



We acknowledge the traditional owners of the land on which we live, work and provide services, and pay our respects to their elders, past, present and those yet to come.

We acknowledge Dr Philomene Joshua, and Mrs Pat Coffey OAM, and the countless women who committed to making an impact in the lives of women and children over the past 50 years. We honour this heritage, and pay tribute to this work, as well as especially paying tribute to the ongoing and everyday labour of love we witness through the privilege of being a part of the lives of mothers and children.

Clients names have been changed throughout the report to respect their privacy

Illustration and design by Fraynework. We are thankful to Fiona Basile who has kindly taken a number of photos within the Annual Report.

This report has been printed on 100% recycled paper

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# President's Report

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**As we embark on celebrations to commemorate the Society's 50th Year, 2019 has been a year of further consolidation on our strategic focus on clinical practice, culture, leadership, funding, risk and accountability.**

Our leadership restructure from 2018 provided a sound basis for a number of initiatives implemented this year. This includes the introduction of a new Client Record Management System (CRMS) designed to better enable not only our practitioners to capture outcomes through goal setting with their clients, but also provide the Society with improved processes on how we capture and report on our data. I am very grateful to our leadership team and practitioners who have managed this significant work to improve our reporting capacity on client outcomes.

While it was a year of welcoming new staff, 2019 was also a year of departures.

We were joined by CCS members, community leaders and families to farewell our long serving CEO, Helen Cooney who made the decision that after 10 years of service, it was time for a much-needed break, along with some travel and future study plans. We farewelled Helen knowing her contribution had led to significant achievements for the organisation across the three sites leading to an increase in outreach to at-risk mothers and children.

With change like this we were fortunate to have the support of our leadership team and welcomed Jennifer Weber as Interim CEO along with Amanda Moore as Director of Corporate Services. Under their leadership, the continuity of work has meant a smooth transition to the services mothers and children are accessing.

We also welcome new and emerging partnerships with Victoria's leading higher education institutions to develop stronger research and practice partnerships in the fields of applied psychology, social work and community services.

In early 2019 the Victorian government announced a Royal Commission into Victoria's Mental Health System, and we took this as an opportunity to raise our concerns about the state of perinatal mental health services for mothers. The society made 5 recommendations, including:

- Improving perinatal mental health through a coordinated health and community service response and significant investment for women, infants, children and other family members during and after pregnancy;

1. World Association for Infant Mental Health, WAIMH Position Paper on the Rights of Infants, 2016. Available at: [https://perspectives.waimh.org/wp-content/uploads/sites/9/2017/05/PositionPaperRightsInfants\\_-May\\_13\\_2016\\_1-2\\_Perspectives\\_IMH\\_corr.pdf](https://perspectives.waimh.org/wp-content/uploads/sites/9/2017/05/PositionPaperRightsInfants_-May_13_2016_1-2_Perspectives_IMH_corr.pdf)

# President's Report

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*If we can get perinatal mental health right, we will improve the wellbeing of every Victorian child during the critical first 1000 days of life, and thereby significantly impact the capacity of women's mental health during pregnancy, post birth, and the early years.*

- Increasing funds for perinatal mental health services to meet the needs of expectant and new mothers and their babies;
- Establishing better protocols and referral pathways for mental health treatment and support during the perinatal period, especially for expectant mothers with a pre-existing mental health diagnosis;
- Improving access to therapeutic programs on a more widely accessible basis to provide a means of strengthening family relationships and health and wellbeing as an early intervention service, preventing the emergence of complex issues and behaviours later in life; and
- Implementing policies aligned with the World Association for Infant Mental Health's statement on the Rights of the Infant<sup>1</sup>.

The Royal Commission is due to deliver an interim report by November 2019, and a final report in October 2020. On behalf of the Board and the CCS team I would like to reaffirm our efforts to continue to advocate for the needs of those most at-risk of the devastating consequences if mothers during pregnancy, post birth and with young children do not have access to responsive and timely interventions.

Thank you to our staff, volunteers, members, countless community supporters through primary and secondary schools across Melbourne and Shepparton, and to the community and corporate partners who have been a part of this work to improve maternal and infant health outcomes – and a brighter future for mothers, babies and young children.

