More than the Sum of its Parts

An Evaluation of Ballymun Network for Assisting Children and Young People (2005-2010)

Summary Report
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An evaluation of Ballymun Network for Assisting Children and Young People (2005-2010)

An interagency initiative for the coordination of children’s services in Ireland

Summary Report

December 2010
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Preface

Ballymun Network began in 2005 and was prompted by concern that many young people in the area were being neglected, some were effectively out of control, and yet none of the agencies with a remit for children or young people seemed capable of responding in a coordinated way to their needs. In the subsequent five years to the present (2010), agencies in Ballymun have worked much more closely together and have developed an inter-agency approach to address the needs of vulnerable young people (10-18 years) and their families. This includes a protocol which facilitates the statutory and community/voluntary organisations involved in the Network to make inter-agency referrals and to convene joint meetings to discuss concerns about individual young people, overcoming confidentiality restrictions previously seen as sacrosanct in some services. This is a significant step forward for young people’s services, removing perhaps the most significant barrier to co-ordinated inter-agency care planning cited by agencies.

The Network commissioned WRC Social and Economic Consultants to carry out an evaluation of this initiative and to assess its impact on member agencies as well as the outcomes for young people and their families.

The rationale for this evaluation, as of any evaluation of public services, is simple. The provision of public services involves a tripartite relationship between the Government which commissions and funds services, the agencies paid to deliver them, and the people who use them. The quality of public services depends on the quality of these relationships, and on the existence of systems and processes to ensure that these relationships are transparently accountable, responsive to need, and effective in their outcomes. In an area like Ballymun where the level of need is extremely high, and where each agency is usually the sole provider of its service, it is even more important to establish that services are effective and properly coordinated.

The report shows that Ballymun Network has achieved its objectives and has been a success in terms of helping to put in place robust systems for inter-agency cooperation. Ballymun now has good systems to facilitate inter-agency cooperation in responding to the needs of vulnerable young people. The report also shows that the Network has been a success in promoting other aspects of inter-agency cooperation including the joint delivery by agencies of programmes such as the Strengthening Families Programme, and the provision of joint training for front-line staff in both the therapeutic and legal aspects of caring. Beyond that, it has created considerable social capital in terms of creating constructive and friendly working relationships between managers and front-line workers across all agencies in the area.

However the report also highlights a number of areas where the Network has not been a great success. Its analysis draws attention to two broad sets of factors which may have contributed to poor outcomes:
(i) the difficulty of achieving positive outcomes with 10-18 year olds who already have a long history of neglect, including neglect by services;
(ii) the different standards of work and management by some agencies, including a predominant focus on providing services rather than delivering outcomes, which hampered the case management system.

The findings of this evaluation report are both affirming and challenging. They are affirming in the evidence that Ballymun Network has significantly improved local inter-agency coordination. But they are also challenging by raising more fundamental questions about whether vulnerable young people and their families in Ballymun are benefitting as they should from the high level of government investment in local service provision. These challenges should embolden service managers to carry on the achievements of the Network and to seek new and...
better ways of working together.

Since the completion of the evaluation, the Network has decided to close the formal case management system. However, agencies involved in the Network have committed, under the protocol, to continue making referrals to each other and to find more effective ways to helping young people.

The Research Advisory Group, on behalf of the Network and the funders of this study, express their thanks to WRC Social and Economic Consultants for an excellent report. Its two researchers – Carmel Duggan and Tony Tyrrell – left no stone unturned to ensure that, as far as possible, the report is free from errors of fact or interpretation.

We also wish to thank the funders of this study:

Young Persons Probation
Dublin City Council
youngballymun
Ballymun Local Drugs Task Force
Children’s Acts Advisory Board
National Lottery

Finally, we recognise that this is a local study based on the experience of agencies in Ballymun. However, because the local is also an expression of the national, the study may have wider lessons and implications, not only for other local communities but for national policy and practice as well. For that reason, we hope that this report will contribute to the broader national objective of improving the quality of services and outcomes for all vulnerable children and their families.

On behalf of the The Research Advisory Group (RAG)

Marie Lawless  Ballymun Local Drugs Task Force (Chair of RAG)
Kieran McKeown Independent Consultant (Chair of Ballymun Network)
Catherine McGowan youngballymun (Ballymun Network Coordinator)
Eleanor McClorey youngballymun (Chief Executive)
Lorna Powell youngballymun (Jigsaw Programme Coordinator)
Hugh Greaves Ballymun Local Drugs Task Force (Coordinator)
Marion Martin Children’s Acts Advisory Board (Advisory Officer)
Acknowledgements

WRC Social and Economic Consultants wish to acknowledge that this evaluation was made possible by the cooperation and support of a large number of people including:

The members of Ballymun Network for Assisting Children and Young People, including their chair, who cooperated so agreeably and provided their time to participate in, and progress the work of this evaluation.

The frontline staff in the participating agencies and the Network Facilitator for their frankness and openness in sharing their views and experiences.

A particular word of thanks is due to the young people and their families who participated in the case studies.

The agencies that funded this evaluation: youngballymun, Dublin City Council, Young Persons Probation, Ballymun Local Drugs Task Force, Children’s Acts Advisory Board (CAAB) and The National Lottery

The young people between the ages of 10-11 years of the BRYR Studio Time programme facilitated by Marlijn Gelsing and Mateo Dolest who designed the front cover.

Róisín Kelly of Ballymun Local Drugs Task Force for the overall layout and design of this publication.
Members of Ballymun Network

Chairperson – Dr. Kieran McKeown
Aisling Project
Sr. Malen del Valle
Coordinator

Ballymun Job Centre
Nuala Whelan
Assistant Manager

Ballymun Principals Network
(Primary Schools)
Maura Doyle
Principal St Josephs Senior P.S

Ballymun Youthreach Centre of Education
Jacqui Caulfield
Coordinator

BEST Ballymun Educational Support Team, School Completion Programme
Paula Heenan
Manager

BLDTF Ballymun Local Drugs Task Force
Hugh Greaves
Coordinator & Cliodhna Mahony
Prevention and Intervention Officer

BRYR Ballymun Regional Youth Resource
Donnacadh Hurley
Manager,
Angela Birch
Senior Youth Worker & Cathy Mooney
Youth Worker

BYAP Ballymun Youth Action Project
Mairead Kavanagh
Director

Coordinators – Catherine McGowan

DCC Dublin City Council
Bernie Roe
Social Inclusion and Community Development Unit Ballymun Manager

An Garda Síochána
Sgt Seamus Treacy
Juvenile Diversion Officer

Geraldstown House HSE
John Peelo
Manager

Mater CAMHS
Shaun Frandsen
Clinical Psychologist

NEWB
National Educational Welfare Board
Glenn Perry
Senior Educational Welfare Officer

HSE Social Work
Carol O’Flynn
Principal Social Worker (member at the time of the evaluation)

HSE - Primary Care
Graham Connon
Senior Clinical Psychologist

Trinity Comprehensive School
Fiona Gallagher
Vice-Principal

Young Persons Probation Probation Service
Mary McGagh
Senior Probation Officer & Rachel Lillis
Probation Officer

youngballymun
Eleanor McClorey
Chief Executive & Lorna Powell
Jigsaw Programme Coordinator

Note: In the report acronyms may be used when referring to Network Members.
PART A:
The Evaluation

Prepared by
WRC Social and Economic Consultants
1 Introduction

The Ballymun Network for Assisting Children and Young People was established in 2005 by the Ballymun Local Drugs Task Force due to concerns about the growing numbers of young people engaged in risky behaviours and the awareness that there was not an adequate service response to their needs. The aim of the Network is to “establish seamless working relationships between services and organisations responding to the needs of young people at high risk in Ballymun with a view to maximising service responses to this target group”. The specific objectives of the Network are as follows:

1. To examine current policy and practice employed by services and organisations responding to the needs of Ballymun youth at high risk.

2. To identify the needs of services and organisations responding to the needs of Ballymun youth at high risk that would enhance their ability for inter-agency work.

3. To identify best practice in inter-agency work and examples of successful models in other communities.

4. To develop a model of inter-agency work for services and organisations that respond to the needs of Ballymun youth at high risk.

5. To develop a system to apply the model within Ballymun.

6. To obtain commitment to and participation by those services and organisations in inter-agency work.

7. To initiate the practice of inter-agency working by services and organisations responding to the needs of Ballymun youth at high risk.

The Network at the time of the evaluation had representation from seventeen agencies (see Table 1). The principal service integration mechanism is a Case Management System (CMS) underpinned by a formal Protocol. The CMS has been implemented since January 2006 and to June 2009 had catered for 89 young people.

In February of 2009 the Network undertook to evaluate the effectiveness of the implementation phase with a view to its continuation as a model of good practice within Ballymun and to demonstrate its potential to a wider audience.

The terms of reference for the evaluation were:

1. To examine the Network in the context of how services for young people are planned, organised and delivered in Ballymun;

2. To examine the characteristics of the target group served by the Network relative to the client group served by each participating agency, and relative to what is known about the prevalence of need among young people in Ballymun;

3. To describe and analyse the care plans used by the Network in working with young people, barriers encountered and benefits to young people, based on a review of Network cases;

4. To examine the effectiveness of the inter and intra agency process and its impact on working relationships in Ballymun for the purpose of informing the development of an inter-agency quality assurance framework;

5. To describe the lessons for the delivery of services through interagency cooperation based on the experiences of the network.

6. To make recommendations on how to actualise the capacity of the Network and its participating agencies to respond to the needs of young people and their families.
<table>
<thead>
<tr>
<th>Agencies</th>
<th>Brief overview</th>
</tr>
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<tbody>
<tr>
<td>Aisling Project</td>
<td>This is a neighbourhood based educational support project working with children attending local schools.</td>
</tr>
<tr>
<td>BEST (Ballymun Educational Support Team)</td>
<td>BEST provides personal development and other supports to young people in school and out of school.</td>
</tr>
<tr>
<td>Ballymun Local Drug Task Force</td>
<td>The Task Force has responsibility for integrating services in relation to drug use and related harm in Ballymun.</td>
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<tr>
<td>Ballymun Job Centre</td>
<td>Ballymun Job Centre provides a wide range of labour market services to people in Ballymun, including young people.</td>
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<tr>
<td>Ballymun Principals Network</td>
<td>The Principal’s Network comprises all school principals at first and second level in Ballymun.</td>
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<tr>
<td>BRYR (Ballymun Regional Youth Resource)</td>
<td>BRYR is a community based organisation providing a range of programmes and services to young people.</td>
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<tr>
<td>Dublin City Council, Social Support Unit</td>
<td>The Family Support Unit provides supports to families in need in Ballymun.</td>
</tr>
<tr>
<td>An Garda Síochána</td>
<td>Garda Síochána working at Ballymun Station are involved in a number of preventative, diversionary and youth projects.</td>
</tr>
<tr>
<td>Geraldstown House</td>
<td>This is a HSE funded project which provides counselling and related services to young people and families.</td>
</tr>
<tr>
<td>HSE, Social Work Dept.</td>
<td>The Social Work Team provides child protection and associated services.</td>
</tr>
<tr>
<td>Mater CAMHS</td>
<td>This agency provides mental health and related services across a wide geographic area, including Ballymun.</td>
</tr>
<tr>
<td>NEWB (National Educational Welfare Board)</td>
<td>The NEWB is a national organisation with statutory responsibility in relation to school attendance.</td>
</tr>
<tr>
<td>Young Persons Probation</td>
<td>Probation Services provides a range of services to support young offenders integrate in their communities.</td>
</tr>
<tr>
<td>Trinity Comprehensive School</td>
<td>Trinity Comprehensive is the only second level school in Ballymun and caters for the vast majority of second level students from the area.</td>
</tr>
<tr>
<td>YAP (Youth Action Project)</td>
<td>This is a community based organisation providing services in relation to drug and alcohol issues.</td>
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<tr>
<td>youngballymun</td>
<td>youngballymun provides evidence based services across the life cycle (pre-birth to early adulthood) to infants, children, young people and families</td>
</tr>
<tr>
<td>Youthreach</td>
<td>Ballymun Youthreach provides education and training to young people.</td>
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In addressing the terms of reference of the evaluation, the following methodologies were used:

- Analysis of available material pertaining to the needs of young people within Ballymun, primarily from Census and research data and information generated by organisations within Ballymun.

