

# DAUGHTERS OF CHARITY CHILD AND FAMILY SERVICE ANNUAL REPORT 2017



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### **CHAIRPERSON'S REPORT**

It is my great pleasure to present to you the 2017 Annual Report for the Daughters of Charity Child and Family Service (DoCCFS).

The past year has been one of continued growth and development within the organisation and the Annual Report is testament to the intensive work undertaken by the management and staff. Key developments across the Service included the full roll out of a CRM (Client Relationship Management System) and the establishment of the 'Dublin Safer Families' Service in Dublin North and North City. This is a three year pilot service working with children and families who experience Domestic, Sexual and Gender based violence.

2017 was a year of continued investment in services, buildings and infrastructure to ensure that both staff and service users are in a position to deliver and receive a high quality service, best suited to their needs. The Board of Directors would like to thank the Daughters of Charity for their continued investment in the Service.

At a Governance level, restructuring took place in DoCCFS in December 2017. The Management Committee ceased to operate and the membership of the Board of Directors was expanded to incorporate both lay and religious Directors. I would like to welcome Ms Carol Fawsitt who recently joined the Board and to thank her for her commitment to the work of the Child and Family Service.

There is no doubt that 2017 was a year of significant change at a policy and practice level within TUSLA and within the sector. The early anticipated roll out of commissioning was finalised in 2017 in preparation for 2018 and the DoCCFS have had significant input in this process as a key strategic partner to TUSLA. We are looking forward to continued opportunities to develop, grow and adapt services to respond to meeting the needs of children and families in a constantly changing world. The Directors are confident that we are well positioned for this change by building on the strong evidence of outcomes of our services, demonstrated in the report being carried out by the Trinity Research in Childhood Centre (TRiCC), Trinity College Dublin, due to be finalised in 2018.

Over the last number of years, the provision of services for children and families have become more complex and the legislation governing the conduct and responsibility for these services have become more onerous. Ever increasing standards of professional practice, and accountability are a continuing feature for service delivery. In order to maintain and ensure best practice throughout the Service, ongoing consideration is required relating to the professional staff engaged in these services, to include equality of opportunity, qualifications requirements, continuing education, standardised conditions of employment and career opportunities for all staff members throughout the public and not-for-profit sector.

I would like to formally thank the members of the Board of Directors and former Management Committee for their ongoing support and guidance to me and to the organisation. I would also like to thank the Director of Services, members of the Senior Management team, and all the staff and volunteers for their unfailing commitment and dedication during the year.

I would like to acknowledge with great appreciation the ongoing support that we continue to receive from our partners and colleagues within the different funding authorities without which, we could not carry out the vast majority of our work.

**John Furey** 

Chairperson



### **DIRECTOR OF SERVICES REPORT**

Our work in 2017 continued to highlight that those who use our Service are dealing with greater adversity and challenges within their communities and families, as evidenced by the wide range of complex needs being referred to our Services.

The Daughters of Charity Child and Family Service (DoCCFS) continued to provide services in 2017 that delivered strong measurable outcomes for children and families who are dealing with these complex issues and are most in need. A number of key developments in the Service greatly contributed to this. 2017 was an exciting year in terms of growth and development both within services and within the core infrastructure of the Daughters of Charity Child and Family Service on a number of different levels. We continued to implement energy saving measures across the organisation through the investment and support of the Daughters of Charity and can report a further reduction in energy consumption in 2017.

In 2017 the full roll out of a tailor made Client Relationship Management (CRM) system was completed to all Family Centres, Dublin Safer Families and Lisdeel Assessment Centre in Dublin North City. The implementation of this system has enabled the service to access a wide range of complex data, and to compile high level reports, which enables greater analysis of service outcomes provided to children and families.

Our work with Trinity Research in Childhood Centre (TRiCC), Trinity College Dublin, continued in 2017, with the conclusion of *Phase 1* of the work within the Family Centre Service and Early Childhood Development Service (ECDS) on the implementation of outcomes measures across centres. Provisional analysis of the outcome measures are already evidencing strong outcomes of our work with children and families. We look forward to confirmed independent evidence that the work that we do with those engaged with our services is bringing about positive change. The final evaluation report is due to be completed in early 2018. We are indebted to so many families who have taken part in this work with us and thank them for their input in helping us to develop services to meet their needs.

The complexity of needs being experienced by children and families was further evidenced as reported in previous years, by a year on year increase in the numbers of families experiencing Domestic, Sexual and Gender based Violence presenting to our Services. In line with our Strategy and the Mission and Vision of the Service in meeting the needs of families in a constantly changing world, we were delighted to establish a unique service in 2017. **'Dublin Safer Families Service'** will opeate as a three year pilot, working with children and families who have experienced Domestic, Sexual and Gender based Violence. Referrals come from both Social Work and Probation Services in the Dublin North and Dublin North City areas. The service has been greatly welcomed and utilised by TUSLA Social Work Department. It has also provided strong support to TUSLA in the area of specialist training and consultancy, in addition to service provision.

The five Early Childhood Development Service [ECDS] centres have also continued to develop and grow. All centres embarked on a robust training and implementation plan for the roll out of the evidence based *'Highscope'* curriculum in 2017/2018. Four of the five centres have implemented this curriculum, which has greatly enhanced how we engage with both children and parents within the centres, encouraging active participation and a strengths based approach. However, we continue to be concerned about the numbers of children engaged in ECDS who are unable to access appropriate supports, particularly relating to Speech and Language services. We are fortunate to have a Speech and Language specialist engaged in St. Louise's ECDS with **27** children availing of this intervention in 2017.

Our Assessment Centres experienced significant change in 2017 due to the development and restructuring of Tusla Social Work Departments to reflect the implementation of mandatory reporting in December 2017, and the full roll out of 'Signs of Safety' as a practice model across all Duty Social Work services in 2017. As a key strategic partner, we are working closely with our colleagues in TUSLA in implementing 'Signs of Safety' within the Assessment Centre teams and continue to provide a critical service to children and families. The worrying trend of the increase of families reporting domestic violence continues to be reflected in statistics with 59% of families reporting Domestic Violence in Assessments, indicating the importance of having a specialist service such as our 'Dublin Safer Families Service' as a referral source for TUSLA post assessment.

Our Family Centres continued to provide a highly regarded and professional service to over **1330** families in 2017. The Family Centre Service figures provide further evidence that families continue to struggle in today's society with over **31%** of referrals received for Parenting related problems. We continue to see an increase in the numbers of children presenting to services with Anxiety and this is reflected in the second highest reason for referral which relates to Mental Health issues.

An analysis of the notifications of cases to the Social Work Department using the Adverse Childhood Experiences (ACE) scale demonstrates starkly that despite growth within the economy post the recent economic recession, the lived experiences for certain children and families in Ireland continues to be fraught with challenges, difficulty and adversity and many continue to struggle. Our work with TRiCC will help us to identify the most appropriate services for these children and families moving forward, and we are indebted to the Daughters of Charity for funding this work.

As always, the wisdom and guidance of the Management Committee and the Board of Directors (in late December 2017) is instrumental to ensuring that the Service continues to fulfil its Mission and Vision and I would like to thank all members for their ongoing support both personally, and to the service.

