



EVALUATION REPORT

WORKING TOGETHER FOR 3 YEAR OLDS (WT3) PILOT PROGRAM

**Prepared for The Department of
Education Tasmania**

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Clear Horizon

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Acronyms

CFC	Child and Family Centre
DoE	Department of Education (Tasmania)
ECIS	Early Childhood Intervention Service
ECEC	Early Childhood Education and Care
KEQ	Key evaluation question
LEG	Local Enabling Group
MEL	Monitoring, Evaluation and Learning
MSC	Most Significant Change
PEDS	Parental Evaluation of Developmental Status
TACSI	The Australian Centre for Social Innovation
TasCOSS	The Tasmanian Council of Social Service
TOC	Theory of Change
WT3	Working Together for 3 Year Olds

Executive Summary

The WT3 Pilot Evaluation Report was commissioned by the Department of Education (DoE) Tasmania and is produced by Clear Horizon. The purpose of the report is to provide summative evaluation findings about the effectiveness and scalability of the WT3 program. It covers WT3 pilot activities and outcomes between March – June 2019.

The evaluation addressed two overarching questions:

- 1. To what extent has the pilot been effective in achieving its intended outcomes?**
(includes changes for children, families, service partners and progress on systemic outcomes)
- 2. What did we learn about the model and its scalability?**
(includes what worked well, what needs improving, enablers and barriers)

Working Together for 3 year olds (WT3) Pilot

Working Together for 3 year olds (WT3) is a targeted pre-school initiative funded by the Tasmanian Government. The WT3 initiative will provide eligible children experiencing vulnerability with access to government-subsidised places at education and care services to increase participation in quality early learning.

The WT3 co-design and pilot process was initiated in 2018 and delivered during 2019 by the Department of Education (DoE) in partnerships with the Tasmanian Council of Social Services (TasCOSS) and the Australian Centre for Social Innovation (TACSI). The purpose of the WT3 pilot was to co-design the initiative with relevant stakeholders; facilitate the delivery of the program with service partners at five locations operating from ten long day care centres across Tasmania; and to learn about, evaluate, and improve aspects of the WT3 model and delivery.

The WT3 goals are aspirational and long-term in nature. There are many innovative aspects to the program. The pilot period being evaluated is three months, in the initial phase of pilot delivery.

About the evaluation of the WT3 pilot

The purpose of pilot evaluation was to improve practice (now and future), understand and demonstrate the effectiveness of the model, inform future decision-making about scalability and risk, and knowledge generation and sharing.

The findings presented in the report have been independently produced by Clear Horizon, based on data collected by DoE, TasCOSS and TACSI, and Clear Horizon. The report supplements an interactive online dashboard produced by Clear Horizon, for learning partners DoE, TasCOSS and TACSI.

The evaluation methodology included participatory approaches for data collection and analysis, for the purpose of developmental and summative evaluation. Data was collected via participant surveys, activity reporting, semi-structured interviews, dialogues, the Most Significant Change technique, and reflective practice. The report weaves together data and stories from children, families, service partners, and collaborative partners. The voice of children and families is at the centre of the analysis.

The evaluation is based on measures for effectiveness that are phase and scale appropriate to reflect what is reasonable to expect at this stage of WT3 in terms of 'what success looks like' and progress towards WT3 program outcomes. In the short delivery timeframe, it was not expected that the pilot would contribute to population level impact but rather should be achieving interim outcomes and early instances of impact for small cohorts or individual children, families, and services.

Summary of achievements

Overall, the WT3 program achieved sound and positive results at this relatively early stage of its delivery (as per the theory of change). In reviewing the pilot, there is evidence that WT3 has contributed to changes and early instances of impact for children and their families, in line with WT3 focus areas. Despite some challenges, WT3 is considered to have achieved a **strong effectiveness rating**. For the evaluation period, WT3 has been effective in meeting its delivery targets and pilot goals in terms of the breadth of the outcomes it influenced across community and service partner cohorts, and extent of change evidenced for individuals and small cohorts of families.

Attendance and enrolment metrics are tracking behind initial targets set for the pilot. Despite a slow start, 51 children are now enrolled (as of 30 June, 2019), and recent attendance rates shows the pilot now only tracking marginally behind expectations and is in some weeks exceeding them.

In some cases, changes have been achieved that would not otherwise have happened, and in other cases WT3 has contributed by enhancing outcomes already being achieved at early childhood education and care (ECEC) services.

Early instances of changes for children and their families

The study found evidence of small-scale impact for children and families aligned with longer-term WT3 goals, with clear lines of contribution to the WT3 model and pilot. The strongest cluster of outcomes identified through the evaluation were development and strengthening of interpersonal relationships. This outcome is considered important due to the frequency and significance of relationships developed, as well as because relationship building is considered a vital lever in achieving change for children and families in the WT3 model. An increase in social competence was also strongly evidenced across all data sources, in regard to improvement in behaviour, skill, communication and patience.

The evaluation found that the pilot exceeded performance expectations in the domains of family satisfaction and quality of interactions. Families have developed significant relationships during the pilot including with service partners and with others in their wider community.

Changes for service partners

The pilot exceeded expectations in the service partner outcome domains of: participation, community engagement, and improvements to capacity, capability and practice. Significant relationship and trust building outcomes for service partners with children, families, peers and system partners have also developed through the pilot. A widely experienced negative outcome for services has been the increase to service partner workloads.

Systemic changes to support outcomes for children and service partners

There are indications that systems level changes are happening, however it is too early to understand the extent and sustainability of systemic changes. Emergent changes in this domain include cross-sector collaboration, integrated approaches to WT3 delivery, changes in practice, shifts in mindset and attitudes, and early changes in resource flows. Collaboration between ECEC service providers and other services in the community to enable child participation is a strength of the pilot and another area where performance expectations have been surpassed. The pilot matched expectations in regard to services working together in new collaborations (with a referral service, family or other stakeholders) to achieve goals for the family.

In development

There are a number of aspects that are still in the process of developing. Firstly, attendance and enrolment metrics are tracking behind initial targets set for the pilot. Despite a slow start, 51 children are now enrolled, and recent attendance rates show the pilot now only tracking marginally behind expectations and is in some weeks exceeding them. Secondly, a widely experienced negative outcome for services has been the increase to service partner workloads. The referral process is a third area requiring additional attention and improvement.

Scalability

In reviewing the program and the pilot delivery, there are some core areas of strength and innovation identified. In particular, the Family Partnership Model, the no-cost component, the included wraparound supports and transport assistance, the collaborative way of working, and the capability building provided for service partners are all examples of successful points of difference between WT3 and ECEC business as usual, that contributed toward the enrolment, participation and positive experience of ECEC for targeted cohorts. While the WT3 program shows strong potential for scaling to an increased number of sites in 2020, there are opportunities for improvement and refinement identified based on participant feedback.

The findings identify a number of enablers and barriers for scaling, and context sensitive aspects of the program, that need to be kept at the forefront of planning and strategizing going forward. Essential enabling factors include: fidelity to the Family Partnership Model; the provision of capacity building and support for service partners and wider network; creation and maintenance of conditions that foster collaboration (including investment in trust and relationship building); and establishment of an integrated culture of learning (including data sharing and learning between partners). Of note, are several potential barriers that exist at a broader “systems” level related to resourcing, supporting policy and practice, and the capacity of the ECEC sector to meet the demands of scaling.



Above left to right: Artworks from WT3 children “Playing with my friends”, “Jersey Cow” and “I like drawing for mum” and photo of service partners while at WT3 training.

Most Significant Change stories

Following are two ‘Most Significant Change’ stories – one from a parent/carer and one from a service partner. The stories provide rich accounts of observed and experienced changes from the WT3 pilot. The stories were selected by stakeholders during a reflection workshop from the suite of stories collected and encapsulate some of the key achievements and themes. Additional Most Significant Change stories are in Annex 1.

Story 8: No Violet Beauregarde* – Parent/carer

The biggest change for sure has been how my child is taking turns and being patient. Because of the trauma background, these kids need as much as they can possibly get. It takes a village... you've got to let others take control sometimes, and to just add in to that control.

Before, they had to do everything NOW. They'd finish breakfast and say 'I get dressed now'. I'd say 'no, you have to wait' and they'd say 'no, I get dressed now'. And the brushing of the teeth – they'd get dressed and have to brush their teeth now, then put their shoes on. And they'd just get in everybody's way. They'd be in there and have toothpaste everywhere and over everybody that's already dressed for school.

By taking turns, they really understand that they really can't get dressed until I've finished what I'm doing, whether it's making the lunches or getting siblings ready for school. Then they get dressed. Then we'll do their hair and then they can brush their teeth while there's no one else in the bathroom. So now, they will come and ask, 'I brush my teeth now?' and we might say 'no just wait, your sibling is doing theirs', and they'll say 'ok!' and wait. They're thinking a bit more about other people and taking turns.

Looking to the future, they're definitely going to be more compliant waiting their turn – especially for kinder, you know? When there's all these kids and maybe some of them don't understand waiting turns, at least they do, and then the others can be guided by them or learn from them. And even as they get older, to know that you can't have everything right now. Hopefully it has that sort of effect on them as they get older. You know, you've got to sit in traffic. Waiting is really important, and patience.

It was coming here to WT3 that made the change. As much as we tried at home it just wasn't sinking in. So I think with more kids, they're looking around and going – 'oh, well they're waiting and not making a fuss.' They could see that other kids have to wait as well. And it was someone else other than me telling them 'you have to wait'. So they saw that maybe it is okay to wait.

I chose this change because it's what will make the most difference to them. They're not going to be this little child that's always 'I need it now!' - no Violet Beauregarde. It's horrible to have or know a child that's always 'I have to have it now!' and mum gets up and does it. It's like – no, because that's not life. So that's going to make the biggest difference for the longest amount of time, definitely.

* Violet Beauregarde is a character from the story of 'Charlie and the Chocolate Factory', a young girl known for her fiery temper and tantrums.

Story 16: They're seeing that people love their children and they can love them too – Service partner

They were all significant and each child has made a huge amount of growth in a short period but there's one child and parent that stands out as having the biggest changes.

When the child was first brought here, I don't think I'd ever seen them with shoes and socks on, they wanted to wee outside, hadn't had their hair done, and didn't really have any play skills. They'd just scream and kick and carry on. The parent barely ever left the house and when they would walk in to a big room with lots of other people and they could see people judging them.

The growth we've seen in this child, if we put them in with other children you probably wouldn't pick them. Now the child smiles and they're really comfortable and satisfied, isn't tired, isn't grumpy, is compliant. They will be presentable, will have shoes and socks on. They're happy to use the toilet, are washing their hands, play really nicely with other children and is starting to build a wider friendship circle.

And the parent is actually volunteering in the community. This is what they had decided they'd do for themselves when their child was in care. They drop off their child on time and are building friendship now with others in the program. I heard two parents met and did something at the park on the weekend. That parent now talks about being best friends with other parents and so do the children.

Now, the parent knows now what the child can do and they know what they themselves are capable of. They've had a really negative start but are seeing that people love their child and they can love them too - They're not just a burden that they have to get out the door. This kid hasn't really seen love because the parent hasn't been shown love so how could they have shown love to that little child? They're really blooming, particularly that little one because who now knows someone loves them.

It's happened because of support and consistency, relationships and lack of judgment. We've been actively engaging the parent and having regular conversations with them. The parent has trust issues and knows what it is to be judged but they're not feeling that in this program. People won't engage if they're being judged.

All of this has happened in such a short period of time. It makes you think, 'wow, what can we do in 12 months?' All have made progress but these changes in particular are massive. To go from not going out to having a friend and going to the park, that's a lot, and your child having a friend: that's massive.

Key Recommendations

Below is a summarised version of the recommendations for the WT3 program in 2020:

1. Facilitate community connection - collaborative and service partners need to scale and resource community engagement and empowerment by:

- Identifying ways to increase engagement with eligible families who would benefit the most
- Ensuring all staff are on board at an appropriate time across locations
- Fostering greater cultural exchange and linkages between families and wider community
- Establishing a local directory for support for service partners

2. Embed the principles of WT3 – continue to mobilise collaborators and embed a WT3 culture by:

- Keeping families at the heart of the process
- Investing resources to broaden services' understanding and buy-in to the key elements of WT3
- Investing in building relationships across services
- Continuing to develop and promote a shared language
- Continuing to sustain momentum in collaboration across all partners

3. Act on feedback - As WT3 begins to upscale it must pause, reflect on learnings and refine the model based on evaluation findings and design recommendations.

4. Scaling out, up and deep - WT3 needs to scale implementation as part of the maturity process by:

- Avoiding trying to do too much too fast, keep focused, and ensure time frames are realistic
- Investing in ongoing collaboration and training to support cultural and practice changes
- Building capacity, processes and skills of delivery partners for managing the phases of scaling

5. Scale resourcing and support – WT3 must mobilise resources and develop systems that support service partners to deliver quality services in line with the WT3 model and principles, by:

- Securing and allocating the necessary resources to undertake this time-intensive work
- Realistically resourcing administration duties
- Continuing to build ECEC awareness of key local services and provide support for educators

6. Integrated MEL activities - as WT3 moves out of the pilot phase, it needs to adopt and operationalise an integrated MEL and strengthen its evaluation capability by:

- Actively listening to the perspectives and feedback of families
- Dedicating time and resources for evaluation capacity building across the WT3 cohort
- Maximising learning and adaption by focusing on and involving people in strategic learning
- Introducing new WT3 cohorts to the 'culture of learning'
- Streamline and manage reporting between program and evaluation needs
- Continuing to value and collect data at the community and systems level
- Ensuring system for impact evaluation and longitudinal tracking of outcomes is established

1 Introduction

1.1 About this report

The Working Together for 3 Year Olds (WT3) Pilot Evaluation Report was commissioned by the Department of Education (DoE) Tasmania and is produced by Clear Horizon. The purpose of the report is to provide a short summative review of the WT3 pilot between March – June 2019, to address the key evaluation questions for the pilot set by the WT3 learning partners: DoE, Tasmania Council of Social Services (TasCOSS) and The Australian Centre for Social Innovation (TACSI).

The findings in this report are based on data collected by DoE, TACSI, TasCOSS and Clear Horizon. Clear Horizon has independently analysed partner data and collated the final findings. The report supplements an online interactive dashboard produced by Clear Horizon for WT3 learning partners. Together the report and dashboard are the key outputs from the developmental evaluation conducted.

1.2 Structure of the report

The three main sections of the report are as follows:

Section 1: Introduction

Includes an overview of the program, WT3's Theory of Change, and summary of the evaluation purpose, scope, methodology and limitations.

Section 2: Evaluation findings

Part 1 provides an overall statement of effectiveness and covers the outcome domains:

- Early instances of change for children and families
- Changes for service partners
- Systemic changes

Part 2 covers the insights and assessment of WT3 scalability including:

- What worked and what needs improving
- Barriers and enablers

Section 3: Recommendations

Includes a list of recommendations based on the evaluation findings.

To keep the voice of children and families central, throughout the report are artworks by WT3 children and short story descriptions written by TasCOSS and inclusion of quotes from parents/ carers.

1.3 Defining the WT3 partnerships

In the report we refer to the following partnerships:

- Service partners: all Early Childhood Education and Care (ECEC) educators/ staff and Child and Families Centre (CFC) workers involved in the pilot
- Collaborative partners: TasCOSS; TACSI; Departmental business units (DoE)- i.e. Education Performance and Review, Education and Care Unit, Budget and Resource Services; and Local Enabling Groups (LEGs)
- Data and learning partners: DoE; TasCOSS; TACSI; and Clear Horizon.

1.4 About WT3

WT3 is a targeted pre-school initiative funded by the Tasmanian Government. The WT3 initiative provides eligible three year old children experiencing vulnerability with access to government-subsidised pre-school programs to increase participation in quality early learning. With a focus on quality, the program will be delivered wherever possible, in education and care services or alternatively, in government schools. The program will amount to 10-15 hours a week (or 400 hours across a year) for each child.

The initiative's target audience are children who are three years old by January 1st, in any year from 2020 and:

- Whose parents/guardians are Health Care Card Holders; or
- Who are Aboriginal and/or Torres Strait Islander; or
- Who are receiving support or intervention from the Child Safety Service; or
- Who are vulnerable in 2 or more Parents' Evaluation of Developmental Status (PEDS) criteria.

In 2018 and 2019, a co-design and pilot process for WT3 was delivered by the DoE in partnership with TasCOSS and TACSI. The purpose of the WT3 pilot was to:

- Co-design the initiative with relevant stakeholders
- Facilitate the delivery of a quality early learning program for three year olds
- Increase participation in quality early learning for three year olds experiencing barriers to access.

During March – June 2019, WT3 was piloted at five locations operating from 11 early childhood education and care services (ECEC) across Tasmania (see Table 1).

