





Toolkit for the Development of a Children's Services Committee

2nd edition





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ACRONYMS USED

CAAB Children Acts Advisory Board

CAWT Co-operation and Working Together

CDB City/County Development Board

CES Centre for Effective Services

CSC Children's Services Committee

CYPP Children and Young People's Plan

DCYA Department of Children and Youth Affairs

HSE Health Service Executive

IPPN Irish Primary Principals Network

LHO Local Health Office (of the HSE)

NAPD National Association of Principals and Deputy Principals

NCSIG National Children's Strategy Implementation Group

NEPS National Educational Psychological Assessment

NEWB National Educational Welfare Board

OMCYA Office of the Minister for Children and Youth Affairs

(now the Department of Children and Youth Affairs)

VEC Vocational Education Committee

1. CONTEXT AND BACKGROUND OF THE WORKING TOGETHER FOR CHILDREN INITIATIVE

Development of the revised CSC Toolkit

The Department of Children and Youth Affairs (DCYA) (formerly the Office of the Minister for Children and Youth Affairs), the National Children's Strategy Implementation Group (NCSIG) and the Children's Services Committees (CSCs) have been leading an initiative to develop and implement a planning model for national and local interagency working to improve outcomes for children. This is collectively known as the *Working Together for Children* initiative. The purpose of this initiative is to secure better developmental outcomes for children through more effective integration of policies and services. The NCSIG was set up to drive the implementation of the National Children's Strategy. The DCYA and the NCSIG decided to set up Children's Services Committees on a phased basis. Four committees were established initially in 2007, 6 in 2009 and a further 6 in 2011 are now in the setting-up stage of their development.

When the first Children's Services Committees were established in 2007, they were given a broad outline of the purpose of their work. The DCYA wanted to ensure that the initiative was designed and implemented from the ground up and that local needs were being addressed. The result of this approach was that the Phase I CSCs were given considerable flexibility to develop their own structure and modus operandi.

When the DCYA was preparing to establish a second phase of CSCs, the feedback received from the Phase I CSCs suggested that further assistance and direction would be useful. In response, a *Toolkit for the Development of a Committee* (2009) was developed, which set out a 6-stage framework to assist CSCs in the setting-up process. Since the publication of that toolkit, there has been much progress in the development of the *Working Together for Children* initiative, for example, in the areas of governance, communications and preparing a Children and Young People's Plan. Thus, this 2nd edition of the CSC Toolkit has been updated to reflect these developments. It will assist not only those in the early stages of setting up a CSC, but also those who are considering setting up a CSC. Further information on the full suite of resources available to CSCs is provided in Chapter 2.

In the future, the Toolkit will be revised and updated as required to take account of new policy decisions.

Background to the Working Together for Children initiative

Policy context

The Working Together for Children initiative has been developed and influenced by a number of major Government policy documents, each described below.

National Children's Strategy - Our Children, Their Lives

The National Children's Strategy (2000) sets out the vision of an Ireland 'where children are respected as young citizens with a valued contribution to make and a voice of their own; where all children are cherished and supported by family and the wider society; where they enjoy a fulfilling childhood and realise their potential'.

The strategy seeks to establish a 'whole child' perspective at the centre of all relevant policy development and service delivery. An inclusive view of childhood is adopted to assist with the identification of children's needs and approaches best equipped to meet these needs through the empowerment of families and communities in general.

The strategy sets out three national goals that reflect the context of children's lives today and the 'whole child' perspective. These goals are:

- Children will have a voice in matters which affect them and their views will be given due weight in accordance with their age and maturity.
- 2. Children's lives will be better understood; their lives will benefit from evaluation, research and information on their needs, rights and the effectiveness of services.
- 3. Children will receive quality supports and services to promote all aspects of their development.

A new Children and Young People's Policy Framework is currently being developed by the DCYA. It will provide an opportunity to further strengthen and embed the mandate of the DCYA itself, the National Children's Strategy Implementation Group, CSCs and interagency working.

The Agenda for Children's Services: A Policy Handbook

The Agenda for Children's Services: A Policy Handbook, published in 2007 by the Office of the Minister for Children, sets out the strategic direction and key goals of public policy in relation to children's health and social services in Ireland. It is a framework that applies the principles of the National Children's Strategy to the implementation of policies through service delivery. At the core of *The Agenda* is the promotion of what we want for our children – good outcomes.

As a way of ensuring a common language of outcomes within children's services, *The Agenda* draws together the various types of outcomes found in contemporary children's policy and presents them as a single list of 7 National Service Outcomes for children in Ireland. These envision that all children should be:

- healthy, both physically and mentally;
- supported in active learning;
- safe from accidental and intentional harm;
- economically secure;
- secure in the immediate and wider physical environment;
- part of positive networks of family, friends, neighbours and the community;
- included and participating in society.

Towards 2016

Towards 2016, the Government's 10-year Social Partnership Agreement, published in 2006, provides an overarching framework to address key challenges that individuals face at each stage of the lifecycle. It includes a specific focus on the needs of children and young adults, and on the implementation of integrated service delivery and interventions at local level. Towards 2016 makes a number of specific commitments in relation to Children's Services Committees, including: 'At a local level a multi-agency Children's Committee will be established within each of the City/County Development Boards. These Committees will be chaired by the HSE who are best placed to drive this initiative to achieve coordinated and integrated services.'

Programme for Government 2011

The 2011 Programme for Government makes an explicit commitment to implementing the recommendations of the report by the Commission to Inquire into Child Abuse (known as the Ryan Report), published in 2009. The Government's response to the Ryan Report was contained in its *Implementation Plan* (OMCYA, 2009).

One of the recommendations of the Ryan Report is that managers and staff of the various agencies working with vulnerable children and families need to cooperate more effectively to ensure children's needs are met. The report notes that while many areas have excellent cooperative working relations, there is no operational mandate on agencies to cooperate in their planning or delivery of services. It also states that reducing risk is not just about responding to problems; it is also about avoiding the circumstances that create risk in the first place. The development of effective local Children's Services Committees (CSCs) is cited as an example of an innovation that could address these issues.

The Ryan Report states that interagency, multidisciplinary work is vital to the promotion of good child protection practice and to the provision of good and safe service delivery to service users. The purpose of CSCs is described as ensuring 'that agencies work together strategically to achieve intended outcomes for children and families and value for money. They have been set up specifically to enhance interagency communication and working in partnership to meet the needs of vulnerable children and families'.

National Strategy for Research and Data on Children's Lives 2011-2016

In the recent National Strategy for Research and Data on Children's Lives 2011-2016 (DCYA, 2011), 2 of the 7 National Service Outcomes for children in Ireland were amalgamated, to produce 5 Outcome areas for children, since it was found to be the best fit for that strategy. Specifically, Outcomes 3 and 5 now say that children will be 'safe from accidental and intentional harm, and secure in the immediate and wider physical environment', while Outcomes 6 and 7 now say that children should be 'part of positive networks of family, friends, neighbours and

the community, and included and participating in society. It has been decided to follow the approach taken in the *National Strategy for Research and Data on Children's Lives* in this CSC Toolkit and so the 5 Outcome areas referred to throughout the document are that children will be:

- healthy, both physically and mentally;
- supported in active learning;
- safe from accidental and intentional harm, and secure in the immediate and wider physical environment;
- economically secure;
- part of positive networks of family, friends, neighbours and the community, and included and participating in society.

Principles underpinning the Working Together for Children initiative

The six principles that underpin the National Children's Strategy also underpin the *Working Together for Children* initiative and its governance arrangements. These are:

- → Child-centred: The best interests of the child shall be a primary consideration and the children's wishes and feelings should be given due regard.
- **Family-oriented:** The family generally affords the best environment for raising children and external intervention should be to support and empower families within the community.
- **Equitable:** All children should have equality of opportunity in relation to access, participation in and derive benefit from the services delivered and have the necessary levels of quality support to achieve this. A key priority in promoting a more equitable society for children is to target investment at those most at risk.
- Inclusive: The diversity of children's experiences, cultures and lifestyles must be recognised and given expression.
- Action-orientated: Service delivery needs to be clearly focused on achieving specified results to agreed standards in a targeted and cost-effective manner.
- Integrated: Measures should be taken in partnership, within and between relevant players, be it the State, the voluntary/community sectors and families; services for children should be delivered in a coordinated, coherent and effective manner through integrated needs analysis, policy planning and service delivery.

These principles already guide much of the work of public bodies working in children's policy development and service delivery. The following three principles relating to good governance also underpin the *Working Together for Children* initiative:

- Accountability: All organisations are accountable, that is, answerable for decisions relating to their policy and practice.
- → **Transparency:** There are clear roles and responsibilities and clear procedures for making decisions and exercising power.
- → Efficiency: All Government departments/agencies have a responsibility to ensure the best use of resources to secure better developmental outcomes for children, young people and their families, and will demonstrate a commitment to evidence-based strategies for improvement.

Overview of structures in the *Working Together for Children* initiative

The following section outlines in brief the roles of the various structures involved in the *Working Together for Children* initiative. For more detailed information, please refer to the *Governance Framework for the Working Together for Children initiative* (OMCYA, 2011a), which is available on the DCYA website (see www.dcya.gov.ie/documents/publications/Governance_Framework_2011.pdf).

The reporting relationships within the Working Together for Children initiative are outlined in Figure 1.

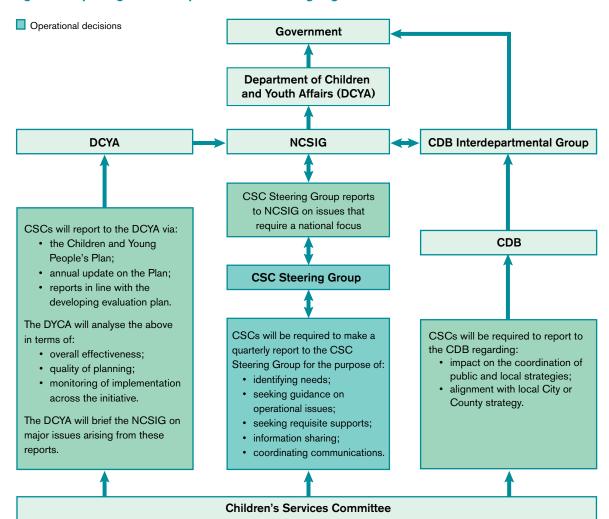


Figure 1: Reporting relationships within the Working Together for Children initiative

Department of Children and Youth Affairs

The Department of Children and Youth Affairs (DCYA) was established on 2nd June 2011 following a Government decision to consolidate a range of functions that were previously the responsibilities of the Ministers for Health, for Education and Skills, for Justice and Law Reform, and for Community, Equality and Gaeltacht Affairs. The DCYA now brings together a number of key areas of policy and provision for children and young people, including the Office of the Minister for Children and Youth Affairs (OMCYA), and responsibility for the National Educational Welfare Board (NEWB), the Family Support Agency (FSA) and the detention schools operated by the Irish Youth Justice Service (IYJS). Two important organisations are also included in the overall structure: the Adoption Authority of Ireland and Office of the Ombudsman for Children.

The decision by Government to establish the DCYA indicates a clear commitment to prioritise policy and service delivery across Government in order to improve the lives of children and young people. In doing so, it builds on the architecture already put in place in this area through the OMCYA and the IYJS, and augments it with a range of related and complementary functions. For this reason, the DCYA has set out in its Mission Statement a high-level approach designed to provide an underpinning rationale for action in the future, focused on the well-being of children and young people in Ireland.

DCYA Mission Statement

To lead the effort to improve the outcomes for children and young people in Ireland.

DCYA Mandate

The responsibilities of the DCYA encompass a wide range of policy and service activity, both direct and indirect, for children and young people in Ireland. The DCYA has a complex mandate, comprised of a number of separate, but interrelated strands:

- the direct provision of a range of universal and targeted services;
- ensuring high-quality arrangements are in place for focused interventions dealing with child welfare and protection, family support, adoption, school attendance and reducing youth crime;
- the harmonisation of policy and provision across Government with a wide range of stakeholders to improve outcomes for children, young people and families.