I would like to thank the Senior Management team, management office, and the management, staff and volunteers of the Centres for the great work undertaken in 2017, reflected in this report.

Finally, I would like to thank all of our funders for their continued support and confidence in the organisation and for enabling us to continue to fulfil our mission and vision for families, in these challenging times. For the families and children that we serve, we are committed to continuing to provide the most effective services that we can, and we thank you for your commitment in your work with us in making things better for families.

Tracey	Monson	
Acting	<b>Director</b> o	f Services



# OUR MISSION VISION & VALUES

MEETING THE NEEDS OF FAMILIES IN A CONSTANTLY CHANGING WORLD

### VISINN

The Daughters of Charity Child and Family Service, inspired by the spirit of St. Vincent de Paul and St. Louise de Marillac, seeks to identify, reach, and empower children and families most in need, in a society that is constantly changing.

### MISSION

The Daughters of Charity Child and Family Service, recognising the essential dignity and potential of every person and the right of every child to live as full a life as possible within his or her own family, undertakes to deliver quality services to children at risk and families most in need.

### **VALUES**

The values which underpin all the activities of the Daughters of Charity Child and Family Service are:





## DAUGHTERS OF CHARITY CHILD AND FAMILY SERVICE ORGANISATIONAL STRUCTURE

#### Board of Diretors

Sr. Goretti Butler, DC
Sr. Justine O'Brien, DC
Sr. Sheila Ryan, DC
Sr Marian Harte, DC
Sr. Christine Quinn, DC
Sr. Claire McKiernan, DC
Ms Carol Fawsitt
Mr Micharel Cleary
Mr John Furey

#### Management Committee

Mr John Furey Chairperson Sr. Goretti Butler, DC Mr Micharel Cleary Sr. Justine O'Brien, DC Mr John Tuffy Mr Ciaran Roche Mr John Corcoran Ms Colette McLoughlin

Director of Services

Senior Managers

Staff
Volunteers/Students

The Daughters of Charity Child and Family Service is funded principally by TUSLA Dublin North East and Dublin Mid Leinster. The Service also operates with other funding partnerships including: Health Service Executive, Department of Social Protection, Pobal, Mosney Reception Centre, Reception & Integration Agency, Department of Children and Youth Affairs, Daughters of Charity, Arklow and District Lions Club, Wicklow County Council, Irish National Lottery and Atlantic Philanthropies.









### EARLY CHILDHOOD DEVELOPMENT SERVICE

**413** children received a service in 2017 in our Early Childhood Development Service [ECDS], 42% **(174)** transitioned successfully to National School.

The Daughters of Charity Child and Family Service [DoCCFS] operate five Early Childhood Development Centres, four in the Dublin region and one located in Mosney Accommodation Centre, working with children of families in the asylum seeking process.

The main focus of the ECDS is to provide children with a positive pre-school experience, so that they are school ready and are equipped with skills to support their transition to National School. Children attending our Centres have the opportunity to play, have fun, socialise and learn in a warm, welcoming and caring environment.

Name of Centre	Children who attended during 2017	Children who transitioned to National School in 2017
Goldenbridge ECDS	63	36
Tír na nÓg ECDS	82	27
St. Vincent's ECDS	81	28
St. Louise's ECDS	109	40
Mabuhay ECDS	78	43
Total	413	174

### TRAINING IN ECDS

#### **HIGHSCOPE**

In 2017 an intensive training and implementation plan was put in place for the delivery of the *HighScope* programme across all ECDS Centres. Four Centres were trained in the delivery of *HighScope* with a fifth Centre preparing to begin training in 2018.

In order to provide children and families with the best possible start in life, the DoCCFS are committed to keeping staff up to date with relevant, effective training to ensure best practice in our early years services. One of the main goals for the ECDS for 2017 was to train staff in the *HighScope* programme to enable Centres to deliver the *HighScope* curriculum. The Daughters of Charity funded this training for two workers in 2016 which allowed the service to roll out this training to all ECDS staff in 2017.

HighScope is a quality approach to Early Childhood Care and Education which has been developed through research and practice over a forty year period. It identifies and builds on the child's strengths, interests and abilities and strives to develop and provide children with a broad range of skills to include;- communication, problem solving, and interpersonal skills. The HighScope curriculum emphasises active participatory learning. Children's interests and choices are at the heart of the programme. The rooms in the Centres provide a learning space for young children that encourages exploration, creativity and active learning.

The worker plays a key role in instructional activities. The child's progress is tracked using key performance indicators. Individual goals are set and work is carried out to support each child in developing a wide range of skills and abilities to enable them to reach their full potential.

Parents also play an active part in their children's development and are encouraged to be involved at every stage of their child's growth. Parents are provided with information at Induction meetings and home visits and are updated on a regular basis on their child's progress. Parents are also encouraged to play an active part in the management of the Centre by attending Parent Advisory meetings.

### **FURTHER TRAINING**

The ECDS is responsive to the challenges that families are facing. Trends are tracked and training for staff is adapted to meet the needs of children. ECDS staff completed training in the following areas in 2017: Siolta, Child and Youth Participation training, Doccess Mission Mentoring Leadership Programme, First Aid, Manual Handling, Children First, Fire Safety, Behaviour Management, Child Protection training, Early Years Inspection CAPA training and Self-Care and Mindfulness.

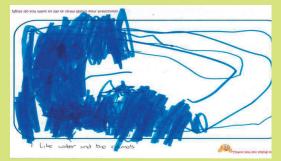
### CHILDRENS FEEDBACK



"I like playing in the block area".

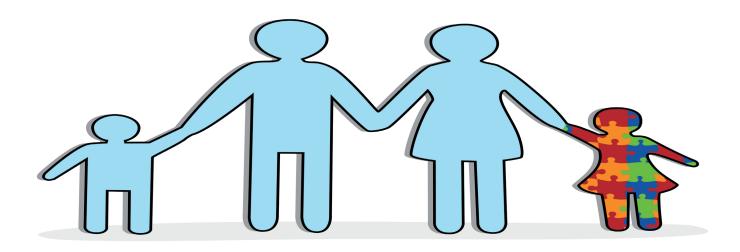


"I love the balance bikes".



"I like playing in the garden, doing dancing and jumping".





### **POSITIVE DEVELOPMENTS IN ECDS**

### SPEECH AND LANGUAGE THERAPY IN ST. LOUISE'S

In 2017 a total of 27 children received Speech Therapy in St. Louise's ECDS. Speech Therapy is an integral part of the service provided by St. Louise's and has been for many years. The Community Speech Therapist attends the Centre one morning per week, where Speech and Language Assessments are completed on children referred by ECDS workers. Children who require further intervention are provided with individual Speech Therapy sessions in the Centre. There is a requirement for parents to attend each session with their child. Parental involvement is vital for a better understanding of their child's needs and to learn how best to support and respond to their child in their speech and language development.

