



2013-2014
Annual Report



tweedle
child + family health service



Contents

About Tweddle	1
Services and Highlights of 2013 -14	2
Tweddle Board Members	3
Leadership Report	4
Services	6
Psychology Service	10
Social Support Program	11
Community Programs	14
Research	17
Corporate Report	18
Quality	21
Declarations and Compliance	22
Organisational Chart	23
Governance & Accountability	24
Thank you to donors & community partners	25
Life Governors	26



About Tweddle

Our Vision

Healthy families

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 and 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 Values

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



Our Services

A 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
- Psychology services – group and individual support and counselling
- Social support services
- Childbirth education programs
- Community-based day programs
- Therapeutic support including group programs
- Parenting support for families with children with additional needs
- Partnership with Universal Services to support families seeking parenting advice
- Advocacy on key parenting issues facing families in our community

Highlights of 2013-2014

- Development of the Tweddle 2020 Strategic Options project
- Early Parenting Centres Strategic Forum addressing services connect model
- Introduction of wellbeing and workforce development frameworks
- Development of our practice framework
- Pilot home visiting program
- Action research project on developing our new child and family care plans
- Two day professional development program on trauma informed care
- Introduction of cloud based human resources system
- Stronger linkages with PANDA
- Review of assessment and intake admission process and subsequent pre admission meetings to support complex clients and their support services
- Development of our eLearning packages

Tweddle Board Members



	Meetings Attended	Position	Professional Affiliations/Employment
Dr Nicole Milburn BSc Grad Dip Psych (Counselling)	5/6	Board Chairperson Chair: Clinical Governance Committee	Clinical Psychologist
Ms Marie Howard BA', Grad Dip Early Childhood Studies, Cert IV TAA, Cert IV Frontline Management	5/6	Deputy Chair Person Chair: Ends and Research Committee	Business Consultant, Strategic Planning and Taxation
Mr Michael Wild Bachelor of Business (Accounting) CPA	5/6	Treasurer Chair: Finance, Audit and Risk Committee	Chief Financial Officer
Ms Susan Gannon Registered Nurse, Post Grad Dip in Family Child Health, Bachelor Ed Primary	3/6	Member	Executive Management, Health Sector
Dr Carl Orkin BS Biochemistry, MD, Consultant Paediatrician-FRACP	4/6	Member	Paediatrician
Ms Maureen Dawson Smith BA Dip Ed, MBA Health Administration Masters of Counselling Accredited Mediator (IARMA)	5/6	Member Chair: Governance and 2020 Projects Working Group	Consultant Local Resident
Ms Leharna Black Assoc Dip (Accounting) Bachelor Business (Marketing) MBA CPA	3/6	Member	Business Consultant
Ms Melanie Telford Bachelor of Commerce / Arts Graduate Diploma in Applied Finance and Investment	* 4/5	Member	Business and Finance Consultant
Ms Diana Nelson Bachelor of Engineering Post Graduate Diploma in Management Masters of Business Administration	* 3/5	Member	Property Development
Ms Heather Johnson Bachelor of Arts (Sociology & Politics) Bachelor of Social Work Masters of Social Work Masters of Business Administration	* 4/5	Member	Manager Social Development

*Finalisation of Board Appointments did not occur until September 2013. As such the number of meetings attended by the new Board Members reflects this process. Board Members also attended the Annual General Meeting which was held in November 2013.

Tweddle Board members also attend subcommittee meetings as well as working groups on a needs basis. These include:

- Governance & Executive Remuneration
- Finance, Audit & Risk
- ENDS
- Clinical Governance

Leadership Report

4



Tweddle's Board Report

Esteemed management theorist Peter Drucker said 'The best way to predict the future is to create it.' Nearly halfway into our 2012-2017 Strategic Plan, we are delighted with the continued progress that has been made in realising the vision of helping vulnerable families during the dynamic and sometimes fragile transition in family life that occurs when there are young children.

The extent of progress of the Strategic Plan has been achieved through the hard work of the organisation with the crucial support of the Victorian and Federal governments. We are especially grateful to the Victorian Government for the ongoing funding of the work at Tweddle, the support provided by Departmental staff and the opportunity to continue the proud 94 year history of helping families with small children.

There have been some key highlights in Tweddle's journey in 2014. Tweddle was instrumental in organising this year's Early Parenting Centres Forum which explored the changing environment of the community services sector. All of the Victorian Early Parenting Centres Boards and Executive teams were joined with the Executive Director, Policy and Strategic Group (DHS) Mr Simon Phemister, Scope CEO Ms Jenny Fitzgerald and VCOSS CEO Ms Emma King for a lively forum that addressed key reforms sweeping the Human Services Sectors. It certainly provided food for thought in a rapidly changing environment.

Health interventions must be developed from evidence to ensure that families are given the best service and that the government is given the best possible value for money. Like many other scientific areas, we are expanding our knowledge about infancy and early development. For example, we know that an infant's attachment in their first years of life is entirely dependent on the environment, including their relationship environment. We also know that experiences change genes, and that play based activities and facilitated play sessions are good experiences to help brain development. These learnings are being integrated into service delivery at Tweddle as we know this is laying a sound foundation for resilience and improved life outcomes for infants and families.

All at Tweddle have worked very hard this year to improve service quality and delivery. It is with great pride that I report that Tweddle received an EA rating (Extensive Achievement) from the Australian Council Of Health Standards (ACHS) for its Practice Framework, reflecting a very high standard of work.

The ACHS, as an independent health care accreditation body, delivers public recognition of the achievement of accreditation standards. The EA rating delivered further evidence of Tweddle's commitment to clinical excellence. We look forward to the further implementation of the practice framework in 2015.

Another key initiative was the commissioning of KPMG to research and develop the Tweddle 2020 Strategic Options paper. This paper spoke to our stakeholders and presented five options for the Board to consider as part of its strategic planning cycle. The outcomes will assist us in shaping our responses and initiatives and contribute to the sustainability of the organisation into the future.

At the end of June as we approach our 95th birthday in 2015 and our centenary in the not too distant future, let me take this opportunity to formally acknowledge the work of the Board and staff in ensuring we evolve to meet the changing needs of the community and our families. In particular, Ms Jacquie O'Brien, our CEO, has provided inspiring leadership throughout the year and has helped Tweddle embrace change and position the organisation to be able to respond to the demands and challenges facing health and community service organisations.

It is in the interest of all Victorian families that our work continues to assist and enhance the early parenting experience in a supportive and collaborative manner with all of our stakeholders.

Dr Nicole Milburn
Chairperson, Tweddle Board

CEO's Message

As my first year at Tweddle draws to a close I can confidently say it's been a year of immense activity, where we have developed new frameworks, improved infrastructure, enhanced information technology and piloted new programs.

