

2019

PeakCare's Member Survey



PeakCare
Queensland Inc.

PeakCare and its Board are pleased to release this report of the findings of our 2019 Member Survey. Our sincere appreciation is extended to the 100 representatives of our Member agencies and Supporters who generously gave of their time to complete the on-line survey. We trust that you will find this report to be an informative account of the survey findings.

This is the third PeakCare survey of our Members and Supporters, the previous surveys occurring in 2015 and 2017. The purpose of the surveys is to collect feedback that can be used to build on perceived strengths of the organisation, noting different perspectives that may be held by those who participated, while also identifying opportunities for improvement. The survey findings are used to inform PeakCare's strategic directions, priorities and operational planning.

In 2019, a total of 100 surveys were completed. Consistent with the profile of PeakCare's membership, the survey purposefully targeted a mix of occupational groups from different sized organisations as well as registered Supporters. The majority of respondents (50%) stated that they held management positions, 17% said they held executive leadership roles, and 33% said they performed 'other roles'. 40% of the respondents stated that they held State-wide responsibilities with the remaining 60% stating that their responsibilities were specific to a region.

The survey questions were grouped into four focus areas: firstly, the level of priority PeakCare assigns to certain work activities; secondly, PeakCare's communication with our Members and others; thirdly, PeakCare's performance in respect of the five areas of our organisation's strategic intent (Knowledge Leadership, Thought Leadership, Advocacy, Value, and Organisational Capability), and lastly, our Members' thoughts about the future – things about PeakCare that could be improved and what the organisation should be concentrating on now to better achieve our vision and strategic intent.

KEY FINDINGS

The survey respondents were asked to provide an overall rating of PeakCare on a scale from 1 to 10, with 10 being *excellent*. The average score was 7.91. This compares with an overall average rating of 7.9 in 2015 and 8.65 in 2017.

Other key findings from the 100 responses in relation to Members' perceptions about PeakCare's strengths and opportunities for improvement relate to the following:

Strengths

- *High level of overall support for PeakCare*

- *The priority given to the preparation of submissions, the hosting of symposiums and workshops, participation in government committees and forums, and advocacy activities*

- *Communication with Members, particularly PeakCare's weekly e-News and special announcement emails*

- *The relevance of PeakCare's five areas of strategic intent as stated within the organisation's Strategic Plan, with particular strengths held by the organisation in relation to knowledge and thought leadership*

- *PeakCare's attributes of contemporary child protection knowledge and expertise, capacity for delivering policy analysis and advice to government, and participation in cross sector planning*

Opportunities for improvement

- *Increased regional engagement*

- *Improved advice and processes for feedback and discussions with Members and Supporters to better inform PeakCare's activities such as preparation of submissions and participation in various consultations, forums, working groups or similar*

- *Improved use of technology (including web and social media interaction) to better enable communication and inclusion across the State*

- *More face-to-face training and workshop opportunities covering a wide range of topics*

- *Consider opportunities for more communication from the Board to Members and Supporters*

- *More effective engagement with front line workers*

- *Consider the 'hot topics' raised which may benefit from increased focus by PeakCare*

Read further for a more detailed summary of the survey findings.

PEAKCARE'S PRIORITIES

What priority should be given to preparing submissions to Federal and State Parliamentary Committees, Government departments and other entities about new or proposed amendments to legislation, inquiries into various systems or changes in government policy directions?

Over 90% of respondents agreed that producing and lodging submissions is a high priority, an average rating of 4.62 on a scale of 1 to 5. Members' comments referred to:

- *It's important that the voice of services is heard when decisions are being made about changes to legislation and implementation of those changes. PeakCare does this well and I would hope that they continue to do so*
- *It is important that decisions made by Parliament are informed decisions – PeakCare can provide information from a range of people at all levels who may be impacted by legislation*
- *PeakCare is a key player in the sector and should be using influence on matters in the interests of children and families*
- *PeakCare's involvement in responding to legislative and policy reform and inquiries is critical to the sector*
- *PeakCare's role is to provide current, non-judgemental and evidence-based information on how proposed policies affect vulnerable individuals and families*
- *PeakCare provides an avenue for coordinating responses from the sector and ensuring a collective voice to have an impact*
- *The peak body is best placed to advocate politically*

What priority should be given to hosting or co-hosting conferences, symposiums and similar events, and initiating other learning and professional development opportunities?

