

Evaluation Report

May 2024



Acknowledgement to Country

We acknowledge the Latji Latji as the Traditional Owners and Custodians of the Country on which we are. We also acknowledge their near neighbours the Barkindji.

We pay our respects to the Elders past, present, and emerging and to the ancient connection they hold with their Country.

We acknowledge there are also other Aboriginal and Torres Strait Islander people who live, work in and contribute to the cultural heritage of the Mildura region.

About Hands Up Mallee

Hands Up Mallee connects community, government and services to create real change for children, young people and their families. We are a collective impact initiative based in the Mildura Local Government Area, on Latji Latji country and close to Barkindji country in northwest Victoria. As a collective impact initiative, we bring together different groups to tackle complex social problems in new ways. Our work covers areas like health, education, family services and youth services. Since 2015 we have partnered with communities, service providers and government to create ways for people to have a real voice in decision-making processes that impact them.

Contributor Acknowledgement

Hands Up Mallee recognises the generosity of all partners and community members who share their time, words, insights, and support to work collaboratively and create change. Their contribution is essential to our work. The stories and information shared, and outcomes achieved in our journey together to create a connected community where families matter and children thrive, belong to them and the Northern Mallee.







Contents

Executive Summary	3
Introduction	7
Purpose of the Report	9
About the Project	9
Project Partners and Their Contributions	11
What We Did	14
Evaluation Findings	19
Impact	19
Effectiveness	22
Learnings	28
Early Signs of System Change	32
Recommendations	35
What's Next?	37
Appendices	39
Appendix 1 – Hands Up Mallee Overarching Theory of Change	39
Appendix 2 – Family Co-Design Project Journey Map	40
Appendix 3 –Theory of Change Co-Design Project Ideas	42
Appendix 4 – Projects Strategic Alignment	43
Appendix 5 – Evaluation Approach	44
Appendix 6 – Co-Design Project Idea Snapshots	46

Executive Summary

The Family Co-Design Project

The purpose of the Family Co-Design Project was to bring together local families and services to gain a deep understanding of the needs of community in a family and child hub. This was done by families and services sharing their expertise, ideas and experiences through a co-design process, and designing and testing new ideas of how to best meet the needs of local families into the future.

It is intended that the learnings from the co-design project will inform and guide future decision making about the Family and Child Hub as it grows and evolves.

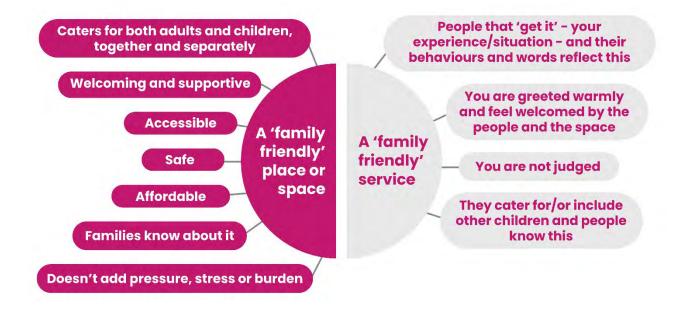
The Report

The purpose of this report is to:

- Provide the background to the project
- Summarise the process, activities, learnings, and outcomes of the project
- Provide recommendations to Sunraysia Community Health Services
 Executive Team and Family and Child Hub staff on what local families need and want in the Hub
- Inform decision making
- Identify what's next for Hands Up Mallee's work.

Key findings and outcomes from the evaluation

 The families and services defined what family-friendly places and spaces are, and what family-friendly services need to be for our community:



Impact:

- Enabling individuals to feel valued, safe and equal allowed them to be confident to have a say and allowed the project to collect rich, diverse information
- New connections were made with people who wouldn't normally connect.
 This also allowed the project to collect and be informed by rich and diverse information and expertise.
- A strengthened commitment and confidence to change how things are done was talked about by both families and services.

Effectiveness

- Partnering with families a diverse group of parents were involved,
 deepening the learning and the connection in the group.
- Partnering with services continuous engagement from services with the group provided greater benefit for both services and families.

- The further the services stepped into the work and discomfort, deeper and more impactful work resulted.
- Sustaining engagement from both families and services over a long period of time is a challenge with this type of work.
- The role of the Hands Up Mallee Backbone enabled the project and the partnership because of the:
 - relationships with community, services, funders and researchers
 - impartiality and independence that Hands Up Mallee has in the local system
 - skills and experience in the co-design and engagement process
 - resource and financial capacity available.

There were over 40 ideas generated in what families would like to see in a family and child hub. The group decided to prototype the following ideas:

- A Welcomer/Connector role within the Hub.
- Social events and activities at the Hub.
- A family leadership group for the Hub.
- Families design the look and feel of the Hub.
- A family communication guide.

Learnings

Key learnings from the co-design project include:

- Piloting is important change takes a long time so for people to be able to see or experience things 'in real life', piloting ideas is essential.
- Involving people who are most affected by the current system, and can influence what is worked on.

- The challenges of sustained engagement over time the balance of the right amount of time for the group to feel safe and comfortable to engage and to keep the project moving through the phases and minimise disengagement.
- Engaging services better so they understand, engage meaningfully and stay involved through the projects, and feel safe and supported as well.

Recommendations

- 1. Establish and embed a Family Leadership Group which guides the direction of the Family and Child Hub now and into the future.
- 2. Formalise, implement and evaluate a Welcomer/Connector role at the Family and Child Hub.
- 3. Create collaborative partnerships and explore new resourcing to enable connection to peers and services.
- 4. Commit to adopting a Measurement, Evaluation and Learning framework that tracks outcomes for children and families, supports the implementation of the co-designed ideas and share learnings.

What's next

SCHS and the Family and Child Hub:

• Implement key recommendations outlined in this report with support from Hands Up Mallee Backbone to support ideas being embedded into practice.

Hands Up Mallee:

- Improve co-design processes by:
 - Engaging services in co-design work differently, incorporate strategic engagement in early phase of project plannings, clearly communicate the strategic alignment of organisations to the work
 - Tightening project scope and timelines for better sustained engagement
- Investigate further opportunities for learning partnerships and environments centred around systems change

Introduction

Background

The Family and Child Hub (the Hub) was established in 2019 by Sunraysia Community Health Services (SCHS) in response to local community voice, data and an opportunity to relocate and expand current parenting services to create an integrated hub. The Hub currently provides a 'no wrong door' approach with a range of co-located services for families and children, including pregnancy and parent support, allied health, antenatal clinic, playgroups, parenting programs as well as having feed and change facilities and limited space for families to drop in for casual play/connection. The Hub has quickly outgrown its current location and SCHS has received funding to support an expansion project to build the organisational capacity, scale, and impact of the Hub. There are plans for the relocation of the Hub within the CBD area to cater for increased service demand with a long-term goal of a purpose-built location.