The theme of the year could really be summed up as developing, enhancing and strengthening our service model. This provides further evidence that we are responding to an ever changing environment.

The clinical governance, workforce development, quality and safety, wellbeing and practice frameworks are pivotal in guiding, supporting and building upon the existing strengths of Tweddle. Importantly they clearly articulate the environment in which we work. It embodies the theories and perspectives, models and interventions that guide our practice and importantly the outcomes we seek to achieve for our families.

Its depiction as a child's playhouse is analogous with how we all as individuals need strong foundations and the support of a robust roof for protection in order to be more likely to achieve our full potential.

The major review of our assessment and intake processes has enabled us to better identify families with complex needs and the risk factors needing urgent intervention. The introduction of preadmission meetings has enabled us to bring our staff, families and their existing service providers together to develop a service response structured in a way that achieves improved family outcomes in a truly collaborative manner.

We are very excited to be on the brink of rolling out mobile touch screen technology which will enable clinicians to have more time with families, minimise paperwork and ensure families only tell their stories once.

This year also saw Tweddle prepare for and complete the detailed ACHS and DHS on site audit requirement process. All staff contributed to the preparation of extensive evidence gathering and can be overwhelmingly proud of how we showcased our business to the audit surveyors. We were extremely pleased that they commented on the significant amount of continuous improvement that has been undertaken and the clear focus that Tweddle has on its quality journey.

Our focused activity over the course of this year and in forthcoming years will underpin our success as a leading edge parenting centre. Our ongoing commitment is to be truly responsive to the needs of families, our communities and provide programs grounded by sound evidenced based research. We certainly can see that we are in sync with the words of Anthony Robbins (US motivational speaker), "The path to success is to take massive, determined action."

The year ahead will see the next stages of our development with the frameworks evolving to support the growth of all our services. I look forward to taking the journey with you.

Ms Jacquie O'Brien
Chief Executive Officer



Assessment and Intake

Assessment and Intake is the first step in a family's association with Tweddle. Our team includes three experienced health professionals who deliver an evidence based, triaged telephone assessment. This is a stressful time for families and for many it is the first time they are letting someone formally know they are not coping.

Tweddle has made strong progress towards receiving 100% of its referrals from health professionals and it is now at 90%.

This year Assessment and Intake staff reviewed their practice and measured it against the Tweddle Strategic Plan and Government directives for Early Parenting Centres. This helped us to clarify the changes needed to better respond to our target group, 'vulnerable families'.

It became evident that to fulfil this requirement we needed to respond to professional and client demands in a way that better identified, assessed and prioritised these families. It also meant that Assessment and Intake needed to take a more active part in engagement and liaison with health professionals and organisations who service our target group.

We explored how to manage and in some cases redirect calls to the relevant universal services. The number of advice only calls was reviewed as was the need to follow up with referees on receipt of referral and the outcomes of client assessments.

Our review processes helped us to achieve a more collaborative approach to pre-admission interviews with clients and their referees. This gave staff more time to engage with case workers and the family's planning, goals and outcomes.

A shift towards families with increased vulnerabilities required an approach that allowed us more time to be responsive and actively involved with the referees and organisations assisting these families. We began redirecting clients with low risk factors to online resources and supports in their communities and universal services.

We continue to work closely with Integrated Family Services and Western Alliance Child First to raise the profile of allocated beds for vulnerable families. Benchmarks have been developed in order to monitor performance including waiting times from referral to assessment and admission.

Our Client Information Management System TWEQ delivers a biopsychosocial assessment. This improves the team's ability to prioritise clients, based on measurable risk and protective factors. We modified the scoring system which has helped triage families into appropriate services. Three beds per admission cycle are now being reserved for our most high risk clients.

Tweddle's focus remains on parents with existing or emerging issues including mental illness, isolation, addiction and family violence. Our intake team works to identify vulnerabilities and respond with solutions that support families multiple challenges and changing needs.

Intake Service Data

Type of Service	2013-14	Comments
Total Services	2239	<ol style="list-style-type: none"> 1. Assessments 2. Pre-intake assessments with clients and health professionals 3. Referrals and liaison with referrers 4. Advice only calls
Number of families who completed an intake assessment	1664	



Residential Unit

Tweddle's residential unit has seen a number of exciting changes throughout the year. A visual representation of the frameworks that support our services was created. The Practice Framework 'house' graphic encapsulates Tweddle's philosophies, beliefs, vision and values.

Tweddle continues to meet our funded obligations as the program balances supporting parents with existing and emerging challenges. While in the unit, parents are supported by a multi-disciplinary team of Registered Nurses, Early Childhood Professionals, Psychologists and Social Workers.

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, stress and the developmental milestones of their children. Admission to the unit provides an ideal opportunity to explore emotional issues that may otherwise go undiagnosed.

We are introducing a more structured approach to parenting education. Through group time, families have the opportunity to learn about brain science and resilience. We promote the importance of play, reading and song in getting to know your child. The overall goal of cultivating attachment and strengthening the parent-child relationship has long lasting beneficial outcomes.

We are entering the third year of our Parenting Confidence research project. Funded by The Alfred Felton Bequest and using 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 which are entered into our client management system TWEQ. We are already embedding knowledge gained through this pilot into clinical frameworks.

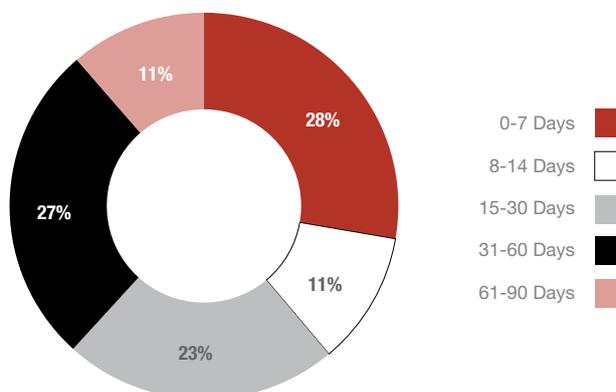
We continue to work closely with Western Child and Family Service Alliance, Cradle to Kinder, Choices and the Department of Human Services to deliver priority beds for vulnerable families. Our preadmission meetings give families the opportunity to discuss their stay and what they would like to achieve.

Tweddle's Residential services are underpinned by capability and collaboration which result in improved patient care and outcomes.