Table 1: Services and placements participating in the WT3 Pilot

Service Provider	Participating ECEC Service	Context	Number of places
Goodstart Early Learning	Goodstart Early Learning Blackmans Bay	ECEC	5
	Goodstart Early Learning Claremont	ECEC	5
Adventure Patch	Adventure Patch Mountain View	ECEC	5
Glenorchy City Council	Child Care Connections Benjafield	ECEC	5
Discovery Early Learning Centres	Discovery Early Learning Centre Illara Pre-school	ECEC	5
	Discovery Early Learning Centre Dominic		
Derwent Valley Council	The Valley Children's Centre + ptunarra CFC	ECEC + CFC	5
Lady Gowrie Tasmania	Lady Gowrie Alanvale	ECEC	10
Devonport Child Care Centres	Malangenna Children's Centre	ECEC	5
	Drew St (East Devonport CFC + Devonport Child Care Centres + East Devonport Primary School)	ECEC + CFC+ School	5
1912 Child Care and Education Centre	1912 Child Care and Education Centre	ECEC	5
TOTAL	11		55

The WT3 Theory of Change

The Theory of Change (TOC) for WT3 maps out the expected activities, pathways for change and outcome areas for 3 year olds and their families and service providers, as well as for systemic conditions and enablers for change related to the initiative. A diagram of the detailed TOC is provided in Annex 2.

Research shows that children who are involved in early learning have improved educational and life outcomes. While 60% of Tasmanian children participate in ECEC, many children in Tasmania are still not accessing early learning due to a range of barriers. An opportunity exists to improve outcomes for this group of children not participating in ECEC, which underpins the WT3 program. As well as providing opportunities for 3 year olds experiencing barriers to participate in quality early learning, WT3 aims to:

- equip service partners to deliver holistic supports and improve outcomes for families who are facing vulnerability and barriers
- provide supports to families to raise thriving children, have stronger social support systems, connect with their community, and access supports when facing challenges that affect their lives
- Influence the broader system and sector to enable a cultural shift in local early learning towards collaboration and strengthened referral and community connections.

1.5 Scope and purpose of the pilot evaluation

The purpose of the pilot evaluation was to improve practice (during the co-design and delivery process), inform decision making, and generate findings for accountability and knowledge-building. The primary evaluation audiences include families, service partners, DoE project team and executive, government (and the Minister), project partners, referrers (including other services), and project sponsors.

The evaluation covered the pilot and co-design phase from 1st March to 23rd July 2019; and covered all 11 ECEC services across five locations in Tasmania (See Table 1):

- Glenorchy
- Devonport
- Kingborough (with a focus on Kingston and Blackmans Bay)
- Derwent Valley
- Launceston (with a focus on Mowbray, Rocherlea and Newnham)

The pilot evaluation focuses on the activities and outcomes evidenced during this period.

Within the scope of this evaluation was the assessment of the experience and outcomes for participating children, families and service partners as well as the scalability of the WT3 model. Outside of the scope of the evaluation was the quality of the co-design process and effectiveness of the project team and partners, the collection of data from non-participant families (families not participating in WT3), and any population level analysis of impact or value for money.

1.6 Methodology for the pilot evaluation

This section provides a brief overview, including the key evaluation questions addressed in this report and methods employed. The methodology for the pilot evaluation is detailed in full in Annex 3.

Clear Horizon worked closely with DoE, TACSI and TasCOSS to design an evaluation methodology that could generate “real-time” insights about WT3 and its effectiveness and pilot outcomes. Clear Horizon applied participatory and “developmental evaluation” approaches to track progress and generate insights for iterative improvement and adaption. This approach supports the development of innovation and is suited to dynamic environments.

The key evaluation outputs of the methodology implemented included an online interactive dashboard that generated learning and reporting assets for data partners, and this evaluation report. Driving the evaluation of the pilot were two overarching key evaluation questions (KEQs):

- 1. To what extent has the pilot been effective in achieving its intended outcomes?**
- 2. What did we learn about the model and its scalability?**

The KEQs were structured to generate findings about the effectiveness and scalability of the WT3 model. Scalability refers to WT3’s ability to accommodate the rising resource demands, complexity and context factors that will arise when the model is rolled out across the state, without a significant loss in performance, quality and outcomes being generated at each site.

Sub questions were also developed focussing on the changes evidenced during the pilot for children, families, service partners and at the systems level. They align with the broad goals and key outcome domains of the WT3 Theory of Change and key areas of interest for learning ahead of scaling the program out in 2020. (See Annex 3 for the full set of questions including the sub-questions.)

The participatory methodology utilised quantitative and qualitative methods, including activity and outcome monitoring, prototype surveys, reflective practice, semi-structured interviews and dialogues, and a narrative-based story collection method called the “Most Significant Change” technique. Data collection was undertaken by DoE, TasCOSS, TACSI and Clear Horizon.

Data and stories were collected from children, families, service partners and collaborative partners (includes DoE, TasCOSS and TACSI) across March – July 2019. The data collection included:

- **18 weeks** of Activity Reports from the participating 11 ECEC services (collated by DoE)
- **36 conversations** with 20 families (undertaken by TasCOSS)
- **12 semi-structured interviews** and Most Significant Change story collection with 14 service partners (undertaken by Clear Horizon)
- **Three semi-structured interviews** with collaborative partners (undertaken by Clear Horizon)
- **20 Local Enabling Group (LEG)¹ meeting** summary reflections (prepared by DoE)
- **One DoE team focus reflection** (undertaken by DoE)
- **Observation** of Co-Design Synthesis Workshop with service and collaborative partners (by Clear Horizon)
- **Prototype feedback surveys** completed by nine service partners (collated by TACSI).

¹ LEG meetings included families, educators and early years teachers, principals, and representative from local services in the community. Meetings involved members getting to know each other and understanding the aim and vision of WT3 and playing a role in its development. Members reflected on activities and provided feedback and ideas to shape WT3.

An online, interactive dashboard was created by Clear Horizon for learning and improvement by the collaborative partners. It enabled data sharing and dynamic ways of working together to track and measure activities and performance during the co-design cycles and pilot. Data analysis and synthesis were conducted by data partners across the pilot (for learning and reporting purposes), and analytic functions were designed within the dashboard to automate some qualitative analysis including disaggregation.

Effectiveness

Effectiveness of WT3 was evaluated against the Theory of Change, in accordance with what we would expect to see for this phase of implementation. An effectiveness rubric was also developed and used with DoE, to help articulate ‘what success looks like’ for the pilot across the criteria of changes for 3 year olds and families, changes for WT3 ECECs/CFCs, system changes and delivery, adaptation and learning (see Annex 4).

Scalability

In assessing scalability and generating key insights of relevance to DoE for 2020, we considered a range of dimensions and lenses for the analysis (see Annex 3 for full description). This includes:²

- Scaling out and expansion of WT3 in additional state-wide contexts to target more beneficiaries
- Scaling up to broaden its influence on systems level change including policies, working relationships, resource flows and practices in ways that enable (rather than undermine) the performance and expansion of the program
- Scaling deep in terms of cultural change, and the work of changing the “hearts and minds” of people, the organisation, system or community (e.g., in terms of narrative, values, beliefs and identities) so that the idea underlying WT3 is supported and embedded
- Scaling infrastructure and improving the capacity of a system or community to scale the work through such things as capital, data, talent, knowledge, and networks.

Scalability assessment covered elements of the model and approach to implementation – and how efficiently and effectively the model is rolled out – as well as considered variables such as context sensitivity.

On 23rd July 2019, a Reflection Workshop was held with 34 key stakeholders to facilitate shared sense-making, reflection and interrogation of the data collected ahead of this report. Draft findings were presented based on preliminary data analysis, application of the rubric and evaluation against the Theory of Change – which have been adjusted or corroborated based on feedback from the reflection workshop.

1.7 Limitations

There are several limitations with respect to the quality and reliability of the data collected to note. First, the majority of dashboard analytics were dependent on data collected by WT3 evaluation partners, including service partners. This was an important part of participatory evaluation however, it has challenges and limitations for consistency.

² Adapted from Tamarack Institutes’ [‘What we know so far about evaluating efforts to scale social innovation’](#).

For example, for the activity reporting collected from service partners there several known factors which are likely to impact on data quality and accuracy including:

- Different understandings by data collectors around what constitutes wraparound support³, and certainty regarding what activities were considered 'wraparound' when reporting
- Technical difficulties filling out the activity report template led to data errors and gaps
- A high variance in the level of detail provided by partners
- In some cases, number of wraparound supports provided was not filled in and therefore not counted, despite a new wraparound activity being listed
- Inconsistent data meant the Department in some cases had to interpret the data to complete the service reports.

Second, no formal or rigorous contribution analysis has been conducted as part of the developmental evaluation to verify all causal links between reported instances of change and level of contribution WT3 made. Contribution analysis involves assessing causal questions and inferring causality to understand the extent that observed outcomes are a consequence of a particular activity, as opposed to other factors.

Third, limitations exist for the effectiveness rubric developed and used by Clear Horizon and DoE. The rubric was designed as an internal tool for use by DoE and Clear Horizon and is not intended as a complete or endorsed set of WT3 success indicators or metrics and is not intended as a stand-alone tool for understanding and measuring WT3 effectiveness. Fourth, formal contribution analysis has been limited during the pilot, and it is recommended that future evaluation includes medium level contribution analysis.

³ Wraparound support is an approach aligned to the Ecological Model of Human Development. In the case of WT3, wraparound support involves working with families to understand what supports would help the child to thrive, do what we can to put these into place, support engagement of both families and service partners, track progress and adapt as needed. This applies to all kinds of supports, from professional to social –from speech pathology to coffee clubs.

2 Findings

This section presents the findings of the Pilot of the WT3 program, across the following headings:

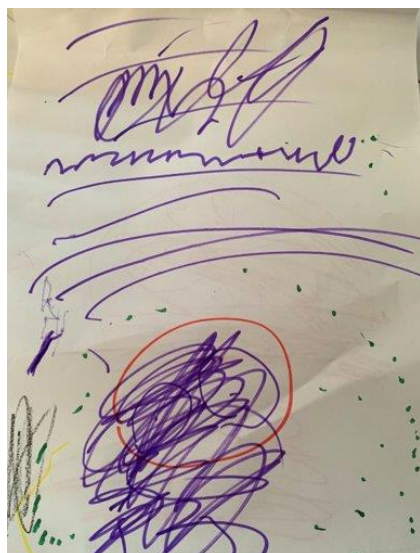
Section 2.1 Pilot effectiveness

- 2.1.1 Delivery and implementation
- 2.1.2 Changes for children and families
- 2.1.3 Changes for service partners
- 2.1.4 System changes

Section 2.2 Scaling the model

- 2.2.1 What worked well
- 2.2.2 What was challenging and what needs improving
- 2.2.3 Enablers
- 2.2.4 Barriers

This structure aligns with the KEQs listed on page 10 and detailed in Annex 3⁴. Section 2.1 and 2.2 begin with high level summaries of key findings and themes accompanied by a description of the performance expectations identified for the pilot period where relevant. The findings include illustrative quotations from interviewees consulted for the evaluation and descriptive statistics, including graphs and tables from the WT3 Pilot Dashboard.⁵



“Getting out there” drawing and story

“I’m going to draw a monster.”

“Why?”

“Because he’s happy.”

“What makes him happy?”

“Going out there [indicates to the play area].
There’s the grass, and the toys, and – oh we need sky”

“Do you like playing outside too?”

“Yeah, it’s pretty good.”

Illustration by WT3 child; story by Liam Dunn, TasCOSS.

⁴ This is true other than for Section 2.1.1 ‘Pilot Delivery’ which presents a brief and high level overview of implementation performance based on a limited set of metrics.

⁵ The following sources are used throughout the report. Quotes from parents/ carers are sourced from TasCOSS’s conversations with families (Round 1 and 2) and/or Local Enabling Group meeting documentation collated by DoE. Quotes from service and collaborative partners are sourced from Clear Horizon interviews, Local Enabling Group meeting documentation and/or DoE reflection session documentation.

2.1 Pilot effectiveness

Summary of effectiveness

Overall, the WT3 program achieved sound and positive results at this relatively early stage of its delivery (as per the theory of change). In reviewing the pilot, there is evidence that WT3 has contributed to changes and early instances of impact for children and their families, in line with WT3 focus areas. Despite some challenges, WT3 is considered to have achieved a strong effectiveness rating. For the evaluation period, WT3 has been effective in meeting its delivery targets and pilot goals in terms of the breadth of the outcomes it influenced across community and service partner cohorts, and extent of change evidenced for individuals and small cohorts of families.

The evaluation is based on measures for effectiveness that are phase and scale appropriate to reflect what is reasonable to expect at this stage of WT3 in terms of 'what success looks like' and progress towards WT3 program outcomes. In the short delivery timeframe, it was not expected that the pilot would contribute to population level impact but rather should be achieving interim outcomes and early instances of impact for small cohorts or individual children and families.

Pilot strengths

In regard to pilot implementation, the pilot surpassed expectations around the prototype testing and adaption process. There is some evidence to indicate that the co-design process has contributed to the positive outcomes achieved, though evidence on this aspect is limited.

The evaluation found that the pilot exceeded performance expectations in the domains of family satisfaction and quality of interactions. Families have developed significant relationships during the pilot including with service partners and with others in their wider community.

Evidence from the evaluation suggests that the WT3 pilot is beginning to influence positive changes in key childhood development domains however the evidence is limited and changes are emergent.

The pilot exceeded expectations in the service partner outcome domains of: participation, community engagement, and improvements to capacity, capability and practice. Significant relationship and trust building outcomes for service partners with children, families, peers and system partners have also developed through the pilot.

Collaboration between ECEC service providers and other services in the community is a strength of the pilot and another area where performance expectations have been surpassed. The pilot matched expectations in regard to services collaborating with a referral service, family or other stakeholders to achieve goals for the family.

In development

The first area which did not achieve expected projections was the attendance and enrolment metrics which are tracking behind initial targets set for the pilot. Despite a slow start, 51 children are now enrolled, and recent attendance rates shows the pilot now only tracking marginally behind expectations and is in some weeks exceeding them. Second, a widely experienced negative outcome for services has been the increase to service partner workloads. The referral process is a fourth area requiring additional attention and improvement. Many families enrolled were already connected to support services in the community which may have influenced the lower than expected number of referrals through PEDS. Challenges related to enrolment and referral are best seen in context of known challenges of identifying target cohorts in communities, an issue explored in more detail in the Scaling section of this report.

This here should be Australia-wide, this sort of program. Coming from a parent that was very protective and didn't wanna let [them] go – it was actually quite easy once I went over there and met [educator]. It was quite easy for me to say, yep this is it. I could see [name] with the children. Honestly, it should be Australia-wide because it is fabulous. (Parent/ carer)

2.1.1 Pilot delivery

The evaluation did not seek to scrutinise the implementation process in depth. However, five key metrics were identified to give an indication of the extent to which the pilot processes, as facilitated by the collaborative partners, were implemented as intended. These metrics related to:

- prototype delivery, adaption, LEG meeting input and the extent prototypes were discussed
- the extent the prototyping process improved services' capacity to deliver services to WT3 families
- the role of the co-design process in facilitating outcomes for enrolled families.

The pilot surpassed expectations around the number of prototypes tested during the pilot. In total, 13 prototypes were tested including a range of tools, experiences and interactions. Prototypes were discussed during each LEG meeting and a number of adaptations were made based on this feedback, meeting the pilot expectations regarding the reflection and adaptation processes for prototypes. There is limited evidence that suggests the pilot met expectations around the role of the co-design process in facilitating positive outcome and change for families and children (as this was not a key focus area within the KEQs). Service providers generally gave positive feedback in regard to the co-design process, however there was insufficient data to develop a deeper understanding of which aspects of the co-design process enabled/ contributed to changes.

“Being in something that is changing and adapting as it goes, is really exciting. I haven't had that before.” (Service partner)

2.1.2 Changes for children and families

One of the key goals for WT3 is to improve outcomes for 3 year olds and their families, of cohorts that are experiencing barriers to accessing early learning. While we don't expect population level changes at this stage of roll-out, in line with the Theory of Change, we do expect to see some early instances of change for individual children and families and small cohorts. The key areas where the pilot hoped to effect change were:

- Removing barriers to enrolments for children in quality early learning
- Families receiving additional supports as necessary
- Families' positive experience, interactions and sense of belonging in WT3
- Families being equipped to overcome challenges relating to parenting or more broadly.

The evaluation found that the pilot exceeded performance expectations in the domains of family satisfaction the quality of interactions. Families have built significant relationships during the pilot and have received substantial wraparound supports from service partners.

The Theory of Change identifies progress against the Tasmanian Child and Youth Wellbeing Framework and the Early Years Learning Framework. An assessment of the achievements of the pilot against these frameworks is beyond scope for this evaluation. However, evidence from the evaluation suggests the WT3 pilot is beginning to influence positive changes in these domains. Outcomes for relationships, social competence, communication, skill development, school readiness and wellbeing are detailed below.

Pilot uptake and outreach

Pilot outreach and activities led to 51 children enrolling in WT3, which resulted in access and participation for targeted children in ECEC services. The goal of the pilot was for 55 enrolments in the pilot, including more than 50 by the end of March. By the end of March the pilot had 14 children enrolled.