The opportunity

The opportunity for the Family Co-Design Project was generated by:

- Long-term partnership work through Hands Up Mallee to inform the development of the first iteration of the Family and Child Hub.
- The timing and need to expand the Hub and an opportunity to reconnect with community during this phase.
- Community voice, data and research providing updated rationale for the importance of investment in the Hub (Hands Up Mallee, 0-8 Discovery Project 2021).
- Commitment from service leadership (SCHS) to work together in this way (community-led, collaborative and systems change approach).

The Hands Up Mallee Backbone scoped the project proposal and engaged with service leads to determine commitment and investment of resources to the project.

Hands Up Mallee identified that this project was an opportunity to work on key enablers for change as outlined in the Hands Up Mallee Journey of Change including:

- Authentic engagement of Aboriginal people, the wider community and it's diversity.
- Multi-sectoral collaboration, collective effort, resources & advocacy- not competitive siloes.
- Grow skills and knowledge, use data, stories and research to inform decisions and actions.
- Work on activities that deliver high levels of impact on Common Agenda.

See Appendix 1 – Hands Up Mallee Journey of Change



Purpose of the Report

The purpose of this report is to:

- Provide the background of the Family Co-Design Project.
- Summarise the process, activities, learnings, and outcomes of the project.
- Provide recommendations to Sunraysia Community Health Services
 Executive Team and Family and Child Hub staff on what local families need and want in a hub.
- Identify what's next for Hands Up Mallee's collective impact and communityled change work.

The primary audience for this report is Sunraysia Community Health Services as the lead organisation behind the Family and Child Hub. The secondary audiences include community, local services, Hands Up Mallee as well as current or potential funders.

About the Project

Project Purpose and Scope

The purpose of the Family Co-Design Project was to bring together a small group of families and services to share their knowledge, ideas, and experiences through a co-design approach as a way to deeply understand and test new ideas of how to best meet the needs of local families into the future.

The co-design process was guided by the following key questions:

- How do families know about where they can go for support and what works best for them to access service support?
- How do families need to feel when they are in community and services settings and what contributes to this?
- How do services know they are supporting families well?

The project started with the intention of exploring these questions in a broad context and a view across the community (places and spaces for families) however as the project evolved the scope was narrowed and focussed more intensely on the Family and Child Hub.

The purpose of the project involved using the learnings to inform decision making, larger scale expansion or extended piloting.

What Was the Starting Context?

Community context in mid-2022

Hands up Mallee facilitated a series of Discovery Sessions in 2021 with local families and services with an aim to bring together family and service voice and expertise, along with research and data to determine key priorities and opportunities for improving outcomes for children 0-8 and their families.

Some of the key findings from the Discovery Sessions that were relevant to this project include:

- Families reported feeling socially isolated in the community and felt the pressures and stress of raising children.
- There was an identified need for services in the broader community to better meet families where they are and co-design solutions together.

Sunraysia Community Health Services (SCHS) context in mid-2022

- Strong interest and leadership support for involving families more deeply in the
 future and ongoing development of the Family and Child Hub. Families were not
 formally involved in the design of the initial hub or the ongoing development,
 families were consulted with, and the Hub was informed by community voice, but
 families did not co-design how it worked, looked or felt.
- Current Hub site limited capacity for service provision.
- Current funding for the Hub has constraints.

Project Partners and their Contributions

Partners and contributions

Primary Partners

Sunraysia Community Health Services – Family and Child Hub team:

- Participated in the co-design workshops.
- Provided service expertise.
- Provide the meeting venue.
- Provided occasional staff to help look after children of the co-design group.
- Provided updates on the progress of the new build.

Local families:

- Participated in the co-design workshops.
- Supported the engagement of other families.
- Provided family expertise, knowledge and lived experience.

Secondary Partners

Mallee District Aboriginal Services, Mallee Family Care, Mildura Rural City Council:

- Participated in the co-design workshops in early phase of project.
- Provided service expertise.

Centre for Child and Community Health:

 Provided research expertise to support the prioritisation of key ideas and guidance to support the prototyping phase.

The role of Hands Up Mallee

During the project, the Hands Up Mallee Backbone:

- Scoped and led the co-design project across four phases.
- Engaged the families to participate.
- Engaged with Sunraysia Community Health Services Hub staff.
- Worked with the Hub staff to determine what they needed and wanted from the project.
- Instigated regular check-ins with the Hub staff to see how it was going for them.
- Engaged other service providers to attend.
- Prepared and managed all engagement and project communication materials.
- Linked in resources to assist with enhancing the co-design experience, such as a researcher.
- Coordinated catering and payments to families for their expertise and participation.
- Developed an evaluation plan, captured data and learnings, and prepared the evaluation and final report.

Would this happen without Hands Up Mallee?

Primary partners in this project reported the following skills and resources that Hands Up Mallee contributed to this project as key enablers of the work:

- Funding traditional funding in services is for service delivery, not engagement and co-design/project work.
- Community engagement and co-design facilitation skills, expertise, and relationships with community.
- Capacity in addition to no funding, services do not often have the time and expertise to drive such projects.
- Hands Up Mallee holds a different position in the system, due to funding,
 purpose and governance and is able to nudge the system in different ways.
- Place-based knowledge and research.

What enabled Hands Up Mallee to do this work?

- Alignment with Hands Up Mallee's strategic intent.
- The skills, knowledge, and experience of the Backbone.
- The connections to community and services that Hands Up Mallee continuously fosters.
- HUM's relationship and partnership with organisations such as the Centre for Child and Community Health Research team and Dr Tim Moore.

The principles guiding the project

The following principles from the Hands Up Mallee 0-8 Measurement, Evaluation and Learning Framework underpinned the project:

- Equity.
- Strengths-based.
- Participatory.
- Self-determination.
- Learning by doing.



What We Did

Key project phases and what was involved:

Phase 1 - Readiness

July – September 2022
Project planning, evaluation and communication planning, community, and service engagement.

Phase 2 – Connecting and exploring

September –November 2022
Establishing co-design group, explore context, evidence, opportunities and generate ideas.

Phase 3 - Prototyping

February – July 2023

Theory of Change, testing and refining ideas through creative and iterative processes.



Phase 4 - Piloting

October 2023 - July 2024

Testing ideas in real life situations or at greater scale, evaluating ideas and prioritising future action.

Please refer to Appendix 2 for a detailed timeline and process outline.

The Co-Design Approach

Co-design is both a mindset and a process, it relates to valuing different types of expertise, in particular the expertise and lived experience of community and a way in which different expertise can be brought together for a meaningful exchange and an innovative and effective design process.

The engagement process for establishing a co-design group was guided by the following questions:

- Who needs to be involved, how will they be involved and what do they need to be involved?
- What types of expertise are important to include?
- Who is most affected by what is being worked on and how are they being represented?
- Who has authority or power to influence change?

Hands Up Mallee undertook an initial engagement process through existing community connections, social media, and local services (e.g. playgroups) to engage families and invite them to participate in the project. Local service partners were identified based on their role in community (e.g. delivering services to children and families) or their connection to the Family and Child Hub.

A co-design group was formed for the project and included over the course of the project twelve local families and four local services. Service and family participation increased, then decreased over the course of the project.