This type of service allows children to be seen in a familiar, comfortable environment. Speech Therapy becomes part of their day in school and is a welcomed event by the child. Providing a service in the Centre eliminates any stigma that may be attached to attending Speech Therapy sessions. This is a valuable service, as the wait time for a Speech and Language Assessment in the community is 6-8 months with a further 6-12 month wait to receive therapy.

### MABUHAY PRE-SCHOOL PARENT INFORMATION SESSIONS INITIATIVE

In response to support needs of the families attending Mabuhay and to address the challenges that parents face while living in direct provision in Mosney, Mabuhay ECDS devised parent information group sessions over a five week period in 2017. The sessions included the following:

- Healthy Eating, Dental Care, Meal Planning '5-a-day'
- Hygiene, Clothing, Self-Care, Outdoor Play
- Learning Through Play
- Managing Behaviour, Conflict Resolution, Setting Appropriate Boundaries, Child Protection and Welfare
- The Importance of Reading, Speech and Language, Turn Off the TV

Engagement and attendance at the sessions was strong and parents were encouraged to give feedback on the work within the Centre. An interpreter in Arabic was engaged at each session. Due to the success of the programme, Mabuhay continued to run these sessions throughout the year.

"Words cannot express how grateful myself and my children are for all your support, care and attention you have shown to our son. He has improved immensely over the past few months and we owe a lot of that to you for all the hard work you put in. You have shown both professionalism and friendship to myself also and I really appreciate it". [Parent ECDS]

# TRENDS IN EARLY CHILDHOOD DEVELOPMENT SERVICE

### SPEECH AND LANGUAGE

**48** children presented with speech and language difficulties in 2017. As in previous years, the long waiting lists for access to Speech and Language Assessments and for further Speech and Language Therapy continues to be a concern. Early intervention for this type of service is vital as the window of learning, communication skills and verbal reasoning for a child is very short. It is frustrating for our Service to see children's development compromised because of insufficient resources and a lack of consistency in service provision across Dublin City and county.

### CHILDREN WITH ADDITIONAL NEEDS

The ECDS has seen an increase across all Centres with **78** children presenting with additional needs. Long waiting lists for children to receive an Assessment of Need prevent families accessing vital additional supports required for these children as they transition to primary school. It is hoped that the introduction of a new initiative AIM (Access and Inclusion Model) will provide much needed support for children. This model of supports is designed to ensure that children with disabilities are able to access and participate fully in the Pre-school curriculum. This initiative is due to commence in September 2018.

### **HOMELESSNESS**

Homelessness continued to be an issue affecting seven children in the ECDS. Many of these children are living in homeless accommodation such as hotels, bed and breakfast accommodation and in family hubs.

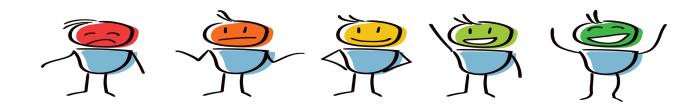
Many of these families are living in accommodation located some distance from schools, amenities and friends or family supports. Families may have to travel long distances to bring their child to school /Pre-School.

As well as living in homeless accommodation there was a number of children attending ECDS living in overcrowded accommodation often with grandparents, this is often the face of hidden homelessness.

Homelessness can have detrimental effects on a child's development and on the parents' ability to provide a stable family environment. It can be very stressful for children and family life due to a lack of space, poor facilities, with no place to cook, wash clothes or store belongings. There is also the uncertainty of being moved on. For many of these children the ECDS provides a safe, caring and secure environment for children to play and develop and provides some stability, control and predictability in their daily lives.

### **ENGLISH AS A SECOND LANGUAGE**

There was an increase in the number of children attending ECDS Centres with English as their second language. 141 34% children required additional support across the five ECDS Centres to help them to communicate and to make their needs known to staff and children. Some children commenced Pre-school with very little English. The Centres use innovative methods to advance the child's understanding. Communication books, brought home by the children each day are used to stay connected with parents and to encourage English to be spoken at home. The aim is to assist the child to reach a level of proficiency before they transition to National Schoool.



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### CHILD PROTECTION AND WELFARE

There was a slight decrease in the number of Child Protection reports to Social Work and in the number of social work related concerns being logged across the ECDS. This highlights the importance of Early Intervention by providing parents with support and guidance at an early stage in relation to parenting.

A considerable focus within ECDS is to support families to build positive connections and networks within their communities. The ECDS management and staff assist parents who are new to the area who may often feel socially isolated in the community. Advice, support and links to other parents are often provided by staff as well as signposting families to services and specialised supports in the area.

Home visits to families by ECDS workers provide a vital link between the ECDS Centres and the family home. This also helps to build relationships to support the child in reaching their full potential. The ECDS works in conjunction with the DoCCFS Family Centre Services to provide families with individual support to include Parenting courses, Play Therapy for children or individual work for parents. This provides a holistic approach to support for the child and their family in a safe, nurturing and welcoming environment.

### PARENTAL INVOLVEMENT

Partnership with parents is a core aspect of the work in the ECDS. Our work over many years indicates that a parent who is involved in their child's early education creates a positive atmosphere for the child whether at home or in school. This has a major influence on the child's achievements at all stages of life. The ECDS value the involvement and partnership of parents in the Centres. All Centre's have an open door policy, where parents are encouraged to drop in, contribute to and attend events, that are taking place in the Pre-school. In 2017 parents participated in and attended stay and play days, summer outings, information sessions and celebrations. Parents continued to be part of Parent Advisory Committees, providing an advisory role in the decision making process of the Centres.

### AUDITS AND INSPECTIONS

The ECDS strives to ensure that the DoCCFS are fully compliant under the Pre-school Regulations. Pre-school inspections were carried out in St. Vincent's and Goldenbridge Centres in 2017.

All Centres operate the ECCE Scheme which provides a free Pre-school year for children. In 2017 Pobal compliance visits took place in Goldenbridge and the Centre remains compliant.

Environmental Health Inspections took place during the year in St. Vincent's, St. Louise's and Tír na nÓg ECDS. Centre Reviews, Health and Safety Audits and File Audits were completed in all ECDS Centres in 2017.

"Thank you for everything, couldn't have asked for a better place for my child to learn, You've been so good to my child and others, always understanding about everything, you should be super proud of the pre-school you run, always welcoming, You have the best staff and the best attitude to the littlest people, always happy faces running in each morning, that's piece of mind for parents, knowing their children are safe and happy. Keep doing what you're doing". [Parent ECDS]

### PARENTS FEEDBACK ABOUT ECDS

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"YOU REALLY MAKE THE CHILDREN FEEL SPECIAL AND VALUED. JACK LOVES SCHOOL SO MUCH"

44

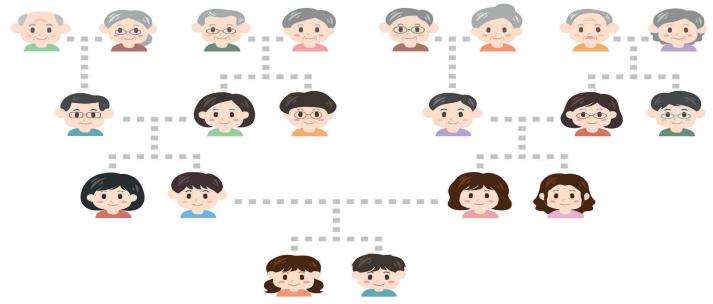
"I COULD NOT FAULT ANYTHING, YOU ALL GO ABOVE AND BEYOND FOR THE CHILDREN"

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"THE DIFFERENCE IN MY DAUGHTER SINCE SHE CAME HERE IS GREAT. SHE'S NOT SHY ANYMORE AND NOT AFRAID TO SPEAK UP".