While attendance and enrolment metrics are tracking behind initial targets set for the pilot, the 51 children now enrolled is still considered a positive result. Recent attendance rates shows the pilot is now only tracking marginally behind expectations and is in some weeks exceeding them (Figure 1 and 2).

The pilot aimed to have more than 70% of enrolled children attend 10+ hours per week over 2-3 sessions. Since the first enrolment until the end of June, the dashboard shows that 27% of enrolled children have attended 10+ hours on average, a figure substantially lower than the target. However, the program team set performance expectations around this figure, expecting there to be an initial period required for services and families to adjust to WT3. Figure 2 shows the attendance rates against the 70% target using data from the final two months of the evaluation period (61%). The upwards trajectory in the proportion of children attending 10+ hours per week (see Table 2 & 3) suggests the pilot likely to significantly improve the average attendance by the end of the pilot year.

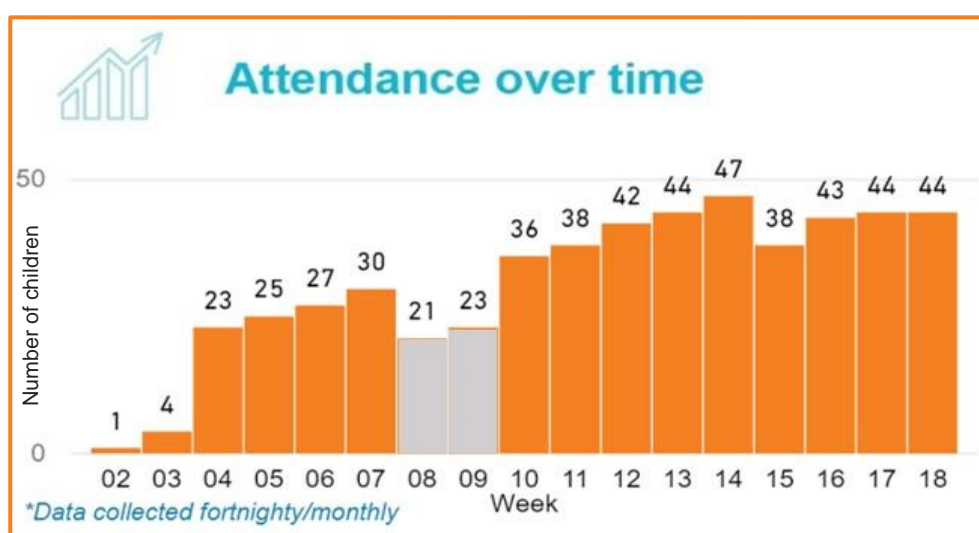


Figure 1. Attendance figures from dashboard. Grey denotes Easter and school holidays

“[A key achievement is] just the fact that we’ve given opportunity for nearly 55 children and their families” (Collaborative partner)

Table 2. Attendance target metric by week from 25 Feb - 26 April

Pilot week	1	2	3	4	5	6	7	8	9
Week beginning	25-Feb	4-Mar	11-Mar	18-Mar	25-Mar	1-Apr	8-Apr	15-Apr (holidays)	22-Apr (holidays)
% children who accessed 10+ hours	0	5	20	54	60	61	71	35	25

Table 3. Attendance metric by week from 29 April - 28 June

Pilot week	10	11	12	13	14	15	16	17	18
Week beginning	29-Apr	6-May	13-May	20-May	27-May	3-Jun	10-Jun	17-Jun	24-Jun
% children who accessed 10+ hours	69	69	79	85	82	64	64	73	76

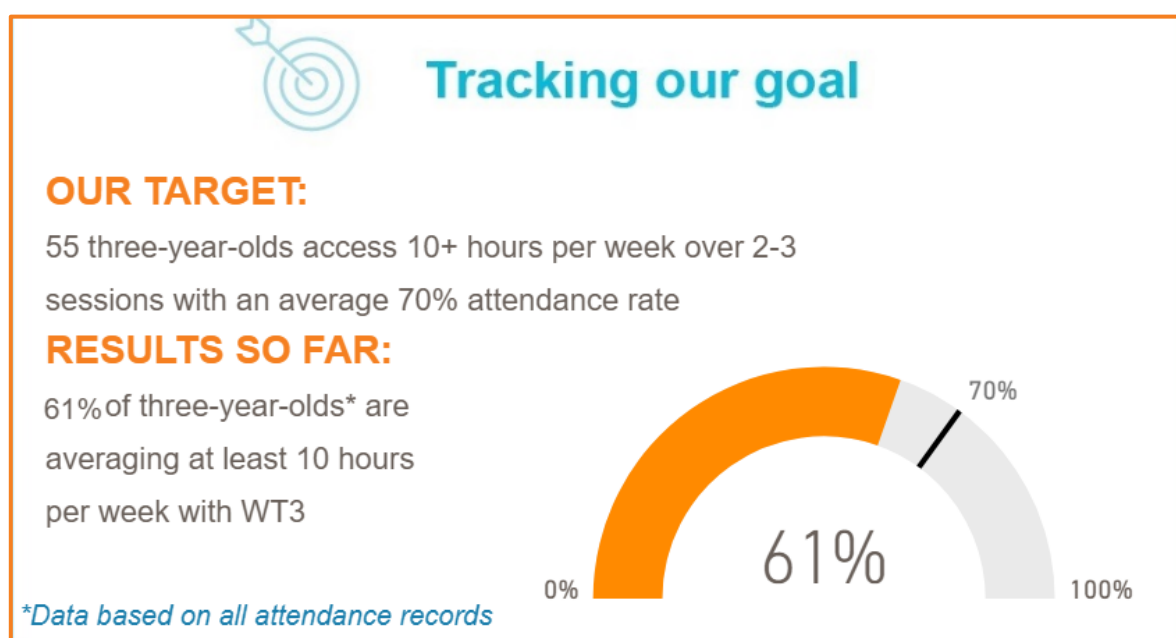


Figure 2. Attendance metric from dashboard from 29 April – 30 June (all service partners)

Family satisfaction with pilot

Evidence from interviews with parents/ carers indicates that families were generally satisfied with the pilot. In the second round of family interviews (completed June and July), all respondents (100%, n=16) rated their 'interactions with people at the centre' as either satisfactory or highly satisfactory. This increased from 90% (18, n=20) in the first round of interviews completed in April and May. One respondent who did not rate their interactions as satisfactory in the first round subsequently reported that good relationships had been built. The second respondent had initially said they felt judged or had a lack of positive interactions with other parents and in the second interview reported they were now comfortable with their interactions with other parents. All families interviewed said that they were at least satisfied with the WT3 pilot.

Relationship building

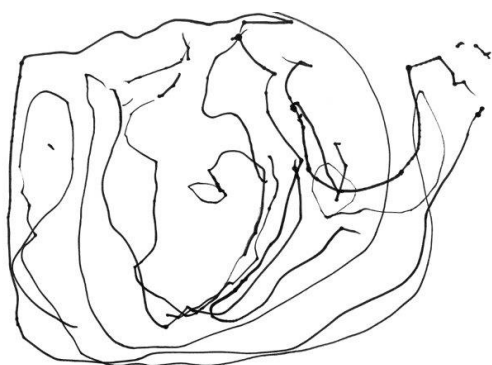
The strongest cluster of outcomes identified through the evaluation were development and strengthening of interpersonal relationships. This outcome is considered important due to the frequency and significance of relationships developed, as well as because relationship building is considered a vital lever in achieving change for children and families in the WT3 model. (For more detail, see Figure 3 Family Partnership Model on page 21). Relationships identified as improving were:

- Children with their educators and peers
- Families with educators as well as other WT3 families
- Parents / carers and their children (including children not participating in WT3)
- Parents / carers with other support services
- Community or system connections – families, service providers and other support services working in collaboration to achieve families' goals.

A key factor identified in the development and or strengthening of relationships was the additional resourcing for providers which provided them with time to build relationships and collaborate with other services in the community. Service partners described how parents or carers whose children are enrolled in WT3 have experienced significant social isolation and that the connections they have made during WT3 have been significant. The following quotes are illustrative of these insights:

"The trust - trusting people is the biggest thing" (Parent/carer)

"Some parents have been absolutely thrilled that they've been able to be participate in the program ... they're enjoying it socially..." (Service partner)



"Playing with my friends" story and drawing

When the text touched the page it was obvious a masterwork was in the making. The child was focused, each curve and mark made with precision.

"What's that?"

"Me"

"Oh? And what are you doing?"

"Playing with my friends."

"You like playing with your friends?"

"Yeah, I've got 3. See"

Illustration by WT3 child; story by Liam Dunn, TasCOSS.

Social competence and communication

An increase in social competence was also strongly evidenced across all data sources. Parents and carers referred to improvements in children taking turns and showing increased patience. The majority of service partners interviewed described cases where children were learning how to play and are building relationships with other children their age. Respondents attributed these changes to the time spent at the centres, with educators and peers, in a learning environment with a focus on building social skills. The following quotes from parents/carers demonstrate cases where children have had positive social experiences and developments:

"[My child] likes to come, enjoy with friends, and play here. [They] get lots of things to do here that aren't at home." (Parent/carer)

"Getting involved with other children is very good for my [child]. [They] couldn't share before and this is important because now [they] can share with [their sibling]." (Parent/carer)

Children's improved speech and the ability to better communicate was also strongly cited across all data sources. This was also reported in some instances to have had positive flow on effects such as improved relationships with parents/carers and siblings. Respondents noted how children had improved their verbal or non-verbal communication techniques, as illustrated by the following selected quotes:

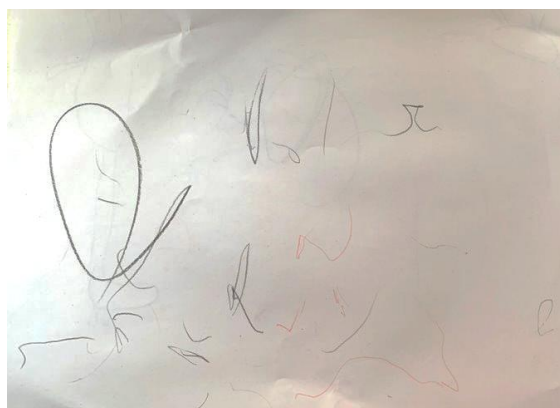
"The biggest change has probably been talking, and [their] way of communicating." (Parent/carer)

"Now [they] understands more and says more, and you can have a better conversation with [them]." (Parent/carer)

'Sandpit' drawing and story

When I asked this child what their favourite thing about coming was, they looked outside and at the educator before starting to draw. I asked "what's that?" and they vocalized, but didn't have the words. I asked "Can you show me?" and they led me by the hand outside to the sandpit before grinning cheekily and running back inside.

Illustration by WT3 child; story by Liam Dunn, TasCOSS.



Independence and managing separation anxiety

Families, service providers and service partners spoke strongly to the progress made in regard to children and parents managing being separated while the child is attending WT3. Improved social competence and the development of relationships were considered to be closely aligned in supporting children and families to overcome separation anxiety and build independence.

One family member spoke about their experience with separation anxiety and the way in which participating in WT3 has assisted their child to develop independence. The family can also see the benefit of this for schooling. Several parents/ carers cited specific strategies that educators employed to help with separation issues that were considered effective for the children. The following quotes are demonstrative of the challenges and developments in parents and children in regards to separation anxiety.

"I never really left [child] with anyone – and to leave [them] with random people, I was worried. I tried sending [child] to care with [their] grandma once before and it didn't go well." (Parent/ carer)

"Before, I literally couldn't be out of [their] sight – [they] wouldn't want to even play by [themselves]. I couldn't leave without tantrums and crying. It'd be a full meltdown, and [they'd] take so long to settle down." (Parent/ carer)



'Jersey cow' drawing and story

This child came over with a toy cow in hand. The educator asked if they'd do a drawing of their favourite thing to do. They set the cow on the table and proceed to draw, glancing at the cow occasionally. "What's this?" I asked, pointing at the drawing. "Cow" the child said, pointing at the toy "Jersey Cow". Educators have been tapping into this child's love of cows as a settling strategy because they had a hard time seeing mum leave of a morning. Illustration by WT3 child; story by Liam Dunn, TasCOSS.

Significance of children's development for school readiness

WT3 hopes to improve the experience of later education for enrolled children. Respondents to the evaluation, including family/carers and service partners spoke of the significance of children's' developments in regards to school readiness. The majority of service partners pointed to the developments they've witnessed in families as being positive for the child's future schooling experience. Specifically, service partners and parents/carers mentioned:

- Social skills and building relationships
- Physical coordination and self care, including toilet training
- Numeracy development and skills, such as counting
- Language, improved speech and communication
- Developing independence and emotional maturity.

Other outcomes for parents/carers

Some service providers spoke positively about the changes they've observed in parents. Service partners suggested that the pilot is making parents more positive about their future and giving them time to make positive changes in their own lives.

"It's giving families a break from their children. often there's a feeling [that they] don't think they think they need time to [themselves]. So there's that factor in, you know, creating a happy household with families a little bit more relaxed, and having that time to get things done without the children." (Service partner)

“... the parent is actually volunteering in the community. This is what they had decided they’d do for themselves when their child was in care. They drop off their child on time and are building friendships now with others in the program.” (Service partner)

Parents also spoke positively about the role WT3 has had on their wellbeing, as evidenced by these quotes:

“[WT3] gives me some time for me, to myself and sort of what I need to do for me. So it’s opened more doors for me as well... more opportunities at work, there’s been a lot more flexibility for me.” (Parent/ carer)

“If it wasn’t for [WT3] I’d be going bonkers... I’d be getting into a depression... I wouldn’t have that me time that I desperately needed at the start.” (Parent/carers)

2.1.3 Changes for service partners

WT3 exceeded expectations in the following outcome areas for service partners: participation in the pilot and co-design process; level of engagement with community; improvements to capacity, capability and practice. Additionally, the pilot resulted in significant relationship and trust-building outcomes for service partners with children, families, peers and system partners. Service partners also described how the pilot – in particular the adoption of the FPM approach – led to changes to their services more broadly. While these changes should be viewed as considerable and positive, the evaluation also identified increased workload and responsibility for service providers as an additional significant and at times undesirable effect of the pilot.

The Family Partnership Model

The Family Partnership Model (FPM) is an evidence-based and internationally recognised approach to partnership practice which aims to achieve better outcomes for children and families.

The Model demonstrates how specific helper qualities and skills, when used in partnership, enable parents, families and others to overcome their challenges, build strengths, resilience and enable their goals to be achieved effectively. The FPM training explores all aspects of the model that support the building of genuine and respectful partnerships towards achieving improved outcomes for children and their families.

Source: Tasmanian Department of Education Website.

Figure 3. The Family Partnership Model explained

Improvements in capacity, capability and practice

Changes have centred around professional learning and the development and improved educator understanding of families’ needs and barriers. Professional learning for service partners in the Family Partnership Model (FPM), co-design and other practices received positive feedback from the majority of service provider respondents.

The learning mechanisms considered most valuable for improving practice were:

- The initial, two-day formal training in the FPM in equipping educators with new approaches, tools and techniques to engage with parents/ carers (refer to Figure 3 for detail on the FPM).

- Using tools and reflective processes through the prototyping process which service providers reported improved their capacity to deliver support to families and to reflect on their practice
- Ongoing formal collaborative opportunities (learning circles) has provided an opportunity for networking/collaborating, hearing about different approaches and adapting practice.

Several ECEC and wraparound support staff reported that the Family Partnership Model training also had an impact on their personal growth, building trust and creating new networks with other educators. Shifts in mindset (mental models) were also self-reported in a number of cases.

“The webinars have been really useful ... and I’ve been able to share a lot of information with broader staff so impact of that has been really great.” (Service partner)

Relationships developed and strengthened

The WT3 Theory of Change proposed that by resourcing time for service partners to build relationships and collaborate with local communities and services, and by investing in professional development, there would be a flow on effect resulting in service partners being better able to support children and families to achieve broader goals. The data showed a strong link between resourcing, professional development outcomes and relational outcomes, suggesting that through opportunities and ways of working, service partners were able to develop and strengthen relationships with families, across other ECE services and at a multisectoral level with government and other community service providers.

Relationships with families: Instances of new and deepened relationships, and trust-building through WT3 structured activities as well as via organic processes was identified as a strong theme across all data sets. One service partner noted that they “surprisingly” had “grown along with the families”. These quotes illustrate the relationships built with families and the significance of these for service partners:

“I changed how I interact with families – better communication and less judgemental and this has allowed for me to build strong family connection and appreciate importance of this part of work; more depth with family relationship.” (Service partner)

“The relationships that I’ve built with the families ... have been wonderful. ... [what I’ve learnt] also strengthens my relationships with [the other] families that I have currently got in my care as well. ... It’s benefited my work in general and the children and families in care ... the centre as a whole [has been on] a journey for the last couple of years in terms of how we approach relationships with children and families. And this has been an amazing extension of that and has taken where we were growing as a centre already and pushed it just that little bit further.” (Service partner)

Relationships with colleagues and system partners: Participation in WT3 and associated activities has been a building block for extending and deepening relationships with colleagues and systems partners, as well as beyond WT3 partners/ personnel. Services reported instances where they have engaged in informal networking and support processes with other WT3 services, including through scheduled fortnightly check-ins with other WT3 services in their area and by providing other services with advice through phone calls or email. Services also described how they have developed relationships with the early education worker, the engagement worker and the TasCOSS support worker and that these relationships have assisted them to deliver support to children and families.

