

Contents

1	About Tweddle
2	Our Services and Highlights
3	Tweddle Board Members
4	Leadership Report
6	Assessment & Intake
7	Residential Service
8	Practice Lead
9	PASDS
10	Psychology Service
11	Day Stay Program
12	In Home Service
13	Childbirth Education
14	MyTime
15	Prison Program
16	'Ballert Bubup' project
17	Corporate Report
20	Quality
21	Declarations and Compliance
22	Organisational Chart
23	Governance and Accountability
24	Donations and Life Governors

Our Vision

Healthy Families

Our Values

- Family focus
- Creativity & learning
- Cooperation & openness
- Treating people equally
- Respect
- Community connectedness

Our Purpose

Tweddle is a statewide early intervention and prevention health service.

Our purpose is to provide parenting support to families during pregnancy and with children from birth to school age with a focus on families in the north and west of Victoria. As a result of our work families:

- Acquire sound parenting skills
- Develop parenting confidence
- Improve health & early childhood development outcomes
- Enhance relationships and attachment
- Connect to support networks in their local communities

Families receive services that are collaborative, accountable, evidence based and subject to external evaluation and national accreditation.

Our highest priority is to provide assistance to families that are facing multiple challenges and are in urgent need of therapeutic support and intervention. These challenges are commonly underpinned by isolation compounded by health issues, addiction, family instability and violence, sleep deprivation and feelings of being unable to cope and the complexities that can arise from **financial stress, age, ethnicity and other factors.**

Our Services

As a government publicly-funded early parenting centre, Tweddle provides a range of services to families with children up to school age. Services are delivered in partnership with other organisations and directly in the community.

Tweddle services include:

- Assessment and Intake services
- Residential Parenting programs
- Parenting Assessment and Skill Development Service for child protection clients
- Infant and Perinatal Psychology Service – group and individual support and counselling
- Social support services and family therapy
- Childbirth Education program
- Community based Day Stay programs
- Parenting support for families with additional needs
- In Home support
- Prison programs
- Lactation support

Highlights of 2014-2015

- Ballert Bubup, an indigenous parenting program
- Partnership with MRC in delivering important programs for dads in prison with thanks to the Mary MacKillop Foundation
- Partnership with Sons of The West, delivering five Health Expos and five 'Dad Factor' presentations to hundreds of men across the west
- Change to our service model to offer in home support to vulnerable families
- Hosted the Australasian Association of Parenting and Child Health Conference
- Participated in Stronger Relationships trial
- Consumer participation group launched
- Parliamentary Secretary For Families and Community Services, Ms Andrea Coote launched Tweddle's new Infant and Perinatal Psychology Service and In Home Support Service
- Improving online referral accessibility and the pilot of a duty worker
- Priority partner in the Maribyrnong Council 'Family Strengthening Strategy 2015-2018'
- Working with the Family Drug Treatment Court

Tweddle Board Members

	Meetings Attended	Position	Professional Affiliations/Employment
Dr Nicole Milburn BSc Grad Dip Psych (Counselling)	6/6	Board Chairperson Chair: Clinical Governance	Clinical Psychologist
Ms Marie Howard BA', Grad Dip Early Childhood Studies, Cert IV TAA, Cert IV Frontline Management	6/6	Deputy Chairperson Chair: Ends and Research Committee	Business Consultant, Strategic Planning and Taxation
Mr Michael Wild Bachelor of Business (Accounting) CPA	4/6	Treasurer Chair: Finance, Audit and Risk Committee (July 2014 - November 2014)	Chief Financial Officer
Ms Melanie Telford Bachelor of Commerce/Arts Graduate Diploma in Applied Finance and Investments	6/6	Treasurer Chair: Finance, Audit and Risk Committee (November 2014 - June 2015)	Business and Finance Consultant
Ms Maureen Dawson Smith BA Dip Ed, MBA Health Administration, Masters of Counselling Accredited Mediator (IARMA)	3/6	Member	Consultant Local Resident
Ms Leharna Black Assoc Dip (Accounting) Bachelor Business (Marketing) MBA CPA	3/6	Member	Business Consultant
Ms Diana Nelson Bachelor of Engineering Post Graduate Diploma in Management Masters of Business Management	6/6	Member	Property Development
Ms Heather Johnson Way Bachelor of Arts (Sociology & politics) Bachelor of Social Work Master of Social Work Master of Business Administration	6/6	Member	Manager Social Development
Ms Doris Whitmore Bachelor of Business Accounting (BBus(Acc)) Bachelor of Business Administration (MBA) Certified Practising Accountant (CPA) Graduate of Australian Institute of Company Directors (GAICD)	5/6	Member	Director, Corporate Services
Ms Alexandra Hoskins Bachelor of Commerce Post Graduate Marketing Modelling Master of International Business Graduate of Australian Institute of Company Directors (GAICD)	5/6	Member	Business Consultant
Mr Bryce Prosser Bachelor of Economics (Hons), MBA Graduate of Australian Institute of Company Directors (GAICD) ,MCIPR	5/6	Member	Chief Economist, External Positioning
Dr Tam Nguyen PhD GradDip Sonography BSc/BEng (Biomed)	5/6	Member	Manager, Office for Research

Tweddle Board members also attend subcommittee meetings as well as working groups. These include:

- Governance & Executive Remuneration
- Finance, Audit & Risk
- Property & Redevelopment
- Ends & Research
- Clinical Governance
- Lobbying & Advocacy



Leadership Report

This year Tweddle celebrates its 95th birthday. We have experienced much growth and change which we feel places us in a position of strength for the next 95 years.

This year we welcomed The Hon. Jenny Mikakos, Minister for Families and Children and The Hon. Jill Hennessy, Minister for Health to the role of overseeing the health and wellbeing of families across Victoria. They arrive at their new portfolios at a time of significant change in how we understand early childhood development.

A groundswell of evidence underpinning the critical importance of a child's first 1001 days, from conception to age 2, is building. Cross party manifestos are being launched around the world, putting forward the moral, scientific and economic case for the importance of the conception to age 2 years period.

The (very) Early Years sector is discussing the evidence that suggests we change the agenda from one of school preparedness, to one that addresses the first 1001 days where a child's attachment relationships and brain architecture is built. From this point school readiness has a stronger foundation for success.

Jacque participated returned from a Study Tour and Conference lead by The British Association for the Study and Prevention of Child Abuse and Neglect (BASPCAN) in Edinburgh Scotland. The Study Tour group included delegates from across Melbourne including the Victorian Aboriginal Community Controlled Health Organisation, The Children's Court of Victoria and The Centre for Excellence in Child & Family Welfare.

While on the BASPCAN Study Tour, she was impressed by The Wave Trust, an English charity setting out to

reduce child maltreatment in the UK by at least 70% by 2030. Their research reveals how the growing trend of family violence can be reversed by effective early interventions, focusing on the family transition period from pregnancy to age 3. It suggests that providing programs which foster attachment, attunement and empathy in young children are the keys to success.

Research tells us, and it stands to reason, that the medium in which we grow our babies is important, and we need to be more aware of the chemicals in the womb. Putting it bluntly, mum's chemicals are the baby's chemicals and this not only includes nutrients and drugs, it also includes hormones.

Family violence is very stressful and stress can be toxic to unborn babies as the womb is flooded with cortisol. Babies incubated in cortisol are often born with symptoms of post traumatic stress. The hyperarousal triggers stress responses and difficulty calming down. Tweddle clinicians know that Infants can suffer distress, emotional and physical pain and overwhelming fear or terror in response to trauma such as witnessing family violence.