The families brought diverse perspectives and lived experiences to the project, specifically:

- Aboriginal and Torres Strait Islander perspectives.
- Single parent perspectives.
- New arrival perspectives.
- Families and carers of children with disabilities.
- New parent perspectives.

The co-design group was all female, no males were engaged in the co-design group although engagement was attempted. The group made efforts along the course of the project to seek input and feedback from people with perspectives that weren't included in the core group (e.g. asking male partners their views).

Families were supported to be involved through:

- Payment for their involvement in workshops.
- Child-friendly, safe, and accessible workshops and venues.
- Providing food and drinks & breaks.
- Regularly asking for feedback and input about how the workshops run and adapting approach based on feedback.

The group worked together through regular two-hour workshops across the different phases of the project. The workshops were held at the Family and Child Hub and the HUM office.

The following principles borrowed from The Australia Centre for Social Innovation (TACSI) or ways of working guided both the project design, facilitation, and engagement of partners in the co-design work:

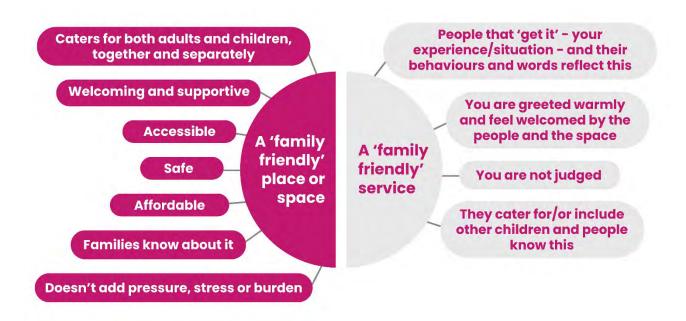
- People are the experts.
- Being in the Grey.
- Learning by doing.
- Curiosity.
- Embracing failure.



Developing and Testing Ideas

Throughout the **explore and connect** phase of the project, families and service partners considered local data, research and their own and others experiences to identify key opportunities and ways to better support families.

The co-design group worked through challenges and positive experiences to define what family friendly services, places and spaces are.



A series of 'how might we?' questions were worked on by the co-design group to support the generation of ideas based on what they know (and what the data and research indicated) and what they would like to see at places like the Family and Child Hub.

Over forty ideas were developed by the co-design group. The ideas were collated, and key themes were identified:

- Engaging families differently.
- Changing the way communication happens.
- Families design the reception and community space (how it looks and how it feels).

To refine the ideas and prioritise ideas that the group could realistically test/prototype within the project, the following steps were taken:

- Development of a Theory of Change (please refer to <u>Appendix 3</u>) to understand and connect the ideas to each other and which ideas have greater influence/support deeper change.
- Engaged with Dr Tim Moore from the Centre for Child and Community Health
 who reviewed the co-design group's ideas and aligned them with the research
 to help determine the 'best bets' for systems change and improvement of
 outcomes for children and families.

The group decided to prototype the following ideas:

- A Welcomer/Connector role within the Hub.
- Social events and activities at the Hub.
- A family leadership group for the Hub.
- Families design the look and feel of the Hub.
- A family communication guide.



The prototyping process allowed the co-design group to further explore, refine and iterate their ideas. The process enabled deeper understanding of the challenges and enablers and their potential impact.

Following the prototyping process, four of the five ideas were further tested through piloting.

The piloting process was undertaken between October 2023 and July 2024 and at the completion of this phase the four ideas were determined to have great potential, strong alignment with community and organisational values and were achievable.

Please refer to <u>Appendix 6</u> for further information about the ideas generated and tested by co-design group during this project.

Evaluation Findings

The evaluation findings are centred around the Family Co-Design Project but also relate to, and inform, the HUM MEL framework and Key Evaluation Questions and align to Sunraysia Community Health Services strategic direction.

Impact

Feeling valued, equal, and having a say

Families involved in the co-design group reported feeling excited, but unsure at the start of the project about what the project involved and how they could contribute (Journey Map). There was a clear message in workshops that families feel judged often and felt that their opinions did not matter.

Families and service partners reported that the co-design experience made them realise the value of their expertise and the power of bringing this expertise together to influence change (Journey Map).

"Felt people respected our opinion and experience" - (Family)

"You could tell people were listening - eye contact" - (Family)

All partners in the project played a role in demonstrating respect and value for families and their expertise – from the facilitator, service partners, researchers, and designers.

"Everyone [service staff], Dr Tim, the.. designer etc., were enthusiastic and all on the same page. We loved Dr Tim as he was lovely and excited about what we were achieving, and he made us feel like an equal. There were no sceptics. Everyone made us feel equal." - (Interview, Family)

Sustained engagement of families throughout the project indicated that people saw the value in the project and felt that they were valued "the families must have felt valued as they kept coming" (Interview, Service).

Throughout the project, families started to naturally act as champions or advocates of the Hub as well as this way of working in community as a result of positive and engaging experience.

"If we get this right, how do we tell others in our community how to do this?" - (Family)

"Left me thinking this might influence things outside of our community – not just our Hub, but beyond" - (ChangeFest24 Mildura Reflection, Family)

This outcome was enabled by:

- Families being invited to contribute and supported to engage/re-engage in the process.
- The relationships and trust formed within the co-design group and the time allowed to establish the group "They were given the time they needed to make it a meaningful exchange and not just getting some opinions" (Interview, Service).
- The right environment family friendly space, which was provided by SCHS and "someone looking after kids so I can focus" (Reflection, Family).
- The HUM co-design model that enables participation, safety connection, learning and action (location, time, casual facilitation, flow and pace, remuneration and communication) "HUM's values, relationships, and ways of working to understand what families need really helps. They make it feel safe to share stuff and trust in doing so" (Interview, Service).

Creating new connections, bringing new and diverse perspectives

The co-design process brought together people together who would not usually come together and connected them through a common interest/experience. The co-design group was diverse, which led to new learnings for participants about people's different experiences "I'm liking hearing other voices, eye-opening" (Family Co-Designer).

New friendships were formed through the process, which was important for families and had flow on impacts for them beyond the project "the other most valuable thing

is making community connections with other families. Most of us made new friendships...it helps us to get to know people in our community and what they are doing" (Interview, Family).

Strengthened commitment and confidence to change

Families and service partners all reported feeling increased confidence in themselves and motivation to progress systems change work and influence change at the Family and Child Hub.

Through the co-design process families made connections and joined forces with others, which increased their motivation for influencing change and improving outcomes for families in community as they were supported by friends and allies "I like seeing that there are people who want to make things better – usually you never know that or who are interested in improving things for services – mostly it is just a feeling that I like service or not and if I don't like it I don't go back" (Interview, Family).

There was a clear increase in confidence from families over time, this was noticed by everyone involved "self-confidence to meet new people, and amazing opportunities, sense of having to contributed to something important" (Journey Map).

Confidence in families grew from safety, connection, experience, knowledge, and feedback "when the families received feedback on their ChangeFest presentation, they leant into the work further" (Interview, Backbone).