Dr Michael Christie  
President



# CEO's Report

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**I am constantly reminded of the extraordinary efforts a mother can go to when it comes to ensuring the best outcomes for her baby, infant and young children.**

Having had the privilege to lead the team as Director of Programs and during this brief time as the Interim CEO, I have had the wonderful opportunity to be across a range of areas from the day to day practice, supporting team leaders and practitioners when navigating the systems of health and social services in advocating for mothers, as well as opportunities to meet with CEOs from other agencies and organisations; to making the necessary contacts with local MPs, ministers and government departments to continue to remind them of the needs of mothers and children.

Each day is an opportunity to experience a rollercoaster of emotions with the role in leading a team of dedicated practitioners, support staff and teams of volunteers working to empower at-risk mothers during their pregnancies, post birth and their children up to the age of 5.

Those experiences include the mother who after her struggles finally arrives and acknowledges she wants assistance to support her in finding housing for her, and her two young children after months of sleeping in the car.

The young mother, who after years in refugee camps and finally finding her way to Australia through various support agencies, arrives to share with us her efforts to find a home for her and her young daughter after months of couch surfing with Melbourne based families who open their homes to a woman in need.

The thank you note we received from a mum who was a part of our beautiful photo shoot in putting together this wonderful edition of our Annual Report.

Supported by our dedicated team of practitioners, our volunteers who arrive to sort material aid, put together clothing packs and welcome mums to spend the time with them to listen to their stories; the generous

# CEO's Report

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school communities who continue to come forward each year to raise much needed funds for equipment and clothing, as well as our community partners and corporate sponsors, if it weren't for their generous financial donations we would not have the quality of service we have today.

Our standing in the community and recognition as a specialised service for mothers during pregnancy, post birth and young children is recognised across the sector and at various government levels. This standing and the work achieved to date will be celebrated across 2019-2020 with a number of events to commemorate the work of the remarkable women like Dr Philomene Joshua, and Mrs Pat Coffey OAM, and the countless women who are committed to making an impact in the lives of women and children over the past 50 years.

We honour this heritage, and pay tribute to this work, as well as especially paying tribute to the ongoing and everyday labour of love we witness through the privilege of being a part of the lives of mothers and children.

Jennifer Weber  
Interim CEO



# Our Supporters

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Our achievements are enabled by the generosity of our many supporters.

## Our Major Donors and Grants:

Our grateful thanks go to:



## Our Donors and Supporters:

We thank those who have made personal and organisational contributions of funds, donations of goods and in-kind contributions.

We are extremely privileged to have the support of so many locals in our neighbourhoods, who generously donate and support us daily.

Our thanks to the City of Melton for the use of the former Wirrigirri Preschool (2 Darebin Place) as a hub for community support with outreach to local families. This site is used to host community events, hold parenting and play groups and for social and community service workers to meet with families.



# Who We Are

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**This year we have supported 1,300 clients across our one-off appointments program or in the longer term for family services or homelessness programs**

**We know from our work here in the western suburbs of Melbourne – Generation West –**

**OVER 40 BABIES ARE BORN EVERY DAY; 281 A WEEK AND OVER 14,000 A YEAR**

## Our Beginning

Founded by Dr Philomena Joshua our story began in the 1960s, offering material aid and pregnancy counselling services. It was out of Dr Joshua's house in Box Hill, where a group of volunteers, determined to support vulnerable pregnant women and mothers with babies, set up the first Pregnancy Support Phone Service. A few years later, Pat Coffey, who lived in Shepparton, established a volunteer service that was also responding to the needs of pregnant women. Within a decade, the Society responded to the needs of the community and started providing home and family support.

Our inspiration comes from Caroline Chisholm (1808-77) who is undoubtedly an Australian heroine: an inspirational social reformer dedicated to improving the living conditions of single women and women with children arriving in the new colony. The parallels in the objectives of Caroline Chisholm and our work are many, both working in areas of homelessness, separation of families, supporting migrant families and meeting material needs.

