# Caroline Chisholm Society

Annual Report 2016–2017





# Contents

Our Vision, Mission and Values	1	
	•	Locations:
Vision	1	1 Darebin Place, Caroline Springs 3023
Mission	1	(Registered Office)
Values	1	977 Mount Alexander Road,
Our Approach	1	Essendon 3040
Our Theoretical Frameworks	1	15A St Andrews Road, Shepparton 3630
Objectives	1	Established: 1969
Our President and CEO's Report	10	Life Members
Our Organisation	13	Mrs E Brennan, the Hon Christine Campbell, Mrs P Coffey OAM,
-		Ms M D'Elia, Ms L Doolan, Mrs T Fogarty,
Tradition	13	Mrs L Gibson, Mr B Guinane,
Caroline Chisholm (1808–1871)	13	Mrs M Howes, Mrs W Hunt,
The Society	13	Dr P Joshua, Mrs L Joy, Mrs M McGarvie, Miss M Napolitano, Mrs B Noonan,
Strategy	13	Mrs H Pearson (dec), Mrs M Reilley,
Effective Services	13	Mrs A Ronchi, Mrs E Semmell,
Strong Finances and Administration	13	Sr M Sexton, Mr F Smit, Mrs L Tainton,
Sound Governance and Management	13	Mrs M Taverner, Mrs P Way
Engagement	14	Board of Directors
Services	14	President and Director: Paul Webster
Pregnancy Counselling and Welfare Appointments Program	14	Vice President and Director:
Family Support Program	14	Dr Michael Christie
New and Pre-loved Goods Program Structures	14 15	Company Secretary and Director: Phil Gatens, GAICD
	15	Assistant Company Secretary and
Governance		Director: Frank Smit
Organisational	16	Treasurer and Director: Stephen Mullins
Our Programs	18	Directors: Tess Fogarty, Phil Gatens,
Pregnancy Counselling and Welfare Appointments	18	Wendy Hunt, Stuart Rowland, Kate
Family Support	19	Rowswell, Gavin Kempin, Sarah Notaro
New and Pre-loved Goods	22	Staff
		Chief Executive Officer: Helen Cooney,
Our Clients	28	BA, MGov & CommLaw
Spotlight on Our Clients in Goulburn Valley	34	Manager, Pregnancy and Family Services: Mo Connolly, RN RM MHM
Spotlight on Our Clients in Melton –		Manager, Corporate Services:
Implementing the Vulnerability Framework	36	Mariager, Corporate Services. Marie Panzera, BB (Business)
Spotlight on Our Clients in Moonee Valley	38	Project and Compliance Officer:
		Sylvana Romagnano
Our People, Neighbourhoods and Finances	39	Supervisory and Senior Practitioners:
Our Year and Our Future	43	<ul> <li>Tania Belen Liawang, MSW, BA</li> <li>Audrey Ciappara, BSW, BPsych</li> </ul>
Our Financial Report	44	<ul> <li>Nida Kazmi, GradDipPsych, BB (Fin Plan)</li> <li>Amanda Walles, BA (Sociology)</li> </ul>
Spotlight On:		Employed staff including: Carmel Ibic;
A New Home in Moonee Valley	2	Daya Adelan; Diane Gulbis; Fumiko Head; Georgina Ormiston; Jeanette Monteith;
Serving Melbourne's Outer West from Caroline Springs	4	Lisa Autelitano; Liz Meloury; Lynette
Our Community in Goulburn Valley	8	Burns; Maree Chin; Narelle Trewin; Natalie
Victorian Parliamentary Inquiry into Perinatal Services	12	Chong; Natalie El Fahel; Rema Dahal, Rosie
<ul> <li>Quality Information for Pregnant and New Mothers</li> </ul>	17	Dymus; Sandra Walker; Shabnam Daliri;
<ul> <li>Responding to a Rapidly Changing Environment</li> </ul>	23	Tabitha Benjamin and Valerie Wegel
<ul> <li>Mothers in Mind to Children and Mothers in Mind</li> </ul>	26	A dedicated team of volunteers

# Our Vision, Mission and Values

## Vision

To support pregnancy, children and families.

## Mission

To deliver a range of pregnancy and family support services that respond to the needs of families and support them to achieve and maintain a safe and nurturing environment.

## Values

We will develop services that are underpinned by the principles of:

- Respect for life
- Compassion and caring
- Social justice
- Empowerment
- Recognition of diversity
- Accountable best practice

## Our Approach

Our service will utilise approaches that are characterised by the following:

- Positive pregnancy support
- Child focused and family centred
- Connecting families with communities
- Flexibility and responsiveness
- Promoting safety
- Acknowledging the expertise of families

## **Our Theoretical Frameworks**

We are focused on the best interests of children, while highlighting families strengths, and working to ensure mothers, babies or toddlers and their families can have a good attachment.

- Strengths-based practice: We help you to identify and build on the strengths, abilities and assets that you already have. This approach leads to better, more sustainable changes in your life, and allows you and your family to work together for a safer and more nurturing environment for your children.
- Attachment Theory: Strong and secure attachment is vital to your baby's development. You can build attachment by learning to read your baby's signals and knowing how to best respond to your baby's needs.
- Best interests case practice model: Our case practice model is designed to achieve a common basis for professionals working with you and your local communities and services to meet your child's need for safety, stability and development.

## Objectives

- To operate a Pregnancy Support Service
- To provide a service of counselling and practical support to meet the physical, psychological and social welfare needs of pregnant women, parents and young children and their families.
- To provide a comprehensive service of care and support that will free women from feeling compelled by physical, psychological or social pressures to choose the termination of a pregnancy.
- To help alleviate poverty and distress through the provision of financial support, material aid and shelter.
- To provide programs of health education.
- To develop a greater awareness and understanding of the welfare rights and needs of all people, including the unborn child.
- To assist those who seek and use the services of the Society to function independently.

# A New Home in Moonee Valley

41 Park Street, Moonee Ponds



12 Shuter Street, Moonee Ponds



977 Mt Alexander Road, Essendon



## **Official Opening**

On 4 March 2017, the Caroline Chisholm Society – Moonee Valley was officially opened by The Hon. James Merlino MP, Deputy Premier of Victoria with the assistance of Life Members of the Caroline Chisholm Society and pregnant mothers and their families.

The building was made possible by contributions from the Victorian Government, Noel & Carmel O'Brien Family Foundation, the Noonan Family, the Beck and Fox Families, Essendon Fields, Strathmore Community Branch Bendigo Bank, Australian Lions Foundation, Lions Club of Doutta Galla (Quilt – Esprit de Corps Project), Schiavello Group, Nelson Alexander Charitable Foundation, Chisholm House – Loyola College Watsonia, Essendon Branch of the Country Women's Association of Victoria Inc. and community fundraising by volunteers.

It would not have been possible without support from the Moonee Valley City Council, the Rotary Club of Essendon and volunteers and members of the Society. For over 40 years, the Caroline Chisholm Society was located at 41 Park Street, Moonee Ponds. Check out more photos online at: www.caroline.org.au/moonee-valley/moonee-valley-official-opening

### **Next Steps**

You can see on page 38 some information about some of the services we've already provided to families from the new site. We look forward to the possibilities of more services being offered so close to public transport. Our CEO, Helen Cooney, has been appointed to a Portfolio Advisory Committee for the Moonee Valley City Council. Chaired by Cr. Jim Cusack, the Community Wellbeing Committee that Helen has been appointed to will support thriving and resilient neighbourhoods including issues such as family violence, gender equity and safety. We hope our building plays a part in achieving that.



## Serving Melbourne's Outer West

## from Caroline Springs

Thanks to the support of a partnership between the Caroline Chisholm and the City of Melton, Darebin Place has become a hub for community support with outreach to local families.

Caroline Chisholm Society owns and operates from 1 Darebin Place, which started life as Delfin Display home. It has also been a tutor house for the then Mowbray College and a gym for the Western Jets football team. Caroline Chisholm Society has been calling it home for over 5 years.

Melton Council owns, and offers Caroline Chisholm Society use of, the former Wirrigirri Preschool. We've been able to make the most of the site by offering parenting and play groups, a pamper day, a children's week party and support for kindergarten participation by vulnerable children through the Vulnerability Tool Kit project and our Partnership with ECMS in an outreach support project.

The site has grown into an invaluable resource for families in the high growth areas of Melton and Wyndham and the large population in Brimbank.







### **Brimbank and Melton Local Government Areas**



## Children's Week

In October, Caroline Chisholm Society held a party for Children's Week. The party was held at 2 Darebin Place, Caroline Springs which was formerly a kindergarten. It was filled with balloons, games and laughter, while children had their faces painted by a very special 'fairy' visitor. We were blessed with a perfect spring day which was wonderful as we transformed our outdoor area into a petting farm. Many of our families attended the party along with people in the community and Caroline Chisholm Society staff. The afternoon was filled with food and fun! We received wonderful feedback from families stating that they had an amazing time and many requested that the event be held again next year.













## from Caroline Springs

#### **Case Study**

Joanne (name changed due to privacy) attended the Caroline Chisholm Society 'Children's Week' Party with her friend Linda (name changed due to privacy). Joanne came next door to our office with her young baby. Joanne requested to speak with a worker if possible. A case worker offered Joanne a private space where they could sit and talk. Joanne advised worker that she didn't want her friend Linda to know she was asking for help, the worker assured Joanne about confidentiality and privacy and said that Linda would not know about the conversation. Joanne appeared very distressed and was crying. Joanne also presented with low self-confidence. Joanne disclosed that she had been diagnosed with complex mental health issues from a young age. Joanne spoke about being isolated and that she was feeling overwhelmed and stressed. Joanne said she doesn't like to leave the house. Joanne spoke about being unsure as to how she should be with her young baby. Worker observed Mother struggling with attachment. Joanne indicated that she does what she needs to do with the baby and that's it. Joanne said her husband is not supportive and that he is a very private man that wouldn't want others knowing their business. Following a two hour conversation the worker suggested Joanne be referred to our Integrated Family Services team so that she could receive support during this challenging time.

#### Outcome

Joanne agreed to be referred to Caroline Chisholm Society (CCS) for support. The same CCS worker completed a detailed assessment and requested Joanne be referred to CCS as a local intake. Worker was allocated Joanne's case for continuity and also because Joanne stated she had made a connection with that particular worker due to feeling validated and listened to. On the initial visit the worker met Joanne's husband who was inviting and supportive of Joanne receiving support. The worker supported the family for nine months, during this time Joanne attended a play group with her baby, she joined a gym and commenced work on a part time basis. Further into case management the worker found it difficult to catch up with Joanne due to her being busy with work and activities, this was a major achievement given Joanne was initially isolated and didn't like leaving the house. Joanne says her husband is now more supportive and will look after the baby so she can have some time to

herself. Joanne said they also spend time now going out as a family. Joanne now appears to have a loving attachment and connection with her child and is enjoying being a mother. Joanne continues to receive ongoing support for her mental health. During the period of case management, Joanne kindly donated clothes and other items to CCS so that other families would benefit. Joanne is extremely thankful for all the support Caroline Chisholm Society provided.

### **Pamper Day**

Victorian Certificate of Applied Learning (VCAL) is a hands-on option for students in Years 11 and 12 where they are placed in a service that gives them practical work-related experience. To our delight, practical work includes those students studying cooking, beauty and early childhood to offer members of our community a pamper day!



### Mother's Day

In May, Caroline Chisholm Society held a party for Mother's Day. The party was held at The Club in Caroline Springs which has supported us with our project to empower Early Childhood Educators with knowledge of vulnerability. Fairy Lulu came to visit again!









# Our Community in Goulburn Valley

Since 1976, Goulburn Valley Pregnancy and Family Support Service has served the expectant and new mothers and families of Shepparton and surrounds. See page 34 for details of the families we support.



At Goulburn Valley, we are strongly connected to Caroline Chisholm and the Melbourne-based team of the Society. When the new building opened, we created artwork to ensure Caroline's story is on walls.



There is a wide and growing team at Shepparton. This was Aneta's farewell, and Karan visited from Melbourne. Since then, Maree has settled in as our Lead practitioner.



We recognised our volunteers, like Jill, with a certificate signed by our CEO, Helen.



Our community is truly diverse with lots of families from Africa moving into the area. You can see the ethnicity data on page 34.



CWA of Victoria Inc. had their conference in Shepparton. These are helpful women from Mildura who brought some of the many nappies that were donated.



Cho and Baby Emma donating goods to Keren.

#### Case Study – Volunteering in Shepparton – Aileen Youie

Aileen has been volunteering for GVPFSS for the past four years, but she has been actively supporting Caroline Chisholm Society for at least 12 years through her association with the *Love to Sew* group in Shepparton.

Last October the Love to Sew women won the prestigious **Victorian Senior Achievement Award** for services associated with improving the wellbeing of older people in the community. Aileen has used her creative talents to assist in making handcrafts for the elderly, homeless people, and refugee groups in the area. Amongst other things, they have raised funds to support an orphanage in Romania, the CWA and local Hospice. They also donated \$500.00 to GVPFSS, which we have used to purchase 20 nappy bags for new and expectant mothers. Aileen suggested we purchase these and

fill them with nursing items for the baby and a small gift for the mother. These bags are now given out according to need, and she and the other volunteers delight in receiving the feedback that comes with the relief in having a nappy bag to take to hospital, or use when the mums are 'out and about' with their baby.

Aileen also volunteers with **Shepparton Villages** where she does everything from calling Bingo to teaching Residents how to sew and make their own jewellery. Her pastimes include quilting, making dolls and china painting. A sample of her craft is on display at our Essendon office. It replicates an illustration about Caroline Chisholm's childhood from a book.

Members and friends of CCS might remember a competition that was held in 2015 calling for design ideas for Shepparton's Baby Box project. Aileen entered and won that competition with her stork and baby design. Aileen's passion and commitment to GVPFS is inspirational. Aileen manages our welfare appointments, she makes baby 'cakes' for new mums, she sews, organises the material aid and is a highly respected mentor and team leader.

Over the years Aileen has worked in the community services sector as a registered nurse and family day care worker. She has travelled around Australia and worked in remote aboriginal communities with her husband Gordon and their four children.

We would like to acknowledge the contributions Aileen has made to GVPFSS and hope we continue to benefit from her input and gentle wisdom.

Aileen (on right) with Yoslinde sorting clothes.



## Our President and CEO's Report



Paul Webster President and Director



Helen Cooney Chief Executive Officer

For just over five years we have worked together as President and CEO of the Caroline Chisholm Society. Pregnancy and family support has changed markedly in Paul's 25 years on the Board, and over the last five years, supported by Helen, the Board and management have led the Society to a now stable asset base from which we can offer services.