Residential Service Admission Data

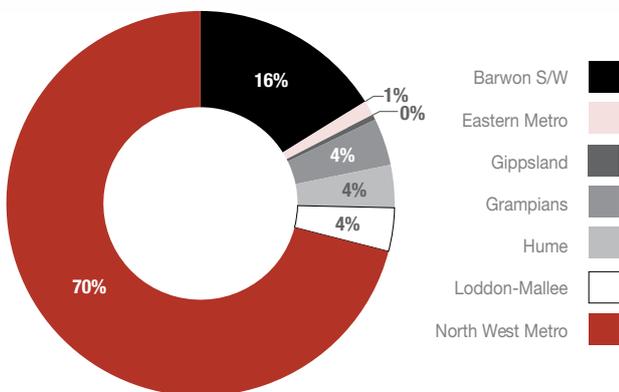
	2012-13	2013-14
No. beds available each day of operation	7-8 (M-F)	7-8 (M-F)
(Closed Alternate Weekends)	7 (S&S)	7 (S&S)
Clients discharged	1627	1683
Average length of stay (days)	3.65	3.01
Total No. of Bed Days	7453	5061
Occupancy (%)	105.00	102.87

Waiting Times for Admission to a Residential Service





Tweddle Programs - Families Admitted by DHS Region



Practice Lead

Tweddle implemented the Practice Lead position to guide best practice in achieving clinical care and quality outcomes for families. The residential team continues to strive to improve services for families. In March we saw the inaugural meeting of the Clinical Governance committee. In addition, staff have been supported in opportunities for professional development. Here Ms Kanthi Sayers Practice Lead talks about her role.

I was fortunate enough to represent Tweddle at a workshop on clinical leadership with Professor Dorothy Scott. I also attended the 15th Biennial NCAST conference on Connecting with Babies: Supporting the Parent-Child Relationship, presented by Dr Linda Gilkerson, Dr Kristie Brandt and Dr Kevin Nugent.

It was exciting to be in the company of leaders in this field of infancy and family work with much practice wisdom to be garnered from the workshops and shared with my Tweddle colleagues. One of the most significant take-home messages was the importance of the relationships we forge with our families, and to not underestimate the power of these relationships.

This is fundamentally what, as clinicians, keeps us connected to the work at Tweddle - building relationships with our families, walking with them through their parenting experience, respecting they are the experts in their children's lives and offering our advice in this context. This is constantly illustrated in the narratives of families who come to Tweddle for help.

"Help me get to know my child"

We first met baby Fiona and her parents Lila and Ben when she was four months old. The family were here for help with establishing a routine for Fiona who was described as difficult to settle. Lila was flat and had been diagnosed with postnatal depression. She felt she was going through the motions with Fiona. From Tweddle's perspective, Lila appeared to be trying her best, but somehow was having difficulty connecting with Fiona. We initiated a referral to a mother-baby unit following the family's discharge to further support the family.

Lila contacted Tweddle again two years later. The relationship between Lila and Ben had ended and with Ben no longer around, Lila was a single mum. Lila, who said she was often tired, had one request, "help me get to know my child". Staff met Lila at her request. It seemed that she was so focussed on doing "the right thing" as a parent, she had forgotten to simply stay in the moment with Fiona. We worked with Lila to "read" Fiona's requests and needs, both verbal and nonverbal, as well as her requests for still moments with her mother where she was simply held. We helped Lila learn to play with her daughter; something Lila told us she did not know how to do as she had never had this experience with her own parents.

Gradually, over the course of her stay, it became evident that Lila was becoming increasingly comfortable with "being" with Fiona. As this happened, Lila slowly let go of the harsh judgements she made of herself as a parent. As a mum, she was grateful to her daughter for not giving up on her. She left Tweddle feeling satisfied, saying she felt she was finally beginning to understand and meet her child's needs.

Lila sent us a message after their stay expressing her heartfelt thanks for the assistance she received.

As clinicians, I think my colleagues would agree that we are equally grateful to the families who come to stay; for entrusting their care to us and for giving us the privilege to enter their lives when often they are at their most vulnerable in their parenting journey. It is indeed a humbling experience. We are thankful for the relationships we forge with our families, however fleeting they may be, and will continue to protect and truly value this in our work with families.



PASDS

Parenting Assessment & Skills Development Service

Tweddle's Parenting Assessment and Skills Development Service (PASDS) is available to parents who have children between 0 and 3 years who are currently involved with the Department of Human Services (DHS).

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 relating to the child's 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 DHS protective worker.

The PASDS staff consider areas of concern or difficulty and attempt to find ways to help address these. 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

From this, a skills development program is created and implemented to build on areas of strength and address any areas of concern.

PASDS Admissions		
	2012 - 13	2013 - 14
No of families admitted to a residential program	43	49
No of PASDS Clients admitted to a residential program	128	129
PASDS client bed days - residential	1118	1040
PASDS clients average length of stay- residential	8.73	8.25

"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. It was also great to see visiting family members treated so nicely. "

Psychology Service



Tweddle's team of counselling and clinical psychologists offer assessment, brief intervention, referral and support for parents who are considered at risk of mental health issues.

Identifying these families is extremely important. It allows us to ensure that the family have appropriate supports in place after they are discharged. Clients are welcome to continue to engage with our team in an outpatient capacity. Our follow up calls help to keep track of outcomes.

Nearly half of all mothers and a third of all fathers attending a Tweddle Residential Program score above the clinical indicator for risk in the Edinburgh Post Natal Depression Scale (EPDS) and the Depression Anxiety Stress Scale (DASS) respectively. Mental health challenges affect relationships, the workplace and the ongoing health and welfare of the whole family. Through their Psychology consultation, these high risk mums and dads are able to get the help they need.

As expected, the high prevalence disorders such as depression (approximately 45% of clients seen) and anxiety (67%) are the mental health issues that are frequently identified with the client population at Tweddle. Exhaustion (79%) and adjustment issues (58%) are commonly recognised and anger and trauma issues are identified in approximately 10-16% of clients.

Underdeveloped parenting skills and relationship issues are common factors for clients attending Tweddle. In the clients that engage with the psychology service 16% have Child First or protection involvement prior to their admission or a referral to these services is made during their admission.

Approximately 60% of clients that attend the psychology service are provided with a referral to one or more new supports by the psychology service. These referrals are predominantly for further psychological support. Almost all consultations with clients include a component of clinical intervention. This may include psychoeducation, short term cognitive behavioural or mindfulness strategies, safety plans where risk is an issue and counselling support (e.g. debriefing, reframing, normalising).

Almost all clients who attended the Tweddle Psychology Service believe they benefited from the service. More than two-thirds report they had implemented strategies discussed in the consultation.

Importantly, our follow up statistics indicate that more than 77% of our clients had engaged, or were in the process of engaging with following up on referrals they were given at Tweddle. This is extremely encouraging for us at Tweddle and for the families working on improving their health and outcomes through ongoing counselling.

These factors, taken together, highlight the important work the psychology service does in providing a space for clients to consider other factors impacting on parenting capacity. These may not be the issues that motivate the initial contact with Tweddle, but they certainly impact on parenting capacity and outcomes for the children and early intervention is vital.

"I feel so lucky to have had the opportunity to stay. The staff gave me so much information and were non judgemental, attentive and kind."