### **FAMILY CENTRE SERVICE**

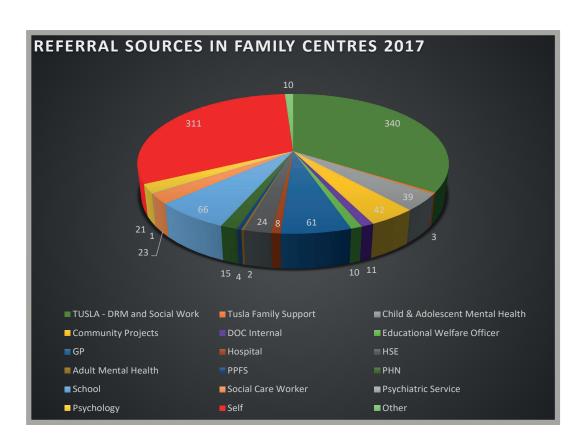
2017 was a year of continued growth and development within the Family Centre Service in eight locations across Dublin and Wicklow. The implementation of an electronic CRM [Client Relationship Management] system was successfully completed and implemented across the Family Centres.

1330 families were worked with across the Centres in 2017. 5023 sessions were carried out with individuals.

Family Centre Referrals Received and Cases Worked With in 2017

Family Centre Name	Referrals 2017	Cases Carried Forward from 2016	Total
Aistear Beo/Connaught Street FC	130	48	178
Turas Springboard FC	193	81	274
Lisdeel FC	74	31	105
Arklow Springboard FC	85	26	111
Balbriggan FC	177	74	251
Jobstown	206	28	234
Cherry Orchard FC	126	51	177
Total	991	339	1330

### **FAMILY CENTRE STATS**



### SOURCE OF REFERRALS

**991** referrals were received in the Family Centre Service in 2017. The primary referral source continues to be from Tusla DRM and Social Work Departments **340.** A high number of families **311** self referred in 2017. Other referrals were received from schools, GP's and community projects.

### REASONS FOR REFERRAL IN CASES WORKED WITH IN 2017

The reasons for referral continue to follow a similar trend as in previous years. The highest frequency of referrals represents Parenting related problems 31 %. This covers a range of areas: parenting, behavioural difficulties and family support.

Mental Health related issues continues to represent the second highest reasons for referral at 26 %. This category encompasses emotional wellbeing, mental health and trauma.

The third highest category of referrals **9**% relates to Child Abuse and abuse related issues, violence related problems and relationship based problems.

"I am more aware of my emotions and I can deal with my anxiety better" [Child attending Family Centre].



### **Primary Problems Referred in Family Centres in 2017**

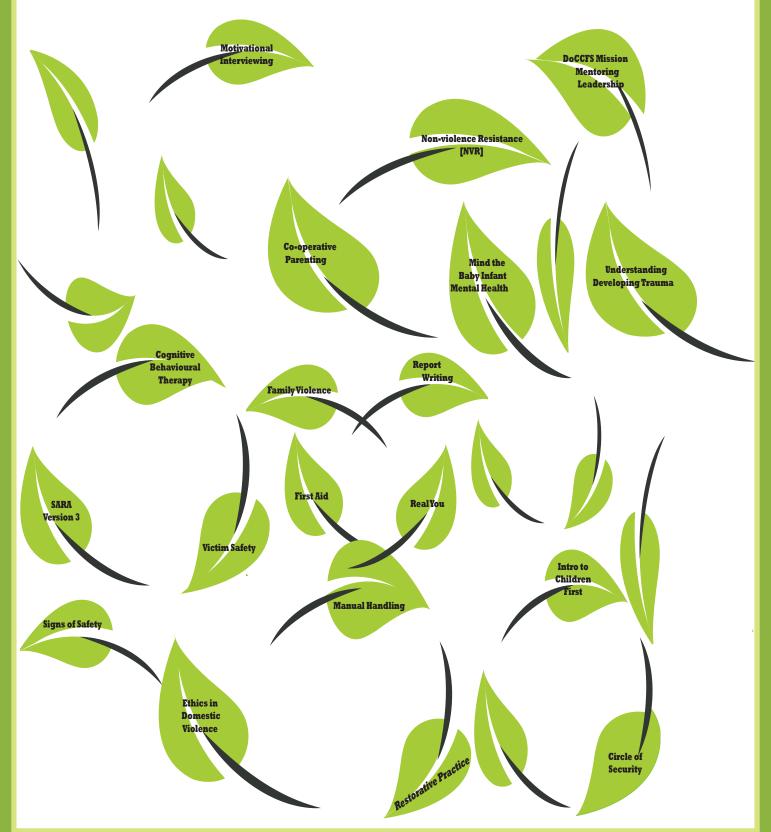
PRIMARY PROBLEMS REFERRED IN 2017	Family Centres	Sub Total
Parenting Related		
Parenting	175	
Behavioural Difficulties	123	
Family Support	16	
Family Member Incarcerated	1	315
Mental Health Related		
Emotional Wellbeing	207	
Mental Health	32	
Trauma	18	257
Child Abuse & Abuse Related		
Emotional	19	
Neglect	6	
Physical	16	
Sexual	14	
Child Welfare	40	95
Relationship Related		
Parental Separation	61	
Relationship Difficulties	24	
Couple Separation	8	93
Violence Related		
Domestic Violence	41	
Child to Parent Violence	19	
Anger Management	33	93
Bereavement Related		
Bereavement	39	
Suicide Bereavement	8	
Murder Bereavement	1	48
Children in Care		44
Trauma		18
Substance Abuse		14
School Related		11
Socialisation and Play		7
Bullying		5
Meitheal		5
Total		1005

### **GROUP WORK IN FAMILY CENTRES**

The Family Centres continue to utilise evidence based and evidence informed group work programmes to enhance the work with families. In 2017 programmes carried out with parents included Co-operative Parenting and the Incredible Years programme.

### STAFF TRAINING

The Docces is committed to ensuring that staff receive ongoing training to develop their professional skills and to provide effective services to families. Family Centre workers attended training in a variety of areas to include Domestic, Sexual and Gender based Violence in line with current trends. Other training by staff during 2017 is set out below.



### **INTERVENTIONS BY FAMILY CENTRES**

Each family is unique. Teams across the Family Centre Service provide a range of interventions to ensure that each family receives the most appropriate and effective service possible. The following provides an insight into the interventions that families received by our Family Workers during 2017.

### **FAMILY CENTRE INTERVENTIONS WITH FAMILIES**



### **TRENDS IN FAMILY CENTRES 2017**

Year on year referrals to Family Centres have become more complex with families experiencing a range of needs within their families and within communities. In 2017, the Family Centre Service continued to work in partnership with families to help them to build resilience, develop strong attachments and to enhance their relationships. Family Centres have been very responsive and innovative in developing approaches to help support families in dealing with the complexity of needs that they are experiencing. Some of the issues are detailed below.

