

An Evaluation of the Identification of Need (ION) Process Sligo/Leitrim/West Cavan and Donegal

Executive Summary

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UNESCO Chair in Children, Youth and Civic Engagement

CHILD AND FAMILY RESEARCH CENTRE

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Foreword

In the past decade or more, an international awareness has developed on the critical importance of a holistic, and therefore integrated, response to the needs of children and families. In Ireland, this perspective was reflected in a number of policy statements: the *National Children's Strategy* (2000), *Towards 2016* (2006) and *The Agenda for Children's Services* (2007). The appointment of a National Director for Children and Families Services, and the creation of the Department of Children and Youth Affairs under the Minister for Children are the latest steps towards the development of the 'whole child/whole system' approach.

Members of the Child and Family Research Centre (CFRC) at the National University of Ireland, Galway have played a key role in the development of this perspective and thanks are due to them for this evaluation, particularly to Dr. Cormac Forkan and Fergal Landy who carried out the research.

The Identification of Need (ION) process is a variant for Irish conditions of the Common Assessment Framework, first developed in North Lincolnshire and later implemented throughout England and Wales. The ION was developed in the counties of Sligo, Leitrim and Donegal over a 5-year period and has been operational for half of that time. Although it has now a solid structure, embodied in processes and forms, it continues to develop as a method of identifying and meeting the needs of children, young people and parents/carers.

The great majority of parents/carers and children who need assistance at one point or another are not caught up in situations involving abuse or neglect but are simply facing those adversities and difficulties which our society throws up.

The ION aims to provide earlier and easier access to assistance prior to social work's front door. Much unrecognised good work has always been done there. All that the ION seeks to do is to organise and coordinate that effort it in a network of services, whose bedrock is a common understanding that the well being of children and young people is a shared responsibility. It is a new space for new relationships between all practitioners who touch on children's lives including teachers, public health nurses, housing officers, pre-school workers, Gardai, community agencies, therapists, and others. In this space better working relationships and a common language of need open up multiple access points for families to services.

It is also a new space for families. Parents and children decide when to enter and when to leave the ION programme, who will support them and what actions are undertaken. They are recognised as experts in their own lives and active agents of change, whose strengths are at least as significant as the difficulties they may face. The expertise of those practitioners who assist them lies in enabling the families to tell their stories and to identify what actions and services may be of benefit to them. The strength of the ION lies in these simple relationships of trust between services and between families and services. These interactions not only facilitate solutions for specific children and young people, but also create a dynamic, reflective and constantly evolving model.

The ION is the collective product of many people and organisations, and it would be impossible to rank them in order of significance. Pride of place must go to those parents and children who placed their trust in the ION. After them, the order is purely temporal.

Special thanks must be given to the managers and practitioners of North Lincolnshire, who gave us free and unstinting access to their thinking and practice. Special mention must also be made of Professor David Thorpe and Dr. Suzanne Regan, whose passionate insight into the Common Assessment model and assistance in our first ION steps was invaluable. Many services from the statutory and community sectors contributed to that development and continue to run with the baton. The working group of agencies is the pulse of the ION. Among these agencies, Sligo Social Services Council must be singled out for hosting the ION in Sligo/Leitrim/West Cavan and for acting with the creativity that typifies the community sector.

The final words must be those of a parent:

'I used the ION process because I knew I could have all the players around the table – that there was a process. People at the table would know little bits about my son and me, and that it would form a bigger, better picture ... It allows people to see other perspectives and it also allows other programmes to learn more and broaden their horizons ... They can be very blinkered ... It allows people to take off their blinkers and see the wider perspective.'

> Colin Harrison Childcare Manager HSE, Sligo/Leitrim/West Cavan

About the Child and Family Research Centre

The Child and Family Research Centre (CFRC) at the National University of Ireland, Galway was established in 2001 as a policy unit and expanded into a Centre, launched by President McAleese, in 2007. The CFRC is a partnership between the Health Service Executive (HSE) and NUI Galway. In 2008, the CFRC was awarded the first UNESCO chair for the Republic of Ireland on the theme of 'Children, Youth and Civic Engagement'. The CFRC is widely recognised as being at the forefront of research, education and training in Family Support theory and practice. It engages in research, evaluation and service design relating to practice, policy and interventions in the lives of children. All research undertaken by the CFRC is strongly connected to applied work for children and families, and relevant to a broad range of stakeholders, including service users, policy-makers, politicians, service managers and front-line staff.