90% of respondents agreed that hosting or co-hosting conferences, symposiums and similar events, and initiating other learning and professional development opportunities is a high priority, with an average rating of 4.47 on a scale of 1 to 5. Members' comments referred to:

- *It is a core function for PeakCare to identify emerging trends and help lead practice improvements and consistency in the sector*
- *PeakCare has always been concerned about innovation, best practice and continuous improvement. If we stand still in this sector, the issues*

would continue to escalate. The more knowledge we gain as a sector, the better we can become

- *Conferences and events are important for sharing ideas, networking and learning from each other*
- *I see this as a core function of PeakCare to help lead practice improvements and consistency in the sector; brings people together*
- *There is a role for PeakCare to play here, but could it be done in partnership with others?*
- *It is definitely a priority to a degree, but... if you are going to do them, they need to be better published... I am sure that there are others like me who would benefit from such professional development but are unaware it is being offered*
- *There are many training opportunities out there – should not be as high a priority for PeakCare*
- *I think that this sort of thing is best done by individual specialists, the conferences and forums and so on are all just the same thing repeated*
- *Whilst these opportunities are great, not everyone can afford to go to conferences and symposiums. Opportunities to participate in professional development are wonderful for all operational staff and options to attend (e.g. web-based) are great to reduce some of the barriers to attendance*
- *Need to reach more front-line staff*
- *Use technology so that more Members, especially regional Members, can participate, but not forgetting the value of face to face professional development*

Some respondents commented specifically about the *Hope and Healing* e-learning program produced for all Queensland residential care workers and their supervisors:

- *Hope and Healing was a great example of the need for a peak body to inform, consult and assist in such a big and new roll out*
- *Hope and Healing was a good foundation for residential care workers to build on*
- *I provided my suggestions around Hope and Healing before roll out only to see the issues I hoped to be avoided, arise. Never mind, the training was well received but I again encourage that our Department colleagues are also trained in the framework as it needs to be a shared and holistic approach*
- *E-learning is good but needs more initiative around face-to-face trainers*

Some respondents made use of the survey to enter recommendations about topics to be addressed in future conferences, symposiums or similar events:

- *Understanding child, youth and infant mental health*
- *Innovative practice and models of care; new evidence-based models of out-of-home care*
- *Trauma and intergenerational trauma*
- *Collaborative practice*
- *Preparing for 'outcomes frameworks', what exactly will be required, how do we as a sector agree on the measures...*
- *How we collectively support Aboriginal and Torres Strait Islander kids and work with our community controlled partners and implement recommendations of Family Matters – especially on the back of some of the outrageous comments included in feedback about the National Child Protection Conference*
- *Domestic and family violence, youth and mental health*
- *Carers and biological families working together*
- *Effects of fostering on a foster carer's own children*
- *Ongoing information or training re: the impact of drugs and alcohol (building on the Conference on Ice previously hosted by PeakCare)*
- *Hearing the voices of children*

What priority should be given to participating in Government initiated committees and forums?

Over 89% of respondents agreed that PeakCare should assign a high priority to participating in Government initiated committees and forums, an average rating of 4.54 on a scale of 1 to 5. Members' comments referred to:

- *PeakCare provides a strong voice to reflect what service providers and service users are saying*
- *This is a major opportunity to influence developments in the interests of children and families*
- *This is so very important that people get to be heard, this is our future generation and really are we looking at another stolen generation?*
- *It is extremely important for PeakCare to be an advocate and for the sector to have a representative voice to shape and improve future policies*
- *It's required to improve practice and bring about change, it also ensures accountability at a high level*
- *The more involvement we have from those with on the ground knowledge, the more we are able to alert government officials who are removed from the field*

- *PeakCare is able to advocate and be a voice for everyone involved in this sector*
- *It's important that the knowledge, facts and values of PeakCare are shared with Government in the hope of shaping, changing and improving future policies*
- *PeakCare should seek input from Members into discussions and recommendations*
- *Consideration needs to be given to if/ how government takes on the information provided by PeakCare in these committees and consultation workshops. Is PeakCare's attendance providing implicit support/ lending 'authority' to processes that do not serve the vulnerable populations of Queensland?*
- *Many of these government initiatives are just politics – need to be more considered in lending government your support*

What priority should be given to participating in non-government initiated committees, working parties and forums?