"What I did not expect to be so important was the close relationships that were formed with community and to see their confidence to show up in different settings that value genuine community input" - (Interview, Service)

There were different enabling factors for service partners when it came to confidence and commitment. Service partners reported that being involved in a parallel project -

a learning partnership with Hands Up Mallee and the Centre for Child and Community Health research team contributed to their increased confidence.

"The Learning Partnership has resulted in strengthening my commitment and has helped me identify allies for this way of working. It is building my confidence to advocate at higher levels in my organisation and elsewhere" -



Effectiveness

Partnering with families

Families engaged deeply in the work and although at times at the start and along the way they were challenged by the process – not knowing what to expect, whether things would happen – they kept showing up. They did this even though they had so many other things going on in their lives at the same time (Reflection, Backbone).

A diverse group of twelve families engaged in the co-design group, which strengthened the process and deepened people's knowledge of the topics as well as connected new families to each other. There were some frustrations along the way (Journey Map) having to explain cultural differences, but the time and support from participants helped people to understand better. There was time taken to slow down and engage more families in the earlier phase as there was not enough Aboriginal people involved. This was important to do and strengthened the work with people's knowledge and input and relationships.

Families identified the reasons that made it easier for them to do this, which included how the workshops were ran and the positive experience they had when participating. The duration of the overall project was a challenge for families (and services and the Backbone) although there was recognition that deeper and relational work takes time "the project was bigger/longer than I expected, but if it had only been 4 weeks we would not have got so deep and so far in seeing what is needed for families and their children" (Interview, Family).

Families felt really proud of themselves at the middle point – "what we have achieved, seeing ideas come to life", getting feedback from others and seeing the influence they could have (Journey Map).

This outcome was enabled by:

• Timing and location of workshops, right environment, remuneration.

 Taking an equity focussed approach to engagement and ensuring cultural support at workshops.

Partnering with services

Over the course of the project, four local services were invited to partner on the project. The level of engagement differed greatly due to a number of factors.

Some services did not continue to engage after changes in staffing, other services were unable to continue on the project as it was not a priority at the time.

The services that continuously engaged across the duration of the project reported that their engagement was driven by wanting to learn about co-design for the purpose of applying the approach in other family services "the main things were being introduced the co-design phases and processes, and the ability to ask the right questions at the right time. I wanted to be more informed in preparation for the development of the Red Cliffs Early Years Integrated Hub" (Interview, Service).

Some services and the Hands Up Mallee Backbone as facilitators were challenged by a changing environment around the service – change in leadership, new executive less familiar with the Hands Up Mallee initiative and service partners role and commitments, new relationships to develop, being unsure about the future direction and a different understanding of the value and role of community voice.

There were difficult moments along the way for service partners engaging in the project, particularly around feeling pressure to change things that felt beyond their control e.g. systemic barriers 'can we do this?' (Journey Map) and managing community expectations.

The service experience in co-designing alongside families highlighted some of the unique challenges, for example, in the earlier phases, they felt challenged at times when there was a lack of understanding of how the Hub had already tried things being suggested by families (Journey Mapping). Services reported feeling like they had to play a balancing act of partner in co-design work and a service provider to families who access their services (Interview, Service).

There was a level of frustration felt at times, through the facilitation by the Backbone, that the expertise of services was not as valued "at the start it felt it was all about the

community and services had to sit tight and listen to them and that service expertise was not being valued. After the relationships were strengthened, things progressed better" (Interview, Service).

The Backbone team noticed that the further the services stepped into some of the discomfort, the deeper and more impactful work resulted.

Enabling Factors:

- Clear briefing and introduction to the project and way of working.
- A Learning Partnership focused on systems change happening in parallel with the project which provided safe, reflective space "valuable opportunity to reflect" (Interview, Service).
- Existing relationship with Backbone team.
- A level of comfort with being in the grey.

"I know that when we listen to community voice we need to be ready to be travelling in the grey for a while. At times it felt like we were building the plane while flying, but I was ok with that" - (Interview, Service)

Sustaining engagement

The duration of the project affected both family and service engagement and was a challenge for the Backbone. This was impacted by staffing changes, project scope, having to pause to engage families to ensure greater diversity.

Although the pressure of time made it difficult, it was clear that a decent amount of time is necessary for connection, relationships, confidence, and learning. "The project was bigger/longer than expected, but if it had only been 4 weeks we would not have got so deep and so far in seeing what is needed for families and their children" (Interview, Family).

Sustaining engagement of all service partners was challenging and included - managing drop off of service partners after first few sessions, either non-attendance, change in staff or other competing priorities. There is a need to work on understanding what is not working to ensure greater and more sustained engagement from service partners in future work.

When some services were unable to continue to engage "maybe the purpose for them was not sufficiently clear enough" (Interview, Service) it affected the co-design group and relationships. Although services are independent of each other, the service system is one thing from a family and community perspective so there was questioning around how committed the broader system is to change and the impact of change in isolation (Journey Map).

The enabling role of the HUM Backbone

Service partners described the value of HUM's contribution to the project and identified the aspects that enabled the project and partnership:

- Processes and models for engagement and co-design.
- Relationships in community, services, funders, researchers.
- Capacity skills, financial resources, staff, and time.
- Place-based knowledge and expertise.
- Independence and unique positioning in the local system.

"I don't think an external consultant could come in and do this work to this degree because they would not have the knowledge of the lived experience in our community to draw on or to build relationships between families and services" - (Interview, Service)

HUM's contribution to this work is enabled by:

- Stronger Places Stronger People partnership and funding.
- Investment in Backbone capability training co-design and evaluation.

- Experience in community engagement and co-design.
- Reflective practice -making it safe to give feedback so sessions could be tailored and meet needs.
- Trust from staff to recognise value in engaging them.
- The bravery of Family and Child Hub staff to step into a challenging journey, a positive attitude even though the work was difficult at times.



Learnings

Co-design as a way of working

The HUM team have continuously built and refined a co-design model that is working well for families and the learnings from previous co-design projects (Red Cliffs, Pool Access Project etc), has informed the model.

The project highlighted the importance of a shared experience, celebration and real-life testing for co-design group dynamics and engagement. Change can take a long time so for people to be able to see and do things 'in real life' and 'right now' helps strengthen engagement and motivation in co-design (Reflection, Backbone).

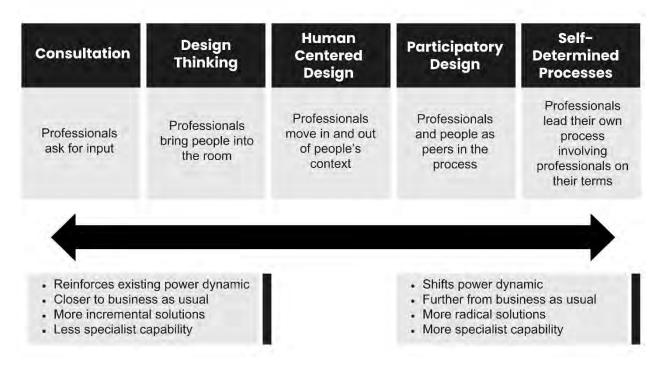
Co-design as a process requires involvement of people who are most affected by and able to influence what is being worked on. The co-design group brought such diverse perspectives to the work, this was enabled by an equity-based approach to engagement which is critical to success.