Social Support Program



The social support program provides two distinct components of support to families, social work and family therapy.

In the social work component of the program families are offered support with issues that include but are not exclusive to domestic violence, sexual abuse, finances, isolation, housing, stress, anxiety, disability for child or adult and drug and alcohol misuse.

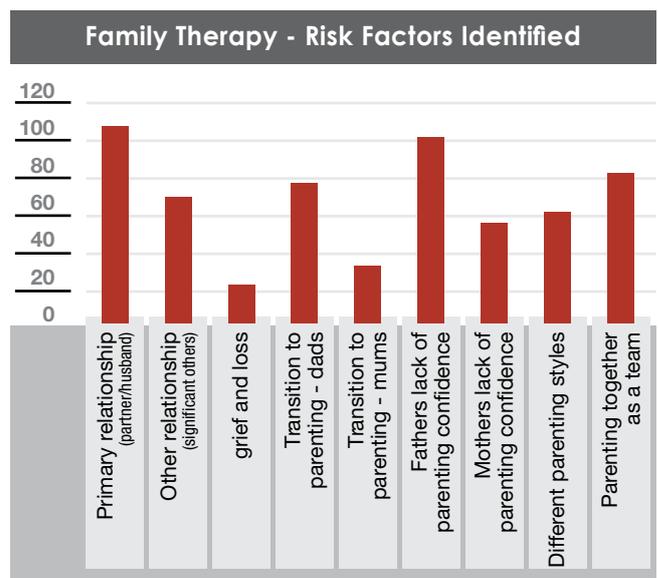
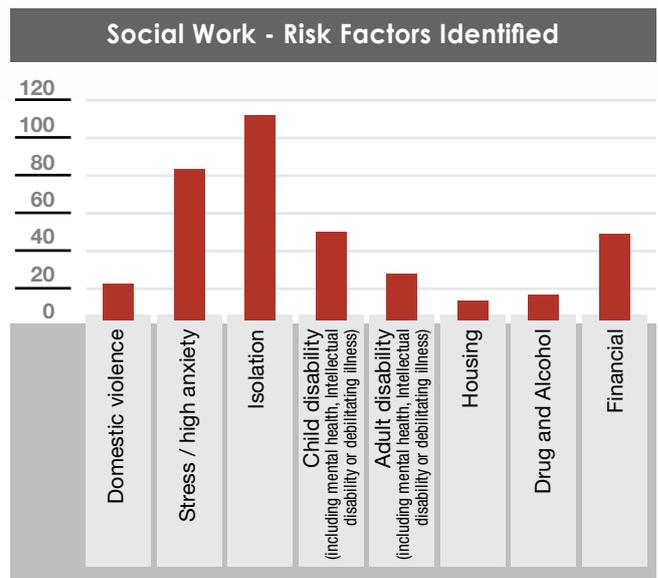
Families are connected to appropriate community services through Tweddle referrals or given contact details for self-referrals and/or receive written information.

In the family therapy component of the social support program, families are offered support with primary and secondary relationships, transition to parenting, working together as a parenting team and parenting ideas and differences. Other themes include new parent identity, parenting confidence and self esteem, resolving conflict and grief and loss effect on relationships if there is a disability, sickness or aged parent needs.

Most families need support from both components, however, the majority of couples are experiencing relationship difficulties in some form which impacts on their home life and the long term wellbeing of their children.

We introduced a pilot 'Parenting Expectations' program on the Residential Unit in March 2014. This one hour session has a family therapy framework and a focus on parents or support persons working together in their parenting responsibilities. It is offered to all families staying in the Residential Unit including PASDS families. It focuses on expectations, roles and responsibilities, communication, relationships, effects of tiredness, self care and adjusting to parenting demands.

The social support program saw 163 parents between 1 July 2013 and 30th June 2014. There were 152 referrals to counsellors, community organisations and support services.





Supporting Parents at Tweddle with Emerging and Existing Challenges

Tweddle's 2012-2017 Strategic Plan outlines our organisational goals. We continue to provide services within the public health model prioritising services for those most in need. Tweddle has a commitment to families with emerging and existing challenges.

Staff work in a complex and dynamic environment. Each family's story is explored and supported and a solutions focussed goal is developed in partnership with the parents. These stories provide examples of strengths-based, multidisciplinary innovation in an acute setting. Here we share the stories of two families with emerging and existing challenges.

"As a third time mum, I am still learning new things, I enjoyed getting to talk to other mums. This service is great for mums who need this kind of service and probably couldn't afford it otherwise."

Emerging and existing challenges

Susan's story

Susan, a young mum with three month old twins contacted Tweddle's assessment and intake team for urgent support. She had been diagnosed with a chronic degenerative condition and was experiencing extreme fatigue and weakness in both arms. Parenting was a struggle not only for her, but for the twins' Dad. Susan's partner and her mum all worked full time and were also experiencing exhaustion in their supporting roles.

The family was admitted to Tweddle's Day Stay program where they were able to spend time with our social worker and family therapist who spoke with the family and assessed an urgent need for an increase in community support.

Tweddle was able to extend Susan and her family's care package to include a Residential four day stay which would allow her partner to stay and for the family to receive respite, support and guidance through parenting education including attachment, reading cues and other parenting workshops.

Our Social Worker and Family Therapist spent time with both parents to talk about stress and the supports that were in place. She gave secondary consultations to the Residential staff to ensure the family's needs were being met.

Susan also spent time speaking with a Tweddle Psychologist after her Tweddle stay.

Our social worker partnered with the family during their transition from Day Stay to Residential Stay to ensure a journey that was connected, caring, consistent and outcomes focussed. Susan, her mother, her husband and their twins are all now doing well. She now feels more confident and less stressed as a parent.

Claudia's story

When Claudia first came to Tweddle, she needed support to help manage her fourteen month old daughter Scarlett's sleep and settling issues. On top of this, her four year old son Dylan had behaviour management issues and she wasn't coping with either. Claudia and her children were admitted to a four day residential program. Staff identified that although these were Claudia's main concerns, other significant issues were impacting on the family's functioning and the family would benefit from support and intervention.

Claudia confided that her relationship with her partner Luke was strained since the birth of their daughter. Luke was a good dad but his patience was low when Scarlet was crying or Dylan was misbehaving. Luke sometimes found it difficult to control his temper and although he had never hurt her or the children, he had punched walls.

Claudia disclosed that she had been depressed since Scarlett's birth and as a consequence her relationship with Dylan had suffered. In addition, she had not developed a strong bond with Scarlett. A move to the country after Dylan's birth and fractured family relationships compounded Claudia's sense of isolation.

During consultation with Claudia the Tweddle Psychology Service identified multiple gaps in her community supports and with Claudias consent made a number of referrals.

These included Child First, a referral to Claudia's GP, a referral to a Perinatal and Emotional Health Program (PEHP) and the Enhanced Maternal & Child Health Nurse (EHV).