“It’s really good to be able to practise and reflect with other staff” (Service partner)



Figure 4: Service and collaborative partners during a March training workshop

Flow on changes to services including to other educators

‘Impact ripples’ or flow on effects beyond service partner staff directly involved were reported by at least three respondents. Cited examples included FPM related practice becoming adopted by other educators and WT3 approaches influencing business as usual more broadly at the centre. This included changes in general operations in service and observed changes in mindset and understanding of service delivery. One service described how the WT3 process acted as a catalyst for a wider revision of service practices and through the support of the DoE program team, were able to make substantial revisions to their business as usual operations, as described in the following quote:

“I felt like it’s a real benefit for our centre; being part of pilot. It started in our room the children that were attending. It sort of flowed out into the room and now that the pilot is ending sort of merged out into the whole centre.” (Service partner)

Workload, responsibility and challenges

The majority of service partners provided feedback that having educators engage more with families increases the time commitment, workload and responsibility. Key challenges cited included:

- WT3 being intense and time consuming, particularly the administrative duties associated with reporting, check in and documentation of the pilot
- managing staff burnout, acknowledged by service partners as an ongoing sector-wide issue
- managing the behaviour of children in the program who have high needs due to trauma backgrounds and the current inability to access Commonwealth funding to support these children
- managing ratios and the extra burden on staff such as when staff are taken off the floor to support WT3 children or families. The varied level of training key workers have received around the FPM and WT3 purpose has made this more difficult.

The following quotes from service providers demonstrate two of the challenges faced by service partners relating to the extra commitment required for WT3:

“Sometimes we have to find people for just two hours for some of the meetings and finding another person for two hours is [a] problem ... to be honest. They say we are paying this much for certain hours but it is challenging when you’re working with children.” (Service partner)

“We have a high percentage of children who have high needs and that was always going to be issue due to criteria of program but their actual behaviour is quite high needs and there’s a recognised diagnosis. If they were to attend normal program we’d get Commonwealth funding and just to get right staffing has been an ongoing issue.” (Service partner)

Service partners identified a clear tension between the positive relational outcomes and staff and service practice changes, and the increased level of workload and responsibility including a desire for more learning and support being at odds with workloads and capacity. While these issues were acknowledged as key challenges and points of difference from current practice, the strong majority of people interviewed felt WT3 was valuable and worthwhile and some acknowledged that they felt the extra workload and responsibility was necessary due to WT3 being a pilot and to achieve outcomes for families and children.

“[Having WT3 commitments] in conjunction with my other roles in the centre has been a massive undertaking. ... That’s not to say it’s a bad undertaking; I think it’s very valuable” (Service partner)

There are a number of areas where service partners suggested further improvement of the model and resourcing should be made, including the need for a coordinated government response to key issues such as transport and the time intensiveness of wraparounds. The challenges and underlying barriers identified during the WT3 pilot are presented in more depth in Section 2.2 below.

Core business

In some cases, the FPM training and practices introduced are similar to what services are already doing. It is acknowledged that changes in practice and capability varied both across services and across educators within a service, depending on prior exposure to working this way. Some services who identified the WT3 model as similar to their existing practices clarified that the WT3 process was generally more time intensive due to a more intensive focus on the needs of WT3 children and parents/carers.

The varied experience and skillsets of services and educators was a known factor in the design of the program, however services described challenges in ensuring the training and development supported ongoing learning and improvement and was relevant for all staff and services.

“I’ve had three years worth of this type of working in relationship building partnerships; having educational conversations with parents about where the children are going. So this isn’t new to us. This really has been our core business going on for years now. So I don’t feel like it’s changed a lot...” (Service partner)

2.1.4 System changes

One of the goals of WT3 was to strengthen partnerships within and across the early learning sector and broader system partners including with government and other services in the community, to better support outcomes for families experiencing vulnerability. During the pilot period, it was hoped that system partners would collaborate and build partnerships around best outcomes for families, including through providing wraparound support and referrals, and by building a community of practice excellence between services. In the long term, this includes reforming policy, practice and strategy across systems.

The evaluation identified early instances of change that occurred at a broader “systems” level, that extended across partners and influenced the early childhood education and care context. There was mixed performance against criteria within this domain, and overall, it is an aspect of WT3 outcomes that is still developing and has shown encouraging results.

Collaboration between ECEC service providers and other services in the community to enable child participation is a strength of the pilot and another area where performance expectations have been surpassed. The pilot matched expectations in regards to services working together in new collaborations (with a referral service, family or other stakeholders) to achieve goals for the family. The evaluation identified the referral process as an area requiring additional attention and improvement. Other system changes identified through the evaluation include shifts in mindsets and ways of working for those involved in the pilot and shifts within the system including to policy and practices in service, local solutions, and flows of money and power. Data supported the premise that collaboration and partnerships is a “lever” and enabler of changes for children and families and service partners and this aligns with WT3 Theory of Change and WT3 goals.

The iceberg metaphor

WT3 seeks to make systemic changes in order to create favorable conditions for achieving sustained improvements for children and families. To understand the potential shifts within the system, it requires looking at the interconnected causes that sit below an issue being addressed. Some people use the metaphor of the iceberg – where we only see the ice that sits above the surface, but underneath is a much bigger mass of ice. Figure 5 shows some of the elements of WT3 interacting across different levels of change.

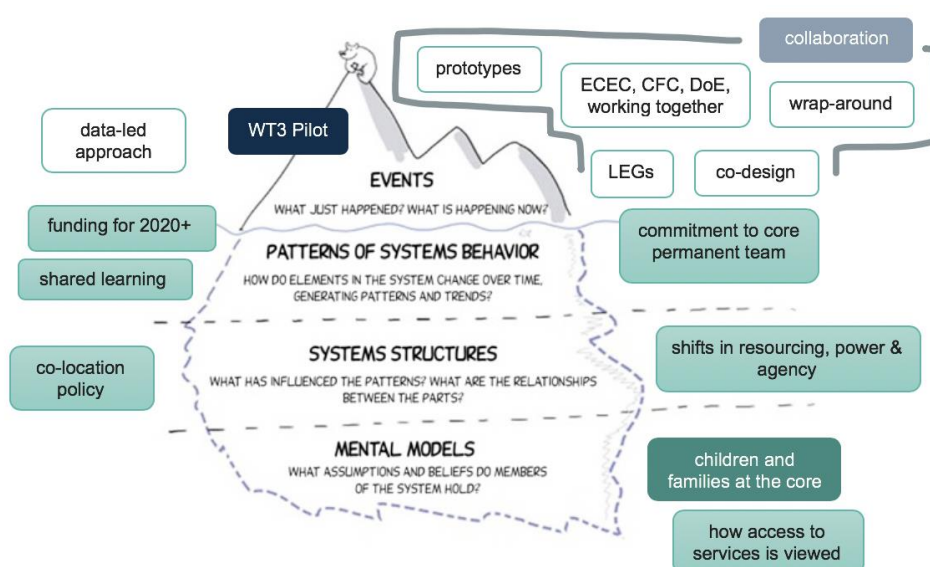


Figure 5: The WT3 iceberg

Collaboration and partnerships

The development of collaborations and partnerships is one of the strongest outcome areas evidenced in the evaluation and was frequently cited as a positive aspect of WT3 by service partners and DoE respondents. Service partners have broadened their networks and connections and are utilising these collaborative partnerships to share learnings and improve their practices.

The evaluation also identified specific instances of collaboration and partnership development, including new and strengthened instances of people and services working together, as well as reported shifts in the ways people were working together. There were also some reported instances of improved practice being attributed to the collaborative way of working (for example improved education and family relationships). Some specific examples of collaboration reported by respondents are:

- WT3 Engagement workers actively partnering and working together with Early Childhood Education and Care (ECEC) service providers, community services and families
- Service partners and Child and Family Centres (CFCs)
- Co-design and evaluation partnerships established between DoE, key partners, Local Enabling Groups and external support organisations
- Family connections to support services and contacts
- Networking and new relationships between service partners
- Wider community connections for parents/ carers with service partner staff as well as with other families and with services in the community.

It's about strengthening ourselves [as an] Early Learning sector. I think that it's been huge. On a professional level. ... it's a benefit that if you had asked us about that we will, you know, it's a pleasant surprise that that's unfolded format... early Learning Centres traditionally just stick to themselves. ... I think it's much it's much better if we [work together] so we don't have to reinvent the wheel 100 times. ... It's about advocacy for children. (Service partner)

"I'm seeing a real change in how we're building our relationships with partners in the education and care sector. We can really see a lovely shift in our relationship from big brother to actually being partners. We've got a more collaborative relationship which is really nice." (Collaborative partner)

Shifts in mindset

There were at least five self-reported instances of service partners and parents/ carers observing changes in their mindset (mental models). For example:

- One service partner self-reported a shift from an educator/expert mindset to a family partnership mindset.
- One collaborative partner reported seeing a change from "families as hard to access", to seeing "services as not being accessible".

Shifts in mindset were reported to be influenced by the family partnerships model; the “co-design” approach and introduced practices such as wraparound supports and providing data across partnerships. There were also multiple reports that involvement in WT3 had ‘impact ripples’ or flow on effects beyond service partner staff and organisations not directly involved (see Section 2.1.3). Three respondents cited that changes aligned with WT3 and the Family Partnership Model had been adopted by other educators and influenced ‘business as usual’ practice.

Shared and Integrated learning

Across partnerships new opportunities were created for data sharing to inform practice. DoE, service partners and other key stakeholders communicated and shared data throughout the pilot. Feedback indicated that this contributed to shared learning and created opportunities for improvement through the co-design process during the pilot.

Stories of change collected from service partners, reported that there were benefits from formal and informal processes of learning that occurred, as well as benefits from both strategic and “organic” relationships. The formal approaches included the professional development and mechanisms such as the LEGs and learning circles. Monitoring and progress tracking were done through the “developmental evaluation” and through frequent information sharing between collaborative partners.

Professional development as a component of WT3 has been a lever for developing and strengthening relationships throughout the system. There were also informal and organic learning exchange between systems partners, that evolved through organic processes and relationships. The diagram represents the interconnectedness of learning and relationships.

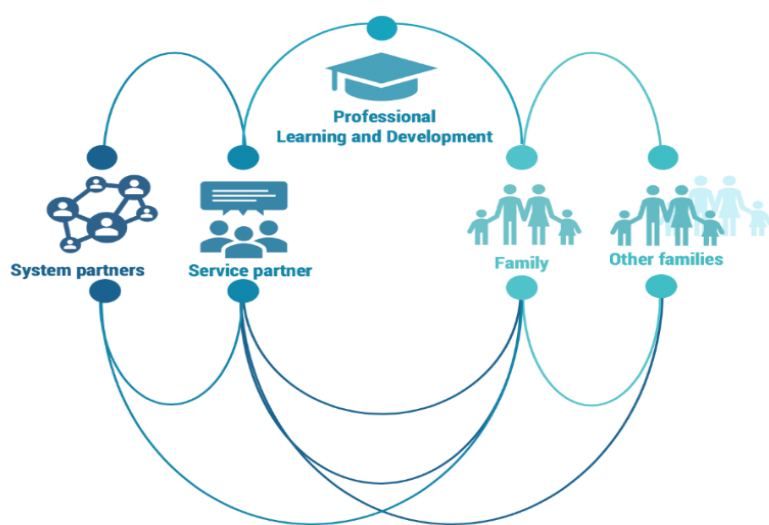


Figure 6: Inter-connectedness of shared learning and relationships in WT3

Other shifts observed

While we would not expect sustained systems changes within the first four months of a pilot, there are early instances of shifts happening within the broader system. Some reported examples are below.

Improved practice and policies
<ul style="list-style-type: none">• Prototypes as a mechanism for improving practice• Funding models to support places• Co-location policy – WT3 attached to CFC (greater workload for others)• Collaborative partnership modeling• Ecological approach to providing care• Being reflective and reflexive – being data led and adjusting based on results
Local solutions
Local children, families and service partners are leading the development of tailored care and wraparound supports as opposed to applying a standard model of care. The change in working through a local lens saw DoE reflecting on the immediate and obvious benefit for children involved in WT3 as well as their families.
Flows of money and power
<p>The funding model for WT3 led to changes in how resources flowed into and within the system.</p> <p>The structure and design of the Local Enabling Group meetings re-defined power relations between the stakeholders and created a “flat table” to reflect on WT3. This approach to working and reflecting, places the child and family at the center and shifts power toward the family.</p>

2.2 Scaling the model

Scalability assessment of WT3

Overall, the WT3 pilot demonstrated effectiveness of the program for achieving sufficient extent of intermediate outcomes (aligned with its theory of change), across all selected pilot sites. The core areas of strength and innovation identified include the:

- Family Partnership Model
- no-cost component
- wraparound supports and transport assistance
- collaborative way of working
- capability building provided for service partners.

The above are also successful points of difference between WT3 and ECEC business as usual that contributed to the enrolment, participation and positive experience of ECEC for targeted cohorts.

While the WT3 program shows strong potential for scaling to an increased number of sites in 2020, there are opportunities for improvement and refinement identified, and several potential barriers were identified at a broader “systems” level related to resourcing, supporting policy and practice, and the capacity of the ECEC sector to meet the demands of scaling.

The findings identify numerous enablers for scaling, and context sensitive aspects of WT3, that need to be kept at the forefront of planning and strategizing going forward. Essential enabling factors include:

- fidelity to the Family Partnership model
- provision of capacity building and support for service partners and wider network
- creation and maintenance of conditions that foster collaboration (including investment in trust and relationship building)
- establishment of an integrated culture of learning (including data sharing and learning between partners).

What we heard from families

There are a number of specific aspects of the WT3 program identified as successful and ‘working well’ for families. The strongest references were made to the following aspects: the no-cost model; the extent, nature and quality of support received by service partners and engagement workers; wraparound support; and the skilful, friendly and welcoming manner of service and support providers. TasCOSS research with families confirmed a high satisfaction rating for WT3 family experience of with ECEC centres and relationships, and families frequently cited the positive changes their children were experiences as ‘working well’. The most dominant challenge identified by families of participating in WT3 was the issue of transport and getting to the centres.

What we heard from service and collaborative partners

For the service and collaborative partners, the strengths of WT3 and delivery were identified as: applying the Family Partnership model; the professional development and training provided for service partners (particularly for those new to the approach); access to data to help make decisions. The increased time and resourcing challenges for delivering WT3 was widely acknowledged by service providers in relation to the increased level of responsibility, administration and reporting associated with WT3 participation. This aspect of WT3 will need improving if WT3 delivery state-wide is to be sustainable. While the engagement worker role was identified as a successful component of the program, the delayed timing with roll out presented challenges for service partners.

This section addresses the question ‘What did we learn about the model and its scalability?’. Scalability refers to WT3’s ability to accommodate the rising resource demands, complexity and context factors that will arise when the model is rolled out across the state, without a significant loss in performance, quality and outcomes being generated at each site. This section covers insights into ‘what worked?’ and ‘what needs improving?’ and identifies the critical enabling factors and barriers for WT3 relevant to scaling.

2.2.1 What worked well

A key question asked during the pilot was “what’s working well?”. We asked this question to families, service partners and collaborative partners, and also asked “why?” - to understand the critical success factors and enablers. With this feedback, adjustments and improvements were made during the co-design. Looking at the “what’s working well?” data sheds light on what participants and partners experienced as strong and positive aspects of the model and delivery.