A great highlight in 2016–2017 year was the 4 March, 2017 opening of our new service hub at 977 Mt Alexander Road, Essendon (see page 2). With this new fit for purpose site, the use of the former Wirrigirri kindergarten in Darebin Place, Caroline Springs and the use of the annex of 15A St Andrews Road Shepparton, we are now confident of our positioning to implement our strategy, *"to grow into three sustainable locally embedded sites in Moonee Valley, Caroline Springs and Goulburn Valley by 2025".* 

The strategy is this because we face a great challenge in meeting demand for our services. We have received more funds, but find we regularly support more complex families and would like to work with families earlier to obviate the problems they face in the first place. This year, the number of home visiting clients with whom we worked went down due to the need to spend more time with those families. Conversely, the number of clients we saw in Shepparton increased, because we are more available and the demand for our service is strong.

We need more staff offering more services that we know work because we wish to ensure that expectant and new mothers and their babies who are facing poverty, homelessness, social isolation, family violence, and mental health problems are supported to resolve their concerns.

In practice, our Clinical Governance Committee and the data it considers will come to the forefront. For example, our data showed an increase in working with families with a history of violence and we are now offering the Children and Mother's in Mind programme (see page 26). Funded by the Victorian Government, and led by Children's Protection Society, the programme builds on our experience of the Mothers in Mind<sup>®</sup> programme, which we brought to Australia in partnership with the University of Melbourne last year. Caroline Chisholm Society is working with McAuley Community Services for Women and VincentCare to deliver the service. We have several other special projects underway, which are indicative of our collaborative and responsive practice in helping to meet the needs of families.

Achieving the vision for our services will be affected by a major drive for sector reform coming from the Victorian Government, from which we receive the greatest proportion of our funding. There has been a Royal Commission into Family Violence, there is a policy direction for Child and Family Services called the "Roadmap to Reform" which includes redesign of family services, the homelessness sector is being reformed, the 'Education State' paper includes meeting the needs of vulnerable children through children's services, and a Parliamentary Inquiry into Perinatal Services, which has a health policy lens, is underway.

In truth, our dependence on the Victorian Government is too great, especially as decisions by the Commonwealth Government also affect families in need given the role of payments including those from Centrelink, migration and refugee policy and health including Medicare.

Both the state and federal governments are aiming to fund only measures that are "evidence-based", and while we're encouraged by that because we believe in doing things that are right not just sound right, we will remain true to our tradition of neighbourly good will and keeping positive about parenting. We can only do that if we continue to diversify our funding sources, for example through philanthropy, sponsorships and taking up service provision opportunities that are subcontracted.

Together, we thank the Board for their commitment to expectant and new mothers over the last year. At our AGM this year, Frank Smit will retire from the Board. Frank has been a member of the Society since its inception and had several terms of service on the Board. We wish Frank and Pauline well for the year ahead and look forward their continued support for our work. Finally, we acknowledge the work of the staff, both employed and voluntary. Karan Grieve has retired after 30 years of service, having started as a volunteer. Karan worked on the telephone line when it rang to people's homes, operated as an out-posted worker in Sunbury, worked as a case manager operating from Caroline Springs and retired in the role of Volunteer and Welfare Appointments Coordinator. We wish her well for retirement and look forward to her volunteering.

Caroline Chisholm Society does not offer a product, we offer people. Without them, families would be worse off. This year, our team helped over 1,200 clients. And the vast majority of those clients reported improvements in their lives as a result of our support or that they were very satisfied with our service. So, to the teams in Moonee Valley, Caroline Springs and Shepparton led by Mo Connolly our Manager of Pregnancy and Family Services, we say Thank You.

## Victorian Parliamentary Inquiry

## into Perinatal Services

The health, care and wellbeing of mothers and babies in Victoria during the perinatal period is being examined by the Family and Community Development Committee of the Victorian Parliament. Caroline Chisholm Society has prepared a submission to the inquiry. It is available at www.caroline.org.au.

"Victoria can and should be the best place in the world to have and raise your baby..." "Caroline Chisholm Society believes that:

- the inquiry must be clear about the definition of perinatal services to effectively reform it in response to tragedies in the community and this requires mapping of health and social services as well as analysis of data,
- however you define perinatal services, there is a clear need for better linkages between health and community services in part in order to address the social determinants of health,
- of all the social services (including housing) needed during the perinatal period the one in most dire need of investment and coordination is perinatal mental health, and
- the disparity between rural and regional areas compared with metropolitan Melbourne needs redress.

Victoria needs a perinatal service system that retains its distinctive cross-sectoral nature but is better coordinated."



## Our Organisation

## Tradition

## Caroline Chisholm (1808–1871)

Our inspiration to love women and their babies comes from Caroline Chisholm. Mrs Chisholm lived an admirable life responding to the needs of youth with patience and energy. With the support of her husband Archibald and her children, she assisted people in need, irrespective of their country or creed, by social reforms and charitable work. She re-united families, protected vulnerable girls, placed the unemployed in gainful work and achieved improvements for immigrants of little means.

### The Society

The Caroline Chisholm Society was established in 1969 to offer material aid and pregnancy counselling services. It exists so that women can be supported to continue their pregnancy. Within a decade, the Society responded to the needs of the community and providing home and family support. Today, the Society is a professional agency of social and community workers, service support staff and volunteers, who offer pregnancy counselling and support, material aid and family support. The Society provides services that respond to the needs of families and supports them to achieve and maintain a safe and nurturing environment. Caroline Chisholm Society is a non-denominational and non-political charity.

## Strategy

Inspired by Caroline Chisholm, we support pregnancy, children and families. We were established in 1969 so that women can be supported to continue their pregnancies. The organisation has grown into a professional agency of social and community services for expectant and new mothers.

Our strategy is to grow into three sustainable locally embedded sites in Moonee Ponds, Caroline Springs and Goulburn Valley by 2025. Our plan is for staff and volunteers to focus on effective services, strong finances and sound governance. Our plan outlines tasks that will ensure we have progressed towards our goal of being 'bigger but not too big' by 2020.

The organisation is clearly focussed on supporting women with their pregnancy and early parenting to create a safe and nurturing environment for children. In doing so, we aim to prevent and alleviate the impacts of poverty, homelessness, family violence and issues with mental health.

### **Effective Services**

By 2020, the families supported by the Caroline Chisholm Society will be more able to keep children safe and healthy. Parents, families and communities will increase in confidence as a result of our support. We will do this by providing quality family and pregnancy support, with authoritative leadership in social and community work locally and by influencing policy nationally. We will also do this by locating our services closer to our clients. We will know we are on track if we are a free of charge, reliable and well-known service provider in Victoria, we are a quality service provider in the Goulburn Valley, and evidence-based evaluation illustrates our success.

## Strong Finances and Administration

By 2020, the finances of the Caroline Chisholm Society will include regular funding from diverse sources and its administration will assure seamless client experiences. We will continue to ensure that the Society is in a financial and administrative position able to support its services. We will do this by fostering our relationship with government, corporate sponsors and philanthropists, and by growing our private fundraising income. We will also do this by ensuring our documents and policies are consistent and simple to access. We will know if we are on track if we have secure ongoing financial support from government, members and the community. We will also know if we are on track if our documents are easily navigated and accessible from any internet-connected computer.

## Sound Governance and Management

By 2020, the Caroline Chisholm Society will be a model Community Service Organisation. We will do this by regularly updating and implementing policies and procedures that are informed by best practice. We will know we are on track if membership, staffing and volunteering is strong and engaged, our community knows what we do, our regulators are satisfied and our clients are engaged in our decision-making.

## Our Organisation

## Engagement

### We seek to be engaged...

as locals in the communities in which we operate	as leaders in the Social and Community Services Sector	as experts in the national policy context for the concerns of our clients
<ol> <li>Moonee Valley, where we've served as part of the neighbourhood since the early 1970s.</li> <li>Caroline Springs, where we opened in 2010, close to growth in families and part of the outer west and local rural community we've been serving since the 1980s.</li> </ol>	<ol> <li>State-wide</li> <li>In the municipalities in which we are locals and can identify the pocket of disadvantage and in our neighbouring areas of greatest growth:         <ul> <li>Moonee Valley</li> <li>Melton</li> <li>Shepparton</li> </ul> </li> </ol>	<ol> <li>Pregnancy</li> <li>Early Parenting</li> <li>Early Childhood Education and Care</li> <li>We are also interested in alleviating the key areas of risk for our clients:</li> <li>Poverty</li> <li>Social Isolation</li> </ol>
<ol> <li>Goulburn Valley, where our pregnancy support, listening ears and sound advice has been available since the early 1970s.</li> </ol>	<ul><li>Brimbank, and</li><li>Wyndham</li></ul>	<ol> <li>Homelessness</li> <li>Mental Health</li> <li>Family Violence</li> </ol>

## Services

The Caroline Chisholm Society supports families from the moment they learn of their pregnancy until their youngest child goes to school. To meet our clients' needs, funding and donations of goods are received from government, philanthropic organisations and families. Our Service offers a range of services delivered through three key program areas:

## Pregnancy Counselling and Welfare Appointments Program

General counselling and support for families in person or over the telephone, pregnancy counselling referral to maternity services, and referral to other services where needed.

This program offers one-off support and support to access ongoing services. The purpose of this program is to meet immediate needs with counselling or new and pre-loved goods and to empower clients to engage with services that help avoid them needing to return. We measure the success of this program by looking at the number of referrals of clients to support services.

## Family Support Program

Assessment, planning and action as part of Child FIRST for families and children at risk of entering or reentering the child protection system, support services for families including case management and in home support, housing support as part of the Transitional Housing Model including advocacy, and social support including volunteer mentoring, volunteer maintenance and staff supported peer groups. This program offers ongoing support to help address underlying issues related to pregnancy, early parenting, early childhood education and care, poverty, homelessness, mental health and family violence. We measure the success of this program by looking at results of Outcome Stars.

## New and Pre-loved Goods Program

We supply new and pre-loved baby and maternity goods and services, and other emergency relief such as food and vouchers.

This program offers an immediate resolution to issues of access to goods, particularly in situations of stress or poverty. We measure this program by the value of the goods we offer, usually in reference to our expenditure.

## Structures

### Governance



## Our Organisation

## Organisational



# Quality Information

## for Pregnant and New Mothers

This year, we are excited to have produced a suite of information brochures that support our discussions with families. They cover foetal and infant development, infant and child development, contraception options, and pregnancy counselling. These documents are designed to provide a simple resource that can be supplemented with high quality online resources such as the Raising Children's Network and the Better Health Channel.

## Where we recommend you go for information

### **Raising Children's Network**

The Raising Children's Network is a comprehensive and practical Australian parenting website.

It offers reliable and evidence based child health and parenting information and activities to support parents in raising children aged 0–15 years.

www.raisingchildren.net.au

### **Better Health Channel**

The Better Health Channel is one of the most popular health and medical websites in Australia. Produced by the Victorian Government, it offers health and medical information that is easy to understand.

www.betterhealth.vic.gov.au

### Maternal and Child Health 24-Hour Helpline

The Maternal and Child Health (MCH) Line is a statewide telephone service available every day of the year for Victorian families with children from birth to school age.

Maternal and child health nurses can provide information, support and guidance regarding a range of issues including child health, nutrition, breastfeeding, maternal and family health and parenting.

Call: 13 22 29 - 24 hours a day, 7 days a week

www.education.vic.gov.au/childhood/parents/support/Pages/mchline.aspx

### Life Line

Lifeline offers all Australians experiencing a personal crisis with access to 24 hour crisis support and suicide prevention services.

People call Lifeline's 24 hour crisis line about: Suicidal thoughts or attempts, Personal crisis, Anxiety, Depression, Loneliness, Abuse and trauma, Stresses from work, family or society, and Self-help information for friends and family.

Call: 13 11 14 - 24 hours a day, 7 days a week

www.lifeline.org.au

# The information we produce

The Caroline Chisholm Society produces a limited number of brochures to support us in guiding you through your pregnancy and the early years of your child's life.

### Child Development: Your baby's journey from your womb to your world – Conception to Childbirth

'Your baby's journey from your womb to your world – Conception to Childbirth' is a brief description of the development of a child during this period.

### Child Development: Your baby's journey to kinder – From birth to 4 years old

'Child Development: Your baby's journey to kinder – From birth to 4 years old' is a brief description of the development of a child during this period.

### Pregnancy Support Counselling

'Pregnancy Counselling' is a brief description of the Caroline Chisholm Society model of counselling.

### **Contraception Choices**

'Contraception Choices' is a brief description of what options are available and how they work.



## Our Programs

The programs offered by the Caroline Chisholm Society are categorised into three key program areas:

- Pregnancy Counselling and Welfare Appointments Program that incorporates services offered at appointments in Moonee Ponds and Shepparton at which counselling is offered and new and pre-loved goods are given.
- Family Support Program that incorporates our integrated family service, specialist homelessness service, parenting and play groups service, volunteer mentoring service and maintenance service.
- New and Pre-loved Goods Program, which incorporates new and preloved baby and maternity goods and services, and other emergency relief such as food and vouchers.

Our programs continue to operate in Moonee Ponds, Caroline Springs and Shepparton, resulting in a focus on Western Melbourne and the Goulburn Valley. We continue to offer a free call telephone service from around the state.

### Pregnancy Counselling and Welfare Appointments

The Caroline Chisholm Society Pregnancy Counselling and Welfare appointments program operates from all Caroline Chisholm Society offices. Counselling is available from Moonee Valley and Caroline Springs, in person or over the phone on request. The Moonee Valley office offers appointments two days a week, Tuesday and Wednesday during business hours and clients can drop in on three half days per week at Goulburn Valley.

Appointments are made for families to see a caseworker who provides new and pre loved goods, food vouchers, and food. The program also provides supportive counselling and provides referrals to appropriate services as required.

The Pregnancy and Counselling support program conducts a range of activities and outputs to measure outcomes for families such



Karen Grieve with food donated for families.

as assessments and reviews, this includes:

- supportive counselling sessions in person or over the phone
- referrals to other services such as psychological services, maternity services,
- counselling sessions offered each fortnight of between one to two sessions.

We believe we have supported families well if their lives have improved in two main areas:

- Social mothers have a better level of social contact and
- Pregnancy related health and wellbeing
  - mothers are better informed and empowered to act,
  - mothers are better able to manage their emotional and mental health throughout the term of their pregnancy,
  - mothers engage in psychological treatment that they would not have accessed otherwise.

Shortly before the end of last year, we changed our approach in Melbourne to be more consistent with our knowledge from Shepparton and learning from combining the role of offering these appointments with homelessness. This meant that the volunteer coordinator offered the appointments. We have since also had that role coordinate the new and pre-loved goods programs. This has been very successful in allowing volunteering to be more responsive to the needs of clients and helped achieved consistency in Shepparton and Melbourne. We look forward to further implementing this approach

in 2017 with the appointment of new lead practitioner known as the "Volunteering and Welfare Appointments Coordinator".