Through one on one and group work, Claudia began to develop the capacity to wonder what her children were trying to communicate, rather than simply responding to the behaviour. With the support of Tweddle staff Claudia was able to spend more time playing with Dylan and Scarlett and both children were observed to respond positively.

The psychology service followed up with Claudia three weeks after her discharge from the residential unit. The support services had been engaged, she had obtained a Mental Health Plan through her GP and was scheduled to see a psychologist in three weeks' time. Tweddle played an integral role in ensuring that Claudia and her family returned to their community with wrap around services focussed on their health, safety and stability.

Baby Scarlett and Dylan now have a mum who is gaining in confidence as a parent. She has a growing awareness of the developmental needs of her children and the ongoing health of her family.

*families featured in case studies have been de-identified or have approved of their story being told

"I think the person needs to be at the right stage and age of their child to realise they need the training, not the babies. For me that took some time to understand. Not sure if there is anything that comes close to explaining how these four days could change the direction of our life with our child as parents."

Community Programs

MyTime

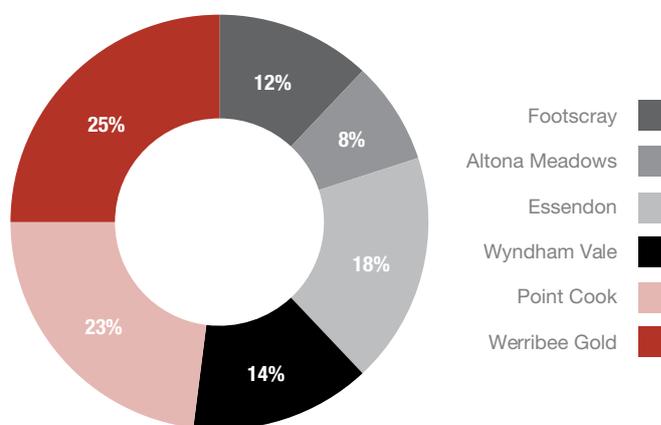
MyTime is a parent and carer support group for families with a child up to sixteen who has a disability, developmental delay or chronic medical condition. Families are given the opportunity to develop new skills and meet new friends. It is especially important for families to feel connected with others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

Two new MyTime groups commenced this year in Essendon and Wyndham Vale. The partnerships included Manor Lakes College and Moonee Valley City Council. MyTime Essendon commenced supporting parents at the Lincoln Road Early Years Centre and a purpose built facility at Manor Lakes College.

Topics of discussion this year have centered around personal stories of diagnosis, linking into services and coping with issues such as puberty and behavior management. Conversations around schooling options and enrolment criteria proved to be useful for many parents. Themes that support families also include managing challenging experiences, toilet timing, eating new foods and using the 'Picture Exchange Communications System' to communicate.

MyTime is all about community and support. Artwork created at a 'MyTime Artwork Therapy' session was donated to Featherbrook Community Centre and Wyndham Park Community Centre.

MyTime Member Attendance



This year the MyTime program registered, consulted and supported eighty six parents and carers in six MyTime groups across the western suburbs.

Attending MyTime allows parents to share their own experiences and to discuss common issues like nutrition, behavior, sensory and eating concerns. Parents become aware of the value of supporting and accessing respite, the importance of having a small break occasionally, and accessing council respite services and holiday programs.

Thanks to the Lord Mayor's Charitable Foundation for providing MyTime with new sensory toys, play equipment and beautiful bi-lingual children's books in Arabic, Bengali, Chinese, Gujurati, Hindi, Japanese, Punjabi, Somali, Spanish, Tamil, Turkish, Urdu, Vietnamese and Karen with Marathi, Kannada, Tigrinya, Oromo and Amharic.

"Tweddle helps parents to step back and look at things differently and to try and change things. Thank you for helping us."

Day Stay Program

Tweddle currently provides Day Stay programs in four locations: Footscray, Geelong and in partnership with Djerriwarrh Health Service in Bacchus Marsh and with Terang Mortlake Health Service. More than 550 families have been supported by the Footscray and Geelong services.

The Maribyrnong and Terang Mortlake Day Stay programs provide support for parents and their 0 - 3 year old children. Our Geelong Day Stay program caters for parents of infants 0 - 12 months. All programs focus on infant health and 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.

Demand for the program continues to grow and partnership opportunities are currently being explored to support families in other areas. Whilst the vast majority of clients seeking the support of the Day Stay program are female (3 times more

likely to attend the program than are males) there is substantial value for both parents (and the child) in learning the strategies for consistency of care and better outcomes for the family.

The families accessing the Day Stay program predominantly identify as Australian. Given the diversity of the community that Tweddle services, in particular the Western Melbourne Metropolitan Region, it would seem reasonable to expect a greater representation of culturally diverse clients accessing the service. In recognition of this, Tweddle is fostering relationships with local CALD agencies for the purpose of better engaging with the CALD population.

Feedback from Day Stay participants is overwhelmingly positive with parents reporting increased parenting confidence, improvements in their child's sleeping, feeding and behaviour.

DHS Funded Services Data - Day Stay

	Residential excluding PASDS	Maribyrnong	Geelong	Wyndham	Total Day Stay
2012-13 Families	625	381	154	77	612
2013-14 Families	645	439	154	52	645

Collaborative Day Stay Data

	Bacchus Marsh	Terang	Total
2012-13 Families	290	135	425
2013-14 Families	301	51	352



Prison Program

Tweddle's work supporting parents in prison continued throughout the year with programs at Dame Phyllis Frost Centre and Tarrengower Prison. This was made possible with the support from Dame Phyllis Frost Centre and The Mary MacKillop Foundation. 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 are assessed. These include identifying distress, social and emotional needs and fostering cognitive growth. We work with parents around clarity of cues, child responsiveness, nutrition and hygiene, to develop a greater understanding that these are essential to positive health outcomes.

Individual satisfaction surveys are given to all participants following each program with overwhelmingly positive feedback being received this year.

Tarrengower Prison workshops prepare women for a return to families and community. Groups focus on parenting strengths, relationships, dealing with emotions and practical skills such as cooking. Prisoners were given a copy of the children's book 'When I'm Feeling Loved' by Trace Moroney donated with thanks to the Peter Williams Trust. Many prisoners enjoy sending their child a special book.

Our work with parents in prison aims to help break the cycle of offending by strengthening the emotional attachment between parent and child, reinforcing the importance of role modelling positive behaviour and building parenting strengths and confidence.

Mums participating in our Prison Program commented on the groups :

"Understanding that we as mother's go through the same feelings of guilt and shame at being incarcerated. Our children feel the same. We got tips off each other and then discussed them with the facilitator to see how we could deal with them."

"The program was excellent because it was specific to being in prison rather than just general information."