The National Children's Strategy Implementation Group

The National Children's Strategy Implementation Group (NCSIG) is responsible for overseeing the development and implementation of the National Children's Strategy and the achievement of the national outcomes for children. The NCSIG is also responsible for developing CSCs as a national initiative and for providing guidance to them on significant strategic or policy issues arising across CSCs, including identifying major policy or political issues that need to be addressed. NCSIG members are drawn from a number of Government departments and statutory agencies. Each member has specific responsibilities and mandate in relation to their role in their 'parent' organisation.

Children's Services Committees: Purpose and role

Children's Services Committees (CSCs) are a structure for bringing together a diverse group of agencies in local county areas to engage in joint planning of services for children (see *Figure 2*). All major organisations and agencies working locally on behalf of children and young people will be represented on the CSCs. These committees are responsible for improving the lives of children and families at local and community level through integrated planning, working and service delivery. They also ensure that professionals and agencies work together to ensure that children and their families receive improved and accessible services. The overall purpose of the CSCs is to secure better developmental outcomes for children. CSCs do this by:

- coordinating the implementation of national and regional policies and strategies that relate to children, young people and families in the area covered by the CSC;
- planning and coordinating services for children in the area covered by the CSC in order to improve outcomes for children:
- eliminating fragmentation and duplication of services by ensuring more effective collaboration between children, young people and family services within the area;
- influencing the allocation of resources across the area covered by the CSC with a view to enabling the effective use of resources at local level;
- strengthening the decision-making capacity at local level.

CSC Steering Group

The CSC Steering Group is in the process of being established. It is part of the governance structure that includes the NCSIG at national level and is designed to support the effective operation and practical implementation of the Children's Services Committees at local level.

The membership of the CSC Steering Group includes the chairs of all CSCs, 2-3 Local Authority Managers (who are members of CSCs) and representatives of CSC Coordinators (who may be selected by the CSC Coordinators' network).

City/County Development Boards

Children's Services Committees are accountable to their City/County Development Board (CDB) at local level. CDBs were established in 2000 as a Government response to the challenge of better integration of public and local service delivery. They have statutory underpinning by virtue of Section 129 of the Local Government Act 2001. The main function of the CDBs is to bring about the more coordinated delivery of public and local development services at local level via implementation of an agreed strategy for the economic, social and cultural development of the city/county and the community.

CSC Functions Develop and oversee Bring together statutory the implementation and voluntary organisations providing services of a plan designed to improve outcomes for children in to children the area **CSC** Mandate Coordinate implementation of national and Strengthen Target resources and oversee service regional policies Conduct capacity at local level delivery on initiatives and strategies needs analyses **CSC** Purpose that require Secure better developmental outcomes for children through collaboration more effective integration of existing services and allocation of resources services for children Support national initiatives that involve Map services children and young Eliminate fragmentation currently people in decisionand duplication of services making on the development and delivery by ensuring more effective collaboration between services available of children's services Create effective systems of coordinated services. Identify gaps and priorities supports and opportunities to improve outcomes for children

Figure 2: Functions, mandate and purpose of a Children's Services Committee (CSC)

Source: Adapted from Montgomery Collaboration Council (2006) and developed by CES

2. STAGE 1: SETTING UP A CSC

Interagency working

Interagency working can be described as more than one agency working together in a planned and formal way, rather than simply through informal networking (although the latter may support and develop the former). This can be at the strategic or the operational level. It could involve planning and working in parallel, but it does not involve the combining of systems, processes and teams.

Internationally, there is a widely held belief that effective interagency collaboration shows much promise in terms of providing more coordinated, integrated services for children. Effective interagency working is considered a vitally important part of improving outcomes for children and families since it creates the 'permitting circumstances' for better functioning of front-line services and front-line staff. Children's Services Committees (CSCs) are a good example of interagency working.

Effective practice in interagency working

The DCYA has asked the Centre for Effective Services (CES) to assist with and advise on the strategic development of the CSCs. As part of this work, CES has identified a set of principles relating to interagency working as being important for the operation of CSCs. These are based on CES's knowledge of the *Working Together for Children* initiative gained from prior work and evidence from the international literature, including:

- The evidence that informed the development of *The What Works ProCESs: Evidence-informed improvement for child and family services* (CES, 2011).
- → Effective Community Development Programmes: A review of the international evidence base (CES, 2010c), which identified key principles underpinning effective programmes in relation to the 4 overarching areas of structure and governance of programmes; programme design and service content; implementation and delivery of programmes; and monitoring and evaluation.
- → A review of international evidence on interagency working, to inform the development of Children's Services Committees (Statham, 2011).

The research evidence indicates that these principles are likely to underpin effective practice in programme and service delivery. These principles have been applied to the CSCs. During the setting-up stage, CSC members may find it useful to consider and discuss these principles and how they will be incorporated into the functioning of the CSC.

CSCs are more likely to be effective if they:

- > are focused on improving outcomes for children in their area;
- understand the social and policy context in which they are operating;
- > seek to address multiple dimensions of need for children and young people;
- > involve children, young people and families in planning, design and delivery of services;
- have timely and accurate data available and accessible to them for needs analysis and planning purposes;
- are grounded in evidence-informed and evidence-based research;
- have a coherent plan articulating the link between desired objectives, indicators, activities and outcomes;
- demonstrate that collaboration at local level is a high priority for all partners;
- have well-trained and well-supported members;
- have a shared understanding of the purpose and function of the initiative among members;
- have strong leadership to enable the initiative to deliver on its purpose and functions;
- > have appropriate structures in place to deliver on the purpose and functions of the initiative;
- have the systems and infrastructure to deliver on the purpose and functions of the initiative;
- have monitoring systems in place that satisfy reporting requirements;
- have monitoring systems in place that ensure quality is maintained;
- put in place review and evaluation processes;
- have processes in place for communication and dialogue with internal and external stakeholders;
- demonstrate a commitment to disseminating learning from the initiative to services that could benefit from their experiences.

Pre-implementation planning stage

A time-limited Pre-implementation Planning stage needs to take place in advance of calling the first formal meeting of a CSC. The newly forming committee needs to reflect upon and agree their approach to the key constructs and concepts that are driving the rationale for forming the CSC. In the longer run, this should ease the path to the CSC becoming functional and will strengthen collective buy-in. This stage is important so that all parties share a common terminology and a common understanding of the key concepts.

A Pre-implementation Management Group should be established and the membership of this group should include:

- → HSE Area Manager for Integrated Services, with responsibility for the City/County in question;
- Area Manager for Children and Family Services, with responsibility for the City/County in question;
- HSE Child Care Manager;
- City/County Manager;
- Principal Medical Officer;
- Information Officers (HSE and City/County Council);
- An Garda Síochána;
- other local 'champions' in the statutory and voluntary sectors.

The original advice was that the HSE Local Health Manager was to chair the Management Group. With the setting up of the new Child and Family Support Agency (CFSA), the Area Manager for Children and Family Services should sit on the group, as should the HSE Area Manager for Integrated Services. A decision needs to be made by the group on who is the most appropriate person to chair the group – the HSE Area Manager or the Area Manager for Children and Family Services. He or she should act as the lead person in driving the process and getting commitment from all relevant stakeholders.

The tasks of the Pre-implementation Management Group include:

- familiarising the group with national strategic and policy frameworks relating to children and the stages of set-up of CSCs described in the Toolkit;
- discussing and debating conceptual issues and agreeing definitions of key terms (could involve a facilitated discussion or seminar), such as:
 - interagency collaboration/planning (Why is it a good idea? What does it involve? What does it look like 'on the ground'?)
 - evidence-based practice and needs-led planning and practice;
 - outcomes-focused approaches.
- developing a brief overview of children and families in the city/county.

Inviting agencies to become members

Each CSC should invite senior managers from all of the major statutory and key non-statutory (voluntary and community) providers of services to children and families to become members of the CSC in order that the CSC can address issues in relation to the national outcomes. Members need to be of sufficient seniority to represent their agency and to exercise decision-making powers.

Relationship building

The purpose of a CSC is to improve developmental outcomes for children in its area. This is achieved by assessing local needs and identifying priority areas on which to concentrate. Good relationships with other agencies and the ability to work together are central to creating an effective CSC. It may therefore be helpful for each CSC to use its initial meetings to build these relationships and learn about each other's roles and responsibilities.

Each CSC member will have different responsibilities in their parent organisation and will bring their own skills, experience and knowledge to the table. It is important that the CSC can work in a spirit of cooperation, where the commitment and contribution of each member is recognised and valued.

Terms of Reference for the CSC

Terms of Reference are typically used to describe the purpose and structure of any committee; they establish a road map for the intended duration of a project or committee. Each CSC should develop its own Terms of Reference to provide a documented basis for the making of future decisions and to confirm or develop a common understanding of the scope among stakeholders. The Terms of Reference should be drafted from the DCYA's document *Governance Framework for the Working Together for Children initiative* (see www.dcya.gov.ie/documents/publications/Governance_Framework_2011.pdf).

Suite of resources and documents developed for CSCs

A number of resources have been developed by the DCYA and CES, with contributions from the HSE, to assist the Children's Services Committees (see Appendix 1). A brief description of each resource follows, but CSC members should familiarise themselves with the full versions during the initial setting-up phase. All of the resources listed below are available on the DCYA website, **www.dcya.gov.ie**

- → The Strategic Plan: The Strategic Plan for the development and implementation of the Working Together for Children initiative (OMCYA, 2010a) identifies specific outcomes and core activities for the Working Together for Children initiative over the next 3 years, including, for example, the roll-out of CSCs to other counties, governance issues, networking and communications.
- The Learning Report: The report Learning from experience to inform the future Findings emerging from the initial phase of the Children's Services Committees (CES, 2010a) was prepared by the Centre for Effective Services on behalf of the DCYA. Its purpose was to distil learning from the initial implementation phase of the CSCs with a view to informing the future development of both existing and new CSCs.
- → The Governance Framework: The Governance Framework for the Working Together for Children initiative (OMCYA, 2011a) articulates the governance arrangements for the initiative and is derived from existing policy and legislative provisions, and from the consideration given by the National Children's Strategy Implementation Group to the following documents:
 - → Learning from experience to inform the future Findings emerging from the initial phase of the Children's Services Committees (CES, 2010a);
 - → Draft Paper outlining recommendations relating to the governance of Children's Services Committees.
- → Template for the Children and Young People's Plan: CES, in collaboration with the DCYA and representatives from the HSE, has produced a *Template for the Children and Young People's Plan* (OMCYA, 2010b) to help CSCs develop such a plan for their area. Further information and guidance on using this template is provided in the second half of this Toolkit (see p. 34).
- The Internal Communications Plan: The Working Together for Children initiative Internal Communications Plan (OMCYA, 2011b) outlines the way the initiative will communicate key messages to internal stakeholders over the next 2 years. The plan outlines the key messages of the Working Together for Children initiative and specific messages for each group of internal stakeholders. It also identifies the forms of communication to be used and contains a detailed schedule of events, publications, meetings and actions for each group of stakeholders.
- → The Key Terms Document: Since the 4 CSCs became operational in 2007 (in Dublin City, South Dublin, Donegal and Limerick City), numerous different multi-agency initiatives, tools, methodologies and approaches, each with their own terminology, have been employed by CSCs. At the request of the DCYA, CES has produced a reference document to provide stakeholders with a succinct and accessible introduction to selected key terms in use in CSCs. Entitled *An introductory guide to the key terms and interagency initiatives in use in the Children's Services Committees* (CES, 2010b), this document is not intended to be a comprehensive list of all terms relevant to CSCs, but rather a starting point which will be added to with suggestions from CSC stakeholders.
- → The International Evidence Review: The Thomas Coram Research Unit (part of the Institute of Education in London) was commissioned by CES, on behalf of the DCYA, to conduct research on the evidence base for interagency working. The resultant report was entitled A review of international evidence on interagency working, to inform the development of Children's Services Committees in Ireland (Statham, 2011). The primary aim of this review is to contribute to the evidence base for developing CSCs in Ireland. It therefore focuses on specific aspects of interagency working that have already been adopted by existing

CSCs and within that on models of particular interest, rather than attempting to provide a comprehensive overview of interagency working in general. Specifically, the review aimed:

- to provide a high-level summary of the impact of interagency working on outcomes for children and young people;
- to undertake a more in-depth analysis of the international evidence for a number of specific approaches to or aspects of interagency working, in particular:
 - joint planning structures;
 - methods and tools for joint needs assessment;
 - the differential/alternative response approach to child welfare;
 - systems to support information sharing between agencies.
- to identify key barriers and facilitators to successful interagency working and to implementing each of the above approaches.