- Analysis of the material produced by the Network since 2005, including the memos of the Network Steering Group meetings, periodic reviews, thematic papers and other reports, material relating to the case management system including the interagency Protocol and the cases dealt with up to May 2009, including an analysis of the 69 case files.

- 43 interviews in total were undertaken with 34 representatives of the seventeen agencies participating in the Network (some representatives were interviewed twice), with the Network facilitator and the Network coordinator and with frontline staff involved in inter-agency case meetings (see table 2).

- Case studies of nine cases selected from the Case Management System.

A research advisory group was established with the overarching aim to oversee the implementation of the evaluation process on behalf of the Network;

- To formulate a tender brief for the evaluation of the Network;
- To assess proposals received according to criteria and award the contract;
- To ensure that research is undertaken as per tender awarded and signed contract;
- To assist the awarded body with any documentation or details that may be required;
- To provide the awarded body with ongoing support and guidance over the course of the contract period;
- To provide feedback on the research process to the Network members;
- To respond to any questions from Network members in relation to the research process;
- To approve work progress reports, summaries, draft report and final report.

This executive summary highlights the key findings of the evaluation of the Network in relation to (a), the effectiveness of its principal structures and mechanisms i.e., the Network Steering Group and the Case Management System, (b) its effectiveness in reaching young people in Ballymun and providing an integrated response to their needs and (c) the impact of the Network on the lives of its young clients. The Executive Summary concludes with the recommendations arising from the evaluation.
<table>
<thead>
<tr>
<th>Name</th>
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<th>No. of interviews</th>
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<tr>
<td>Kieran McKeown</td>
<td>Ballymun Network</td>
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<td>Catherine McGowan</td>
<td>Ballymun Network</td>
<td>2</td>
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<tr>
<td>Eleanor McClorey</td>
<td>youngballymun</td>
<td>1</td>
</tr>
<tr>
<td>Marie Lawless</td>
<td>BLDTF</td>
<td>1</td>
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<tr>
<td>Hugh Greaves</td>
<td>BLDTF</td>
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<td>John Peelo</td>
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<tr>
<td>Tom O’Donnell</td>
<td>Geraldstown House</td>
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<tr>
<td>Angela Birch</td>
<td>BRYR</td>
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<tr>
<td>Cathy Mooney</td>
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<tr>
<td>Mairéad Kavanagh</td>
<td>YAP</td>
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<td>Karl O’Brien</td>
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<td>Paula Heenan</td>
<td>BEST</td>
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<td>Des Kelly</td>
<td>Former Principal Trinity Comprehensive</td>
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<tr>
<td>Sr Malen De Valle</td>
<td>Aisling Project</td>
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<tr>
<td>Peter Doherty</td>
<td>Aisling Project</td>
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<tr>
<td>Maura Doyle</td>
<td>Ballymun Principals Network</td>
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<tr>
<td>Nuala Whelan</td>
<td>Ballymun Job Centre</td>
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<td>Lorna Powell</td>
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<tr>
<td>Lisa Tarleton</td>
<td>Ballymun Job Centre</td>
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<tr>
<td>Pat Kavanagh</td>
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<tr>
<td>Jacqui Caulfield</td>
<td>Ballymun Youthreach</td>
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<td>John Flanagan</td>
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<td>Geraldine Montgomery</td>
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<td>Carol O’Flynn</td>
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<td>Louise Higgins</td>
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<td>Mary McGagh</td>
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<tr>
<td>Sgt Séamus Treacy</td>
<td>An Garda Síochána</td>
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</tbody>
</table>
2 Effectiveness of Network Structures and Mechanisms

The principal structure of the Network is the Steering Group comprised of representatives of all seventeen agencies participating in the Network. The key mechanism of the Network is the Case Management System, underpinned by the Protocol.

2.1 The Network Steering Group

The Network Steering Group meets approximately every two months from September to June of each year. The meetings are chaired by an independent facilitator and all agencies are required to attend every meeting or to send a fully briefed alternate. The Steering Group has not developed a terms of reference for itself, but de facto its functions include overall decision making and planning, building relationships and eliciting the cooperation of the participating agencies, overseeing the implementation of the CMS and reinforcing and resourcing the broader interagency process.

Planning an Decision-Making

The effectiveness of the Steering Group as a planning and decision making mechanism is demonstrated in the first instance by the development and implementation of the CMS and the Protocol. In the context of the well documented difficulties in establishing integration at service delivery level, this is a significant achievement. The administrative support, the Network Coordinator and the Network Facilitator all serve to reinforce this dimension of the Steering Group. Some deficiencies in decision making and planning were identified however, including the lack of terms of reference for the Steering Group, limited strategic planning or goal setting, and the absence of a protocol for participating in the Steering Group itself coupled with the failure to establish a mechanism to respond to under-performance on the part of some agencies. In addition, no guidelines have been established for embedding the inter-agency approach within the participating agencies, other than the agreement of a ‘ground rule’ relating to involving frontline staff in the interagency project.

Building Relationships

Most participating agencies acknowledge that while it took time, the Network has succeeded in overcoming many of the difficulties associated with interagency working. The growth in trust and respect across agencies, the wider awareness and appreciation of the constraints and limitations operating on the various agencies, and the greater willingness to collaborate outside the formal Network context are all pointed to as indicators of the impact of the Network at this level. There are some negatives however. Some participating agencies perceive that a degree of mistrust persists within some agencies and that some agencies are more willing than others to engage fully in interagency working, to overcome obstacles to their participation and to have adapted their normal way of working to facilitate the interagency process. To date, the positive aspect of the Network, the commitment and energy behind it and the goodwill of those agencies who feel they are fully committed, has had sufficient impetus to drive the process forward regardless of these problems. However, there is also a sense among some agencies of having to accept a sub-optimum situation because an effective mechanism to address issues of poor performance has not been developed.

Overseeing the Implementation of the CMS

The ongoing task of overseeing the implementation of the Protocol is a core activity of the Network Steering Group and is one on which it expends a considerable amount of time, particularly with regard to (a) addressing breaches of the Protocol or the failure of individual agencies to fully observe its provisions and (b) overseeing ongoing cases within the CMS. The ongoing efforts of the Steering Group to address deficiencies and unevenness in the observance of the Protocol (primarily through modifications to the Protocol itself) testify to the effectiveness
of the Steering Group in convening open discussion. However the Steering Group has not addressed the fundamental issue of where responsibility for observing the Protocols should lie. The Steering Group also spends considerable time and effort in presenting and hearing updates on cases within the CMS. But it is not clear that this process is contributing to the effective management of cases or to an adequate oversight by the Steering Group – both of which are further hindered by the failure to develop a monitoring system for tracking the progress of Network cases.

Facilitating the Broader Inter-agency Project

While somewhat tangential to the core work of the CMS, the role of the Steering Group in facilitating the broader interagency project has been significant in developing good practice within the Network, in achieving positive outcomes and in providing a foundation for expanding the inter-agency project in the future. Activities to reinforce the broader interagency project included: facilitating and providing training for agency personnel in areas of common interest in relation to service provision for young people; facilitating the development of new joint programmes across participating agencies or the refocusing of individual agencies existing programmes; exploring thematic approaches to meeting the needs of young people; and, engaging in advocacy. The former two areas have achieved notable outcomes while the latter two have not, to date, been progressed to any great extent. That said, in March 2009 a Working Group proposed an approach aimed at the management structures of the participating agencies and the reallocation of the considerable body of resources still within the control of these agencies. This could potentially involve a reconfiguring of services within agencies in order to promote a more effective and integrated response to the needs of young people.

2.2 Key Findings – The Network Steering Group

The Network Steering Group has developed into a robust forum with ongoing commitment to and energy for implementing an inter-agency process. In brief, the effectiveness of the Steering Group is evident in the following:

Its achievement in developing the Network per se and in building trust and respect across the participating agencies;
- Its success in developing a mechanism and a tool for interagency working;
- Its capacity to provide information and facilitate information sharing;
- Its capacity to develop a wider awareness of the context of young people’s lives in Ballymun;
- Its effectiveness in securing committed participation and ongoing loyalty from the majority of agencies
- Its role in generating a profile and an authority for the Network;
- Its role in relation to capacity building and in fostering good working relationships and joint programme development;
- Its capacity to act as a forum for discussion and to raise issues of broad concern.

Areas where the Steering Group have been less effective are the following:
- Developing a clear role and terms of reference for itself;
- Developing a protocol to govern participation within the Steering Group;
- Developing a mechanism, such as a peer review process, to constructively engage with agencies regarding their participation in the Steering Group and within the Network overall;
- Engaging in planning, strategising and progressing themes and agendas;
- Establishing clarity around the Resource Team’s role;
• Guiding the intra-agency process and promoting the reconfiguring of services;
• Visioning the broader inter-agency potential based on the existing strategy and set of relationships.

2.3 The CMS and the Protocol

The CMS has been implemented since January 2006 subsequent to all participating agencies signing up to the Protocol (see Box 1). The CMS, along with the Protocol, are the main service integration mechanisms. Here we note the findings in relation to their effectiveness in enabling the Network reach vulnerable young people in Ballymun and in underpinning the interagency process at service delivery level.

Reaching Vulnerable Young People in Ballymun

The current target group for the Network are young people at risk aged between 10 and 18. To June 2009, a total of 69 formal referrals had been made to the Network. Some referrals were in respect of siblings and so overall 89 young people had been referred to the Network to that date. Over time, the tendency has been to refer young people on the basis of risky circumstances rather than risky behaviours and in line with the age range has moved towards the lower limit and an increase in the rate of referral of young girls. The evening out of the gender profile of Network clients is to be welcomed, given the well documented tendency for services for young people to be targeted at anti-social or other acting out behaviours (and therefore predominantly at young males), rather than at the broader level of need that exists. However, the absence of young people from different ethnic backgrounds, including the Traveller Community is marked.

In terms of a comparison between the clients of the Network and the clients of the participating agencies on the one hand and in terms of the overall level of need among young people in Ballymun, we can note the following:

• To date the client group of the Network is concentrated at the older end of the targeted age range although more recently this has begun to shift in favour of a slightly younger group.
• After an initial predominance of boys among the client group, the gender breakdown is becoming more evenly split between boys and girls
• There is a marked absence of young people from ethnic minorities and the Traveller community amongst the client group of the Network. The extent to which these are also absent from the participating agencies client groups is unclear.

