

National Parenting Commissioning Framework 2019





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1. Introduction

This guide to commissioning parenting support has been developed as part of the national policy framework for children and young people 2014 - 2020 Better Outcomes Brighter Futures and Tusla's National Parenting Support Strategy Investing in Families: Supporting Parents to Improve Outcomes for Children (2013).

Being a parent is not easy under the best of circumstances. It is particularly difficult, however, for parents experiencing additional challenges. Tusla's national Parenting Support Strategy is about supporting parents within their communities to be the best parents they can be. This Guide is informed by the four main goals of the Parenting Support strategy:

- · Parenting support is an important part of the work of Tusla
- We will use the best evidence we have about 'what works' for parents and families
- Parenting support will be available in all areas, at all stages of the life course and at all levels of need, but with a particular priority, in terms of percentage of spend, on supports from pre-birth and birth to age three years¹ and for parents experiencing additional challenges²
- Parents using supports will experience them as friendly and accessible

This guide is intended to help Tusla Area Managers, and other agencies and individuals involved in the commissioning of parenting support in local areas, to take a good practice approach to this important activity, in particular ensuring that parenting support services meet local needs. The commissioning of parenting supports and services is informed by the work of the Children and Young People's Services Committees (CYPSC).

This guide is one of a variety of initiatives that are being developed by the Prevention, Partnership and Family Support (PPFS) Programme of early intervention and preventative work. Tusla's early intervention and prevention system involves working in partnership with families, other agencies and professionals to identify needs early and to provide practical support and help through Child and Family Support Networks (CFSN) and full implementation of Meitheal the National Early Intervention Practice Model. In addition to this guide, the parenting component of PPFS includes:

- Parenting24seven, an online resource offering evidence-informed key messages on what works best for children and families at different stages of childhood and in different situations.
- The Parenting Support Champions
 Project, a national initiative to
 develop our system-wide approaches
 and practices to working with
 parents and the associated Parenting
 Support Matters newsletters.
- The Parental Participation Project including a Toolkit for Parental Participation and seed funding projects.



• A series of Parenting Conferences which include the participation of parents; the showcasing of parenting projects throughout the country; learning opportunities through key note speakers' presentations; and participation in workshops.

¹ There is compelling evidence about the importance of parental support at this stage of a child's life ² For example, parents living with a disability or chronic health problems; parents facing separation; parents with drug and alcohol problems; parents experiencing domestic abuse; adoptive parents; parents with a mental health problem

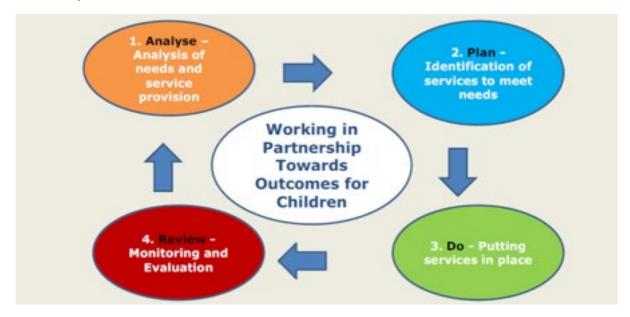
Tusla's definition of commissioning is that it is the process to ensure that "the total resources available to children and families are applied to improving outcomes in the most efficient, equitable, proportionate and sustainable way" Tusla Commissioning Strategy (2017).

Commissioning using the total resource available and in co-operation with our partners is vital given agencies' and organisations' overlapping investment and interest in improving outcomes for families with a range of parenting support needs. A proportionate approach is also important, given the range of likely presenting needs (low, medium and high prevention levels). A sustainable approach should ensure that improved outcomes and cost benefits are experienced over a reasonable period of time.

When thinking about the commissioning of parenting supports and services, Tusla's four stages of commissioning need to be kept in mind - analyse, plan, do and review - together with Tusla's definition of commissioning.

Commissioners are responsible for making sure that the whole system of parenting support is coherent and effective. To do so it helps to follow a cyclical commissioning process, this uses Tusla's four stages of commissioning:

- Analyse analysing needs for parenting support and mapping local service provision
- Plan making the investment decisions required to meet those needs and to implement 'what works'
- Do securing services or supports to meet needs
- Review monitoring and evaluating the effectiveness of service provision against expected outcomes



This Guide is structured around the four-stages of the Tusla commissioning process, which should be considered when commissioning parenting supports at any level i.e. nationally, regionally or locally. It is also grounded in the principle of evidence-informed practice in that it recognises and encourages the application of what is currently known about 'what works' for parents and families in terms of providing support to enable parents 'parent effectively' at different levels of need, recognising always that the evidence base is evolving continually. Most commissioning activities will benefit enormously from a sound understanding and application of the evidence base and commissioners have an important role to play in creating a local culture which values and uses evidence. As well as commissioning evidence based and evidence informed parenting supports and services, this also means adopting opportunities to understand the latest evidence and consider its application; investing in skills development; and sharing promising practice and innovation.

2. Key Terms and Definitions

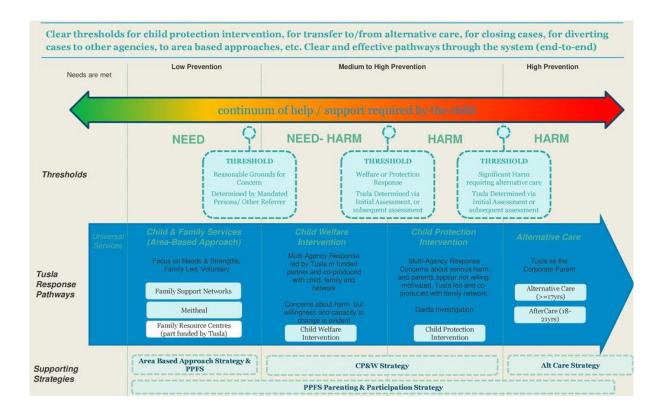
Parent: The term 'parent' includes mothers, fathers, grandparents, step parents, carers and other adults with responsibility for caring for a child or young person including, for example foster carers.