Other helpful resources

Cooperation and Working Together (CAWT)

CAWT is a partnership between HSE Dublin North East and West, Northern Ireland's Western and Southern Health and Social Care Trusts, the Health and Social Care Board and the Public Health Agency. CAWT's aim is to facilitate the partner organisations to work together to achieve the best possible health and social care outcomes for the population of the border area. The CAWT Outcomes for Children Project aims to promote and implement interagency and cross-border outcomes-based planning in the CAWT region.

The Framework for Integrated Planning for Outcomes for Children and Families (CAWT, 2008) is a comprehensive guide on how to do integrated planning focused on outcomes for children and families. It was developed by the Child and Family Research Centre in the National University of Ireland, Galway. In parallel with this, CAWT has also developed a web-based mapping system that maps services and outcomes for children and young people in the cross-border region of Ireland (see www.outcomesforchildren.org/).

Children Acts Advisory Board (CAAB)

The Guidance to support effective interagency working across Irish children's services (CAAB, 2009) was developed by the Children Acts Advisory Board with the purpose of providing a succinct, yet comprehensive evidence-based guidance to support effective interagency working across children's services. It was developed based on an extensive literature review, a comprehensive consultation process and detailed organisational case studies.

Stage 1: Setting up a CSC CHECKLIST

- Are the following people on board?
 - HSE Area Manager for Integrated Services
 - Area Manager for Children and Family Services
 - HSE Child Care Manager
 - Local Authority/County Manager
 - Principal Medical Officer
 - An Garda Síochána
 - → Information/Research Officers if available (HSE and City/County Council)
 - Other local champions statutory/non-statutory organisations
- Are any interagency collaborations already developed? If these exist, can they be built upon?
- Are CSC members familiar with the background to the Working Together for Children initiative and the suite of resources available to CSCs?
- Are CSC members familiar with the other organisations/agencies around the table?
- Are there any potential synergies with other funded initiatives that could support CSC development?
- What are your key long-term objectives for the CSC? And how do these fit with the 5 Outcome areas for children and young people?

3. STAGE 2: CONSTITUTING THE CSC

The second stage in the development of a Children Services Committee (CSC) involves constituting the CSC, including confirming membership of the committee, clarifying roles and responsibilities of constituent members and putting in place a plan around consultation with and participation of children and young people in the CSC.

Membership

Each CSC will have senior managers from all the major statutory providers of services to children and families in the area so that it can address issues in relation to the 5 Outcome areas for children. Members will be of sufficient seniority to represent their agency and to exercise decision-making powers. Membership should include representatives from the following:

- the HSE/Child and Family Support Agency (Chair);
- the Local Authority (Deputy Chair);
- the Education sector (which could include, for example, a representative from the Irish Primary Principals Network (IPPN), National Association of Principals and Deputy Principals Association (NAPD), National Educational Welfare Board (NEWB), National Educational Psychological Service (NEPS) and Vocational Education Committee (VEC));
- the Probation Service;
- An Garda Síochána;
- Social Inclusion partners (including, for example, Family Support Agency);
- the County Childcare Committee.

In situations where any of the above – or other relevant organisations, such as the Department of Social Protection – are not represented, liaison arrangements should be put in place to make sure that there are opportunities to source requisite expertise or information in order to ensure timely access to data or information sources as may be required.

Voluntary or community organisations should also be invited to become members of the CSC, including, for example, large providers of services to children, families and young people in the CSC's area, or organisations with a cross-cutting remit such as partnership companies and family resource centres. Membership of the CSC should be determined by the contribution or influence an agency/organisation can have on the planning, funding prioritisation or alignment of services within the county.

Roles and responsibilities

Chair and Deputy Chair

It was outlined in the *Governance Framework* (OMCYA, 2011a) that the role of Chair of the CSC should be held by the HSE Local Health Area Manager. With the setting up of the new Child and Family Support Agency (CFSA), the Area Manager for Children and Family Services should sit on the CSC, as should the HSE Area Manager for Integrated Services. A decision needs to be made by the group on who is the most appropriate person to chair the group (the HSE Area Manager or the Area Manager for Children and Family Services), but it is important that both officials are on the CSC.

The key responsibilities of the Chairperson are:

- to provide leadership and direction for the Committee;
- to chair meetings of the Committee and manage the proceedings;
- to ensure the effectiveness of the Committee in all aspects of its role;
- to take a lead role in determining and reviewing the process regarding the composition, structure and performance of the Committee;
- to ensure that the Committee undertakes a thorough analysis of all issues and concerns;
- to exploit the knowledge of Committee members and ensure active participation and contributions during all meetings;

- to ensure that all members of the Committee have access to accurate, timely and relevant information;
- to ensure that the Committee develops and implements a Children and Young People's Plan for the county;
- to participate in the CSC Steering Group.

The Deputy Chair of the CSC should be held by the Local Authority representative, whose main responsibility is to support the Chairperson in carrying out their responsibilities. The Deputy Chair should deputise for the Chairperson of the CSC when required.

CSC Coordinator

A CSC Coordinator should be appointed as early as possible because it is very difficult to progress the setting-up of a CSC without having a coordinator in place. Each CSC should appoint a CSC Coordinator from within the resources of CSC member organisations. Various approaches have been taken to this by different CSCs: for example, one organisation may be in a position to 'free' someone up to take on the role of the coordinator, or a number of organisations may be in a position to contribute financially towards the employment of a coordinator. It is important that these organisations commit to funding the post for a period of at least 2 years. Ideally, the CSC Coordinator should be a full-time position.

The key responsibilities of the CSC Coordinator include:

- > to communicate a clear sense of purpose and direction on behalf of the Committee;
- to foster and develop relationships with key personnel, including Committee members and other stakeholders within associated agencies/service providers involved in the provision of child and family services:
- > to ensure the collection, provision and reporting of relevant data and information;
- > to respond to ad hoc information requests and manage external correspondence as necessary;
- to organise and administer meetings of the CSC and its subgroups.

CSC members

Individual members of the CSC are responsible for:

- ensuring their organisation/Department/agency is represented on the CSC, contributes to its work and meets its commitments in the Children and Young People's Plan;
- > promoting their CSC at local and national level, and within their own organisation;
- driving forward the work of their CSC;
- embedding interdepartmental, cross-agency and multidisciplinary ways of working within their organisation;
- promoting and influencing a long-term vision of working effectively to improve outcomes for all children;
- influencing Government, policy-makers and service providers in relation to all of the above;
- targeting resources, by exercising their influence, responsibility or authority over resources allocated by their own organisation/Department/agency, where it is possible and appropriate.

Subgroups

CSCs should establish a number of subgroups, centred on the 5 Outcome areas for children and the priority actions which the CSC is trying to achieve under each outcome. CSCs may also find it useful to establish a subgroup dealing with specific issues associated with interagency working, such as data collection, data protection and information sharing.

With regard to membership of the subgroups, CSCs may find it helpful to invite nominees from the following groups to participate: County Childcare Committees, local community development programme groups, youth committees in VECs, HSE teams and voluntary youth organisations.

It is envisaged that an appropriate CSC member will be nominated to chair each subgroup. Each subgroup Chair should have expertise in that specific area and is expected to provide leadership and direction to the subgroup. The subgroup structure provides the opportunity to include additional people outside the main CSC group, such as practitioners, front-line staff and people from the voluntary and community sectors involved in direct service provision in the area.

Participation and consultation

Involving children and young people in decision-making is national public policy in Ireland. This commitment is evident in the Government's National Children's Strategy (2000), Goal 1 of which states that 'Children will have a voice in matters which affect them and their views will be given due weight in accordance with their age and maturity'. This goal is based on Article 12 of the United Nations Convention on the Rights of the Child, ratified by Ireland in 1992, which provides that 'States shall assure to every child capable of forming a view, the right to express that view in all matters affecting the child, with due weight being accorded to the view of the child in accordance with his/her age and maturity'.

Effective participation means the involvement of children or young people that actually leads to an outcome or change. In *Young Voices: Guidelines on how to involve children and young people in your work* (OMC, 2005), participation is defined in its broadest sense, to mean 'children and young people taking part in making decisions on issues that affect their lives'. The involvement of children and young people in decision-making improves the relevance and quality of policies and services, gives young people a sense of civic responsibility, makes them more interested in national and local politics, and increases the likelihood that they will vote in elections.

As outlined in the *Strategic Plan* (OMCYA, 2010a), CSCs should put structures and mechanisms in place to ensure the active participation of children and young people in the planning and delivery of services. One mechanism by which CSCs can do this is through engaging with their local Comhairle na nÓg, which is the official structure at local level for involving children and young people in decision-making under the National Children's Strategy. A road map for the development of strong and direct links between CSCs and Comhairle na nÓg has been agreed (*see Appendix 6*).

The main actions that CSCs need to progress in relation to participation are:

- The CSC will involve Comhairle na nÓg in the development of its Children and Young People's Plan.
- A member of the CSC will attend the Comhairle na nÓg AGM.
- An appropriate representative from the CSC will develop a relationship with Comhairle na nÓg or become a member of the Comhairle na nÓg Steering Committee, based on the issue being pursued by Comhairle na nÓg for that period.
- Every CSC meeting will have an agenda item dealing with 'Engagement with children and young people (e.g. Comhairle na nÓg)'.
- > The CSC will seek support or information from Comhairle na nÓg on relevant issues.
- The CSC will provide feedback to Comhairle na nÓg on relevant issues.

Stage 2: Constituting the CSC CHECKLIST

- Are the Chair and Deputy Chair aware of their responsibilities?
- Are the individuals nominated to sit on the CSC knowledgeable, mandated and empowered to act on behalf of their organisation/service provider?
- Has a CSC Coordinator been appointed?
- If not, is there a commitment among members of the CSC to fund a coordinator?
- Has agreement been reached on the number and type of subgroups to be established?
- Has the CSC established contact with the local Comhairle na nÓg and decided how it will involve children and young people in its work?

4. STAGE 3: DEVELOPING THE CHILDREN AND YOUNG PEOPLE'S PLAN

Purpose of the Children and Young People's Plan

The purpose of Children's Services Committees (CSCs) is to secure better developmental outcomes for children through more effective integration of existing services and interventions at local level. To achieve this, each CSC is required to develop and oversee the implementation of an interagency Children and Young People's Plan (CYPP), designed to improve outcomes for children in their area. Developing the CYPP involves:

- developing a socio-demographic profile of children and families in the area;
- mapping the services currently available in the area;
- identifying gaps and priorities in relation to population groups and services in the area and linking these to the 5 Outcome areas for children;
- putting in place monitoring and evaluation arrangements for the Children and Young People's Plan.