At Tweddle, many families being assessed for one of our parenting programs will disclose that they are victims of family violence. When parents experience family violence, so does the child. We know that with adequate therapeutic education and support, the healing process will influence parts of the child's brain altered by developmental trauma. The wonderful thing about babies is that they grow so fast and with



“ I was treated very gently and responded to personally to meet my needs. I felt comfortable about why techniques are used and comfortable to have a cry. ”

and good therapeutic care they can recover very quickly.

We at Tweddle specialise in these very early years. Identifying where disrupted attachment, family violence, mental illness and other complex family challenges are impacting on a child's development can be the difference between that child fulfilling life potential.

This year we were delighted to introduce an expanded services model that meant that we could support families at home. Outreach is a critical community service that connects families not able to attend our residential or day stay programs to our early parenting specialists.

Partnerships are the cornerstone of any organisation and Tweddle is no different. Tweddle were thrilled to partner with Sons of the West, the Western Bulldogs Football Club initiative to improve the health outcomes for men living and working in the west. At Tweddle we have a commitment to include dad's in our work as we know that they are often marginalised from the world of babies and are vulnerable when a new baby comes into the family. We attended five Health Expos and delivered five one hour 'Dad Factor' presentations to hundreds of men across Brimbank, Melton, Hobson's Bay, Wyndham and Maribyrnong. We look forward to continuing this important partnership in 2016.

We value our partnership with Victorian Aboriginal Child Care Agency (VACCA) which saw our teams work together to co-design a program called 'Ballert Bubup'. The program aims to give Boorais (Aboriginal word for infant) a healthy start to life. The program builds Aboriginal cultural competence and respectful partnerships using a culturally and trauma informed practice model.

In addition the work that we have undertaken with the Family Drug Treatment court is innovative and is evidence of how the work of Tweddle is a key consideration of a range of services and strategies. It clearly highlighted the voice of the infant needs to be considered at the same time as dealing with the challenges experienced by parents.

Welcoming new board members and staff provides the organisation with the opportunity to experience different perspectives and ideas. This year we farewelled Board members Ms Susan Gannon and Dr Carl Orkin who both made important contributions to Tweddle's growth. We welcome new board members Mr Bryce Prosser, Ms Alexandra Hoskins, Dr Tam Nguyen and Ms Doris Whitmore. As we proceed with scoping new building plans, we also look forward to gaining strength through new skills, dynamics and enthusiasm.

One of our strategic priorities is to deliver services in areas of most need. The launch of our fee based In Home service has seen our team visiting families across metropolitan Melbourne as well as supporting families in our private Day Stay clinic. We have introduced an additional community based location for our Psychology clients and are able to provide family therapy support to families at homes.

We look forward to building on our achievements and developing our services through innovative fee for service opportunities, community partnerships and building the capacity of staff.

Dr Nicole Milburn
Chairperson, Tweddle Board

Ms Jacquie O'Brien
Chief Executive Officer

Assessment & Intake

A new Department of Health and Human Services delivery model allows Tweddle the flexibility to support families residentially, at home and in a day stay environment.

The option to provide our specialist support to families at home, especially for families facing complex challenges, has been well received. These issues include families facing mental health challenges, addiction, family violence and child protection involvement.

Tweddle's Assessment and Intake team now have a broader range of support packages available for families challenged by early parenting.

Assessment and Intake is the first contact a family has prior to care planning and triaging into a Tweddle program.

The team consists of three experienced health professionals who provide an evidence based telephone assessment.

A Duty Worker was introduced in April 2015 to support the triaging of families. The clinician triages referrals and facilitates a responsive, targeted approach for families across the spectrum of vulnerability. The role is intended to ensure skilled assessment and management of risk is experienced by referred families and the organisation.

Assessment and Intake continually review elements of its program to ensure that it is responsive to stakeholders and government directives for Early Parenting Centres. Our focus as always remains on supporting parents with emerging and existing challenges.

Number of completed Assessment Services

2013 - 2014

1664

2014 - 2015*

1504

2013 - 2014

2239

2014 - 2015*

2209

Total Assessment and Intake Services

Residential Program

Tweddle's residential program has seen a number of exciting changes throughout the year. A change to our Department of Health and Human Services (DHHS), Health Services Agreement saw our capacity to support families extend beyond our Footscray premises and into the community and family's homes. This new flexibility is a welcome addition for many, especially parents with large families facing complex challenges. Our residential program now provides an opportunity for families to engage with our therapeutic 5 day program providing a richer experience for all.

A move to team-based care has meant that staff now provide care to the same clients during an admission, providing continuity and consistency to the clients and staff. This is critical as the vulnerabilities of our families have increased due to the reduction in numbers of families we now accommodate.

Tweddle balances supporting parents with existing and emerging challenge and while in the unit, parents are supported by a multi-disciplinary team of Registered Nurses, Early Childhood Professionals and Psychologists. Families and staff work in partnership to set goals that meet families' specific circumstances and ensure the goals are realistic.

Our health checks for both the Residential and Day Stay families, includes screening of mothers and fathers for depression, anxiety and stress. Admission to the unit provides an ideal opportunity to explore emotional issues that may otherwise go undiagnosed, and we have seen a marked increase in the number of parents referred to our Psychology team.

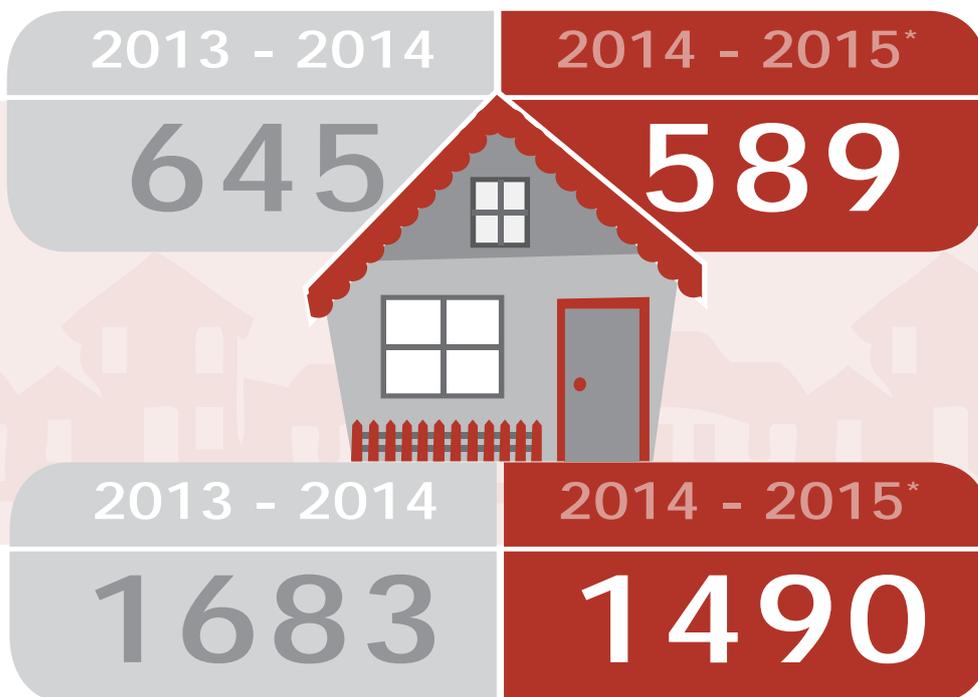
Our newly structured program for parents and children enables families to have the opportunity to explore new concepts. Circle of Security helps parents to tune into their children. Families learn about baby cues and connections, responsive parenting, brain science and resilience, self-care and importantly, how to bring new knowledge and skills gained at Tweddle to life at home.

We promote the importance of play, reading and singing with the overall goal of cultivating attachment and strengthening the parent-child relationship which has long lasting beneficial outcomes.