"It made me re-think my parenting skills."

Parenting Confidence

With thanks to a grant from the Alfred Felton Bequest, Tweddle are entering the third year of measuring parenting confidence using the Karitance Parenting Confidence Scale (KPCS) tool. Parents of children staying in our Residential unit are asked to score their parenting confidence pre and post admission in relation to the following items;

- I am confident about feeding my baby
- I can settle my baby
- I am confident about helping my baby to establish a good sleep routine
- I know what to do when my baby cries
- I understand what my baby is trying to tell me
- I can soothe my baby when he/she is distressed
- I am confident about playing with my baby
- If my baby has a common cold or slight fever, I am confident about handling this
- I feel sure that my partner will be there for me when I need support
- I am confident that my baby is doing well
- I can make decisions about the care of my baby
- Being a mother/father is very stressful for me
- I feel I am doing a good job as a mother/father
- Other people think I am doing a good job as a mother/father
- I feel sure that people will be there for me when I need support

We greatly appreciate the opportunity to measure, evaluate and innovate with what we are learning through delivering the Karitance Parenting Confidence Scale Pilot. We are already embedding knowledge gained through this pilot into clinical frameworks.

"I came in not feeling overly confident but with the 24/7 support from wonderful staff, I have been able to leave feeling like I have gained the tools I need to continue on at home. The handover between staff shows how well they communicate as I have never had to explain my child's day to each person, they knew how our day had been. The support throughout the day that continues into through the night is empowering."



Infrastructure

Significant improvements were made to the Footscray facility over the last year. These included air conditioning to the bedrooms, wifi throughout the buildings and a fresh coat of paint throughout the residential unit. Our Psychology service was relocated to Adelaide street and we refurbished the consultation suites. With thanks to the William Angliss Charitable Fund, Tweddle modified the nurse's station, enhanced security and removed walls to increase work space.

Geelong benefited from some much needed capital improvements and refurbishment to the administration and family areas.

Information Technology

Tweddle continues to work in partnership with QEC to improve and enhance the customised patient information system TWEQ. Developing TWEQ's capabilities to support Tweddle's services is underway and will improve reporting requirements.

Key highlights in IT this year include:

- The introduction of WIFI and an internet access kiosk for families
- Server and hardware upgrades
- Software upgrades
- Website improvements
- Continuation of Tweddle social media presence
- Upgrades to network equipment
- Introduction of IT tablets to the work place
- The recording of parent and child interaction for reflective practice (where consent is granted)
- The development of Enable HR

Finance

The Director of Corporate Services is responsible for financial reporting at Tweddle. 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 Quality Module in Risk Management Program
- 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
- Trialling 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 very much focused on increasing efficiency, reducing the administrative burden on clinicians and providing clear information for decision making.

Communications

Parents are faced with a vast array of conflicting online parenting resources which is why it is important for Tweddle to have a high profile in this space. We provide our online community with evidence based parenting tips, research, commentary and education all sourced from staff and experts from our sector and around the world.

Tweddle's communication platforms offer a transparent engagement option for families who are often isolated. Families post questions and messages on Facebook and Twitter and we are able to action these quickly. This is important, especially as our programs evolve to support families facing increased risk and vulnerability.

Our website continues to deliver information and parenting resources to thousands of families every month. Over fifty percent of families now access Tweddle's website from a mobile device.

Our online Dads' Information Centre was highlighted as a helpful resource by author and academic Dr Richard Fletcher from the Fathers and Research Program at the University Of Newcastle. A new information page was introduced for our Parenting Assessment and Skills Development program and health professionals continue to engage with our online referral system.

Providing families with reliable and practical parenting strategies and links underpins our digital communication strategy.

Our quarterly online newsletter with subscription access on our website, continues to attract new subscribers every week. This gives us another vehicle in which to communicate with families and stakeholders and to source valuable feedback.

Tweddle featured in a number of local news items, as well as appearing on the 7.30 Report and in the Sunday Age. As prioritised in the Tweddle Strategic Plan, we are committed to maintaining strong contemporary communications as a means of influence and connection with stakeholders and the community.

Workforce Development

Tweddle's workforce is highly valued, dedicated and skilled. They are motivated to make a difference in the lives of the families we serve.

Tweddle has undergone some significant changes as a result of a systemic review of workplace culture, capacity building and teamwork structures. A new workforce development framework has drawn on the domains of people, place, environment and performance to underscore and direct our focus on this area.

Our priority is a commitment to attracting, recruiting and retaining a skilled and competent workforce. The Tweddle vision, service user vision and workforce vision unite to form distinct goals for everyone to work towards. This year we have developed a number of eLearning packages that enable a more user friendly approach to induction and undertaking training in a number of key areas. These include occupational health and safety, infection control, manual handling and a number of new modules under development.

We also believe that attending conferences supports the professional development of our staff and over the last year Tweddle sent representatives to attend the Australasian Association of Parenting and Child Health Conference in Perth, The Infant and Early Childhood and Social Emotional Wellbeing Conference in Canberra, the Western Child and Family Services Alliance, West Division Integrated Family Services Strategic Planning Forum and the NCAST conference in Seattle.

We continue to work to ensure future skills development is aligned with our strategic plan and supporting parents with existing and emerging challenges.

Wellbeing Framework

Tweddle understands that in order to be effective in achieving its vision, it needs to foster a workplace that supports workers to be mentally and physically healthy through health protection and promotion. The Wellbeing Framework focuses on three key principles that are essential to the achievement of positive workplace health and wellbeing.

These are:

- 1. Mutual obligations** of both the employer and employee, which are pivotal to the achievement of organisational objectives.
- 2. Consultative and cooperative** mechanisms, which enable effective communication and the resolution of workplace issues.
- 3. A supportive workplace** offering practical support to enable the achievement of workplace objectives, and emotional support to facilitate personal achievements and team cohesion.

Employees formed a Wellbeing Group with numerous initiatives being introduced including, in house massage, mindfulness meditation sessions and regular fundraising and social gatherings.

Staff are looking forward to upcoming activities that foster a positive workplace and provide opportunities for us to demonstrate the Tweddle values in action.



Our People

Tweddle provides a family friendly workplace that supports staff in achieving a harmonious balance between home life and 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 2014 was 44.3 FTE comprised of 60 permanent and part time staff on the payroll and a nursing bank of 34. The professional profile of staff is as follows:

Staff Profile	EFT	EFT
	2012 - 13	2013 - 14
Registered Nurses	9.8	12.8
Early Childhood Professionals	11.1	13.8
Psychologists	2.1	3.1
Social Workers	2.1	1.5
Corporate Staff	10.0	11.3
Medical Specialists		0.1
Community Services		1.7

This year we said goodbye to some highly respected staff members including Director of Clinical Services/Nursing Mr Andi Jones, Quality and Risk Coordinator Ms Christine Filiamundi and Facilities Coordinator Ms Maxine Lehane. We thank these people for their contribution to the development and enhancement of Tweddle’s services over many years.