Template for the Children and Young People's Plan

A template for the Children and Young People's Plan (CYPP) was developed by the Centre for Effective Services (CES) in consultation with the DCYA. It draws widely on tools/plans developed in other jurisdictions involved in implementing similar interagency collaboration initiatives designed to improve outcomes for children and young people. Representatives of the CSCs were asked to contribute their experiences and suggestions in relation to CSC work plans. The template was adopted by the NCSIG in August 2010. Further revisions to the template were made following a meeting with the CSCs who had completed their CYPP in 2011 and the template will be subject to ongoing review.

The CYPP is designed as a 3-year plan to allow sufficient time for each priority area to be achieved. All members of the CSC are required to contribute to the development of the CYPP and to meet the commitments specified in it.

The CYPP, when complete, should be publicly available on individual CSC websites and/or on the 'Working Together for Children's Services Committees' section of the DCYA website.

Format of the Children and Young People's Plan

The Children and Young People's Plan (CYPP) is divided into 8 sections:

Section 1	Introduction	Section 5	Summary of CYPP
Section 2	Socio-demographic profile	Section 6	Action plan for CSC
Section 3	Overview of services	Section 7	Monitoring and review
Section 4	Local needs analysis	Section 8	Appendices

Section 1: Introduction

The beginning of this introductory section of the CYPP states the 5 Outcome areas for children and provides the CSC with an opportunity to describe the background and policy context of the *Working Together for Children* initiative. The CSC then gives a brief history of the development of the CSC in its area, lists its membership and associated organisations/agencies (and subgroups, if appropriate) and provides an overview of how the CSC fits with other structures in the area.

Depending on its stage of development, the CSC may wish to include a brief summary of its progress and achievements to date. The final part of this section should include a short descriptive piece on the process that the CSC used to develop its CYPP, paying particular attention to any consultation or input from children, young people, families and communities in the CSC area.

Section 2: Socio-demographic profile

This section of the CYPP requires that the CSC gathers and collates data to assist in producing a sociodemographic profile of the county/area it covers. Where Information Officers are available in a HSE-integrated services area, and/or Research Officers in City/County Councils, they should be involved from the outset in this process.

In addition to the socio-demographic profile, other data and information will be required to inform the CSC about the structure and needs of the local population.

The process of generating an accurate picture of children's lives and outcomes presents some challenges due to a number of factors, including the varied and complex nature of the topics under consideration; the rigour required in collecting, processing, analysing and reporting on data in a systematic way; and the variation in data sources and systems available. At national level, substantial work has been done in this area with the development of a National Set of Child Well-being Indicators, which have been reported on biennially since 2006 in the *State of the Nation's Children* reports (OMCYA, 2010). These reports provide a potential framework for shaping the reporting of data on children's lives at local level, as well as supplying data for many of the indicators at as low a level of geography as possible.

The challenges in presenting a comprehensive overview of children's lives, outcomes and the relevant services at national level have been well documented (Hanafin and Brooks, 2009). Some of the key issues arising include timeliness and periodicity of data collection, availability of the relevant data, and issues around data quality. For local-level data, these issues will also exist and there may well be additional issues relating to boundaries, small numbers in survey data leading to unreliable estimates or confidentiality concerns, harmonisation across sources and systems, and resources and capacity to analyse and report on data.

However, much progress has been made in recent times, with an increased focus on local-level data and in particular around mapping data such as the Census SAPs mapping tool, the HSE's Health Atlas and the extensive mapping of local-level data undertaken by South Dublin County Council, as well as the work of research institutes such as the All-Ireland Research Observatory.

Material from workshops carried out with Phase I and II CSCs, together with Conference presentations prepared by the Research Unit of the DCYA, provide further detail on the challenges arising and the resources available, and may be a useful resource to CSCs in developing their data reporting systems. A summary of this work and some of the main points for consideration can be seen in a presentation made to the 3rd International Society of Child Indicators Conference in September 2011 (see http://isci.chapinhall.org/wp-content/uploads/2011/09/Brooks-AnneMarie-FINAL.ppt). Other workshop materials and presentations can be supplied on request to the DCYA.

Local authorities, HSE local health offices, Social Welfare local offices and many other local services have access to administrative data relating to their service provision which can give a detailed insight into the profile of their target population, as well as their service needs and usage. The recently published *National Strategy for Research and Data on Children's Lives, 2011-2016* (DCYA, 2011) places much emphasis on the increased use of existing data sources, including administrative data, to improve understandings of children's lives. This is in line with initiatives by the Central Statistics Office (CSO) and the National Statistics Board to maximise the potential of administrative data for statistical purposes. The CSO has previously been engaged with the DCYA in initiatives to support data use by CSCs and there is a commitment in the Strategy that this engagement will continue, in particular to 'scope out potential data sources and systems for use by CSCs'.

A key resource in relation to this commitment is currently being produced by the Research Unit of the DCYA and consists of a summary of the inventory of data sources compiled in the preparation of the *National Strategy for Research and Data on Children's Lives*. In particular, this summary will detail the level of geographic information contained in each source. Due for publication in 2012, this document will provide a useful overview of the range of data currently collected on children in Ireland (the list of items included in the inventory can be found in Appendix 6 of the National Strategy for Research and Data). CSCs are encouraged to consider which of these data sources, and other sources they may be aware of at local level, can provide them with insights into the lives of their local child population.

In summary, the main steps for Section 2 of the CYPP are:

- 1. The socio-demographic profile should include, in the first instance, socio-demographic indicators relating to child population; infant and child mortality; ethnicity; non-lrish national children; family structure; parental education level; Traveller children; and separated children seeking asylum.
- Each CSC should consider generating its own data or indicators specific to the local population and
 population needs, taking into account some of the issues and resources discussed above. A list of
 potential data sources for this type of data is available in Appendix 3 of this Toolkit and a more extensive
 list is available in Appendix 6 of the National Strategy for Research and Data on Children's Lives
 (DCYA, 2011).

Section 3: Overview of services

In Section 3 of the CYPP, each CSC is required to provide an overview of service provision following an audit of all services for children and families in its area. The purpose of this section is to enable the CSC to map service provision in its area, to identify gaps in services and to ascertain where there is duplication. It is suggested that the services provided by statutory, community and voluntary providers should be grouped under the following headings:

- health and social services;
- education;
- policing and youth justice;
- local authority services;
- social welfare;
- other services.

The overview should indicate at what level of the Hardiker Model (see *Figure 3*) services are being provided and whether services are universal or targeted, or both.

Level 4
Intensive and long-term support and protection for children and families

Level 3
Therapeutic and Support Services for children and families with severe difficulties

Level 2
Support and Therapeutic Intervention for children and families in need

Level 1
Universal Preventative and Social Development Services

Population size

Figure 3: Hardiker Model

A list of the 5 Outcome areas for children and their associated policy and service areas is provided in Appendix 4 of this Toolkit.

This section of the CYPP also includes a number of reflective questions, designed to assist the CSC in producing its overview of services.

Section 4: Local needs analysis

Section 4 of the CYPP requires that the CSC completes a needs analysis based on data available nationally and locally. Each CSC will by now have completed a socio-demographic profile of their CSC area (Section 2) and compiled an audit of services available to children and families (Section 3). Drawing on both of these, the CSC should be able to analyse the information collated, identify gaps and prioritise areas for action in the local CSC.

The local needs analysis should convey 'how well children and young people are doing' with respect to the 5 Outcome areas for children and identify what actions are needed to achieve change in each outcome area.

This section also includes a list of reflective questions to assist the CSC in conducting its local needs analysis.

Section 5: Summary of CYPP

In Section 5, the CSC is required to provide a summary of the CYPP based on the 5 Outcome areas for children. Under each outcome, the CSC is required to identify local priority action areas. It may have more than one priority area linked to each outcome. The summary should include both newly identified and existing priorities, and/or any major initiatives being undertaken on an interagency basis.

An additional 'Change Management' section is located at the end of the summary. This facilitates the CSC to identify priority areas relating to change management and supports needed to enable interagency collaboration at local level.

Section 6: Action plan

In Section 6, the CSC provides a detailed action plan of activities to be undertaken linked to each Outcome area. The beginning of this section lists some reflective questions to assist the CSC in developing and detailing its action plan. The following table gives an example:

ACTION	ACTION PLAN FOR [INSERT CITY/COUNTY] CHILDREN'S SERVICES COMMITTEE							
OUTCOM	IE AREA 2: Su	pported in active	learning	1				
Priority area	Objective(s)	Indicators	Target	Activities	Timeframe for completion	Lead responsibility	Links to other plans	
(To be identified based on the local needs analysis)	(A brief statement of what the CSC wants to accomplish in each priority area. The objective(s) should be measurable)	(The measure which will be used to determine whether the objective is being achieved. Can be a national indicator or one that has been developed locally)		(The activities that the CSC will undertake to deliver on its objectives)			(e.g. documents from Government, State agencies or local organisations, such as RAPID)	

The table for each Outcome area consists of the following:

- → **Priority area:** The identified priority area based on the local needs analysis is stated.
- Objective(s): A brief statement of what the CSC wants to accomplish in relation to the priority area.
- → Indicators: The measure which will be used to determine whether the objective is being achieved. (This can be a national indicator or one which has been generated locally). Appendix 2 of this Toolkit gives some indicators listed in the State of the Nation's Children reports linked to the Outcome areas.
- → Target: A quantitative measure of how much the CSC aims to change the indicator.
- Activities: The activities that the CSC will undertake to deliver on its objectives.
- Timeframe for completion: Indicates the time period allocated to the CSC to deliver on its objectives.
- Lead responsibility: Indicates who or what organisations/agencies will have lead responsibility for the activities.
- → Link to other plans: Identifies if this priority area can be linked to strategy documents/plans from Government, State agencies or local organisations.

Section 7: Monitoring and review

In this section of the CYPP, the CSC should provide details of how the implementation of the plan will be monitored and the arrangements to review the plan locally during the course of its 3-year lifespan.

Section 8: Appendices

Additional information that was not included in the main body of the CYPP should be added here. Examples include Terms of Reference for the CSC or membership of CSC subgroups.

Implementation of the Children and Young People's Plan

Each CSC will submit its 3-year CYPP to the DCYA, which will review it and analyse in terms of:

- quality of content;
- the degree to which the needs analysis informed the priority areas of the action plan;
- how aligned the priority areas are to the 5 Outcome areas for children;
- quality of planning.

The DCYA will monitor implementation across the initiative and will do this based on quarterly reports by the CSC to the NCSIG, updating them on progress in implementing the priority actions contained within the CYPP. The CSC will be required to report to the City/County Development Board regarding the impact of the CYPP on the coordination of public and local strategies, and on the alignment of the CYPP with the local City/County strategy. The CYPP should be reviewed annually by the CSC and its subgroups and revised accordingly, where this is deemed appropriate.

Stage 3: Developing the Children and Young People's Plan CHECKLIST

- Has someone been given responsibility for leading the development of the Children and Young People's Plan?
- Has a socio-demographic profile been developed, using both national and local indicators?
- Is the audit of services complete?
- Has a local needs analysis been conducted based on the socio-demographic profile and audit of services?
- Have priority areas of action been identified linked to the 5 Outcome areas for children?
- Has an action plan been developed?
- Does the CSC have a change management strategy?
- → Are there monitoring and review systems in place to ensure that the CSC is delivering on the objectives of the Children and Young People's Plan?