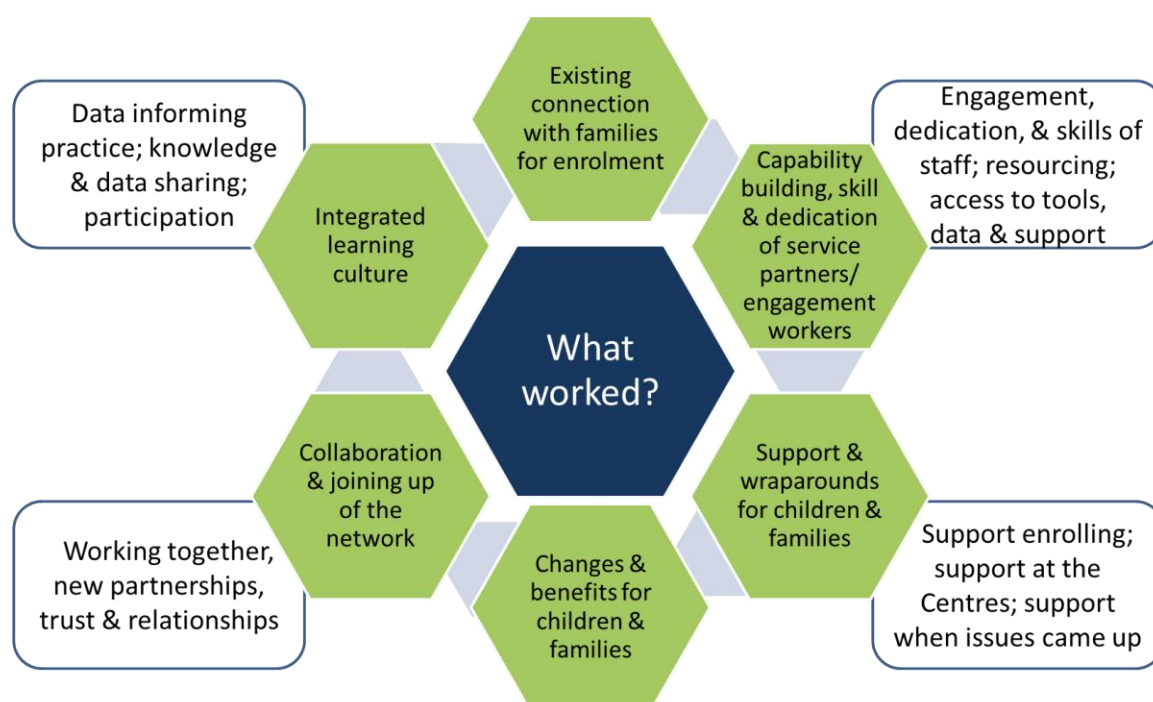


Figure 7. Key areas of the WT3 pilot identified as working well

There were six main areas of insight around ‘what worked well’. These are summarised in the above graphic (Figure 7) and detailed below.

1. Existing connections with families for enrolment

Enrolment and engagement with families worked well when there were prior relationships and connections with families to build on. The CFC connection to community was identified as beneficial by multiple respondents. The following quote elaborates on this insight:

“The Child and Family Centre did have a lot of parents they knew would be interested so they did point them in our direction, so that helped a lot whereas I know some of the other services around the State really struggled to find enrolment... Child and Family Centres are great with wraparound supports and know all the services to go to if someone needs help with mental support or housing, they are really knowledgeable about this.” (Service partner)

2. Capability building, skill and dedication of service partners/ engagement workers

The level of capability, dedication and engagement of service partners and engagement workers received strong positive feedback from multiple parents/carers and collaborative partners. In particular, parents and carers acknowledged attributes such as staff being friendly, welcoming and non judgemental, as well as the skilful handling of issues and ECEC delivery. These attributes were considered by several participants to make the experience of attending ECEC safe and positive for adults and children. The following quotes are demonstrative of the sentiment that we heard within this domain.

“They’re (educators) all so lovely it’s hard not to get on with them. They are so chatty, like ‘hey, how’s your weekend been?’ or ‘what’s your plans for today?’.... I’ll sit there having a chat to them. They’re lovely.” (Parent/ carer)

“[The Engagement Worker (EW)] helped me out one particular time when [name] was having a meltdown. We left the usual backpack at home that day and thankfully [EW] was there and offered us a ride back home to get the backpack and come back. [EW] had a booster seat in [their] car, and it was absolutely fantastic. It saved a lot of hassle, because I’d have to have taken 2 hours out to get there and back with busses. [Name] was actually really, really happy after that, and settled into the learning room really quickly.” (Parent/ carer)

“Sometimes you feel a bit weird like you’ll be looked at as a whinger or a weirdo or something, but [here] you definitely don’t get any of that because the staff are really happy to help with any issues.” (Parent/ carer)

“We’re having conversations that are very personal about their life and what’s happening within their life. Things that are very personal and very easily judged by society that you know, people wouldn’t share unless there was trust; the negative stories. We’ve built that trust with them.” (Service partner)

Numerous service partners provided positive feedback about professional development opportunities and training in the Family Partnership Model, as an aspect of the pilot that worked well. However, some respondents reported that some tools were too detailed. We heard positive feedback about the training from numerous service partner respondents, and two examples are provided below.

“Training has made me really motivated and has really helped me improve relationships with families not just in program.” (Service partner)

“The training that was involved I found completely invaluable. ... it has made a massive difference in the way that I approach [getting support for children] and the outcome for them... . If I get nothing else out of WT3, that is enough...[the training put me] in the mindset of the family and out of the educator mindset.” (Service partners)

It is noted that some service partners already had strong background and experience in working in ways aligned to the family partnership approach prior to WT3, and therefore the training reinforced current practice rather than extended capability.

3. Support and wraparounds for children and families

The extent and nature of support provided to children and families by service partners and engagement roles was highly commended by parents and carers. This included support enrolling and getting to an ECEC service, support while in attendance, and in instances where issues/challenges arose. In particular, the value of wraparound supports came through as a strong theme in this domain, as was the no-cost aspect of the model and transport assistance.

Support getting there included:

- Funding / no-cost model
- Ease and assistance in enrolling
- Transport assistance

Support while in ECEC:

- Support to feel welcomed, safe and comfortable
- Educators investing time and effort to build connection with the child and parents/carers
- Allowing parent to stay longer at pick up/ drop off
- Support with separation issues and anxiety
- Open communication with educators
- Staff getting to know child's specific wants/ needs

Support for issues arising:

- Wraparound supports as needed
- Engagement workers liaising with other support services and assisting in a crisis
- Support to exit WT3

The following quotes are included to illustrate the instances of support cited by respondents:

"The enrolment was very easy. Having someone there helping me, going through everything with me. [The Child and Family Centre worker] done most of it, she filled it in and just asked me all the questions. All I had to do was sign... I'm not good with paperwork." (Parent/ carer)

"I'd thought about childcare previously, because [child]'s with me all the time. But I couldn't really justify spending the money..." (Parent/ carer)

4. The changes and benefits being experienced by children and families participating in WT3

Parents and carers frequently named changes for children as a demonstration of what is working well. This included the improvements in relationships, communication, social competence, learning and skills development. Strategies for overcoming separation anxiety worked well. Further examples of changes identified for children and families that WT3 has contributed to is covered in Section 2.1.2.

In addition, several parent/carers respondents identified the value of the flow on benefits for themselves and their children. One theme that came across several interviews from parents/carers and service partner observations was that of building social connections through the experience of WT3 - such as the child's friendships driving connections with other parents. The following quote is one example:

"Cos I've got no friends – it's just getting to know people. I'm always home. If it wasn't for [WT3] I'd still be at home doing nothing. But now I see them up the street shopping, you notice them wave and talk to them for a little bit. You've always seen them before but you've never known them." (Parent/Carer).

Some other specific cited examples of flow on benefits for families included:

- Having time to spend with other children in the family
- Having time to oneself
- Having time away from the child
- Feeling supported by family/friends to get there and participate
- Understanding how to cope with separation anxiety.

5. Collaboration and joining up of the network

Feedback from service partners indicated that the collaboration with the CFCs was beneficial, and more generally that collaboration between service partners, engagement workers, DoE and TasCOSS was a contributing success factor for ensuring service partners were supported. The following quotes highlight two examples of the type of feedback given about collaboration:

“Collaboration with [other community services] provided us opportunity to develop our understanding of how to work with families and a better understanding of the family [backgrounds].” (Service partner)

“Strong partnerships and co-location policy have helped, true collaboration within the department.” (Collaborative partner)

6. Culture of learning

Different aspects of the emergent and integrated culture of learning across the partnerships was cited as working well from service partners, DoE and TasCOSS, with examples associated with data sharing and collective reflection such as through the LEGs, and the evaluation process. For example, several service partners reported that TasCOSS’s data sharing was helpful in giving feedback to services about how families were going. There is also evidence of broader knowledge sharing beyond the WT3 program.

2.2.2 What was challenging and what needs improving

As well as asking families and service partners ‘What’s working?’, we also collected data on ‘What’s not working?’ and ‘What could be improved?’. This section provides insights into areas of WT3 that were identified as challenges and/or areas needing attention to modify or improve. It is important to note that some of the items presented here are challenges that are actively being addressed, and some were “growing pains” where feedback shows that improvements are being made as the pilot progresses. We have also drawn on suggested improvements from families as collected via TasCOSS’s family conversations.

The six key theme areas for the identified challenges are illustrated in Figure 8 and a brief description of each is provided below.

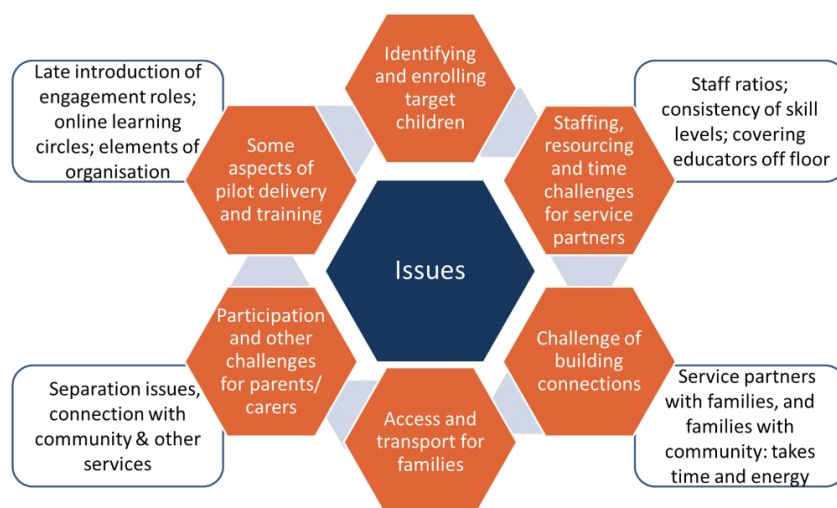


Figure 8. Key areas of WT3 pilot identified as challenging and/or needing improvement

The six key theme areas for the identified challenges are summarised as follows.

1. Identifying and enrolling targeted children

Service and delivery partners gave feedback about challenges reaching targeted families in the community, especially where no previous networks or relationships existed with prospective families. This quote below explains this further.

“Because of a number of factors a lot of the time we might not be reaching that exact target audience. A lot of the people that we were hoping to engage with, we got them involved through community service providers, which means that they were already a bit more engaged in services. And the reason for that was there was a time limit. We needed to get families and kids in rolling. But reaching the disengaged takes a lot more time and groundwork than what we really had.”
(Service partner)

Feedback suggested that compounding factors for this challenge included the late assignment or absence of an engagement worker identified and the timeframes around staff training and enrolment targets at beginning of pilot. Greater community networking may be required to reach those not connected to community services already.

2. Staffing, resourcing and time challenges for service partners

The majority of service partners found making time to complete existing and new workload demands challenging. There was also an acknowledgement by multiple service partners that finding personnel with the appropriate and necessary skills was/ and will continue to be a challenge. Specific challenges identified by respondents included:

- At times WT3 commitments directly competed with time ‘on the floor’ / meeting staff ratios
- Activity reports and other administrative work was described by many as a burden
- Despite allocation of additional resources being built into the program model, staff illness, leave and qualification shortages meant rostering was challenging
- Some service partners said that despite challenges, they understood value of extra time taken or that it was necessary as part of the pilot process
- Difficulty for ECECs having the time to provide wraparound.

The following quotes are illustrative of some of the above stated challenges.

“To be honest it’s increased the workload – just because of fortnightly reporting and providing wraparound services.” (Service partner)

“Administrative burden – increased expectation and workload on top of our normal duties and workload. There is a well known skills shortage for child care educators and for ECT qualified teachers in childcare setting. We’ve already got an issue to start with.” (Service partner)

“It’s been a challenge to cover educators when they’re off the floor.” (Service partner)

“...it’s pretty much been a fulltime workload-settling visits, support with separation anxiety, forms, drop off, pick up, documentation/record keeping back here, other referrals, checking in...I’m on this almost full time.” (Service partner)

“I go into my emails and I’m just like ... oh my goodness! There’s just a million things coming up constantly.” (Service partner)

3. Building connections

This issue relates to service partners building connections with families, and families building connections to services and community. For example, at least 4 service partners interviewed acknowledged the challenge of the time and energy it takes to build trust and relationships with families. For example, one service partner stated that *“[m]ost challenging for initial outreach has been building connections and trust and the time it takes particularly due to fear of judgement”*.

For families, many reported the difficulties in making connections with other parents or the wider community. In two of the reported instances of new connection forming between families, it appeared that an important contributing factor was the common days/ timings of attendance, and from joint activities arising from referrals from WT3.

Referral pathways

The referral process requires additional attention and improvement. While a significant number of referrals were made as a result of wraparound support including some through the PEDS process, many children were already engaged with services. This meant that in the majority of instances when PEDS was completed, services identified that a referral was not required. This has influenced the lower than expected number of referrals through PEDS.

4. Access and transport for families

Transportation was a dominant and recurring issue raised by families. Out of the 20 families involved in round 1 conversations (April - May 2019), 42% reported difficulties getting to or from WT3.⁶ Out of the 16 interview results so far in round 2 (June - July 2019), 31% have reported ongoing difficulties. This figure remains artificially low due to the number of families whose access to the ECEC service is made possible by the provision of transport assistance by participating CFCs or ECEC services. In East Devonport, for example, 3 of the 5 enrolled families are being provided with transport assistance, and would not be able to attend without it. A number of families have reported improvements in their transport circumstances.

⁶ Data sourced from TasCOSS’s ‘Key findings from family conversations (Round 2)’ (non published, 2019)

The reported difficulties include:

- Not owning a car
- Having difficulty gaining and maintaining a driver's licence
- Difficulty affording upkeep costs of car and/or petrol
- A lack of affordable and accessible public transport.

Families reported that the logistics of using public transport is difficult verging on impossible for larger families, even when on paper it should be a simple process. Under existing regulations, Services may experience limitations in their capacity to provide transport for children, as services must comply with the Education and Care National Law and National Regulations at all times they are providing education and care for children; including during the transportation of children. Services must consider their ability to comply with requirements relating to child to educator ratios, adequate supervision and the protection of children from harm and hazards when transporting children.

Below are some quotes from parents/ carers on this issue, sourced from TasCOSS reporting.

Opportunities – based on what we heard from families

Provision of transport assistance as part of WT3

It'd be good to have some transportation if they could arrange it. It'd be much more comfortable and easy... and good from a safety point of view also.

...As for my predicament at the moment with no licence – it just makes it very ...hard

Maybe if they could pick [name] up sometimes... it'd be so much easier.

Thinking about the poor buggers – if [the CFC] can't [provide transport], how are they going to get there?... How's [name] going to walk there in the winter?

The car's the only way I get here. Catching the bus would just be the biggest nightmare ever, to wrangle [my other children] plus [name], yeah. I wouldn't bring [them] if I had to catch the bus. Juggling kids on a bus, and a pram, and bags... nope. I don't even want to think about it.

Link families with driver mentor programs or other supports to help them obtain a licence

For me to have my licence, and that's something that no one can help but me myself. We have a family car, so if I'm able to actually drive sensibly and safely then it'll be all the more easier.

5. Participation/ other challenges for families

In addition to aforementioned challenges regarding transport and relationship building reported by parents/ carers, other individual references were made to the enrolment processes, separation issues and dealing with separation anxiety and understanding of a regulation issue around who an ECEC service can 'release' a child to. These challenges and issues are considered expected and are being addressed as part of the core work of WT3.

6. Some aspects of pilot delivery

Training and professional development: Several service partners provided feedback that they experienced difficulties with the online learning circles either due to technical difficulties or inherent challenges in online learning versus face to face delivery. Some service partners suggested follow up face to face training and check in would have been valuable

Pilot implementation: Feedback was received from at least 3 service providers that delivery at commencement was affected by short time frames/lack of organisation and some confusion to begin with (such as whose responsibility it was to secure enrolments) which some service and delivery partners felt impacted on the quality of program. Onboarding of key roles such as engagement workers was significantly delayed, and multiple respondents reported that this presented challenges.

“Perhaps the organisation leading up to all of this was not fabulous... there was a lot of confusion around how that all was supposed to work... We were under the impression kind of early on that families would be kind of referring to us, then found out later that we should have been seeking them out.” (Service partner)

“The engagement worker was employed halfway through the pilot and haven’t had opportunities for family to meet with engagement worker. [It was] probably done around the wrong way. We really want engagement worker employed prior to families enrolling so probably wasn’t the best process.” (Service partner)

One respondent provided feedback that other services in the community were unaware or did not properly understand WT3 program purpose (for example, Child Safety Services); another service partner indicated that they would have liked more time to build family connections before co-design process.

Opportunities – based on what we heard from families

The following suggestions for improvement or expanded aspects of WT3 were collected as part of TasCOSS’s family conversations:

- Provide the opportunity for parents to meet, discuss and learn from each other
- Host community events to provide opportunities to meet socially e.g. picnics
- Encourage the use of communications platforms/ channels to link up parents
- More male role models in ECEC settings
- Share more information with parents/ carers about the food provided at WT3
- More, and more consistent updates/ information sharing
- Provide opportunities for parents/carers to utilise WT3 time productively (e.g. learning, volunteering)

2.2.3 Enablers

The data collected was analysed to identify the key enabling factors and conditions that contributed to the success and strengths of WT3. The enablers are important to consider for scaling WT3 in 2020.