The CFRC is strongly concerned with best practice and engaged in the evaluation and delivery of interventions that are altering child welfare services and the market for research on children in Ireland. Through its partnership with the HSE, the CFRC is at the heart of policy, research and evaluation activities that inform the delivery system for child health and welfare, and is engaged in a range of assessments of new and internationally tested interventions and initiatives aimed at targeting social and economic disadvantage among children and families. The CFRC has expanded in response to need in the practice world and is closely aligned with the Atlantic Philanthropies programme of investment in sites and services to improve outcomes for children in Ireland in the domains of physical and mental health, education and community connectedness.

Across all its teaching, research and education activities, the CFRC's strong links to practice and expertise in the training and support of professionals engaged in service delivery has considerable value for the project proposed. Much of the CFRC's current portfolio of contracted work involves assisting services in designing interventions that are needs-based, flexible, accessible and delivered in partnership. In particular, the CFRC has extensive research and evaluation experience with complex community initiatives involving a broad range of stakeholders and agencies.

For further information, please see www.childandfamilyresearch.ie

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- the families their candid input provided real depth to the evaluation results;
- the Working Groups in Donegal and Sligo/Leitrim;
- the ION Regional Management Group;
- the Lead Practitioners and ION Chairs;
- other representatives from the Community, Voluntary and Statutory sectors;
- the ION Coordinators and ION Administrator for their endless help with the evaluation;
- **Dr. John Canavan**, Associate Director, Child and Family Research Centre, NUI Galway, for his continued support and expertise;
- **Ms. Emily O'Donnell** and **Ms. Gillian Browne** of the Child and Family Research Centre, NUI Galway, for working on the evaluation contract.

Executive Summary

Since the introduction of the Child Care Act some 20 years ago in Ireland, there has been considerable expansion and development in child and family services. Despite this positive move, some of the primary criticisms of service provision have been that there is an uncoordinated, incoherent strategy for integrated working, resulting in a failure to deliver timely support to families, a lack of clarity concerning roles, bureaucratic delay and inappropriate interagency referral. The development and subsequent piloting of the Identification of Need (ION) model in Sligo/Leitrim and Donegal has occurred against this backdrop. It was designed to respond to many of these key inadequacies in existing service provision. Given this, the overarching aim of this evaluation study was 'to assess the effectiveness of ION as a model of early intervention for children and families and to capture the learning from the pilot phase'.

The ION model is a multi-agency, early intervention process for children, young people and families. It enables parents and children, assisted by practitioners, to identify their own needs. It seeks to build on and formalise current practice. Practitioners in any agency are capable of undertaking an ION (identification of need). The essential quality is not professional training, but a helpful and respectful relationship with the family. It was intended at the outset that the ION be adopted by all agencies working with children and families. As a new way of engaging families 'pre-social work front door', the ION provides a vital element in the continuum of support available to children and families.

The ION was developed as a pilot initiative in the HSE Local Health Office Areas of Donegal and Sligo/Leitrim/West Cavan from January 2009 – December 2010. In June 2010, the Child and Family Research Centre, NUI Galway, was appointed as the external evaluator of the pilot phase of the ION process.

The central finding of this evaluation is that there is unequivocal support from stakeholders for the ION and for its continuation in the future. Families and agencies across the range of statutory, community and voluntary sectors warmly welcomed the key features of the ION, such as parental control over the process, its informal approach, multi-agency intervention and the emphasis on trusting relationships and practical support. The evaluation findings demonstrate the potential of the ION as a key player along the continuum of support and care provided to children and families, one which enhances and maximises the benefits and potential of both interagency cooperation and the effective timely functioning of key agencies. The simplicity of the concept, combined with the structured formalisation of committed interagency working, establishes the ION as a user-friendly effective model that has already established considerable uptake in its pilot phase and is well placed to expand and develop in the future.