We are in the third year of our Parenting Confidence research project, which was funded by The Alfred Felton Bequest and uses the Karitane Parenting Confidence Scale tool. Parents of children staying in our Residential unit are asked to score their parenting confidence pre and post admission. Families are followed up six weeks post discharge and we are able to measure and compare scores and we continue to embed the knowledge gained into our clinical frameworks.

Our preadmission meetings give families the opportunity to discuss their stay and what they would like to achieve. We also work closely with Western Melbourne Child and Family Services Alliance, Cradle to Kinder, Choices and the Department of Health and Human Services to deliver priority beds for vulnerable families.

Total Number of Residential and In-Home families



Total Number of Residential clients



Practice Lead

Tweddle has approached clinical practice this year with creativity and innovation. Clinicians come from a multitude of disciplines and bring with them a range of skills in early childhood development, maternal and child health, social support and mental health that are highly valued in our delivery of holistic early parenting services to families who seek our support.



Our work at Tweddle is underpinned by a Practice Framework which is represented diagrammatically as a 'house'. The

foundations represent organisational philosophies, beliefs, values and our vision. The 'house' contains the models and interventions that guide our practice. The Framework outlines the outcomes we seek to achieve with our families and the theories and perspectives that guide our practice.

We continue to build practice on contemporary research. This year has seen a greater consolidation of a relational model of care based on attachment theory with the infant as the focus of our intervention. Clinicians aim to emulate a secure base for families they work with by being present and responsive. They model this stability and security for parents so that parents can experience a sense of wellbeing and containment through being cared for in their distress, and can themselves learn to be a secure base for their children by being curious about what their child might be experiencing when he or she is distressed.

With the help of smart device and tablet technology, clinicians also now commonly use video interactions between caregivers and children, offering valuable feedback to enhance their connection. This has been well received by families who have indicated their appreciation of new insights into the relationship between themselves and their children as well as having the opportunity to make changes to support their children's needs. Whilst initially camera-shy and awkward, parents often end the program requesting a copy of these interactions as a memento of their parenting journey.

Parent and children's groups have become embedded as a more integral part of the residential program this year. Parent group programs focus on equipping parents with knowledge on infant and child cues, the importance of being a secure base for their children and the importance of remembering to care for themselves as well.

Children's groups run every morning and are aimed at helping parents understand the importance of play to children's development as well as a vehicle for secure attachment.

"The sound of nursery rhymes accompanied by our "infant orchestra" with their triangles, maracas and bells never fails to bring a smile to the most exhausted parent in the room."

During these sessions, parents are encouraged to experience connections with their children through touch, facial expression and fun. Parents often remark how easy it is to forget the joy that comes from delighting in their child's mastery of a new skill or simply their toothless grin, when life becomes heavy with exhaustion, worry and poor health. For clinicians, it is a reminder of the privilege of being able to support young families in the beginning of their parenting journey and offering opportunity for change.

These are all signs that our Practice Framework is shaping the delivery of our services and relationships.



// Having my partner here at Tweddle made it even better but it has been so good to achieve my parenting goals, it was like having your own village to help. //

PASDS

Parenting Assessment & Skills Development Service

Tweddle's Parenting Assessment and Skills Development Service (PASDS) works with parents who have children between 0 and 3 years who are currently involved with the Department of Health and Human Services (DHHS), child protection.

The program aims to undertake an assessment of parenting competency which includes the full range of factors that may compromise the safety of an infant including; the impact of substance misuse, family violence, mental illness or intellectual disability as well as parenting skills that may limit healthy development.

The assessment of parenting capacity and competency considers whether new skills can be developed to nurture and meet a child's intellectual, emotional and physical needs. This work is guided by goals set by the parent, the PASDS Care Coordinator and the DHHS protective worker.

The PASDS staff consider areas of concern or difficulty and attempt to find ways to help address them. Together, Tweddle and each family undertake an assessment focusing on some of the following areas:

- the child's developmental, physical, social and emotional needs
- the family history and the impact/influence this has on current family/individual functioning
- the parenting capacity - in which areas is support needed and which areas are functioning well
- the family and external supports

A skills development program is then created and implemented to build on areas of strength and address any areas of concern.

2013 - 2014

129

2014 - 2015

114

Total Number of PASDS clients admitted to program

Psychology Service

The Psychology Service at Tweddle has been an established part of our residential program for over 10 years. The service provides a range of mental health and psychological interventions focusing on the most vulnerable families seeking support at Tweddle. In addition, the psychology team provide an important leadership role in supporting all Tweddle staff to better identify, and respond to, those families who most need a mental health intervention.

The range of issues impacting on Tweddle clients can be seen in high prevalence disorders such as **depression** (approximately 44% of clients seen) and **anxiety** (63%). **Exhaustion** (68%), **adjustment issues** (65%), **underdeveloped parenting skills** (48%), **attachment issues with one or more children** (20%) and **couple relationship issues** (45%) are identified by clients as key issues.

Consultations with clients vary depending on clinical presentations, client needs and may consist of an emotional health assessment and support, parent infant dyad support, case management, psycho-education, short term cognitive behavioural or mindfulness strategies, safety plans where risk is an issue, counselling support (e.g. debriefing, reframing, normalising) and discharge planning.

Any client that is provided with a referral by the psychology department receives a follow up call approximately 3 weeks post admission. Results from this call indicate that over 90% of clients report they benefited from the psychology consultation and approximately 80% report that they have implemented strategies discussed in the consultation.

These factors, taken together, highlight the important work the psychology service is doing in providing a space for clients presenting at Tweddle to consider other factors that may be impacting on their parenting capacity. These may not be the issues that drive parents to make contact with Tweddle but they can certainly impact on parenting capacity and outcomes for the children.

Infant & Perinatal Psychology Outpatient Services

The official launch of the Tweddle Infant & Perinatal Psychology Service was in August 2014. Since that time we have developed our service model, recruited extra staff, provided information sessions and participated in other marketing opportunities, developed clear referral pathways and liaised with referrers in the community. In addition, we launched our Williamstown psychology service. This has been an exciting place based initiative and we look forward to building local relationships in Hobsons Bay and meeting the needs of clients in that community.

As a result of this work we have seen twice as many clients in the outpatient service in this last financial year than the previous year. This service continues to grow and we have plans to further extend this service by offering group programs supporting parents with parent-infant dyad, relationship based intervention programs next year.



Community Programs

Day Stay Program

Tweddle currently provides Day Stay programs in four locations: Maribyrnong, Geelong and in partnership with Djerriwarrh Health Service in Bacchus Marsh and with Terang Mortlake Health Service.

All programs focus on infant health, development and the promotion of attachment relationships. Programs provide interventions and practical strategies to support parents sleep settling, feeding, importance of play and behaviour management. Parents can also get support for depression, anxiety and transitioning to parenthood.