Parenting Support: Parenting support is both a style of work and a set of activities that provides information, advice and assistance to parents and carers in relation to the upbringing of their children, in order to maximise their child's potential. Parenting support activities include:

- Advice and information
- Home-based visits and individual support work with families
- Centre and school-based parenting programmes and initiatives
- Group-based support and parenting programmes and courses
- Parenting support approaches such as the parenting support champions project and Meitheal arrangements

Parenting Support Practice: Parenting support has to be delivered by well trained, supervised and quality assured practitioners who are supported by a learning community and national oversight. Parenting support practitioners have to be able to respond to parents across the continuum of need, and to do so effectively they will need to have an awareness of the parent/child relationship, have a genuine interest in the client and their perceived needs, and involve the parent in every step of the support process. An overview of the principles of parenting support practice as well as the key skills and attributes of effective practitioners are given in appendix one.

Continuum of Need (Low, Medium and High): The range of need for parenting support is along a continuum from low through medium to high across all ages, as illustrated in the diagram below:



Life course: Parenting support should be commissioned at each stage of the life course from pregnancy to adolescence - including: ante-natal and birth; early years(0 to 3 years) and pre-school (3 to 5 years³); primary school (5 to 12 years); and secondary school (13 years plus).. This means that parents will be able to make use of initiatives at all stages of their child's life. This approach ensures that parenting support is seen as a normal thing to have because all parents can access some services. This 'normalisation' of parenting supports and services is associated with higher levels of engagement by parents as the process is not stigmatised. It is also more likely that 'seldom heard' parents and those groups of parents that are traditionally 'hard to reach' are more likely to use the initiatives when invited to do so.

3. Commissioning Parenting Support

3.1 Analyse

Commissioners need to analyse and understand the needs of local families as well as the current state of supports and services for parenting in order to identify gaps in service provision. A range of different types of information will be needed as the perspectives of both service providers and people who use services have a role to play in guiding good decision-making. Commissioners should make sure that they have good information to enable them to understand the following:

- The need for parenting support
- The current state of service provision, for example the number and geographical reach of services as well as the views of local stakeholders on their effectiveness
- The gaps in service provision
- Key findings from the research about 'what works' in relation to parenting support

The needs of local families

To commission parenting supports effectively, commissioners should have a good understanding of the needs of local families and parenting support participants. This means knowing which families have needs in relation to parenting and the nature of these needs.

In order to understand the needs of local families, it is important to first be aware of the number and types of families resident in the locality. Demographic data available from the Central Statistics Office (CSO) is a good place to start to build a profile of local families.

National Statistics relevant to Parenting

For example, since 2011 there has been a 3.4% increase in the number of families with children in Ireland to 862,721 in 2016. The number of married couples with children increased by 1.7% to 568,317 while the number of cohabiting couples with children increased by 25.4% to 75,587. The number of one parent families stood at 218,817 in 2016 of which 189,112 were mothers (an increase of 1.5% since 2011) and 29,705 were fathers (an increase of 2.3% since 2011). The majority of one parent families, 125,840, had just one child and they are less likely to be in work. Children in families of cohabiting couples had a younger profile with 76.6% of this family type having all children under the age of 15. This compares with just 47% of married couples having all children under the age of 15. Children in one parent families were likely to have an older age profile, in particular for one parent fathers where in 73.1% of cases, all children were aged 15 years or over.

During that same period the number of registered live births fell from 74,033 in 2011 to 63,897 in 2016, a drop in birth rate from 16.2 to 13.7 per 1,000 population. The table below shows the number of registered live births by age group of mother from 2011 to 2015, which shows a decrease in the number of births for younger mothers (aged 16 - 34 years) but an increase in the number of births to mothers over the age of 35 years.

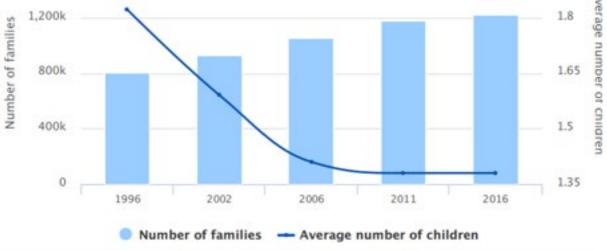
³ These timescales are approximations, for example, a small number of children will be still two when starting preschool and some children will be 12 when starting secondary school.

Live Births Registered by Age Group of Mother, 2011 to 2015

Age group of mother	2011	2012	2013	2014	2015
15 years and under	36	27	28	25	38
16 - 19 years	1,654	1,589	1,352	1,201	1,161
20 - 24 years	7,321	6,890	6,390	5,955	5,705
25 - 29 years	16,693	15,308	13,903	13,126	12,322
30 - 34 years	26,764	26,028	25,385	24,662	23,684
35 - 39 years	17,726	17,819	17,892	18,191	18,451
40 - 44 years	3,658	3,792	3,778	3,887	3,955
45 years and over	169	215	226	248	220
Age not stated	12	12	0	0	0
Total	74,033	71,680	68,954	67,295	65,536

The graph below (source: CSO) illustrates how the number of families in Ireland has grown over the period 1996 to 2016. It also shows that the average number of children per family fell markedly between 1996 and 2006 before levelling off to 1.38 children per family.

Number of families and average number of children per family, 1996 to 2016



Commissioners should utilise the census, and local service data, to understand how many families there are in the local area, where those families live (for example by electoral division), the ages of their children (mapped against the life course) and how many parents are likely to experience additional challenges, including the number of very young parents. This can be cross referenced with information on what parenting support is provided - and the take up of that support - to compare who actually uses parenting supports against who you would have thought would do so, based on your analysis of the needs of local families.

In order to create a local profile of parenting with additional challenges, commissioners may want to look at a range of sources of local data, for example child protection referrals, local data on perinatal depression, domestic abuse, child aggression or behavioural problems, developmental delay (including reading comprehension and general language use), and parental use of other services such as mental health services.

Practice example: Roscommon

NUI Galway were engaged to undertake a needs analysis for parenting support. The distribution of online and paper-based questionnaires, disseminated via secondary schools, enabled a better understanding of how parents would like to receive information about parenting supports. This was complemented by a series of focus groups based around the five national outcomes. For instance, one focus group asked parents what supports would help them to have 'healthier children'. Contact was also made with seldom heard families to ensure that their views were heard e.g. traveller families. One development that came directly from this work was drop in clinics, including crises counselling sessions, in conjunction with Family Resource Centres, as families articulated their need to have somewhere to go at times of crises, particularly if, for whatever reason, they don't have a good network of support available to them.

The state of local service provision

Commissioners need to have good information about the availability of parenting support in the local area. This is on two levels and serves different purposes:

- A summary of provision, across agencies, in the local area and spend on parenting support
- Up to date information for parents about supports that are currently available to them

Practice example: Dublin South Central

The Meitheal model has been a driver for identifying unmet needs as bringing front line professionals together across agencies has enabled the development of an overview of needs in an area. Through Meitheal it has been identified that there is a need to better support parents with children who have autistic spectrum disorders. Therefore, there are plans to extend the Incredible Years (IY) programmes to include the IY autism package.