The low number of referrals to the Network (and the pattern across agencies) is difficult to reconcile with the level of need among young people in Ballymun and the level of expressed enthusiasm for the Network. Some degree of variation in relation to referrals might be expected given the different roles, services and age groups that the various agencies are responsible for. However, the variation in client group or work practice does not fully explain the variation in the pattern of referrals: a number of participating agencies are working with substantial numbers of young people who are engaging in risky behaviours or who find themselves in risky circumstances and have referred few if any of their clients to the Network. This phenomenon suggests that a number of participating agencies either do not consider the Network to be relevant to their client group or that they experience other significant barriers to referral. Table 3 looks at the factors influencing decisions to refer young people to the Network.
Box 1: Ballymun Network for Assisting Children and Young People Protocol: February 2008

i. This protocol is an agreement between the organisations, and departments of organisations, who are members of Ballymun Network for assisting children and young people.

ii. The purpose of this protocol, and the Ballymun Inter-Agency Network for Children which prepared it, is to promote best practice in services for children and families. Our understanding of best practice is informed by the National Guidelines for the Protection and Welfare of Children and the National Children’s Strategy.

iii. Members of the inter-agency network commit to maintaining and cultivating an ethos of trust, openness, honesty and cooperation.

iv. Members of the inter-agency network will share information about children and young people in order to ensure their welfare and protection. Sharing information in this context is not a breach of confidentiality.

v. All members of Ballymun Network will refer children and young people to the HSE Social Work Department where there is reasonable suspicion of abuse or neglect. In addition, in order to ensure that all referrals within the Network have been notified to the HSE Social Work Department where there is reasonable suspicion of abuse or neglect, the Network Coordinator will check all referrals within the Network to establish if the child or young person is known the HSE Social Work Department, whether the case is still open and whether there is an allocated social worker.

vi. Members of Ballymun Network for Assisting Children and Young people who raise concerns about a child or young person with another member of the Network will follow up within two weeks, or earlier if necessary, to find out what has been done.

vii. Members should be aware of the potential danger where children and young people who are known to be vulnerable, are no longer contractable and should use the Network to restore contact wherever possible.

viii. It is incumbent on all members of the inter-agency network to ensure that information about children and young people is kept safe and secure. Staff in all agencies will be aware that information about children and young people is shared on a need to know basis and only where it is in the best interests of the child or young person.

ix. Any member of the inter-agency network may call a meeting with other members of the Network to discuss concerns about a child or young person. This meeting is referred to as a Network Case Meeting and its purpose is to share information about the child or young person, to see if further information is required, to decide on the appropriate service response, and to agree on the role of different agencies in making that response. Network case meetings can be called to discuss any serious concern about the welfare of a child or young person and not just concerns about child protection in the strict sense.

x. Every member of the inter-agency network acknowledges their limitations in meeting the needs of children and young people and commits to becoming familiar with the services which other members of the network have to offer.

xi. Each member of the inter-agency network will, wherever possible, seek the consent of the parent to work with or refer a child or young person.

xii. Members of Ballymun Network for Assisting Children and Young People will recognise that staff may sometimes be placed at risk by their involvement in certain cases and commit to ensuring the health and safety of staff.

xiii. All members of Ballymun Network for Assisting Children and Young People subscribe to this protocol and support its practical implementation at all levels of the organisation. Each member commits to developing and maintaining the structures and resources necessary within their organisation to ensure that this protocol is fully implemented.

1 This Clause contains a number of sub-clauses relating to the actual organisation of case meetings.
In terms of enabling the delivery of integrated services to young people the CMS and the Protocol are very highly evaluated by the participating agencies and their frontline personnel. The CMS is seen as the mechanism through which the Network has been able to become a reality in terms of service delivery. The training provided by the Network Co-ordinator is also very highly evaluated by frontline personnel. There is a widespread view across participating agencies that the Protocol and the CMS have been effective in generating inter-agency working and in enabling an integrated approach to service delivery. This is a result both of the Protocol itself but also of the experience of implementing it. In this context, there is a strong view that the experience of working within the CMS has generated an authority for the Network, enabling it to become more than the sum of its parts.

There is also a view that participation in the CMS increases the work load on frontline staff (particularly for the lead agency), but that it is worth the effort. Benefits for frontline staff identified include: reduced stress as a result of having more people to consult with or to discuss issues with; their enhanced ability to confront a young client (or their family) as a result of having better and more information about them but also as a result of being associated with the ‘authority’ of the Network; and, the opportunity to reinforce their own services by drawing in parallel interventions.

Notwithstanding the enthusiasm for the Protocol and the provision of training, there has been constant variability in the way it is implemented in particular in relation to variability in the ways in which Case Meetings are arranged, managed and reported upon. In the view of a number of agencies, there is an ongoing need for training in running meetings to overcome this variability. There is also a concern about the sub-optimum participation of some agencies in Case Meetings and a tendency to withhold information.

2.4 Key Findings – the CMS and the Protocol

Overall then, the CMS and the Protocol are very favourably viewed by frontline personnel. Difficulties and challenges arising are not understood to the result of the provisions of the Protocol per se, but on the manner of their implementation and the context within which that occurs. In brief, evidence of the effectiveness of the CMS and the Protocol lies in the following:

- Its ability to act as a mechanism to coordinate service delivery across the participating agencies;
- Its capacity to involve frontline staff in the inter-agency initiative;
- Its ability to highlight service gaps and other issues affecting young people;
- Its role in building awareness across frontline personnel of the challenges and constraints faced in delivering services;
- Its role in building relationships / networks;
- Its capacity to foster good practice bilaterally;
- Its capacity to highlight the needs of specific young people and to develop an integrated response to those needs, particularly in the short and medium term;
- Its capacity to achieve positive outcomes for young people and their families.

The barriers to the effective implementation of the CMS and the Protocol are as follows:

- Poor communication regarding arranging and attending meetings;
- Inadequate training and preparation for frontline personnel;
- The uneven attendance at Case Meetings;
- The lack of a mechanism to challenge the attendance and sub-optimum participation on the part of some agencies;
- Inadequate note taking and failure to circulate minutes;
- No monitoring system to track progress or lack thereof;
- Inadequate information flow to the Network Steering Group.
Deciding to refer because it is seen the young person can benefit.

A number of agencies refer young people who they perceive are ‘most in need’ amongst their client group or who they believe could benefit from the services of the participating agencies. Within this approach, a key question that agencies ask is ‘what benefits could the Network confer on this young person that could not be conferred by the agency working alone’.

Deciding to refer because the agency feels it can do no more for the young person.

A small number of agencies consider the clients of the Network to be those whose needs cannot be met by their own services. Consequently only when they have exhausted their own interventions or encountered significant difficulties will they make a referral to the Network. For example, one agency notes that it refers young people to the network in cases where their families will not co-operate.

Deciding not to refer because the Network is not appropriate for the young person.

The Network can be considered an inappropriate destination for young people for a number of reasons. Sometimes there may be a desire not to draw too much attention to a young person, particularly one with extreme behaviour issues. One agency believes that its client group is beyond the competence of the Network to assist. There is a view on the part of some agencies that the Network is mainly concerned with child protection issues and that this defines the client and the decision to refer (although to date only one referral on the basis of child protection issues is noted in the case files).

Deciding not to refer for reasons unrelated to the needs of the young person.

Agencies may decide not to refer based on the following:

- A view that some other agency has the prior responsibility to refer. For example, the belief that where young people are still in the education system, the school has the primary duty to care leading in certain instances to a reluctance to refer a school-going child for this reason;
- A desire to minimise referrals in order to avoid the potentially cumbersome and time consuming role of lead agency - it seems likely that the network itself has engendered better bilateral arrangements between some agencies, which reduces their need to refer young people formally to the network;
- A concern about losing clients to other agencies;
- A desire to maintain a good relationship with clients and not to jeopardise this by referral to a network comprised of very different agencies.
3. The Impact of the Network on Vulnerable Young People

This is obviously a key area in terms of assessing the impact of the Network; however, there are difficulties in assessing the precise impact of the Network on young people. In the first instance, the Network itself has not developed an instrument to capture the benefits of its work with young people so the extent of its impact has to be built up from case file material and from the recollections of those involved in the cases. A second difficulty relates to the ‘point in time’ at which the assessment is made - as the situation of young clients may improve or dis-improve over time, the assessment of impact likewise varies. There are also difficulties in comparing the impacts the Network has achieved through its inter-agency process with impacts achieved by single agency approaches due to the lack of evaluation and outcome measurement generally in public service delivery in Ireland. Noting the above points, we can assess to what extent the young people in the Case Studies benefited from the Network but we cannot say with any degree of conclusiveness how much more effective the Network’s interagency approach has been over and above the unilateral approaches it seeks to improve upon.

The selected cases were referred over a two and a half year period from January 2006 to mid 2008 and provide a good cross section of all cases. There is a predominance of males among the young people: five of the selected case studies are cases relating to boys, two to girls, and two are family cases. The age range is towards the higher end of the spectrum and most were referred for reasons to do with their behaviour; however, the more recent cases show a move towards younger people whose circumstances (rather than behaviour) provide the trigger for referral. In terms of status at the time of the evaluation, two cases were closed; four were being monitored - that is case meetings were not considered necessary at this point in time, but could be reinstated if necessary; two were classed as inactive due to there being no meetings called for several months and no updates provided by the lead agency; and one was active. A summary of the Case Studies is included in Table 4.

3.1 The Needs of the Young People and the Integrated Response

Across the nine case studies a wide range of problematic issues were presented, both in relation to young people themselves and frequently too in relation to their family circumstances. A significant variation across cases in relation to the complexity of issues presented is the extent to which the young person, and/or their family, is willing to cooperate with the Network. Overall, the issues presented by this small number of cases highlight the level and complexity of need among young people in Ballymun and the challenges this presents for the Network in terms of needs assessment, care planning and delivering integrated services.

Needs assessment

The evidence from the case studies suggests that the Network Case Meetings (NCMs) are effective in identifying, over time, the issues affecting the young person and that the identification of needs frequently extends to the siblings and even to the parents of young people. A number of barriers to needs assessment were identified by frontline personnel. These are:

- A full assessment of the needs of a young person is not always within the capacity of the participating agencies and care planning can be frustrated by delays in assessing the relevant service;
## Table 4: Summary of Case Studies

<table>
<thead>
<tr>
<th>Case</th>
<th>Client profile</th>
<th>Lead / other agencies</th>
<th>*No of meetings</th>
<th>Overview of process</th>
<th>Outcomes</th>
<th>Current Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>Boy, 16 at referral, lone parent family, referred for ASB, charges against him, well known to agencies.</td>
<td>BRYR, BJ, Probation, YAP, Youthreach</td>
<td>13</td>
<td>Initial progress, then more drug related court cases. Mother and young person involved in CMS, subsequently significant improvement in young person. Good bilateral working relationships formed – could work outside formal network process</td>
<td>No longer involved in drugs or crime, no longer hanging around the blocks, improved personal appearance, and improved attitude. This case is seen as a success and as an example of good inter-agency working.</td>
<td>Closed</td>
</tr>
<tr>
<td>B</td>
<td>Whole family of six children. Initial referral for older boy and girl, subsequently other children came into focus.</td>
<td>HSE, BEST, BRYR, DCC, YR, G H, A, BJ, NEWB, T C,</td>
<td>9²</td>
<td>Approach was to work with family to identify needs, reinforce mother’s parenting skills and self confidence. Case described as like peeling an onion – new problems emerging all the time.</td>
<td>Older children have moved on, but problems remain within the family. It is perceived that the services required for this high level of need are not available. There is also a view that a key agency did not perform fully for one of the young people. There have been no meetings since February 2009 and Social Work has not provided an update to the Network.</td>
<td>Inactive</td>
</tr>
<tr>
<td>C</td>
<td>Boy, 18 at referral, drug using, chaotic, assault charges, well known to Garda.</td>
<td>BRYR, GH, YAP, BJ, DCC,</td>
<td>11</td>
<td>Initial improvement in the young person’s situation, but subsequent deterioration. Deep rooted issues in the family which make it hard for him to engage with services. Agencies have difficulty responding to him. Young person has difficulty understanding his behaviour.</td>
<td>Appears to be a failed case. Young person chaotic, ongoing drug use, prison term likely, and not much can be done with him. Two factors cited: family never involved in case, and multiple changes of personnel in agencies: 12 POs in 5 years. An exit meeting was planned for June 2009.</td>
<td>Closed</td>
</tr>
</tbody>
</table>

² Minutes refer to other apparently undocumented meetings.
### Evaluation of Ballymun Network for Assisting Children and Young People