APPENDICES

Appendix 1: Resources for Working Together for Children initiative

- Brooks, A.M. and Hanafin, S. (2005) *Measuring Child Well-being: An inventory of key indicators, domains and indicator selection criteria to support the development of a National Set of Child Well-being Indicators*, National Children's Office. Dublin: Government Publications. Available at: www.dcya.gov.ie/documents/publications/Well_Being_Indicators_Inventory_of_key_indicators.pdf
- CAAB (2009a) A literature review of interagency work with a particular focus on children's services. Dublin:

 Children Acts Advisory Board. Available at: www.drugsandalcohol.ie/15690/1/IAC%2BLiterature%2BReview %5B1%5D.pdf
- CAAB (2009b) Guidance to support effective interagency working across Irish children's services. Dublin: Children Acts Advisory Board. Available at: www.caab.ie/Publications/PDFs---Publications/Guidance-to-Support-Effective-Inter-Agency-Working.aspx
- CAWT (2008) Framework for Integrated Planning for Outcomes for Children and Families. Derry: Co-operation and Working Together (CAWT). Available at: www.cawt.com/Site/11/Documents/Publications/PCCC/Childrens%20Services/Integrated%20Framework%202008.pdf
- CES (2010a) Learning from experience to inform the future Findings emerging from the initial phase of the Children's Services Committees. Dublin: Centre for Effective Services. Available at: www.dcya.gov.ie/documents/publications/Final_Learning_Report.pdf
- CES (2010b) An introductory guide to the key terms and interagency initiatives in use in the Children's Services Committees. Dublin: Centre for Effective Services. Available at: www.dcya.gov.ie/documents/Key_Terms_Document.pdf
- CES (2010c) Effective Community Development Programmes: A review of the international evidence base.

 Dublin: Centre for Effective Services. Available at: www.effectiveservices.org/images/uploads/file/publications/
 Effective%20Community%20Development%20Programmes-Review.pdf
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- Department of Health and Children (2000) National Children's Strategy: Our Children Their Lives. Dublin: Government Publications.
- Department of the Taoiseach (2006) *Towards 2016: Ten-year Framework Social Partnership Agreement 2006-2015.*Dublin: Government Publications.
- Hanafin, S. and Brooks, A.M. (2009) 'From Rhetoric to Reality: Challenges in using data to report on a National Set of Child Well-being Indicators', *Child Indicators Research*, Vol. 2, pp. 33-55.
- IYJS (2008) *National Youth Justice Strategy 2008-2010*, Irish Youth Justice Service. Dublin: Government Publications.
- Montgomery Collaboration Council (2006) Planning Brighter Future for Children, Youth Families: A Five-year Community Strategic Plan for Montgomery County, Maryland. Available at: www.collaborationcouncil.org/priorities_strategic.html
- OMC (2005) Young Voices: Guidelines on how to involve children and young people in your work, Office of the Minister for Children. Dublin: Government Publications. Available at: www.dcya.gov.ie/documents/childyouthparticipation/Young_Voices_-_Guidelines_on_how_to_involve_Children_and_Young_People_in_your_Work.pdf
- OMC (2007) The Agenda for Children's Services: A Policy Handbook, Office of the Minister for Children. Dublin: Government Publications. Available at: www.dcya.gov.ie/documents/publications/CS_handbook[ENGLISH] lowres.pdf
- OMCYA (2009) Report of the Commission to Inquire into Child Abuse 2009, Implementation Plan, Office of the Minister for Children and Youth Affairs. Dublin: Government Publications.
- OMCYA (2010a) Strategic Plan for the development and implementation of the Working Together for Children initiative, Office of the Minister for Children and Youth Affairs. Available at: www.dcya.gov.ie/documents/publications/strategic_plan_for_the_development_and_implementation_of_the_working_together_for_children.pdf
- OMCYA (2010b) *Template for the Children and Young People's Plan*, Office of the Minister for Children and Youth Affairs. Dublin: Government Publications.

- OMCYA (2011c) State of the Nation's Children: Ireland 2010, Office of the Minister for Children and Youth Affairs. Dublin: Government Publications. Also published for 2006 and 2008. Available at: www.dcya.gov.ie/documents/publications/State_of_the_Nations_Children_2010.pdf
- OMCYA (2011a) Governance Framework for the Working Together for Children initiative, Office of the Minister for Children and Youth Affairs. Available at: www.dcya.gov.ie/documents/publications/Governance_Framework_2011.pdf
- OMCYA (2011b) The Working Together for Children initiative Internal Communications Plan, 2010-2012, Office of the Minister for Children and Youth Affairs. Available at: www.dcya.gov.ie/documents/Working_ Together_Comm_plan.pdf
- OMCYA (2011c) Working Together for Children Newsletter. Available at: www.dcya.gov.ie/documents/ Summer_2011_Final.pdf
- Statham, J. (2011) A review of international evidence on interagency working, to inform the development of Children's Services Committees in Ireland, Department of Children and Youth Affairs. Dublin: Government Publications. Available at: www.dcya.gov.ie/documents/publications/wtfchildren.pdf
- Task Force on the Public Service (2008) *Transforming Public Services: Citizen-centred Performance-focused, Report of the Task Force on the Public Service*. Dublin: Government Publications.

Useful websites

www.childrensdatabase.ie Children's Database

www.outcomesforchildren.org Cooperation and Working Together

www.dcya.ie Department of Children and Youth Affairs

www.doh.ie Department of Health

www.hse.ie Health Service Executive

www.dataprotection.ie Office of the Data Protection Commissioner

Appendix 2: Outcomes and indicators

DEMOGRAPHICS							
Indicator	Measure	Data source	Data type	Period of reporting	Coverage	Age	
Child population	The number of children under 18	Census of the Population/Population Estimates	Census and administrative data	Annual	Population	0-17	
Foreign national children	The number of foreign national children	Census of the Population	Census	Quinquennial	Population	0-17	
Disability	The number of children with a disability	Census of the Population	Census	Quinquennial	Population	0-17	
Traveller children	The number of Traveller children	Census of the Population	Census	Quinquennial	Population	0-17	

	IILDREN WILL BE HEALTHY, BOTH PH					
Indicator	Measure	Data source	Data type	Period of reporting	Coverage	Age
Child mortality	The number of deaths among children under 18	Vital Statistics	Administrative data	Annual	Population	0-17
Disability	The number of children under 18 years registered as having an intellectual disability	National Intellectual Disability Database	Administrative data	Annual	Population	0-17
	The number of children under 18 registered as having a physical or sensory disability	National Physical and Sensory Disability Database	Administrative data	Annual	Population	0-17
Birth weight	The percentage of babies born weighing less than 2,500 grams (live and still births)	National Perinatal Reporting System	Administrative data	Annual	Population	<1
Breastfeeding practice	The percentage of newborn babies who are (a) exclusively breastfed and (b) partially breastfed on discharge from hospital	National Perinatal Reporting System	Administrative data	Annual	Population	<1
Antenatal care	The percentage of mothers attending for antenatal care in the first trimester of pregnancy	National Perinatal Reporting System	Administrative data	Annual	Population	<1
Childhood immunisation	The percentage uptake of recommended doses of vaccines among children at 12 months of age	Immunisation Uptake Statistics	Administrative data	Annual	Population	1
Cilidilood Illilidilisation	The percentage uptake of recommended doses of vaccines among children at 24 months of age	Immunisation Uptake Statistics	Administrative data	Annual	Population	2
Accessibility of basic health services	The number of children on hospital waiting lists	Patient Treatment Register	Administrative data	Annual	Population	0-17
Screening for growth and development*	The percentage of mothers of newborn children visited by a Public Health Nurse within 48 hours of discharge from hospital	National Health Services Performance Indicators	Administrative data	Annual	Population	<1
	The percentage uptake of developmental screening at 7 to 9 months	National Health Services Performance Indicators	Administrative data	Annual	Population	<1

^{*} Indicators that are included in the National Set of Child Well-being Indicators, but not included in the most recent State of the Nation's Children report (OMCYA, 2010c) due to data quality issues.

OUTCOME AREA 1 con	OUTCOME AREA 1 continued							
Indicator	Measure	Data source	Data type	Period of reporting	Coverage	Age		
Mental health referrals	The number of admissions to psychiatric hospitals among children	National Psychiatric In-Patient Reporting System	Administrative data	Annual	Population	0-17		
Sexual health and behaviour	The number of births to girls aged 10-17	Vital Statistics and Population Estimates	Administrative data	Annual	Population	10-17		
Youth suicide	The number of suicides among children aged 10-17	Vital Statistics	Administrative data	Annual	Population	10-17		
Health conditions and hospitalisation	The number of hospital discharges among children	Hospital In-patient Enquiry System	Administrative data	Annual	Population	0-17		
Nutritional habits	The percentage of children aged 9-17 who report eating breakfast on 5 or more days per week	Health Behaviour in School-aged Children Survey	International survey	Quadrennial	Sample	9-17		
Nutritional outcomes	The percentage of children aged 7 in the following BMI categories: normal, overweight and obese	Childhood Obesity Surveillance Initiative	International survey	Biennial	Sample	9-17		
Self-esteem	The percentage of children aged 9-17 who report feeling happy always or very often with the way they are	Health Behaviour in School-aged Children Survey	International survey	Quadrennial	Sample	9-17		
Self-reported happiness	The percentage of children aged 9-17 who report being happy with their lives at present	Health Behaviour in School-aged Children Survey	International survey	Quadrennial	Sample	9-17		

OUTCOME AREA 2: CH	OUTCOME AREA 2: CHILDREN WILL BE SUPPORTED IN ACTIVE LEARNING						
Indicator	Measure	Data source	Data type	Period of reporting	Coverage	Age	
Public expenditure on education	Public expenditure on education	Department of Education and Skills	Administrative data	Annual	Population	5-17	
Enrolment in early childhood care and education	The percentage of children under 13 years of age who avail of non-parental childcare	Quarterly National Household Survey	National survey	Triennial	Sample	0-13	
Parental satisfaction with early childhood care and education	The percentage of households with children under 13 years of age who report to have 'access to high quality, affordable child care in the community'	Quarterly National Household Survey	National survey	Triennial	Sample	0-13	
Quality of early childhood care and education	The percentage of Early Childhood Care and Education (ECCE) services under contract to deliver the Free Pre-School Year scheme that meet basic and higher capitation criteria	ECCE Database	Administrative data	Annual	Population	0-5	
Attendance at school	The percentage of children who are absent from school for 20 days or more in the school year	National Educational Welfare Board statistics	Administrative data	Annual	Population	5-17	
Transfer to second-level school	The percentage of children leaving primary school by destination	Department of Education and Science statistics	Administrative data	Annual	Population	12-13	

OUTCOME AREA 2 con	OUTCOME AREA 2 continued							
Indicator	Measure	Data source	Data type	Period of reporting	Coverage	Age		
Reading attainment	The mean scores for 15-year-old children based on the international reading literacy scales, set by the PISA Survey	Programme for International Student Assessment Survey	International survey	Annual	Sample	15		
Mathematics attainment	The mean scores for 15-year-old children based on the international mathematics literacy scales, set by the PISA Survey	Programme for International Student Assessment Survey	International survey	Annual	Sample	15		
Science attainment	The mean scores for 15-year-old children based on the international scientific literacy scales, set by the PISA Survey	Programme for International Student Assessment Survey	International survey	Annual	Sample	15		
Reading as a leisure activity	The percentage of children aged 15 who report that reading is one of their favourite hobbies	Programme for International Student Assessment Survey	International survey	Triennial	Sample	15		
Parental involvement in schooling	The percentage of children aged 15 who report that their parents discuss with them how well they are doing at school several times a week	Programme for International Student Assessment Survey	International survey	Triennial	Sample	15		

OUTCOME AREA 3: CHILDREN WILL BE SAFE FROM ACCIDENTAL AND INTENTIONAL HARM, AND SECURE IN THE IMMEDIATE AND WIDER PHYSICAL ENVIRONMENT