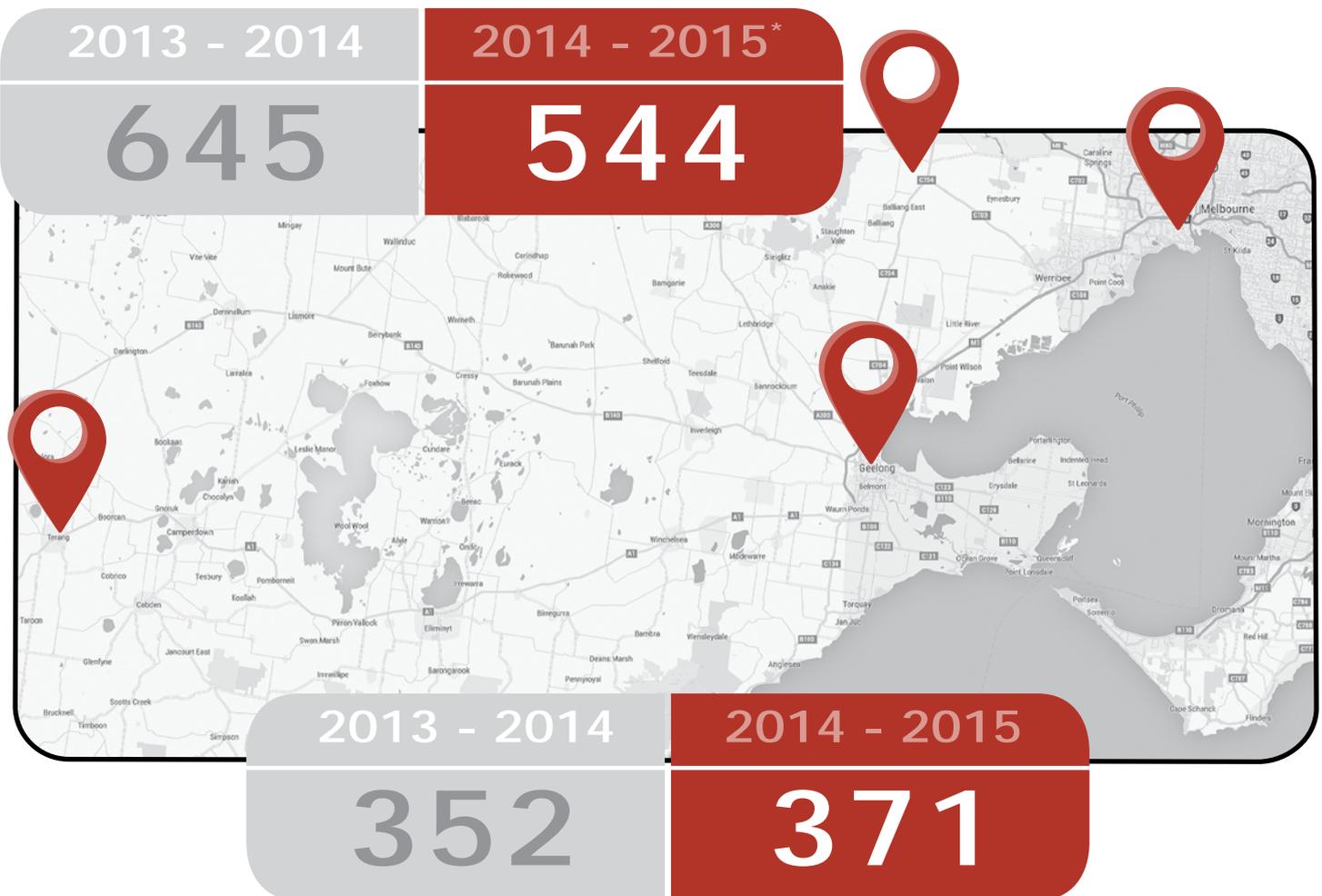
The Maribyrnong and Terang Mortlake Day Stay programs provide support for parents and their 0 - 3 year old children.

Our Geelong and Bacchus Marsh Day Stay programs cater for parents of infants 0 - 12 months.

A new service delivery model has allowed us to offer additional support to those more vulnerable families. A new two day Day Stay program enables families to practice strategies learnt in the home environment and then return for further reinforcement for support with other emerging difficulties.

Demand for the program continues to grow. Given the evidence supporting the provision of place based services as being most accessible and beneficial for parents, partnership opportunities are currently being explored to support families in other areas.

Total Number of Day Stay (Geelong and Maribyrnong)



Total Number of Day Stay (Collaborative)



In Home Service

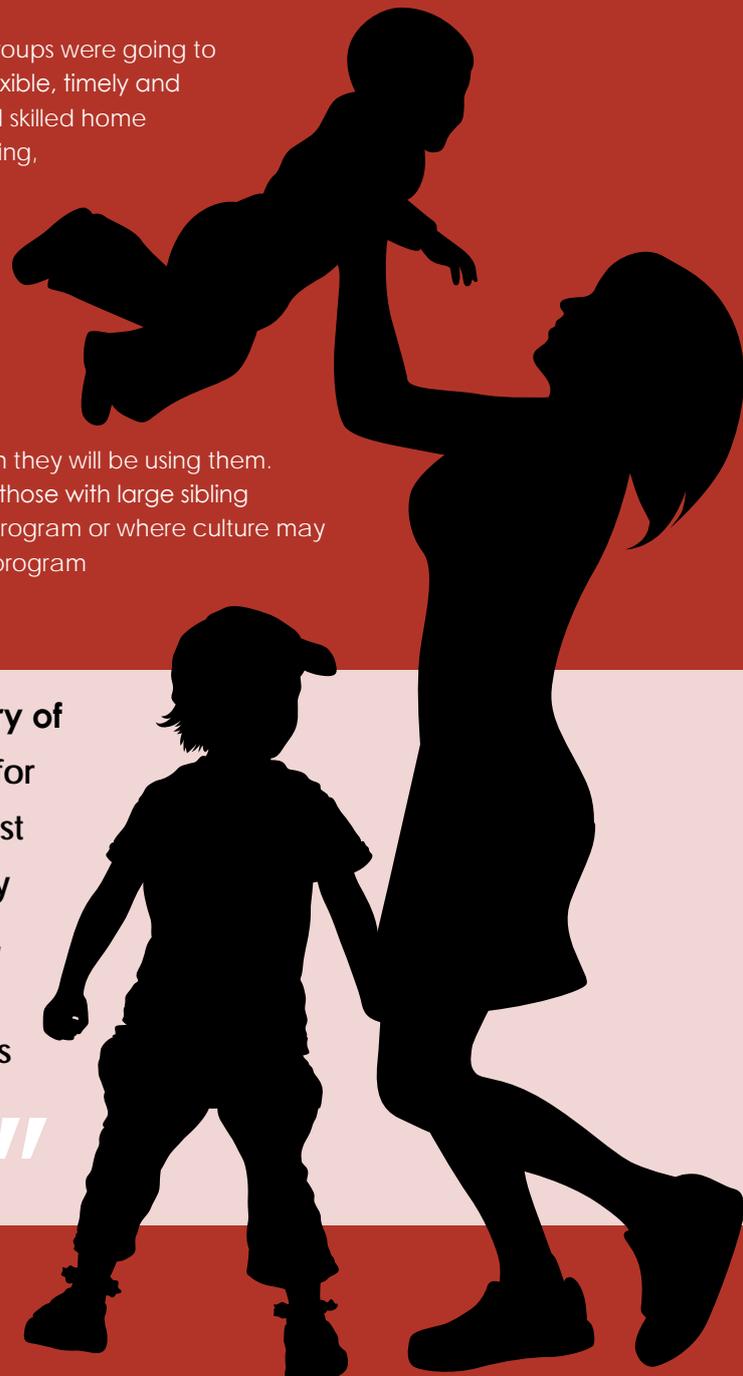
One of the most exciting innovations to service delivery for Tweddle has been the introduction of its In Home Service and Private Day Stay program in August 2014. This was in recognition of government reforms which challenged parenting support programs to respond holistically to families with multiple and complex problems, to better support them to make and sustain changes, and ultimately, to best meet the needs of vulnerable children.

Services are dealing with issues of parental mental health, substance misuse, learning difficulties, and domestic violence impact on children's outcomes through their effect on the parents' capacity to provide care for their child.