We have welcomed to the team a number of new leaders including Director of Nursing / Clinical Services Ms Doreen Power, Manager of Community Programs Ms Sue Wilson, Quality Manager Ms Wendy Grant, Psychiatrist Dr Tram Nguyen and Psychologist Ms Emma Symes.

Our team of skilled professionals add value and capacity to Tweddle’s clinical and corporate services areas and this year Tweddle is bubbling with enthusiasm, innovation and generating new approaches.

In early 2014 we introduced new residential services structures which saw Tweddle Psychologist Ms Kanthi Sayers commence as Practice Lead. Kanthi supports our staff, service providers and clients to think about ways in which we can work collaboratively to achieve the best possible outcomes.

Our Residential Services Nurse Unit Manager, Ms Janis Shoesmith, is in a key role to ensure that we have the right people in the right places at the right time doing the right thing in an environment that facilitates the delivery of quality services.

Our new employees draw upon valuable workplace experience from senior positions in government, health and community services sectors including from Berry Street, the Alfred Hospital, the Royal Women’s Hospital and the Department of Justice. Tweddle is well positioned with strengthened capabilities and capacity to deliver high quality and innovative care to our communities.

Equal Opportunity and Workforce Statement of Employment and Conduct

Merit and equity principles are encompassed in all employment and diversity management policies, procedures and activities and the Victorian Public Sector code of conduct applies to all staff.

Training and Professional Development opportunities provided to staff during this year focussed on :

- Infant mental health
- Trauma informed care
- Epigenetics
- Brain science
- Attachment and cues



"Quality is everybody's business, and Risk is front of mind" has become the quality motto for staff at Tweddle. The key area of focus has been to ensure quality is embedded in the practice of every staff member every day in everything we do.

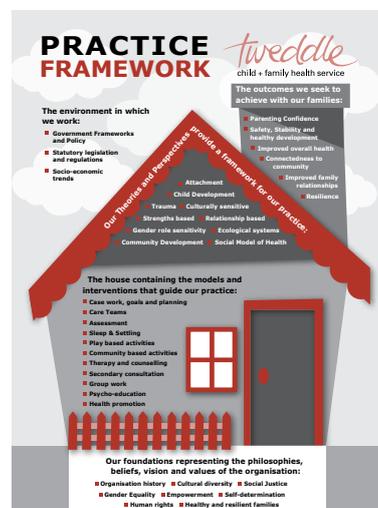
Tweddle actively participated in the organisational wide survey through The Australian Council on Healthcare Standards, and, simultaneously the Department of Human Services Standards survey. The work done to submit and present for these surveys was a major undertaking.

The collaborative and multidisciplinary approach produced a submission paper that received special mention regarding its content and quality by all the survey team members. The summation for all staff at the completion of the survey highlighted and celebrated Tweddle's position within the Early Parenting sector, and recognised our place as a "service leader".

Special mention was made with regard to key initiatives including the introduction of an Induction package and eLearning competency based education module for all staff. The use of Riskman within Tweddle has guided and enabled key focus areas of risk minimisation and the Quality module has provided a key method of monitoring quality initiatives.

The survey members acknowledged and were impressed with the extent to which staff demonstrated genuine care for our families and their children. Recognition was made

regarding the professionalism and engagement of staff, and that Tweddle is constantly looking at additional services and support for our community. It was noted that with focus towards further evaluation and benchmarking Tweddle's future accreditation outcomes will be enhanced.



Clinically, the most significant and celebrated achievement for Tweddle has been the introduction of the practice framework and the "house" was well recognised by the survey team as a significant area of work. The survey team noted the clear and well considered piece of work and made special mention that all staff should be proud of this work.

2014-2015 will see Tweddle continue its Quality focus aligning with our Strategic plan and goals. Quality will have an ongoing presence within the service, and our Quality Framework and plan will continue to guide our service to achieve the best for both our staff and our families.

"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."

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 3 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 Human Services and the Department of Health 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 2013-14 to a total cost of \$232,269