In 2016–2017, Caroline Chisholm Society had over 1000 short contacts at the Melbourne and Goulburn Valley offices. For Goulburn Valley, some 580 clients visited, many more than last year. Our Melbourne office was stretched as we moved the service to Caroline Springs during the year. However, our service has bounced back and there is a particular focus on our work in appointments since opening in Essendon at page 2–3. We know the families are in need, so we do our best to meet their needs through this program.

Pregnancy and parenting is the most relevant issue for our clients in this program. Once their children are born, they are supported through home visiting programs as opposed to this appointment-based program. By far the greatest issue faced by clients presenting to our offices was poverty, followed by issues related to migration and/or being a refugee. These were closely followed by housing stability and family violence. There are several factors we believe are causing this. First, the nature of our service being emergency relief and provision of goods, but we believe the greater proportion of financial issues we have seen this year is due to the number of migrants or refugees living in the community without support payments. This varies from our ongoing clients whose primary issues after parenting are mental health, housing and family violence. The client data is presented on pages 28–38.

### **Family Support**

During 2016–2017, Caroline Chisholm Society continued to provide support to vulnerable families and children residing in Western Melbourne encompassing the LGA's of Moonee Valley, Wyndham, Hobson's Bay, Maribyrnong, Melbourne, Brimbank and Melton. The Caroline Chisholm Society provides support for families with young children six years and under. We seek to empower women and families; our philosophy assumes that parents have an existing set of skills and assist them to further develop their parenting capacity. They are in the position to provide a safe and nurturing environment for their children and can be better equipped to meet the developmental needs of their children.

The Integrated Family Services and Specialist Homelessness Service programs conduct a range of activities and outputs which we use to measure outcomes for families. Our activities include, home visits, assessment, planning, and review of goals and action plans, referrals to appropriate services, client advocacy, supportive counselling, parent education groups and volunteer support via the mentoring and maintenance programs.

#### **Integrated Family Service**

Casework is usually undertaken in the home and is focused in assisting parents to develop their parenting skills. Using the Outcome Star tool, we aim to strengthen the capacity of families to effectively parent their children. By reviewing progress along the Outcome Star domains and assessing their journey towards change, the client can receive immediate feedback on how they and the worker think they are travelling. Caroline Chisholm Society staff members work collaboratively with parents using the Family Star Plus to measure progress towards change along the following domains: physical health, parent well being, meeting the children's emotional needs, keeping children safe, social networks, education and learning, boundaries and behaviour, family routines, home and money and progress to work. We have supported families well if their lives have improved in three main areas:

- Housing and home life Parents are better able to secure a safe environment for themselves and their children, parents are better able to maintain a positive family routine and better able to set appropriate boundaries for their children.
- Social Parents have a better level of social contact for themselves and their children.
- 3) Health and Wellbeing Parents are better informed and empowered to act, parents are better able to manage their own emotional and mental health, parents are better able to respond to their children's emotional needs, parents are better able to provide a healthy lifestyle for their children.

Embedded in our practice is a way to avoid working with complex child protection cases. We call it 'early intervention' by aiming to receive referrals for parenting support from universal services. Through the project Engaging Wyndham Families, we have built relationships and are working innovatively (see page 23).

## Our Programs

In 2016–2017 the Integrated Family Service program provided over 12,000 hours of casework support to over 200 clients across our catchments. Of these, 41% were born in a country other than Australia, 18% of whom were born in Asia, 9% from Africa and 3% the Middle East. Our data for 2016–2017 indicates that the Family Support program supports families experiencing a broad range of issues with particular needs for support with pregnancy and parenting, mental health, family violence, social and physical isolation, poverty, and household and housing issues. All of these influence the capacity of parents to provide for the needs of their children. The client data is presented on pages 28–38.

#### **Specialist Homelessness Service**

The Society's Specialist Homelessness Service provides short to medium term housing for vulnerable pregnant women, and families with young children. The Society operates four transitional properties in the Moonee Valley area. Intensive support is offered to families in these residences for an initial period of 12 weeks. If the family requires ongoing support in relation to issues other than housing, the homelessness worker is encouraged to refer the family to Integrated Family Services for parenting support and linkages to other services as necessary. The homelessness worker continues to support the family until they are transitioned into an ongoing residence.

Increasingly families come into the program with a range of complex needs and difficult personal situations. This causes a delay in being able to address the housing needs as the worker endeavours to address more urgent issues and problems that the family is facing, such as financial difficulties, violence, legal and medical issues and substance abuse. These issues associated with long-term homelessness further complicate a family's ability to find stable long-term accommodation.

To create the best possible environment in which families can work on the issues that led to their homelessness, workers adopt a holistic approach, building on the individual strengths of the family members. At Caroline Chisholm Society, we believe it is essential that families who have faced multiple challenges and have been homeless receive a timely response, with a high level of support to increase their chances of succeeding and breaking the cycle of homelessness.

Last year, we built on our learning from a previous iteration and combined the role with Integrated Family Services, which allows the case manager to be working with ongoing clients across the week giving the homelessness program flexibility to deal with the unexpected needs of this particularly vulnerable cohort.

During 2016–2017 the specialist homelessness service provided 21 episodes of support. These families are usually also engaged with Caroline Chisholm Society through other programs to help them with their parenting needs. After homelessness, the top issues these clients presented with were, 1) relationship breakdown 2) unemployment 3) family violence and 4) health. The client data is presented on pages 28–38.

#### **Groups Service**

Caroline Chisholm Society focusses on group work as it helps to reduce social isolation for families after the significant transition to parenting. We are delighted that all of our offices have onsite facilities for group work with families. This is possible because we have the new site in Essendon complete, we have permission from Melton Council to use of the former Wirrigirri Preschool in Caroline Springs, and we remain co-located with Radcom in Shepparton at St Andrews Road. Indeed, the space in Shepparton is so suitable for groups that Save the Children are running a kindergarten from it at present.

Caroline Chisholm Society is proud to have piloted the Mothers in Mind® (MIM) program with the support provided by the City of Melton, The University of Melbourne and the Western Integrated Family Violence Partnership (WIFVP). A case study of the program can be found on page 26. We are pleased to be able to report that we have now been funded for a program that builds on our learnings called Children and Mothers in Mind, about which details can be found on page 27.

#### **Mentoring Service**

Our volunteer mentoring service helps women and their children through friendship, support and skills. Engagement of a volunteer mentor is identified and targeted as part of the clients case plan. We then have them matched with a suitable mentor. We usually have 5 to 10 mentors working with our families at any one time. Some take on more than one client to mentor, so we often have 8 to 12 clients engaged with a mentor.

We find many of our clients are located in the growth areas, whereas most of our volunteers are from the inner and central western suburbs. In that context, we plan to focus our recruitment in the growth areas

### How the Specialist Homelessness Service works

The Specialist Homelessness Service works with children and parents that have escaped family violence, come from CALD backgrounds, live in overcrowded situations, or are parents under 25yrs who require assistance to move in to independent living arrangements. Parents and children can present to our service with no more than a little back pack and nowhere to reside and leave our service with a long-term place to reside and have more belongings than a small back pack. The service also offer secondary consultations to support workers within the Caroline Chisholm Society to help guide them in preventing homeless. The homelessness case management part of the role has supported families to prevent or address long term homelessness for children and parents.

We have built resources within Caroline Chisholm Society by attending the Local Area Service Network meetings, where local homelessness service providers

in coming years. Some examples of the work in recent years includes preparing healthy meals and snacks, meal planning and shopping, assisting a mother who has a newborn and a toddler to do the shopping, introducing new foods to a baby who is being weaned, unpacking a house following a move, modelling play, assisting a mother to find child activity centres and supporting a lady to improve her literacy skills. Learning to read is wonderful. This allowed a client to get their learner driver permit. We also did some helping prepare healthy meals with unfamiliar

and housing providers gather to share ideas, offer support for each other and provide governance for the service system. One valuable resource to mention is the "Through a child's eye" resource which helps parents deal with the trauma that children face when they are at risk of homelessness or are homelessness.

## Case studies of what has been achieved:

**4 families** are in long term public housing after we supported families through transitional accommodation. That's **4** adults and **7** children with secure housing.

2 families have successfully entered into the private rental market through our case management and the support of our networks at SASHS, Vincent care and WIRE. That's 2 adults and 5 children in better accommodation.

**1 family** was advocated for to DHHS Office housing to prevent the breakdown of a lease which secured **1** family and **1** grandmother

vegetables and, like the example below, helping a client get by while living with post-natal depression.

#### **Maintenance Service**

Known as 'Handy Home Helpers' our volunteer maintenance program helps to maintain the homes of pregnant women and their children, increase self-esteem and house pride in parents, and increase healthy male volunteer engagement with families in order to benefit at-risk women and their children. Tasks are intended to be responsive to the expectations of landlords to reduce the risk of eviction and related to safety in the home. The service is also intended to support male volunteers in the traditionally female orientated service provide role models to children. Some examples of the work in recent years includes mowing lawns, brushcutting yards, repairing damage to plaster walls, assembling bunk beds, replacing and repairing doors, assembling a flat pack wardrobe, fitting safety gates, installing smoke detectors and repairing furniture.



continued connection to their community. That's **2** adults and **3** children who lived through the risk of homelessness.

**1 family**, with **1** adult and **3** children was supported to access social housing with the private rental program at Melbourne City Mission. This was achieved through good liaison and networking by the Caroline Chisholm Society worker.

## Our Programs

### **Special Projects**

The Society undertook many special projects this year.

Service Delivery: We have worked on Mothers in Mind<sup>®</sup> and are preparing to work on the newly funded Children and Mothers in Mind (see page 26). We have brought the Vulnerability Framework Toolkit from BestStart in Shepparton to Melton (see page 36). Two senior practitioners worked on the Kindergarten Participation Pilot (see page 25). More special projects are anticipated as we continue to prepare for reform (see page 23).

Research engagement: In working on our practice, we have been active members of the Sector Research Partnership. The strengths of the partnership were acknowledged by the Victorian Government and "OPEN" is a new entity, which builds on the existing Sector Research Partnership (SRP). The SRP is co-chaired by the Centre and the University of Melbourne, connecting researchers with workers to strengthen the evidence base for policies and practice in Victorian child and family services.

Workforce survey: Our desire to be leaders in the sector has allowed us to participate in many activities, including a Family Services Workforce Survey. The Survey indicated that our workforce is highly qualified and very capable at responding to risks presented for children. We're less confident when it comes to appearance at court. As a result, we have increased our budget for training and clinical consultancy to ensure we can help the team support families through these challenges. Hub facilities: This year, we've also shared our office in Caroline Springs with the Family Wellbeing Service run by CatholicCare Melbourne, MacKillop Family Services and the Victorian Cooperative on Children's Services for Ethnic Groups (VICSEG). The program is an early intervention program that aims to enhance the resilience, mental health and wellbeing of children and young people. This program supports parents to develop skills and confidence to enable young people to reach their potential.

### New and Pre-loved Goods

Our New and Pre-loved Goods program offers a particular focus on goods that are helpful for families during and after pregnancy. We offer many baby and maternity goods to our clients to help alleviate the immediate impacts of poverty. We do so with a view that clients accessing the goods should be empowered to access other services that can help them to prevent the need to return for more goods. The program is also a critical support to our other two programs: pregnancy counselling and welfare appointments and family support including homelessness. In addition, with thanks to the Moonee Valley City Council, we also offered this program to partner agencies. We have now incorporated the distribution of goods to workers into our new program structure and the Council will be funding us to realise our vision of a warm and welcoming environment for families in Essendon, including the distribution of goods. We receive donations of nursery equipment and recycle prams, bassinets, clothes and other baby

essentials, and make sure they meet safety requirements. We sometimes get the goods from colleagues who also help mums, like The Nappy Collective and St Kilda Mums. We then re-home these items to families

### Buying vouchers!

During the 2016–2017 financial year we provided \$2,780 to 68 adults and 89 children in grocery vouchers.

### The majority of these clients needed financial assistance due to financial hardship

in need. In that context, our objectives in the program are diverse. With regard to our social objective, we aim that clients have a better level of social contact. For example, access to a pram allows a mother to leave her home with her baby. The health and wellbeing objective is that parents are better able to sustain a secure living environment, including providing for their children's food and material needs. We do that by ensuring that the goods are provided through a social and community sector worker. There are also environmental benefits from our work. Environmental wastage from new and used goods is reduced. The program is only able to run due to the generosity of our volunteers who administer the program and our donors who provide the goods we pass on.

## Child and Family Services Reform: Prevention, Partnership, and Evidence

Following the Royal Commission into Institutional Responses to Child Sex Abuse (Commonwealth), the Royal Commission into Family Violence (Victoria), and the governments responses to these, increasingly Child and Family Services need to respond to reform. This year, in the context of proposed support and safety hubs for families, there is Family Services Redesign underway. We are increasingly expected to measure outcomes. And the policy makers are talking much more about evidencebased and evidence informed practice.

The environment we work in is, of course, wider than the child and family services sector. In particular, the changes to the homelessness and housing sector affect our work in helping expectant and new mothers, children and families with ensuring they have a roof over their head. Early Childhood Education and Care is being reshaped by the Victorian Governments "Education State" statement. The changes in the health sector are designed to respond to the social determinants of health. We note the new Western Women's and Children's Hospital that is being built and the Victorian Parliamentary Inquiry into Perinatal Services.

And wider again is the funding context largely driven by the Commonwealth. The Commonwealth are the funders of child care, support payments (including for asylum seekers, refugees and migrants who are a large proportion of our clients), and homelessness support. There is also change afoot in each of these policy areas. The fact that our environment is changing so much suggests a great need to hold to our tradition, respond to the families as they present and not be distracted by the change that our CEO sometimes calls 'the policy and strategy noise'. Our role in such an environment is to deliver services, deliver them well and ensure that we are responding in practical ways to the changes.

We are aiming to be 'reform ready' by working in the full spectrum of complexity – from Early Intervention through to reunification. We're working on Prevention, Partnership, and Evidence.

Our Engaging Wyndham Families Project demonstrates prevention. Our Partnership with ECMS demonstrates our capacity and willingness to respond to the wider issues faced by the children we work with. And our commitment to evidence is demonstrated by our use of the 'outcome star' tool, delivery of 'Mothers in Mind®', and our willingness to work on 'Children and Mothers in Mind'.

### Prevention – Engaging Wyndham Families

Caroline Chisholm Society has a special role in the City of Wyndham working with Early Years services such as Maternal and Child Health nurses, Kindergartens, and Hospital Social Workers to better engage with families as early as possible – to prevent families getting into crisis and entering into Child Protection system.