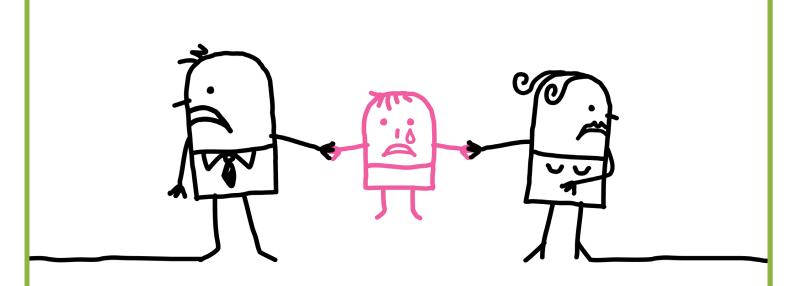
The Family Centre Service have noticed a large increase in children presenting with Anxiety issues. In order to address this, a number of Family Workers trained in [CBT] Cognitive Behaviour Therapy techniques to assist children and young people to learn life changing skills to be able to deal with their anxiety.

There has also been an increase in children and young people presenting with Mental Health issues including suicide ideation, self-harm, low self-esteem and depression.

Following trends in previous years, there is a lack of supports for children and young people on the autistic disorder spectrum and for families who seek the support of specialist services. Following a diagnosis parents face long waiting times for their child to receive support.

The Family Centres saw a number of families where homelessness and associated problems were a significant complicating factor.

In 2017 there continued to be a number of cases where Parental Separation was the reason for referral and Centres ran a Co-operative Parenting programme to support both parents in dealing with the impact of separation on the family. Work was undertaken during the year to develop a psycho educational group for children impacted by their parents separation and it is hoped to pilot this programme in 2018.



"Attending gave me new skills and insights on worries and problems" [Young person attending].



### **DUBLIN SAFER FAMILIES SERVICE**

The DoCCFS was delighted to be in position to establish a new and innovative service in 2017, Dublin Safer Families Service (DSFS), which began taking referrals in June 2017.

Dublin Safer Families Service works with families experiencing Domestic, Sexual and Gender based Violence. The requirement to set up a specific service arose due to the year on year increase in the numbers of families presenting to services with current or historical Domestic, Sexual and Gender based Violence as an issue. Dublin Safer Families was established in March 2017 as a three year pilot project, providing services to families in the Dublin North and Dublin North City areas. Referrals are received from Social Work services and Probation services only.

A unique aspect of the Dublin Safer Families Service is to provide a whole family approach. The Centre works with victims, children and perpetrators using a Systemic Model. The aim of the work is to increase family safety, to prevent and to stop violence in families. The protection and welfare of the child(ren) is central to the work.

The Centre is committed to ensuring that the work is reflective of international evidence based and evidence informed practice through ongoing training and research. The Centre is also leading in contributing to evidence through its work with the Trinity Research in Childhood Centre (TRiCC), Trinity College Dublin through the development of tools for evaluation.

### **TRAINING**

In 2017 intensive training took place with all staff and management working in DSFS and Senior Management based on international and best practices in relation to working with families who have experienced Domestic, Sexual and Gender based Violence.

In-house and external training was carried out with the team. External training was provided by a wide range of international experts, practitioners and academics within the field.

Training included the development of a safety methodology for safe practice with couples/families; Safety Plans and No-Violence Contracts, Safety Planning with Children, Contraindicators for Relationship Therapy, the Impact of Domestic Violence on Child and Adult Development, Working Systemically with Trauma Responses, Attachment Significance, Working with Patterns of Comforting, Developing in Room Consultations, Domestic Abuse Awareness training, Motivational Interviewing, Case Notes and Report Writing, Victim Safety, Colleague Support, Ethics and our Moral Position on the Use of Violence.

The staff in Dublin Safer Families Service were also trained in the Spousal Assault Risk Assessment Version 3 (SARA V3). SARA-V3 provides evidenced-based guidelines for integrating information regarding a plethora of risk factors associated with Gender, Sexual and Domestic Violence. It provides a framework for decision-making that is both systematic and practical that enables the development of robust safety plans.

### DISSEMINATING THE LEARNING

In September 2017, Dublin Safer Families presented at the second European Conference on Domestic Violence in Porto, Portugal.

A core part of the work of Dublin Safer Families is to provide training to colleagues within the Social Work Department, Probation Services and within the wider sector.

### TRENDS / DEVELOPMENTS IN DSFS

The work in the Centre focuses specifically on Domestic, Sexual and Gender based Violence at the higher level of risk, supporting families who have come to the attention of statutory services within Social Work and Probation Services. This is evidenced by 20.7% of referrals that contain 'Threat of Death', and 41% of referrals are Hardiker level 4. During its first months of operation, there has been an excellent rate of attendance by families (96.5%) which indicates that families are committed to addressing these issues in the best interest of their children.

FAMILIES ATTENDING DSFS JUNE TO DECEMBER 2017			
Number of families attending 30			
Number of families closed	3		
Number of families waiting 1			

REFERRAL SOURCES RECEIVED IN 2017 WERE FROM THE SOCIAL WORK DEPARTMENT.

BREAKDOWN OF REFERRALS IN DSFS DUBLIN NORTH IN 2017				
Duty Social Work	13			
Child Protection & Welfare	6			
Total	19			

BREAKDOWN OF REFERRALS IN DSFS DUBLIN NORTH CITY IN 2017				
Duty Social Work				
Child Protection & Welfare	2			
Total	12			

DR. ARLENE VETERE SHARES HER EXPERIENCE WORKING WITH THE STAFF AND THE WORK OF DSFS.........

"It is my pleasure to support the work of this committed group of professional practitioners. Dublin Safer Families is a family violence intervention service designed to help family members stop the violence and to repair and heal relationships. The team has developed a systemic safety methodology designed to support safe relationship therapy practice, and to know when relationship therapy is unsafe. Their approach to safety planning is highly visible within the family-professional network. This has contributed to the recognition of their leading edge practice as they further develop their training and consultation roles within their community".

Dr. Arlene Vetere

Clinical Psychologist/Independent Consultant

### **ASSESSMENT CENTRES**

2017 was a time of transformation and development in the Assessment Centres. This arose as part of Tusla's Child Protection and Welfare Strategy, and the implementation of the revised 'Signs of Safety' model launched in 2017. A new screening model was introduced within Social Work in the latter part of the year. As a result, the Assessment Centres experienced a reduction in the number of Assessments allocated to the Centres.

Assessments are carried out using the DRM (Differential Response Model), which has been in operation in Dublin North since 2010 and 2012 in Dublin North City. The DRM Model provides Initial Assessments on cases referred by TUSLA Social Work Department which are identified as low or medium risk. On completion of the Assessment, recommendations can be made for the case to be closed with no further action, referred back to TUSLA for a further Assessment, or referred to other support services including DoCCFS Family Centre Response teams for therapeutic support.