Indicator	Measure	Data source	Data type	Period of reporting	Coverage	Age
Accidents, injuries and hospitalisation	The number of hospital discharges among children with a diagnosis of external cause of injury or poisoning	Hospital In-Patient Enquiry	Administrative data	Annual	Population	0-17
Abuse and maltreatment	The number of child welfare and protection reports that went to initial assessment	Childcare Interim Dataset	Administrative data	Annual	Population	0-17
	The number of confirmed child abuse cases	Childcare Interim Dataset	Administrative data	Annual	Population	0-17
Children and young people in care	The number of children who are in the care of the Health Service Executive	Childcare Interim Dataset	Administrative data	Annual	Population	0-17
Tobacco use	The percentage of children aged 9-17 who report smoking cigarettes every day	Health Behaviour in School-aged Children Survey	International survey	Quadrennial	Sample	9-17
Alcohol use	The percentage of children aged 10-17 who report to have been drunk at least once in the last 30 days	Health Behaviour in School-aged Children Survey	International survey	Quadrennial	Sample	10-17
Cannabis use	The percentage of children aged 10-17 who report having taken cannabis at least once in their lifetime	Health Behaviour in School-aged Children Survey	International survey	Quadrennial	Sample	10-17
Community characteristics	The percentage of children aged 9-17 who report feeling safe in area where they live	Health Behaviour in School-aged Children Survey	International survey	Quadrennial	Sample	9-17

OUTCOME AREA 3 continued							
Indicator	Measure	Data source	Data type	Period of reporting	Coverage	Age	
Crimes committed by children and young people	The number of children aged 10-17 referred to the Garda Juvenile Diversion Programme	An Garda Síochána Annual Report	Administrative data	Annual	Population	10-17	
Youth homelessness*	The number of children who appeared to the Health Service Executive to be homeless	Childcare Interim Dataset	Administrative data	Annual	Population	0-17	
Availability of housing for families with children	The number of households with children identified as being in need of social housing	Triennial Assessment of Housing Needs	Administrative data	Triennial	Population	0-17	

OUTCOME AREA 4: CH	OUTCOME AREA 4: CHILDREN WILL BE ECONOMICALLY SECURE						
Indicator	Measure	Data source	Data type	Period of reporting	Coverage	Age	
At risk of poverty	The percentage of children living in households with an equivalised household disposable income below the national 60% median	EU Survey on Income and Living Conditions	European survey	Annual	Sample	0-17	
Consistent poverty	The percentage of children living in households with an equivalised household disposable income below the national 60% median who experienced at least two forms of enforced deprivation	EU Survey on Income and Living Conditions	European survey	Annual	Sample	0-17	

OUTCOME AREA 5: CHILDREN WILL BE PART OF POSITIVE SOCIAL NETWORKS OF FAMILY, FRIENDS, NEIGHBOURS AND THE COMMUNITY, AND INCLUDED AND PARTICIPATING IN SOCIETY

Indicator	Measure	Data source	Data type	Period of reporting	Coverage	Age
Family structure	The number of children under 18 living in a lone-parent household	Census of the Population	Census	Quinquennial	Population	0-17
Separated children seeking asylum	The number of separated children seeking asylum	Childcare Interim Dataset	Administrative data	Annual	Population	0-17
Relationship with mothers	The percentage of children aged 9-17 who report that they find it easy or very easy to talk with their mother when something is really bothering them	Health Behaviour in School-aged Children Survey	International survey	Quadrennial	Sample	9-17
Relationship with fathers	The percentage of children aged 9-17 who report that they find it easy or very easy to talk with their father when something is really bothering them	Health Behaviour in School-aged Children Survey	International survey	Quadrennial	Sample	9-17
Talking to parents	The percentage of children aged 15 who report that their parents spend time just talking with them several times a week	Programme for International Student Assessment Survey	International survey	Triennial	Sample	15

^{*} Indicators that are included in the National Set of Child Well-being Indicators, but not included in the most recent State of the Nation's Children report (OMCYA, 2010c) due to data quality issues.

OUTCOME AREA 5 continued						
Indicator	Measure	Data source	Data type	Period of reporting	Coverage	Age
Eating a main meal together	The percentage of children aged 15 who report that their parents eat a main meal with them around a table several times a week	Programme for International Student Assessment Survey	International survey	Triennial	Sample	15
Friendships	The percentage of children aged 9-17 who report to have 3 or more friends of the same gender	Health Behaviour in School-aged Children Survey	International survey	Quadrennial	Sample	9-17
Bullying	The percentage of children aged 9-17 who report to have been bullied at school	Health Behaviour in School-aged Children Survey	International survey	Quadrennial	Sample	9-17
Pets and animals	The percentage of children aged 9-17 who report having a pet of of their own or a pet in the family	Health Behaviour in School-aged Children Survey	International survey	Quadrennial	Sample	9-17
Environment and places	The percentage of children aged 9-17 who report there are good places in their area to spend their free time	Health Behaviour in School-aged Children Survey	International survey	Quadrennial	Sample	9-17
Parental education level	The percentage of children under 18 whose mothers have attained (a) primary, (b) lower secondary, (c) upper secondary or (d) third-level education	Census of the Population	Census	Quinquennial	Population	0-17
Participation in decision-making	The percentage of children aged 9-17 who report students at their school participate in making the school rules	Health Behaviour in School-aged Children Survey	International survey	Quadrennial	Sample	9-17
Physical activity	The percentage of children aged 9-17 who report being physically active for at least 60 minutes per day on more than 4 days per week	Health Behaviour in School-aged Children Survey	International survey	Quadrennial	Sample	9-17

Appendix 3: Data sources

All-Island Research Observatory

www.airo.ie

An Garda Síochána Annual Report

www.garda.ie/

Central Statistics Office

www.cso.ie

Child Care Interim Datasets

www.thehealthwell.info/search-results/child-care-interim-dataset

Childhood Obesity Surveillance Initiative

www.euro.who.int/...surveillance/who-european-childhood-obesity

Cooperation and Working Together

www.cawt.com and www.outcomesforchildren.org

Department of Education and Skills

www.education.ie/home/home.jsp?maincat=17216&pcategory=17216&ecategory=17241&language=EN

Department of Health - Health in Ireland - Key Trends

www.dohc.ie/statistics/key_trends/

EU Survey on Income and Living Conditions (EU-SILC)

www.cso.ie/en/search/index.html?q=EU%20survey%20on%20income%20and%20living%20conditions

Health Behaviour in School-aged Children (HBSC)

www.nuigalway.ie/hbsc/

Health Intelligence and Health Atlas

www.hse.ie/eng/about/Who/Population_Health/Health_Intelligence/

Health Research Board

www.hrb.ie

Hospital In-Patient Enquiry System

www.esri.ie/health_information/hipe/

Immunisation - Uptake Statistics

www.thehealthwell.info/search-results/immunisation-uptake-statistics

National Educational Welfare Board - Statistics

www.newb.ie

National Health Services Performance Indicators

www.hse.ie/eng/healthstat

National Intellectual Disability Database

www.hrb.ie/health-information-in-house-research/disability/nidd/

National Perinatal Reporting System

www.esri.ie/health_information/nprs/

National Physical and Sensory Disability Database

www.hrb.ie/health-information-in-house-research/disability/npsdd/

National Psychiatric In-Patient Reporting System

www.hrb.ie/health-information-in-house-research/mental-health/information-systems/npirs-national-psychiatric-in-patient-reporting-system/

Patient Treatment Register

www.ptr.ie

Programme for International Student Assessment (PISA)

www.erc.ie/?p=55

Quarterly National Household Survey

www.cso.ie/en/qnhs/

State of the Nation's Children report (2010)

www.dcya.gov.ie/documents/publications/State_of_the_Nations_Children_2010.pdf

Triennial Assessment of Housing Needs

www.environ.ie/en/Publications/StatisticsandRegularPublications/HousingStatistics/

Appendix 4: Outcomes areas for children (with associated examples) and related policy/service areas

Outcome Area 1: Children will be healthy, both physically and mentally

Examples of associated outcomes related to the national outcome

- Children and young people are physically healthy.
- Children and young people are mentally healthy.
- Children and young people with additional needs are supported to meet their potential.

Related policy/service areas

- Health services (including maternal and infant health); public health services (including school health); health promotion; dental, ophthalmic and other services.
- Hospital services.
- Community-based therapy services, services for children and young people with disabilities, youth mental health services.

Outcome Area 2: Children will be supported in active learning

Examples of associated outcomes related to the national outcome

- Children are ready for school.
- Children and young people enjoy and attend school.
- Children and young people achieve national educational standards in pre-school, primary, secondary and vocational school settings.
- Children and young people receive the necessary supports to allow them to participate and achieve in the appropriate educational settings.

Related policy/service areas

- Universal education services, including pre-school, primary, secondary and vocational school.
- Targeted educational services that support young people within the universal provision, e.g. NEWB, NEPS, School Completion, Home School Liaison.
- Other specialist education services for children and young people with additional needs.
- Youth reach services and education services provided in youth detention services.

Outcome Area 3: Children will be safe from accidental and intentional harm, and secure in the immediate and wider physical environment

Examples of associated outcomes related to the national outcome

- Children and young people have stability and are cared for.
- Children and young people are safe from abuse (physical, emotional and sexual), neglect, violence and sexual exploitation.
- Children and young people are safe from crime and anti-social behaviour in and out of school.
- Children and young people in the care of the State are safe and supported to achieve their potential.
- Children and young people are safe from accidental injury and death.
- Children and young people have good housing and community facilities.

Related policy/service areas

- Protected and supported.
- Family support services.
- Child welfare and protection services, domestic violence services, foster care, adoption, residential care, special care, high support services, youth homelessness services and services for unaccompanied minors.
- Provisions (in all sectors) to comply with legislative, policy and guidance measures focused on child protection (including the implementation of Children First).
- Child trafficking/Internet safety.
- Policing (particular to children and young people's safety).
- Child detention services.

(continued)

Outcome Area 3 continued

- Immigration policy, including direct provision services.
- Safe from accidental injury and death.
- Road and water safety, food safety and environmental health.
- Planning, neighbourhood design legislation and policies, including appropriate housing provision, community safety and traffic calming measures.
- Health and safety at home, in industry, on farms and in the wider environment.

Outcome Area 4: Children will be economically secure

Examples of associated outcomes related to the national outcome

- Children and young people live in households free from poverty.
- Children and young people engage in further education, employment or training on leaving school.
- Children and young people are ready for employment.
- Children and young people live in decent homes and sustainable communities.

Related policy/service areas

- Child or family income support, parental education and employment policies.
- Taxation and economic policy affecting families with children.

Outcome Area 5: Children will be part of positive networks of family, friends, neighbours and the community, and included and participating in society

Examples of associated outcomes related to the national outcome

- Children and young people live healthy lifestyles.
- Children and young people achieve personal and social development and enjoy recreation.
- Children and young people engage in decision-making and support the community and environment.
- Children and young people develop positive relationships and choose not to bully or discriminate.
- Children and young people develop selfconfidence and successfully deal with challenges and transitions in their lives.
- Children and young people engage in law-abiding and positive behaviour.

Related policy/service areas

- Measures and activities providing alternatives to harmful life choices (including targeted anti-drug and alcohol alternative activities).
- Arts, sports, play, recreation and heritage services, facilities and activities.
- Youth services.
- Youth justice services (diversion, probation and restorative justice measures).
- Other family and community services promoting equality, integration and pro-social activities and behaviours with and for children and young people.
- Active citizenship opportunities.
- Social inclusion measures, including activities targeting excluded ethnic and social minorities and those suffering from rural isolation (e.g. transport).

Appendix 5: Glossary

accountability The ability to demonstrate to key stakeholders that a service or programme works and that

it uses its resources effectively to achieve and sustain projected goals and outcomes.

activities What services or programmes to develop and implement to produce desired outcomes.

communications plan

A simple, targeted document reflecting a 2-way dialogue between author and audiences.

data Information collected and used for reasoning, discussion and decision-making. In services and programme evaluation, both quantitative (numbers) and qualitative (views, opinions

and experiences) data may be used.

data analysis The process of systematically examining, studying and evaluating collected information.

dissemination The deliberate attempt to spread information and encourage its use.

effectiveness The ability of a service or programme to achieve its stated goals and produce measurable

outcomes.

evaluation A process of systematic investigation, preferably done using scientifically robust research methods, and used to assess the processes, outcomes and impacts associated with a

service, programme or intervention. There are several types of evaluation:

External (or 'independent') evaluation: Evaluation by an individual or team independent

of the service, organisation or programme that is being evaluated.