Sustained engagement can be challenging, especially if projects go for too long. Through this project a clear learning is that time is critical to success and a balance of 'enough time' needs to be continually worked on and refined to reduce potential disengagement.

Co-design is a different way of working for families and for services. They need different things to be ready to start such as information (background to the work, service etc), safety and connection. This will help readiness of all involved and needs to be approached separately before bringing people together to avoid tension.

Co-design is not as common as consultation in the service, government and community sector, therefore more effort needs to be made to deepen understanding of how it is different, why it needs to be and what co-design can lead to – empowering community, informed decision making etc.

Participants felt it is important that more organisations and services undertake codesign with families so they appreciate how incorporating different perspectives from families can lead to better service design and delivery (Journey Map). "One of the biggest challenges was trying to overcome the tightly held perception by services... that they undertake family and community engagement well and to support them to understand the difference between consultation and participatory co-design" - (Backbone, Interview)



This continuum has been adapted from the following sources: International Association for Public Participation (n.d). Core values, ethics, spectrum – the 3 pillars of public participation, Rowlett, I. (2015). Five Principles for Community Engagement in Collective Impact, Gonzalez, R. (2021). The spectrum of community engagement to ownership.

About the ideas, prototyping and piloting

The co-design approach to the project which involved utilising data, research, family, and service expertise to generate ideas, followed by prototyping and piloting as a way to test and refine ideas is working well as a process and continuous learning is occurring as result of this approach.

Prototyping and using co-designed criteria and Theory of Change supported informed decision making and ensured ideas being selected were not just based on people's preferences or personal interest. What was important changed along the way because the group were learning more about the ideas and their potential impact.

Creative activities and processes engage people in different ways and supports participation and connection to each other "Families enjoyed role play activities and

big group sessions as enablers for design & refinement but also as a way to connect the group members to each other" (Journey Map)

"I enjoyed working in this collaborative space. There has been so much more feedback and engagement" - (Reflection, Brand Designer)

Although the work can be significant to take this approach, what is being learnt is more valuable "insights directly from 'real people'" (Reflection, Brand Designer) and can be transferred out or scaled up "I think the learnings from this work is influencing other new projects such as the development of the Red Cliffs Early Years Integrated Hub" (Interview, Service)

About engaging partners in this work

Service engagement is crucial to success, it was a times challenging to engage and sustain services as partners due to a range of factors. A revised approach to service engagement needs to include:

- More formalised, supported, and strategic partnership, engaging leadership
- Clear briefing and alignment to organisation's strategic direction, values, or policy environment
- Clarity around timeframes, resources required, accountability and feedback mechanism to organisation.
- Different preparation/orientation of services prior to commencing co-design work alongside families/community.

What was noticed along the way was that when services are able and supported to engage, there are early instances of system change happening.

What is enabling deep engagement of services:

Resourced and supported by organisation to participate.

- Reflective practice and safe spaces for reflection "It's a challenge not to take things as a criticism" (Reflection, Service)
- Feeling connected and supported by 'allies'.



Early Signs of System Change

Hands Up Mallee employs a systems change approach to improve outcomes for children, young people and families focussing on prevention and early intervention.

As part of its approaches to evaluation it looks for signs of systems change related to changes in practices, resource flows, policy, relationships and connections, power dynamics, and mindsets.

Six Conditions of Systems Change Resource Structural Change **Policies Practices** Flows (explicit) Relationships Power **Relational Change** & Connections **Dynamics** (semi-explicit) Mental **Transformative Change** Models (implicit)

FSG: Water of Systems Change JOHN KANIA, MARK KRAMER, PETER SENGE June 2018

Resources

The project was supported by the shared used of resources from HUM and service partners, specifically Sunraysia Community Health Service who contributed the space and additional support for families to participate. The prototyping and piloting process identified that services need to use resources differently to provide what families and children need, e.g. social spaces and activities in Hubs. Families became much more aware of the resource challenges in services with their funding and wanted to advocate for change "give Sunraysia Community Health Services the money they need to work this way as it is worth it, and the same for Hands Up

Mallee. Funding needs to be flexible to make sure the right resources are in place even if they cost a bit more, they will better meet the local needs" (Interview, Family)

Practices

As a result of designing and testing a leadership model for families at the Hub, there was interest and follow up from staff responsible for 'consumer advisory' across the service, who are keen to review how they engage 'consumers' and involve them meaningfully in decision making. "I feel we can now lock in listening to community in formal and informal ways into the future, and that by doing so we can value community expertise" (Interview, Service).

An immediate shift in practice along the way was the Family and Child Hub staff implementing Story Time at the Hub which was motivated by the work and learnings of the co-design group in relation to social activities, barriers and enablers and the importance/approach needed for them.

The project is noted as having influence beyond the Family and Child Hub and beyond our local community specifically in relation to co-design as a practice. Council staff reported wanting to embed co-design as a practice and shared their learnings of the importance of this and the timing in which it needs to happen. "We have since learnt on the 2nd co-design project for Red Cliffs Early Years Hub we got too far into the building phase which means we have to rush to make decision. This pushes us from trying to take a co-design approach towards information sharing. There is a lesson for (us) about this, so we need to ask how we do this better. It would be good to be able to bake co-design into our roles and other parts of our work" (Interview, Service).

As a result of the co-design group presenting at ChangeFest24, other communities reporting being influenced to adopt this practice in their own services as communities "the visit to the Mildura Family and Child Hub inspired the Gladstone team to explore whether a similar co-design model could be implanted locally. And how we can bring families along on the journey to improve outcomes and proved greater access to services" (ChangeFest24 attendee, Gladstone).

Relationships

Throughout the project, service staff formed a different type of relationship with families, this led to organic development of family champions and advocates for the Hub based on positive experience. Families were bringing others to the Hub and communicating amongst peers and others about it.

Power Dynamics

"I have learned to listen without feeling that I have to respond immediately. I have become more conscious that there is a power imbalance between families and services and make a more conscious effort to hold my opinion before being asked for it." (Interview, Service)

A greater consciousness of the power dynamics that exist between services and families occurred as a result of this project. This led to a change in behaviours and practices to shift the power imbalance which led to a more empowering experience. "Safety and power, thought about where people sat etc, how people were introduced" (Reflection, Service).

Mindsets

Service and family co-designers reported having a greater understanding and belief in different types of expertise and where change comes from.

"I think we realised the power of people in co-design work- everyone did and that we should build this into the standard way of working – much better than a few surveys..." (Interview, Family)

There was a realisation expressed along the way that the principles guiding service delivery could be applied at community level to support community led change "we like our families (clients) to be child-led, so we would want our service to be family-led" (Reflection, Service)

Recommendations

1. Establish and embed a Family Leadership Group which guides the direction of the Family & Child Hub now and into the future.