Over 75% of respondents agreed that PeakCare should assign a high priority to participating in non-government initiated committees and forums, an average rating of 4.22 on a scale of 1 to 5. Members' comments referred to:

- *The non-government sector needs to be part of a strong network and PeakCare is in a good position to coordinate this*
- *PeakCare should be a leader in the government and non-government space*
- *PeakCare is the link between the government and non-government sector*
- *These are important forums to bring collective views together and jointly resolve issues as well as the way PeakCare can gain the views of Members to represent in other forums*
- *I have found these forums useful with PeakCare's input*
- *It is important for PeakCare to get information from NGO senior leadership as well as staff 'on the ground'*
- *These forums appear to be populated by higher management from non-government organisations and missing the voice of frontline workers*
- *It is important but I feel our views as members are not accounted for*
- *Whilst I see this as an important role, I am uncertain of the processes and the effectiveness of the strategies*
- *It's all important, but I recognise you can't do it all*

What priority should be given to participating in advocacy campaigns?

Over 85% of respondents agreed that PeakCare should assign a high priority to participating in advocacy campaigns, an average rating of 4.46 on a scale of 1 to 5. Members' comments referred to:

- *PeakCare has the influence, reach and scope to promote and make these campaigns more newsworthy*
- *I strongly agree with PeakCare supporting advocacy campaigns for families to bring awareness and needed action*
- *It's a core role of the peak to have a presence on important matters*
- *A critical PeakCare function*
- *Because a lot of the time, service providers are fearful of speaking out on their own. If PeakCare can lead that, there's more chance that we'll step forward, particularly if the discussion is at odds with where govt/funding agencies want to go*
- *It's important that PeakCare works closely with others in promoting its agenda – demonstrates leadership and maximises impact*
- *It's a priority where the campaign is relevant*
- *Difficult to assess – the level of priority is dependent on the level of the issue*
- *Important, but less important than your participation in Government initiated forums*
- *Changing the direction of the system is slightly more important than supporting campaigns that are already up and running*
- *The outcomes of these campaigns need to be communicated more widely*

What priority should be given to roundtables and similar consultation exercises?

79% of respondents agreed that PeakCare should assign a high priority to conducting roundtables and similar consultation exercises with Members and Supporters, an average rating of 4.28 on a scale of 1 to 5. Members' comments referred to:

- *Hearing the voice of the sector in regional and remote areas is an important role of PeakCare*
- *Important to engage with members and hear directly what is happening on the ground*
- *Opportunities to hear the voice of regionally/remotely based, front line workers*
- *These processes can bring together first-hand experiences of all levels of workers*

- *Our staff have enjoyed involvement in these discussions and appreciate being informed and updated with current information about reforms*
- *My staff enjoyed being involved and having connection with similar agencies in localities across Queensland. Not everyone is near Brisbane*
- *We can all be a part of these meetings and perhaps use the consultation time to seek agency views and find a way to share so that there isn't an expectation that PeakCare can have a presence at every meeting*
- *Please visit central Queensland more often/ just remember CQ/ wonderful to have PeakCare hold roundtables, symposiums, seminars or working groups here in Toowoomba as well/ input from the regions is both necessary and critical*
- *Only hold roundtables when there is a particular topic that needs discussion not just as a matter of course*
- *I think rural areas are often forgotten about so it is very important to hear feedback from everyone*
- *I would suggest a survey of the roundtable participants to see the value that they gain from these events*
- *Allocating the time becomes an issue, so if there's a particular topic that needs discussion, absolutely engage in this way, but don't schedule roundtables because we haven't had one in a while*
- *Roundtables are great but are they the most effective forum time wise?*
- *Not sure what positive things come out of this*
- *What are the tangible things that have come out of these consultations?*

What priority should be given to delivering commentary in mainstream media?