Today, based in three sites, we are a professional agency of social and community workers, service support staff and volunteers, offering

pregnancy counselling and support, material aid and family support. Our specialisation is supporting families from conception through to primary school age.

## Our Why

Our goal is to support families so they can offer a safe and nurturing environment for their children.

We know that along with the lack of infrastructure and services to support our growing communities, increasingly at-risk and vulnerable mothers and their children are going without access to vital services and the necessary supports to improve social, emotional and economic outcomes. In addition the growing housing shortage and affordability creates a constant source of anxiety – impacting the health and wellbeing of women, families and children.

We are reminded of the hope through services we offer as one mother recently recalled that when a case is closed it is not a time of sadness, but excitement - expressed with a sense of achievement - as for the first time since she was 15, she wouldn't have a social worker in her life.

After parenting and poverty, the top issues raised with us relate

# Who We Are

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to mental health, homelessness, family violence and isolation. Putting mental health and social isolation together, the most pressing issue for those who come to us is perinatal mental health. The Society advocates for the Housing First principle. That is, address the

housing needs as a basic right, ensuring housing is secured to then be able to focus on working with individuals and families to address the more complex issues impacting their capacity to provide for themselves and their children.

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**3 OUT OF  
5 PEOPLE  
WHO SEEK  
HOMELESSNESS  
HELP ARE WOMEN<sup>1</sup>**

**OVER 3,000**

**VICTORIAN CHILDREN UNDER  
THE AGE OF 12 ARE HOMELESS.**

**This makes up 16% of the  
homeless population in Victoria<sup>2</sup>**



**10,432 VICTORIAN WOMEN  
are homeless. Up 8.3% in 5 years<sup>3</sup>**

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## Our Strategy

Our Strategy is to grow into three sustainable locally embedded sites in Moonee Valley, Caroline Springs and Goulburn Valley by 2030. Our plan is for staff and volunteers to focus on effective services delivered by skilled volunteers and staff,

strong finances from a diverse range of sources and sound governance of the organisation and its service provision. Our plan outlines tasks that will ensure we have progressed towards our goal of being 'bigger but not too big' by 2025. Our 2018-2020 strategic plan can be viewed on our website [www.caroline.org.au](http://www.caroline.org.au)

1-3 ABS census, 2016

# What We Do

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**Our mission is 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.**

## 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



## Our Approach

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

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

# Our Achievements

We estimate that our volunteers worked for over **4,300 hours** this year, contributing over **\$180,000** of their time.



## Celebrating our 50th year

We are thrilled to be celebrating the significant milestone of 50 years. In addition to a celebration at Government House in early 2020, we are pleased to be releasing our book titled “Caroline Chisholm Society: Our Story so Far”. Our thanks to those that have contributed to the production of Our Story, and notably Sylvia Williams RSM who has been instrumental in leading this project.



## Introduction of a Client Relationship Management System (CRMS)v

A significant achievement is the introduction of a CRMS for clinical data collection, analysis and reporting. This strengthens our clinical governance and quality processes.

In Melbourne on over 810 occasions, for approximately **2,636 HOURS, VOLUNTEERS CONTRIBUTED \$110,000** worth of their time.

In Shepparton on over **688 OCCASIONS,** for approximately **1,692 HOURS,** volunteers contributed **\$71,000** worth of their time.



## Strengthened our Volunteer Programs

Volunteering is who we are. We were started by volunteers, and volunteers continue to be the heartbeat of our organisation. This year we have strengthened our volunteer programs, the number of volunteers inducted and are launching a Mentoring Mums Program.

These efforts were put into play with our first outreach morning tea to bring mums and their preschool aged children out for a morning to do what so many of us appreciate as part of our great Melbourne coffee culture. This lays the groundwork for great plans in 2019/20!

# Our Achievements

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## A new focus on learning

We know that having a culture of learning will help our employees and volunteers flourish. This year we have invested in leadership training, counselling skills and greater understanding on early pregnancy and supports, including perinatal mental health and postnatal depression and anxiety for practitioners and volunteers. The 40% increased spend on training is having a direct impact on the quality of service and supports provided to our clients and supporting our aim to make Caroline Chisholm 'a great place to work'.