#### More than the Sum of its Parts

<table>
<thead>
<tr>
<th>Case</th>
<th>Overview</th>
<th>Support</th>
<th>Monitoring</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>D</strong> Boy, 17, high needs, reaction to bereavement, subsequently two younger sisters come into focus.</td>
<td>BEST, BJC, LDTF, YR, BRYR, TC, school, GH, YAP, D, NEWB, Ashling</td>
<td>High level of need on part of YP, mother and younger siblings, lots of support for mother and younger kids.</td>
<td>Good outcomes for the younger kids and mother. Tenancy was secured, older girl doing LC, younger girl ok and getting supports. Boy started PLC and while did not finish it, perceived as good outcome for him, mother very appreciative of support from the network.</td>
</tr>
<tr>
<td><strong>E</strong> Boy, 17 at referral, suspected neglect and drugs in family, some behaviour issues. Supportive family members</td>
<td>BEST, BRYR, YAP, BJC, YR, GH, GS, NEWB,</td>
<td>Ongoing support was provided to the young person who is living outside Ballymun for safety. He is perceived to be very at risk. Sporadic involvement of parents in meetings although both supportive.</td>
<td>Mixed views on outcomes. One view is that the network worked well formally and informally and that even maintaining contact with the YP was success in itself. Another view is that the case was handled badly and that the main beneficiaries are the mother and younger children. Due to the Network’s work with the mother, the younger children are no longer seen to be at risk.</td>
</tr>
<tr>
<td><strong>F</strong> Girl, 16 at referral, erratic behaviour, inappropriate sexual behaviour, concerns about mental health.</td>
<td>BRYR, MC, DCC, HSE, School</td>
<td>A collective approach to ensure this girl is kept busy and is getting a consistent message from all agencies, reinforced by parents. MC advised lead agency on how to deal with her. Parents are supportive, have attended Strengthening Families Programme and are working with agencies to support their daughter</td>
<td>The young girl was assessed and considered unable for mainstream schooling. A place was found for her on Youthreach outside of Ballymun. She is considered by the Agencies and by her family to have made a great deal of progress and to have received the right supports. The family also benefited from the Network, and the younger siblings are getting early interventions. Conflicting views among the agencies involved about need for social worker to be allocated.</td>
</tr>
<tr>
<td>No</td>
<td>Case Description</td>
<td>Details</td>
<td>Outcomes</td>
</tr>
<tr>
<td>----</td>
<td>------------------</td>
<td>---------</td>
<td>----------</td>
</tr>
<tr>
<td>G</td>
<td>Girl, 12, apparent neglect, missing school, hanging around with drug using adults</td>
<td>HSE, BRYR, BLDTG, Aisling, TC, DCC, School</td>
<td>Family circumstances were difficult, tenancy issues, now stabilised thanks to Network, and mother engaging with Network as part of deal. A lot of focus on the family. Lots of additional supports for kids in school. No meetings since Jan 09, no updates from Social Work.</td>
</tr>
<tr>
<td>H</td>
<td>Boy, 11, ADHD, learning difficulties, concerns about transition to secondary, mother supportive.</td>
<td>MC, BRYR, Gardai, school</td>
<td>The young person has serious behavioural issues and is not expected to be able for Junior Cert. The plan was to keep him busy, link him into activities he enjoys. Older brother not attending school, so need to consider him as possible referral.</td>
</tr>
<tr>
<td>I</td>
<td>Boy, 16, behaviour, school attendance, possibly a drug issue.</td>
<td>BEST, BRYR, JLO, YAP</td>
<td>Boy previously known to a number of agencies but no-one working with him, fallen through all the cracks. Family is supportive of boy but refusing to co-operate with Network. The boy is linking in with his probation officer who can pull in other agencies if necessary.</td>
</tr>
</tbody>
</table>
• Frequently, the clients of the Network are not particularly easy subjects for assessment given the level and complexity of need they present with. As one agency put it, the young people referred to the Network tend to lurch from crisis to crisis;
• In addition, needs can unfold and change over time and can combine a mixture of short term crisis and longer term underlying problems.

Care Planning
In relation to care planning there appears to be an ethos of managing or responding to crisis or acute needs within the Network. Referrals are frequently triggered by crisis or acute need and the predominant response appears to be to develop an approach / care plan to respond to these immediate issues rather than to develop a longer term care or progression plan to support longer term outcomes. From the case studies, there is plenty of evidence of interventions focused on resolving an immediate issue in the short term or an ongoing series of issues in the medium term. While these stages are essential in bringing stability to the young person and averting a crisis, the capacity to achieve positive longer term progression requires longer term planning and goal setting.

Delivering an Integrated Response
The services required to be delivered and the manner in which they are required to be integrated varies depending on the needs of the young person and the specific objectives at any point in time. In some instances, services are delivered sequentially, in others they are delivered within the same time frame. The services of one agency can also be used to reinforce those of another. Frequently too, the services of some agencies involved can be focused on the family, while those of others are focused on the young person. At the point of actual integration, therefore, the concept of integrated services can be a number of different things, ranging from an integrated approach to care planning, to an integrated approach to actual interventions. One of the ground rules of the Network is that it will focus on the needs of clients and how the system of services can best meet those needs, rather than focusing only on what each individual service has to offer. There is ample evidence from the case studies of agencies seeking to adapt their services and provision in order to reinforce each others’ work, for example by one agency linking its personal supports for a young person to their participation on another agency’s training programme. However, it also appears that there is a lot of room to expand this type of approach as the practice of doing no more than offering the young person the existing services of the agency is still quite common, even when those services are declined by the young person.

3.2 The Outcomes for the Young People

Table 5 below provides an overview of the outcome for the young person in each of the nine cases. Overall, in one third of the case studies, positive outcomes have been secured for the young person and their families. In one third of cases, the outcome has been mixed or unclear at this point in time. In one third of cases, no positive impact has been achieved. While the proportion of successful cases is low, two things should be kept in mind: firstly, the positive outcomes that were achieved are very significant given the known difficulties in interagency service delivery and the issues faced by the client group; secondly, there is no data to compare these figures to. Overall we would suggest that a one third success rate in dealing with very complex cases is a positive finding at this stage in the work of the Network.

3 The Review of the Implementation of the Children First Guidelines also notes the concern that children who suffer from neglect are least well served by the current child protection system, which tends to be incident-based rather than responding to a continuum of need for a vulnerable child and their family and usually based around engagement, intervention and disengagement, rather than focused on responding to the long-term identified needs of children and families.
Table 5: Outcomes for Young People: Case Outcomes at time of Case Study

<table>
<thead>
<tr>
<th>Case</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>The young person was able to avoid a jail sentence, he was facilitated to continue education, he was supported through particularly stressful episodes, his mother was assisted in supporting him and he has moved on to a stable phase in his life.</td>
</tr>
<tr>
<td>B</td>
<td>The level and complexity of needs in this case were particularly challenging. It is difficult to determine any positive outcome.</td>
</tr>
<tr>
<td>C</td>
<td>The lack of cooperation on the part of the young person was problematic and little or no positive outcomes were achieved.</td>
</tr>
<tr>
<td>D</td>
<td>The young people and the family overall have benefited from the Network. The mother’s situation has improved and she has been assisted to support the children. The younger children have been supported to remain in education and the older boy has achieved a degree of stability in his life.</td>
</tr>
<tr>
<td>E</td>
<td>This case has produced mixed results. The circumstances of the young boy originally referred have not altered to any great extent. However, the work done with the family has been beneficial: the mother has made a lot of progress and the younger children are no longer considered to be at risk.</td>
</tr>
<tr>
<td>F</td>
<td>This case has also produced positive outcomes for the young person who is now in an appropriate education service.</td>
</tr>
<tr>
<td>G</td>
<td>This case, now classed as inactive, is difficult to assess. The young person has made some improvements and her siblings are noted to be doing better in schools. Some ongoing concerns remain however and it is not clear how durable the benefits to the young person will be.</td>
</tr>
<tr>
<td>H</td>
<td>This case demonstrates the difficulties in determining outcomes at a point in time. At the time of the case study, it was felt that the young person was more stable, that there had been an improvement in his behaviour and that he was less involved in risky behaviours. Since then however, other problems have emerged. At a minimum, it can be said that the young person did benefit from the work of the Network at a point in time, but it is unclear what the final outcome will be.</td>
</tr>
<tr>
<td>I</td>
<td>The Network has not been able to have any impact on the young person, due to lack of cooperation.</td>
</tr>
</tbody>
</table>
3.3 Key Findings – The Impact of the Network on Vulnerable Young People

From the case studies, it appears that at least in some instances the CMS has been successful in:

- Minimising or eliminating negative consequences for young people and their families - for example, through preventing evictions or through fending off a jail sentence;
- Helping young people at particular crisis points in their lives and helping to prevent the crises from spiralling out of control;
- Steering some young people through more prolonged difficult periods in their lives and enabling them avoid falling out of society altogether;
- Building the capacity of parents to manage their families;
- Creating awareness amongst parents of available services and increasing their willingness to engage with service providers.

The barriers to achieving successful outcomes were identified as follows:

- The referral may come too late in the young person’s lifecycle - i.e., when the young person is in his/her late teens;
- The family will not co-operate with the Network;
- The young person is unwilling or unable to engage with the Network;
- The level of need on the part of the family and the children is extensive and complex;
- The resources and services necessary to meet the need are not available;
- Perception that all agencies are not always fully involved or committed.

4. Overall Conclusions and Recommendations

4.1 Overall Conclusions

Before presenting the recommendations it is useful to reiterate the main findings of the evaluation and to set these in the appropriate policy context. In brief we can say that the Ballymun Network has succeeded in building trust across a wide range of agencies and in developing a mechanism to implement integrated service delivery. In the context of what is known about the difficulties of inter-agency working in both the Irish and International arenas, this on its own is a considerable achievement. It is all the more so in the context of the extremely high level of need in Ballymun and the fact that the full range of services to address these needs are not in place. The commitment, energy and professionalism of all concerned in reaching this point must be acknowledged.

What also has to be acknowledged however, is that to date the benefits of The Network have been extended to a very small number of young people in Ballymun and data on referral suggests that a substantial number of the participating agencies do not consider the Network an appropriate destination of referral for their young clients. It is also the case that the extent to which the participating agencies have embedded an interagency approach in their own work practices is varied and there is considerable scope for most to become more effective interagency agents.

The Network and the participating agencies also face a number of challenges arising from the external context including the policy context. Among the key principles identified in implementing the Children First guidelines is that of ensuring the participation of children and young people in matters that affect them. The review of the Implementation of Children First Guidelines notes the difficulties and limitations in implementing this principle and the challenges facing professional groupings in doing so. It is commendable therefore that the Network has made
significant strides in allowing the voices of young people to be heard through facilitating their involvement in Case Meetings. There is considerable scope to build on this approach within the development of the work of the Network.

The Network has also generated much learning for integrated service delivery. Included in this regard are the following:

- The need for good quality data to underpin planning, strategy development and service development;
- The need to establish consistency and standards across all interagency mechanisms, including the quality of response;
- The importance of assessment and care planning within an appropriate time frame and a focus on progression for the young person;
- The importance of appropriate intra-agency processes to enable the development of better ‘interagency agencies’;
- Good communications between and within the participating agencies.

The recommendations made below take into account fully both the well-documented difficulties in developing effective inter-agency working and the success of the Ballymun Network in achieving the success it has to date. The recommendations are designed to assist the Network build on that success through strengthening the decision making and planning mechanism (i.e., the Steering Group), facilitating enhanced agency participation, reinforcing the existing mechanism to integrate services, and broadening the engagement with young people and their families in Ballymun.

4.2 Overall Recommendations

4.2.1 Recommendations relating to defining the Network, its aims and objectives.

We recommend that the Steering Group should set aside the remainder of 2009 and early 2010 as a period in which to address (through facilitated meetings) issues relating to its functions and performance. The Steering Group could consider convening additional meetings to facilitate this and specifically it should:

- Develop clarity on the key question of what is the Network. In particular it is important to address the issue of whether the Network is (a) the totality of the participating agencies, or (b) the inter-agency process of integrated services put in place by those agencies;
- Revisit the aims and objectives of the Network having regard to the National Service Outcomes for Children noted above - incorporate a statement on the participation of young people and on what is required in terms of outcomes for young people and children through the work of the Network;
- Continue to explore new ways of achieving the aims and objectives. New ways could include giving greater priority to thematic approaches and rigorously exploring the possibility of reconfiguring services.