As in previous years, Welfare continued to remain the highest category for Assessments during 2017, with increases in the category of Physical Abuse. While there appears to be an increase in the category of low risk cases being allocated, there was a deliberate decision to allocate only low cases to one of the Assessment Centres earlier in the year in order to clear a backlog of cases awaiting Assessments.

On completion of Initial Assessments, 243 cases were returned completed to TUSLA Social Work Department. 46% required no further action. 16% were returned to TUSLA for further action, indicating ongoing child protection concerns. 29% of cases were referred onwards for further work to a Response team of the DoCCFS Family Centre Service and 9% were referred on to other services for ongoing support.

**59**% of cases that had completed an Initial Assessment had confirmed Domestic Violence as an issue which represents an increase in this trend year on year.

Centre	No of Cases carried forward from 2016	No of Cases Received from RED Team during 2017		Closed Cases as at 31 <sup>st</sup> Dec 2017	Active Cases as at 31st Dec 2017
St. Benedict's	24	166	190	139	51
Lisdeel Assessment	35	177	212	179	33
TOTALS	59	343	402	318	84

REFERRAL CATEGORY	WELFARE	NEGLECT	EMOTIONAL	PHYSICAL
TOTALS	46%	8%	26%	20%

RISK BREAKDOWN	Low	Medium
TOTALS	72%	28%

### A LEARNING ORGANISATION — BUILDING THE EVIDENCE

The DoCCFS continues to build on the implementation of a model that describes and evaluates a system for monitoring the effectiveness of its work across the Early Childhood Development Service, Family Centre Service and within the Dublin Safer Familes Service.

The DoCCFS began this work initially in 2012 through its work with the School of Psychology, University College Dublin, and currently with researchers from Trinity Research in Childhood Centre (TRiCC) at Trinity College Dublin.

The work carried out during the period of 2015 – 2017 with TRiCC with the Family Centre Service and ECDS was advanced further by developing a suite of standardised evaluation tools, and by training staff in the administration of these tools, monitoring, implementation, and providing interim feedback and direction. The primary aim of the work focused on the development of a robust outcome framework via the implementation of an organisational culture sensitive to outcomes that provided measures of effectiveness as benchmarked against the Better Outcomes, Brighter Futures policy goals. The secondary aim of the work was to Implement appropriate monitoring tools, which involved reviewing the existing tools and further refining these in ways which might capture the complexity of the work carried out across the Service.

In 2017 the DoCCFS expanded this process to Dublin Safer Families Service, which is being evaluated by TRiCC. They have worked closely with the Centre to develop appropriate outcome monitoring tools.

In 2017, this evaluation culture continued to be embedded in the work within the Family Centres, ECDS and within Dublin Safer Families. The final report of Phase 1 of work within the Family Centres and ECDS is being compiled and interim reports from TRiCC highlight that the work that is being carried out across these centres is resulting in positive outcomes for families as evidenced by Professor Trevor Spratt as follows:

"Researchers from Trinity Research in Childhood Centre have continued to work closely with DoCCFS management and staff over the past year in developing measures to best capture the impact of DoCCFS services on their users. This has featured a continuous development loop involving measure selection, staff training in use, implementation by staff, analysis and further refinement of measures.

We are pleased that we are now in a position to state unequivocally that DoCCFS services to children and families are making positive impacts on the lives of children and their parents who use the services.

The new report on this work, to be released in July 2018, records in detail the achievements to date and sets out a series of challenges in relation to how our findings may stimulate the direction of services in future years, particularly in relation to the development of bespoke interventions to meet the diversity of needs of families".

Trevor Spratt
Professor in Childhood Research
Director of Trinity Research in Childhood Centre



## **CASE STUDIES**

### **WORKING WITH ANXIETY CASE STUDY**

#### Reason for Referral

John aged 10 years was referred to our Family Centre by his GP. John attended his family doctor suffering with anxiety. He had problems sleeping and experienced nightmares. He had become socially withdrawn. He had stopped attending his sporting activities that he had excelled at and had previously enjoyed. Mum and Dad described their son prior to this event as being an extremely confident young boy who loved his family, enjoyed the company of his younger brother and lived for his martial arts classes.

John's friend's Father died by suicide and the boy was trying to support his friend in her grief. The friend disclosed in detail the circumstances of her Father's death.

#### Work Undertaken

Following an Assessment and the identification of a detailed plan of work, the Family Worker facilitated one to one therapeutic sessions with John to support him to address his feelings of sadness, anger, fear, shock, and anxiety and to identify how these feelings were impacting him. The aim of the work was to provide John with a safe space to process his feelings and to learn coping techniques to manage his anxiety.

John attended a programme facilitated by the Family Worker together with a senior Clinical Child and Adolescent Psychologist whose work focuses on children's anxieties and worries. The programme provided John with copings skills such as mindfulness, meditation and breathing techniques. John also attended a children's pottery programme in the Family Centre designed to encourage children to socialise with other children who are also experiencing worries and anxiety.

#### Outcomes

A review of the work indicated that the goals of the work had been met successfully. John's Mum reported that John is back to being a happy carefree boy. John no longer suffers with sleepless nights and is able to talk about his worries and anxieties. John says he is happy in himself and feels that he can now manage his anxiety if the feelings return again.

### SUPPORT FOR PARENTS/CARERS

### CHILD TO PARENT VIOLENCE CASE STUDY

### Reason for Referral

Martin aged 8 was referred to the Family Centre to get help with his angry outbursts and for Mum to get support to manage him. Martin is prone to tantrums. His Mum reported that his behaviour had escalated to self-harming by punching and biting himself, and clawing at this face. He had become both verbally and physically abusive towards his Mum.

A referral was made by the GP to CAMHS (Child & Adolescent Mental Health Services), who assessed his behaviour and described it as being attention seeking. They recommended a referral to DoCCFS for parenting work.

#### Work Undertaken

Mum and Dad engaged in a NVR (Non Violence Response) programme in the Family Centre. The model is a therapeutic approach, designed to support parents and carers to re-establish parental authority. This enables them to manage aggression and violent behaviour of their child(ren). Sessions with both parents took place weekly.

The NVR programme was used to develop Mum's parental authority with her son and to work towards enhancing their

relationship. Work initially focused on helping Mum to become more aware of how her responses were affecting Martin's behaviour. Communication within the home was explored which helped Mum promote self-control. Self-care was identified as an important issue for Mum. Both parents were supported to identify and prioritise behaviours they wished to work on with their son and strategies to 'resist' the identified problematic behaviour were identified. Both parents were encouraged to develop a support network of family and friends who could provide support to them in times of need and activities were identified to support Mum in rebuilding her relationship and authority with her son.

#### **Outcomes**

Both parents reported that Martin's relationship with his Mum had improved. Mum said that she felt clearer and calmer with Martin and felt that her persistence and follow through was better. She was better able to deal with issues when they arose. Mum felt that her support network had helped her greatly. Mum reported having a greater sense of her own authority with Martin on completion of the work. Both parents said they were communicating better and that this was positively impacting on Martin. Mum was practising some calming strategies that she had learned with Martin and that incidents and outbursts from Martin were becoming less frequent.