There are four critical success factors identified for WT3 scaling:

- The Family Partnership Model and WT3 service model
- Capacity building and support
- Collaboration
- An integrated culture of learning.

These are summarised in Figure 9, and each described in turn below.

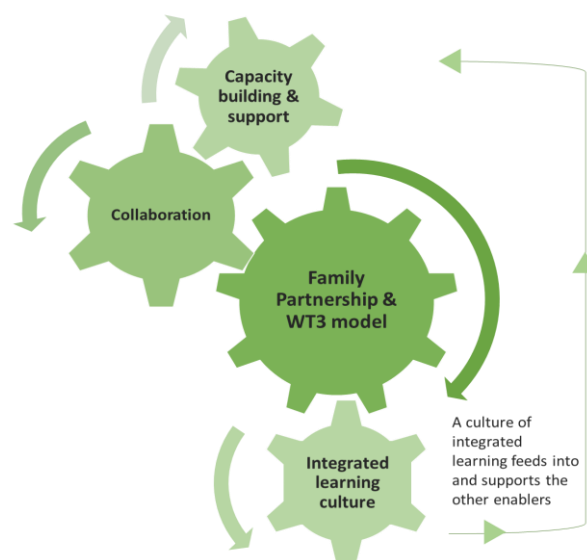


Figure 9. The critical enablers for WT3 scaling

1. The Family Partnership Model and WT3 service model

Several key elements of the FPM approach and key elements of WT3 model received strong support and were considered by many respondents to be critical enablers. In particular, the following elements presented strongly across the data as enabling factors/ conditions:

- The FPM approach and way of working, including families being at centre, the role of service partners, engagement workers and the investment in wraparound supports. Consistently across data sources, high value was placed on wraparound and ongoing support for families. Wraparound support and the engagement worker role were considered important elements that are different to business as usual. The following quote illustrates this insight:

“As long as engagement workers are on board and enough of them and helping them, ability of taking enrolments will be ok but ongoing wraparound and support from services – not sure whether or not staff will have skills, knowledge and ability to work with those families because a lot of services have young educators and they are not necessarily confident dealing with types of families we’re talking about.”
(Collaborative partner)

- WT3’s focus on removing barriers to access, enrolment and participation, including the no-cost model
- Supporting families during enrolment process (leads to attendance plus relationship building)
- Supporting families during attendance, while at the centre and for arising issues/ crises.

40% of families interviewed nominated the no-cost model as a contributing factor in their decision to enrol

Source: Round 1 Conversations, TasCOSS

“The support services that have been allocated for WT3 families [has been critical]. There’s extra planning time with them, there’s extra time to sit down and talk with families and have interviews and see what their needs are” (Service partner)

2. Capacity building and support for service and delivery partners.

Successful scaling will require ensuring the skills, knowledge and ability of staff at ECEC services to deliver the WT3 model and the FPM approach. Of importance is staff resourcing and support for service partners and engagement workers during delivery. There was evidence to suggest that capacity and capability building played an enabling role for WT3 delivery, and therefore proportionally scaled training and skills development will be important to continue. The quote below is provided as a testimony of the value for the training delivered during the pilot.

“The training that was involved I found completely invaluable. ... it has made a massive difference in the way that I approach [getting support for children] and the outcome for them.... If I get nothing else out of WT3, that is enough...[the training put me] in the mindset of the family and out of the educator mindset.” (Service partner)

3. Collaboration and joining-up services

Collaboration between partners around the shared WT3 goals was important, and required open communication, and time and energy invested by all partners to build trust and relationships. Buy-in and commitment by service and delivery partners was critical, and strategic partnerships (such as connecting service partners to CFCs).

4. An integrated culture of learning

Several service partners provided feedback that access to data from TasCOSS about what was and wasn't working for families, as well as access to data from DoE that helped informed decision-making, practice and improvement were valuable and enabling aspects of the program. Positive feedback was received across stakeholder cohorts on the evaluation data produced, including the dashboard snapshot reports. In both instances, access to data and facilitated shared learning appeared to play an enabling and support role for effective delivery.

For future scaling, it will be important to collect data locally per service/site and also at the initiative level and this will require a tailored monitoring, evaluation and learning strategy for 2020. One collaborative partner stated, *“I would say continuous evaluation [is critical] so that quality of model can be assured”*.

Cultural attributes of WT3

Part of scaling WT3 will involve changing the “hearts and minds” of people/practitioners and of organisations partnering for WT3. Therefore, it is important to consider the core cultural attributes (such as the underlying narratives and values) that need to be supported and embedded for WT3 to thrive. For WT3, important cultural attributes to foster will include:

- Openness and trust in one another, as a foundation for collaboration
- Knowledge sharing and ongoing learning and improvement – including failing, learning and improving
- Coming together around the shared agenda and goal (via partnerships between DoE and ECEC)
- Willingness to do things differently
- Holistic and family-centred view (aligned with Family Partnership Model).

2.2.4 Barriers

The potential barriers identified that may have the most impact on the success of WT3 scaling are:

Systems-related

1. Lack of systems integration between schemes and services (beyond WT3) can limit and/ or prevent services from adequately accessing other schemes that could offer additional support for families (such as other Commonwealth funding/ schemes)
2. Extent of alignment between state and federal government
3. Extent of collaboration and alignment in the ECEC sector and related systems, and between ECEC initiatives and government departments, non-government organisations etc.
4. Adequate resourcing (to cover marketing; administration; training; back filling; ECTs and support services)

Sector-related

5. Lack of skilled and qualified staff relevant to delivery of WT3 (skills shortage in sector)
6. Early childhood education sector context and challenges, including work is highly demanding and overworking or staff burnout is already an issue

Time and resourcing-related

7. Systemic barriers on time and access for building connections to targeted populations and supporting family connections
8. Targeted families may not be connected to established services
9. “Meeting community where they are at” means different timeframes for implementation and progress in each context
10. Delivery timeframes can often be at odds with community timeframes
11. Once connected, it takes time to build trust and relationships between families and service providers, and families and their community
12. Resourcing implications of sector skill shortage for services e.g. not being able to fill engagement worker positions.

Context related (if not accommodated with built in flexibility)

The aspects of WT3 that are noted as being particularly context sensitive include:

- the enrolment process (which will differ for each service)
- the way wraparound and referrals are operationalised between contexts
- the level of service and ECEC capability available
- barriers and challenges for families are likely to differ by region
- differences in interpretation for elements such as NQF and NQS.
- service access to WT3 delivery support will vary depending on local access to a CFC, locally based administrative capacity, access to online and face-to-face learning opportunities, and differences in local service approaches, philosophies and governance.

“We’ve had 4 potential families unable to sign up as they couldn’t get here [lack of transport]” (Service partner)

“There is a well known skills shortage for child care educators and for [early childhood teaching] qualified teachers in a childcare setting. We’ve already got an issue to start with.” (Collaborative partner)

“The qualification for the workforce is tricky. Because we don’t have enough teachers, but that’s because we only have one university [offering the qualification].” (Collaborative partner)

3 Recommendations

This section lists a series of recommendations that have been developed by Clear Horizon based on the findings, including priorities and suggestions identified by stakeholders during the pilot evaluation.

The first three items that are recommendations relate to the WT3 service model. Recommendations 4-6 relate to program delivery.

Recommendations about WT3

To maximise uptake, attendance and participation of WT3, and the effectiveness of the program for achieving improved outcomes for children and families, continue to strengthen and/ or refine the following elements.

1. **Facilitate community connection** - collaborative and service partners need to scale and resource community engagement and empowerment by:
 - Identifying ways to increase engagement with eligible families who would benefit the most from WT3 but who do not have existing connections or relationships with providers or who are not in the broader service system
 - Ensuring all staff are on board at an appropriate time across locations, including key outreach and support roles such as the engagement worker position
 - Fostering greater cultural exchange and linkages between families and wider community including by providing the opportunity for parents/carers to meet and exchange
 - Establishing a local directory for support for service partners to link up families with relevant support services in their community
2. **Embed the principles of WT3** – continue to mobilise collaborators and embed a WT3 culture by:
 - Keeping families at the heart of the process including by seeking diverse opinions and create safe spaces for discussions for families
 - Investing resources to broaden services' understanding and buy-in to the key elements of WT3 in order to mitigate against the challenges associated with ensuring continuity of practice and culture within services including due to the transiency of the ECEC workforce
 - Investing in building relationships across services, with CFCs, between collaborative and service partners, and directly between service partners
 - Continuing to develop and promote a shared language, i.e. what do we mean by 'wraparound' and 'systems change' and what and who is involved in achieving this
 - Continuing to sustain momentum in collaboration across all partners including via timely and transparent communication about the initiative.
3. **Act on feedback** - As WT3 begins to upscale it must pause, reflect on learnings and refine the model based on evaluation findings and design recommendations.

- The co-design and intensive reflection period in July have generated strong engagement from service providers and many experiences and lessons were shared around how best to design and deliver the program which has the potential to improve the experience of services and increase buy-in of prospective services.

Recommendations about delivery and scaling

To maximise impact and success, it is recommended that DoE focus on the following.

4. **Scaling out, up and deep** - WT3 needs to scale implementation as part of the maturity process by:
 - Avoiding trying to do too much too fast, keep focused, and ensure time frames are realistic
 - Investing in ongoing collaboration and training to support cultural and practice changes necessary to facilitate outcomes for families
 - Building capacity, processes and skills of delivery partners for managing the phases of scaling.
5. **Scale resourcing and support** – WT3 must mobilise resources and develop systems that support service partners to deliver quality services in line with the WT3 model and principles, by:
 - Securing and allocating the necessary resources to undertake this time-intensive work
 - Realistically resourcing administration duties including additional time allocated for reporting and by investing in integrated and streamlined reporting processes to reduce requirements or improve data collection processes through efficient data exchange systems.
 - Continuing to build ECEC awareness of key local services and provide support for educators on how to navigate and access them.
6. **Integrated MEL activities** - as WT3 moves out of the pilot phase, it needs to adopt and operationalise an integrated MEL and strengthen its evaluation capability by:
 - Actively listening to the perspectives and feedback of families – including through structures such as LEGs or from direct and ongoing dialogue with a delivery partner.
 - Dedicating time and resources for evaluation capacity building across the WT3 cohort
 - Maximising learning and adaption by focusing on and involving people in strategic learning
 - Introducing new WT3 cohorts to the ‘culture of learning’ that has emerged during the pilot co-design process including fostering open and honest reflection about what is required to deliver WT3 effectively
 - Continuing and where possible strengthening the streamline and management of reporting between program and evaluation needs
 - Continuing to value and collect data at the community and systems level (not just at the population level) including by collecting family-level stories of change
 - Ensuring system for impact evaluation and longitudinal tracking of outcomes is established including through the development of any necessary data linkages/matching protocols.

Annex 1 Most Significant Change stories

The following Most Significant Change stories were selected by stakeholders during a reflection workshop from the suite of stories collected and encapsulate some of the key achievements and themes.

Story 11: They've built up relationships, feel safe and don't feel judged – Service partner

The most significant change was the growth I've seen in the parent and their child who has additional needs and who is now going to kinder next year. The parent has had trauma during their childhood and has other children, one with additional needs. And so that impacted on them being filled with guilt which has led to some mental health issues. They have been very disengaged partly because of this guilt.

When I first contacted that family, there was a lot of relationship and trust building needed. Since that family's been part of the WT3, I've noticed that the parent is a lot more engaged and they haven't missed any appointments. The child is now attending important appointments, which wasn't occurring before and has been huge for the child. Now they're interacting with other children which wasn't happening before.

We have supported the parent to get the child into a healthcare plan and they've had a first appointment with a psychologist, which has been amazing. The family is building relationships with support services and they plan to see some others as well. The whole family is feeling a sense of relief because the parent is getting time to themselves to recharge.

We're already seeing what this will mean for the child in the future. They are understanding what it means to be in a room with other children who are a similar age. Moving into kinder, the child is going to have that ability to go, 'I know what it means to be in a room with other children', 'I know what it means to sit at the table and have lunch'. I think they're already developing that sense of routine. Already it's given the child that start before he starts kinder.

For the parent, one of their goals is get the child to be able to communicate and for other children to be able to understand their child. Now they understand the importance now of coming to those appointments and giving them the best opportunity. They're not feeling as ashamed and are more confident. They've built up relationships and feel safe and don't feel judged

These changes are due to me taking the time to build that relationship and not putting pressure on them to get engaged straightaway. I know I was feeling frustrated because initially there kept on being hurdles. It was about just being patient and keeping in contact and finding what communication method worked for the parent. That helped build that sense of relationship and sense of trust. The parent had to feel supported and know that we weren't just going to disappear, that we were invested, and that they could feel safe with us. I think it's about really taking that time to listen and to build that relationship. You can't rush building relationships; you just have to go at the parent's pace.

This is the family that the program has had the biggest impact on and is most significant for the child. If we hadn't got this child into the WT3 program, the parent probably wouldn't be engaging and wouldn't be attending their appointments and would still be very withdrawn.

Story 23: It's like moving deck chairs on the titanic – Service partner

To be honest, the most significant is the increased administrative burden and expectation on top of our normal duties and workload. Before this we were still busy anyway. We have our planning requirements for the children who are already in care and we plan for them on a weekly basis the same as WT3 children on a weekly basis.

Since we have to do fortnightly reporting and providing wraparound services, we've obviously needed to employ more educators. We've also had quite a lot of illness with our educators and we're just keeping our heads up above water. Initially you might roster to give time for admin side of things but then with sickness and the compliance and regulations and staffing ratios taking priority, you can't suddenly just do four hours of reporting. As staff become sick, we have less staff to call on as we are having people do more hours. This puts me in the floor and no reporting or rostering gets done.

I sense the government's response is that we gave you money to backfill or cover costs of more time. We were provided with funding but recruiting and accessing the right people to cover staff has been quite difficult for us. I certainly understand requirements of pilot program and what funding is there for but when you don't have capacity you can't be wrapped over knuckles for it.

There is a well known skills shortage for child care educators and for ECT qualified teachers in a childcare setting, so we've already got an issue to start with and all services are in the same boat. No coordinators or directors are likely have excess staff. I've tried to recruit twice this year and am about to embark on the same thing again. What we do about the skills shortage holistically, I'm not sure.

If this program were to roll out come 2020, a lot of services are going to struggle to deliver requirements if they remain as they are. They'll be able to possibly take enrolment of children and wraparound stuff. For standalone single operator services the admin side would be too much and they would really struggle with roll out.

I chose this change because staffing is a daily issue for us. Depending on our utilisation if we're fully booked we've got more educators working and you have to try to juggle staff. It's like moving deck chairs on the titanic.

Story 25: I thought, 'Right, I'm going to approach this family from a completely different perspective' – Service partner

The most significant change has been the PEDs training and how it's helped me to build relationship with a parent of with special needs who we've been working with for years. The change for this family, even though they're not technically part of the program, is the most significant thing.

Since they've been with us we've always been looking to get them that extra support that the child needs but we've never been able to achieve it. They never went and sought of any other kind of help out for the child at all. The parents were dodging conversations, dodging meetings, there was a lot of avoidance and denial. I did have some empathy and sympathy for how difficult it is to kind of acknowledge that a child has a problem and find a way to approach that, I just didn't understand why you wouldn't take any kind of action that could make life that little bit easier for your child.

So after all of this training that I went through, I thought 'right, I'm going to approach this family from a completely different perspective'. Now I came at it with the approach that, 'I need to know what you know about your son. Rather than me sitting here and telling you what to do, tell me about what you're seeing because you are the experts, you know them and I don't see them outside of here.'

We sat down and we had a very interesting conversation where they started relaxing and their concerns started slowly coming out. They didn't feel like they had to put their barriers up because I wasn't judging, and now we've got to a point where they are looking and asking for extra support. Now the family and I have conversations every single day. The conversations are very much focused on how they perceive the child's challenges and not what we may think that they are.

The training has made a massive difference in the way that I approach that and the outcome for the family and child. If I get nothing else out of WT3 then that is enough. It just put me very much in the mindset of the family and out of the educator mindset. I went from that kind of negative perspective to this positive perspective where I saw their reasons as completely valid. Not that I didn't think they were before, I just didn't understand them as much.

I'm hoping that this has kind of been the beginning of understanding child a little bit better and getting them the support that they need moving forward, particularly going into school. We know how important early intervention is for these situations. For me, it's going to change how I approach everything in my work really. It's just changed my perspective on what importance I place on relationships versus every other aspect of my job.