We are doing this in a co-ordinated way with other agencies focussing on the growth area of Wyndham Vale. IPC Health and Catholic Care are working with primary schools, VACCA with Aboriginal and Torres Strait Islander families and Anglicare to help with the central intake system. We're calling the project 'Engaging Wyndham Families' and are aiming to

- support in a more timely and efficient manner – manage demand,
- 2) offer outreach services for families directly,
- undertake secondary consultations with those working with families – MCH nurses, teachers and others,
- build partnerships with Wyndham Council and other services in the area
- 5) run parenting and play groups or community education sessions and
- 6) offer information and resources.

The project was a result of the 2015 Budget, in which the Victorian Government announced \$283 million in funding over four years for programs and services targeting Victorian families, children and young people. The funding supports early intervention services for vulnerable families. This was, in part, a response to recommendations from the Victorian Auditor General Office (VAGO) which led to a review of Department of Health and Human Services (DHHS) funded programs for vulnerable families. DHHS provided the extra funding state-wide to Child First and Integrated Family Services Alliances to trial different ways to meet families' needs in Victoria's fastest growing areas, especially where population growth was faster than growth in infrastructure (buildings, roads, transport etc.) and community services. We plan to measure outcomes of the interventions so that we know if and how the project makes a difference.

### Staff Reflection and Case Study from Engaging Wyndham Families

Engaging Wyndham Families is a Western Melbourne Child and Family Services Alliance program that provides Early Intervention support for vulnerable families residing in the City of Wyndham. The project is the outcome of initiative from Department of Health and Human Services in partnership with the five agencies within the Western Melbourne Alliance.

I am the key engagement worker for Caroline Chisholm Society. We provide support to pregnant women as well as expectant parents and families with pre-school age children (0–5) experiencing vulnerability and complex issues in liaison with hospitals, Maternal and Child Health services, Early Years and Parenting Services. The key worker focuses mainly with families within Wyndham Vale providing early intervention work via short-term support, case management and group work.

One of the families I had the pleasure of working with was a family from Africa. The family consisted of a sole parent with three children aged; 8, 5 and 3 years old. The family was on a waiting list with the Early Childhood Intervention Services for the youngest child who had significant developmental delays, very limited speech, limited self-care skills, aversion to food and other health issue such decayed teeth, anaemia, and low weight gain. The 3-year-old child was also on waiting lists to be seen by medical professionals. The property the family resided in was not appropriate and did not provide a secure space to meet the young child's needs. The family was on a waiting list to be transferred to a more appropriate property.

Through the Engaging Wyndham Family program, I was able to support the family to secure a more suitable home, and Caroline Chisholm Society provided funding for the family to relocate.

I was also able to support the family while the child was assessed by a Royal Children's Hospital Paediatric Fellow thereby having the 3-yearold child diagnosed, the diagnosis assisted to provide direction to the mother and the whole family. With an appropriate diagnosis, we were able to to link in with Centrelink to ensure the mother applied for and received Carer Payments for her child. I engaged with and worked closely with other services such as The Royal Children's Hospital, dental health and Sunshine Hospital to make certain the child was seen by Speech Therapist and Autism Clinic. Supporting the mother in these appointments was an essential part of my role.

Though all this service and support was focused on the youngest child in the family, it gave the mother direction, relief and more time to allow her to focus on her two older children. It also helped the older children with understanding their younger siblings' health and wellbeing needs and enabled the older children to view their younger sibling in a more empathetic light, knowing now that there is reason for her behaviours rather than simply viewing her as being challenging and disruptive to them.

Coming from a Culturally and Linguistically Diverse culture, this child had previously been seen as challenging and unwelcome in their social setting. The new health and wellbeing information showed the child in a different light and allowed the family to be supported from within their extended family and community.

As Engaging Wyndham Families is a short-term program, in consultation it was assessed that the family would benefit from involvement with an Integrated Family Services Program who could holistically support the entire family, including the older children. With this in mind the family was linked in with Family Services. I continued to support the family until the family had been allocated a new worker, to ensure they had a smooth transition from service to service.

## Partnership for Kindergarten Participation – ECMS

Thanks to an outreach family support pilot program led by ECMS and funded by the Victorian Government through the Department of Education and Training, Caroline Chisholm Society seconded two senior staff into early childhood services to support inclusion in early start kindergarten and to support the effective use of pre-purchased kindergarten places funded by the Victorian Government.



The intention and purpose of the pilot was to:

- 1. Assist kindergarten services within the catchment area to fill pre-purchased places and sustain attendance.
- 2. Support kindergarten services and key referral agencies to engage families experiencing vulnerability and disadvantage to enrol children who will be eligible for three and four-year-old kindergarten for 2017 and beyond.
- 3. Support families who are experiencing vulnerability and disadvantage to access pre-purchased places.

Priority cohorts include:

- 4. Aboriginal and Torres Strait Islander children
- 5. children known to Child Protection, including those in out-of-home-care
- 6. children eligible for Early Start Kindergarten and extension grant
- 7. children eligible for Kindergarten Fee Subsidy.

Additionally, participation support focused on supporting services to engage families to increase access to three and four-year-old kindergarten programs in 2017.

Caroline Chisholm Society worked collaboratively to ensure that the staff doing such a role were:

- 1. experienced enough to support highly qualified teachers with secondary consultations,
- knowledgeable to help with effective linkage to secondary (integrated, innovative and intensive family services) and tertiary (Family Violence, Out of Home Care, Child Protection) community service systems, and
- 3. knowledgeable about parenting, family violence and financial counselling.

The results of the project are clear: ECMS was able to support 98 children to access early learning services in 2017. These are children who more than likely would have otherwise missed out due to structural and financial barriers.



## to Children and Mothers in Mind

## Mothers in Mind®

In the last twelve months Caroline Chisholm Society has successfully delivered two ten-week 'Mothers in Mind®' (MiM) groups, with a total of nine mothers and their children participating in this unique program. The focus of the program is to intervene early in the lives of young children (0 to 4 years) and their mothers, who have experienced trauma, in order to strengthen parentchild relationships, enhance parenting skills and reduce parenting stress. We were very excited to run our second group at Wirrigirri in Caroline Springs, which is kindly leased to us by Melton City Council. This was a perfect, child friendly, space to run the group as it was former kindergarten.

MiM was developed and successfully piloted in Toronto, Canada in 2005. Following its success, program training was then provided in Victoria to various agencies in 2015, from there Mothers in Mind® commenced. In the past twelve months Caroline Chisholm Society, in partnership with Children's Protection Society, have revised and adapted components of the program so that its suitable for an Australian audience. The program has session topics that support mothers in exploring how issues of trauma, along with notions of self-care and self-compassion, stress, feelings, safety and their child's developmental stage and temperament, can impact their parenting. Designed as a group intervention, MiM supports mothers in connecting with other mothers who have had similar experiences, reducing feelings of guilt and shame, while increasing feelings of connectedness and comfort. Mothers have the opportunity to discuss the ways in which trauma may have impacted their parenting with the safety of knowing that others in the group are likely to relate to their experiences.

While MiM is a group for mothers who have experienced trauma; at the same time, it's also a motherchild play group. The mother and child participate through singing, reading and playing with facilitators encouraging interactions between mothers and their child. Facilitators help to create feelings of comfort and safety in the group, from a welcoming first contact with a mother and child, through to an assessment phase and then into group sessions. Importantly, there is a therapeutic relationship that is nurtured between a facilitator and the mother and child.

# Children and Mothers in Mind

In the year to come Caroline Chisholm Society will be a part of an Australian first program called, Children and Mothers in Mind (CMiM). This new program incorporates the current ten week 'Mothers in Mind®' program along with an innovative extension that will provide intensive support for mothers who have experienced family violence. The program includes 1) comprehensive assessment, 2) group work on responding to trauma, rebuilding their relationship (attachment) and sustaining the learnings, and 3) mother-child individualised counselling. This is underpinned by a case-work approach. This new program will be available at five trial sites across Victoria. Caroline Chisholm Society is proud to be working with VincentCare (Marian Community) and McAuley Community Services for Women. A consortium of agencies are very excited about what's to come!











Mothers in Mind



This project is funded by Victoria State Government

#### **Case Study**

#### **Initial Presentation**

Two mothers, (names changed for privacy) were both referred to 'Mothers in Mind®' by their case managers. Both mothers were apprehensive about attending the group, but hopeful that the group would help them in some way. Maria was a young mother with a 4 month old baby, Sarah was also a young mother and had a 3 year old child. Maria was isolated with no family support and was recently diagnosed with Postnatal Depression. Sarah was isolated with little family support and was also caring for her Mother who was unwell. Sarah presented with little confidence in herself and her parenting ability. Maria presented withdrawn and stressed and spoke of perpetual thoughts of being judged as a young mother.

#### **During MiM Sessions**

Both mothers disclosed previous family violence and childhood trauma. Maria engaged well with other mothers and group facilitators and became more confident to speak when she realised that most mothers had shared experiences. Sarah was observed to have an immediate connection to Maria and her young baby. Both mothers appeared to have good attachment with their children. As weeks went by both mothers appeared to have made a strong connection with one other. Both mothers became more confident in the group and would often contribute to group conversations. Both mothers indicated that they wanted a different life for their children than what they had.

#### Outcomes

There were many positive outcomes for both young mothers. An important outcome was the friendship that was developed, especially when isolation was a key component. Following the group both mothers decided to remain in contact and catch up for coffee on the same day that the group would normally run. Both mothers said they felt relief in knowing that they weren't alone in their thoughts, Maria said, 'I remember other mothers talking about their struggles and feeling like... I'm obviously not the only one that feels this way'. Sarah said, 'speaking with other Mums actually made me feel normal'.

## Our Clients

In a normal year, depending on funding available, Caroline Chisholm Society helps about 1,000 to 2,000 clients. Between 1 July 2016 to 30 June 2017, Caroline Chisholm Society helped over 1,200 clients. The majority of the clients (580) were seen at our Goulburn Valley office. Nearly 430 were contacts made in our Moonee Valley operations. These clients access our one off appointments for pregnancy counselling and support or for new and pre-loved goods.

185 clients were supported for the longer term. These are clients in our family services or homelessness programs. We work with these families for 6 months to two years to help them set goals for themselves and achieve those goals. This number is down from 226 last financial year, a change that is attributable to several factors, including Services Connect data reported through MacKillop Family Services not Caroline Chisholm Society, and increased complexity of clients with whom we spend more time so we can help fewer.

• Figure 1 (State-wide Location Data 1 July 2016 to 30 June 2017) shows that the Caroline Chisholm Society is focussed on the Western Suburbs of Melbourne, with a high client load from the Cities of Brimbank, Shepparton, Wyndham and Melton. We also have large numbers of clients in Moonee Valley, Hume, Moreland and Hobsons Bay.

#### Non-Melbourne **GOULBURN** Benalla (2, 0) VALLEY Campaspe (6, 0) Loddon (1, 0) Mitchell (8, 0) Moira (24, 0) Moorabool (1, 0) NSW (3, 0) **Greater Shepparton** (525, 0) Greater Geelong (2, 1) Strathbogie (2, 0) Hume (71, 0) Banyule (7, 0) Moreland (40, 0) Darebin (7, 1) Whittlesea (14, 0) Manningham (2, 0) Yarra (8, 1) NORTH Hume Moreland WEST EAST Western Inner Eastern Melbourne Melbourne and **Brimbank Melton** SOUTH **Bayside** Peninsula Moonee Valley (62, 15) and Southern Melbourne Brimbank (90, 44) Melbourne (1, 0) Melton (53, 44) Casey (1, 0) Maribyrnong (16, 19) Bayside (1, 0) Wyndham (41, 64) Knox (1, 0) Hobsons Bay (11, 17) Stonnington (1, 0) Area not identified (9, 0) State-wide (1,007, 206) Interstate (3, 0) Total 1.216 Legend

#### Figure 1: State-wide data 1 July 2016 to 30 June 2017

For each local government area, two figures are provided: 1st figure: Short contacts – Appointments (less than 2 hrs contact)

2nd figure: Long contacts - Home visiting (Greater than 2 hrs contact)

Our clients respond well to the fact that Caroline Chisholm Society operates as locals in our communities – those in which we are located, Moonee Valley, Melton and Greater Shepparton, and those in which we offer services, Brimbank, Wyndham, Maribyrnong and Hobsons Bay. We include Hume here, given the large number of clients who access our Moonee Valley service from that municipality.

From experience, we know a lot about the issues faced by women during and after pregnancy, and indeed the needs of their children. To demonstrate some of their



Figure 2: Indicators related to during and after pregnancy





Sources: VCAMS Indicators and Population Growth Data as accessed Jul 2017

concerns, we offer here some of the indicators from the Victorian Child and Adolescent Monitoring System (VCAMS) as considered current in July 2017. We have also used in these charts data from the Australian Bureau of Statistics, Census of Population and Housing 2006 and 2011. Compiled and presented in profile.id by .id. This data set shows that our neighbourhoods face the following issues:

- Figure 2: In relation to our focus on pregnancy, Melton, Brimbank, Wyndham and Hume have large populations of young children anticipated. Shepparton has a very high teen pregnancy rate, while Melton, Wyndham and Brimbank also have many young mums (as well as Hobsons Bay and Hume).
- Figure 3: In relation to our focus on early parenting, with the exception of Moonee Valley and Maribyrnong who have developmentally vulnerable rates of approximately 7%, all our communities (Hume, Brimbank, Wyndham, Melton, Shepparton and Hobsons Bay) have rates above the state average with identified rates of vulnerability due to developmental issues.

## Our Clients



### Figure 4: Indicators relating to early childhood education and care

- Figure 4: In relation to our focus on early childhood education and care, the chart demonstrates the need for investment in kindergarten participation in all early childhood settings, especially in Shepparton and Maribyrnong.
- Figure 5: This table provides the data points used in the graphs.