### CASE STUDY ON BEREAVEMENT WORK

#### Reason for Referral

Heidi (14) and her sister (16) were placed into relative foster care when Heidi was 18 months old following concerns raised in regards to neglect whilst in her mother's care. Heidi had sporadic access with her mother over the years until her mother's death when Heidi was 7 years old. Heidi and her sister have been in placement with her Grandmother Paula since leaving her mother.

Heidi's behaviour at home was problematic and aggressive and had been a source of concern and anxiety for her Grandmother Paula. Heidi was reported to push boundaries at home, however in school her behaviour was reported to be good.

Heidi was referred by her Fostering Social Worker to get help to improve Heidi's relationship with Paula and to engage in grief work to support her in order to deal with her mother's death. Heidi also needed support to process her life experiences to date, space to identify her feelings and to learn ways to manage them. The Family Worker met with the Foster Mother/ Grandmother Paula. Paula identified that she needed support in managing Heidi's aggressive outbursts, it was agreed to begin with this and review.

#### Work Undertaken

The Family Worker used the *TCI Stress Model* to help Paula understand the anger cycle and how this may apply to Heidi. The Family Worker worked with Paula to understand Heidi's difficult behaviour and to identify triggers to this behaviour.

It was discussed how important it was to help Heidi communicate her frustrations and to help her manage her feelings through active listening and problem solving. Using the resources and activities from the *Parents Plus* programme, the Family Worker supported Paula to understand these elements and begin to implement them.

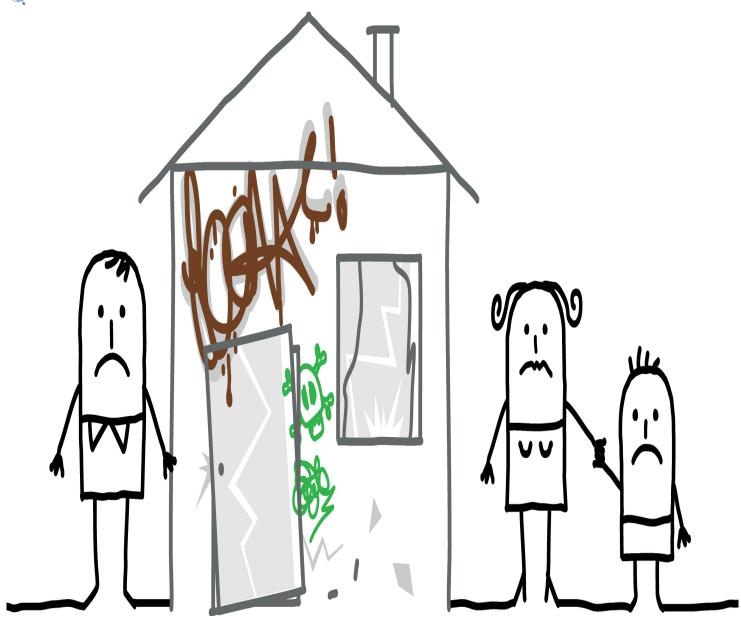
An improvement in Heidi's day to day behaviour was noted at a review meeting. Her Grandmother was more aware of the need to give Heidi more autonomy when she became frustrated, in order to allow her to process her feelings and to calm down before approaching her.

Work with Heidi focused on addressing her anger management issues. Heidi established ways to manage her feelings better. During these sessions the Family Worker supported Heidi to identify her anger process, triggers and symptoms. Heidi was able to acknowledge that she found balanceing her needs and the needs of others difficult. At review Heidi and Paula both acknowledged an improvement in Heidi's behavour. She was better at managing conflict and expressing her feelings. Heidi said that Paula listened to her more and their relationship had improved.

#### **Outcomes**

Both Paula and Heidi acknowledged that the work helped them both to develop a more positive relationship with one another. The work helped Heidi to find positive ways of coping with her feelings and as a result she was better able to manage them more effectively.





"We had the thinking space we needed as a couple and the oppurtunity to reassess our role as parents which was blurred upon initial engagement. (Family Worker) provided a calm reassuring space to voice our individual concerns. We found no aspect of the service that needs improvement, perhaps further funding to ensure the good work continues. Thanks".

[Parent attending Family Centre]

# ADVERSE CHILDHOOD EXPERIENCES (ACE)

The complexity of needs that the children and families attending the Family Centres and ECDS continues to be evidenced by the number of Child Welfare and Child Protection Concerns that were notified to Tusla in 2017.

The Child Protection Manager undertook an analysis of all Child Protection figures across the Service using the Adverse Childhood Experiences [ACE] model as a framework for the study.

International studies have established the significance of Adverse Childhood Experiences [ACE] on adults. The ACE Study was one of the largest scientific research studies of its kind, undertaken with over 17,000 participants (Felitti et al., 1998). The focus of the study was to analyse the relationship between childhood trauma and the risk of physical and mental illness in adulthood. Over the course of a decade, the results demonstrated a strong relationship between the level of traumatic stress in childhood and poor physical, mental and behavioral outcomes later in life.

The DoCCFS interviewed a number of mothers and child(ren) using the Adverse Childhood Experiences questionnaire.

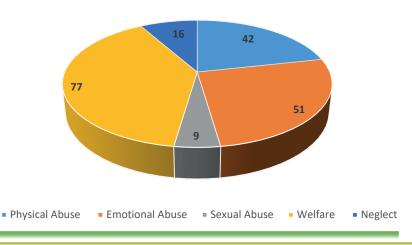
Adverse Childhood Experiences includes exposure to physical, sexual and emotional abuse, physical and emotional neglect, and household stressors. Household stressors include witnessing a mother/step mother being abused or having a parent in prison. Traumatic events are linked to lifelong negative adult physical and mental health outcomes.

A large number of mother and child(ren) referrals to the Service scored *high* on the Adverse Childhood Experience questionnaire. Research suggests that those with *high* ACE scores are more likely to have children who will also experience adverse childhood experiences. This was evident in the majority of the Child Protection notifications (SRF's) sent from the DoCCFS to the Social Work Department in 2017. In relation to 165 mothers interviewed, the average ACE score was 6 or more. While adversity can have lasting implications on these children throughout their lives, some protective factors can help children to cope with adversity. These factors in children's lives influence how they cope with and manage adversity. Protective factors include *the environment* i.e. home, school, club or other settings, the *people* in their lives i.e. parents, family members, teachers and other professionals), the *experiences* they have i.e. their educational and social development and the *connections* in their lives i.e. how these factors interact. By being aware of these four sets of factors, our staff can identify and recognise the presence of adversity to support children in developing resilience, facilitate appropriate interventions and make connections with other relevant practitioners and services. This information together with ongoing research currently being undertaken with families, in collaboration with Trinity College, will further inform the continued development of Programmes across the Service.