Consultants

Forde Advisory
VHIA
Geoff Sheehan
Richard Lew
Thrive HR
KPMG

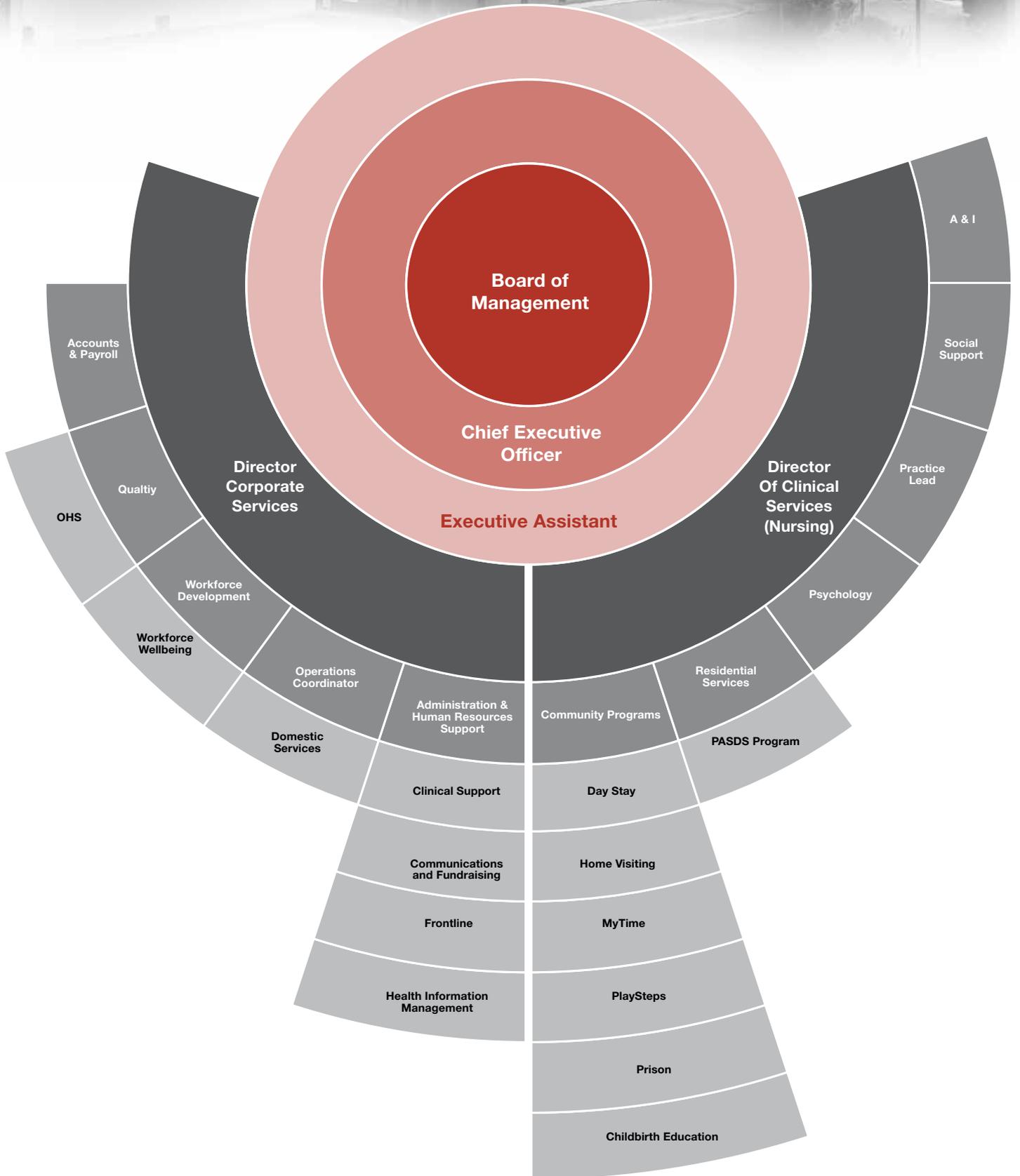
Contractors

Sam Burrone Design
Sue Couper
IT Connexion
National Payroll
L & M Handyman
Harkmark

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 & Accountability

24

Tweddle is accountable to the people of Victoria through The Hon. Mary Wooldridge MP, Minister for Mental Health, Minister for Community Services, Minister for Disability Services and Reform. In addition, the Board is appointed by The Hon. David Davis MLC, Minister for Health and Minister for Ageing. Organisational direction and strategy and monitoring performance occurs by the Board using the Carver Model of Governance to guide the fulfilment of its responsibilities. Board 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 and Risk Committee, chaired by the Treasurer
- Ends and Research Committee
- Projects Committee

Board meetings are held every second month with special agenda meetings being held as needed. The Finance Audit and Risk Committee and all other committees meet at least four times per year. The Board also undertakes formal assessment of its own performance to ensure continuous improvement. This assessment has helped guide a targeted development program.

The Governance and Remuneration Committee is also responsible for setting the CEO work plan and performance indicators and for formal assessment of CEO performance. 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 2013 - 14 were:

- Early Parenting Centres Strategic Forum
- National Perinatal Depression Initiative lobbying and 7.30 report coverage
- KPMG Tweddle 2020 Strategic Options paper

Tweddle's Clinical team is managed by Director Of Nursing and Clinical Services, Ms Doreen Power.

"I liked that staff shared their own parenting stories and struggles and the informal chats with them. Getting ideas about how to manage different situations."

Thank you to donors & community partners



Total grants and donations for the year were \$122,970.00. 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 2013-14

6A Foundation

City West Business Park

Macedon Ranges and North Western Melbourne

Medicare Local

Ms R Rush

Acute Health

Alfred Felton Bequest

Ms J Stephens

William Angliss Charitable Fund

We would like to express our gratitude to a number of supporters. We purchased important first aid equipment including a paediatric defibrillator with thanks to the Rotary Club of Footscray. The Guest group donated some beautiful outdoor furniture for our residential family garden.

Donations to Tweddle can be made via the online portal Givenow.com.au. This link is also available on the Tweddle website. Gaia provide parents and children with organic skincare sachets. We were honoured to take part in The Maribyrnong 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. Here is one...

"My husband and I stayed at your Residential Unit a few weeks ago. Prior to our stay our three month old son was unsettled and unhappy. Our lives were turned upside down and each day was a struggle, without having any respite from the constant crying. Our stay with you has been nothing short of a miracle. We want to thank-you all so much for your support. We have all come home happier and our gorgeous son is flourishing and happy. The fog of my postnatal depression has lifted and I finally feel I can enjoy my role as a great mum. Thanks again, we will be forever grateful."

PlaySteps

With thanks to the Macedon Ranges North Western Melbourne Medicare Local, five families living in the Macedon Ranges region received much needed additional parenting support. Over 8 weeks Tweddle provided PlaySteps in partnership with Macedon Ranges Maternal and Child Health with the support of Cobaw Health.

PlaySteps is an evidence based, parenting skills development program with an emphasis on learning and connecting through play. The program provides an opportunity to access group education, learn practical skills, and get one-on-one coaching and advice. It is conducted in a relaxed, informal setting that allows parents to build trust and make friends.

Weekly themes include learning about you and your child, cues and the ways babies and children communicate, looking at how babies and children learn about their feelings, building emotional security through play and developing trust. Playsteps strengthens family relationships which in turn builds a child's resilience.

Beth found Playsteps to be a life changing experience.

Here is her story... 35 year old Beth mother to 8 month old Ella began Playsteps saying that she had "no maternal role models" and that she found parenting "challenging".

Beth suffered from violence as a child and her own mother's poor mental health meant she had minimal contact with her. She found implementing a sleep and feeding routine for Ella difficult from the beginning. Ella was often awake until 11pm and waking for bottles throughout the night. She really needed some strategies to help.

Over the first weeks of Playsteps, staff observed that Beth and Ella were disengaged with one another. Beth was not confident in playing with Ella. Ella frequently moved away from Beth and struggled to maintain eye contact. Minimal smiles and laughter were exchanged between Beth and her daughter.

Staff role modelled play experiences such as 'peek a boo', stacking blocks and imitating Ella's actions to encourage Beth to engage in play with Ella. By the end of the 8 week program Beth was able to initiate and engage in play with Ella for 10-15 minute periods at a time. Beth spoke of play activities she had implemented at home and dancing with Ella in her arms.

Ella and her mum were able to strengthen their attachment through their Playsteps experience. Beth has an increased awareness of what her daughter is trying to communicate and loves the growth in their relationship. She now has the confidence and skills to identify and understand Ella's cues and help her to meet her developmental milestones.



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

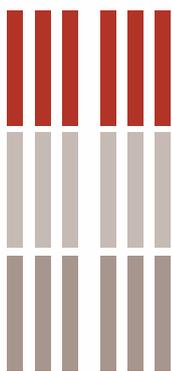
Mr Kenneth Hambly
Ms Betty Hassold
Dr Nigel Hocking
Mr Graham Jasper
Mr Rod Jones
Mrs Denise McGregor
Mrs Gwen Redman
Ms Hilary Russell
Ms Lesley Yates

Friends of Tweddle

Once again we are very grateful to our Friends.

Acknowledgements

Sam Burrone Design



tweddle

child + family health service

53 Adelaide Street Footscray

Victoria 3011 Australia

Tel + 61 3 9689 1577

Fax + 61 3 9689 1922

Web www.tweddle.org.au