It's hard to map the provision of parenting support in detail across a local area as different agencies are involved and it's a changing picture. In many local areas CYPSC coordinators, CFSN coordinators and/or Parenting Champions play a key role in stimulating the development of parenting supports by helping areas understand local needs, gather information about supports provided by different agencies, and disseminating good practice to colleagues. Many local areas have developed directories of services for parents, such as the Kerry FRC Programme Directory Autumn 2017, and some have developed websites such as Parenting Kerry or Facebook groups such as Mayo Parenting.

Practice example: Waterford and Wexford

There are two Family Support subgroups of the CYPSC that consider how best to capture the variety of events in local areas. In one area the CFSN produced 'Celebrating Parenting' a brochure to promote the series of free talks and workshops for parents, delivered by a variety of agencies and hosted by Tramore, Portlaw and Kilmacthomas libraries throughout 2018.

A summary of provision across agencies could be illustrated by completing a grid, like the example below, that maps parenting support available to local families against the life course and levels of need. This could be further enhanced by overlaying information about the take up of parenting support - both numerically and by geographical area - spend on

those parenting supports, and the views of local stakeholders on the availability, quality and effectiveness of local provision

Practice example: Limerick

Parenting Limerick is a network of organisations that provide parenting and family support in the area. The Love Parenting website was developed to provide information and advice to parents and to map in one place the supports available in the local area. It also has links to other useful websites about children's health and well-being, parenting and Family Support services. The information in the website has been developed into a parenting support brochure that can be given to parents. As well as helping to map disparate services, the network has enabled a better understanding of the needs of local parents and gaps in service provision. The strength of the partnership is its multiple members - frontline workers have a good sense of local provision and needs.

Such an analysis of service provision could enable local stakeholders to identify and agree where there may be over-provision or gaps in services. It should help commissioners to review whether there is sufficient local parenting supports available at all stages of the life course and the proportion of spend on parents experiencing additional challenges. All parents need parenting support, but some need more support than others and it is likely that local areas will spend more on parents experiencing additional challenges. In general, when investing in supports and services for families across the continuum of need, the lower the support needs the less of an investment will be needed and the higher the needs the more costly the interventions will be. This is primarily because of the nature of the practitioner skills and experience that are needed at each level, the amount of time that is needed to build rapport and trust, the cost of overcoming barriers to accessing services, and the 'one to one nature' of the work when there are complex family issues.

Practice example: Donegal

Parent Hub Donegal was set up by the Donegal CYPSC to look at parent support needs in the local area. The Hub is made up of different community and statutory services who are involved in supporting parents in Donegal. Having a well-established interagency group enabled us to identify the needs that exist in Donegal around parenting support, to map provision and to co-ordinate service development without duplication. One of the areas that came to the fore was the difficulty for parents in accessing information about what services are there to support them and their families. With this in mind we developed a "One Stop Shop" online service to provide information to parents in Donegal where they could find out about services and get information and advice around parenting issues. We developed a structured website and Facebook page to provide information on local supports, evidenced-based advice and, crucially, to interact with parents. The other key factor has been having some capacity to 'do the legwork' by employing a part time parenting coordinator. The coordinator has detailed knowledge of local provision and has been creative in reaching out to parents and local communities.

ParentStop CLG is a not-for-profit organisation based in County Donegal. Since 2005 ParentStop has promoted and supported positive parenting across the county. This involves offering a free and confidential parent support service and playing a central role in promoting positive parenting and parent support across Donegal. See the website for more information www.parentstop.ie.

At the low level of need many parents, and all first time parents, will need information at each stage of parenting including preparing for parenthood, pregnancy, birth, the early years, the primary school years and adolescence. At the medium level, a smaller number of parents will need family support to enable them to avail of parenting support. These might include younger parents, people parenting alone, and immigrant parents. There are a small number of parents who will require more intensive family support and therapeutic interventions to enable them to engage fully with parenting supports in their communities. Parenting practitioners working to support parents with more complex needs should be aware of the different contexts that families may be living with including mental health issues, substance misuse, domestic violence and a life history that includes insecure attachments.

Lovel of	Life course									
Level of need	Ante-natal and birth	Early years (0- 5)	Primary school (6-12)	Secondary school (13+)						
Universal	Parenting24seven website Ante-natal Support Group parenting course	Parenting24seven Website Parent & Toddler Group Group parenting course	Parenting24seven Website Group parenting course	Parenting24seven Website Group parenting course						
Low	Community based peer support programme	Home Visiting Programme Parent & Toddler Group Group parenting Course Language & Literacy	Group parenting course School based Parenting Training Programme	Group parenting course School based Parenting Training Programme						
Medium	Community based peer support programme	Home Visiting Programme Parent & Toddler Group Specialist Group Parenting Course Language & Literacy	Tailored Family Support (Mentoring/ Counselling) Specialist Group parenting course School based Parenting Training Programme	Tailored Family Support (Mentoring/ Counselling) Specialist Group parenting course School based Parenting Training Programme						
High	Therapeutic Family Support	Therapeutic Home Visiting Service Therapeutic Family Support	Therapeutic Family Support	Therapeutic Family Support						

Understanding what works

There is good evidence about the effectiveness of parenting support provided across the levels of need, ranging from universal supports to all parents to top-up support for parents with additional needs through to high levels of need. It is important that local organisations understand enough about 'what works' to commission effectively. More information about 'what works' in terms of parenting support is given in appendix two and links to other sources of information and references are given in section four below, although do note that this is a snapshot in time as the evidence base is growing all the time.