The Identification of Need (ION) Initiative: Background

In 2004, the North Western Health Board carried out a needs assessment in the Letterkenny area. As a result, over 30 agencies and services began meeting in 2005 to discuss ways of working together to support children and families. A number of different models were considered and in early 2006 the group decided to adapt the Common Assessment Framework model, developed since 1998 in North Lincolnshire and now being implemented throughout England and Wales. The introduction of the Common Assessment Framework in North Lincolnshire had led to improved inter-service trust and cooperation, a growth in needs-led service provision to families, a reduction of 49% in child protection referrals to Social Work, a reduction of 64% in inappropriate (i.e. unlikely to be allocated) family support referrals to Social Work, and a reduction in multiple assessments (Ward and Peel, 2002).

The vision, organisational framework and common language (including forms and processes) for an Irish model were developed over the next two and a half years in discussions between representatives of service providers. In September 2007, a steering group was set up to oversee the development of a pre-implementation pilot. Building on the experience of North Lincolnshire's Common Assessment Framework (CAF) and on international research, the objective of the Irish Identification of Need (ION) process is to develop a framework and culture of early intervention, focused on meeting the needs and maximising the strengths of families. A needs-led service demands the integration of a wide range of agencies dealing with the whole spectrum of social provision. The ION is a process of multi-agency support for families: parents, children and young people. It is aimed at children and young people who are experiencing difficulties and are unlikely to realise their full potential. It can be used when a child's needs are unclear or if it appears that an effective response to addressing those needs is likely to require the coordinated support of a number of services. The ION process does not replace existing child protection systems or procedure; instead, it adds a component to the continuum of care and support available to children and families and is designed as an early intervention and prevention tool.

During the various consultations and meetings that informed the service design, a key decision was made that the ION would not be characterised as an assessment. This decision was informed by the fundamental commitment of stakeholders to a family-centred and family-led process. It was felt that the term 'assessment' was particularly associated with professional decision-making and the gate-keeping of access to services. In contrast, the ION seeks to facilitate families to 'tell their story' and identify their needs themselves with the active support of a practitioner with whom they have a trusted relationship.

The ION process began formally within the HSE in October 2008. Following an initial planning phase, the process was rolled out in January 2009 as a regional pilot initiative in the North West Local Health Office (LHO) Areas of Donegal and Sligo/Leitrim/West Cavan. The pilot phase of ION was funded through the HSE Innovation Fund: initial funding expired in December 2009, but two sequential 6-month extensions were granted by the HSE and the pilot phase was therefore extended until the end of December 2010.

The ION Model

The developmental process described above has led to the characterisation of a unique ION model. The ION is an agreed standardised approach to identifying children's needs for services, in partnership with parents/caregivers and children themselves. It is used in situations where a parent or someone working with a child or family has reason to believe that a child might not meet one or more of the 7 national target outcomes for children, as outlined in *The Agenda for Children's Services* (OMC, 2007). It has been developed for the use of families and practitioners in all services so that they can communicate and work with each other more effectively. It is of particular benefit in identifying and tackling difficulties at an early stage, before they become serious, but may also be used in more acute situations.

A key aim in the development of the ION model as a distinctive model of support was to move away from a predominantly forensic, risk-based way of working with families (often perceived as the dominant *modus operandi* for current social work practice) to a predominantly enabling and assisting model, with parents and children as the active agents of change. The ION is a process of gathering and interpreting the information needed to decide what help a child (and/or his or her parent/caregiver) needs. It provides a structure to help practitioners undertake and record this process, with the parent/caregiver and child, and decide with them what to do next.

The ION is part of a continuum of integrated services and is designed to achieve the following:

- Bring timely support to families, by providing methods to help practitioners who come into day-to-day contact with children and families (such as those providing ante- and post-natal services or those in early years settings and schools) to identify strengths, needs and solutions at an earlier stage.
- **Develop multiple access points to services**, by creating a network of all services that work with children and families.
- **Improve multi-agency working**, by enabling lead practitioners to maintain a single overview record of the needs and responses to a child in contact with several agencies; by embedding a common language of identification, need and response; and by improving trust, communication and information-sharing between practitioners and families, and among practitioners. Where a child is being supported by more than one

service, possibly involving specialist assessments, the ION provides a structure to summarise information from different services into a single simple format. The ION could become a key tool to support practitioners working in multi-service teams at primary care or network level.

• **Reduce bureaucracy for families**, by providing practitioners (including lead practitioners) with a fuller overview of a child's needs and responses, thereby reducing the number of assessments and inappropriate interagency referrals.