A more inclusive service system was needed if disadvantaged groups were going to access early parenting services. The In Home Service provides flexible, timely and intensive one on one parenting support delivered by trained and skilled home visitors. The program helps families seeking support for sleep settling, breastfeeding problems and child behaviour.

Eighteen vulnerable families have accessed our funded In Home Service since its inception in April 2015. The In home package includes two visits, follow up support and referral to community support.

For many families the option of an in home program provides greater ability to learn new strategies in the environment in which they will be using them. It also makes accessing a service easier for families, for example those with large sibling groups who may otherwise struggle to come in for a residential program or where culture may be a barrier. Having this option has also relieved the residential program wait list making it more accessible for vulnerable families.



// A family with five children and a long history of Child Protection involvement was referred for parenting support in relation to the youngest child. Due to multiple risk factors the family was eligible for a residential stay, however, given the large sibling group, she was offered the option of home visiting. This has enabled a more intensive support for the family to address the needs of all siblings. //



// My partner found the information very helpful and informative. //

Childbirth Education

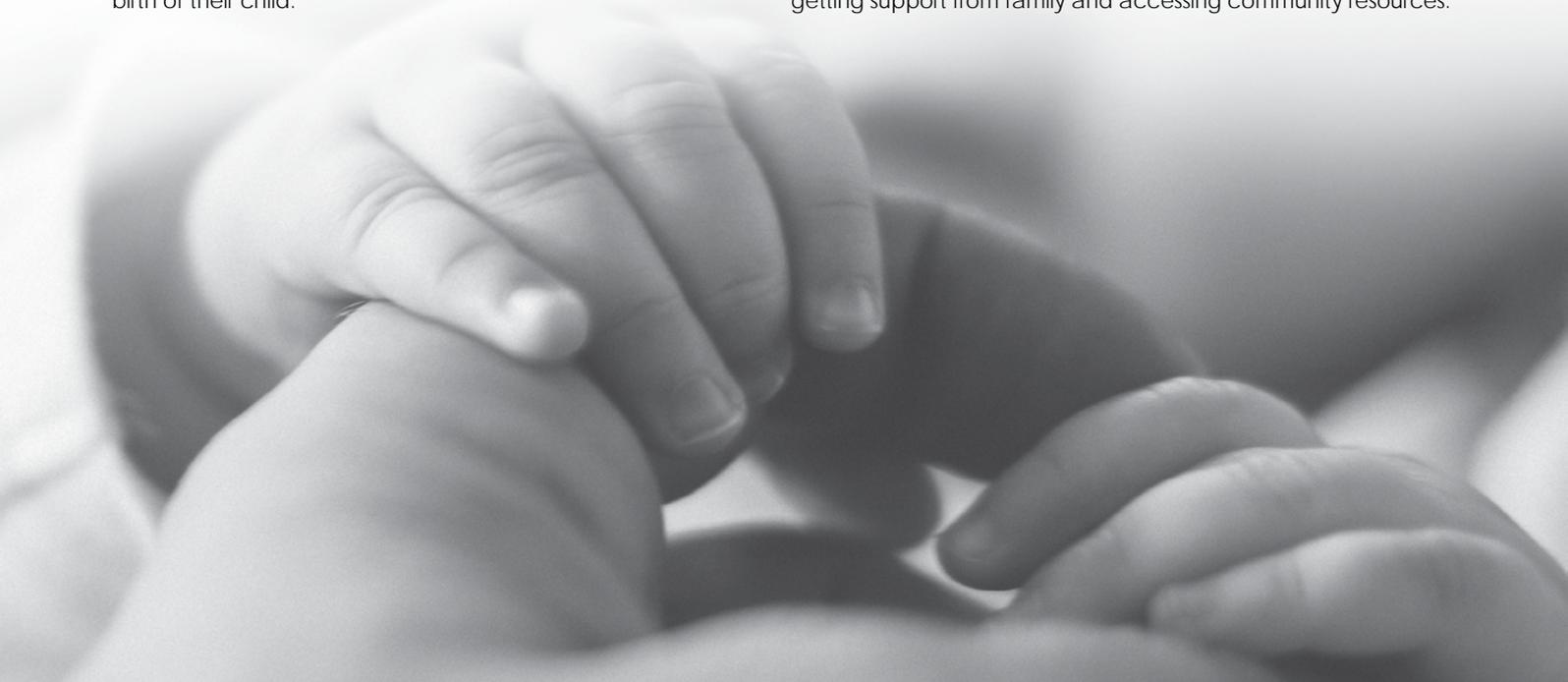
In partnership with Western Health, Tweddle offers a Childbirth Education program in a relaxed, community based setting. The classes are conducted by dedicated midwives with additional training as childbirth educators to provide the best care for parents before and prepare them for after the birth of their baby.

With the primary goal of a healthy mum and baby and informed choice, educators provide a comprehensive education program that is interactive and engages expectant parents in activities to prepare them for the birth of their child.

Topics such as the progress of labour, when to go to hospital, managing labour (positions, pain relief, role of the support person, interventions) and early attachment relationships for optimal wellbeing are explored.

Parents also discuss breastfeeding, babies first days, SIDS sleeping, tummy time, wrapping, baby cues and understanding your baby.

The important topic of relationships is discussed. Themes include parenting and taking care of your relationship, changes in roles and functions, making time for each other, realistic expectations, getting support from family and accessing community resources.



Tweddle provided education to 747 expectant parents.

Parents were overwhelmingly positive about their experience of the classes:

“Very useful and valuable information. I feel more prepared for pregnancy.”

“Feeling more comfortable and confident about taking care of my baby.”

“There was a good mix of topics and a perfect amount of time spent on each.”

Community Programs

MyTime

MyTime is a parent and carer support group for families with a child up to sixteen who has a disability, developmental delay or chronic medical condition. Families are given the opportunity to develop new skills and meet new friends. It is especially important for families to feel connected with others that understand the rewards and intensity of the caring role. MyTime is all about community and support.

Tweddle is contracted by the Parenting Research Centre (PRC) to deliver MyTime as part of The Department of Social Services (DSS) funding. The last 12 month period saw considerable uncertainty for the continued funding of the program. This was a difficult time for families and staff supporting these families nonetheless this did not sway the commitment of all in ensuring that the programs continued to provide vital support during this period. It was with great delight that in March 2015 it was announced by PRC that DSS funding for MyTime had been secured for the next 5 years.

As a coalition lead agency, Tweddle runs programs in six locations: Avondale Heights, Point Cook, Altona Meadows, Werribee Gold, Wyndham Vale and Footscray. The Footscray group is unique in that there are currently 4 different languages being spoken at any given session. The group is supported by a bilingual Play Helper and provides an opportunity for parents to practice their use of English in everyday conversations.