## Offering welfare appointments at all three sites

We re-opened the offer of welfare appointments at the Caroline Springs site in response to the growing demands for appointments from locals to the area travelling to Essendon for help. The community around Caroline Springs has demographics anticipating a population the size of Canberra moving in by 2041. This year from our Caroline Springs site we supported 95 families.

We are proud to have support workers available from 9am to 5pm Monday to Friday, in person at Essendon or by phone from all three sites.



# Our Programs

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**Our practice model is designed to achieve a common approach for professionals working with mothers to identify the most appropriate pathways into their local communities, resources and services.**



The Society grounds its practice and services model in a strength-based approach to focus on building adult capability. By identifying and building on existing strengths, abilities and assets we are able to work more effectively on active skill building to achieve more sustainable changes through improved confidence in parenting, increased community connections and greater social and emotional resilience. All of which are aimed to improve the social, emotional and health wellbeing for mothers and their children.

Our practice model is developing as we need to keep flexible and responsive to the needs of clients and the demands of meeting our requirements through government regulatory frameworks including accreditation standards.

In 2016, the Victorian government embarked on a plan of reform with a shared vision of “all children

*reach their full potential by living and thriving in safe and supportive families, where they have strong attachments to parents, kin, carers and community and can embrace their cultural and spiritual identity.”*

Our programs are aligned well to this vision and are designed to provide pathways to the appropriate resources and services for families.

This approach is often referred to as a continuum of supports and services, as families and practitioners are either entering, transitioning through or being referred to a pathway that best meets their general and specific needs. Hence, the importance for our flexibility and responsiveness to best support our staff and the families as they navigate the systems that are often made challenging due to various pressures or unintended consequences as a result of public policy.

# Our Programs

## Continuum of Supports and Services – and the need for a common approach.

When we talk about our work, we will often describe it in terms of building adult capability; the need for active skill building and how we work with a common approach for practitioners to align outcomes and objectives to best meet the needs of clients.

The Society’s continuum of supports and services has evolved over time

with key tenets underpinning the foundations over 50 years of never a wrong door for the mother and child; regardless of where a mother and child live, our services are open and available; from prevention through to intensive, and the need to navigate on behalf of families as well as actively advocating in their interests.

Victorian  
Government Road  
Map to Reform

Caroline Chisholm  
Society

### EARLY HELP PATHWAY

Emerging needs  
& vulnerability

#### Early Help Pathway

- Telephone Support
- Welfare Appointments
- Drop in
- Outreach – Engaging Wyndham Families
- Mentoring

### TARGET & SPECIALISED

Needs with increasing  
vulnerabilities or risks.

#### Targeted

- Pregnancy Care
- Early Parenting Support
- Home Visitation – Integrated Family Services

#### Specialised

- Homelessness
- Family Violence
- Intensive Support (200HRS)

### CONTINUING CARE

Children in enduring  
care arrangements  
who have experienced  
significant harm and  
will not be returning  
to their birth family.

# Our Programs



## Telephone Support

For 50 years the Society has been a community leader in being open and available to any mother with children who might otherwise be in need of assistance, care or support. Our Pregnancy Support offers free call telephone service supported by practitioners and is often the first point of contact a mother may be making at the time of her pregnancy.

## Welfare Appointments

Welfare appointments have been and are a unique service model across all three sites led by a team of practitioners with the support of social work placement students and in Shepparton, volunteers.

This unique service model of free access to time with staff, students and volunteers introduces a 'no wrong door' approach as appointments are scheduled through self-referral, hospitals and community agencies. With the presence of practitioners attending to welfare appointments, we have experienced a marked improvement in assessing for needs and issues that are often underpinning why a parent/carer or family may need to attend a service provider seeking material aid.

In 2018, we opened up a day a week at Caroline Springs for appointments and have seen a dramatic increase in demand for clothing, referrals and access to practitioners for assistance with homelessness and family violence.