Annex 2: Theory of Change

3 Long Term Outcomes (Things we'd love to see, and we may contribute to)

- * Thriving children and families
- * Children grow up in communities that support them to thrive
- * Children have their best start in life
- * Families are resilient and resourced to create environments for their children to thrive
- * Families seek help when they need it
- * Fewer families parenting alone and unsupported
- * WT3 success and evidence influences policy, practice and strategy reform
- * End cycles of intergenerational poverty and inequality
- * Child and adult services work together to support families
- * Increasing collaboration between service providers
- * Tasmanian government takes an ongoing co-design approach in more of its programs.

2 End of Program Outcomes (Things that will happen as a result of WT3)

Outcomes for 3 year olds

- 3 year olds progress against the Early Years Learning framework.
- 3 year olds will have a positive education experience.
- 3 year olds complete 400 hours of early learning within 12 months, at least 3 times per week.
- 3 year olds receive quality early learning.
- 3 year olds who will most benefit from the program take part.

- 3 year olds progress against the Tasmanian Child and Youth Wellbeing framework.
- 3 year olds will be better prepared for further education.
- 3 year olds access helpful child services that 'stick'
- 3 year olds access the right supports at the right times, including developmental supports.

Outcomes for families

- Families are better equipped to raise thriving children.
- Families have stronger social, peer, community and professional supports that can help them navigate challenges might impact their family.
- Families are more comfortable and able to access early education for their child.
- Families feel more ownership of the services they engage in.
- Families have a good education experience and are better prepared for their children's further education.
- Families have a good experience with service providers, and find supports valuable
- Families feel safe at WT3 centres
- Families have a sense of belonging at WT3 centres
- Families feel better equipped to support their child's learning and wellbeing
- Parents feel validated and empowered
- More informal peer to peer support

Outcomes for WT3 providers

- WT3 providers deliver quality early learning services that improve outcomes
- WT3 providers deliver more culturally safe, inclusive and accessible services.
- A community of practice excellence existing across all sites in Tasmania.
- WT3 staff are more connected to their community and local providers

Outcomes for systems

- Build partnership and collaboration around best outcomes for families and children.
- The WT3 program works best for families and is continuously improving.
- Value of co-design and a holistic approach is demonstrated to Tasmanian government and service providers

1 Key Activities (What we'll do)

- Quality, flexible and responsive early learning to the 3 year old by qualified Early Childhood Teachers
- WT3 providers remove barriers to participating in early learning by supporting with transport, creating safe, non-judgemental and friendly spaces.
- A family friendly assessment is used to identify families with 3 year olds facing disadvantage who are eligible to participate in quality early learning.

- WT3 providers and Family Participation Workers work with the parents to wrap supports around the 3 year old
- Warm referrals to supports identified as useful to the child
- Prepare 3 year olds for further education skills and routines
- Early Childhood Teachers work with parents to identify unique needs of the child
- WT3 providers have informal developmental assessments and connect families to early intervention services

Early Childhood Teachers and Family Participation Workers work in partnership with the family to wrap helpful supports around the family

- Early Childhood Teachers and Family Participation Workers listen and are responsive to families needs, wants and challenges (e.g. housing).
- Early Childhood Teachers and Family Participation Workers build trust with families over time (e.g. staged enrolment, consistent staff).
- Early Childhood Teachers and Family Participation Workers meet families where they are.
- WT3 uses family friendly, accessible ways of communicating.
- WT3 providers or Family Participation Workers track progress together.
- Family Participation Workers work with parents to identify challenges and goals that affect their children.
- WT3 providers remove barriers to participating in early learning by providing it for free to eligible families, supporting with transport, creating safe, non-judgemental and friendly spaces.
- WT3 uses outreach to identify eligible families and help them feel comfortable taking part.
- WT3 creates opportunities to meet, learn from and build relationships with other families and learn new skills together.
- Warm referrals to supports parents and staff identify as useful, and walking alongside families to access these.
- Family Participation Workers build the capability of WT3 in community outreach and meeting families, communities and providers where they are.
- WT3 staff actively help overcome obstacles to regular attendance.

- Professional development of staff in non-judgemental, trauma informed, culturally safe engagement with families.
- Applying what WT3 learns from families, communities, local providers and other WT3 sites by incorporating reflective practice and action research.
- Leveraging specialist providers to fill gaps in cultural knowledge and connection (e.g. Aboriginal Community Controlled Orgs).
- Collaborating with local services to deliver wrap around supports for the family.
- Having time dedicated to family engagement and support.

- Building a community of practice excellence existing across all sites.
- Building capability of providers to collaborate to deliver wrap around supports.
- Ongoing co-design with families, communities and providers.

Annex 3: Evaluation Methodology

Approach

During the pilot DoE, TasCOSS, TACSI and Clear Horizon partnered as learning and data partners.

Clear Horizon worked closely with DoE, TACSI and TasCOSS to design an evaluation methodology that could generate “real-time” insights about WT3 and its effectiveness and pilot outcomes. Clear Horizon applied participatory and “developmental evaluation” approaches to track progress and generate insights for iterative improvement and adaption.

The methodology for data collection was developed based on input from key stakeholders at an evaluation planning workshop in February 2019, and was approved by DoE. The key evaluation outputs of the methodology implemented included an online interactive dashboard that generated learning and reporting assets for data partners, and this evaluation report produced by Clear Horizon.

Scope, purpose and audience

The audience and information needs relevant to this MEL plan are captured in Table 4 below. The primary audiences are defined as those groups for which MEL findings are directly relevant, and secondary audiences are those with a broader interest in the findings.

Table 4. Audience and information needs

Audience	Information needs
Primary audience	
Families	<ul style="list-style-type: none">Outcomes and effectiveness of pilot (through Local Enabling Groups)
Service providers	<ul style="list-style-type: none">Outcomes and effectiveness of pilotScalability assessment results (via dashboard, evaluation report and LEG updates)
Project team	<ul style="list-style-type: none">Outcomes and effectiveness of pilotAppropriatenessScalability
Government (and Minister)	<ul style="list-style-type: none">Briefings (needs basis/end of pilot), report, stories from pilot
Referrers (i.e. health, justice and child safety services and ECIS)	<ul style="list-style-type: none">PEDS findings and service requirementsLikely scale of demand on wrap around services
DoE Executive	<ul style="list-style-type: none">Outcomes and effectiveness of pilot, via reporting
Business owner/sponsor (DoE)	<ul style="list-style-type: none">Outcomes and effectiveness of pilotScalability assessment (Fortnightly verbal updates internal, monthly briefing note, evaluation report)
TasCOSS	<ul style="list-style-type: none">Learning and outcomes during pilot
Secondary	
Early Childhood Australia and other industry leaders	<ul style="list-style-type: none">Access to information about pilot (via website or webinars)
Future WT3 Providers	<ul style="list-style-type: none">Outcomes and effectiveness of pilotAppropriateness
TasCOSS Board	<ul style="list-style-type: none">Internal reporting (approx. every 6 weeks) (note: this is not a requirement of this plan)
Future referrers	<ul style="list-style-type: none">Outcomes and effectiveness of pilotAppropriatenessScalability

Future WT3 families	<ul style="list-style-type: none"> • Outcomes and effectiveness of pilot
Other service providers	<ul style="list-style-type: none"> • General information about pilot and program
Schools (including libraries, LIL, CFCs)	<ul style="list-style-type: none"> • General information about pilot and program
Federal government	<ul style="list-style-type: none"> • COAG meeting, reporting, updates via offline discussions and updates
Future DOE WT3 team	<ul style="list-style-type: none"> • Outcomes and effectiveness of pilot • Appropriateness • Scalability

Key evaluation questions

The two overarching key evaluation questions (KEQs) for the pilot were:

1. To what extent has the pilot been effective in achieving its intended outcomes?
2. What did we learn about the model and its scalability?

The KEQs were structured to generate findings about the effectiveness and scalability of the WT3 model. Sub questions were also developed focused on the changes evidenced during the pilot for children, families, service partners and at the systems level. They align with the broad goals and key outcome domains of the WT3 theory of change and key areas of interest for learning ahead of scaling the program out in 2020.

The KEQs and sub-questions are included in Table 5.

Table 5. Key evaluation questions and sub-questions for the WT3 pilot

KEQ	Sub-KEQ
1. To what extent has the pilot been effective in achieving its intended outcomes?	1a. What were the outcomes for 3 year olds and their families (expected and unexpected)?
	1b. What were the outcomes for service providers (expected and unexpected)?
	1c. What were the systemic changes resulting from the pilot?
2. What did we learn about the model and its scalability?	2a. What were the barriers to success?
	2b. What were the enablers for success?
	2c. What elements of the model are transferable and/or relevant for scaling out?

Data collection

The participatory methodology utilised quantitative and qualitative methods, including activity and outcome monitoring, prototype surveys, reflective practice, semi-structured interviews and dialogues, and a narrative-based story collection method called the “Most Significant Change” technique. Data collection was undertaken by DoE, TasCOSS, TACSI and Clear Horizon.

Data and stories were collected from children, families, service partners and collaborative partners (includes DoE and TasCOSS) across March – July 2019. Combined, the data collection included:

- **18 weeks** of Activity Reports from 10 service partners (collated by DoE)
- **36 conversations** with 20 families (undertaken by TasCOSS)
- **12 semi structured interviews** and Most Significant Change story collection with 14 service partners (undertaken by Clear Horizon)
- **Three semi structured interviews** with collaborative partners (undertaken by Clear Horizon)
- **20 Local Enabling Group (LEG)⁷ meeting** summary reflections (prepared by DoE)
- **One DoE team focus reflection** (undertaken by DoE)
- **Observation** of Co-Design Synthesis Workshop with service and collaborative partners (by Clear Horizon)
- **Prototype feedback surveys** completed by nine service partners (collated by TACSI).

The richness and quality of the data collected was enhanced by the unique and skilful approaches to data collection and analysis by the data partners, and the successful working relationships and protocols established between partners during the pilot.

Figure 10 below summarises the KEQs against the methodology.

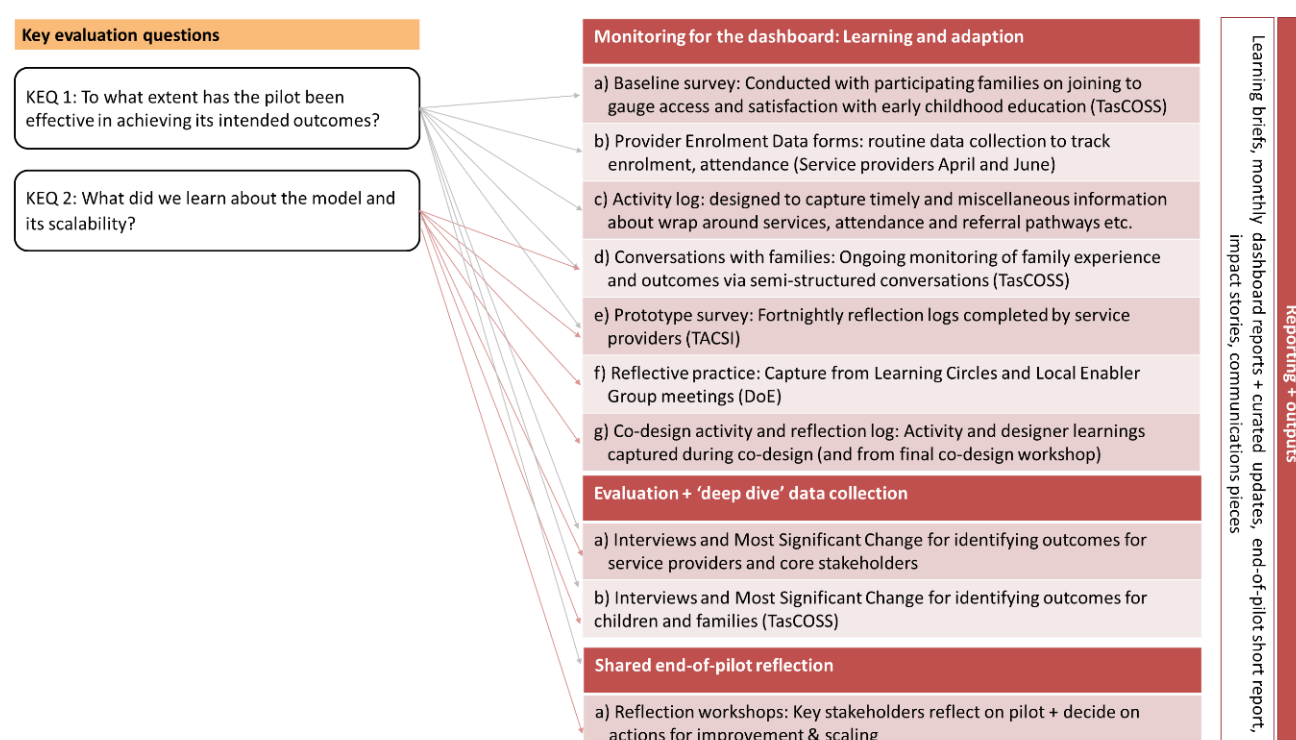


Figure 10: KEQs and methodology

⁷ LEG meetings include families, educators and early years teachers, principals, and representative from local services in the community. LEG meetings involved members getting to know each other; understanding the aim and vision of WT3 and the role they will play in its development. Members reflected on activities and provided feedback and ideas to shape WT3 and ensure it is scalable.

Online Dashboard

An online, interactive dashboard was created by Clear Horizon for learning and improvement by core data partners. It enabled data sharing and dynamic ways of working together to track and measure activities and performance during the co-design cycles and pilot, whilst respecting privacy and trust. Data for the dashboard was collected by DoE, TasCOSS, TACSI and Clear Horizon and utilized data collected from families, service partners and Local Enabling Groups. The dash had restricted access.

On the dash, the closed user group (the data partners) could access data on enrolments, attendance, cross site analysis, wrap around supports and qualitative data on 'what's working' 'what's not working/ what needs improving' (See Figure 11 for an example.) Emergent insights from the dashboard and partners were shared with service partners and stakeholders through the LEG meetings and on a needs basis with other audiences. Several graphics used in this report are sourced from the dashboard.



Figure 11: Visual of front page of the dashboard

Data analysis

Data analysis and synthesis was conducted by data partners throughout the pilot (for learning and reporting purposes), and analytic functions were designed within the dashboard to automate some qualitative analysis including disaggregation.

Preliminary analysis of data sets was undertaken by DoE and TasCOSS respectively for the data they collected, and summative analysis was done across all data sources by Clear Horizon. Analysis involved qualitative thematic coding and quantifying codes.

In order to support shared sense-making, a Reflection Workshop was held with 34 key stakeholders on 23rd July 2019. Preliminary findings produced and collated by Clear Horizon were presented, and participants engaged with the data together and completed a selection process for the Most Significant Change stories. The workshop was used as an opportunity to collaboratively review the evaluation evidence and findings ahead of producing this report.

Performance measurement

Performance and effectiveness of WT3 was evaluated against the Theory of Change, in accordance with what we would expect to see for this phase of implementation. An effectiveness rubric was also developed and used with DoE, to help articulate 'what success looks like' for the pilot across the criteria of changes for 3 year old and families, changes for WT3 ECECs, system changes and delivery, adaptation and learning (see Annex 4).

It is important to note that the rubric was designed as an internal tool for use by DoE and Clear Horizon for reflection and evaluative purposes and is not a complete or endorsed set of WT3 success indicators or metrics. It is not intended as a stand-alone tool for understanding and assessing WT3.

Assessing scalability

Scalability refers to WT3's ability to accommodate the rising resource demands, complexity and context factors that will arise when the model is rolled out across the state, without a significant loss in performance, quality and outcomes being generated at each site.

There are several dimensions of scaling of relevance to WT3. This includes:⁸

- Scaling out and expansion of WT3 in additional state-wide contexts to target more beneficiaries
- Scaling up to broader its influence on systems level change including policies, working relationships, resource flows and practices in ways that enable (rather than undermine) the performance and expansion of the program
- Scaling deep in terms of cultural change, and the work of changing the “hearts and minds” of people, the organisation, system or community (e.g., in terms of narrative, values, beliefs and identities) so that the idea underlying WT3 is supported and embedded
- Scaling infrastructure and improving the capacity of a system or community to scale the work through such things as capital, data, talent, knowledge, networks and IT systems.

The scalability of WT3 is dependent on the model, approach to implementation, resourcing, funding model – and how efficiently and effectively the model is rolled out. How well WT3 will scale will also depend on the type of scaling planned and model's capacity to be able to cater to variables such as context sensitivity.

In answering KEQ2, we have also applied the following lenses across the analysis:

- Lessons from the pilot about how to scale out WT3? What worked, what didn't and why?
- Understanding the parts of WT3 are context-sensitive and not easily replicated
- The institutional and systemic factors – policies, regulations, resource flows and administrative practices – need to be in place in order to support, expand and sustain WT3
- The cultural attributes – beliefs, narratives, values and identities – that are considered important for WT3 to thrive.

⁸ Adapted from Tamarack Institutes' [‘What we know so far about evaluating efforts to scale social innovation’](#).

Annex 4: Effectiveness rubric

Measuring performance using a rubric

To help us evaluate effectiveness, we used a rubric to support the shared reflection and judgement process in the reflection workshop. Rubrics are an evaluative tool that are used to judge evaluation criteria in a transparent manner by clearly outlining the criteria and standards necessary to achieve each level.