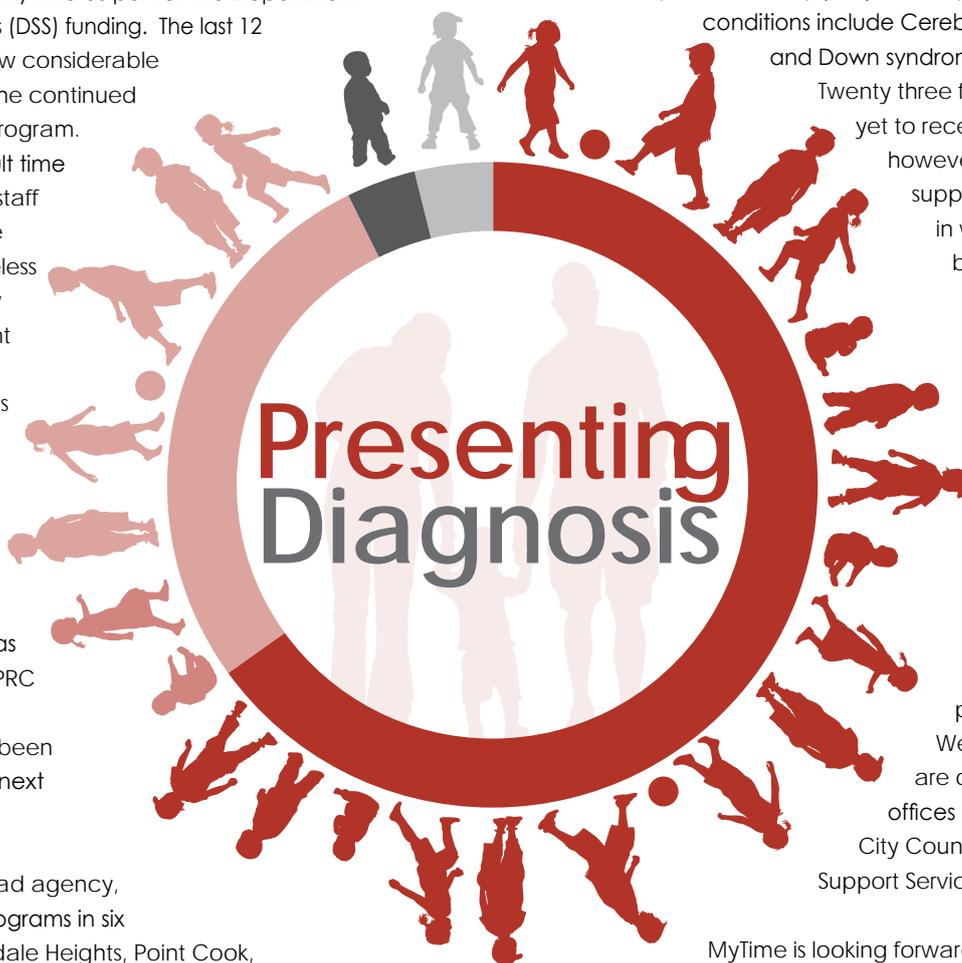
Throughout the year the number of parents registered (210) has remained steady as have attendances. In addition to our support groups, over forty families attended two Tweddle workshop days in the Western Region featuring key speakers from disability support agencies.

Overwhelmingly, the main presenting diagnosis of the children are: Autism Spectrum Disorder (242) and Developmental Delay (103). Other presenting conditions include Cerebral Palsy (13) and Down syndrome (14).

Twenty three families were yet to receive a diagnosis however are seeking support of MyTime in working through both the challenges of navigating the disability service system and the emotional impact of the process of diagnosis.

Two Art Therapy pieces that were completed by parents at the Werribee Gold group are on display at the offices of the Wyndham City Council Residential Support Services.

MyTime is looking forward to the year ahead to further develop relationships with Specialist Schools and local councils to ensure that there is the greatest reach for some of our most vulnerable community members.



Presenting Diagnosis



Prison Program

Tweddle's work supporting parents in prison continued throughout the year with programs at Dame Phyllis Frost Centre and the introduction of a men's parenting program 'Dad's From A Distance' at the Melbourne Remand Centre. This was made possible with the support from Dame Phyllis Frost Centre and The Mary MacKillop Foundation.

Specific to the Positive Parenting Prisoner Program is recognition of the significant impact that incarceration has on the relationships and bonds between the parents in prison and their children. The emphasis on building relationships has a demonstrated benefit to participants in maintaining positive connections with their children during their imprisonment, and preparing them for the challenges of reintegrating into their children's lives post release.

Early parenting education is a vital component of supporting parents to raise their young children whilst incarcerated. Tweddle's Prison Program starts by evaluating each parents' parenting confidence, skills and feelings. Program objectives centre on enhancing parenting skills and strengths, problem solving and understanding a child's developmental needs. Other important elements involve learning about attachment, age appropriate parenting strategies and the family experience when a young child is visiting prison.

The ability to recognise and respond to their child's needs is assessed. These include identifying distress, social and emotional needs and fostering cognitive growth. We work with parents around clarity of cues and child responsiveness to develop a greater understanding that these are essential to positive health outcomes.

Tweddle offers both individual and groupwork sessions at both prisons. Individual satisfaction surveys are given to all participants following each program with overwhelmingly positive feedback being received this year.

Tweddle is represented on the Children In Custody Working Party co-chaired by Commission of Children and Young People(CCYP) and Department of Education and Training(DET). In partnership with DET and CCYP, Tweddle is currently providing a Student Placement for a research project designed to review and revise the current available resources and literature regarding parenting support and education for suitability in a custodial setting.

// **Discussing parent self-care was so important. I do feel run down with my 3 month old. What you said is true, I need to look after myself so I can look after my baby properly.** //





'Ballert Bubup' project

The 'Ballert Bubup' program has been an incredible opportunity for Tweddle to provide support for aboriginal families. In partnership with the Victorian Aboriginal Child Care Agency (VACCA), the 'Ballert Bubup' program aims to give Boorais (*Aboriginal word for infant) a healthy start to life through cultural strengthening and connection.

The aim is:

To improve the health, development, social and emotional wellbeing of Aboriginal children, from pre-birth and during their critical first years of life, through the delivery of a group-based cultural strengthening program for young, pregnant Aboriginal women and mothers (as well as their partners) living in the north and west metropolitan region.

Tweddle and VACCA have co-designed the antenatal and postnatal programs and has commenced co-delivery of the program in the Hume region in May 2015 to continue over a period of 16 weeks (8 weeks antenatal and eight weeks post natal education). During each session participants received health education in an informal manner in a group setting and shared lunch, after which they worked on a culturally sensitive and appropriate activity guided and mentored by a respected Aboriginal Elder.

This is a two year project and a further program will be co-delivered in Wyndham in 2016.

Ultimately it is hoped that the project will inform the production of a comprehensive, tailored training package for delivery to health and early parenting professionals to build Aboriginal cultural competence and respectful partnerships using a culturally and trauma informed practice model. LaTrobe University has been engaged to undertake a process and outcomes evaluation of the project.





// Thank you to all the staff who assisted me during my stay at Tweddle. I came in broken but I am leaving with great hope. The friendliness and care shown towards me and my son made our stay much easier. //

Corporate Report

Infrastructure

The demands on the building and the needs of our current services clearly show us that we have outgrown the aging facilities.

As such, a focus of our work has been on the consideration of facilities needed to support the work of Tweddle into the future. We have spoken with a wide range of people (consumers, staff and key service providers) to begin the very exciting process of planning for the future. In the meantime, we have new service locations in Williamstown and Geelong. We have increased our security measures and continually undertake site improvements at Footscray.

Information Technology

A highlight was the rollout of the intranet. This allows staff to be informed of what is happening across the programs and is a great access point for resources and information that assists our staff to better serve our clients.

Tweddle continues to work in partnership with QEC to improve and enhance the customised patient information system Tweq. Developing Tveq's capabilities to support Tweddle's services is under review in order to improve reporting requirements.

Key highlights in IT this year include:

- The development implementation of cloud based Rostering, Accounting and Human Resource software
- Website improvement
- Continuation of Tweddle social media presence
- Upgrades to network equipment
- Introduction of IT tablets to the work place
- The development of Rosterlive



Corporate Report

Finance

It has been a busy year embedding our new accounting, rostering and Human Resource systems. Tweddle has achieved a small net surplus in our delivery of the Health Services Agreement. Detailed reporting on a monthly basis is completed and the Finance, Audit & Risk Committee meets regularly to review the financial reports and to make recommendations where required to the Board. The committee has provided invaluable guidance throughout the year.