Sources: VCAMS Indicators	and Population	Growth Data	as accessed Jul 2017
Jources. VCAIVIS Indicators	and ropulation	Giowin Data	as accessed Jul 2017

	During and after pregnancy		Early Parenting		Early Childhood Education and Care		
	Forecasted % of population aged 0–4 to 2036	Forecasted total population aged 0–4 to 2036	Rate of teen pregnancies	Rate of breastfeeding at 3 months	Rate of children developmentally vulnerable	Rate of kindergarten enrolments in child care	Rate of participation in kindergarten
Victoria		392,520	10.4%	51.8%	9.5%	28.9%	97.9%
Moonee Valley	6.3%	10,439	1.6%	57.4%	7.6%	36.5%	99.8%
Melton	7.9%	25,137	12.3%	37.6%	11.3%	25.9%	102.4%
Shepparton	7.0%	5,885	25.5%	46.4%	11.6%	40.2%	94.6%
Brimbank	6.5%	14,181	10.7%	45.3%	13.3%	30.2%	97.6%
Wyndham	8.5%	36,202	15.7%	42.0%	13.2%	29.8%	103.0%
Hobsons Bay	6.9%	7,835	9.7%	56.6%	10.0%	38.4%	100.1%
Hume	8.2%	27,491	9.9%	7.7%	14.3%	30.3%	102.6%
Maribyrnong	7.2%	10,442	4.7%	63.3%	7.7%	40.9%	87.5%

#### Figure 5: Source data for indicators that offer some policy context for the concerns of our clients

Sources: VCAMS Indicators and Population Growth Data as accessed Jul 2017



#### Figure 6: Types of issues reported by clients, by issue, 1 July 2016 to 30 June 2017

Figure 7: Country of Birth – Family Services Clients, 1 July 2016 to 30 June 2017



• Figure 6 (Types of issues reported by clients, by issue, 1 July 2016 to 30 June 2017) shows, consistent with 2015–16, that our clients' most prevalent issues (after pregnancy and parenting) are associated with poverty or financial crisis. Financial issues are particularly prevalent for those clients presenting at our appointments program, many of whom face challenges associated with being a migrant or refugee. The critical issues that clients we home visit face are related to mental health, homelessness, family violence and isolation.

 Figure 7 (Country of Birth – Family Services Clients, 1 July 2016 to 30 June 2017) shows that 41% of those clients we support through the Victorian Government funded family services stream were not born in Australia. Of them, 18% were from Asia, 9% from Africa, and from 3% the Middle East.

 Figure 8: This section shows our outcomes with a small sample size of clients. It shows that nearly 41% of our clients felt they had a 'big increase' in their capacity to parent during the time we worked with them.

## Our Clients

#### Figure 8: Outcome Star Results

### Outcome star – Basic annual report – service

What does this report show?

This report allows you to review change made for service users up to a specific year and this can be used to provide an annual outcomes report. It does this by comparing the most recent Star within the selected year for each service user and comparing it with an earlier Star which may not be within the selected year.

By default the first Star used in this report is the first ever for each service user. Use the 'first Star' filter below to change this setting and the system will automatically detect and use the lower of the or second Star where a service user has three or more completed Star readings, and the first, where the service user has no more than two Stars.

You can change other options below to include and exclude different service users. All default settings are as shown on the filters below.

As with all outcomes reports, only service users with at least two completed and submitted Stars are included in order that their progress can be calculated.

#### Average increase and decrease in scores for each scale (Table)

This table shows the average first and last scores for clients included in this report. The difference between these two is the 'change', or outcome, shown in the column on the right.

Scale	Initial	Final	Change
Physical health	6.9	8	1.1
Your well-being	5.8	6.6	0.8
Meeting emotional needs	7.6	7.9	0.2
Keeping your children safe	8.6	8.3	-0.3
Social networks	6.5	6.7	0.2
Education and learning	7.6	8.3	0.7
Boundaries and behaviour	6.9	7.4	0.5
Family routine	7.2	7.7	0.4
Home and money	6.1	7.1	0.9
Progress to work	8.3	8.5	0.1
Average	7.2	7.6	0.4

Number of users whose Stars are included in this report: 41. Produced on 22/07/2017.

#### Average increase and decrease in scores for each scale (Star)

#### Report shown: Average values displayed



#### Figure 8: Outcome Star Results (continued)

#### What does this Star show?

Produced on:	22/7/17
This star illustrates a report on Family Star Plus data for the Integrated Family Services service showing the average progress for each scale made by service users up to the time period:	2016–2017 (Apr–Mar)
Including clients who.	
The report has been refined to show the following client groups only: - support needs - ethnicity - age - gender Stars used to produce the report were completed jointly or by worker.	All All All All Yes
Retrospective stars were included.	Yes
The initial reading used is the lower of first or second ever.	Yes
The final reading used is the most recent in the time period.	

#### Percentage increase and decrease for each scale

This table shows the average proportion of the clients included in the report whose score for a scale has increased, decreased or stayed the same.

Scale	Decrease	No change	Increase
Physical health	10%	31%	59%
Your well-being	17%	29%	54%
Meeting emotional needs	24%	42%	34%
Keeping your children safe	22%	54%	24%
Social networks	22%	29%	49%
Education and learning	15%	41%	44%
Boundaries and behaviour	20%	31%	49%
Family routine	24%	39%	37%
Home and money	20%	17%	63%
Progress to work	17%	59%	24%

Number of users whose Stars are included in this report: 41. Produced on 22/07/2017.

#### Percentage increase and decrease for each scale

This table shows the proportion of the clients included in this report who are making progress, staying the same or slipping back based on their overall Star score, i.e. an average of their scores for each scale. A 'big' increase or decrease is defined as more than one point up or down across all scales. 'No change' means an average change per scale of between -0.25 and +0.25

	Big Decrease	Small Decrease	No change	Small Increase	Big Increase
	12%	7%	20%	20%	41%

Number of users whose Stars are included in this report: 41. Produced on 22/07/2017.

- Figure 9: This section shows that 91% of clients coming to our appointments at our Melbourne office responded with 'very good' or 'excellent' when asked 'Please rate the booking service'.
- Figure 10: This section shows that 93% of clients who responded to our request for feedback on our family services responded with 'yes' when asked 'Overall, were you satisfied with the service?'.

## Figure 9: How our clients rate our appointments service



# Figure 10: Were our clients satisfied with our home visiting family service



## Spotlight on Our Clients in Goulburn Valley

Best known for our community engagement and new and pre-loved goods, Goulburn Valley Pregnancy and Family Support Service is an innovative service (see Shepparton Collaboration for Pregnant and New Mothers) working a wide range of people (See Ethnicity).

# We estimate that at **580** appointments, we've given out over **2,300** items with a total value of **\$215,000**.

#### **Case Study – Meeting the Immediate Needs of Families**

Two months ago, we received a late call from a Midwife at Goulburn Valley Health. The nurse was keen to finish her shift, but wanted to confirm that we could help her with a new mother who had recently arrived in Shepparton to have her baby. The mother was required to spend an additional night in hospital because she and her husband did not have a car seat to take the baby home safely. Arrangements were made for the father to pick up a baby capsule from us and have it professionally fitted the following day.

When the dad presented the next day, he attended the appointment with his younger brother who was able to speak and write English well enough to convey what the family needed to support the new baby. During our discussion, it was revealed that the family were itinerant workers who had travelled from NSW to Shepparton for work at a local orchard. This baby was the couple's first child and aside from the father's brother, there was no other family support for the mother.

Amongst other things we gave the family a Baby Box, clothing, nappies, a baby bath, bed linen and a capsule for the car. We also provided them with a list of local support agencies and encouraged them to return to the office for future assistance. And, as the father was unaware of how to find the local fitting centre in Shepparton, we took him to a registered garage and paid for the car seat to be installed. (Which we managed to get at a reduced rate because the Proprietor was able to recognise the families' circumstances).

That *same* afternoon a Malaysian family came to the office for assistance. A Domiciliary nurse had called ahead to say that she had arrived at the couples' house to find that they had insufficient clothing and nursery items for the baby. "I was horrified to see that they have NOTHING for the baby" was what she said. Fortunately, this mother had her own mother visiting her from Malaysia, but her mother's funds were diminished due to the cost of flying out to Australia to be with her daughter. Both families were extremely grateful for the support they received and they have since visited our office for material aid and moral support. The babies are thriving and we always look forward to their next visit.

These case studies highlight the need for adequate peri-natal services that ensure that vulnerable families don't 'slip through the cracks' due to the nature of their work and inability to navigate the health and community services sector in Shepparton.

#### Ethnicity at Shepparton appointments, 1 July 2016 to 30 June 2017


## Shepparton Collaboration for Expectant and New Mothers

The "Shepparton Collaboration for Expectant and New Mothers" was a special project funded by the Helen Macpherson Smith Trust. The project was to select and implement one or two achievable co-ordination projects for expectant mothers or who have children under school age.

Goulburn Valley Pregnancy and Family Support Service – Caroline Chisholm Society – was funded to work with volunteers, families and colleague agencies in Shepparton, including Rumbalara, CatholicCare Sandhurst and Save the Children, to identify what its future focus was to be for support for mothers and their families, including children and their fathers.

**Mapping:** The project mapped services for mums at 20 agencies, offering over 60 services, and identified over 40 service gaps. Little duplication was identified, but lack of coordination was raised – not for a lack of will or facilitation, but rather lack of capacity to respond. Logical skills matches were found through three key networks: Best Start, Communities For Children, and Child And Family Services Alliance. Being 'grassroots', Caroline Chisholm Society was also able to connect through Lighthouse and others.

**Deciding:** Five mothers, 15 volunteers and 20 agencies decided together what Caroline Chisholm Society's role is in our community. With 4 named collaborators, 3 partners in decision making and 13 participating agencies, our agency listed 8 projects suited to offering in our community. One such project was "Mother's in Mind", which has since been funded as a demonstration project by the Victorian Government. **Implementing:** Collaboratively, the people of Shepparton decided that the project would be to give out Baby Boxes (a Finnish model of Bassinet). This is called, "The Baby Box Project". In providing the boxes, the community sought a safe, simple and supportive way to engage with local families.

The community loved its simplicity; it's a box that's recyclable and can become a toy box. The community loved its safety; it's a great way to encourage safe sleeping practices. The community loved its model of support; it's a way to engage with families to prevent social isolation, family violence, the impacts of homelessness and engagement with child protection.

The results of the project were:

- A Shepparton specific parenting survey, seeking to understand the knowledge and confidence of new mums. And if there was a question of confidence, to open up a discussion.
- 33% of respondents expressed a less confidence than knowledge.
- Q2 asked about 'Coping with having a baby'. Q1 asked about 'Looking after baby'. Q6 asked about 'Knowing where to go in the community'. Questions 2, 1 and 6 had the most number



New mums helping us to design our parenting survey.



The Baby Box comes with a gift to help start cloth baby and with safe sleeping advice.

of mums (9%) with the greatest difference (averaging 1 point) between their knowledge and confidence.

- Caroline Chisholm Society will continue to collect this information to see if it changes over time or as a result of being in touch with us. All of those who collected a box said they are willing to provide feedback at a later date.
- 36% of those receiving a baby box sought additional support. Of those, the requests were for support with: Financial support; Mental Health / Social Isolation (incl. migration) / Flat Affect; Disability / Chronic illness; Family Violence; Accessing services when required; Parenting skills.
- 36 Baby Boxes were given out, and those 36 families had safe sleeping messages reinforced, a simple way to put their hand up for help and a supportive environment to receive advice. 47% were the first baby for mum. 30% of the families identify as Aboriginal. 25% identified their culture as something other than Australian, with the answers being Malaysian, Macedonian, Muslim, Iraqi, and Indian.

## Spotlight on Our Clients in Melton

## Implementing the Vulnerability Framework

## Empowering Kindergartens with Knowledge of Vulnerability – 2016–2017

Funded through the "City of Melton – The Club Caroline Springs Supplementary Grants", the project "Empowering kindergartens with knowledge of vulnerability" is designed to help the community in the City of Melton implement the BestStart Vulnerability Framework Tool Kit that was developed in Shepparton.

## What is the "Vulnerability Framework"?

- Kindergarten teachers and Maternal and Child Health nurses in the Shepparton Enhanced Best Start site were supported to write a "Vulnerability Framework". In Shepparton, it is now being prepared with carers and educators in childcare centres.
- The framework is a two-sided piece of paper which is a quick reference guide for practitioners when presented with a family in need.
- Having been trained in its use, the practitioner then uses it to help them decide what to do next (e.g. help within the program versus refer to community services versus report to child protection).
- Later, the practitioner collects de-identified data, which is used to plan services (universal, secondary and tertiary) in a way that is highly responsive to the needs of the neighbourhood as identified by universal services.

Caroline Chisholm Society is working with community kindergartens in Melton so that the teachers:

- receive training to achieve a shared understanding of vulnerability
- have a double-sided sheet that helping them to classify a situation into one of five categories of vulnerability and indicative reasons (i.e. high level of vulnerability, moderate level, or developmentally on track).
- have relationships with other services so that they can help those families:
  - who are 'high' with a report (e.g. to Child Protection/Police),
  - who are 'moderate' get help more easily (e.g. via ChildFIRST from integrated family services like Caroline Chisholm Society home-visiting case workers / Parenting or supported playgroups / early childhood intervention etc. etc.),
  - who are 'developmentally on track' have support from the universal service.

This work is seeking to ensure that all kindergarten teachers in Melton LGA are trained and use the vulnerability guide.

Developed in Shepparton 'by practitioners, with practitioners, for practitioners' the toolkit facilitates a shared/common understanding of child and family vulnerability by Maternal and Child Health Nurses and Kindergarten teachers. It is now, five years on, not only helping them identify families but also helping them plan services such as supported playgroups. Together with the Melton City Council, CCS identified that the tool is suited to our community. One of the great challenges for CCS is balancing the demand for high volume early intervention services (such as parenting groups) in the face of increasing demand from complex families (who Caroline Chisholm Society helps with homevisiting integrated casework). Caroline Chisholm Society has always done both, but the balance is shifting in the wrong direction. The Caroline Chisholm Society believes this project will assist kinder teachers with options for help and will assist our team in getting referrals earlier to prevent issues with, for example, child protection. This will help families to achieve safe and nurturing environments for their children.

## The data it gave us about families in Melton

In Melton 128 children (29%) were considered vulnerable out of the total of 447 that participated in the pilot data collection.

### Melton kindergartens







Concerns in areas 1-5



#### Areas of concern



48 children were recorded by kindergarten teachers as experiencing vulnerability in only 1 area of concern, 33 children were recorded as experiencing vulnerability in 2 areas of concern, 26 were considered vulnerable in 3 areas, 10 were considered vulnerable in 4 areas and 11 were considered vulnerable in all 5 areas.

The main area of concern overall recorded by Melton kindergarten teachers was Family circumstances and economic environment with 79 children noted as experiencing vulnerability in this area.

The second big area of concern was recorded to be child safety, stability, development and wellbeing with 67 children noted as experiencing vulnerability in this area.

Parent/carer capability was recorded as an area of concern for 61 children.

Family composition and dynamics was recorded for 59 children.

Social and community factors was recorded for 21 children.

## Spotlight on Our Clients in Moonee Valley

## January 2017 to June 2017

Since we've opened in Essendon, for the six months to June 30, we've given out...