Recommendation alignment with Sunraysia Community Health Services Strategic direction:

Strategic Priority

- Provide community-led approaches to how we deliver care
- Re-imagine the client journey
- 2. Formalise, implement, and evaluate a Welcomer/Connector role at the Family and Child Hub.

Recommendation alignment with Sunraysia Community Health Services Strategic direction:

Strategic Priority

- Provide community-led approaches to how we deliver care
- Secure and develop a workforce that enables the organisation to deliver all its services
- 3. Create collaborative partnerships and explore new resourcing to enable connection to peers and services.

Recommendation alignment with Sunraysia Community Health Services Strategic direction:

Strategic Priority

- Build services and partnerships to support clients to address the social determinants of health
- Provide community-led approaches to how we deliver care

4. Commit to adopting a Measurement, Evaluation and Learning framework that tracks outcomes for children and families, supports the implementation of the co-designed ideas and share learnings.

Recommendation alignment with Sunraysia Community Health Services Strategic direction:

Strategic Priority

- Provide community-led approaches to how we deliver care
- Build services and partnerships to support clients to address the social determinants of health

What's Next

Family and Child Hub and SCHS

SCHS and the Family and Child Hub implement key recommendations outlined in this report with support from Hands Up Mallee Backbone to support ideas being embedded into practice.

Hands Up Mallee Ways of Working

Engage services in co-design work differently, incorporate strategic engagement in early phase of project planning, whereby more time and effort are placed in engaging, aligning, supporting and formalising service partnerships (at staff and management level) around co-design and project work. Follow this up at regular intervals and at project completion phase.

Tighten where possible project scope and project timelines to reduce scope creep (but not limit scope evolution) and better sustain engagement.

Further explore the value and ongoing opportunities for learning partnerships and learning environments centred around systems change to strengthen knowledge and engagement.

Future Impact Work

HUM's co-design work in partnership with local families, services and researchers in Mildura and Red Cliffs has identified common themes of constraints and opportunities around local early years Hubs which are aimed at providing preventative health services for children and families.

Explore further what it would take to secure funding and support to strategically influence change to the local (and broader) systems by:

- Aligning with national context and agenda –Child and Family Hub Network and framework both to inform this work and be informed by it locally.
- Identifying further opportunities for scaling.

- Exploring and problem solving, real and perceived gaps and constraints in the system.
- Further developing and sustaining a Hub model that works in local context.
- Resourcing family and community designed and tested ideas such as Welcomer/Connectors.
- Facilitating a Learning and Action network for service providers and leaders.
- Embedding community led and collaborative governance models.
- Securing an ongoing partnership with researchers.
- Externally evaluating the process and outcomes to inform decision making, policy and practice change.

Hands Up Mallee as a place-based initiative could leverage the positioning and elevate local learnings to inform and drive systems change.

Appendix 1 - Hands Up Mallee Overarching Theory of Change

Making lasting change for A connected community where families matter, and children thrive community at the People feel connected to their community and culture, safe and supported in expressing identity, included and accepted, there is an absence of racism, and we value diversity population level Positive sense of identity We want children and young Valued, loved and safe **Material basics** Healthy Learning **Participating** and culture people to thrive in 6 Phase 5: wellbeing domains (ARACY). · Has adequate and stable . Born with a healthy life · Families engaged in child's · Feel connected to their Achieving · Have safe, supportive · Engaged in age-We will measure change for family environments. housing, nutrition and expectancy. appropriate organised community and culture. transformative community-based on clothing. · Access to timely health · Have families that provide · Opportunities to learn in activities. · Feels safe and supported change community experiences and quality early childhood · Participate in peer groups responsive caregiving · Access to the equipment services. in expressing identity. what population data tells us necessary to participate in · Access to preventative education and childcare and online communities. · Feels included and practices. · Have a say in matters that education and training. measures that target services. accepted, absence of · Feel they have adults to Early instances of impact Access to public transport, physical, emotional and · Participate in, and attend, affect them. racism, values diversity. turn to for advice. for children, families and and community mental health. school on a regular basis. · Opportunities for · Feel safe in community and online. infrastructure. · Live in a community with · Complete Year 12 or volunteering, work community infrastructure that experience and full-time equivalent, progress to supports healthy living. further education. employment. employment, or training pathways. **Empowered community with** Government, services and leaders Investment in co-designed local Resource changes in how they are Changes are happening beyond our Changes we are making Phase 4: change mindsets and practices solutions and innovations shared and used agency to act within the system Scaling up the change across · Community-led and co-designed · Improved resourcing and better · We are having an influence on · Community voice is respected · There are effective cross-sector Systemic changes the system funding arrangements support and a key driver in decisionpartnerships that play an initiatives are supported, tested policy, other communities and enabling role. and scaled up. broader systems. · Representation by Aboriginal · Community input and priorities · Services are sharing and joining people, participating and leading drive policy and practices. up resources to meet community in the journey. · Relationships between needs for more significant · There are multiple champions at community, government and impact. multiple levels and places in the · Funding for Aboriginal services are strong. communities supports System. sustainable change. Phase 3: Creating a What helps to change the Multi-sectoral collaboration -Grow skills and knowledge shared agenda Authentic engagement of Transparent and locally-led Work on activities that deliver Report on progress and share collective effort, resources and use data, stories and research way we work together for change Aboriginal people, the wider governance, with a focus on high levels of impact on our learning for continual to inform decisions advocacy - not community and its diversity. place-based change. Common Agenda. improvement and awareness. competitive siloes. and actions. **Enablers** Phase 2: Building the What we had at the start of Community, government and agencies ready to foundations for History and context of place - remote region, Sufficiently resourced backbone to convene listen to the community, use evidence (data, many Indigenous people, culturally diverse, Existing relationships and partnerships the journey change stories, research), and open to doing things river, horticulture, small business, high socioto build on. and facilitate stakeholders. differently. economic disadvantage. **Foundations** Phase 1: Recognising The challenge and We saw: the need to disrupt cycles of disadvantage for the whole community; that services and support can be fragmented and hard to navigate; and that solutions often come in from outside of the possibility opportunity that inspired place and are not community-driven. We saw the potential for community based and driven responses to create positive alternatives and bridge the gap between community and services. We saw the opportunity for working together in new ways (through collective impact practice) to create more outcomes and impact for local families and community members. for change our shared journey

Appendix 2 - Family Co-Design Project Journey Map

Phase 1 -Readiness



- **HUM TEAM**
- · Background work and research
- · Project scoping
- Project planning
- Community engagement
- · Service partner engagement
- · Developing project agreements
- Communication planning
- Measurement, evaluation and learning planning

Phase 2 - Connecting & Exploring



WORKSHOP 1 (11 SEPTEMBER 2022)

FAMILIES, SERVICES, FCH STAFF, HUM TEAM

- · Co-design group formed
- · Introduced the project & how to work together



WORKSHOP 2 (6 OCTOBER 2022)

FAMILIES, SERVICES, FCH STAFF, HUM TEAM

 Explored barriers and enablers for families in places and spaces in our community



WORKSHOP 3 (27 OCTOBER 2022)

FAMILIES, SERVICES, FCH STAFF, HUM TEAM

· Explored 'family friendly services'



WORKSHOP 4 (16 NOVEMBER 2022)

FAMILIES, SERVICES, FCH STAFF, HUM TEAM

- Research & data exploration and analysis
- Idea generation



WORKSHOP 5 (23 FEBRUARY 2023)

FAMILIES, SERVICES, FCH STAFF, HUM TEAM

- · Continued idea generation
- · Developed personas to support testing

During this phase, family and service engagement changed.