Appendix two provides details of evaluated programmes i.e. those that have good evidence of effectiveness. This information can be used as a starting point to inform local commissioning decisions, as well as an initial way to consider programmes relevant to types of family circumstances. Commissioners in local areas need to understand and apply three considerations from the evidence base:

- 1. What are the key messages from research about effective parenting support? For example, programmes which best support parents include the following five features (see appendix three for more information):
 - They are accessible to parents, in terms of their location, timing and length of sessions;
 - They use a number of approaches during sessions to keep parents engaged throughout the programme;
 - They provide training and on-going support for practitioners to develop their skills and good, trusting relationships with parents;
 - They make good connections with other services and providers that parents may need to access; and
 - They are flexible in how they respond to the needs of parents as their children grow older.
- 2. What in particular should we consider about parenting support for families with more complex needs? For example:
 - For maximum impact, attention should be paid to developing both effective services (or interventions) and effective systems for identifying and wrapping support around families with additional needs.
 - Multi-component programmes for example group parenting programmes and direct work with the family - are more likely to succeed than single agency or single issue interventions.
 - A longer period of intervention is usually required, in comparison with early intervention. Research suggests that 12-18 months may be realistic for some families
 - Programmes that build on family strengths and address the needs of all key family members are more effective.
 - Families experiencing hardship are less likely to access services (both targeted and open access) than other families and so barriers to participation need to be addressed.
- 3. What specific interventions or programmes are proven to work well and for whom? See appendix two for more information.

It will be important to understand the relative strengths and limitations of each specific methodology or programme as well as to clarify what the target population is for each. In applying this evidence and attempting to determine which types of support may fit the needs of the local target cohort, we would encourage commissioners to focus on 'proven' evidence-based programmes but also to stimulate local innovation built on existing local strengths.

Evidence suggests that what matters more than the actual choice of model for intervention seems to be clarity about and application of the model in practice and the capacity of the person delivering the intervention or programme to develop a positive relationship with the parent receiving it. In other words, a range of evidence-based programmes may work well, but their impact will depend on fidelity⁴ to the model and clarity about the programme design and application of unenvisaged changes or changes that are not evidenced-based.

3.2 Plan

Parenting support needs to be planned, commissioned and delivered as part of a strategic, cross-partnership approach to addressing local needs including CYPSC plans (known as Children and Young People's Plans (CYPP), the wider Area Commissioning Plan and the Creative Community Alternatives Plan. This approach will involve developing and weighing up different options within the local and national policy contexts, identifying priorities and the resources available. Commissioners will wish to develop a plan that makes evidence-based proposals for how best to use the resource available in the local area. A suggested template for a Commissioning Plan for Parenting Support is given in appendix four.

Tips for developing a commissioning plan:

- Use the information gathered in the analyse stage of the commissioning process to map possible development options against the needs of local families.
- Direct spending towards programmes with a strong evidence base, and in promising and innovative programmes where there are currently gaps.
- When making decisions about which programmes might be most suitable, pay close attention to the age and the stages of child development for which programmes have been found to be appropriate.
- The process of developing the plan is as important as the end result. Ensure that key stakeholders are engaged in the decision making process.

Understanding the needs of local families and all the resources that are available for interventions and change to happen, enables commissioners to identify potential supports and interventions. Appendix two provides details of evaluated programmes i.e. those that have good evidence of effectiveness. Such evidence ratings are important because they can help commissioners judge how likely an intervention is to deliver benefits for families. However, evidence ratings do not guarantee a result: just because a programme has previous evidence of impact does not mean that it will work in every place. Commissioners have to balance the strength of evidence with implementation capability and cost benefit analysis.

Also, it is important to be aware of emerging programmes and supports that may not yet have strong evidence of effectiveness but have early indications that they may be useful. It is important to monitor initial reactions from parents participating in these initiatives and also practitioner feedback in order to provide support and resources for these new programmes and supports to be evaluated properly.

To be effective, the programme's content should be delivered to families in a format that is sufficient for producing the outcomes the intervention wishes to achieve. Studies repeatedly observe that without fidelity to the model, programme effectiveness is lost e.g. if adaptations are made to the programme's content and format. Examples of some of the more common types of adaptations known to reduce programme effectiveness include: removing content or changing its sequence; replacing one-to-one support with group advice; and failing to monitor family progress.

⁴ Fidelity is the faithfulness with which a program is implemented without compromising its core components, for example adapting a programme's content or format, or failing to monitor the impact that is has on families

Commissioners should take information about a programme's format into account to consider whether it can be maintained by the agencies and practitioners available to deliver it. Commissioners may wish to do this systematically by rating options against a few key questions such as:

- How well would this programme address the required outcomes in our area commissioning plan?
- How viable is the programme financially within local resource constraints?
- How acceptable is this programme in the local context?
- How feasible is the programme to deliver within the local system? For example, do we have a suitably trained or qualified workforce?

Commissioners also need to be confident that any new evidence-based intervention is likely to provide value over and above the current provision. This is particularly important for interventions developed in other countries because their impact may not be as substantial as hoped, due to differences in local needs, healthcare provision and child welfare systems.

3.3 Do

'Do', in commissioning terms, involves investing in parenting supports and services to implement the commissioning plan. Commissioners will need to develop specifications with providers that encourage sustainable provision of high quality, evidence based supports to meet local needs and national priorities. Developing good communications and effective relationships with existing and potential providers is vital.

The specification is a document which informs prospective providers about what will be expected of them: it usually forms part of the service level agreement (SLA). A specification should provide as much helpful background and baseline information as possible, as well as a clear definition of the desired outcomes to be achieved. However, where possible, it should also allow providers to propose the evidence-based inputs, processes and outputs they believe will best achieve the specified outcomes.

Tips for developing service specifications:

- Take as your starting point the outcomes you wish to achieve.
- Involve a range of providers early in developing the specification as it can lead to greater innovation, and providers usually value being involved at this stage.
- Some degree of coordination will usually be necessary in the effective provision of parenting supports and services. References to the need for service connectivity and working together can be included in the service specification.
- Consider all the roles that you will wish the provider to play in relation to supporting families and include these in the specification.

A number of providers will be required to deliver aspects of the commissioning plan. The voluntary and community sector is well placed to deliver at least some of these services, as families are likely to perceive them as being less stigmatising than some other services.

New programmes will need careful implementation to make sure that they integrate with wider local service arrangements. Effective implementation will require regular liaison with the programme developer or with a provider organisation who offer training and implementation advice. Some programmes will have clear instructions and guidance manuals, others will rely more on professional judgement. Every programme has different arrangements to support practical implementation, and understanding the steps required to set up the programme at the beginning will help to judge which programme is the right fit for the local context. A programme's content and format should be maintained through quality assurance systems that enforce intervention fidelity. Many programmes specify what

these systems should look like. Examples of fidelity and quality assurance systems include fidelity checklists, practitioner certification, recommendations for practitioner supervision, participant evaluations and systems for monitoring implementation progress.