72% of respondents agreed that PeakCare should assign a high priority to delivering commentary in mainstream media, an average rating of 4.10 on a scale of 1 to 5. Members' comments referred to:

- *Often service providers can't be the voice and we look to our peaks to take the lead*
- *You have greater leverage than many of us to go a bit harder when required in terms of holding Government to account – our Boards can take a very light touch approach due to concerns of funding fallout etc so I think this this as a really important aspect of your role*
- *Media influence is important in producing change and not all organisations are able to do this*
- *It is useful to offer an informed and non-judgemental commentary, to challenge stereotypes and offer positive/ constructive solutions*

- *It depends on the issue. Sometimes the public needs to be made aware of issues, however other times they should not*
- *PeakCare represents the impact of domestic and family violence appropriately within the media*
- *PeakCare provides very informed and balanced views (in my opinion)*
- *Commentary should be balanced, less reactive and more proactive*
- *Doesn't seem to be much of a strategic approach, from what I have seen PeakCare just gets caught up in the noise*
- *I have never heard or seen PeakCare's commentary*
- *Social media has the wider audience and so this is the best form of communication to alert others to important issues*

- *Other sources of funding to support evaluation and research*
- *Assisting with staff recruitment*
- *Upcoming changes to Blue Card services*
- *Kinship carers – their needs are different to generally approved carers; Child Safety needs to know they are family and you can't ask someone to be a Nana one day and a 'carer' the next and meanwhile lose their status as 'Nan'*
- *The Department's approach to funding and the significant administrative burden on NGOs; the sustainability of smaller organisations including the impact of the Equal Remuneration Order (ERO); how the sector can be supported to achieve ongoing development of service delivery expertise with reduced funding*
- *Aboriginal and Torres Strait Islander issues and collaboration with communities*
- *The Board is not representative of the sector and there is no feedback loop from the Board*
- *Nothing that I can think of/ Sorry, don't know*
- *Seems like you are busy enough/ I think you have enough to get on with!!*

What other activities should be assigned a high priority during 2019-20?

A wide range of responses was received about other high priority activities to consider. These included:

- *Strategies to influence NGO practice e.g. participation of children and young people, working with parents*

PEAKCARE'S COMMUNICATION WITH YOU AND OTHERS

How would you rate PeakCare's use of communication strategies?

Members were asked about how they would rate PeakCare's use of the weekly eNews, special announcement emails, social media, PeakCare website, videos, and face-to-face forums to communicate information.

The following table lists in rank order the percentage of respondents who rated each strategy as *excellent* or *good*. The remaining respondents rated each strategy as *average* or *poor* with others indicating that they were *not sure*.

Strategy	% rating <i>excellent</i> or <i>good</i>
Weekly eNews	79%
Special announcement emails	75%
Face-to-face forums	68%
Website	58%
Videos	52%
Social media	38%

While it is clear that eNews is the communication strategy that is rated most highly (as was the case in previous surveys), this year's survey indicated a significant increase in positive ratings for social media since the last survey was conducted, which may suggest an increased use of this medium.

In relation to each of the listed communication strategies, the following ratings were provided:

Weekly eNews

79% rated eNews as either *excellent* (37.37%) or *good* (42.42%), 8.08% rated it as *average*, 2.02% rated it as *poor*, and 10.10% stated that they were *not sure*.

Special announcement emails

75% rated these emails as either *excellent* (31.31%) or *good* (44.44%), 12.12% rated them as *average*, 2.02% rated them as *poor*, and 10.10% stated that they were *not sure*.

Face-to-face forums

68% rated these forums as either *excellent* (19.39%) or *good* (48.98%), 7.14% rated them as *average*, 1.02% rated them as *poor*, and 23.47% stated that they were *not sure*.

Website

58% rated the website as either *excellent* (19.19%) or *good* (39.39%), 18.18% rated it as *average*, 3.03% rated it as *poor*, and 20.20% stated that they were *not sure*.

Videos

52% rated PeakCare produced videos as either *excellent* (15.31%) or *good* (36.73%), 18.37% rated them as *average*, 4.08% rated them as *poor*, and 25.51% stated that they were *not sure*.

Social media

38% rated PeakCare's use of social media as either *excellent* (7.41%) or *good* (30.61%), 19.39% rated it as *average*, 6.12% rated it as *poor*, and 36.73% stated that they were *not sure*.