35	PRAMS
3	HIGHCHAIRS
27	BASSINETS
211	NAPPY PACKS
25	FORMULA
32	FOOD PARCELS
325	CLOTHES PACKS
211	ΤΟΥ ΡΑCKS
204	BUNNY RUGS

and many more miscellaneous items that help meet the material needs of expectant and new families. Some months we give out more than others. In

January	we gave out	86	items worth at total of	\$9,463
February	we gave out	213	items worth at total of	\$24,858
March	we gave out	186	items worth at total of	\$17,875
April	we gave out	179	items worth at total of	\$20,532
Мау	we gave out	334	items worth at total of	\$26,549
June	we gave out	252	items worth at total of	\$33,361

- That means, we've given out 1,250 items worth a total of \$132,638 in the six months since we opened!
- > The total number of families we've seen at the Essendon office is **190**
- > The total number of children in those families was 348
- > And there were unborn babies too. The total number of pregnancies supported were 62

## 2016–2017 financial year

## Region of origin - Moonee Valley welfare appointments, 1 July 2016 to 30 June 2017



## Our People, Neighbourhoods and Finances

## Our People: Our Members, Board, Staff and Volunteers

Established in 1969, the Caroline Chisholm Society is a member-based organisation. Our members engage our Board and staff to run a charitable family support organization. We are a non-religious and non-political organization. Our approximately 100 members elect a Board of 12, who appoint a CEO, who in turn appoints our staff. Many of our members are current or former volunteers who support our work with clients directly or in support functions in Moonee Valley, Caroline Springs and the Goulburn Valley. We currently have over 120 active volunteers. Our life members, Board, CEO and staff are listed at the front of this report. Our team of over 20 staff are dispersed across our sites, with the majority being home visiting social workers based in Melbourne's western growth zone at Caroline Springs in the City of Melton on the boarder of the Brimbank local government area. Our Moonee Valley team is the



VCAL pamper day included child care students putting into practice their training on interactions.

most diverse, made up a team with skills in family support, counselling, homelessness, volunteer coordination and administration. Our Shepparton team is largely voluntary, with a staff member to lead the practice in the Goulburn Valley and a collaboration coordinator. Our new and pre-loved goods team is spread across the three sites.



The Craft Group in Moonee Valley helping meet families material needs.

## Volunteering

Volunteering isn't just something we love, it's who we are. We were started by volunteers and our Board is still voluntary.

Join us in making a difference in the lives of pregnant mothers and families with young children. Contact us and ask for the volunteer coordinator. They are located in both Melbourne and Shepparton and are dedicated to supporting volunteering.

## The value of our volunteering?

### Priceless! But attributable...

Caroline Chisholm Society estimates that in 2016–17 volunteers contributed \$182,000 worth of time.

- At our Melbourne offices, on over 650 occasions, for over 2000 hours, volunteers contributed \$72,000 worth of their time.
- At our Shepparton offices, on over 1250 occasions, for over 4,000 hours, volunteers contributed \$110,000 worth of their time.

Note: These figures are rounded. Most volunteering is attributed at \$29 per hour, some specialist skills are given a higher value per hour (e.g. consultancy).

## Our People, Neighbourhoods and Finances

## Our Neighbourhoods: Moonee Ponds, Caroline Springs, Shepparton

Our neighbourhoods are special to us. While we started in 1969, by 1972, we had opened in Moonee Ponds. By 1978, Shepparton. We opened in Caroline Springs in 2010, as a way of consolidating our former offices in Laverton, Melton, Sunbury and Bacchus Marsh.

In Moonee Valley, we have longstanding relationships with many locals and organisations, and this is the community from which we receive the greatest number of volunteers. The children of our neighbourhood bring their pre-loved goods to us so that we can re-home them. Our bonnet and shawl stall is held fortnightly on Puckle Street and in Niddrie. We are very grateful for the strong support we have from the retirement villages, local schools, service clubs and businesses. While most of our clients coming to the office in Moonee Valley arrive from other parts of Melbourne that are on the transport lines, such as the City of Hume, we continue to serve many people from Flemington, Kensington, Ascot Vale and Avondale Heights. The Moonee Valley City Council helps us to help those who live, work and recreate in the area. We also serve a large number of clients from the City of Hume from this office.

In Caroline Springs, we locate most of our staff so they can be close to the growth corridors of Melton and Wyndham and the large population in Brimbank. We have fine facilities that are increasingly being used by locals to help our clients. For example, our Caroline Springs office is used for a pamper day for clients organised by



Essendon, in Moonee Valley, includes the Essendon Quilters.



Caroline Springs, on the border of Melton and Brimbank, includes the Springs Stitches.



Shepparton, in Goulburn Valley, includes GV Pregnancy and Family Support.

St Columba's school. Caroline Chisholm Catholic College and Christ the Priest Primary have provided much support in helping us to help our growing neighbourhood. We are grateful for the use of the former Wirrigirri kindergarten at 2 Darebin Place. The City of Melton helps us to help meet the needs of the growing community. We also serve Maribyrnong and Hobsons Bay from this office.

Our Shepparton office is co-located with RadCom and the Save the Children Kindergarten and operates from an annex of the building. In the Goulburn Valley, we work with VincentCare (especially in responding after the trauma of family violence), the Bridge (a community service for women under 26 years of age), Primary Health Care Connect (who offer counselling), and Family Care (a family service provider that includes a ChildFIRST intake office) to achieve a stronger support network around our clients. With regard to volunteering, our partners in Shepparton include local schools such as Notre Dame, the local Special School who recondition prams, CentreLink and employment agencies, and clubs and societies (e.g. Love to Sew, Rotary, Lions and the Soroptimists).

## **Our Finances**

In financial terms, it has been a positive year for the Society. During the financial year, the Society worked towards its objective to grow in three strong locally embedded sites. In Moonee Valley, this is through a new community centre at 977 Mount Alexander Road, Essendon which opened in March 2017. In Melbourne's western growth corridor, we operate in owned and leased space in Darebin Place, Caroline Springs focussing on excellence in the prevention of engagement with child protection. At a leased office in Shepparton, the Society undertakes a volunteer oriented emergency relief service within the disadvantaged community. Total revenue for the period ending June 2017 was \$3,084,412 which is not consistent with the prior period revenue of \$1,586,271. The difference in revenue in 2017 is that due to the completion of a new building at 977 Mount Alexander Road, all grants and donations received specifically for the construction of the building were transferred to revenue whilst all expenditure was capitalised. For detailed analysis of our financial position, see our financial statements for the year ending 30 June 2017 included in this report.

## Our Funders, Donors and Supporters

Victoria:

- The Victorian Government through the Department of Health and Human Services supports our integrated family services and specialist homelessness services, through the Western Integrated Family Violence Partnership facilitated by Women's Health West supports the Mothers in Mind<sup>®</sup> Therapeutic Playgroup, through the Department of Environment, Land, Water and Planning, supports our vision for an early years' service hub in Essendon and supports kindergarten participation through the Department of Education and Training and Early Childhood Management Services.
- The Shop Distributive and Allied Employees Association supported us to offer a state-wide telephone line for pregnant and new parents, which assists their members to have a source of support for their parenting needs while the SDA supports their employment relations.
- The Lord Mayor's Charitable Foundation (Youth in Philanthropy), the Association of Civilian Widows, Women of the University Fund

and Loyola College Chisholm House supported us with baby and maternity goods.

### Goulburn Valley Community:

• The Helen Macpherson Smith Trust supported our Shepparton collaboration project resulting in the Baby Box project. The love to sew ladies supported us financially and with goods for clients.

#### Moonee Valley Community:

• Noel & Carmel O'Brien Family Foundation, the Noonan Family, the Beck and Fox Families, Essendon Fields, Strathmore Community Branch Bendigo Bank, Australian Lions Foundation, Lions Club of Doutta Galla (Quilt – Esprit de Corps Project), Schiavello Group, Nelson Alexander Charitable Foundation, Chisholm House -Loyola College Watsonia, Essendon Branch of the Country Women's Association of Victoria Inc. and many others supported our campaign to remain in the Moonee Valley at a new fit for purpose site at 977 Mt Alexander Road, Essendon. It would not have been possible without support from the Moonee Valley City Council, the Rotary Club of Essendon and volunteers and members of the Society



Rotary Club of Caroline Springs



Rotary Club of Brimbank Central



Chisholm House Loyola College

 Our new and pre-loved baby and maternity goods are helped by financial support from Rotary Club of Essendon, Specsavers Moonee Ponds, Christ Church Essendon Opportunity Shop, the Country Women's Association of Victoria Inc. Kiwanis Sunrise Group, The Women's Association in Pascoe Vale, Penleigh and Essendon Grammar School, Brimbank Church of Christ, Probus Club of Keilor and Nazareth College. The Moonee Valley City Council supported us to improve our partnerships and receive and provide pre-loved goods to case workers on a Friday and have committed to supporting the service hub at 977 Mt Alexander Road, Essendon through a community service subsidy.

## Melton and Brimbank Community:

• The Club at Caroline Springs through Melton City Council supported us to hear the voices of expectant and new mothers with a Mothers Day's event, focus groups and children's week party, and to support kindergartens to meet the early education needs of vulnerable families with the Vulnerability Guide Tool Kit. WestWaters Hotel supported us to make our space more accessible for people living with disability and safer and more welcoming for volunteers. The Melton City Council supported the use of the former "Wirrigirri Preschool" to offer a range of services. And the Rotary Club of Brimbank Central supported our new and pre-loved goods program.

## **Donors and Supports**

We also thank those who have made significant organisational and personal contributions of funds to allow us to operate. We are not able to name you all, but we are grateful for your support.

We particularly thank those treasured individuals who make the gift of their time be that with professional services or volunteer activities. There are also too many of you to name.

The organisations that made in-kind contributions to our operations are also thanked warmly.

Locals in our neighbourhoods of Moonee Ponds, Essendon, Caroline Springs and Shepparton help us daily and the generous donations we receive from locals is deeply encouraging to our team.

We also thank our local council representatives and officials in the City of Moonee Valley, the City of Melton, the City of Greater Shepparton and the City of Brimbank for their support.

We acknowledge the traditional owners of the lands on which we live, work and recreate as individuals, as an organisation and as a community.

## A New Website!

This year, we updated our website. We're particularly pleased that it has a 'translate' button.



## Our Year and Our Future

## The 2016–2017 year included:

- a great celebration with the opening of the new Moonee Valley office at 977 Mt Alexander Road, Essendon,
- much welcomed support from Melton Council with space for us to offer community events, parenting and playgroups, and support for complex issues in families, and
- the announcement of a Victorian Government funded partnership in Goulburn Valley, Children and Mothers in Mind.

These are cause for great celebration at Caroline Chisholm Society as it signals a strong asset base, responsiveness to the growth and change in population and the capacity of our Shepparton office to meet the needs of the modern community while staying true to our tradition.

## 2017–2018 has begun and we are focussed on:

- improving our service through evidence-based programs such as Children and Mothers in Mind,
- building on the growth in Goulburn Valley to ensure we remain able to deliver our services, and
- continuing our progress towards a new service record system to allow our journey towards better evaluation of our services to continue.

Together, these are a necessary platform for the Society to continue to support families in our community, given the increasing pressures placed on them. As we support families through the complexities of life we know we need to grow 'bigger but not too big' if we're to deliver on our promise to be there for them with a listening ear as they seek our pregnancy counselling and support appointments, ongoing family support services and new and pre-loved baby and maternity goods. The 2016 AFL Grand Final was contested between the Sydney Swans and the Western Bulldogs. The Western Bulldogs grew up in Footscray and extend their catchment to Ballarat. The Caroline Chisholm Society's Caroline Springs office is located in the centre of their catchment. It was the Swans' fifth grand final appearance since 2005, while the Bulldogs were competing in their first grand final since 1961. The match, played at the Melbourne Cricket Ground in front of 99,981 spectators, was won by the Bulldogs by a margin of 22 points, marking their second VFL/AFL premiership victory and first since 1954, breaking a 62-year premiership drought. It was also the first time in VFL/AFL history that a team won the premiership from seventh place on the ladder. The win was story of resilience that all of Victoria rallied around, and Caroline Chisholm Society joined in, as its CEO is a member of the club.



Caroline Chisholm Society – ABN 42 005 066 919 FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2017

## Contents

### **Financial Statements**

Directors' Report	F1
Auditor's Independence Declaration	F6
Independent Auditor's Report	F7
Statement of Profit or Loss and Other Comprehensive Income	F9
Statement of Financial Position	F10
Statement of Changes In Equity	F11
Statement of Cash Flows	F12
Notes to the Financial Statements	F13
Directors' Declaration	F20

## **Directors' Report**

The directors present their annual report together with the financial report of the Caroline Chisholm Society ("the Society") for the financial year ended 30 June 2017 and the auditor's report thereon.

### Directors

The directors of the Society at any time during or since the end of the year are:

Names	Appointed/Resigned
Teresa (Tess) Fogarty	10 September 1989 – present
Paul Webster	17 September 1991 – present
Franciscus (Frank) Smit	20 September 2005 – present
Wendy Hunt	21 February 2006 – present
Michael Christie	23 October 2009 – present
Kate Rowswell	18 May 2010 – present
Stuart Rowland	20 November 2012 – present
Philip (Phil) Gatens	21 May 2013 – present
Stephen Mullins	12 May 2015 – present
Gavin Kempin	25 August 2015 – present
Sarah Notaro	26 April 2016 – present

Directors have been in office since the start of the financial year to the date of this report unless otherwise stated.

### **Principal Activities**

The principal activities of the Society during the financial year was the provision of support for pregnant women and families with young children. The objectives of the Society remain the provision of quality pregnancy and family support services, achieved via ongoing collaboration with our service partners, staff and community.

There was no significant change in the nature of the activities of the Society during the year.

### **Company Secretary**

The following person held the position of Company Secretary:

• Philip Gatens

### **Operating and Financial Review**

The net surplus of the Society for the financial year ended 30 June 2017 was \$1,297,720 (2016: \$11,034). A large proportion of this surplus is due to the completion of a new building at 977 Mount Alexander Road valued at \$1.940 million. \$1.171 million in grants and donations have been recognised as revenue as the conditions of the grants and donations have been met. Expenditure associated with the establishment of the premises (including \$1.067m for the building and \$168,500 in furniture, fittings and equipment) has been capitalised. There has been an increase in the net assets of the Society's assets to \$3.296m (2016: \$1.879m).

Caroline Chisholm Society – ABN 42 005 066 919 FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2017

## **Directors' Report**

### **Review of Operations**

In the directors' opinion, it has been a positive year for the Society. During the financial year, the Society worked towards its objective to grow in three strong locally embedded sites. In Moonee Valley, this is through a new community centre at 977 Mount Alexander Road, Essendon which opened in March 2017. In Melbourne's western growth corridor, we operate in owned and leased space in Darebin Place, Caroline Springs focussing on excellence in the prevention of engagement with child protection. At a leased office in Shepparton, the Society undertakes a volunteer oriented emergency relief service within the disadvantaged community. Total revenue for the period ending June 2017 was \$3,084,412 which is not consistent with the prior period revenue of \$1,586,271. The difference in revenue in 2017 is that due to the completion of a new building at 977 Mount Alexander Road, all grants and donations received specifically for the construction of the building were transferred to revenue whilst all expenditure was capitalised.