Completing an ION will provide practitioners with a good overview of a child's needs. In doing so, it will preclude the need for *some* assessments to take place. However, the ION cannot replace specialist frameworks (such as educational assessments or drug screening) and assessment tools, and it does not aim to do so in any way. In some cases, the ION may act as a gateway to these specialist assessments.

There are a number of non-negotiable principles that are universal to every ION process, namely:

- The ION is voluntary all aspects, from the decision to request an ION, to the nature of information to be shared, to the end point of the process, are controlled by the parents/caregivers and child.
- An ION meeting cannot take place without the involvement of at least one parent.
- The parents determine the agencies to be involved in the ION process.
- The ION process looks at the whole child in an all-round (holistic) manner, in the context of his or her family and environment.
- It takes into account strengths as well as difficulties and needs.
- It privileges the voices of the parent/carer and child, recognising them as experts in their own situations and assisting them to identify their needs and ways of meeting them.

The Evaluation of ION

During the summer of 2010, the Child and Family Research Centre, NUI Galway, was appointed as the external evaluator of the Identification of Need (ION) process. The overall aim of the evaluation was 'to assess the effectiveness of ION as a model of early intervention for children and families, and to capture the learning from the pilot phase'. In terms of objectives, the evaluation set out to examine the following four themes:

- Underpinning issues and approach: The emergence of the ION process was associated with a number of very significant perceived inadequacies in the current system of responding to the needs of children and young people. The Evaluation Team will document these issues in detail and examine the approach taken to address them.
- **Model development and implementation**: The Evaluation Team will investigate the nature of the development of the ION model and assess the fidelity of its implementation. Factors associated with its successful implementation, as well as any constraining factors, will also be examined in detail.
- **Model effectiveness and value**: A core part of the evaluation will be to assess the effectiveness of the ION model as an intervention. By engaging with the key stakeholders, the evaluation will ascertain the outcomes for and the experiences of the families involved. In addition, the evaluation will investigate the extent to which the ION process has been associated with changing practice among agencies.
- **Orientation of ION in the future**: The core learning gleaned from the evaluation will be used to examine the positioning of ION in the future and how this model of early intervention with children and families might be improved and strengthened. The potential of the ION model for use in other settings will also be considered.

The evaluation was built on a tripartite model. Firstly, the evaluators conducted a policy review, which examined relevant national policies and strategies, review of similar models of early intervention elsewhere in Ireland and information on the Common Assessment Framework, on which the ION model is based (*see Chapter 1 of this evaluation report*). Secondly, a review of case files from both Sligo/Leitrim (21) and Donegal (11) was conducted (*see Chapter 2*). Thirdly, a series of interviews was conducted with 53 key stakeholders in the ION process from Sligo/Leitrim and Donegal, sample consisting of parents, ION Chairs, lead practitioners, the

Regional Management Group, the Working Groups, representatives from the Social Work Departments and Local Health Manager, as well as representatives from non-referring agencies.

Findings and Recommendations

A summary of the core findings of the ION evaluation and associated recommendations is presented below.

1. DEVELOPMENT AND IMPLEMENTATION OF THE ION MODEL

During the primary research and planning phase (2005-2008), the ION model was developed and adapted to suit the local context in Ireland. After the initial development, there was a considerable degree of flexibility employed throughout the pilot phase of implementation. Ongoing adaptation of the model was a strong feature of the pilot phase. The model, process and associated roles of all key stakeholders were subjected to ongoing review as the model was tweaked and tailored for local implementation. The various channels for feedback to the Management team and rigorous processes for identification of risks and opportunities ensured that the developmental phase was dynamic, thoughtful and responsive to local and changing circumstances. The outcome of this phase was the development of a model and process at variance from that originally designed, but one which was specifically structured around what key stakeholders could work with without the loss of core principles or ethos. More significantly, the outcome was a model which more easily gained traction in each of the two project areas.

Overall, the evaluation findings demonstrate a strong degree of success in the pilot phase of implementation of the ION model. Key indicators of success include high levels of engagement from a wide range of agencies in the statutory, community and voluntary sectors reflected in participation in individual ION processes; high levels of uptake of ION training; a receptive response from parents; and an increase in the delivery of support services to families.