4.2.2 Recommendations relating to reinforcing the planning and decision making mechanism of the Network.

Since its inception, the Network Steering Group has evolved into a valuable mechanism for communication amongst the participating agencies and has made considerable progress in delivering on its objectives. At this point, there is both a need as well as the potential for the Steering Group to consider and address issues relating to its functions and performance as follows:
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• Develop a Terms of Reference for the Steering Group and agree a protocol for participation. The protocol should include reference to data and information sharing and a mechanism for engaging constructively with agencies in relation to the adequacy of their participation on the Steering Group and in other domains of the Network. In this context the introduction of a peer review mechanism should be explored;

• Ongoing periodic work plans should be agreed, complete with review mechanisms. At least twice yearly, the Network should review the implementation of its work plans and identify and address problematic issues;

• Redefine the role of the Network Co-ordinator and Facilitator and identify the key elements of those roles in supporting inter-agency work and in driving forward the interagency project.

4.2.3 Recommendations to Facilitate the Quality of Agency Participation

The quality of agency participation can be enhanced through the implementation of the following recommendations:

• Create an opportunity for participating agencies to re-present themselves to the Network. The previous exercise proved valuable in increasing awareness and building relationships. At this juncture, with the benefit of experience of inter-agency service delivery, participating agencies could be invited to share with their colleagues on the Network Steering Group the issues that emerged for them in relation to their existing codes of practice, work practices, resources and so on. This could also seek to identify problematic issues at agency level that inhibit participation in the Steering Group or the Case Management Systems. This should be more than an information sharing exercise: it should seek to identify the deep structural issues that may negatively impact on participation. Identifying these may allow some of them to be addressed. At a minimum it should help to dissipate frustration arising from overly optimistic expectations of what agencies can deliver. Optimally, it could allow the Network to advocate for change in the relevant areas;

• Reconsider the appointment of a Network contact person in each agency to act as a point of contact between the Network Coordinator and the agency and to oversee the development of intra-agency mechanisms to support information transfer. The role of the contact person should be defined and training in interagency working relevant to the Network should be provided to them.

• Explore the potential for a whole organisation approach to be developed across the participating agencies having particular regard for the involvement of personnel in the agencies and to the elements of a quality assurance framework. This could include establishing interagency working as a performance objective for all staff and reviewing existing quality frameworks at agency level in relation to the guidance process.

• Explore the need for capacity building at agency level in relation to issues such as goal setting, developing progression pathways and monitoring.

• Continue to facilitate the provision of training to frontline staff in the participating agencies with particular emphasis on developing shared approaches, shared language and shared methodologies relevant to interagency approaches. The scope to share learning from existing inter-agency models should also be explored, including in relation to quality data collection and web-based communication systems.
4.2.4 Recommendations relating to reinforcing the Case Management System

The Case Management System has been implemented since the start of 2006. While it has reached only a small number of young people in Ballymun, and while there are inconsistencies in its implementation, the CMS has been effective in integrating services and in achieving positive outcomes for at least some young people and their families. The impact of the CMS to date however has to be viewed in the context of need in Ballymun and the allocation of resources to it on the part of the participating agencies at both planning and service delivery levels.

We recommend that the CMS as currently implemented be maintained as a mechanism for integrating services for young people in crisis or presenting with acute needs and that it be paralleled by (a) a mechanism to enable the inter-agency process to be delivered outside the formal NCM procedures and to progress longer term outcomes and (b) by a broader mechanism to extend the good practice generated within the CMS to the wider population of young people in Ballymun.

To support this multi layered approach and to ensure its broad effectiveness, the following steps should be implemented:

- Greater definition of the client group for the Network should be agreed and blockages to referrals at agency level should be identified and removed where possible: where blockages cannot be removed, the expectations of referral from the affected agencies should be modified;
- The Network should ensure that high level training is provided to the chairs of NCMs but responsibility for ensuring that the Protocol governing the organisation and running of NCMs is consistently implemented should lie with the participating agencies. The agreed mechanism to address implementation issues (above) should be rigorously applied in the interests of the young clients;
- Training in care planning, identifying progression outcomes and monitoring the implementation and achievement of these is required for all chairs of NCMs. A clear distinction needs to be made between recording actions, and recording outcomes. The monitoring system should form the basis for feedback from the CMS to the Network Steering Group;
- Greater formal contacts should be developed between the Ballymun Network and other relevant Networks to facilitate the closure of cases and the referral of young people to more relevant arenas;
- Issues relating to gaps in service delivery and other issues should continue to be identified by the CMS and inform the broader work of the Network;
- A web based, closed access system of data collection and communication in relation to NCMs should be developed as a priority. Training should be provided to all to ensure that the capacity of the system is maximised. Agencies calling a meeting would be responsible for posting details of the meeting and posting the minutes. Other agencies would be required to use the web-based system to inform themselves of dates of meetings and other developments.
- The above should be paralleled by a mechanism to maintain the interagency approach for young people no longer in crisis or for whom the acute issues have receded. This second strand could be seen as a type of step-down facility for the Network, whereby young clients who are perceived to no longer need full formal case meetings can be responded to by a single agency drawing in other relevant agencies and services. There is already a degree of this happening informally which could aid the development of good practice as could the learning that has been developed through the introduction of the WAF model.
4.2.5 Recommendations in relation to broadening the impact of the Network on the population of vulnerable young people in Ballymun

- Participating agencies should bilaterally extend the good inter-agency practice they have developed within the CMS context to all shared clients. This would extend the benefits of the interagency approach to all young people in Ballymun engaged in more than one service.

- The Network should collectively continue to work towards changing the culture of service provision in Ballymun, building on the achievements to date in developing a community wide strategy for interagency working through mechanisms such as: developing a common language and approach to working with young people and their families; broadening the expertise base of professionals through sharing skills and approaches; through acknowledging the role of families and young people in responding to the difficulties they experience; and to breaking down the ‘them and us’ attitudes that may exist.

- The Network should continue to explore thematic approaches to meeting the needs of young people, including preventative approaches. Related to this is the need to examine the potential to reconfigure services in Ballymun and to achieve the objective of addressing needs rather than offering pre-existing services. In this context, the proposal of the Working Group on Advocacy could be considered. There is a need to clearly identify barriers at agency level to this approach.
PART B:

Reflections on the Evaluation

Prepared by
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1. Introduction

There can be few areas of public policy in Ireland about which there is more consensus than the need for state-funded agencies to work collaboratively in order to deliver more efficient and customer-friendly services. This consensus extends to complete unanimity in the case of services for children and families and has been consistently underlined in documents such as the National Guidelines for the Protection and Welfare of Children\(^1\), the National Children’s Strategy\(^2\), the National Social Partnership Agreement\(^3\), the National Development Plan\(^4\), the Agenda for Children’s Services\(^5\), and the Implementation Plan for the ‘Ryan Report’\(^6\). Ironically, and despite more than a decade of repeated statements on the matter, there is just as much consensus that inter-agency collaboration in the delivery of services to children and families is still poor. A recent review of compliance with Children First concluded that inter-agency collaboration ‘is not working effectively’\(^7\) and ‘sharing of information is not happening in the way it was envisaged’\(^8\). In response to this, Children’s Services Committees are being

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1  The National Guidelines for the Protection and Welfare of Children – Children First, 1999. This states: ‘All agencies and disciplines concerned with the protection and welfare of children must work cooperatively in the best interests of children and their families’ (page 23; see also page 45).
2 The National Children’s Strategy: Our Children – Their Lives, 2000. This is expansive on the need for inter-agency working while acknowledging that this way of working is “still relatively underdeveloped in Ireland” (page 45). According to the strategy: “Delivering wide-ranging services at national and local levels presents a major challenge of co-ordination. If supports and services are to have optimum impact on children’s lives, better ways to link services must be found. Providing a local integrated plan for children is a first step. As well as setting out the range of services to be provided, these plans must also identify which agency is responsible for which aspect of the plan. It must also provide for the links between services which must be created so that children and families are facilitated and their entry to services made easier. ... . This approach will require closer working relationships and more innovative approaches to how schools, health services, local youth and community groups and local libraries and other leisure and cultural bodies plan and deliver their services’ (page 45).
3 Towards 2016: Ten-Year Framework Social Partnership Agreement 2006-2015, 2006. This states: ‘At local level a multi-agency Children’s Committee will be established within each of the City/County Development Boards. These committees will be chaired by the HSE who are best placed to drive this initiative to achieve coordinated and integrated services’ (p.48).
4 National Development Plan 2007-2013, 2007. This states: ‘Delivery of the priority goals for social inclusion will be achieved by strengthening administration through greater co-ordination and integration of procedures across Government at national and local levels, as well as between these levels. ... . This focus on delivery requires openness to change, including closing or adapting programmes when they are not delivering results, requiring departments and organisations to work together effectively and overcome traditional barriers to co-operation; service delivery must be accessible, flexible and focused on the needs of the individual’ (p.237).
5 The Agenda for Children’s Services: A Policy Handbook, 2007. This states: ‘This whole child/whole system approach ensures that the effectiveness of any particular service benefits from being reinforced and complemented by other services working together, for and with children. ... . Integration needs to occur at the policy, planning and commissioning levels, so that opportunities are provided for conjoint interagency working, including delivering specific packages of care’ (p.26).
6 Report of the Commission to Inquire into Child Abuse, 2009. This states: ‘Interagency and interdepartmental work is needed to address the wariness of staff across the health, education and justice sectors to become involved in child protection work. All those professional groups who have contact with children should, as part of their training, be exposed to issues of children at risk. Those professionals who have regular routine contact with children, in particular public health nurses and teachers, should be assisted in working actively in this area’ (p.64).
8 Ibid, p.6.
planned for each of the 34 City and/or County Development Boards throughout the country, and four have already been set up on a pilot basis in Dublin City Council, South Dublin County Council, Limerick City Council, and Donegal County Council⁹.

Against this background, there is merit in considering the lessons which have been learned from a five-year initiative to develop an inter-agency approach to working with vulnerable young people (10-18 years) in the Ballymun area of Dublin. An evaluation of that initiative¹⁰ – called Ballymun Network - has just been completed and these reflections draw out the core findings, conclusions and lessons. Understandably, the paper has a strong local orientation but, in many ways, the inter-agency issues in Ballymun mirror the broader context of policy and practice about services for children and families in Ireland.