### **State of Affairs**

In the opinion of the directors, there were no significant changes in the Society's state of affairs during the financial year, not otherwise disclosed in these financial statements.

### **Events Subsequent to Reporting Date**

There has not arisen in the interval between the end of the financial year and the date of this report any item, transaction or event of a material and unusual nature likely, in the opinion of the directors of the Society, to affect significantly the operations of the Society, the results of those operations, or the state of affairs of the Society in future financial years.

### **Future Developments, Prospects and Business Strategies**

Effective services, strong finances and sound governance are the stated strategic objectives of the Society. Financial management continues to be a major focus of the Society's directors. Facilitated strategic planning in collaboration with operational staff and relevant key stakeholders has provided clarity in decision making about the most appropriate use of our scarce resources. The Society is actively exploring opportunities for growth in areas aligned with existing services.

#### **Environmental Issues**

The Society's operations are not regulated by any significant environmental regulation under either Commonwealth or State legislation.

## **Directors' Report**

## **Meeting of Directors**

The number of directors' meetings and number of meetings attended by each of the directors of the Society during the financial year are:

	Number eligible to attend	Number attended
Teresa (Tess) Fogarty	7	7
Paul Webster	7	7
Franciscus (Frank) Smit	7	4
Wendy Hunt	7	6
Michael Christie	7	6
Kate Rowswell	7	5
Stuart Rowland	7	6
Philip (Phil) Gatens	7	6
Stephen Mullins	7	6
Gavin Kempin	7	4
Sarah Notaro	7	5

### **Information on Directors**

Teresa (Tess) Fogarty	Director		
Qualifications	_		
Experience	Director since 1989		
Special Responsibilities	Moonee Valley Representative		
	Member Property Committee		
Paul Webster	President		
Qualifications	MA, LLB		
Experience	Lawyer		
Special Responsibilities	State and National Engagement		
	Chair, Property Committee		
	Ex Officio Member of all Committees		
Franciscus (Frank) Smit	Director		
Qualifications	_		
Experience	40 years' experience as Managing Director of Small Business		
Special Responsibilities Member, Finance and Funding Committee			
	Member, Governance and Risk Committee		

## **Directors' Report**

Wendy Hunt	Director		
Qualifications	Dip Teaching		
Experience	35 years' education field; other 20 years in pregnancy support		
Special Responsibilities	Goulburn Valley Representative		
Michael Christie	Vice-President		
Qualifications	MB, BS, FRACGP		
Experience	General Practitioner, West Brunswick Clinic		
Special Responsibilities	Vice-President		
Kate Rowswell	Director		
Qualifications	BBus (Acc) CA		
Experience	Financial Accounting and Reporting		
Special Responsibilities	Member, Finance and Funding Committee		
	Member, Clinical Governance Committee		
Stuart Rowland	Director		
Qualifications	Law; B.Th. (SCD); B.Litt. (Melb)		
Experience	Lawyer		
Special Responsibilities	Member, Property Committee		
Philip (Phil) Gatens	Secretary		
Qualifications	BBus, Grad Dip (BIS), FCPA		
Experience	Internal Audit Manager in Financial Services Sector		
Special Responsibilities	Chair, Governance and Risk Subcommittee		
	Ex Officio Member of all Committees		
Stephen Mullins	Treasurer		
Qualifications	Dip Financial Planning, Dip Financial Markets, Cert Business Studies		
	(Accounting), Cert Superannuation Management		
Experience	Financial Services and small business management and operations		
Special Responsibilities	Chair, Finance and Funding Committee		
Gavin Kempin	Director		
Qualifications	Dip YW, Grad Dip AE&T, M Ed.		
Experience	Practitioner and Senior Manager in Community services sector,		
	consultant and Project Management		
Special Responsibilities	Chair, Clinical Governance Committee		
Sarah Notaro	Director		
Qualifications	B Ed (Primary)		
Experience	Primary teaching		
Experience Special Responsibilities	Primary teaching New Parent Representative Member, Clinical Governance Committee		

## **Directors' Report**

#### Indemnifying and Insuring Officers or Auditors

The Society has insurance for each of the directors against liabilities for costs and expenses incurred by them in defending any legal proceedings arising out of their conduct while acting in the capacity of director of the Society, other than conduct involving a wilful breach of duty in relation to the Society.

#### Dividends

The Society's constitution precludes the payment of dividends.

### Significant changes in the state of affairs

In the opinion of the directors there were no significant changes in the state of affairs of the Society that occurred during the financial year.

### Auditor's Independence Declaration

The auditor's independence declaration for the year ended 30 June 2017 has been received and can be found on page 6 of the financial report.

Signed in accordance with a resolution of the Directors:

Marw

Director: .....

Paul Webster

Dated this 22nd day of August 2017

Caroline Chisholm Society – ABN 42 005 066 919 FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2017



SUITE 101, 486 WHITEHORSE ROAD, SURREY HILLS, VIC. 3127 TELEPHONE: (03) 9836 1188 FAX: (03) 9836 7332 EMAIL: info@badawy.com.au

# Auditor's Independence Declaration under subdivision 60-C section 60–40 of the Australian Charities and Not-for-Profits Commission Act 2012 to the Directors of Caroline Chisholm Society

I declare that, to the best of my knowledge and belief, during the year ended 30 June 2017 there have been:

- (i) no contraventions of the auditor independence requirements as set out in the Australian Charities and Not-for-Profits Commission Act 2012 in relation to the audit; and
- (ii) no contraventions of any applicable code of professional conduct in relation to the audit.

Name of Firm:	Badawy & Associates Registered Auditor 7918
Name of Principal:	Joseph Badawy
Address:	Suite 101A/486 Whitehorse Road, SURREY HILLS 3127

Dated this 30th day of July 2017

CERTIFIED PRACTISING ACCOUNTANTS, REGISTERED COMPANY AUDITOR

J. Badawy FCPA



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## Independent Auditor's Report to the Members of the Caroline Chisholm Society

ABN 42 005 066 919

### **Report on the Financial Report**

I have audited the accompanying financial report of Caroline Chisholm Society which comprises the statement of financial position as at 30 June 2017, the statement of comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, notes comprising a summary of significant accounting policies, other explanatory information and the directors' declaration.

## Director's Responsibility for the Financial Report

The directors of the Society are responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards and the Australian Charities and Not-for-Profits Commission Act 2012 and for such internal control as the directors determine is necessary to enable the preparation of the financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error.

### Auditor's Responsibility

My responsibility is to express an opinion on the financial report based on my audit. I conducted my audit in accordance with Australian Auditing Standards. These standards require that I comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance about whether the financial report is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial report, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation of the financial report that gives a true and fair view in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the directors, as well as evaluating the overall presentation of the financial report.

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my audit opinion.

### Independent

In conducting my audit, I have complied with the independence requirements of the Australian Charities and Notfor-Profits Commission Act 2012. I confirm that the independence declaration required by the Australian Charities and Not-for-Profits Commission Act 2012, which has been given to the directors of Caroline Chisholm Society, would be in the same terms if given to the directors as at the time of this auditor's report.

CERTIFIED PRACTISING ACCOUNTANTS, REGISTERED COMPANY AUDITOR

J. Badawy FCPA

Caroline Chisholm Society – ABN 42 005 066 919 FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2017



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## Independent Auditor's Report to the Members of the Caroline Chisholm Society

## **Basis for Qualified Opinion**

Donations and other fundraising activities are significant sources of revenue for the Caroline Chisholm Society. The Society has determined that it is impracticable to establish control over the collection of donations and funds from other fundraising activities prior to entry into its financial records. According, as the evidence available to us regarding revenue from these sources was limited, out audit procedures with respect to donations and other fundraising activities had to be restricted to the amounts recorded in the financial records. We therefore are unable to express an opinion, as to whether donations and other fundraising revenue the Caroline Chisholm Society recorded are complete.

## Auditor's Opinion

Name of Firm:

In my opinion, except for the possible effects of the matter described in the Basis for Qualified Opinion paragraph, the financial report of Caroline Chisholm Society is in accordance with Australian Charities and Not-for-Profits Commission Act 2012 including:

- (i) giving a true and fair view of the Society's financial position as at 30 June 2017 and of its performance for the year ended on that date; and
- (ii) complying with the Australian Accounting Standards and the Corporations Regulations 2001.

Name of Principal: Joseph Badawy Registered Company Auditor Address: Suite 101A/486 Whitehorse Road, SURREY HILLS 3127

Badawy & Associates

Dated this 4th day of September 2017

CERTIFIED PRACTISING ACCOUNTANTS, REGISTERED COMPANY AUDITOR

J. Badawy FCPA

## Statement of Profit or Loss and Other Comprehensive Income

for the year ended 30 June 2017

	Note	2017 \$	2016 \$
Revenue from funding bodies		2,737,025	1,443,425
Other income	5	339,319	118,215
Employee expenses		(1,347,866)	(1,240,641)
Program expenses		(105,474)	(55,726)
Depreciation		(79,705)	(39,060)
Occupancy expenses		(58,269)	(65,002)
Communications and IT		(63,124)	(63,354)
Travel expenses		(26,741)	(26,758)
Motor vehicle financing costs		(319)	(1,513)
Other expenses		(110,424)	(83,183)
Results from operating activities		1,284,422	(13,597)
Finance income		8,068	24,631
Net surplus for the period before income tax expense		1,292,490	11,034
Income tax expense		0	0
Surplus after income tax expense for the year attributable to the members of Caroline Chisholm Society		1,292,490	11,034
Other comprehensive income for the year, net of tax		5,230	
Total comprehensive income for the year attributable to the members of Caroline Chisholm Society		1,297,720	11,034

Caroline Chisholm Society – ABN 42 005 066 919 FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2017

## Statement of Financial Position

as at 30 June 2017

	Note	2017 \$	2016 \$
ASSETS			
Current assets			
Cash and cash equivalents	6	515,044	1,123,521
Other assets	7	33,275	4,926
Total current assets		548,319	1,128,447
Non-current assets			
Property, plant and equipment	8	2,954,592	2,051,062
Total non-current assets		2,954,592	2,051,062
TOTAL ASSETS		3,502,911	3,179,509
LIABILITIES			
Current liabilities			
Trade and other payables		58,516	46,707
Deferred income		22,838	1,133,132
Hire purchase liability		0	19,751
Employee benefits	9	61,386	65,858
Other Liabilities		15,500	
Total current liabilities		158,240	1,265,448
Non-current liabilities			
Employee benefits	9	48,189	34,252
Hire purchase liability			_
Total non-current liabilities		48,189	34,252
TOTAL LIABILITIES		206,429	1,299,700
NET ASSETS		3,296,482	1,879,809
EQUITY			
Reserves			_
Retained earnings	10	3,296,482	1,879,809
TOTAL EQUITY		3,296,482	1,879,809

## Statement of Changes in Equity

for the year ended 30 June 2017

	Revaluation Reserve (\$)	Retained Earnings (\$)	Total Equity (\$)
Balance at 1 July 2015	_	1,868,775	1,868,775
Surplus for the year		11,034	11,034
Other comprehensive income			
Total comprehensive income for the year	_		
Balance at 30 June 2016	-	1,879,809	1,879,809
Balance at 1 July 2016	_	1,879,809	1,879,809
Surplus for the year		1,297,720	1,297,720
Other comprehensive income	118,953		118,953
Total comprehensive income for the year	_		
Balance at 30 June 2017	118,983	3,177,529	3,296,482

Caroline Chisholm Society – ABN 42 005 066 919 FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2017

## Statement of Cash Flows

for the year ended 30 June 2017

	Note	2017 \$	2016 \$
Cash from operating activities:			
Receipts from grants		1,651,382	1,448,340
Receipts from fundraising		13,640	11,937
Receipts from donations		237,946	975,022
Receipts from other operating activities		540,712	79,833
Interest received		8,068	24,631
Payments to suppliers and employees		(1,702,432)	(1,533,214)
Net cash from operating activities		749,316	1,006,549
Cash flows from investing activities:			
Proceeds from the sale of assets		7,182	6,750
Purchase of property, plant and equipment		(124,119)	(405,032)
Net cash (used in) investing activities		(116,937)	(398,282)
Cash flows used in financing activities:			
Hire purchase funding		(23,902)	(9,953)
Net cash (used in) financing activities		(23,902)	(9,953)
Net increase / (decreases) in cash held:		(608,477)	598,314
Cash and cash equivalents at beginning of financial year		1,123,521	525,207
Cash and cash equivalents at end of financial year	6	515,044	1,123,521

## Notes to the Financial Statements

### 1. Reporting entity

Caroline Chisholm Society ("the Society") is a public company limited by guarantee. The Company, referred to as "the Society", is a not-for-profit entity and is primarily involved in the provision of support for pregnant women and families with young children.

### 2. Basis of preparation

a. Statement of compliance The Society adopted AASB 1053 Application of Tiers of Australian Accounting Standards for the financial year beginning on 1 July 2010 to prepare Tier 2 general purpose financial statements.

The financial report of the Society is a Tier 2 general purpose financial report which has been prepared in accordance with Australian Accounting Standards – Reduced Disclosure Requirements (AASB – RDR's) (including Australian Interpretations) adopted by the Australian Accounting Standards Board (AASB) and the Australian Charities and Not-for-profits Commission Act 2012. The financial statements were authorised for issue by the Board of Directors on 22 August 2017.

#### b. Basis of measurement

The financial statements have been prepared on the historical cost basis except for land and buildings which is carried at fair value.

## c. Functional and presentation currency

These financial statements are presented in Australian dollars, which is the Society's functional currency.

## d. Use of estimates and judgement.

The preparation of financial statements in conformity with AASBs requires management to make judgements, estimates and assumptions that affect the application of accounting policies and the reported amounts of assets, liabilities, income and expenses. Actual results may differ from these estimates.

Estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which the estimates are revised and in any future period affected.

## 3. Significant accounting policies

The accounting policies set out below have been applied consistently to all periods presented in these financial statements.

#### a. Financial instruments

#### i. Non-derivative financial assets

The Society initially recognises loans and receivables and deposits on the date that they are originated. All other financial assets are recognised initially at the trade date at which the Society becomes a party to the contractual provisions of the instrument.

The Society derecognises a financial asset when the contractual rights to the cash flows from the asset expire, or it transfers the rights to receive the contractual cash flows of the financial asset in a transaction which substantially all the risks and rewards of ownership of the financial asset are transferred. Any interest in transferred financial assets that is created or retained by the Society is recognised as a separate asset or liability.