Using the rate of referrals to the ION process as an indicator, the implementation of the model achieved a greater degree of success in Sligo/Leitrim than in Donegal. Key differences in the rollout of the initiative in Donegal compared to Sligo/Leitrim were suggested by research participants as explanatory factors for the variance in levels of uptake. These differences included:

- the location of the ION Coordinator in Donegal was within the HSE, while in Sligo/Leitrim it was within Sligo Social Services Council Ltd;
- the work of the Sligo/Leitrim Children and Families Committee has embedded a culture of interagency collaboration in Sligo, which is less evident in Donegal;
- Donegal lacked clear and active line management procedures, whereas Sligo has a solid and active line management structure;
- the interagency Working Group in Sligo/Leitrim has functioned well (described by one participant as 'dynamic, changing and moving all the time'), while the Working Group in Donegal has functioned less well and has yet to achieve the momentum necessary to drive the initiative.

The ION has been developed as a model of support to children and families that exists along a continuum of support. One of the other key players along that continuum is the HSE Children and Families Social Work Department. The clear distinction between the ION initiative and the HSE Social Work Department is important both in terms of ensuring that involvement with ION is non-stigmatising for families and ensuring that referrers continue to refer concerns for the protection and welfare of children appropriately to the HSE under the *Children First* national guidelines. One of the findings that emerged from the evaluation was the lack of knowledge among social workers as to the exact nature of the ION. There were also issues surrounding a perceived lack of involvement of the Social Work Department in the development of the ION model (despite documented evidence to the contrary) and the need to develop a clear interface linking the ION to HSE Children and Families Social Work.

RECOMMENDATION 1

Given the difficulties with the Donegal Working Group, it is recommended that its membership and terms of reference should be reviewed.

RECOMMENDATION 2

It is also recommended that efforts need to be made to ensure that there is a full commitment and willingness from all agencies to engage with the ION process in Donegal. In particular, buy-in is needed among the HSE heads of discipline.

RECOMMENDATION 3

It is recommended that where possible the ION meeting should be held in a venue that is comfortable, relaxed and informal, and always agreed in advance with the parent or parents involved.

RECOMMENDATION 4

It is recommended that the ION initiative and the HSE Social Work Departments in the North West region work towards bringing greater clarity and formalisation to the interface between both parties.

2. EFFECTIVENESS AND VALUE OF THE ION PROCESS

'It has been fantastic, I'd recommend it to anybody. Put plain and simple, it's ... what I want. If I don't want to do something they suggest, it doesn't get done, which I think a lot of other people would feel better about, instead of ... we're going to do this, we're going to do that and you have no choice about it' (Parent)

"Without ION, you have to go to all the different agencies, tell the same story, fill out forms – there was a huge paper trail on [my child] ... but with all the paper on him there was still no solution. There was nobody that had a complete file on him [until ION]" (Parent)

Features of the ION model (such as parental control over the process, an informal approach, multi-agency support and an emphasis on trusting relationships and practical support) were found to be warmly welcomed by both parents and practitioners. Lead Practitioners stated that ION provides a supportive structure that enhances interagency working and adds to the continuum of care offered to families. Similarly, ION Chairs agreed that ION is a simple concept and one that formalises interagency working and gives confidence to families.

Families had opted into the ION process for a myriad of reasons, including:

- school-based educational issues, including refusal to attend;
- peer bullying;
- children having a low level of psychological well-being;
- children acting-out for no apparent reason;
- relationship difficulties between family members;
- poor social skills.

A common experience for parents was that they had tried to get help from several agencies prior to coming to ION, but nothing was effective or seemed to work. However, it was the experience of the vast majority of parents interviewed that this began to change for the better when they approached ION for help. There was a similar level of positivity expressed by the other key stakeholders about ION, with the general view being that it was heading in the right direction. Nevertheless, there was also a sense that it was early days in terms of demonstrating its

effectiveness and that more would become known about the ION process as it continued to grow and develop.

A wide range of short-term benefits arising from ION processes were identified by parents. These can broadly be categorised into outputs and outcomes for the young person and family. The *outputs* are actions or services that were put in place arising from discussions at ION meetings. The *outcomes* listed derive directly from those interventions. Process-based outcomes are also listed, i.e. those that resulted in an improved and more effective relationship between families and the agencies that support them. The following sample is a combination of information contained within the body of the report and additional data elicited from a subsequent case file review.