2. Context

Ballymun Network began in 2005 at the instigation of Ballymun Local Drugs Task Force. It was prompted by the observation that many young people in the area were being neglected, some were effectively out of control, and yet none of the agencies with a remit for children or young people seemed capable of responding in a coordinated way to their wide range of needs. Following a process of consultation, a number of statutory and community/voluntary agencies agreed to participate in an exercise aimed at developing more collaborative ways of working. Managers from 11 agencies agreed to join the network and an independent chair, the author of this paper, was appointed to facilitate the process¹¹. The style of facilitation was characterised by maintaining a balance between focusing on processes and focusing on outcomes¹², based on the understanding that too much focus on processes and the Network would become a ‘talking shop’; while too much focus on outcomes and the Network could lose the good-will of those who took

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⁹ This was announced in June 2006 as part of the national social partnership agreement; see Towards 2016: Ten-Year Framework Social Partnership Agreement 2006-2015, 2006, p.48.
¹¹ At the start of January 2010, the Network comprised the following 17 agencies: HSE Social Work Department, HSE Geraldstown House, An Garda Síochána, Dublin City Council, Trinity Comprehensive School, Ballymun Educational Support Team, Youthreach, Ballymun Regional Youth Resource, Ballymun Youth Action Project and Ballymun Job Centre. Since then, other agencies have joined notably Probation Service, Ballymun Primary Principals Network, National Educational Welfare Board, Aisling Project, Mater Child and Adolescent Mental Health Services, HSE Psychology Services and youngballymun.
¹² Inter-agency working is just another type of group working. Like all group work, its success depends on meeting the twin goals of ‘group cohesion’ (process) and ‘task achievement’ (outcome). These two dimensions are core to understanding how a group works, and how effective it is or can be at achieving its goals. This insight is usually expressed in a variety of ways. For example, it has been argued that group processes can be understood in terms of how the group reconciles the tensions generated by the ‘love principle’ (characterised by the desire for attachment and cooperation and which can find expression in a group through emphasising reassurance, protection, sympathy, etc) and the ‘will principle’ (characterised by the desire for separation and power and which can find expression in a group through emphasising boundary, consistency, order, achievement, etc) (Benson, 1987). Group processes typically go through a number of stages comprising: (i) forming (ii) storming (iii) norming and (iv) performing – although the process is rarely linear or sequential. In another formulation, these stages may be expressed as: (i) the inclusion stage (which is analogous to the infancy stage where the facilitator acts as the ‘group mother’) (ii) the control stage (which is analogous to the adolescent stage where the facilitator acts as the ‘group father’) (iii) the affection stage (which is analogous to the adult stage where the facilitator acts as the ‘group guide’) and (iv) the ending / separation stage (which is analogous to the death stage where the facilitator is expected to act as group mother, father and guide all at the same time).
longer to adapt or change their ways of thinking and working. An additional ingredient was the creation of an atmosphere which fostered positive and enjoyable interactions, keeping the focus on solutions rather than problems, and ensuring that all decisions had some benefits for everyone. This approach has worked. In the five years since the Network started in April 2005, new agencies have joined, many more agencies would like to join, and only one agency has left. A protocol for inter-agency case management has been developed and implemented and this protocol, in turn, has been adopted by a number of inter-agency projects throughout the country. At the same time, and partly influenced by the Network, two other inter-agency case management systems have been developed in Ballymun, one with a focus on youth mental health and well being (called Jigsaw Wraparound Facilitation), the other with a focus on education, training, and employment for early school leavers (called EQUAL Youth). In this sense, it could be argued that Ballymun has all the inter-agency case management structures that are needed to address the needs of vulnerable young people.

In addition to the structures for case management, Ballymun Network has also facilitated the joint delivery of programmes by agencies (notably the Strengthening Families Programme), and has organised inter-agency training for front-line staff on therapeutic techniques (notably Marte Meo and Time to Grow) as well as training on some of the legal aspects of care (notably the Freedom of Information Act and the Data Protection Act). Over and above these specific activities, the Network has created more informal sub-networks notably in the areas of education (resulting in the Community School Attendance Initiative) and youth justice/youth employment (resulting in Ballyrunners, an EQUAL Youth Initiative). It is probably no exaggeration to say that most agencies and professionals involved in the Network – both managers

13 This approach was informed by the insights of cognitive psychology and the emerging science of positive psychology which underline how habitual ways of thinking and feeling - about the past, the present and the future - set the parameters by which one sees the world which, in turn, shapes one’s capacity to solve problems. This is dramatically illustrated by research which shows a direct connection between positive emotions and problem-solving, and has given rise to the ‘broaden-and-build theory of positive emotions’ (Fredrickson, 2002). The key insight is that people with more positive thoughts and emotions are more likely to see the world in terms of expansionary ‘win-win’ options rather than contractionary ‘win-lose’ options. This is because positive thoughts and emotions encourage qualities which are needed to solve problems - such as persistence, flexibility and resourcefulness - and because they broaden the range of options which people perceive to be available (See also Carr, 2004; additional information is available at www.positivepsychology.org).

14 At the end of January 2010, the HSE-Social Work Department withdrew from the Network due to the difficulty of meeting all existing demands on the department. Its departure could be regarded as contrary to the spirit of the child protection guidelines (Children First), government policy on children’s services (which envisages the HSE taking a lead role in the proposed inter-agency Children’s Services Committees), and the HSE’s own Corporate Plan (2008-2011) for children and families which states: ‘In partnership with a range of statutory, non-statutory, voluntary and community groups we will promote and protect the health and well being of children and their families, particularly those at risk of abuse and neglect’ (p.30).

15 The Marte Meo Method is an accredited programme designed to develop a person’s capacity for constructive interaction. It regards problems and difficulties as ways of identifying skills that need to be learned: “Problems show what kind of skills have been inadequately developed to enable people to cope with their own situation” (Aarts, 2000, p.45).

16 A Time to Grow is a comprehensive model of practice for working with young people involved in offending and anti-social behaviour (see http://www.ctcassociates.co.uk/time-togrow.html).
and their frontline staff – have found it a positive and enriching experience, and most professionals remark that it is easier to do inter-agency work in Ballymun because of the good inter-personal relationships that have been built up through the Network.

In its assessment of the inter-agency process in Ballymun Network over five years, the evaluation report judged this to be a considerable achievement: ‘Ballymun Network has succeeded in building trust across a wide range of agencies and in developing a mechanism to implement integrated service delivery. In the context of what is known about the difficulties of inter-agency working in both the Irish and international arenas, this on its own is a considerable achievement’\textsuperscript{17}. Moreover, this achievement has also been acknowledged in another but separate study of the Network\textsuperscript{18}.

3. Outcomes of Ballymun Network

Against this background therefore, it may appear surprising that the outcomes of the Network for vulnerable young people and their families are generally disappointing. This is illustrated by two key findings in the report: (i) agencies have not substantially reconfigured their services in light of the Network\textsuperscript{19}; and (ii) the number of young people who have been helped by the Network has been relatively few.

In a four year period (2006-9), 87 young people were referred to the Network (only 13 in 2009), and the evaluation estimates that about a third of all referrals may have benefited from services delivered through the Network. Leaving aside the question of why so few children were referred to the Network, given the acknowledged scale of need that prompted the Network to come into existence\textsuperscript{20}, most of the young people referred did not benefit to the extent that might have been expected. These findings seem to challenge a core assumption on which the Network is founded: that a good inter-agency process will lead to a more user-friendly configuration of services and better outcomes for those who use them.

\textsuperscript{17} WRC Report, 2010, Executive Summary, p.30.
\textsuperscript{18} Rafferty and Colgan, 2009.
\textsuperscript{19} It is true that the case studies revealed evidence ‘of agencies seeking to adapt their provisions in order to reinforce each other’s work, for example by one agency linking its personal supports for a young person to their participation on another agency’s training programme. …. However, it also appears that there is a lot of room to expand this type of approach as that the practice of doing no more than offering the young person the existing services of the agency is still quite common, even when those services are declined by the young person’ (WRC Report, 2010, p. 80).
\textsuperscript{20} According to the WRC Report Executive Summary: ‘The low number of referrals to the Network (and the pattern across agencies) is difficult to reconcile with the level of need among young people in Ballymun and the level of expressed enthusiasm for the Network. Some degree of variation in relation to referrals might be expected given the different roles, services and age groups that the various agencies are responsible for. However, the variation in client group or work practice does not fully explain the variation in the pattern of referrals: a number of participating agencies are working with substantial numbers of young people who are engaging in risky behaviours or who find themselves in risky circumstances and have referred few if any of their clients to the Network. This phenomenon suggests that a number of participating agencies either do not consider the Network to be relevant to their client group or that they experience other significant barriers to referral’ (WRC Report, Executive Summary 2010, page 20).
It needs to be acknowledged that any conclusions about the Network’s outcomes – particularly for service users – are necessarily tentative since the evaluation was not in a position to compare outcomes before and after the Network was set up\(^21\), or compare outcomes in a setting like Ballymun which has an inter-agency process with outcomes in a similar setting which does not\(^22\). Equally, it must also be acknowledged that most agencies and their funders - in Ballymun as elsewhere in the country – do not assess the outcomes of their services\(^23\) so any data on outcomes is relatively rare and merits careful attention. Notwithstanding these limitations, one is still faced with the question, in light of five years inter-agency working, whether the outcomes of Ballymun Network are as good as they could be or should be. The fact that a majority of service users seem to have experienced little, or no, benefit from the Network’s intervention is clearly part of the answer. In view of this, it is important to inquire into the reasons for the poor outcomes as revealed by the evaluation.

4. Why are Network’s outcomes relatively poor?

It is possible to identify four sets of reasons why the Network’s outcomes are relatively poor, based on evidence in the evaluation. There may be additional reasons but these are probably the main ones.

First, the target group of the Network - which is 10-18 year olds who have experienced neglect and abuse over many years - is acknowledged to be a particularly difficult group to work with\(^24\). Frequently they do not want engage with any service and some are already in the criminal justice system. So the target group provides a difficult test-case to show the positive outcomes that

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\(^{21}\) This method of evaluation is usually referred to as a ‘quasi-experimental design’ because it involves a pre-intervention / post-intervention comparison. Its limitation is that it is not possible to judge what would have happened, other things being equal, if there was no intervention.

\(^{22}\) This method of evaluation is usually referred to as an ‘experimental design’ or randomised control trial (RCT), because it involves comparing two matched groups, one with the intervention (the experimental group) and one without (the control group). Since both groups are matched prior to the intervention, it is reasonable to assume that any differences are attributable to the intervention.

\(^{23}\) A relevant example in this context is the regeneration of Ballymun, whose final cost is estimated to be €942 million. In a report by the Controller and Auditor General, the lack of systems and data to allow a proper assessment of outcomes was noted: ‘Programme evaluation has been hampered by the absence of a systematic approach, the lack of baseline statistics and inadequate and variable information feedback on programmes. While progress has been made in developing performance indicators to measure social and economic regeneration there is a need to establish an agreed cluster of key indicators and to improve the provision of information from agencies so that progress can be regularly monitored and outcomes evaluated. In a wider context, an evaluation should be carried out over the short term which focuses on the lessons that have been learned in order to guide future regeneration work in Ireland. In future regeneration programmes, the Department should ensure that the baseline position is established and that there is regular monitoring of key outcomes’ (Controller and Auditor General, 2007, p.11).

\(^{24}\) According to the evaluation: ‘Working with these young people proved challenging for frontline workers and positive outcomes were difficult to identify … . The term intractable was frequently used to describe these cases. This led to a concern among Network members with expending resources on cases where at best minimum outcomes could be achieved’ (page 70).
could be achieved through inter-agency working\textsuperscript{25}. At the same time, given that there are two sides to every therapeutic relationship, this finding invites the Network – and each agency separately – to examine its role in contributing to this difficult relationship, and the reasons why it appears so difficult to build a relationship of acceptance, empathy and creative problem-solving with the young person\textsuperscript{26}. However, the broader significance of this should not be lost sight of either, since it is a stark illustration of the high and unavoidable costs to the State of not investing in prevention – leaving aside the personal, family and community costs involved – which is why the so-called policy choice between early and late intervention is really a choice between investing early and effectively or investing more later and ineffectively\textsuperscript{27}. Ironically, the commitment to ‘a more even balance’ between early and late intervention is stated explicitly in the government’s health strategy\textsuperscript{28}.

\textsuperscript{25}The difficulty of finding effective programmes is also evident in the area of educational disadvantage. Consider for example how, in its review of the Educational Disadvantage Initiatives in the Primary Sector between 1984 and 2004, which involved an expenditure of €62 million in the school year 2003/4, the Controller and Auditor General found that reading standards in designated disadvantaged schools - the only indicator for which there is consistent data over the period - did not improve between 1984 and 2004: ‘In both 1998 and 2004, pupils in designated disadvantaged schools had significantly lower average scores than pupils in non-designated schools with a slightly bigger gap in 2004 than in 1998. The data suggest a slight drop in reading standards of pupils in designated disadvantaged schools between 1998 and 2004.’ (Controller and Auditor General, 2006, p.51).