Good assessment and Referral Systems

Good assessment and referral systems are essential for ensuring that families are not referred on to a programme which is unsuitable for their needs. When implementing new interventions, multi-agency roles, responsibilities and referral systems should be established at the time the intervention is set up. Good assessment is the foundation of effective work with families with more complex needs because, although it does not guarantee successful outcomes for children, it greatly increases the likelihood of good appropriate support which meets family needs within a reasonable time frame. Effective assessment to obtain a detailed understanding of a family's needs is an important precursor to selecting the most appropriate intervention for a family and ensuring interventions reach the families who need them the most.

Interagency training is an important consideration so that all practitioners in all agencies and organisations operating in the community are well aware of the types of supports that are available and the thresholds and eligibility criteria that apply. For example, parenting support commissioners and practitioners should be aware of the Signs of Safety approach that is being implemented as part of Tusla's child protection work.

Parental Participation - Barriers and Enablers

The commissioning of parenting supports and services needs to be mindful of issues in relation to the meaningful participation of parents including; including parents in the commissioning process; and including parents in the planning, delivery and design of supports and services.

When commissioning parenting supports and services it is also important to consider barriers and enablers, particularly when you are trying to support parents who are 'seldom heard' or when the engagement is not voluntary. The Toolkit for Parental Participation outlines some considerations in this area including access issues - transportation, childcare and differing abilities.

3.4 Review

Commissioners need to review services and identify the costs and outcomes of parenting support in the local area. Review activity should be capable of achieving two things in particular:

- Demonstrating the impact of parenting supports, services or programmes over time
- Reporting and taking action

Commissioners will need to develop a comprehensive review framework for parenting support, including a clear relationship between outcomes, measures of success, and data collection methods. Local areas may find it helpful to use Outcome-Based Accountability (OBA)TM methods as the basis of such a framework.

Outcome Based Accountability (OBA)

OBA is a disciplined way of thinking, planning and taking action that can be used to improve the performance of services and programmes. Sometimes called Results-based AccountabilityTM (RBA) in the USA, it was developed by Mark Friedman of the Fiscal Policy Studies Institute and has been used extensively over two decades in many countries at every level of public services. OBA provides a pathway for multi-agency partnerships and individual organisations to prioritise the outcomes they want to improve and determine what strategies are needed to achieve them. OBA makes a key conceptual distinction between:

- Population accountability where the aim is to achieve better outcomes for particular groups (such as all children and young people) in a defined geographical area
- Performance accountability intended to improve outcomes for the users of individual programmes and services as a contribution towards achieving better outcomes at population level

OBA can help managers and/or funders of supports to identify key performance measures for their service or programme. It identifies three performance measurement categories:

- How much did we do? This category is about inputs or quantity of effort: how much service was provided? These performance measures are usually related to the numbers of parents, or children and young people, who use services (by characteristic such as age or level of need) or the number of activities (by type of activity) delivered. This category is usually the easiest to measure.
- How well did we do it? This category is about outputs or quality of effort: how well was the service provided? These performance measures are usually related to standards (such as % of parents completing the programme, unit costs or staff turnover rate) or customer satisfaction (did we treat you well?).
- Is anyone better off? This category is about outcomes or impact: what proportion of service users are better off? These performance measures are usually related to 'distance travelled' by the parents or families using services such as the proportion of people who use services who have changed skills/knowledge, attitudes/opinions, behaviours or circumstances. This is the most important category, but usually the hardest to measure.

Measuring 'How much did we do?' is easier if local areas use a consistent process to record information about the parents who access supports. An example registration form that can be used to consistently capture participant information is given in appendix five.

A key part of measuring 'How well did we do it?' is to capture parents' satisfaction with the supports they accessed and their views on its effectiveness. Some parenting supports have prescribed evaluation forms, or other evaluation methods, that are part of the fidelity to the model. For others, local areas have developed their own evaluation forms. Some examples of evaluation forms are given in appendix six.

Measuring what percentage of service users are better off and how are they are better off is not always easy, but a variety of before and after measures have been developed to measure individual outcomes. These usually include tools to support assessment (including strengths and needs) and tools to support planning and the review of plans and overall family progress. It will be important to monitor progress of both the plan itself (the key areas identified for change by the family and practitioners) and all significant domains outlined in the assessment documentation. Visually accessible tools can be very helpful, such as Triangle Consulting's Outcomes Star™ which can measure progress in up to 10 areas of a family's life. It is recommended that, where possible, at least one measure is used before

and after a parenting intervention to measure 'distanced travelled'. Appendix seven gives information about validated before and after measures.

Tips for measuring 'distanced travelled':

- Consider how the tool(s) can achieve both effective recording of progress and demonstration of the progress to families in a visually accessible format.
- Measure progress more than once, for example after an initial period of
 intervention and at least once more (in particular at the end of a period of
 intervention). Sometimes services and individuals working with families in this
 way discover a greater level of need after an initial period of engagement and
 therefore scores of need may in fact go up initially.
- Reach agreement about who will evaluate the extent of progress over time, for example: key worker, family members, all?
- Develop electronic collation of the information and analysis of impact across a cohort of families.

Commissioners should agree, for all parenting supports, the regular collection of performance monitoring information (in all three OBA categories) as well as whole system evaluation activities such as irregular - e.g. 6 or 12 monthly - case sampling and interviews with key 'players' and longer term follow up studies with a sample of individual families.

Commissioners should also agree what action will be taken when they receive performance monitoring information, particularly if poor performance is identified. Good practice would suggest a developmental (as opposed to a punitive) approach to taking action. A developmental approach starts from the premise that mistakes happen, what is important is learning from them and making changes to improve performance, and that support may be needed to achieve this. Commissioners and service providers need to agree what has gone wrong and why, focusing on explaining rather than describing problems. The aim is to achieve a culture in which success is applauded and poor performance is addressed by analysing the reasons behind it and taking action.

When analysing and presenting information it is important that key messages stand out and are compelling. OBA suggests a simple square divided into quadrants as a graphic way to report performance measures for each parenting support or programme. An example OBA

performance measures report card for a programme is shown below:

How much did we do?

- Number of parents (or families) attending/using the support by: geographical area, age group, level of need, family characteristics
- Number of activities delivered: by activity

How well did we do it?

- Percentage of parents that completed the programme/plan of activities by: plans wholly achieved, partially achieved, not achieved at all, family dropped out
- Cost per head of support
- Percentage of families reporting satisfaction with and perceived value of the programme (feedback via questionnaires)

Is anybody better off?