Comments referred to:

- *PeakCare keeps me up to date and informed with relevant information*
- *Information is always great!*
- *This is the one forum I gain relevant information in the domestic and family violence field as a frontline worker*

- *The weekly email news is excellent – it's reliably delivered and I feel like I am across what is happening/ I enjoy eNews and it is a go-to for me to remain current around important changes and themes. Please, please do not stop...*
- *I have not followed you on social media or the website. I am always pleased to get email updates as I feel you know what is going on and you tell me*
- *These strategies are leveraging platforms that staff utilise but they are overwhelmed. Newsletters etc are just another email*
- *In a busy work environment I find there are too many sent to be able to look at them*
- *I have received little communication from PeakCare*
- *I don't seem to receive much from PeakCare except this survey!*
- *Sometimes videos are too lengthy to watch*
- *I haven't got time for social media but I'm sure you are great!*
- *I am not on Facebook but am sure that this is professional*
- *Use of social media could be better*

PEAKCARE'S PERFORMANCE

How well is PeakCare performing in each area of the organisation's strategic intent?

PeakCare's Strategic Plan sets out five areas of strategic intent. The five areas of strategic intent are:

Knowledge leadership

To nurture and grow knowledge about the needs of Queensland children and young people, their families and communities, and the evidence-base for service responses that best meet their needs

Thought leadership

To conduct exemplary policy analysis to deepen our sphere of influence and shape informed leadership and dialogue about family support and child protection within communities and across government and non-government sectors at local, state and national levels

Advocacy

To be a strong independent voice informed by research, evaluation and evidence to influence and achieve better outcomes for children, young people, families and communities

Value

To listen and create value for members to meet their expectations and provide a sound return on their investment in supporting the organisation's pursuit of our vision

Organisational capability

To build internal capability and continually improve the quality of our services

Members were asked to rate how well PeakCare performs in achieving each of the areas of strategic intent on a scale of 1 to 5 where 1 indicated 'not very well' and 5 indicated 'very well'. The following table summarises the % of respondents who gave a 4 or 5 rating:

Area of strategic intent	% rating of 4 or 5
Knowledge leadership	85%
Thought leadership	80%
Advocacy	74%
Value	76%
Organisational capability	52%

In relation to each of the listed areas of strategic intent, the following ratings were provided:

Knowledge leadership

85% gave a rating of either 5 (30%) or 4 (55%), 7% gave a rating of 3, 2% gave a rating of 1, and 6% stated that they were *not sure*.

Thought leadership

80% gave a rating of either 5 (31%) or 4 (49%), 8% gave a rating of 3, 1% gave a rating of 2, 3% gave a rating of 1, and 8% stated that they were *not sure*.

Advocacy

74% gave a rating of either 5 (44%) or 4 (30%), 16% gave a rating of 3, 2% gave a rating of 2, 2% gave a rating of 1, and 6% stated that they were *not sure*.

Value

76% gave a rating of either 5 (27.55%) or 4 (47.96%), 13.27% gave a rating of 3, 2.04% gave a rating of 2, 3.06% gave a rating of 1, and 6.12% stated that they were *not sure*.

Organisational capability

58% gave a rating of either 5 (24%) or 4 (34%), 18% gave a rating of 3, 5% gave a rating of 2, 2% gave a rating of 1, and 17% stated that they were *not sure*.

Comments included:

- *PeakCare is able to deliver on strategies and implement them effectively*
- *PeakCare is accessible and willing to support other services*
- *I think you are great at what you do – don't know enough about your inner workings to know your organisational capability*
- *I have no knowledge if any of PeakCare's strategic plans have been or are being implemented – when I see improvements in the short staffing and high caseloads of Child Safety Officers, I'll believe that policy is being implemented*
- *Having a Board member in close proximity to my role, I know very little of their role on the Board, and there is no feedback or details being provided to a whole-of-state organisation*
- *I think PeakCare generally performs poorly*

How well does PeakCare demonstrate the following attributes?

The Strategic Plan identifies five attributes that contribute to PeakCare's credibility and reputation with Members.

Respondents were asked to rate each of these as *excellent, good, average* or *poor*.

The following table summarises the % of respondents who gave a rating of *excellent* or *good*:

Attribute	% rating <i>excellent</i> or <i>good</i>
Possession of child protection knowledge and expertise	84%
Policy analysis and advice provided to government	78%
Public education and commentary	68%
Participation in cross-sector planning forums	79%
Interaction with personnel	59%

In relation to each of the listed attributes, the following ratings were provided:

Possession of child protection knowledge and expertise

84% gave a rating of either *excellent* (40%) or *good* (44%), 8% gave a rating of *average*, 5% gave a rating of *poor*, and 3% stated that they were *not sure*.