This effectiveness rubric is a tool designed to provide a basis for addressing KEQ1. The rubric will help us to evaluate the results for “effectiveness” against the priority end-of-pilot outcomes and targets the set for the purpose of evaluating the WT3 pilot, as well as against some key areas of activities/ outputs for the pilot. Guiding the rubric development is the question ‘*What does success look like for the pilot?*’

Outcome and activity domains

The focus of the draft rubric aligns with the WT3 theory of change domains of change for the end of the WT3 pilot. The main domains included are:

1. Uptake, experience, and instances of change for 3-4 year old and families (**Domain 1**)
2. Uptake, experience and instances of change for WT3 ECEC services (**Domain 2**)
3. Outcomes and instances of systems/ systemic changes and/or enablers, including collaboration (**Domain 3**)

In addition, we have included activity-based delivery objectives for the pilot activities:

4. Activities and outcomes related to prototype delivery, adaption and learning during pilot (**Domain 4**)

The detailed metrics for each domain are outlined in Table 6 below.

Table 6. Rubric metrics

Domain	Performance descriptors for answering KEQ 1
D1	No. 3-4 year old are enrolled in WT3 by end of March 2019 No. 3-4 year olds who access than 10 hours per week over 2-3 sessions, with an overall average of greater than 70% attendance rate Proportion of children have had a PEDS assessment by end of June 2019 Proportion of families interviewed report that they are at least satisfied with WT3 pilot Proportion of WT3 families interviewed, rate ‘interactions with people at the centre’ (staff, other families etc) as 5 (highest rating of satisfaction on the scale of 1-5)
D2	No. ECEC services tested WT3 prototypes No. WT3 ECEC services interviewed who felt the WT3 collaboration assisted them to more effectively engage with eligible community members No. ECEC services interviewed reported at least one positive change to their staff or service resulting from the pilot
D3	Proportion of children received wraparound support

	<p>Proportion of referral pathways (for all children) resulting from PEDS were referred between March and end of June 2019</p> <p>No. of ECEC services interviewed have collaborated with other services to enable the participation of the child</p> <p>No. services have reported at least two instances of working together in a new collaboration (with a referral service, family or other stakeholder) to achieve the goals of the family</p>
D4	<p>No. prototypes delivered during March-June 2019</p> <p>Proportion of prototypes that were adapted in response to feedback received from LEGs</p> <p>No. prototypes discussed in LEG meetings in all 5 pilot locations</p> <p>No. ECEC services interviewed report that the prototyping process improved their capacity to deliver services to WT3 families.</p> <p>No. reported instances of 'improvement' in experiences and/or outcomes through the co-design process (from families, ECECs and or key stakeholder cohorts)</p>

Limitations

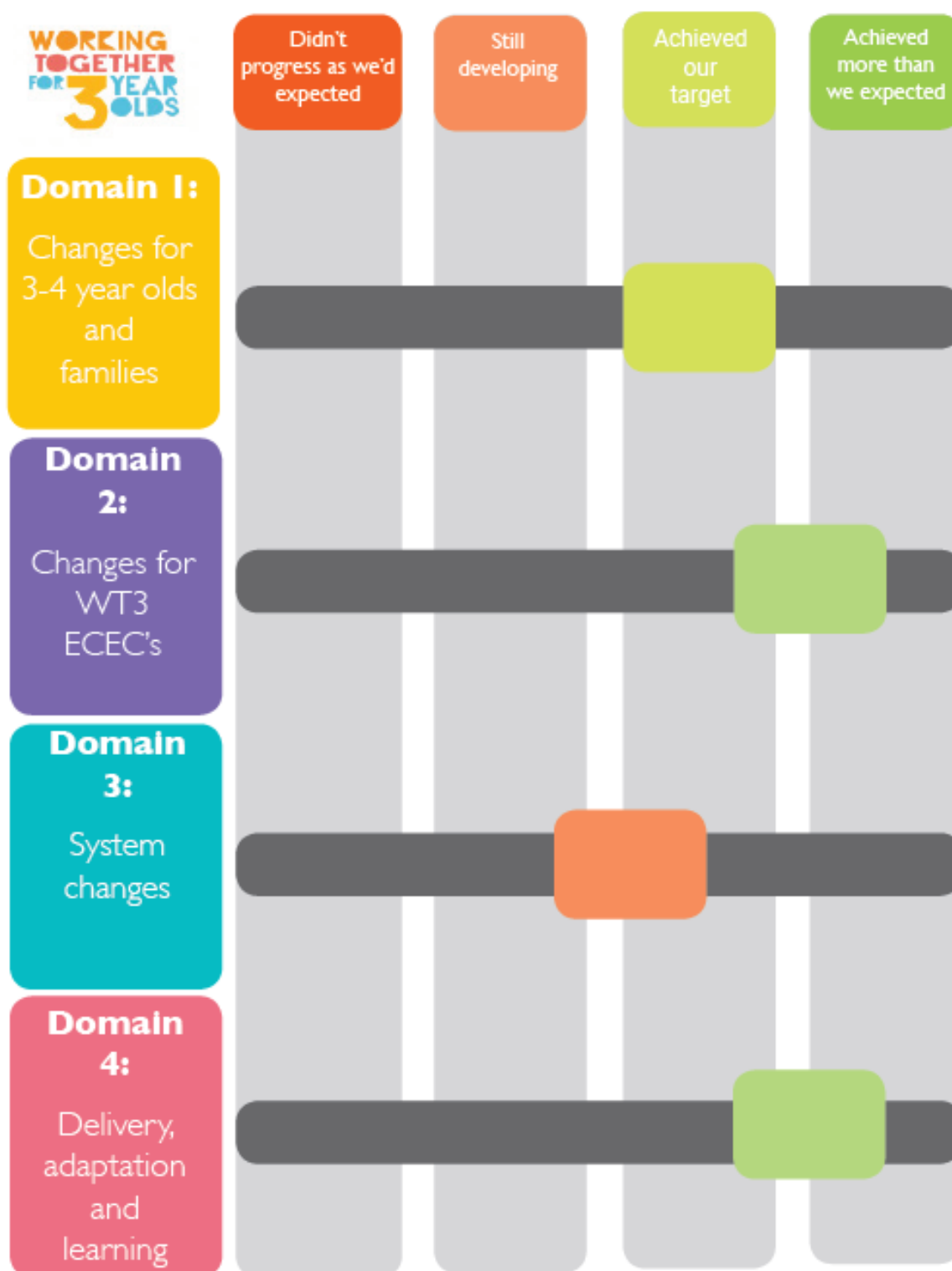
There are several limitations to the rubric design and the data used to respond to the metrics, including:

- There was a lack of clear definition and mixed understandings of some terms included in the metric, including 'prototyping' 'wraparound' and 'co-design'
- All metrics within a domain were given equal weighting despite known differences in the level of importance of these metrics to the model
- There was variation in how data was obtained for different qualitative metrics – some questions elicited response that directly related to a metric whereas others relied on probing or for the respondent to mention it within a broader discussion
- The rubric was not developed until the pilot was well underway, meaning the performance expectations may have been influenced by how the pilot was already progressing.

Results

Generalised and detailed results were produced for the rubric. Overleaf, is the high level results scorecard across the four key criteria bands of the rubric, and following, the breakdown of results per sub-criteria.

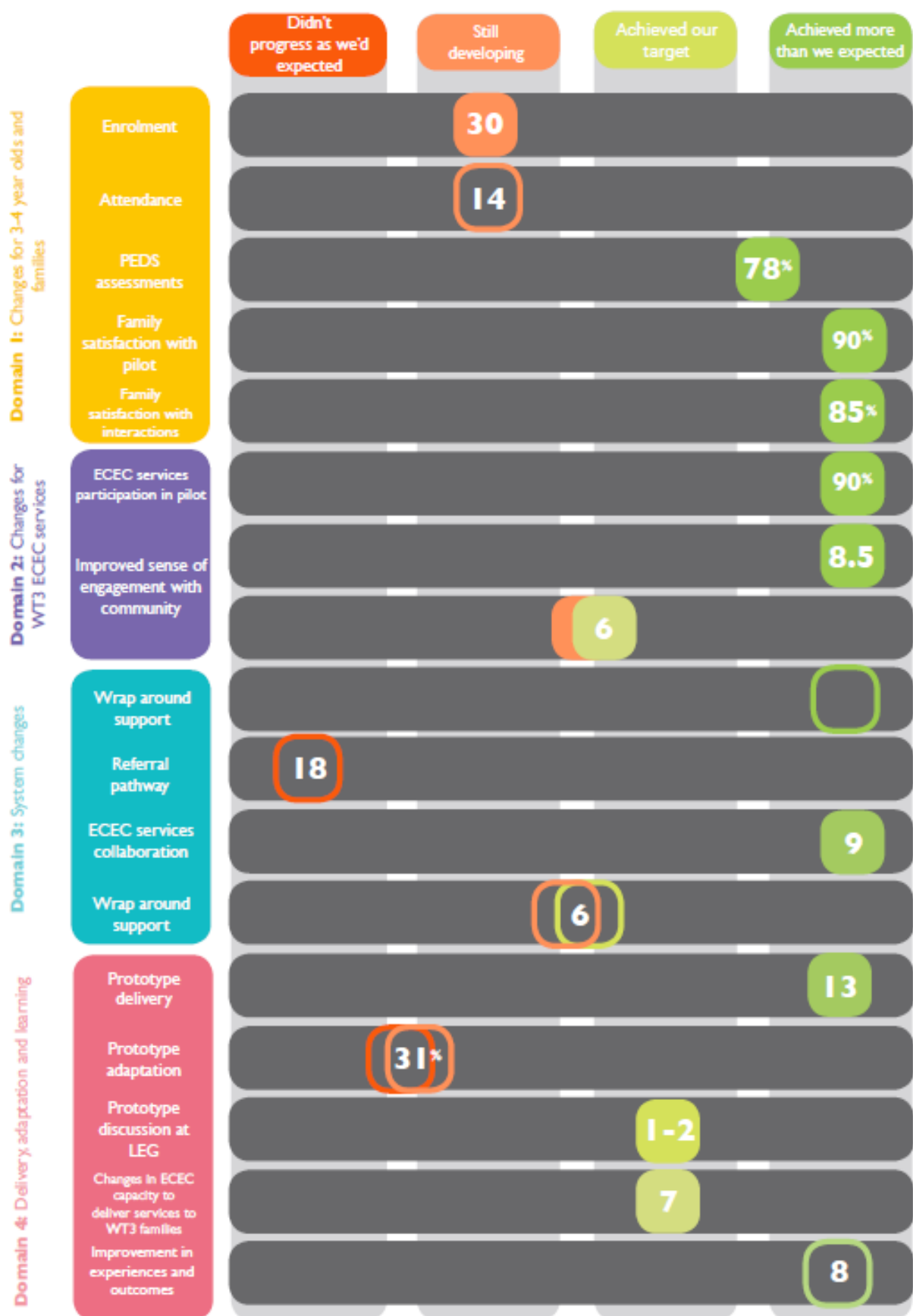
Extracts from rubric scorecard – High level and results breakdown



High Level WT3 Pilot Effectiveness Rubric

This effectiveness rubric is an evaluative tool designed to provide a basis for addressing KEQ1.

The rubric evaluates the results for "effectiveness" against the priority end-of-pilot outcomes and targets set for the purpose of evaluating the WT3 pilot, as well as against some key areas of activities/ outputs for the pilot.

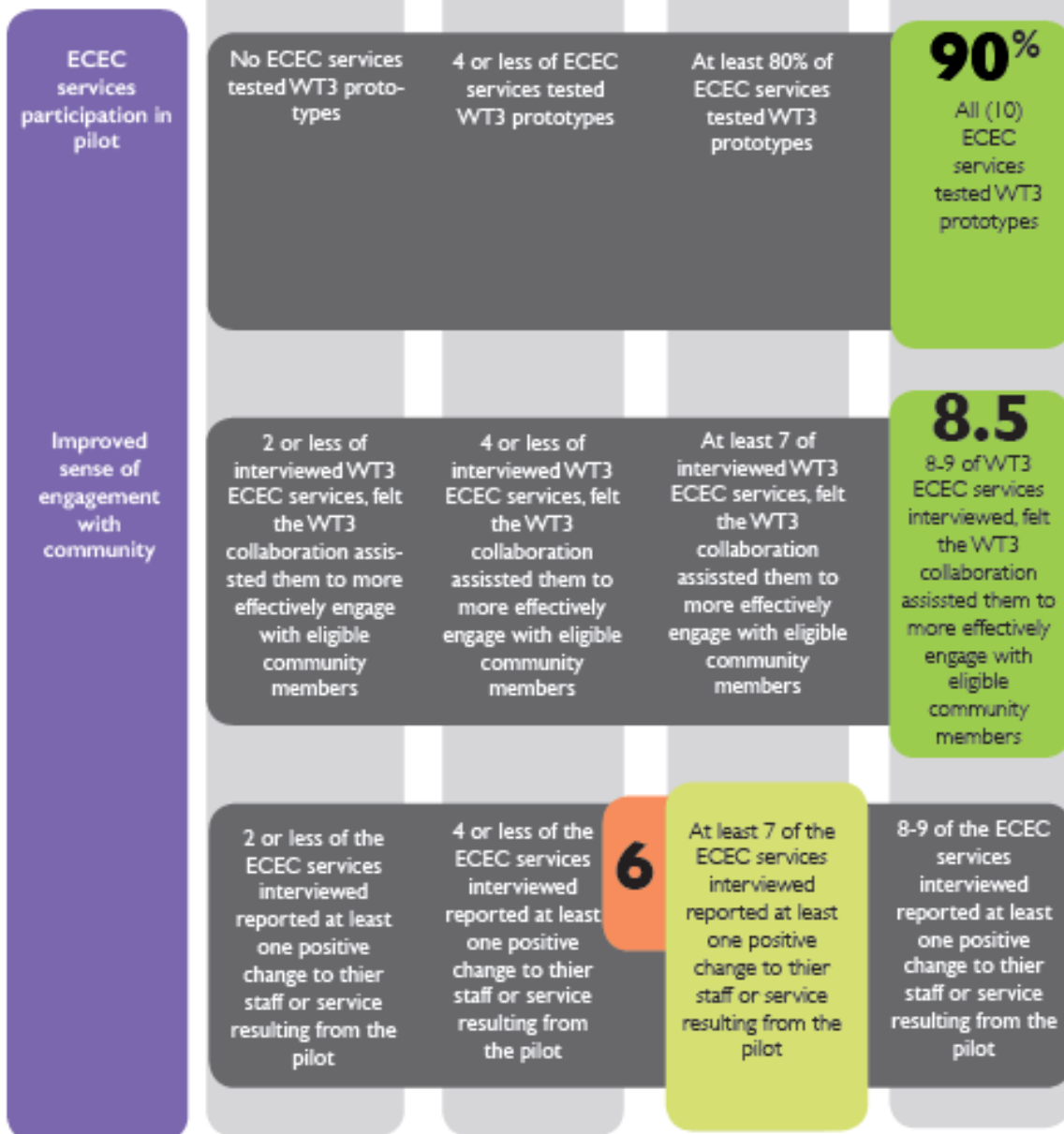


Summary WT3 Pilot Effectiveness Rubric

Per domain



Domain 2: Changes for WT3 ECEC services



Domain 3: System changes



	Didn't progress as we'd expected	Still developing	Achieved our target	Achieved more than we expected
Wrap around support	Less than 20% of children received wrap around support	At least 40% of children received wrap around support	At least 80% of children received wrap around support	95% of children received wrap around support
Referral pathway	18% Less than 20% of pathways (for all children) resulting from PEDS was referred between March and end of June 2019	At least 40% of pathways (for all children) resulting from PEDS was referred between March and end of June 2019	At least 70% of pathways (for all children) resulting from PEDS was referred between March and end of June 2019	All referral pathways (for all children) resulting from PEDS was referred between March and end of June 2019
ECEC services collaboration	2 or less of the ECEC services interviewed have collaborated with other services to enable the participation of the child?	4 or less of the ECEC services interviewed have collaborated with other services to enable the participation of the child?	At least 7 of the ECEC services interviewed have collaborated with other services to enable the participation of the child?	9 8-9 of the ECEC services interviewed have collaborated with other services to enable the participation of the child?
Wrap around support	There are no reported instances of working together in new collaboration (with a referral service, family or other stakeholder) to achieve the goals of the family	6 services have reported working in new collaboration. 3 of these reported at least 2 instances of working together in new collaboration to achieve goals of the family < half of the participating services have reported at least one instance of working together in new collaboration to achieve the goals of the family	All services have reported at least one instance of working together in new collaboration (with a referral service, family or other stakeholder) to achieve the goals of the family	All services have reported at least two instances of working together in new collaboration (with a referral service, family or other stakeholder) to achieve the goals of the family

Domain 4: Delivery, adaptation and learning