Direct outputs

- Allocation of summer scheme places for young people.
- Negotiation of reduced timetable between young person and school.
- Provision of additional resource hours and other forms of one-to-one support within school setting.
- Provision of tailored package of in-hospital treatment for young person.
- Interagency implementation of educational psychology assessment recommendations.
- Clearance of financial backlog of bills for essential services.
- Coordination of accommodation services.
- Provision of home visiting support.
- Provision of childcare support to enable parental respite.
- Local authority re-allocation of family to single-storey accommodation in response to physical difficulties.
- Provision of transport to school and other services.
- Provision of counselling support to parents and young people around drug and alcohol misuse.
- Provision of advice and information.

Direct outcomes

- Increased confidence and self-esteem arising from access to peer group-based activities.
- Increased performance in education.
- Retention in education.
- Physical relief through targeted medical intervention.
- Decrease in stress and anxiety levels in families.
- · Increased access to essential services (through provision of transport).
- Better management of substance misuse.
- Improved communication and relationships within families and between families and services.

Process outcomes

- A new sense of trust between parents and agencies.
- Development of a comprehensive understanding of issues facing young person, as 'bits of the jigsaw fall into place'.
- · Families benefiting from collective analysis, discussion and shared responsibility.
- Agencies developing a more holistic and strengths-based practice.
- · Parents not feeling blamed, but helped and supported.
- Provision of alternative options for young people.
- Provision of space for young people to engage directly with agencies and to air their concerns in an environment that is focused on where they are coming from.
- Young person feeling that agencies (finally) understood them and the issues they face.
- Creation of a space where parents felt welcomed and listened to.
- Sense of empowerment of parents in relation to managing responses to their own problems.
- Affirmation and validation of the issues families were facing.

Room for improvement was also noted. Some parents requested more support before the first ION meeting. There was also an acknowledgement across the different categories of stakeholders that despite early indications being positive, the effectiveness of ION as an early intervention model will best be demonstrated by an assessment of outcomes for families in the

longer term. This perspective is borne out by relevant literature. Demonstrating the effectiveness and value of complex and inherently long-term work is challenging, and new and innovative approaches must gradually develop an evidence base (Veerman and Yperen, 2007).

Furthermore, interviews with parents, Lead Practitioners and Chairs elicited anecdotal evidence of outcomes that were not systematically recorded on case files, which were primarily concerned with documenting individual processes to ensure effectiveness. Developing a more explicit approach to case planning and review, utilising intervention-level outcomes and indicators, would help to routinely document much of this positive work. Some measures could be used to supplement this process, in addition to intervention-specific measures and indicators of outcomes sought. A long-term approach to monitoring and evaluation could be developed to measure the impact of the ION initiative, particularly (but not exclusively) in relation to its impact on referrals to Social Work and other high-end statutory services.

RECOMMENDATION 5

It is recommended that the ION process should be more explicitly planned and outcomesfocused, making use of intervention-specific measures and indicators in relation to outcomes sought.

RECOMMENDATION 6

In order to develop the effectiveness of the ION model, it is recommended that consideration be given to the development of an outcomes-focused approach, such as logic modelling, capable of identifying short, medium and long-term outcomes and indicators.

RECOMMENDATION 7

A standardised system for aggregating data from the ION process should be developed. This system should be used to inform the development of the ION process and to feed into wider children's services planning. This could include the numbers of children and families worked with; nature of issues dealt with; number of support meetings held and whether attended by both parents and child or young person; quantification of services delivered; quantification of outcomes achieved; and documentation of unmet need due to gaps in service provision.

RECOMMENDATION 8

A long-term longitudinal study should be established to develop an evidence base for the ION process.

In order to assist the project in developing the framework for long-term evaluation, a number of specific recommendations in relation to case files were developed:

CASE FILE RECOMMENDATIONS

- To ensure quality and safety, it is recommended that there should be a periodic review/evaluation of the ION case files.
- If a lead practitioner cannot complete any part of the ION record form, an explanatory note should be included, stating whether it is not being completed because there is no relevant information or whether further information will be sought subsequently, or any other reason.
- The review of case files revealed that some sections on the ION record form are often not routinely completed. It is recommended that the ION Administrator tracks these issues in such a way as to make them available for focused training for all relevant stakeholders.
- The ION record form should be reviewed to ensure it is accurately recording the level of involvement or non-involvement of both parents. This should include the level of involvement of non-resident parents and should inform the plan to meet need.
- All ION case files should include a section for case notes, documenting all relevant communication or contact not covered by other sections of the case file.
- A closure summary should be used when an ION case file is being formally closed from an administrative point of view. This should include the reason for the decision to close, information on whether outcomes sought were achieved or not, and details of services that will continue to be involved if relevant.
- In the event that an ION request form is received but not proceeded with, the reasons for not proceeding should be recorded in a similar format to the closure summary (*see above*).
- It is recommended that the ION meeting form be reviewed. Consideration should be given to having a separate review meeting form and formulating the guidance, currently on page 2 of the meeting form, into template format.
- If a request to initiate the ION process originated from a parent, this should be routinely recorded in order to document accurately the help-seeking patterns of families. Currently, the extent of self-referral may be under-reported since it is the lead practitioner taking on the request who is documented, even where a parent has made the initial request.

3. ORIENTATION OF ION IN THE FUTURE

The ION initiative has been operational since October 2008 in Donegal and January 2009 in Sligo/Leitrim and there is undoubtedly a very strong consensus among the majority of stakeholders that it should continue in the future. In a relatively short pilot phase, the ION project has successfully introduced and embedded a new way of working into the continuum of care and support provided to young people and families. It has attracted the participation and commitment of a wide range of agencies and organisations across the community, voluntary and statutory sectors, and successfully nurtured interagency cooperation in the best interests of children and families.

There was a strong view that notwithstanding the present challenging resource environment, the ION must be appropriately resourced in order to maintain and expand its impact. The need for adequate resourcing of multi-agency initiatives is strongly borne out in relevant literature (CAAB, 2009; Sloper, 2004).

In addition to the need to address the specific objectives outlined above (on model development, implementation and effectiveness), a number of other recommendations are presented below that

also need to be considered by management. These are primarily concerned with the future funding, location and management structure of ION.

RECOMMENDATION 9

ION must be appropriately resourced in order to maintain and expand its impact, effectiveness and value. Addressing the recommendations in relation to model development, implementation and maintenance of a high standard of work practice will require full administrative support. The rigour in the ION process and procedures should not be compromised by a lack of adequate resources.

RECOMMENDATION 10

It is recommended that the ION initiative should be located within a broader service model for children and family services. Such a model could be cognisant of the continuum of care outlined in the Hardiker Model and the need for ease of access to services. There may be scope for local engagement on a common understanding of thresholds in respect of access to all services. This process needs to be cognisant of national policy, such as *The Agenda for Children's Services*.

RECOMMENDATION 11

It is recommended that the governance structure of the ION initiative should take account of the particular service context in Leitrim. This could take the form of a specific Working Group for Leitrim.

RECOMMENDATION 12

It is recommended that engagement with the ION process should become a key performance indicator in the service-level agreements of HSE-funded organisations involved in youth and family support work.

RECOMMENDATION 13

It is essential that ION is a flagship initiative of the Donegal Children's Services Committee (CSC). Therefore, it is recommended that consideration should be given to merging the ION Working Group in Donegal and one of the sub-groups of the CSC. There should be a free flow of information in both directions between the CSC and the ION Coordinator and Management Group, including frequent updates to the CSC on the implementation of the ION initiative. However, ION must first be adopted as the model of choice and must underpin the development of interagency family support work.

RECOMMENDATION 14

It is recommended that if the ION Coordinator in Donegal is to remain within the HSE, then the operational line management of this position should be clarified.

RECOMMENDATION 15

Following from the recommendation that ION be located within a broader service model for children and family services (*see Recommendation 10*), the level of engagement of the office of the HSE Child Care Manager with the ION in Donegal needs to be clarified.

The evaluation findings indicate there is significant work to be done to build protocols and linkages between ION and the HSE Social Work Department. The following recommendations address this need:

RECOMMENDATION 16

It is recommended that the HSE Social Work Department should review all referrals made to it and refer those deemed not to have reached a threshold of concern necessary to require Social Work intervention to the ION process.

RECOMMENDATION 17

It is recommended that consideration should be given to initiating the ION process in the aftermath of Social Work intervention in cases where child protection and welfare concerns have been addressed, but there is an ongoing need for support.