Policy analysis and advice provided to government

78% gave a rating of either *excellent* (36%) or *good* (42%), 9% gave a rating of *average*, 4% gave a rating of *poor*, and 9% stated that they were *not sure*.

Public education and commentary about contemporary child protection issues

68% gave a rating of either *excellent* (28%) or *good* (40%), 19% gave a rating of *average*, 4% gave a rating of *poor*, and 9% stated that they were *not sure*.

Participation in cross-sector planning forums

79% gave a rating of either *excellent* (32%) or *good* (47%), 9% gave a rating of *average*, 4% gave a rating of *poor*, and 9% stated that they were *not sure*.

Interaction with personnel

59% gave a rating of either *excellent* (17%) or *good* (42%), 18% gave a rating of *average*, 4% gave a rating of *poor*, and 19% stated that they were *not sure*.

The significant proportion of *not sure* responses received in relation to each attribute and the posting of one comment only – *I think PeakCare could do better in these areas* - create some limitations in forming insights into the possible rationale for these ratings.

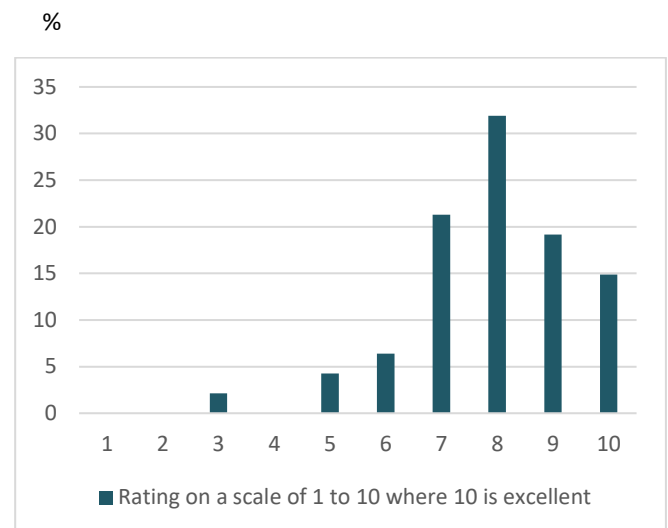
How would you rate PeakCare overall?

Members were asked to rate PeakCare overall on a scale of 1 to 10, with 10 being excellent.

94 of the 100 respondents entered a rating.

The average score was 7.91. This compares with an overall average rating of 7.9 in 2015 and 8.65 in 2017.

The findings are illustrated in the following graph:



THINKING ABOUT THE FUTURE...

What's the one thing about PeakCare you'd change?

Respondents had the opportunity to nominate the one thing about PeakCare that they would want changed. There was a wide variety of suggestions.

Some respondents focussed on research, policy, service delivery and/or training issues that they thought warranted increased attention:

- *Focus more specifically on the shortage of carers and the inappropriate placement of children and young people in non-family based care*
- *Work to bridge the gap within the timeframe for young people when being moved and better handling of that*
- *Develop and facilitate training and support to NGOs regarding legislation changes and reforms*
- *Bring more revolutionary research and speakers from countries doing it better*
- *Focus on evaluation and research*

Some respondents commented on PeakCare's use of social media and other communication strategies:

- *Email out to me everything I need to know relevant to my industry. I'm only receiving some updates via email, other updates I'm having to receive from upline*
- *Focus on the quality and type of video and on-line communication*
- *Provide more regular information*
- *Update social media and move towards innovation*

- *Make better use of technology to enable members across the State to connect in forums*

Several respondents commented on increasing the engagement of regions and/ or 'front-line' workers:

- *Better engagement of front-line workers within the sector*
- *More engagement with normal workers/ front-line workers*
- *Better engagement of ground staff and their perspectives as I believe PeakCare engages mostly managers, director, etc, but staff working in the field and seeing those vulnerable families daily may have more feedback to provide*
- *More engagement in regional Queensland (central Queensland)*
- *More opportunities for those in rural and remote areas. Cluster forums to make our travel worth our time*
- *Workshops in Logan*
- *Change from Brisbane-centric staffing model. Given child protection needs are state-based, having the capacity to have staff in other locations could aid engagement*

Some respondents commented on PeakCare's Board:

- *Have a Board that is proactive and balanced, informed and interested in disseminating the work that PeakCare is doing*
- *Have a Board membership that is representative of the sector, who are connected to current practice and trends*