- Aggregated 'distance travelled' information overall and by level of need, age group, geographical area, level of need, family characteristics
- Percentage of families referred to specialist services by: age group, geographical area

Finally, commitment to the use of evidence in commissioning does not end at the point of identifying evidence-based services that meet needs. It is an ongoing process, part of the cyclical commissioning process, and involves performance monitoring and other evaluation activities. It is likely to be useful to jointly explore the 'story behind' review findings with partners. Findings, stories, and successes should be shared as broadly as possible, using a variety of methods including anonymised case studies. This information should also feed into ongoing training and development activity for the relevant workforce and, of course, into subsequent service design or re-design, thereby completing the commissioning cycle.

4. Further Resources and References

Asmussen K, Feinstein L, Martin J and Chowdry H (2016). Foundations for Life: What works to support parent-child interaction in the early years. London: Early Intervention Foundation.

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McKeown K (2000) A guide to what works in family support services for vulnerable families. Dublin: Department for Children and Youth Affairs.

Sneddon H and Owens S (2012). On the Right Track: Learning from Investment in Prevention and Early Intervention in Children and Young People's Services in Ireland - Parenting Outcomes Report. Dublin: The Centre for Effective Services. (Updated in 2016 by Kennedy L.A. and Rochford S)

Tusla (2013) What Works in Family Support?

Appendix One: Principles of Parenting Support Practice

- Active Engagement. Actively engage with parents in an empathetic, energetic and non-judgemental way to build and maintain effective, supportive and empowering relationships.
- Relationships are key. Work with parents so that they understand the importance of their relationship with their child. Model a good relationship with them so that they know what a positive and attuned relationship looks like.
- Strengths Based. Pro-actively work with parents to identify their strengths and skills as well as assessing their needs and concerns.
- Informal and Formal Social Supports and Signposting. Have an awareness of the importance of informal positive social supports (family, friends, neighbours and community based services and clubs) to parents and their children. Be aware of the relevant information, supports and services (both informal and formal) that are available locally, regionally and nationally and inform parents of these when appropriate.
- Diversity. Have awareness around supporting parents in different family types, from different cultural backgrounds and those who are parenting in other different contexts⁵. Display a respect for parents' different awareness, capacities, understanding and beliefs. Work together with parents to agree common goals and objectives for improved wellbeing and outcomes.
- Being Genuine. Being genuine in working with parents involves being open about personal weaknesses. When a practitioner can understand and accept their own strengths and weaknesses they will be able to gain a deeper understanding of the parent's circumstances from the parent's point of view.⁶

Key Skills and Knowledge Base

- Parenting Theories
- Adult Learning Theories
- Community Leadership Skills
- Advocacy Skills
- Parenting Practice including Play and the Home Learning Environment
- Relevant Parenting, Family, Children and Young People Policies and Action Plans
- Children's Development theory and practice
- Keeping children and young people safe
- Team building skills
- Skilled at establishing positive relationship
- Time Management and Management Information skills
- Marketing and Promotion
- Monitoring and Evaluation of supports and services

Attributes

- Demonstrate a keen interest in supporting and working with parents
- Believe in and are committed to parents being key to child outcomes
- Be non- judgemental; Compassionate; Empathetic; Sincere; Patient
- Have a sense of humour
- Be innovative and flexible
- Be respectful of family diversity

⁵ See also Lifelong Learning UK Work with Parents National Occupational Standards

⁶ Asmussen, K. (2011) The Evidence-based Parenting Practitioner's Handbook. Wiltshire: Routledge.

Appendix Two: Parenting Support Programmes – levels of need

This table summarises evaluated parenting support programmes, i.e. those that have good evidence of effectiveness, and categorises them using the low, medium, high continuum to depict their suitability for different levels of needs. It draws on Irish research reports available on the subject.

Parenting programme	Target group	Age range	Setting	Duration	Description
Low - Medium needs	•		•		
Childhood Development Initiative (CDI) Early Years	Children and their families in a disadvantaged area	2 to 5	Home and centre based	Various supports over 2 years	An early care and education programme to support all aspects of children's development
Common Sense Parenting	Parents	6 to 16	Centre based	6 weekly two- hour workshops	Aims to teach parents practical and effective ways to enhance their parenting skills
Doodle Den	Children and their families in participating schools	5 to 6	School based	3 x sessions a week throughout the school year plus 6 parent and 3 family sessions	In school and after school children's literacy programme
Incredible Years Parent Training Programme	Parents in the catchment area	0 to 12	Home and school based	2-2.5 hours per week over 12- 14 weekly sessions	Trains parents to support their children's social and emotional development
Lifestart Growing Child Parenting Programme	Parents	0 to 5	Home based	Monthly visits throughout the first three to five years of their child's life	A proven programme that helps parents to support their child's physical, social, intellectual, emotional development and to promote school readiness
Media Initiative for Children: Respecting Differences	Children, parents and practitioners	3 to 5	School based	One pre-school year	Aims to promote positive attitudes to physical, social and cultural differences
Parents Plus Early Years	Parents	0 to 6	Centre based		Parenting course with proven outcomes
Parents Plus Children's Programme	Parents	6 to 11	Centre based		Evidence of improvements in parenting-related stress, child problem behaviour and parent satisfaction
Parents Plus Adolescent's Programme	Parents	11 to 16	Centre based		Evidence of improvements in parenting-related stress, adolescent behaviour problems
Preparing for Life	Parents of children in a disadvantaged area	0 to 5	Home based	Regular home visits from pregnancy to 5 years	An intensive home- based prevention programme
The Da Project	Fathers		Centre based		Aims to increase the participation of fathers in family support services and in their children's lives
Triple P Positive Parenting Programme	Parents	2 to 15	Centre based	Various lengths and intensity	Aims to prevent and remediate existing social, emotional and behavioural problems

