together to add value – adding value

These guiding principles have been reflected throughout the process of establishing CFCs, right from the early community forums and initial setting up of LEGs in each CFC community. A further important first step was the appointment in each community of a Community Inclusion Worker.

12. Child and Family Centre Functional Design Brief

The Department of Education developed a Child and Family Centre Functional Design Brief for use by architects responsible for the design of Child and Family Centres. The document was developed in consultation with representatives from Launching into Learning, Child Health and Parenting Services, Neighbourhood Houses and Education and Health representatives. Each Centre’s LEG/Advisory Group alongside community members used the brief to make decisions on the Centre’s colour schemes, furniture, play equipment and other key interior design features.

Centres differ significantly in their appearance but all share design principles. The underpinning philosophy for the design of centres was to create a child and family centred environment promoting a harmonious autonomy of space, which relates equally to children, parents and the wider community who are the primary users of the facility.

The Functional Design Brief outlines a range of requirements that are incorporated into the design of every centre. There are a number of essential requirements as well as a list of desirable outcomes. These include:

• Respond to specific community needs
• Design for an urban and local community context
• Design for the environment

The Functional Design Brief states that Child and Family Centres will:

• provide social and cultural diversity within the design solution
• create a challenging and inspiring centre for child focused learning
• develop meaningful interaction between children, parents and staff on a daily basis
• provide and promote appropriate allied health services for children and their respective families.

Child and Family Centre Functional Design Brief

13. Family Partnership Model

The Family partnership Model (Centre for Parent and Child Support, UK, 2002) underpins and is integral to all training within CFC communities on an ongoing basis. It supports a shared language and understanding as well as a common philosophy for all CFCs. As a significant evidence-based reference for CFCs, the Learning and Development Strategy Team provided a 5 day Family Partnership foundation course to all CFC service personnel and community members engaged with the CFC development process. This shared approach to professional development helped to reinforce the importance of genuine engagement with community and continues to underpin CFC practice.

The Family Partnership Model
“The Family Partnership Model is an innovative approach based upon an explicit model of the helping process that demonstrates how specific helper qualities and skills, when used in partnership, enable parents and families to overcome their difficulties, build strengths and resilience and fulfil their goals more effectively.

The Family Partnership Model is an evidence-based method, the effectiveness of which has been demonstrated through a number of research trials conducted by the Centre as well as independent randomised trials. The findings of these trials indicate positive benefits to the developmental progress of children (e.g. Davis & Rushton, 1991; APIP, 1998), parent-child interaction (Barlow et al, 2007; Puura et al, 2005) and the psychological functioning of parents, families and children (e.g. Davis & Rushton, 1991; Davis & Spurr, 1998).”

14. Data collection and evaluation

As CFCs have evolved the Data Collection Strategy, which was first developed during the implementation of CFCs, has also grown and been refined. The Data Collection Strategy, developed by the Department of Education was first intended to measure and evaluate the implementation of CFCs against the Statewide Outcomes Framework. The current Data Collection Strategy has additional measurement tools including a twice yearly census. Data collected provides information on stakeholder satisfaction and the effectiveness of CFCs. It also informs the ongoing improvement measures for each CFC.

Data collected continues to show a high level of community engagement. Recent census results show an average of over 20,000 visits per year across the 12 CFCS, with an average of 1,701 visits per month.

15. Key professional learning opportunities

CFC service providers and community members have access to a range of key professional learning courses and opportunities. These include:

- Family Partnership Foundation Course and Facilitator Training
- Father Inclusive Practice
- Aboriginal Cultural Safety Training
- Reflective Practice
- Empowering Parents Empowering Communities.

16. CFC Performance and recognition

CFCs have continued to grow in strength and have successfully maintained strong community engagement roots throughout each year of operation.

“The Tasmanian Child and Family Centre project is now recognised by national and international early years leaders as leading the way in engaging communities of disadvantage in the co-production of local service models.”

(Centre for Community Child Health, Melbourne, 2015)

16.1 Telethon Kids Institute Report

In 2015 the Telethon Kids Institute, in conjunction with the Department of Education, commissioned a report into the impact of centres on parents’ use and experiences of services and supports in the early
years. The report titled; Engaging, supporting and working with children and families in Tasmania’s Child and Family Centres provides an in-depth evaluation of CFCs and their impact.

Key findings:

The results showed that Tasmania’s Child and Family Centres had positive impact on parents’ use and experiences of services and supports for young children. Parents provided evidence that Centres were successfully engaging, supporting and working with families to give their children the best start in life. Parents experienced Centres as welcoming, respectful and inclusive places that were helping them develop positive child, family, school and community connections.

Telethon Kids – Engaging, supporting and working with children and families in Tasmania’s Child and Family Centres

Tasmania’s Child and Family Centres: a place-based early childhood services model for families and children from pregnancy to age five (Taylor, Jose, van de Lageweg & Christensen 2017)

16.2. Institute of Public Administration Australia Awards

In 2016 Tasmania’s CFCs were nationally recognised as demonstrating best practice and innovation at the Prime Minister’s Awards in Public Sector Management. The Tasmanian Government was awarded silver for its implementation of CFCs.

Prime Ministers Awards in Public Sector Management

16.3. Legislative Council Select Committee Inquiry into Child and Family Centres

In 2017 a Tasmanian Legislative Council Select Committee was established to conduct an inquiry into Tasmania’s CFCs. The committee looked at a range of areas defined in the terms of reference as:

- The challenges to and benefits of the provision of an integrated collaborative health and wellbeing and early education and care service model;
- The role of Child and Family Centres in providing early learning to children;
- The role of Child and Family Centres in providing education and support to families and carers in their parenting role and participation in early learning programs.
- The outcomes and broader impacts of Child and family Centres to the communities in which they are located.
- The level of government funding provided to Child and Family Centres and whether there is a need for more Child and Family Centres in particular communities or locations.

The Select Committee identified many positive outcomes CFCs have brought to the communities they operate in. Some of these include:

- CFCs are providing beneficial health and education outcomes to families with children aged 0-5 years in the communities in which they are located.
- CFCs are providing access to social support and services that improve health and wellbeing outcomes for families who access the centres.
- Access to CFCs enables early identification of children’s specific needs facilitating referral to the appropriate service.
• Child Health and Parenting (CHaPs) nurses are operating in the majority of CFCs, increasing engagement with services and providing significant benefits.

The Committee identified some of the challenges facing CFCs, these include:

• The requirement for parents and/or guardians to accompany children to CFCs can be a barrier to some children accessing a CFC
• Despite the benefits of CFCs and the best endeavours of staff, some families remain difficult to reach.
• Data collection and sharing across CFCs and government agencies is inconsistent.

The Committee also found that there are currently not enough CFCs or outreach services to meet the needs of Tasmanian families with children aged 0-5 years leading to a renewal of the commitment to build and fund more CFCs in Tasmania.

Legislative Select Committee Final Report on Child and Family Centres

17. Related Documents

The following documents are available from www.education.tas.gov.au (Search for the Doc Id)

• Contact information for the Centres (Doc ID: TASED-4-3486)
• Child and Family Centre Functional Design Brief (Doc ID: TASED-4-3505)
• Proposed CFC Functional Design Brief (Doc ID: TASED-4-3494)
• CFCs - Development of a Local Outcomes Framework - State and National Activity (Doc ID: TASED-4-3488)
• CFCs - Development of a Local Outcomes Framework (Doc ID: TASED-4-3489)
• CFC Statewide Outcomes Based Framework (Doc ID: TASED-4-3491)
• CFC Publications and Resources (Doc ID: TASED-4-3678)