Department of Communities and Justice 

# Parenting program form to request locally designed program

**Purpose and Use of this form**

The TEI Program has developed a list of evidence-informed programs which is available in the TEI Program Specifications.

For providers in the Wellbeing and Safety program activity who are delivering parenting programs, it is recommended they will use the evidence and select from the list of evidence-informed programs, unless: the parenting programs on the list are not appropriate, or do not meet the needs of families accessing your TEI services; or you are an ACCO delivering parenting programs to Aboriginal clients or you are a non-ACCO, with Aboriginal staff delivering parenting programs to Aboriginal clients. ACCOs and non-ACCOs with Aboriginal staff working with Aboriginal communities are encouraged to design programs suitable for their local context.

After reviewing the evidence – informed program list, if a provider considers a locally designed program is more suitable in their local context, they can propose this option to their DCJ contract manager. If after discussion, the agreement is that the proposal for a locally designed program may be suitable, the service provider should complete this template and submit it to their DCJ contract manager who will then forward it to the TEI mailbox for consideration and approval. Your DCJ contract manager will advise you if your application has been successful.

Note that ACCO providers or non-ACCO providers with Aboriginal staff delivering parenting programs to Aboriginal clients **do not need** to complete this form.

| 1. Contact Details | |
| --- | --- |
| Name and contact details of person submitting form |  |
| Organisation Name and Address |  |
| DCJ District |  |
| District CPO Name and contact details |  |
| 1. Please provide name and brief overview of parenting program proposed: | |
|  | |
| 1. Location/s of where program will be delivered (please specify LGA) | |
|  | |
| 1. Key Target Group | |
|  | |
| 1. Have you considered the evidence-informed parenting programs list? | |
| Yes  No  (Note: if No, please review the list before submitting this form) | |
| 1. Please describe main reasons an evidence-informed program from the list was not selected as suitable: | |
|  | |
| 1. Is your proposed parenting program an adaptation of any of the evidence-informed parenting programs? | |
| Yes  No  If Yes, please indicate which parenting program and why the adaptation was needed: | |
| 1. Is your program self-developed or an existing parenting program? | |
| Self-developed  Existing model | |
| 1. Please provide further detail on your proposed parenting program (including key elements of the program, target group, duration, delivery format) and why it was chosen: | |
|  | |
| 1. Has the parenting program been evaluated? | |
| Yes (evaluation completed)  Yes (evaluation in progress)  No  If No, please indicate below whether you would be interested in having an evaluation of your program:  Yes  No | |
| 1. Please provide any supporting evidence to demonstrate your program’s effectiveness   Note: examples of evidence can include research evidence, evaluation, alignment with published best practice principles, client feedback, practitioner expertise, TEI program data or other documentation demonstrating effectiveness.  Please include links to evidence and/or attach relevant supporting evidence when submitting this form | |
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