Achievements in finance for the year were:

- Introduced a new HRM system to manage employees and staff training
- Reviewed Investment Portfolio
- Risk management workshop and the development of the risk management framework
- Renovated facilities and made important capital expenditure decisions which will drive improved future service delivery

Current activities include:

- Implementing a new accounting package
- Implementing a new rostering system
- Electronic time and attendance
- Online payroll record management and reporting
- Increased analysis of staff and staffing profiles required to meet needs

The Finance and Corporate Services teams are focused on increasing efficiency, reducing the administrative burden on clinicians and providing clear information for decision making.

Communications & Community

Together with Tweddle's website, Facebook and Twitter continue to provide families with access to parenting resources and an immediate and effective (and if necessary private) way to access our services. Every month thousands of people view our social media platforms.

Our quarterly newsletter, accessed by subscribing on our website, is seen by people across Australia. In promoting our 'Giving Tree' and 'Wall of Support' fundraisings project to raise funds for Tweddle's services and new building plans, we received a message from a grandmother in Perth who wanted to honour her mum who had trained in the 1940's as a Tweddle nurse. Twitter provided a platform for an Irish grandmother to acknowledge the support we had given her nearly 40 years ago.

In partnership with The Smith Family and with support from Brimbank's Playgroup Development and Community Care programs, we launched the inaugural 'Books for Brimbank' project. Covered by local media, the project formed part of 'Children's Book Week' initiative. We were delighted to collect over 300 quality children's books and we continue to be enthusiastic participants in various community expos including Children's Week, National Playgroup Week and various Disability Expos.

We were thrilled to partner with Sons of the West to provide 'Dads Matter' presentations to hundreds of men living and working across Melton, Maribyrnong, Brimbank, Hobson's Bay and Wyndham. We are now providing information and resources on the Sons of the West website and look forward to the 2016 program.

A team of over 20 Bunnings staff spent an entire Saturday creating a new play area for children at Tweddle. A fantastic new cubby house, bbq area, colourful mural and a fresh lick of paint have brought life to the outdoor area. The cubby is loved by the families and we now have a weekly bbq for families.

We would also like to thank Fay Stankovich and Knit One Give One for keeping our babies and toddlers warm over winter. Thanks also to Aussie Farmers Direct Footscray for supporting our Bunnings BBQ. We are grateful to Myer Highpoint, Finch Publishing and Coles for supporting our Mothers' Day efforts for our MyTime mums.



Our People

Tweddle provides a family friendly workplace that supports staff in achieving a harmonious balance between home life, time and work. As an organisation employing those committed to supporting vulnerable families, our workplace structure reflects that of our values; family focus, cooperation and openness, respect, treating people equally, community connectedness, creativity and learning.

The Tweddle workforce as at 30th June 2015 was 50.65 comprised of 78 permanent and part time staff on the payroll and a nursing bank of 32. The professional profile of staff is as follows:

Staff Profile	EFT	
	2013 - 14	2014 - 15
Registered Nurses	12.8	13.4
Early Childhood Professionals	13.8	14.4
Psychologists	3.1	3.75
Social Workers	1.5	1.5
Corporate Staff	11.3	15.2
Medical Specialists	0.1	0.1
Community Services	1.7	2.3

CONFERENCES & TRAINING

Across the year staff attended:

- Circle of Security group training program (4 days)
- ARACY Conference – Coming Together for Australia's Children in Hobart
- British Association for the Study and Prevention of Child Abuse and Neglect (BASPCAN)
- Australian Association for Infant Mental Health (AAIMH)
- Attachment Theory & Reflective Functioning
- Australian Institute of Family Studies Conference: Families in a rapidly changing world

PROFESSIONAL DEVELOPMENT

This year Tweddle staff undertook three days professional development that focussed on understanding the complexities of working with families with high needs. Staff explored helpful ways to work with vulnerable families and how clinicians can help to contain and support emotionally charged clients. They spoke about the importance of being curious about a family's life story and presentation and having constructive conversations with them with a view to helping them achieve their goals. At the same time, staff were encouraged to understand the personal impact of this work and the importance of self-care. The sessions also covered:

- Parent sensitivity to child's cues
- Parent response to child's distress
- Parent's ability to foster child's social-emotional growth
- Parent's ability to foster child's cognitive growth
- Child's clarity of cues
- Child's responsiveness to caregiver





Quality

Quality has guided a number of critical aspects of Tweddle's service delivery over the previous 12 months. Staff have been engaged and committed to ensuring Tweddle is continuing to deliver a high standard of care.

One of the key initiatives was the modification of the previous Occupational Health and Safety (OH&S) committee model which now incorporates Quality and Infection Control. This has enabled a clear line of communication between different projects and program staff. Service and facility improvements have been managed in a timely manner allowing for clear direction of further projects and ease of reporting to the Executive Team.

A project group looked at how we could improve our welcome to clients and how to be clearer around our service model.

Strategies included assisting families at point of arrival, increasing staff awareness feedback themes and working with the Assessment and Intake Team triaging clients into the most appropriate programs to meet their needs.

The incident register 'Riskman' has continued to be well accessed by staff ensuring that preventative measures, incident feedback and "closing the loop" processes have strengthened. Reports to the Quality Committee and Executive team provided themes which in turn have been reported back to staff allowing for increased awareness of issues and feedback.

The focus over the next 12 months will be to increase the communication of feedback from clients to staff, other clients and our local community. Newly designed forms for all programs will allow clients timely and targeted feedback regarding their experience. These results will be reported through program managers and guide future service initiatives.

2015-2016 will see Tweddle continue its Quality focus aligning with our Strategic plan and goals. Quality has an ongoing presence within the service, and our Quality Framework and plan will continue to guide our services to achieve the best for both our staff and our families.





// It has given me an opportunity to allow my child to interact with other children in a non-judgemental environment. //

Declarations and Compliance

Incorporation

Tweddle Child and Family Health Service is a Public Hospital as noted in the Health Services Act 1988 (Schedule 1).

Freedom of Information

There were 6 requests for information under the Freedom of Information Act 1982. All requests for information were responded to within the statutory time periods and no requests for review were received.

Quality Accreditation

Tweddle operates under the Australian Council on Healthcare Standards (ACHS) quality standards system EQUIP5. The EQUIP standards are whole of organisation, continuous quality improvement based standards. They cover all aspects and programs of an organisation and are designed to be used by all organisations that provide health care, including the range of services in the ACCHO sector. Accreditation is public recognition by a health care accreditation body of the achievement of accreditation standards by a health care organisation, demonstrated through an independent external peer assessment of that organisation's level of performance in relation to the standards.

Building and Maintenance Compliance

Tweddle fully complies with the building and maintenance provisions of the Building Act 1993.

Medical Records

The maintenance of medical records was undertaken in full compliance with the Department of Health and Human Services reporting requirements and the provisions of the Privacy Act 1988 and the Health Information Act 2003.

The Protected Disclosure Act 2012

There were no disclosures under the Protected Disclosures Act 2012.

National Competition Policy

Tweddle complies with the Victorian Government guidelines when tendering out service contracts.

Environment

Tweddle has an environment management plan and a 5 year asset management plan which ensures that our objectives are met. These include;

- reducing the amount of waste
- encouraging the use of recycled resources, all paper used is 100% recycled
- green purchasing; we use green suppliers for gas and electricity
- separating office waste into reusable, recyclable, compost and true waste parts
- communicating environmental performance through regular reporting
- encouraging staff to reduce environmental impacts
- ensuring new capital works incorporate environmental sustainability principles

Consultants and Contractors

The following organisations were engaged during the financial year of 2014-2015 to a total cost of \$ 26,741.91.