## Highlights

Expanding our outreach  
– Caroline Springs

**95 WELFARE  
APPOINTMENTS**  
held this year

**3 LOCAL SCHOOLS,  
1 PRIMARY AND  
2 SECONDARY  
SCHOOLS**  
actively fundraising



**GRADE PREP  
CHILDREN  
RAISING  
OVER \$500**

worth of material supports  
including nappies and wipes





# Our Programs

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## Improving our community partnerships

- Four Master of Social Work students from the University of Melbourne and RMIT joined us for their student placements, with the opportunity to learn more about the importance of prevention and early intervention work, and in particular getting to put into practice their assessment skills when engaging for the first time with mothers.

Over the past 12 months drop-in demand has increased, with mothers and children arriving from violent home environments, seeking emergency accommodation due to the failures in housing supports for mothers and children; and in instances where a mum may have already been in contact but is now at a point of readiness to engage with services to support her in her parenting.

## Outreach – Engaging Wyndham Families (EWF)

### Drop In

In addition to Welfare appointments, often after a call from a hospital based social worker, a mum in crisis, or a referring community agency, drop-in is made available through the generous support of donations and corporate sponsors to ensure that there is never a delay in being responsive to the immediate needs of a mother and her children.

Often dealing with a crisis, our practitioners offer a calm and practical way forward, including the necessary steps required to navigate what can often be challenging systems to find the right resources.

EWF is an innovation in program design for the Early Help Pathway as it enables practitioners to connect through community networks with health and community professionals including child care programs and kindergartens, maternal and child health nurses. Through these networks parents are able to connect in a more immediate way to provide them with a brief intervention targeting what might otherwise be an issue with the potential to create more serious issues for the health, safety and wellbeing of their babies and young children.

# Our Programs

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Embedded in this practice is a pathway designed to avoid working with complex child protection cases by receiving referrals for early parenting support from universal services.

The benefits have been experienced not only for families but also for community practitioners who are able to identify a greater understanding of the issues through preliminary assessments aimed at mitigating the need to draw on more targeted or specialised interventions in high demand and not necessarily available to the family in a timely manner.

## Highlights

- Improved pathway referrals from internal and external programs including

the Society's Welfare appointments providing an opportunity to improve connection to a mum and her family. This mum was assessed for vulnerability while visiting for material aid supports and was referred into the brief contact work through Engaging Wyndham Families.

- Seven communities, 12 families and supports to refugee families, are all indicators of the benefit of the Early Help Pathway approach provided through the outreach approach, better connecting practitioners with community networks who are often the first point of contact for a family in need.

# Our Programs

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## Pregnancy Care

Our support focuses on prenatal health care, practical support, including prenatal health and education care and ensuring mothers are connecting to universal services.

Emerging from this work are issues of homelessness, violence, substance abuse and a lack of social connection. Mothers are often unsure on how to access prenatal health programs in their local community and might be facing a pregnancy crisis due to social and family pressures.

Our practitioners play a key role to navigate the systems through local services, medical and health networks, as well as social and housing supports.

## Early Parenting Support

Parenting issues are often identified at a key stage when mum is looking for advice and opens up as a result of making a visit for a pram or clothing. It doesn't take long before a mother is sharing that she isn't getting a lot of sleep because her newborn

isn't settling into a pattern for feeding or sleeping, and the toddler isn't able to sleep through the night. On further discussion mum soon reveals the whole family has moved mattresses to the floor and are trying to care for a newborn, toddler and sick elderly family member who has to move in for additional support. Dad is working shifts and the situation has now become unbearable for everyone.

## Highlights

### Learning & Development

- Investments into Learning and Development have provided practitioners with the opportunity to improve counselling skills and greater understanding on early pregnancy and supports, including perinatal mental health and anxiety.

### Outreach with impact

- Outreach provided across Victoria with a mum in crisis due to a diagnosis of Down syndrome to one of her two unborn children. Through a

# Our Programs

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quick response, practitioners were able to connect mum into the support network of expertise through Down Syndrome Victoria, providing education and personal support through the specialised family support team.