\textsuperscript{26}The capacity to build a therapeutic relationship is a core skill that is expected of professionals and agencies in the Network. Research has consistently highlighted the importance of the therapeutic relationship in effective interventions (Hubble, Duncan and Miller, 1997). It was Carl Rogers who emphasised the need to show clients – and be experienced by clients as showing – unconditional positive regard, accurate empathic understanding, and openness to creative solutions (Rogers, 1957). One review of the literature, based on the findings of over 1,000 studies, recommended three ways for improving outcome effectiveness through the therapeutic relationship: (1) treatment should accommodate the client’s motivational level and state of readiness for change; (2) treatment should accommodate the client’s goals for therapy; and (3) treatment should accommodate the client’s view of the therapeutic relationship (Hubble, Duncan and Miller, 1997:Ch.4 Duncan 2010). An excellent source of information on the therapeutic relationship, and on therapeutic effectiveness generally, is available at: http://heartandsoulofchange.com/.

\textsuperscript{27}The research evidence raises challenging questions about how effective is the current allocation of scarce State resources to children and families. A recent review of research on the economics of early childhood in the US recommended: ‘a reorientation of child and human services toward investment and prevention and away from attempting to “treat” poor outcomes that manifest themselves later in the life cycle. Implementing such an approach would require fundamentally rethinking how nearly every human service is delivered. Shifting toward a paradigm in which resources are invested in early human capital might produce better outcomes, save taxpayers money, and improve the quality of life for the people in whom we invest’ (Kilburn, and, Karoly, 2008). This is also the considered view of Professor James Heckman who was awarded the Nobel Prize in Economics in 2000: ‘Investments in social policies that intervene in the early years have very high rates of return while social policies that intervene at later ages in the life cycle have low economic returns. A large body of scientific evidence shows a “persistent pattern of strong effects” derived from early interventions. Significantly, these substantial, long-term benefits are not necessarily limited to intellectual gains, but are most clearly seen by measures of “social performance” and “lifetime achievement.” In other words, people who participate in enriched early childhood programs are more likely to complete school and much less likely to require welfare benefits, become teen parents or participate in criminal activities. Rather, they become productive adults.” (Heckman, undated).

\textsuperscript{28}Department of Health and Children, 2001, p.71. The strategy explains the context for this rebalancing as follows: ‘A specialised infrastructure was put in place from the early 1990s where the dominant focus was on child protection and on fulfilling statutory responsibilities to identify children at risk. While these services were both necessary and important, awareness has grown in recent years of the need to target preventive approaches and in particular to develop and expand family support services. This involves a cross-sectoral approach as emphasised in the National Children’s Strategy and led by the National Children’s Office. The approach also emphasises greater co-ordination between child welfare and protection and primary care services such as general practice and public health nursing. Effective coordination...
Second, the standard of work by some staff in some agencies is poor. Naturally, poor standards may not be confined to inter-agency work. The evaluation does not examine the reasons for these poor standards but the finding inevitably raises questions about management in some agencies and its capacity to support and supervise staff to perform work to an acceptable standard. Members of the Network’s Steering Group are middle and senior managers and, although quality issues about the handling of specific cases of young people were raised at almost every Network meeting, the evaluation confirms that these were not addressed by managers in some agencies. The reasons for this – which could include a lack of leadership and management skills, resistance to critical self-appraisal (or appraisal by others) of practices, lack of focus on outcomes for service users – go beyond the scope of the evaluation although they have a direct bearing on the outcomes of the Network, and on the outcomes of individual agencies generally. It is true that most services for children and families are not regulated by externally validated quality assurance procedures, State funding is not contingent on delivering to a minimally acceptable standard, and the concepts of licensing and commissioning agencies to deliver services to children and

is also essential between these services and therapeutic services such as child and adolescent psychiatric teams. Better integration and inter-sectoral working has particular relevance in relation to the effective implementation of the Children Act, 2001 (Ibid, p.139).

29 The evaluation reviewed the files of nine randomly selected Network cases and found that the files from the case studies show that absenteeism from meetings is commonplace and that few meetings achieve full participation from all invited agencies. The practice of sending a brief alternate also appears to be somewhat sporadic at best (WRC Report, 2010, p.77). Other evidence from the case studies suggests that: ‘Certain agencies or individuals do not participate fully in NCMs [Network Case Meetings] as evidenced by withholding information, a reluctance to get involved in actions, failure to adequately follow up on actions, and so on’ (p.80). Elsewhere, the report observes that: ‘The failure to provide proper records of the meeting and to circulate these to the appropriate agencies in a timely manner was frequently noted. This is also evident from the case files where minutes are frequently missing, or poorly recorded. Additionally, minutes are not always provided to the Network Coordinator (p.57).

30 This difficulty was highlighted in a review of Children First which drew attention to the need for a quality assurance system for children’s services, supported by appropriate management and funding arrangements (National review of compliance with Children First: National Guidelines for the Protection and Welfare of Children, 2008). The report recommends: ‘That appropriate and effective child protection policies, procedures and training be put in place, implemented and regularly reviewed in all settings where services or activities are provided for children, and that direct and indirect funding from government be made contingent on such child protection policies, structures and procedures being in place’ (page 9). In relation to quality assurance, it recommends: ‘That the Children First guidelines be applied in a consistent manner across the HSE and that the HSE develops good practice guidelines, standards and protocols, underpinned by appropriate management and quality assurance, to enable this to happen’ (p.13).

31 In the healthcare sector, it is now Government policy to introduce a licensing system so that agencies (for example, nursing homes and hospitals) will only be allowed to practice if, on the basis of audited performance, they meet acceptable quality standards of service. This is based on the recommendations of the Commission on Patient Safety and Quality Assurance (2008). In line with this, the Health Information and Quality Authority (HIQA) is setting and enforcing standards of care by licensing nursing homes and, from 2012, all acute and community healthcare settings, to provide services subject to meeting accepted standards. Currently there are no statutory standards, or standards authority, to monitor the quality of services provided by most agencies in the Network.

32 The concept and practice of commissioning services has been introduced into the National Health Service in the UK (Department of Health, 2006) with the express purpose of ensuring: ‘the best possible health outcomes, including reduced health inequalities; the best possible healthcare; and within the resources made available by the taxpayer’ (pp.20-21). Contracts are a key instrument in this commissioning framework: ‘Contracts will be the key accountability mechanism between commissioners and providers of NHS services. Contracts define expectations, quality, controls, accountability, balance of risk, planning environment and durations. They clarify the relationships between commissioners and providers, and enforce
families are still alien. Nevertheless, many of the lapses identified in the evaluation - absenteeism and non-participation at case meetings, withholding information on cases, reluctance to get involved in actions, failure to adequately follow up on actions, failure to keep proper records of meetings – are simply unprofessional practices in any organisation.

Third, agencies do not seem to include inter-agency work in assessing their overall performance, or the performance of individual staff33. To some extent, this is an extension of the previous point. In setting up the Network, it was decided that its core needed to be built around middle and senior managers since, in line with previous studies34, this would ensure participation by the entire agency and not just its frontline staff. This presumption is challenged by the evaluation since some managers do not properly oversee the inter-agency work of their frontline staff – even in agencies where working in partnership with other agencies is part of the corporate vision and plan - nor do they respond to the moral authority of other agency managers in the Network. Again, this draws attention to how outcomes of the Network are more influenced by processes within individual agencies rather than by the inter-agency process itself. To some extent, this is a local issue that needs to be solved locally. However it also has a broader dimension because it draws attention to the gap between Government policy statements on inter-agency working and the absence of policy instruments to implement them locally. For years, agencies have been exhorted and encouraged by national policy statements to work together – particularly those agencies which are funded to provide services for children and families - but without incentives or sanctions to ensure that this happens. For example, agency funding is not contingent on the extent or quality of inter-agency working and, in such an environment, as the evaluation reveals, inter-agency working is an optional extra. In light of that, the Network’s achievements could be construed as quite remarkable and against the grain of this broader policy environment.

Fourth, most agencies in the Network do not seem to have adopted an outcome-oriented, evidence-based approach to their work35. Such an approach is stated more transparent and accountable working relationships’ (Ibid, p.54).

33 A frequent refrain in the report is the absence of any managerial oversight by individual agencies over the quality or quantity of their inter-agency work: ”Currently, there is no effective mechanism which allows frontline personnel, or the Steering Group, to resolve issues relating to the quality of participation and care planning on the part of agencies in the CMS process. In relation to one of the case studies, a number of agencies had tried to register concerns about the participation of others, but these efforts were unsuccessful. At Steering Group level, this can lead to frustration ...; at the [Network Case Meeting] level, it can lead to sub-optimal care and sub-optimal outcomes for young people (page 80). The authors repeatedly ask the question: ‘does accountability lie with the lead agency, with the Network, or is there a possibility that accountability could be dissipated within the inter-agency approach? (WRC Report, 2010,p.63; see also p.82 and p.93). This is clearly a rhetorical question since the performance of agency staff is the responsibility of each agency, and these observations raise more general questions about the quality of management in those agencies, including the absence of a quality assurance framework.

34 According to a guide on inter-agency working in the UK: “Without strategic vision and support, collaboration at the front-line of service delivery will be impossible to optimize, however well-intentioned the professional practitioners. ...” Conversely, in the absence of wholehearted collaboration at the front-line, strategic vision may count for nothing” (Thistlewaite, 2004). A more up-to-date review of the evidence has been carried out by the Children’s Acts Advisory Board (2009).

35 The evaluation observed that: ‘Within the context of the Network, the failure to develop a monitoring instrument, despite the widespread acknowledgement that this is necessary (and
Government policy for all children’s services\textsuperscript{36}, and there is wide consensus across the OECD\textsuperscript{37} and the EU\textsuperscript{38} that this is the direction in which services need to develop. Naturally, a focus on outcomes does not automatically produce better outcomes but it may at least encourage agencies to discontinue services when there is no evidence of positive outcomes. Conversely, it is a reasonable assumption that an agency is more likely to produce positive outcomes if it actively seeks them, and uses the best available knowledge to improve the chances of success. The experience of the Network is that most agencies still tend to see their work in terms of delivering services rather than delivering outcomes\textsuperscript{39}. Similarly, in a therapeutic context, a focus on outcomes continuously draws attention to the question of whether the person in receipt of a service is improving or disimproving, and invites that service to adapt accordingly.

5. Network outcomes are influenced more by intra-agency than inter-agency processes

These evaluation findings point to a simple but important conclusion namely, that the Network’s relatively poor outcomes are due mainly to intra-agency problems, not inter-agency problems. More specifically, evidence in the evaluation suggests that the limits to inter-agency effectiveness may be set by the poorest performing agencies, particularly where those agencies have a

\textsuperscript{36} The government’s health strategy states that ‘An underlying issue contributing to problems in service provision is the lack of good-quality information about the needs of children and the existing capacity of the system to deliver good outcomes’ (Department of Health and Children, 2001, p.140). Similarly, the Agenda for Children’s Services states: ‘At the core of The Agenda for Children’s Services is the promotion of what we want for our children – good outcomes. … It is the pursuit of better outcomes that should drive the formulation of policy and it is the expression of policy within services that then ensures the desired outcomes are achieved. It is the successful combination of policy and services that achieves good outcomes. Achieving good outcomes requires that policy makers, planners, service managers and front-line staff all take responsibility to work towards them’ (2007:12).

\textsuperscript{37} A recent OECD review of public services in Ireland noted that: ‘As with many other OECD countries, the focus to date in Ireland has been on performance reporting, rather than managing for performance. Instead of focusing on inputs and processes, more information needs to be gathered on outputs and outcomes and what has actually been achieved, so that this can better feed back into measuring how the Public Service is meeting overarching targets and objectives’ (OECD, 2008).

\textsuperscript{38} A recent EU Commission report noted four elements in the modernisation of public services across the EU: (i) performance management including measurement of performance and benchmarking to identify good practice and evaluation of outcomes (ii) stronger user-orientation (iii) better integration and coordination of services (iv) decentralisation and devolution of responsibility (Cited by Callanan, 2009, p.161).

\textsuperscript{39} A focus on outcomes leads logically to a focus on monitoring. Monitoring can be done using objective clinically-tested instruments such as the Strengths and Difficulties Questionnaire (available at http://www.sdqinfo.com/b1.html ), or more subjective, less clinically-focused instruments such as the Outcome Rating Scale (available at http://heartandsoulofchange. com/ ). However the big choice is not about monitoring instruments but about whether outcomes are seen by agencies and their staff as important or not.
significant role to play in services for young people. This conclusion means that the findings of the evaluation may have more significant implications for each individual agency than for the Network.