Internal evaluation: Evaluation by an individual or team from within the service, organisation or programme that is being evaluated.

Process evaluation: Assessing what activities were implemented, the quality of the implementation and the strengths and weaknesses of the implementation. This method is used to produce useful feedback for service or programme refinement, to determine which activities were more successful than others, to document successful processes for

future replication and to demonstrate service or programme activities before demonstrating

outcomes.

evidence-based programme

A programme that has consistently been shown to produce positive results by independent research studies, which have been conducted to a particular degree of scientific quality.

evidence-informed practice

Practice based on the integration of experience, judgement and expertise with the best available external evidence from systematic research.

facilitator A facilitator supports everyone to do their best thinking and practice. He or she encourages

full participation, promotes mutual understanding and cultivates shared responsibility. By supporting everyone to do their best thinking, a facilitator enables group members to search

for inclusive solutions and build sustainable agreements.

goal A broad statement that describes the desired impact of a specific service or programme.

indicators The measurement that will be used to determine whether the intended effect of a service

or programme has occurred. (For example, an indicator of the desired outcome 'improved maternal mental health' from a service offering post-natal support might be a reduction in symptoms of depression among women using the service, measured using a standardised

scale over a specified period.)

intervention An activity conducted with an individual or group, or within a community, in order to change

behaviour and prevent or bring about improvement to a problem.

knowledge transfer The process by which knowledge and ideas move from the source of the knowledge to

potential users of that knowledge.

leadership Leadership can be defined as the process of influencing the activities of an organised

group in its efforts towards setting and achieving goals. Leadership can be exhibited at a number of levels, e.g. within an individual organisation, a committee or a subgroup.

multi-dimensional Having several levels or aspects.

needs analysis An examination of the existing needs within a group, community or organisation. Usually

involves gathering views and opinions, and factual data, and should enable those concerned to make an informed judgement about what changes are needed in order to

achieve better outcomes.

outcomes Changes that occur as a result of interventions. Outcomes may be short term or immediate,

medium term or intermediate, long term or end. Short-term outcomes may include changes in knowledge, attitudes or simple behaviours; long-term outcomes are likely to be the result of many or sustained interventions and include changes in complex behaviours, conditions

(e.g. risk factors), and status (e.g. poverty rates).

participation Meaningful participation involves recognising and nurturing the strengths, interests and

abilities of people being worked with, through the provision of real opportunities for them to become involved in decisions that affect them at individual and organisational levels.

programme A set of activities that has clearly stated goals from which all activities – as well as specific,

observable and measurable outcomes – are derived. A programme sometimes may

incorporate a number of different services.

qualitative data Information gathered in narrative form by talking to or observing people. Often presented

as text, qualitative data can serve to illuminate evaluation findings derived from quantitative

methods.

quantitative data Information gathered in numeric form. Quantitative methods deal most often with numbers

that are analysed with statistics to test hypotheses and track the strength and direction of

effects.

stakeholder An individual or organisation with a direct or indirect interest or investment in a service or

programme (e.g. a funder, programme champion or community leader).

strategic plan A comprehensive plan for accomplishment in relation to stated goals and objectives. Ideally,

the plan should cover multiple years, include targets for expected accomplishments and propose specific performance measures used to evaluate progress towards those targets.

Appendix 6: CSCs and Comhairle na nÓg

Roadmap for the development of strong and direct links between CSCs and Comhairle na nÓg

Respective responsibilities of Comhairle na nÓg and Children's Services Committees

Comhairle na nÓg is the official structure at local level for involving children and young people in decision-making under the National Children's Strategy. The objective of Comhairle na nÓg is to become:

- a firmly embedded structure and key consultative and participative forum for children and young people in each City/County Development Board (CDB);
- an effective mechanism for children and young people to improve their own lives in partnership with adult stakeholders.

Children's Services Committees (CSCs) are part of an important national initiative called *Working Together for Children*. They are designed to bring together a diverse group of agencies in local city/county areas to engage in joint planning and interagency collaboration. Their objective is to secure better developmental outcomes for children and young people.

Outcome 5 of the Strategic Plan for the *Working Together for Children* initiative proposes that CSCs will put 'structures and mechanisms in place to ensure children and young people's active participation in planning and delivery of services'. One mechanism by which CSCs can do this is through engaging with their local Comhairle na nÓg.

Reporting mechanisms

Engagement by Comhairle na nÓg with CSCs will become part of the criteria for the DCYA Comhairle na nÓg Development Fund.

Engagement by CSCs with Comhairle na nÓg will become a reporting requirement for the Children's Services Committees.

Actions: Children's Services Committees

- > The CSC will involve Comhairle na nÓg in the development of its Children and Young People's Plan.
- → A member of the CSC will attend the Comhairle na nÓg AGM.
- → An appropriate representative from the CSC will develop a relationship with Comhairle na nÓg or become a member of the Comhairle na nÓg Steering Committee, based on the issue being pursued by Comhairle na nÓg for that period.
- Every CSC meeting will have an agenda item dealing with 'Engagement with children and young people (e.g. Comhairle na nÓg)'.
- The CSC will seek support or information from Comhairle na nÓg on relevant issues.
- The CSC will provide feedback to Comhairle na nÓg on relevant issues.

Actions: Comhairle na nÓg

- The Comhairle na nÓg will feed into the CSC's Children and Young People's Plan.
- The Comhairle na nÓg will engage with the CSC at appropriate points, once an issue has been identified and young people have sufficient capacity.
- Comhairle na nÓg members/adult organisers/DCYA Participation Officers will attend occasional CSC meetings, as appropriate.
- Comhairle na nÓg members or adult organisers will seek support and information from the CSC.
- The Comhairle na nÓg will provide feedback to the CSC on relevant issues.

Building effective engagement with children and young people in the work of CSCs

The above roadmap refers only to strengthening the engagement between Children's Services Committees and Comhairle na nÓg. It is the first step in ensuring that CSCs build effective engagement with children and young people in the planning and delivery of services.

It is important that CSCs also consider how they could consult with and ensure the participation of children and young people outside of the Comhairle na nÓg structure.

During 2012, the DCYA will lead on the development of guidelines on participation by children and young people in the work of CSCs under Goal 1 (voice of the child) of the forthcoming Children and Young People's Policy Framework, 2012-2017.



TEMPLATE

Insert County
Children's Services Committee

Children and Young People's Plan 2012-2014

This document is a revised template prepared by the Centre for Effective Services on behalf of the DCYA and NCSIG. The template is subject to ongoing review.

May 2012



Contact

Suggested text:	
The comments, views and opinions about or	Children's Services Committee welcomes ur Children and Young People's Plan.
Please contact:	
Copies of this plan are available on: ww	w

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FOREWORD

Foreword by the Chair of the CSC	

SECTION 1: INTRODUCTION

The purpose of the Children's Services Committees is to secure better developmental outcomes for children through more effective integration of existing services and interventions at local level.

The 5 Outcome areas for children in Ireland envision that all children should be:

- healthy, both physically and mentally;
- supported in active learning;
- safe from accidental and intentional harm, and secure in the immediate and wider physical environment:
- economically secure;
- part of positive networks of family, friends, neighbours and the community, and included and participating in society.

Background to the CSC initiative and policy context

Children's Services Committees in Ireland

The Office of the Minister for Children and Youth Affairs (OMCYA) established the Children's Services Committees (CSCs) in 2007 with the purpose of improving outcomes for children and families at local and community level. CSCs do this through interagency collaboration and joint planning and coordination of services.

A major Government policy that influenced and informed the development of CSCs is *The Agenda for Children's Services: A Policy Handbook* (OMC, 2007). It sets out the strategic direction and key goals of public policy in relation to children's health and social services. At the core of *The Agenda* is the promotion of good outcomes for children. In this Children and Young People's Plan, the outcomes for children in Ireland are linked with *local* priority areas, objectives, indicators and activities.

Children's Services Committee in Insert County

A short descriptive piece outlining the history of the development of the CSC in County X.

Who we are

This section could include the following information:

- Membership of CSC.
- Overview of how the CSC fits with other structures (CSCs could consider inserting a diagram to illustrate their linkages and relationships). The Governance Framework (OMCYA, 2011c) will assist CSCs in this (see www.dcya.gov.ie/documents/publications/Governance_Framework_2011.pdf).

Achievements to date

CSCs may wish to include a brief summary of their progress and achievements to date.

If the CSC is in the development and planning stage, they may wish to omit this section in their first work plan.

How the Children and Young People's Plan was developed

This section could include a short descriptive piece on the process that the CSC used to develop its work plan. For example, it could make reference to:

- any groundwork or research that was done in the community prior to the establishment of the CSC;
- the socio-demographic profile;
- the audit of services;
- the local needs analysis;
- any consultation with, or input from:
 - children, young people and families
 - the community
 - agencies/organisations
- the identification of priority needs and objectives;
- how actions and indicators were developed and agreed upon.

SECTION 2: SOCIO-DEMOGRAPHIC PROFILE OF INSERT COUNTY

We would suggest that the socio-demographic profile should include the following basic demographic indicators extracted from Part 1: Socio-demographics of the *State of the Nation's Children – Summary* (OMCYA, 2010c; available to download from **www.dcya.ie**)

INDICATOR	MEASURE
Child population	The number of children under 18
Infant mortality	The number of deaths among infants
Child mortality	The proportion of deaths among children under 18
Ethnicity	The percentage of children by ethnicity or cultural background
Non-Irish national children	The number of non-Irish national children
Family structure	The number and percentage of children under 18 who live in family household units with only one parent or primary care-giver resident
Parental education level	The percentage of children under 18 whose mother has attained (a) primary, (b) lower secondary, (c) upper secondary or (d) third-level education
Traveller children	The number of Traveller children
Separated children seeking asylum	The number of separated children seeking asylum

Each CSC should consider generating its own data or indicators specific to its local population and population needs. A list of sources for this type of data is available in Appendix 3 of the Toolkit.

The more extensive indicator set should be based on the 5 Outcome areas. Some, but not all of this data is available both nationally and locally from the CSO, the *State of the Nation's Children* report (2010) and other data sources, which are listed based on the Outcome areas in Appendices 2 and 3 of the Toolkit.

Reflective questions

When developing the socio-demographic profile for the area, the CSC should reflect on the following questions:

- → Have we the socio-demographic information required for effective planning and monitoring? And if not, what is required?
- Do our information and data systems allow for comparative analysis on a geographical basis/analysis of progress over time? And if not, what is required?

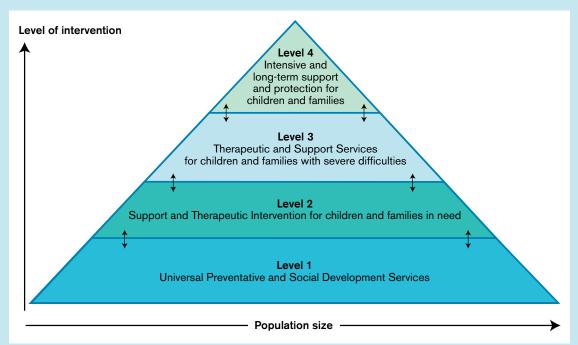
Fill in Section 2 here	

SECTION 3: OVERVIEW OF SERVICES TO CHILDREN AND FAMILIES IN INSERT COUNTY

This section should *summarise* the services provided to children and families in the local area, by statutory, voluntary and community sector organisations. The information contained in this section should be based on the audit of services conducted by the CSC.

It is suggested that CSCs should categorise the services provided to children and families in the local area according to the different levels in the Hardiker Model, i.e. Levels 1, 2, 3 and 4 (recognising that some services cross several levels). It should be stated whether the services are universal, targeted, or both.