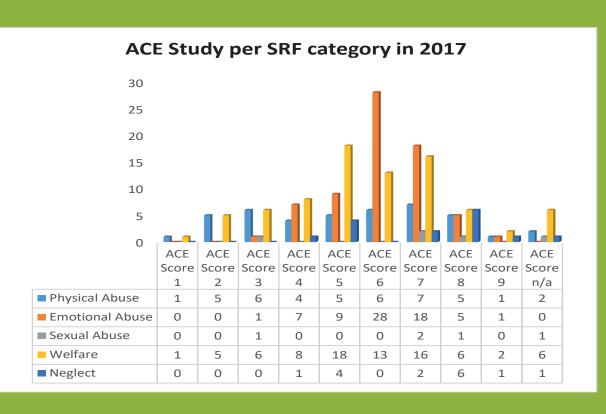
The high ACE scores clearly evidence that families attending our Service have multiple complex needs and therefore require a number of targeted interventions in the area of parenting and for children and young people support around their experiences of living with parental conflict, addiction and in recent years the issue of homelessness.

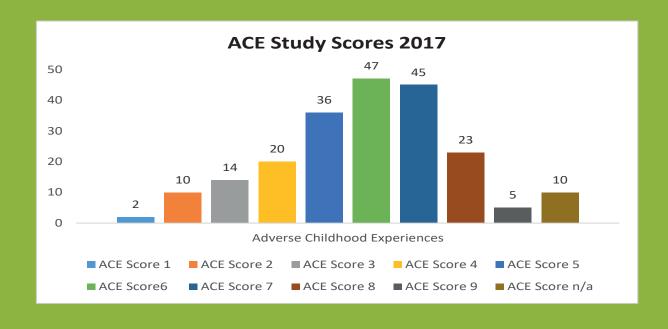
NB: The figures shown include SRF's submitted to Social Work per family. This does not include the number of SRF's submitted for each child within the family. There were **1014** SRF's submitted to Tusla from all Services of the DoCCFS.

### 195 SRF's submitted per family in 2017









## PARENTS FEEDBACK ABOUT FAMILY CENTRE SERVICE





"IT IS A GREAT SERVICE FOR PARENTS STRUGGLING WITH CHILDREN. IT GIVES PARENTS HOPE AND IDEAS TO DEAL WITH PROBLEMS"



# COMPLAINTS, COMPLIMENTS & COMMENTS

The Doccfs reports to HSE Consumer Affairs on a quarterly basis on all comments, compliments and complaints received. The following is a summary of the complaints for the year 2017 in accordance with the Child and Family Agency Act 2013.

1

### **DUBLIN NORTH EAST & MEATH**

One formal complaint was received in May 2017 in Dublin North. The complaint was categorised under communication and information, it was successfully dealt with within a 30 day period.



### **DUBLIN MID LEINSTER**

There were no complaints received during 2017.

330

COMMENTS & COMPLIMENTS WERE RECEIVED IN DUBLIN NORTH EAST & MFATH



COMMENTS & COMPLIMENTS WERE RECEIVED IN DUBLIN MID LEINSTER

"It has made a huge difference to my daughter. (Family Worker) has worked wonders. My daughter has felt completely at home in the warm and inviting atmosphere that you have created". "Very relaxed and friendly atmosphere, a lot of willingness to help and find strategies to resolve issues. Great respect and understanding shown to families".

"I found talking to the Family Worker very helpful. I was holding a lot inside and she helped me let it all out. I'd like to thank her for her help, she was a great help. I wouldn't change anything about the service everything they do is a great help".

## **ANNUAL ENERGY REPORT**

In 2017 the Daughters of Charity Child and Family Service (DoCCFS) reduced its energy consumption by 13.8% from 2016 figures. The DoCCFS plan to continue to reduce its energy consumption through a range of measures including:

- Use of energy efficient appliances & computers
- Replacement of inefficient heating systems
- Staff energy awareness & training



### **ANNUAL ENERGY REPORT 2017**



### Plans for 2018

Continue to improve energy performance & reduce consumtion by:

- Energy efficient repairs including windows and doors
- Staff training with help of SEAI
- Energy Awareness training & workshops



- Continue with heating system upgrades
- Incorporate renewable energy technology



## **FINANCIAL SUMMARY 2017**

### **Daughters of Charity Child and Family Service Limited**

(A company limited by guarantee, not having a share capital)

### INCOME AND EXPENDITURE ACCOUNT

**Year Ended 31 December 2017** 

200. 200. 0. 200. 0. 200.	2017	2016
	€	
	€	€
Income		
Tusla - Child and Family Agency	5,757,760	5,687,792
Other income	1,724,622	1,010,524
Total income	7,482,382	6,698,316
Expenditure		
Remuneration	5,773,571	5,347,624
Infrastructural & Maintenance Costs	530,271	722,919
Service Provision Costs	152,111	145,618
Information Technology & Communication and Administration Costs	329,096	248,801
Insurance, Legal & Professional and Accountancy	114,721	7,256
Recruitment & Development Costs	63,205	25,502
Depreciation / Amortisation	1,601	1,599
Total expenditure	6,964,576	6,499,319
Surplus/(Deficit) for the year	517,806	198,997

### Daughters of Charity Child and Family Service Limited (A company limited by guarantee, not having a share capital)

### **BALANCE SHEET**

**Year Ended 31 December 2017** 

	Notes	2017 €	2016 €
Tangible fixed assets	1		1,601
Current Assets			
Debtors	2	310,108	63,413
Bank		2,907,493	3,057,075
		3,217,601	3,120,488
Creditors: amounts falling due within one year	3	(1,822,303)	(2,244,597)
Net current assets		1,395,298	875,891
Net assets		1,395,298	877,492
C. W.L. I Down			
Capital and Reserves		1 20# 206	088.400
Income and expenditure account	4	1,395,298	877,492



### Daughters of Charity Child and Family Service Limited (A company limited by guarantee, not having a share capital) Notes

### 1 Tangible fixed assets

This reflects the written down value of a motor vehicle owned by the company.

### 2 Debtors and prepayments

2016	2017	
$\epsilon$	€	
		Amounts falling due within one year:
63,413	310,108	Debtors
63,413	310,108	
		Creditors
2016	2017	
$\epsilon$	€	
		Amounts falling due within one year:
110,474	150,431	Trade creditors
382,948	339,280	Other creditors and accruals
184,483	194,888	PAYE/PRSI
2,144	2,244	Superannuation - Tusla
66,160	40,480	Pension levy deduction - Tusla
1,498,388	1,094,980	Deferred income and restricted funds
2,244,597	1,822,303	

### 4 Reserves

	2017	2016
	€	€
Opening balance 1 January	877,492	678,494
Surplus/(Deficit) for the year	517,806	198,997
At end of year	1,395,298	877,492

Daughters of Charity Child and Family Service Limited (A company limited by guarantee, not having a share capital)
Notes
Related party transactions
During 2017 contributions from the Sacred Heart Home Child and Family Service to the Daughters of Charity Child and Family Service amounted to €674,522 (2016: €262,456).
No salaries were paid to the Directors. Salaries paid to employees and reimbursed by the Daughters of Charity Education and Training Service (formerly Sacred Heart Home Trust) for the year ended 31 December 2017 were €Nil (2016: €49,965). This revenue was netted against wages and salaries.
All amounts were paid subsequent to year end (2016: same).



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