Naturally, this conclusion does not imply that the performance of every agency in the Network is poor or the same. Nor does it imply that agencies in Ballymun are less effective than agencies elsewhere, or that management and staff are not highly committed to giving the best possible service under the circumstances. However it does imply that the case for continuing to deliver the same services in the same way, irrespective of outcomes, cannot be justified on any reasonable grounds. In addition, the fact that children and families in Ballymun, as elsewhere, have no choice about the services they receive – since each agency is an effective monopoly for its category of service – adds to the moral obligation on agencies to demonstrate that their service is the most effective possible in the circumstances.

This conclusion draws attention to a diagnostic error that is commonly made in discussions about inter-agency services. The error is that problems with services are often misdiagnosed as flaws in the inter-agency process when in fact they may be problems of individual agency performance and management, and the broader policy environment which lacks instruments to promote quality standards for intra-agency and inter-agency working.

This conclusion can be expressed more formally, in terms of the necessary and sufficient conditions for inter-agency working. The necessary condition is an effective and inclusive inter-agency process. The sufficient condition is that each agency also has an effective intra-agency process to deliver high quality services and there is a policy environment which supports and requires it. The findings of the evaluation suggest that the Network has met the necessary conditions for effective inter-agency working but the sufficient conditions have not been met. This is because the best inter-agency process in the world cannot compensate for the short-comings of individual agencies or the weaknesses in how funders manage the performance of those agencies.

This conclusion is reinforced by the findings of a recent report from the Children’s Acts Advisory Board. The report, based on an extensive review of national and international research on inter-agency working – including a case study of Ballymun Network – concluded that there are ‘15 features associated with

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40 The observations of the former Director General in the Office of the Minister for Children and Youth Affairs are particularly apposite in this context: ‘The Irish Public Service has been relatively strong historically in the area of policy formulation. I have come to the conclusion, however, that we are relatively weak when it comes to implementation and many good policies fail due to a lack of appropriate structures and processes to ensure their successful implementation from policy objectives to tangible outcomes’ (Langford, 2007:250). However the results of this evaluation do not support the assumption in that paper – and which underpins the setting up of Children’s Services Committees - that inter-agency cooperation necessarily leads to better outcomes (Ibid, 251 and 253). As if to compound this, the findings of a review of the initial phase of the Children’s Services Committees in Ireland observed that: ‘There is general consensus that the concept of outcomes and outcomes-focused practice is not well understood amongst individual agencies, and there remains a lack of clarity about their origins’ (Burke, Owens and Ghate, 2010:25).


42 Rafferty and Colgan, 2009.
good practice in inter-agency cooperation’. The Network, as evidenced by this evaluation, performs well on almost all of these 15 good practice standards, even though its outcomes are relatively poor and disappointing. This implies that these 15 elements of good practice are just the necessary conditions for inter-agency effectiveness; they do not include the sufficient conditions which also require intra-agency effectiveness, and a broader policy environment which supports it. In that sense, it is misleading, and potentially dangerous, to highlight only the necessary conditions for inter-agency effectiveness because this can distract attention from the equally important sufficient conditions which rest with the performance of each individual agency and with the overall system by which funders manage those agencies.

A further implication of this analysis is that the promotion of inter-agency coordination of services for children and families may actually serve to mask, however unintended or unwittingly, more fundamental problems in the performance and management of individual agencies, including gaps in the broader national policy environment such as the absence of a standards-based system for licensing and commissioning agencies to deliver services. Indeed, if there is a weakness in this otherwise excellent evaluation, it is in the failure to challenge the tendency of agencies to frame and project their issues as ‘inter-agency difficulties’ (to be solved by information-sharing, procedures, protocols, training, building capacity, etc) when they are in fact ‘intra-agency difficulties’ of performance and management, or indeed wider difficulties in the way funders manage the performance of agencies. Given that the Network cannot change these underlying realities – except perhaps by highlighting them and advocating for appropriate changes – this needs to be taken into account in assessing the true potential of inter-agency processes to produce better outcomes. In summary, a good inter-agency process can help to correct relationship difficulties between agencies – and may even magnify the performance of well-functioning agencies - but it cannot correct the performance of poorly-functioning agencies, or the weaknesses in national policy management.

The report states that: ‘from our analysis we can identify 15 features associated with good practice in inter-agency co-operation:

i. Have a justifiable rationale.
ii. Ensure effective leadership.
iii. Develop a shared purpose.
iv. Clarify roles and responsibilities for inter-agency working.
v. Discuss and allay workers’ fears and concerns.
vi. Secure commitment from staff at all levels; strategic, operational and service delivery.
vii. Build trust and mutual respect in inter-agency groups/workers.
viii. Foster understanding between agencies.
ix. Create an inter-agency culture and remove cultural barriers.
x. Ensure effective communication and information exchange.
xi. Plan and organise effectively.
xii. Achieve effective representation and participation in inter-agency working groups/teams.
xiii. Invest adequate time, staff and money.
xiv. Have appropriate corporate governance systems.
xv. Monitor, evaluate and renew.

6. Concluding Comments

This paper offers some lessons about inter-agency working with children and families, using the local example of Ballymun Network. Given the national consensus on the importance of inter-agency working, and a similar consensus that practice often falls short of the ideal, these lessons may have more general relevance, particularly in the context of the new inter-agency structures - Children’s Services Committees - which are being planned for each of the 34 City and / or County Development Boards throughout the country.

The lessons of Ballymun Network, based on five years experience, have been crystallised in a recent evaluation whose key finding is that the Network is a good inter-agency process but has produced relatively modest outcomes. As a process Ballymun has developed robust systems for inter-agency case management, jointly delivered programmes to families, organised a range of training initiatives for front-line staff, and facilitated the emergence of informal sub-networks of agencies in the areas of education, employment and youth justice. Overall, Ballymun is seen by many who work there as a place where inter-agency work has become easier due to these structures and to the good inter-personal relationships that have been built up through the Network.

Despite the quality of these processes, the evaluation found that the outcomes of Ballymun Network are generally disappointing. For example, it found that the number of young people who have been helped by the Network has been relatively few, and only a minority of these showed significant improvements. In addition, it found that agencies have not substantially reconfigured their services in light of the Network. Further inquiry suggests that four sets of reasons contributed to these relatively poor outcomes. First, the target group of the Network - which is 10-18 year olds who have experienced neglect and abuse over many years - is acknowledged to be a particularly difficult group to work with because they may refuse to engage with services even when faced with the risk of entering the criminal justice system. Second, the standard of work by some staff in some agencies is poor - such as absenteeism and non-participation at case meetings, withholding information on cases, reluctance to get involved in actions, failure to adequately follow up on actions, failure to keep proper records of meetings. Third, the management of agencies do not seem to include inter-agency work in assessing staff or agency performance, even where this is stated to be part of their ethos and corporate plan. Fourth, most agencies in the Network tend see their work in terms of delivering services rather than delivering outcomes and the extent to which interventions are evidence-based is unclear.

These findings point to a simple but important conclusion namely, that the relatively poor outcomes of Ballymun Network are due mainly to intra-agency rather than inter-agency problems. Naturally, this conclusion does not imply that the performance of every agency in the Network is poor or the same. Nor does it imply that agencies in Ballymun are less effective than agencies elsewhere, or that management and staff are not highly committed to giving the best possible service under the circumstances. However it does imply that the case for continuing
to deliver the same services in the same way, irrespective of outcomes, cannot be justified on any reasonable grounds. In addition, the fact that children and families in Ballymun, as elsewhere, have no choice about the services they receive – since each agency is an effective monopoly for its category of service – adds to the obligation on agencies to demonstrate that their service is the most effective possible in the circumstances. An important implication of this analysis is that the Network - and inter-agency approaches generally, including the proposed Children’s Services Committees - may actually serve to mask, however unintended or unwittingly, more fundamental problems in the performance and management of individual agencies.

Equally, and taking a more strategic perspective on State funding for vulnerable children and families, the findings also draw attention to the limits of ‘late intervention’, where ‘late’ is understood as late in the life of the problem not the life of the young person – and the correspondingly high and unavoidable costs of not investing in prevention and early intervention. The overall return from the investment by agencies – including the inter-agency process - in the specific cases examined in this evaluation is not high, and there is considerable international evidence that investing earlier could produce a much higher rate of return. It is true that, irrespective of the rate of return, this investment is necessary to keep young people safe – or at least safer - but the question which continues to pose itself is whether services for children and families in Ireland have struck the right balance between prevention, early intervention, and late intervention.

It may be challenging for agencies who participated in Ballymun Network to accept this analysis, though not as challenging as ignoring or denying it. The challenge of accepting it arises from the risk that it may overshadow the fact that the Network has been a successful inter-agency process, is likely to remain so, and is rightly seen by many as an exemplar of how to do inter-agency work. Also, there is a danger that this analysis may be interpreted in solely personal terms to the exclusion of broader system-level issues associated with the way services are organised and delivered. It is true that all services have an inherently personal dimension – especially the services provided by agencies in the Network - and the issue of personal responsibility by staff in agencies is unavoidable. But the problems associated with services in Ballymun – as elsewhere – are also a reflection of system failings in the way services are managed and delivered, including weaknesses in how national policy is implemented. As such, this is simultaneously a national issue, a local issue, and a personal issue and, at each of these levels, the report is an invitation to reflect on its findings, and to respond in a way that will eventually produce better outcomes for children and families in Ballymun.

Finally, on a more reflective note, it is easy when deliberating on the merits of inter-agency structures and processes to lose sight of what might be termed ‘the common ground’, and even the common sense, of what is involved in the simple act of helping someone. All the inter-agency policies, procedures and protocols mean nothing if the professional helper cannot form a relationship
with the young person that is accepting, empathic, and capable of generating creative solutions to their difficulties. There is nothing more personal than helping someone, and it is something that comes naturally to everyone because people help, and are helped, all the time through family, friends, and communities. Everyone is a natural helper and professional help is only needed when all other sources have been exhausted. No one – young or old, vulnerable or otherwise – particularly wants a relationship with a professional helper, especially if their life experience is marked by broken or insecure attachments. Yet there is a danger that professionals – possibly due to the imperatives of working in a large organisation, possibly because they are trained to under-identify with themselves as persons so that they do not over-identify with the person they are helping – may not form the type of therapeutic relationships with young people that have the necessary ingredients for helping.

Naturally, the extent to which this happens in practice will vary. But it is striking that many of our deliberations in Ballymun Network, despite the often-repeated aspiration to keep focused on the young person, have often been absorbed by discussions about the fears and anxieties of professionals and agencies over procedural issues such as confidentiality, protocols, roles, competencies, boundaries, and training which, at best, are tangential to the helping relationship. This is not to deny the genuineness of these fears and anxieties but it also needs to be acknowledged that they may be symptomatic of a reduced capacity to provide help – and form effective therapeutic relationships with young people - that professionals and agencies are paid to do. The experience of the Network suggests that tackling these symptoms will require a more radically reflective intra-agency process, and even an intra-personal process - and not just deliberations about inter-agency policies, procedures and practices. It also needs to be combined with a stronger policy framework designed to ensure better outcomes for young people through standards-based systems for licensing and commissioning agencies to deliver services. In essence, this draws attention to the need for a process of simplification, and a rediscovery of the simple art of helping someone, and of being present and personal to the other in the only way that anyone – professional or otherwise - can be.

7. Bibliography


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44 One commentator has suggested that many of the qualities of effective therapist-client relationships – emotionally warm, available, attentive, responsive, sensitive, attuned, consistent and interested – are in fact generic to many relationships both in work and family: ”it seems no coincidence that so many of the elements of the effective therapist-client relationship appear similar to the ‘good enough’ parent-child relationship” (Howe, 1999, p.99).
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