Hardiker Model



The Overview should summarise services provided by statutory agencies and by community and voluntary organisations, covering:

- health and social services;
- education;
- policing and youth justice;
- local authority services;
- social welfare;
- other services.

Reflective questions

When documenting the Overview of services in the CSC area, the CSC should reflect on the following questions:

- > What universal services are available and are they available in all geographical areas and to all communities?
- What targeted services are available?
- → Do the services adopt a 'whole child' or 'whole family' approach in terms of assessment and/or service delivery?
- Are the services integrated with relevant related supports and services?
- > What services are provided by statutory agencies and by community and voluntary organisations?
- What services are provided on a public and/or a private basis?

Fill in Section 3 here ...

OVERVIEW OF SERVICES							
Organisation/ Agency	Service	Statutory or Voluntary	Universal or Targeted, or both				
Examples							
X Regional Drugs Task Force	Drug Prevention & Education Initiative – train the trainer in drug awareness for parents, youth leaders. Strengthening Families Programme	Statutory	Universal and Targeted				
Headstrong	Jigsaw programme for young people aged 12-25 (voluntary)	Voluntary	Universal				

SECTION 4: LOCAL NEEDS ANALYSIS IN INSERT COUNTY

This section should highlight the main concerns and issues for children and young people in your area, drawn from the socio-demographic profile and the audit of services. It should summarise the key findings from the local needs analysis conducted by the CSC.

It should convey 'how the children and young people in your county are doing' in terms of the 5 Outcome areas for children:

- healthy, both physically and mentally;
- supported in active learning;
- safe from accidental and intentional harm, and secure in the immediate and wider physical environment;
- economically secure;
- part of positive networks of family, friends, neighbours and the community, and included and participating in society.

Reflective questions

When conducting the local needs analysis for the CSC area, the CSC should reflect on the following questions:

- Are services designed to focus on the achievement of particular outcomes in line with The Agenda for Children's Services?
- → How can we measure if the service is achieving its outcomes? What indicators/measures would provide evidence of this?
- Are there any obvious gaps in local services preventing outcomes from being achieved?
- > Are services fully inclusive of the voice and perspectives of the children and families who utilise them?
- → Has the CSC considered (separately) the needs of children, young people and families in specific circumstances, including, for example, infants; pre-school children; school-age children; adolescents; children with disabilities; parents (mothers, fathers, foster parents, parents in challenging circumstances); grandparents and other family carers; Travellers.
- → Has the information been collected in a systematic manner and does it provide a robust representative picture of the needs of children, young people and families in the area? For example, what use is made of information technology in the mapping of needs and planning of services?

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Having considered the socio-demographic profile, the audit of services and the local needs analysis, CSCs will identify their priority areas for action, linked to the 5 Outcome areas. These priority areas are summarised in Section 5.

SECTION 5: SUMMARY OF CHILDREN AND YOUNG PEOPLE'S PLAN FOR INSERT COUNTY

The CSC may not identify a priority area for each outcome or it may have several priority areas under one outcome.

CSCs should include both newly identified and existing priorities or major initiatives being undertaken on an interagency basis.

OUTCOMES AREAS	LOCAL PRIORITY AREAS (to be identified following the local needs analysis and the audit of services)
1. Healthy, both physically and mentally	
2. Supported in active learning	
3. Safe from accidental and intentional harm, and secure in the immediate and wider physical environment	
4. Economically secure	
5. Part of positive networks of family, friends, neighbours and the community, and included and participating in society	
CHANGE MANAGEMENT	LOCAL PRIORITY AREAS
CSCs may also identify priority areas relating to change management and supports needed to enable interagency collaboration at local level, e.g. development of information sharing protocols, interagency training.	

SECTION 6: ACTION PLAN FOR INSERT COUNTY CHILDREN'S SERVICES COMMITTEE

Reflective questions

When identifying the objectives, indicators and activities for each priority area, the CSC should reflect on the following questions:

- → What do we know about 'what works' in relation to each priority area? If there are gaps in our knowledge about 'what works', have we thought about how to fill the gaps?
- What evidence-informed practices could inform our work in relation to the priority areas?
- > What evidence-informed programmes could inform our work in relation to the priority areas?
- How does this plan build on what is already being done in the area?
- Are we doing anything for which we do not have convincing evidence of its effectiveness?
- Are we making the best use of the resources we have at our disposal?
- How could we improve interagency working in our county?
- Will this plan address the identified needs of children and young people?

OUTCOME AREA 1: Healthy, both physically and mentally								
Priority Area (to be identified based on the local needs analysis)	Objective(s) (a brief statement of what the CSC wants to accomplish in relation to each priority area. The objective(s) should be measurable)	Indicators (the measure which will be used to determine whether the objective is being achieved. Can be a national indicator or one that has been developed locally)	Target	Activities (the activities that the CSC will undertake to deliver on its objectives)	Timeframe for completion	Lead responsibility	Link to other plans (e.g. documents from Government, State agencies or local organisations, such as RAPID)	
EXAMPLES								
Teenage pregnancy	Reduce the number of teenage pregnancies in the CSC area	Percentage decrease in teenage pregnancies per 1,000 population of 14-17 year-olds in 2012	20% reduction in teenage pregnancies per 1,000 population of 14-17 year-olds in 2012	Compile baseline data to ascertain number of teenage pregnancies annually in 2008/09/10. Implement the Teenage Health Initiative programme.	March 2012 18 months, 2012 – June 2013	HSE (through funded family support projects in CSC area)	HSE Family Support Pla	
Early childhood health and development	Support best health and development outcomes for children through maternal health, nutrition and parenting provision	Birth weight Achievement of developmental milestones School readiness	% increase in healthy birth weight, developmental milestones, school readiness	Target health promotion for pregnant and new mums Targeted parenting support and advice Promote ECCE Scheme	December 2012	HSE, Family Resource Centres, community/ voluntary providers, pre-school providers		

ACTION PLAN FOR	R INSERT COUNTY CH	ILDREN'S SERVICES	COMMITTEE					
OUTCOME AREA 2: Supported in active learning								
Priority Area (to be identified based on the local needs analysis)	Objective(s) (a brief statement of what the CSC wants to accomplish in relation to each priority area. The objective(s) should be measurable)	Indicators (the measure which will be used to determine whether the objective is being achieved. Can be a national indicator or one that has been developed locally)	Target	Activities (the activities that the CSC will undertake to deliver on its objectives)	Timeframe for completion	Lead responsibility	Link to other plans (e.g. documents from Government, State agencies or local organisations, such as RAPID)	
EXAMPLES								
Literacy and numeracy	Improve language development	Increased attainment scores on standardised language tests	X% increased attainment scores on standardised language tests	Align speech and language services in terms of early intervention Examine literacy measures in schools Link literacy to community- level initiatives	February 2012 May 2014	HSE - Speech & Language services, Department of Education and Skills, Local Authority - Library Services, local schools, VEC, community services		
Pre-school year	Improve school readiness	Increased uptake of pre-school year (ECCE Scheme) Attainment of recognised standards pre-school regs Síolta	X% increased participation X% increase of services engaged in Síolta	Raise awareness of ECCE Scheme Support the implementation of Síolta		HSE, Department of Education and Skills, providers of pre-school services, DCYA		

OUTCOME AREA	OUTCOME AREA 3: Safe from accidental and intentional harm, and secure in the immediate and wider physical environment								
Priority Area (to be identified based on the local needs analysis)	Objective(s) (a brief statement of what the CSC wants to accomplish in relation to each priority area. The objective(s) should be measurable)	Indicators (the measure which will be used to determine whether the objective is being achieved. Can be a national indicator or one that has been developed locally)	Target	Activities (the activities that the CSC will undertake to deliver on its objectives)	Timeframe for completion	Lead responsibility	Link to other plans (e.g. documents from Government, State agencies or local organisations, such as RAPID)		
EXAMPLE									
Child pedestrian injuries	Reduction in the number of child pedestrians injured on our roads	% decrease in the number of child pedestrians injured on our roads	X% reduction in the number of child pedestrians injured on our roads	Increase number of speed ramps Increase number of pedestrian crossings Reduce speed limits	February 2012	Local Authority Gardaí			

ACTION PLAN FOR INSERT COUNTY CHILDREN'S SERVICES COMMITTEE								
OUTCOME AREA 4: Economically secure								
Priority Area (to be identified based on the local needs analysis)	Objective(s) (a brief statement of what the CSC wants to accomplish in relation to each priority area. The objective(s) should be measurable)	Indicators (the measure which will be used to determine whether the objective is being achieved. Can be a national indicator or one that has been developed locally)	Target	Activities (the activities that the CSC will undertake to deliver on its objectives)	Timeframe for completion	Lead responsibility	Link to other plans (e.g. documents from Government, State agencies or local organisations, such as RAPID)	
EXAMPLE								
Young people (15-18 year-olds) are in education, training or employment	Increase the number of young people in education, training or employment	% increase in young people (15-18 year-olds) in education, training or employment	X% increase	Provide advice, guidance and opportunities to young people so that they gain skills and knowledge in preparation for the world of work	Ongoing	Partnerships, VEC, NEWB		

ACTION PLAN FOR INSERT COUNTY CHILDREN'S SERVICES COMMITTEE OUTCOME AREA 5: Part of positive networks of family, friends, neighbours and the community, and included and participating in society							
							Priority Area (to be identified based on the local needs analysis)
EXAMPLES							
Active participation of children and young people	Children and young people are actively involved in the planning of services that are aimed at supporting them	Children contribute to the planning and development of a youth café in area and are named in documents relevant to the youth café		Plan and develop youth café(s) in area	12 months	HSE and other relevant agencies	
Bullying	Reduce the incidences of bullying in schools and in public areas where children and young people congregate	% reduction in the number of incidences of bullying reported by 12-15 year-olds	X% reduction in reported incidences in the last 12 months	Anti-bullying awareness campaign in schools, youth and community-based projects	12 months	Department of Education and Skills, HSE, Local Authority, Gardaí	HSE Family Support Plan

ACTION PLAN FOR INSERT COUNTY CHILDREN'S SERVICES COMMITTEE							
CHANGE MANAGEMENT							
Priority Area (to be identified based on the local needs analysis)	Objective(s) (a brief statement of what the CSC wants to accomplish in relation to each priority area. The objective(s) should be measurable)	Indicators (the measure which will be used to determine whether the objective is being achieved. Can be a national indicator or one that has been developed locally)	Target	Activities (the activities that the CSC will undertake to deliver on its objectives)	Timeframe for completion	Lead responsibility	Link to other plans (e.g. documents from Government, State agencies or local organisations, such as RAPID)
EXAMPLES							
Strategy and corporate business plan alignment (both national and local)	All local and national business plans aligned	Local and national business plans reflect CSC priorities	All CSC member agency plans are aligned	All agencies locally to ensure business plan alignment with CSC Action Plan Individual agencies seek to influence national corporate plans	12 months	Business Processes Subgroup chair and individual CSC members	
Commitment of senior CSC members to Working Together for Children initiative	Full engagement of relevant agencies at senior level	Full CSC membership at appropriate level CSC Coordinator in place	Membership attendance at CSC meetings is 90%	Attend meetings Identify and release resources for CSC work/projects	12 months	All agencies represented on CSC	

Other examples may include:

- information sharing protocols;
- data improvements;
- interagency training initiatives.

SECTION 7: MONITORING AND REVIEW

This section should include details of how the implementation of the Children and Young People's Plan will be monitored and reviewed locally by the CSC during the course of its 3-year lifespan.						
A standardised process for CSC reporting to the DCYA will be developed. It may be helpful for CSCs to think about how to link in local CSC reviews of the plan with national reporting mechanisms.						

SECTION 8: APPENDICES

Possible appendices could include: Terms of Reference for the CSC Membership of CSC subgroups	