Training of the key stakeholders has been a central part of the ION process in Sligo and Donegal since its inception. To ensure continued success, a number of recommendations are outlined:

RECOMMENDATION 18

The roles of Lead Practitioner and Chair are central to the ION process. It is recommended that specific training, written guidance and capacity-building for these groups be further developed and strengthened. This should include guidance on dealing with conflict or sensitive issues. Consideration could also be given to group-based reflection on practice by Lead Practitioners and Chairs.

RECOMMENDATION 19

It is recommended that ION training should focus on developing understanding and capacity in relation to the identification of need, child development, child participation, outcomes-focused working, and partnership-working both in terms of between agencies and with parents.

RECOMMENDATION 20

It is recommended that after training has been delivered, ION needs to follow-up on those who attended training to further support them in making any necessary referrals to ION.

A number of recommendations specific to ION meetings and ION Chairs were identified, as follows:

RECOMMENDATION 21

It cannot be assumed that all parents or children have the necessary skills to participate in the ION process effectively. Therefore, every effort should be made to facilitate participation, drawing on best practice in this area, for all ION meetings with families.

RECOMMENDATION 22

Some parents talked about the reassurance and support they felt when accompanied to ION meetings by a family member or close friend. A core value of family support services such as ION is to enable families to build on their current informal social support networks as a means of addressing their issues. Therefore, it is recommended that the ION process considers the involvement of informal supports such as these, in all ION meetings, as a way of sustaining the initial progress made by ION with families.

RECOMMENDATION 23

It is recommended that the recruitment and support of ION Chairs for the region should be prioritised via the development of a specific strategy document.

Concluding comment

The overall conclusion of this evaluation of the ION process in Sligo/Leitrim and Donegal is that while the implementation of ION is in its infancy, there is substantial evidence of its effectiveness and value in terms of short-term and medium-term outcomes. In a short pilot phase, the concept and practice of ION as a new way of working has been embedded and accepted as a simple, user-friendly, resource-efficient and effective way of supporting children and families. However, insufficient time has elapsed to determine the extent to which long-term outcomes will be achieved.

The project set about creating an ethos of acceptance that the provision of care and support to children and families is 'everybody's business'. It has been successful in this aim – reflected in initiation and engagement in ION processes across the five sectors of Education, Community and Voluntary, HSE services, Crime Prevention and Other Public Services. It has gently nudged organisations and agencies from the confines of their specific remits to the broader one of responsibility for child welfare – reflected in the successful activation of multiple points of referral. By adding an earlier point of engagement along the continuum of support to children and families, it has opened up new options for children and families in need and for agencies in touch with them, free of the fear and stigma associated with the existing model of social care.

The strength of the ION model lies in its simplicity. By matching needs to existing services, it acts to the benefit of both services and children. Families benefit from the distinctive function of each individual agency being effectively targeted, while the quality of that service or support is maximised as a result of the additional information shared through the process. The added value of ION is provided through effective multi-agency collaboration. The development of a common understanding of problems, the creation of synergy and the development of collective interdependent solutions to problems have all proven to be a successful combination for families and services alike. There is evidence of improved trust between services, of better communication between services and families, of reduced duplication of effort for services and of increased satisfaction with services among families.

Critical stakeholders, including parents, lead practitioners, Chairs and key agencies, indicated a strong desire to proceed with and improve the ION initiative. The model is well placed to contribute to the implementation of policy in Ireland on delivering services to children and families. The ION initiative is a valuable start in delivering an early, preventative, timely and coordinated multi-agency response to families in need. Of all its novel characteristics, the placing of the family at the centre of the intervention is particularly promising and was remarked upon by all stakeholders. The participation of both parents *and* children as agents of change, acting to enhance their own well-being, is a fundamental shift when compared to the manner in which existing services are delivered and was also one of the key success factors in securing the participation of parents in ION processes.

The pilot phase of the implementation of the ION model in Donegal and Sligo/Leitrim /West Cavan has provided a valuable opportunity to develop, refine and adapt the Common Assessment Framework for implementation in Ireland. Consideration of the recommendations in this evaluation report, combined with the continuous process of review and adaptation which has defined the standard working practice of the Management Group, will be important, not only for the continued success of the model in the region, but also in determining the extent to which the model becomes adopted practice in other regions throughout the country.



ion identification of need

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