We welcomed new families as needed to ensure there was greater diversity amongst co-design group. It meant the work had to slow down a to support the engagement of new members

Phase 3 -Prototyping

Phase 4 -Piloting



WORKSHOP 6 (23 MARCH 2023)

FAMILIES, SERVICES, FCH STAFF, HUM TEAM

- · Prioritised ideas for prototyping
- Developed a Theory of Change for ideas selected for prototyping



WORKSHOP 7 (27 APRIL 2023)

FAMILIES, SERVICES, FCH STAFF, HUM TEAM

- · Refined the Theory of Change
- · Prototyped ideas through creative activities
- Prepared for session with CCCH to provide input to ideas



WORKSHOP 8 (18 MAY 2023)

FAMILIES, SERVICES, FCH STAFF, HUM TEAM

- Session with Dr Tim Moore aligning the families ideas with research evidence to support and guide decision making.
- Prototyped ideas through creative activities (role description, role play, personas)



WORKSHOP 9 (8 JUNE 2023)

FAMILIES, SERVICES, FCH STAFF, HUM TEAM

 Prototyped ideas through creative activities (scenarios, role play, card game, project plan, developing principles & working together agreements for families to lead and partner with services)



WORKSHOP 10 (20 JULY 2023)

FAMILIES, SERVICES, FCH STAFF, HUM TEAM

- Prioritised ideas for piloting using decision making criteria and voting
- Completed a journey mapping activity to support evaluation of phases 2/3
- Prepared for next phase

At the end of this phase, family & service engagement changed.

The group became smaller as some families had to finish due to family & personal commitments.

FCH staff were the only service to continue beyond this point.



WORKSHOP 11 (6 OCTOBER 2023)

FAMILIES, FCH STAFF, HUM TEAM

- · Reconnected as a group
- Planned evaluation
- · Branding consultation session held



WORKSHOP 12 (1 DECEMBER 2023)

FAMILIES, FCH STAFF, HUM TEAM

- · Reflected on experience with designer
- Refined working together agreements & values for Family Leadership
- · Started planning pilot social event at the Hub
- · Planned for presentation to SCHS Exec



WORKSHOP 13 (2 FEBRUARY 2024)

FAMILIES, FCH STAFF, HUM TEAM

- Planned pilot social event at the Hub.
- · Prepared presentation for SCHS Exec.
- Feedback session with designer on branding project.



SCHS EXEC PRESENTATION (14 FEBRUARY 2024)

FAMILIES, FCH STAFF, HUM TEAM, SCHS EXEC



WORKSHOP 14 (1 MARCH 2024)

FAMILIES, FCH STAFF, HUM TEAM

- Preparation for ChangeFest presentation
- SCHS Exec presentation reflection
- · Project planning the Family Fun at Hub event



SITE VISIT - CHANGEFEST24 (21 MARCH 2024)

FAMILIES, SERVICES, FCH STAFF, HUM TEAM



PILOT EVENT - FAMILY FUN AT HUB (11 APRIL 2024)

FAMILIES, FCH STAFF, HUM TEAM



WORKSHOP 15 (3 MAY 2024)

FAMILIES, FCH STAFF, HUM TEAM

- Evaluation and reflection of the Family Fun event at the Hub
- · ChangeFest Reflection & Evaluation



WORKSHOP 16 (7 JUNE 2024)

FAMILIES, FCH STAFF, HUM TEAM

- Journey Mapping (evaluation)
- Decision making and prioritising ideas post pilot phase
- Final presentation of Hub Branding

Appendix 3 - Theory of Change Co-Design Project Ideas

AND EVENTUALLY LEAD TO	Families hav social conn	The Family & Child Hub is an inclusive, safe and welcome place for families				Increased equity and access to services and support that families need				
THIS WILL RESULT IN	Different and more efficient services	More inclusive environment for families	More families talking about the hub		A safe and supportive atmosphere		More peer to peer learning and support		More families feeling prepared for kids	
	More families accessing the hub	People make meaning connections	Regular feedback/input from families		Increased word of mouth		Reduced stress and pressure on families		Kids play with and meet other kids	
WE WILL SEE THESE CHANGES	Increased promotion of hub and services	Staff have be understandi families situa	ng of	Hub communication is tailored to different cohorts		We	Kids feel safe, welcome and comfortable		Families feel it's a place for them and their children	
	Families more relaxed and confident	Different rangideas and persp shaping the	ectives	More people engaged with hub before having a child		unde	Increased cultural understanding and connection		People familiar wi the family and chi hub space	
	Families meet other families	People don't excluded and welcome	feel	supports	early and		ilies feel more empowered		milies know mo about service supports	
IF WE	Have a family advisory group that reflects today's families	Have social activities at the hub	and g	e services roups that t needs of imilies	Have fa design tl and feel hu	ne look of the	with community		Change the wa communication happens	
THE THINGS WE HAVE OR NEED TO START	Services working differently	Connections t different servic	40.00	The second secon		Cultural areness a		An understanding of services		
	Budget	Hub space	Safe space		und	derstandi	available		involved	

Appendix 4 - Projects Strategic Alignment

Strategic Alignment

Project alignment with HUM Overarching Journey of Change.

Enablers	 Authentic engagement of Aboriginal people, the wider community & it's diversity Multi-sectoral collaboration, collective effort, resources & advocacy- not competitive siloes Grow skills and knowledge – use data, stories and research to inform decisions & actions Report on progress & share our learning for continual improvement & awareness Work on activities that deliver high levels of impact on Common Agenda
Systemic Changes	 Empowered community with agency to act Government, services & leaders change mindsets and practices Resource changes in how they are shared and used Investment in co-designed local solutions and innovations Changes are happening beyond our place
Early instances of impact for children	Nest Outcomes: - Healthy - Participating - Positive sense of identity and culture - Valued, loved and safe

*see appendix 1 for HUM Overarching Journey of Change

Appendix 5 - Evaluation Approach

Evaluation Approach

Purpose

The purpose of the evaluating this project was to:

- demonstrate progress towards intended outcomes
- capture leanings to inform future action and improvement

Scope

The scope of the evaluation includes:

- the co-design process
- the experience of families, partners and the HUM backbone
- · co-designed ideas

Key Evaluation Questions

The following KEQ have been selected from the HUM 0-8 Nested MEL framework:

KEQ 1. To what extent is our collaborative work achieving change?

- What changes have happened for organisations, families and the backbone due to our collaborative work?
- To what extent is our collaborative work contributing to systems changes?
- What evidence do we have of systems change? What enabled/ contributed to those changes?