Parenting	Target group	Age	Setting	Duration	Description
programme		range			
Medium - High nee				T .	
All Ireland programme for immigrant parents	Immigrant parents	All ages	Centre based		Aims to promote positive parenting
Community mothers	New mothers in disadvantaged areas	0 to 2	Home based	Monthly visits for up to 24 months	Trained volunteers offer support around health and well-being
Functional Family Therapy	Young people referred to the programme	11 to 18	Centre based	A short-term, intensive therapy of 16- 22 sessions, with up to 26-30 sessions for more complex issues	A family-based therapy programme which treats young people and their families who are dealing with relationship issues, emotional and behavioural problems, conduct disorder, substance misuse and delinquency
Marte Meo	Parents at risk	0 to 6	Home based and/or centre based	Different courses available	The central focus of the programme is to identify, activate and develop skills to enable and enhance constructive interaction and development.
Multisystemic Therapy (MST)	Young people are at risk of out of home placement in either care or custody and families have not engaged with other services	11 to 17	Home and centre based	Programme facilitators go to where families live and work with them intensively for three to five months, including being on call to families 24 hours a day, seven days a week	Approaches, such as behavioural therapy, cognitive behavioural therapy and structured family therapy are used to work with young people and their families
One Family Ireland Parenting Services	Lone parents	2 to 10	Centre based	Varies by programme	Multiple interventions aimed at one parent families or shared parenting
Parenting Wisely	Parents	6 to 18	Virtual	An interactive CD	Aimed at low income families who have children with moderate behavioural problems
Parents Plus Parenting When Separated Programme	Parents who are separated	All ages	Centre based	Six week course	For parents who are preparing for, are going through, or have gone through a separation or divorce
Springboard Family Support Initiative	Parents	0 to 18	Centre based	Up to a year: a range of programmes and interventions	Some of the most common difficulties faced by families who use the service include domestic violence, emotional abuse, high levels of school absence, neglect and economic disadvantage
Strengthening Families	Parents	10 to 14	Centre based	14 week family skills training programme	Aims to reduce adolescent behaviour problems, improve parent child relationships and strengthen family processes
Teen Parents Support Initiative	Teenage parents	0 to 2	Hospital and home based		Aims to support the wellbeing of young parents and their children

More information on these programmes can be downloaded from: Parenting Support and Parental Participation: Mapping Parenting Support in the Irish Context UNESCO Child and Family Research Centre (2017), What Works in Family Support? Tusla (2013), and On the Right Track: Learning from Investment in Prevention and Early Intervention in Children and Young People's Services in Ireland - Parenting Outcomes Report (2016) The Centre for Effective Services.

Appendix Three: 'On the Right Track' – 6 Key Lessons

On the Right Track: Learning from Investment in Prevention and Early Intervention in Children and Young People's Services in Ireland (The Centre for Effective Services, 2016) provides useful insights for service providers, commissioners and practitioners involved in planning and delivering parenting support. In particular there were six key lessons learnt from the programmes delivered under the Prevention and Early Intervention Initiative:

- 1. Providers used a number of techniques to recruit parents, and to engage them during and between sessions. They consulted with parents in planning the location, timing and length of the sessions. Practitioners used a variety of techniques during the sessions, including varying the pace of delivery, and encouraging parents to lead the discussions. Sessions included video clips, tip sheets and practical resources that parents could use. Parents benefited from the experience of learning from others in group settings, which required practitioners with strong facilitation skills.
- 2. Activities such as home visiting can be challenging to organise. This activity requires confident, skilled practitioners who can engage with parents and who have access to support from their organisation. Time was also needed to manage the logistics of home visiting activities.
- 3. Parenting programmes were enhanced by additional interventions which addressed child behavioural problems. This was particularly the case where the child experienced a diagnosed difficulty, such as Attention Deficit Hyperactivity Disorder (ADHD). The involvement of children in some programmes also helped to encourage attendance at sessions.
- 4. Extensive training was required to equip staff to deal effectively with factors and influences outside of the programme content. Programmes worked well where practitioners had appropriate knowledge of support services, referral pathways and other options available to families.
- 5. Providers highlighted the importance of targeting particular parents and following up with those who dropped out of the programme. Feedback was useful in making changes to the timing and location of activities, along with planning outreach. The need for strategies which encourage greater engagement with fathers also emerged from some programmes.
- 6. It can take up to four years to develop, run and evaluate a parenting programme. Providers highlighted the time and effort needed to recruit and train staff and to identify participants. Time was also needed to adapt programmes and consult with communities and stakeholders to meet local needs. This is in line with research about effective implementation which indicates that the establishment, implementation and evaluation of a parenting service can take from two to four years.

Appendix Four: Template for a Commissioning Plan for Parenting Support

A suggested template for a Commissioning Plan for Parenting Support is given below:

Introduction

Outline what the commissioning plan covers and what it is intended to achieve e.g. all ages or specific age groups? Any (other) particular cohort(s)? With reference to what national grant(s) and guidance associated with it? Over what timescales?

Direction of services

This section should include the national vision and principles for parenting support and how these are reflected in the local area: reference Better Outcomes Brighter Futures and the national parenting support strategy.

Predictions of future needs, identifying key pressure points

This section should use national and local data sources and, ideally, show trends over time with reference to overall number of families accessing parenting support. You could use case studies to illustrate demand.

Current provision

This section should set out briefly what the current pattern of service provision is and how far it is adequately meeting need and demand for services. Ideally it will say something about the impact current services are making and where you think the shortfall(s) are.

Likely future level of resourcing

This section should set out the current resources available, including a breakdown of how those are spent. It should also include the priorities for new or re-directed resources if they become available.

Identified models of practice

An explanation of the desired models of practice commissioners would like to encourage, why this would represent good practice and an analysis of what needs to change. It could possibly offer suggestions as to how the sector might deliver change.

The support commissioners will offer

This section should set out the support commissioners will offer towards meeting the models of practice identified above such as seed funding, support to review programme fidelity, workforce development, or support to develop distanced travelled measures.

Parental Participation

This section should include how parents' voices have been heard and show evidence of parental participation in the commissioning process.

Appendix Five: Parenting Supports and Services Registration Form

	Registratio		
	arenting Supp	orts and Services	
1. Name of the Parenting			
Support/Programme			
2. Name of Venue			
3. Address of Venue			
4. Start Date			
5. Where did you hear			
about this support /			
programme Please only answer the following	a questions if	you are comfortable to do s	0
rtease only answer the following	g quescions ii	you are connortable to do s	
6. Are you		Female	Male
Please tick appropriate b	oox		
7. What age are you:			
8. Could you please indicate you	ır relationship	status? Please tick one box	
Single		Cohabiting	
Married		Separated or Divorced	
Re-married		Widowed	
Civil Partnered			
9. Are you a lone parent?	Yes	No	
10. Are you a step parent?	Yes	No	
11. Could you please indicate	e your Nationa	ality?	
12. Are you a member of an	ethnic group?	Yes	No
If yes, please describe yo	our ethnic gro	up	
13. Education			
Please tick appropriate b			
No formal education		eaving Certificate (or equiva	alent)
Secondary school		hird level Degree / PLC	
Junior Certificate (or equivalen	t)		
14. How many children do you h	ave?		