Consultants

Russell Kennedy Lawyers
UHY Haines Norton Chartered Accountants
Victorian Hospitals Industrial Association
Geoff Sheehan
Richard Lew
Meraki
Sue Couper

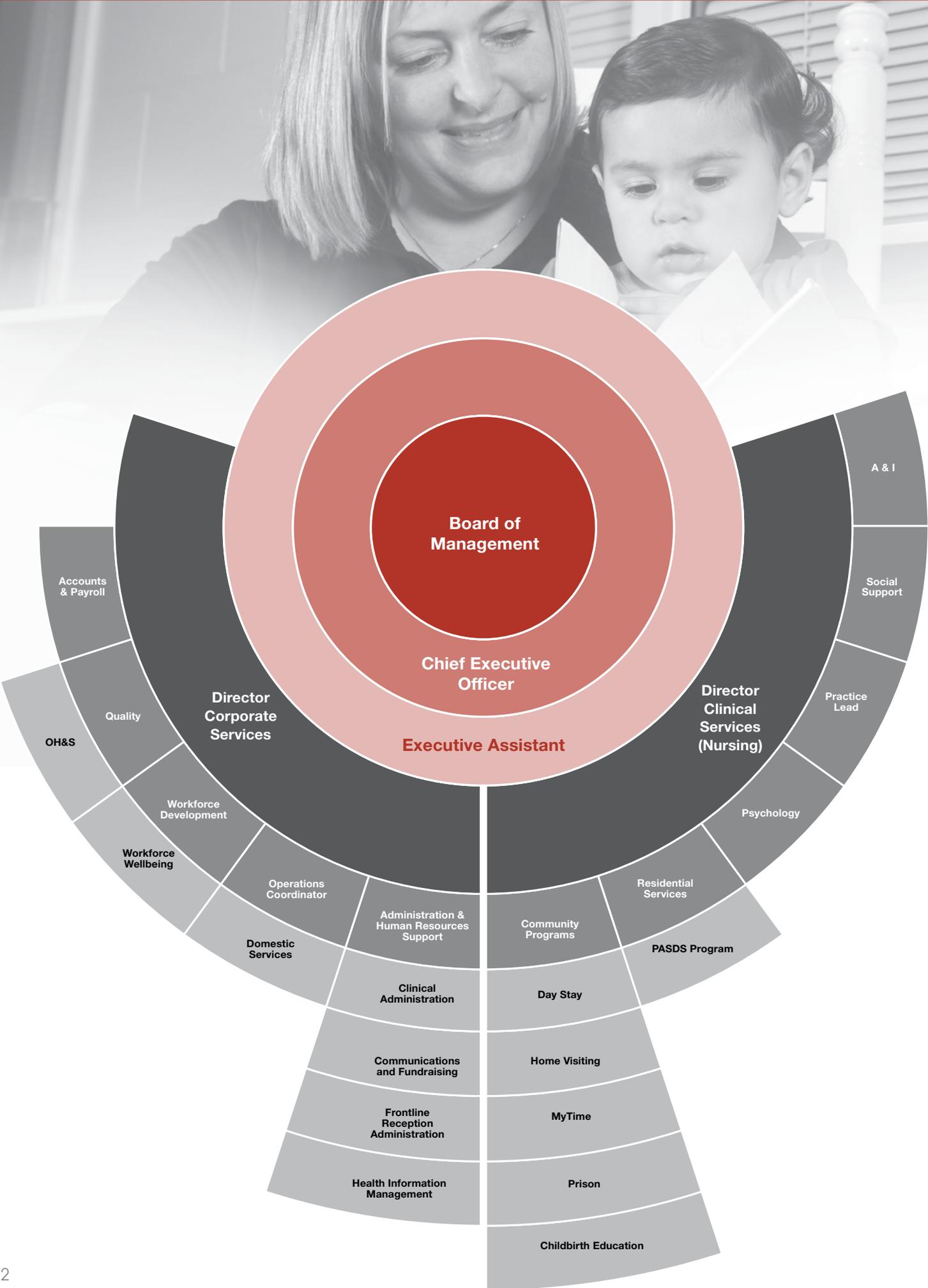
Contractors

Sam Burrone Design
IT Connexion
L & M Handyman

Other information

Information required in accordance with FR22 of the Financial Management Act 1994 has been prepared and is available on request.

Organisational Chart



Governance and Accountability

Tweddle is accountable to the people of Victoria through The Hon. Jenny Mikakos MLC, Minister for Families and Children. In addition, the Board is appointed by The Hon. Jill Hennessy MLC, Minister for Health. We fairwelled The Hon David Davis, Minister for Health and The Hon Mary Wooldridge MLA, Minister for Mental Health and Community Service.

Organisational direction and strategy and monitoring performance occurs by the Board and members participate on at least one sub-committee, in order to lead key areas of the business:

- Governance and Remuneration Committee, chaired by the Board Chairperson
- Finance, Audit and Risk Committee, chaired by the Treasurer
- Ends and Research Committee, chaired by the Deputy Chair
- Clinical Governance Committee, chaired by the Board Chairperson
- Projects Committee convened on an as needs basis

The Committees meet prior to Board meetings with special meetings being held as needed. The Board undertakes evaluation of its performance at all meetings as well as a yearly assessment to ensure a focus on continuous improvement.

Tweddle, as a public hospital, is also required to comply with a range of legislation and health sector policy including government policies for financial and human resource management practice.

The Board reviews its policies and procedures each year.

Key activities for the Board in 2014-15 were:

- Review of the Tweddle By Laws
- Board Strategic Planning resulted in commitment to progress redevelopment plans
- Future visioning activities to grow services under a hub and spoke framework

Tweddle's Clinical team is managed by the Director Clinical Services/Nursing. Ms Sue Couper was Director Clinical Services/Nursing from February 2014 - May 2015 and Ms Kirsty Evans from May 2015. Its Corporate Services team is managed by Mr Nick Catton.





// ...I am just so happy that we learnt so much from the program and for all the help and assistance provided to us by knowledgeable and supportive people. //

Thank you to donors & community partners

Total grants and donations for the year were \$38,735.00. Tweddle is very grateful for the generosity of each and every donor. All monies are used to purchase resources or to support programs and research projects.

Donations over \$500 and Grants for the year 2014-15

Ms Leharna Black

Ms J Stephens

Rotary Club of Footscray

William Angliss Charitable Fund

6A Foundation

Mary MacKillop

We would like to express our gratitude to a number of supporters.

Donations to Tweddle can be made via the online portal GiveNow.com.au. This link is also available on the Tweddle website. Thanks to Gaia and Johnson & Johnson for the wonderful donations of baby care products. We were honoured to take part in The Maribymong Council's Children's Week and Playgroup Week events, the Sons Of The West Health Expo and the Brimbank Family and Children's Expo. We feel privileged to make positive changes to the lives of families that turn to us for help. We're grateful for the many letters of thanks we receive.

Life Governors

Mrs Margery Maskell

Mr Valentino Adami

Ms I Brennan

Mr Ian Broadway

Mrs Loris Charlton

Ms Julie Collette

Ms Prue Digby

Mrs Diana Gibson

Ms Louise Glansville

Mr Kenneth Hambly

Ms Betty Hassold

Dr Nigel Hocking

Mr Graham Jasper

Mr Rod Jones

Mrs Denise McGregor

Mrs Gwen Redman

Ms Hilary Russell

Ms Lesley Yates

Friends of Tweddle

Once again we are very grateful to our Friends.

Acknowledgements

Sam Burrone Design

* 2014 – 2015 saw the introduction of changed Health Services Agreement targets.

This resulted in an overall reduction in program participation rates, in order to address an increase in the acuity of presenting families.