KEQ 2. Effectiveness – How effective are we in the implementation of our collaborative approach?

- How well are we working together?
- How well are we engaging children and families in our collaborative work?

KEQ 3. Learning and improvement – To what extent are our learnings and insights used to improve our collaborative work?

- To what extent are we creating a learning culture?
- What are the key learnings from our collaborative work?
- How are we using our learnings for improvement?

Theory of Change

A Theory of Change outlines the outcomes the outcomes that are being sought, as well as the guiding principles, opportunities, signs of early and intermediate change and how these are enabled.

The approach and evaluation of this project is guided and informed by:

- HUM Overarching Theory of Change (web link)
- HUM 0-8 Nested MEL and Theory of Change (weblink)
- Family Co-Design Project Theory of Change (Appendix 3)

Evaluation tools

- Reflection, activity and observation logs
- Counts and participation trend
- Feedback, workshop reflections and observations
- Journey mapping
- Interviews

Appendix 6 - Co-Design Project Idea Snapshots

Family Leadership

A partnership between local families and services.

A way in which community can have a much greater and broader say about how services and spaces work for families with a structure that supports and enables trust, safety, action and accountability.



"How do we engage right from the start, as partners, so that the service system tunes into the ideas that are most important to you and responds to those rather than constantly deciding what your problem is or what services you need?" - **Dr Tim Moore**

Learnings

- More than surveying or providing feedback, it is about an empowering experience for families and a meaningful partnership between families and services
- Sharing power and shifting power dynamics is a key aspect of this idea and will make a difference
- To be successful the idea will need time to evolve & build relationships, informal structures, resources, be guided by principles and well facilitated.
- Engagement needs to be purposeful and reach out to ensure the diversity of community is reflected and included
- It will need to engage with/guide all services who deliver from the Hub
- This idea can lead to empowering experiences for families and services that has influence beyond the initial focus of the Hub - into community, into families, into services.
- This idea is likely to have the strongest influence over all the other ideas generated by the co-design group.

How was the idea prototyped/tested?

- Developed a structure/model for a Family Leadership group
- Developed a set of values and principles to underpin a partnership between families and services
- Piloted the role of a Family
 Leadership group through
 presentations to SCHS Executive
 and at ChangeFest

Where is the idea now?

This idea was selected as the highest priority following the piloting process as it was deemed to have greatest impact and influence outcomes for familes and children.





Welcomer/Connector Role

A place can be welcoming but people make all the difference.

A Welcomer/Connector role would mean that there is someone who has the time and ability to make people feel welcomed, safe and connected to the support they need at the Hub (or beyond). It takes a particular kind of person to do this and first experiences really matter for people who are anxious or unsure.

The Welcomer/Connector role idea aligns with the evidence outlined and advocated for by the **National Child & Family Hubs Network** in regards to the importance of 'glue' factors in integrated child and family hubs. The glue is referred to as the elements that bind services and supports at hubs and help to make a hub function as a whole. The Welcomer/Connector role idea provides a strong community engagement aspect of the glue factor.



Learnings

- It is important to families that this role is a community role and not clinical or administrative, **lived experience** is the priority.
- The role could be more than one person, it might be a lot to expect from one person
- Key tasks include: greeting/signing in, supporting social activities, events & clinics, caretaking social and reception spaces, seeking feedback from families, be a link to Family Leadership Group
- Need to consider succession planning and how the welcomer qualities apply to all service staff at the Hub
- The role should support social activities
- The role is not something that is usually funded in services, but it is a priority for community – approach to funding will need to be considered
- The role will need to have the right measures in place to evaluate and demonstrate impact effectively: feedback, engagement, diversity of reach, trust measures etc.
- The role will need the right supports in place and for the organisation to value it's importance.

How was the idea prototyped/tested?

- Developed draft role description criteria, skills & experience needed
- Role play
- Utilised personas to test the barriers and enablers of this idea
- Live tested idea at the Family Fun Day at the Hub

Where is the idea now?

After significant testing of this idea through the prototyping and piloting process, this idea was selected as the 2nd priority.





Families design the look and feel of the Hub

This idea is about families deciding how the physical space looks and feels, particularly the reception area and social spaces.

It is more than choosing colours. It is about making decisions and guiding how things are designed to make families feel safe, welcomed, informed and know that it is a place for them and their family.



"...the people [the families] who are going to be the users of these services should play a major part in deciding what the service should look like and what services should be in it, where the place should be built and what it should look like..." - **Dr Tim Moore**

Learnings

- First impressions and experiences matter for families; this is influenced by the look and feel from the outside and into the building. Cultural safety is critical.
- When families worked directly with a designer to translate their concepts into design, it led to good outcomes, changes in thinking and an empowering experience. It cut out the 'middle man' and meant people were heard and felt understood and no assumptions were made.
- The branding work has made a good start on this idea.
- A clinical environment provides some challenges but these can be managed through communication, problem solving and understanding of constraints for all partners.
- Families could continue to inform and design the look and feel
 of the Hub in a partnership role with the Hub through the Family
 Leadership idea.
- Families know what they need. Their involvement will eliminate flaws in design and reduce costs of getting it wrong.

How was the idea prototyped/tested?

- Mock designs
- Explored various personas needs and experiences
- Piloted the role of a Welcomer in the reception space
- Local families engaged with the design process for the new Hub branding and logo.

Where is the idea now?

After significant testing of this idea through the prototyping and piloting process, this idea was selected as equal 3rd priority based on it's impact and influence (along with Social Activities & Events idea)





Social Activities at the Hub

Places to go and things to do, to meet other families and engage with the hub with a focus on social connection, participation and engagement.

This idea builds on the knowledge that families need other people and families to support them as they care for and raise children and that families need places, opportunities and supports to build their 'village'.



"Where do you and your child go on a regular basis where you meet other families and other other children and you both look forward to going? ... the need to have safe places to go where you can meet other people and connect with other families so that you build up your own 'back up', tribe of people who are there for you." - Dr Tim Moore

Learnings

- People can be introduced to the Hub and what support is available through casual, social events.
- There is a need in community for things that are low cost or free.
- Support and facilitation is important, especially to enable connection for isolated or vulnerable people.
- · Regular and low profile events and activities work best to build connection through regular engagement.
- Services need capacity & resources to value and enable social engagement.
- Events and activities can be low cost, yet high impact
- Events and activities should be targeted at and informed by priority cohorts, e.g. Aboriginal mums, new parents, families who are new to Australia, dads and men
- Events and activities need to be at the right time and on the right days.
- Communication about activities & events needs to be planned, targeted and clear.
- · Hub partners and community partners could also support/lead activities & Hub could outreach activities to other parts of community

How was the idea prototyped/tested?

- · Created mock activity posters
- · Developed project plans and mocked up events
- Delivered a community event 'Family Fun at the Hub' with following results:

60% of attendees had never been to Hub before

100% got to meet/talk to someone new 80% became more aware of what the Hub is all about

100% likely or very likely to come back again

Where is the idea now?

This idea was selected as the third priority along with the 'Families design the look and feel of the Hub idea.