15.	Could	you pleas	e fill ir	the	number	of	children	at	each	age
-----	-------	-----------	-----------	-----	--------	----	----------	----	------	-----

Ages	U-1	1 yr old	2 yr old	3 yr old	4 yr old	5 yr old	6 yr old	7 yr old	8 yr old
No. of children									
Ages	9 yr old	10 yr old	11 yr old	12 yr old	13 yr old	14 yr old	15 yr old	16 yr old	17 yr+ old
No. of children									
16. What is your occupation?									
17. You	r Name p	olease:							
		our contac rts/Progra		if you wo	ould like i	to be kep	t informe	ed about r	more
18. Tele	ephone N	umber:							_
Ema	ail:								_

Thank you for taking the time to complete this form

Postal Address:

Appendix Six: Parent Satisfaction with Services Questionnaire

We would be grateful if you would take a few minutes to complete the following questionnaire. It will greatly help us to plan and deliver parenting and family services in our area.

1. Wer	e you clear about the pu	rpose of the visit / meeting?
Yes		
Not sure		
No		
If you answe	ered not sure / no	
What other	information do you nee	d so that the purpose of the visit / meeting is clearer?
2. Did meeting?	you have the opportunit	y to express all your concerns during the visit /
Yes		
Not sure		
No		
If you answ	ered not sure / no	
What other	concerns do you have a	bout your family's wellbeing / welfare?
	you satisfied with the ac	ctions that have been proposed?
Yes		
Not sure		
No		
•	ered not sure / no	
What other	actions would you like t	to be taken?
4. Have	e you any other commen	its that you would like to make?
Many thank	s for taking the time to	complete this questionnaire
many chain	s to taking the time to	complete and questionnance
Parent's Na	me:	Practitioner's Name:
Child's Nam	ne.	Date of Visit

Evaluation Form						
For Parenting Supports and Services						
1. Name of the Parenting Support/Programme						
2. Name of Venue						
3. Address of Venue						
4. Name of Facilitator(s)						
5. Start Date	6. Finish Date					

Thank you for attending our recent Parenting Support/Programme. We would be grateful if you would take the time to tell us about your experience of the session(s).

7. How would you rate the course overall? (tick one)

1 = poor	2 = fair	3 = good	4 = excellent
F			

8. Please rate the course on the following items: (indicate one number for each)

	Very Poor	Poor	Fair	Good	Very Good
a. Content of course	1	2	3	4	5
b. Communication about the course	1	2	3	4	5
c. Length of the course	1	2	3	4	5
d. Created interest in the topic	1	2	3	4	5
e. Involvement of participants	1	2	3	4	5

9. Please rate the course content:

	Strongly Disagree	Disagree	Neither	Agree	Strongly Agree
a. Met my needs	1	2	3	4	5
b. Was understandable	1	2	3	4	5
c. Gave me ideas I can try immediately	1	2	3	4	5
d. Contained information I did not previously know/fully understand	1	2	3	4	5
e. Was enjoyable	1	2	3	4	5

10. How much do you agree the following benefits apply to you?					
	Strongly Disagree	Disagree	Neither	Agree	Strongly Agree
a. Motivated me to do something different	1	2	3	4	5
b. Increased confidence in my parenting skills	1	2	3	4	5
c. Gained new skills	1	2	3	4	5
d. Made no difference	1	2	3	4	5
11. To what extent did the facilitator(s	s): Not A	\nm	ewhat	Quite a Bit	A Great Deal
a. Know their subject	1		2	3	4
b. Be well prepared	1		2	3	4
c. Encourage participation	1		2	3	4
d. Made no difference	1		2	3	4
e. Provide clear explanations	1		2	3	4
f. Use a good mix of presentation, discussion and activities	1		2	3	4
g. Were interested in helping you lear	n 1		2	3	4
h. Related course content to real-life situations	1		2	3	4
i. Were flexible in their delivery	1		2	3	4
j. Were approachable	1		2	3	4
12. How would you rate the venue for	the followi Not A	at som	ewhat	Quite a Bit	A Great Deal
a. Comfortable setting for learning	1		2	3	4
b. Catering	1		2	3	4
c. Size of room/layout	1		2	3	4
d. Room temperature	1		2	3	4

COI	MMENTS:					
13.	. For you, what was most useful thing about the course?					
14.	For you, what were the w	reak points of the course?				
Yes		e course to a friend/family member?				
16.	If there is anything else yo	ou would like to say, please feel free to do so here.				
17	7. Your Name please:					
	lease fill out your contact o arenting Supports/Program	details if you would like to be kept informed about more mes				
18	8. Telephone Number: _					
	Email: _					
	Postal Address:					
	_					

Thank you for taking the time to complete this form

Appendix Seven: Parenting Support Evaluation Tools

Before and after measures are tools for monitoring individual outcomes. These validated measures can be used before and after a parenting intervention to measure distance travelled. The table below gives information to aid your decision making regarding age ranges, what the tool measures and whether they are free to use.

Name of tool	Age range	What does it measure?	Is there a cost?	
The Warwick- Edinburgh Mental Wellbeing Scale	N/A	Scale for assessing positive mental health	No	
Parenting sense of competence	N/A	Satisfaction with the parenting role, parenting efficacy and interest in parenting	Yes	
A Tool to measure Parenting Self Efficacy (TOPSE)	0 - 5 years	Parental self-efficacy that address six domains of parenting; emotion and affection, play and enjoyment, empathy and understanding, control, discipline and boundary setting, pressures of parenting, self- acceptance, and learning and knowledge	No	
Parenting stress index	0 - 12 years	Designed for the early identification of parenting and family characteristics that fail to promote normal development and functioning in children, of children with behavioural and emotional problems, and of parents who are at risk for dysfunctional parenting	Yes	
Goodman's strengths and difficulties questionnaire	3 - 16 years	Questionnaire screens for changes in child emotional and behavioural problems	Yes	
Eyberg child behaviour inventory	2 - 16 years	Assess parental report of conduct behavioural problems in children and adolescents	Yes	
The conflict behaviour questionnaire	Teens and parents of teens	Teenagers' behaviour and adjustment	No	
The parenting scale for adolescents	Parents of teens	Parenting laxness or over reactivity	No	
Parent problem checklist	Parents	Conflict over parenting	No	
Relationship quality index	Parents	Parental liability to act and cooperate as a team	No	
Depression anxiety scales	Adults	Symptoms of depression, anxiety and stress in adults	No	

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