Financial assets and liabilities are offset and the net amount presented in the statement of financial position when, and only when, the Society has a legal right to offset the amounts and intends either to settle on a net basis or to realise the asset and settle the liability simultaneously.

The Society has the following nonderivative financial assets: trade and other receivables, deposits and cash and cash equivalents.

Loans and receivables are financial assets with fixed or determinable payments that are not quoted in an active market. Such assets are recognised initially at fair value plus any directly attributable transaction costs. Subsequent to initial recognition loans and receivables are measured at amortised cost using the effective interest method, less any impairment losses. Loans and receivables comprise trade and other receivables.

Cash and cash equivalents comprise cash balances and deposits.

Accounting for finance income is discussed in note 3(g).

## ii. Non-derivative financial liabilities

The Society initially recognises debt securities issued and subordinated liabilities on the date that they are originated. All other financial liabilities are recognised initially on the trade date at which the Society becomes a party to the contractual provisions of the instrument. The Society derecognises a financial liability when its contractual obligations are discharged or cancelled or expire.

Caroline Chisholm Society – ABN 42 005 066 919 NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2017

## Notes to the Financial Statements

Financial assets and liabilities are offset and the net amount presented in the statement of financial position when, and only when, the Society has a legal right to offset the amounts and intends either to settle on a net basis or to realise the asset and settle the liability simultaneously.

The Society has the following nonderivative financial liabilities: trade and other payables and deferred income.

Such financial liabilities are recognised initially at fair value plus any directly attributable transaction costs. Subsequent to initial recognition these financial liabilities are measured at amortised cost using the effective interest rate method.

#### b. Property plant and equipment

#### i. Recognition and measurement

Items of property, plant and equipment are measured at cost less accumulated depreciation and impairment losses except for land and buildings which are carried at fair value.

Cost includes expenditure that is directly attributable to the acquisition of the asset. The cost of selfconstructed assets includes the cost of materials and direct labour, any other costs directly attributable to bringing the asset to a working condition for its intended use, and the costs of dismantling and removing the items and restoring the site on which they are located. Purchased software that is integral to the functionality of the related equipment is capitalised as part of that equipment.

Land and buildings held for use in the supply of services and for administrative purposes are stated at their revalued amounts being the fair value at the date of revaluation, less any subsequent accumulated depreciation and subsequent accumulated losses. Revaluations are performed with sufficient regularity such that the carrying amounts do not differ materially from those that would be determined using fair values at the end of each reporting period.

When parts of an item of property, plant and equipment have different useful lives, they are accounted for as separate items (major components) of property, plant and equipment.

Gains and losses on disposal of an item of property, plant and equipment are determined by comparing the proceeds from disposal with the carrying amount of the property, plant and equipment and are recognised net within other income in profit or loss. When revalued assets are sold, the amounts included in the revaluation reserve are transferred to retained earnings.

#### ii. Subsequent costs

The cost of replacing part of an item of property, plant and equipment is recognised in the carrying amount of the item if it is probable that the future economic benefits embodied within the part will flow to the Society and its cost can be measured reliably. The carrying amount of the replaced part is derecognised. The costs of the day-to-day servicing of property, plant and equipment are recognised in profit or loss as incurred.

#### iii. Depreciation

Depreciation is calculated over the depreciable amount, which is the cost of an asset, or other amount substituted for cost, less its residual value. The method of calculating

depreciation for plant and equipment and motor vehicles changed during the year from a diminishing value basis to a straight-line basis. Depreciation is recognised in profit or loss over the useful lives of each part of property, plant and equipment, since this most closely reflects the expected pattern of consumption of the future economic benefits embodied in the asset. Land is not depreciated. Capital works in progress is depreciated when it is available for use.

The estimated useful lives for the current and comparative periods are as follows:

- 1. Buildings 40 years
- 2. Plant and equipment 4–8 years
- 3. Motor vehicle 5 years

The Society recognises its land and buildings at fair value.

Depreciation methods, useful lives and residual values are reviewed at each reporting date.

#### c. Impairment

#### i. Financial assets

A financial asset is assessed at each reporting date to determine whether there is objective evidence that it is impaired. A financial asset is impaired if objective evidence indicates that a loss event has occurred after the initial recognition of the asset, and that the loss event had a negative effect on the estimated future cash flows of that asset that can be estimated reliably.

Objective evidence that financial assets are impaired can include default or delinquency by a debtor, restructuring of an amount due to the Society on terms that the Society

## Notes to the Financial Statements

would not consider otherwise, indications that a debtor or issuer will enter bankruptcy, the disappearance of an active market for a security.

The Society considers evidence of impairment for receivables at both a specific asset and collective level. All individually significant receivables are assessed for specific impairment. All individually significant receivables found not to be specifically impaired are then collectively assessed for any impairment that has been incurred but not yet identified.

Receivables found not to be specifically impaired are then collectively assessed for any impairment that has been incurred but not yet identified. Receivables that are not individually significant are collectively assessed for impairment by grouping together receivables with similar risk characteristics.

In assessing collective impairment, the Society uses historical trends of the probability of default, timing of recoveries and the amount of loss incurred and adjusted for management's judgement as to whether current economic and credit conditions are such that the actual losses are likely to be greater or less than suggested by historical trends.

An impairment loss in respect of a financial asset measured at amortised cost is calculated as the difference between its carrying amount and the present value of the estimated future cash flows discounted at the asset's original effective interest rate. Losses are recognised in profit or loss and reflected in an allowance account against receivables. Interest on the impaired asset continues to be recognised through the unwinding of the discount. When a subsequent event causes the amount of impairment loss to decrease, the decrease in impairment loss is reversed through profit or loss.

#### ii. Non-financial asset

The carrying amount of the Society's non-financial assets, other than inventories are reviewed at each reporting date to determine whether there is any indication of impairment. If any such indication exists, then the asset's recoverable amount is estimated.

The recoverable amount of an asset or cash-generating unit is the greater of its value in use and its fair value less costs to sell. In assessing value in use, management considers the depreciated replacement cost of an asset when the future economic benefit of the asset is not primarily dependent on the asset's ability to generate net cash inflows and where the entity would, if deprived of the asset, replace its remaining future economic benefits. For the purpose of impairment testing, assets that cannot be tested individually are grouped together into the smallest group of assets that generates cash inflows from continuing use that are largely independent of the cash inflows of other assets or groups of assets (the "cash-generating unit" (CGU)).

An impairment loss is recognised if the carrying amount of an asset or its CGU exceeds its estimated recoverable amount. Impairment losses are recognised in profit or loss. Impairment losses recognised in respect of CGUs are allocated first to reduce the carrying amount of any goodwill allocated to the units, and then to reduce the carrying amounts of the other assets in the unit (group of units) on a pro rata basis. Impairment losses recognised in prior periods are assessed at each reporting date for any indications that the loss has decreased or no longer exists. An impairment loss is reversed if there has been a change in the estimates used to determine the recoverable amount. An impairment loss is reversed only to the extent that the asset's carrying amount does not exceed the carrying amount that would have been determined, net of depreciation or amortisation, if no impairment loss had been recognised.

#### d. Employee benefits

## i. Other long-term employee benefits

The Society's net obligation in respect of long-term employee benefits is the amount of future benefit that employees have earned in return for their service in the current and prior periods plus related on costs. That benefit is discounted to determine its present value and the fair value of any related assets is deducted. The discount rate is the yield at the reporting date on Commonwealth Corporate bonds that have maturity dates approximating the terms of the Society's obligations.

#### ii. Short-term benefits

Liabilities for benefits accruing to employees in respect of wages and salaries, and annual leave represent present obligations resulting from employee's services provided to reporting date. Short-term employee benefit expected to be settled within 12 months, are measured at their nominal values using the remuneration rate expected to be paid as at reporting date, including any related on-costs.

Caroline Chisholm Society – ABN 42 005 066 919 NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2017

## Notes to the Financial Statements

#### e. Revenue

#### i. Government funding

Revenue from funding bodies is recognised when the right to receive that revenue has been established.

#### ii. Other income

Revenue from membership comprises annual membership fees and is recognised in revenue on a straightline basis over the membership period.

Revenue from donations and fundraising is recognised in revenue when conditions of the donation have been met. Where the donation is not linked to specific conditions, donations are recognised upon receipt.

#### f. Lease payments

Payments made under operating leases are recognised in profit or loss on a straight-line basis over the term of the lease. Lease incentives received are recognised as an integral part of the total lease expense, over the term of the lease.

## Determining whether an arrangement contains a lease

At inception of an agreement, the Society determines whether such agreement is or contains a lease. A specific asset is the subject of a lease if fulfilment of the arrangement is dependent on the use of that specified asset. An arrangement conveys the right to use the asset if the arrangement conveys to the Society the right to control the use of the underlying asset. At inception or upon reassessment of the arrangement, the Society separates payments and other consideration required by such an arrangement into those for the lease and those for other elements on the basis of their relative fair values. If the Society concludes for a finance lease that it is impracticable to separate the payments reliably, an asset and a liability are recognised at an amount equal to the fair value of the underlying asset. Subsequently the liability is reduced as payments are made and an imputed finance charged on the liability.

#### g. Financial income

Finance income comprises interest income on term deposits and bank accounts. Interest income is recognised as it accrues, using the effective interest method.

#### h. Goods and services tax

Revenue, expenses and assets are recognised net of the amount of goods and services tax (GST), except where the amount of GST incurred is not recoverable from the taxation authority. In these circumstances, the GST is recognised as part of the cost of acquisition of the asset or as part of the expense. Cash flows are included in the cash flow statement on a gross basis.

Receivables and payables are stated with the amount of GST included. The net amount of GST recoverable from, or payable to, the ATO is included as a current asset or liability in the balance sheet. Cash flows are included in the statement of cash flows on a gross basis. The GST components of cash flows arising from investing and financing activities which are recoverable from, or payable to, the ATO are classified as operating cash flows.

#### i. Income tax

As the company is a charitable institution in terms of subsection 50-5 of the Income Tax Assessment Act 1997, as amended, it is exempt from paying income tax.

## j. Presentation of financial statements and reduced disclosure

The Society has adopted AASB 1053 Application of Tiers of Australian Accounting Standards, AASB 2010-02 Amendments to Australian Standards arising from Reduced Disclosure Requirements and AASB 2011-2 Amendments to Australian Accounting Standards arising from the Trans-Tasman Convergence Project - Reduced Disclosure Requirements. This has resulted in a reduction of disclosures for item such as financial instruments, share-based payments, defined benefit superannuation plans, equity accounted investments and business combinations. Comparative information has been re-presented or removed so that it also conforms to the new disclosure requirements.

### 4. Determination of fair values

The carrying value of financial and non-financial assets and liabilities approximates fair value.

The fair value of land and buildings is based on the directors' assessment of fair value based on recent selling prices in this location.

Refer to Note 3 for accounting policies.

## Notes to the Financial Statements

## 5. Other income

	2017 \$	2016 \$
Fundraising	13,640	11,937
Donations	237,946	26,445
Membership fees	340	1,280
Sundry income	2,893	5,022
Rent	84,500	73,531
	339,319	118,215

## 6. Cash and cash equivalents

	515,044	1,123,521
Short term bank deposits	237,399	809,149
Cash at bank	276,885	313,919
Undeposited funds	172	_
Cash on hand	588	453

## 7. Other assets

	33,275	4,926
Trade Debtors	17,419	1,776
Deposit paid		3,150
Prepayments	15,856	

Caroline Chisholm Society – ABN 42 005 066 919 NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2017

## Notes to the Financial Statements

### 8. Property, plant and equipment

	2017 \$	2016 \$
Freehold land and buildings at fair value	2,797,681	1,619,636
Accumulated depreciation	(51,595)	(23,982)
	2,746,086	1,595,654
Fixtures and fittings at cost	171,244	61,801
Accumulated depreciation	(39,714)	(31,338)
	131,530	30,463
Motor vehicles at cost	117,116	118,898
Accumulated depreciation	(69,983)	(71,390)
	47,133	47,508
Computer equipment at cost	49,060	106,382
Accumulated depreciation	(19,217)	(61,214)
	29,843	45,168
Work in progress		332,269
		332,269
Total property, plant and equipment net book value	2,954,592	2,051,062

Current		
Annual leave	61,386	65,858
Non-current		
Long service leave	48,189	34,252
	109,575	100,110

## Notes to the Financial Statements

#### 10. Equity – retained surpluses

	2017 \$	2016 \$
Retained surpluses at the beginning of the financial year	1,879,809	1,868,775
Asset Reserve	118,953	
Surplus after income tax for the year	1,297,720	11,034
Retained surpluses at the end of the financial year	3,296,482	1,879,809

### **11.** Capital and leasing commitments

Capital commitments related to the construction of a new building in Moonee Valley which started in 2016 and completed in 2017:

Payable – minimum lease payments and capital commitments	2017 \$	2016 \$
Not later than 12 months	0	689,024
One year or later and no later than five years		-
	0	689,024

### 12. Contingent assets and contingent liabilities

There were no contingent liabilities, or any contingent assets as at the balance sheet date.

### 13. Related party transactions

There were no related party transactions during the year. No directors received any remuneration or compensation for their services.

### 14. Subsequent Events

There has not arisen in the interval between the end of the financial year and the date of this report any item, transaction or event of a material or unusual nature likely, in the opinion of the directors of the Society, to affect significantly the operations of the Society, the results of those operations, or the state of affairs of the Society, in future financial years.

Caroline Chisholm Society – ABN 42 005 066 919

## Directors' Declaration

In the opinion of the directors of Caroline Chisholm Society:

- 1. there are reasonable grounds to believe that the Society will be able to pay its debts as and when they become due and payable, and;
- 2. the financial statements and notes, as set out on pages 9 to 19 are in accordance with the Australian Charities and Not-for-profits Commission Act 2012, including;
  - a. complying with Australian Accounting Standards Reduced Disclosure Requirements and the Corporations Regulations 2001; and
  - b. giving a true and fair view of the Society's financial position as at 30 June 2017 and performance of the Society for the financial year ended on that date.

Signed in accordance with a resolution of the Directors:

nhana

Director .....

Paul Webster

Dated this 22nd day of August 2017

## **Contact Us**

#### Helpline

• Statewide - 1800 134 863

#### **Appointments**

(incl. counselling, welfare support and new and pre-loved baby and maternity goods):

- Shepparton 03 5821 0826
- Essendon 03 9361 7000

### **Specialist Homelessness Service**

- 03 9361 7000

• Western Melbourne

#### **Integrated Family Service**

- 03 9361 7000

- Western Melbourne
- Brimbank/Melton
- Engaging Wyndham Families

## **Special Projects**

- 03 9361 7000

- Children and Mothers in Mind
- Kindergarten Participation

#### secretary@caroline.org.au

www.caroline.org.au