Some commented on the need for increased funding/ resources:

- *Increase its funding/ capacity – focusing on research and evaluation*
- *Increase funding*

Some made comments of a more general nature:

- *Broader expertise and industry knowledge and influence is needed to focus on achieving outcomes for the sector rather than the individual views of PeakCare*
- *Be more open to views you don't already hold*
- *Clear action items from forums and consultation to be planned and explored*
- *Continue to make the public aware, advocate for those needing help and changes to occur, especially for those who can't help themselves*
- *It is more that I am so busy that I wish I had time to be more involved with PeakCare*
- *Already doing a great job. No changes have come to mind*
- *I feel you are already doing a great job and thank you for working so tirelessly in such a difficult (but rewarding) sector*
- *I think PeakCare does a great job with a small but dedicated team. Punches way above its weight*
- *I would encourage a shift in focus around practice and education for workshops rather than political commentary in order to provide workshop and conference participants tangible and useful information to return to their organisations with*
- *It needs a bit of new life in its leadership*
- *Nothing/ nothing comes to mind/ nothing that I can think of at this time/ Not much/ Unsure*

What do you think PeakCare should be concentrating on now to better achieve the organisation's strategic intent?

A wide range of responses was given about areas that PeakCare should be focussing on now in order to better achieve the organisation's strategic intent.

Some respondents recommended that a focus be placed on a number of policy and practice related matters informed by research:

- *More involvement with legislation and parliamentary concerns*
- *Influence of state and national policy and direction of child protection systems*
- *Research, analysis, policy advice, education back to members*

- *Greater focus on secondary support system and early intervention*
- *Out-of-home care outcomes measures*
- *What would payment on outcomes look like?*
- *Reform of out-of-home care service delivery and Queensland service system design – where are the gaps that we can see now that will only get bigger, and how can we collectively address that*
- *Maintain focus on supporting children and families to increase their safety*
- *The increasing child protection numbers*
- *The focus on Aboriginal and Torres Strait Islander children is critical for mainstream services and how positive change and understanding can be embedded in practice. PeakCare does this well already and needs to continue*
- *Biological families, kin care, family care – how you approach this, how we build it and how we treat those family members doing it for family – soon they may be all that we have left*
- *A less traumatic removal process for young people when being moved from house to house without their knowledge*
- *Reunification for children in care with their families*
- *Extension of care to at least 21 years of age*
- *Keep focussing on advocating for better decision-making from Government and NGOs, which impact young people's lives such as transitioning/ matching and extending the transition age*
- *Engagement with Royal Commissions and assisting to lead and support NGOs to implement any recommendations*

Several respondents made comments relevant to the education and up-skilling of the child protection work force:

- *Maybe a more intense focus on developing practice knowledge/ quality across the sector*
- *Front-line workers – up-skilling and education*
- *Staff skills shortage*
- *Lack of trained staff in front-line child protection*
- *Facilitating workshops, conferences, etc*

Some made comments about ways in which PeakCare could approach its work going into the future:

- *Create strategic alliances/ partnership possibilities with other sector leaders to create a stronger advocacy platform and research base*
- *Lobbying Government*
- *Develop capacity to be more independent from Government, enabling greater capacity to engage in critique and review*

- *Child protection as a community issue and how community programs with the support of Government can collaboratively address the issue*

Some made comments of a more general nature:

- *Carry on*
- *Keep on doing what you are doing now, adapt to change and keep moving forward*
- *Continue being involved in all that you are*

- *Continue and expand your current links pertaining to core business*
- *Being the voice of the sector. Being heard and communicating the message*
- *Better engagement with the public regarding issues, rather than just the work force base*
- *Not sure/unsure*

WHERE TO FROM HERE?

PeakCare will use the survey findings along with the outcomes of other consultation exercises and contemporary developments in child protection and related services to inform PeakCare's strategic directions, priorities and operational planning.

PeakCare welcomes feedback from our Members and Supporters at all times.

If you wish to provide further feedback about any of the matters addressed within this report, please email your comments to PeakCare's Executive Director, Lindsay Wegener (lwegener@peakcare.org.au) or you may direct your feedback to the PeakCare Board C/- Ms Janet Wight, Board President, PeakCare Queensland, PO Box 159 Paddington QLD 4064 (Email: Office@peakcare.org.au).