## Integrated Family Services (IFS)

IFS is a formalised home visitation program designed for families who have been referred, either through self-referral, community referral or child protection referral. The intervention designed for the family will be dependent on the needs of the family, and for CCS our specialisation is on improving confidence in parenting. From the time of our initial assessment

through the guidance, coaching and navigating systems approach, families are provided with the necessary supports they need over the course of, on average, 6 months. The focus is targeting an intervention when families experience challenges or more difficult, complex situations that may be impacting their capacity to parent; provide for the social and emotional needs of their children and are experiencing increasing pressure on their capacity and stability for family responsibilities.

## Highlights

- 53% of our clients felt they had a 'big increase' in their capacity to parent during the time we worked with them (up from 36% last year)<sup>1</sup>

1. As reporting using Outcome Star

# Our Programs

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## Homelessness

**In February 2019 the community were made aware of the awful crisis emerging in homelessness with emergency accommodation failing to meet the needs for our most at-risk and vulnerable members of the community.**



For the Caroline Chisholm Society, this is best appreciated through the plight of mothers presenting at the office in desperate need of clean, affordable emergency accommodation. Over the past year we have experienced a substantial increase in mothers arriving who have exhausted all avenues for emergency and temporary accommodation, often having been advised that there is no access to emergency accommodation or having to decline what is otherwise substandard conditions.

Through the generous donations the Society receives, our resources are often needed to pay for emergency placements in hotels, checked to ensure they are appropriate. The Society has been a leader in advocating through housing networks that we are no longer prepared to refer mothers and children to substandard hotels as appropriate for emergency accommodation.

The Society advocates for the Housing First principle. That is, address the housing needs as a basic right, ensuring housing is secured to then be able to focus on working with individuals and families to address the more complex issues impacting their capacity to provide for themselves and their children.

## Highlights

### **Improving our ability to be responsive in times of need**

- This year the Society across all three sites experienced several new cases of mothers and preschool aged children either sleeping in cars and/or couch surfing with friends.
- The Society invested additional practitioner time to respond to transitional housing agencies to work with mothers struggling with connecting to community resources to provide the necessary social and welfare interventions to support mothers to secure more stable and long-term accommodation.

### **Increasing referrals and episodes of supports**

- While the Society is funded to provide support for 13 cases per year, we doubled the number of families we have supported in 2018/2019.



# Our Programs

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## Family Violence

Since the Victorian Government's 2016 Royal Commission into Family Violence, a number of initiatives and funding have been directed to addressing the therapeutic needs for the women and children victims.

As reported in previous years, the Caroline Chisholm Society has been a leader in piloting Mothers in Mind© (MiM) and Children and Mothers in Mind (CMiM) as an intervention designed for women and children to respond to the trauma they had experienced by focussing on rebuilding the attachment between mother and child.

In response to growing demands for placements, the Society experienced an increase in mothers revealing during the course of home visitation work both their past and current experiences of family violence.

In addition to these demands, were the calls for assistance with mothers arriving in drop-in programs needing emergency accommodation being advised of shortages in the system to provide for them.

One of the growing concerns in working with victims of family violence is for women who are not able to access interventions where the perpetrator is involved. These cases

have become our most complex with current therapeutic interventions not designed or funded to support them.

## Highlights

### In her own words...

*"While I developed a rapport with mum, I would often admire her strength and resilience to be a single mother of these four beautiful boys. Although they each had their own strengths and great qualities, there was no denying that mum was running a tight ship which sank some days... Over the past year, we continued together to overcome the very complex and difficult issues due to ongoing family violence, the escalating challenging behaviours of the children, extreme financial hardship and risk of homelessness. Through the collaborative work with external specialist agencies for family violence, housing and disability, we had successfully achieved positive outcomes. As of June 2019, the family were relocated to a brand-new home which had room for the boys to grow and explore. Mum's mental health was visibly better, and she was thinking about re-entering the workforce or studying. She was also enjoying a new social and active life in the community... As we said our final goodbyes, I left mum to have her joyful belated housewarming and waved to her youngest child*





# Our Programs

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## Intensive Family Support (200HRS)

**An intensive intervention through 200HRs is an approach to work with families and children subject to repeated prior involvement with statutory child protection services. The intent is to work in partnership with Child Protection to achieve case plan goals focussing for an intense period of time to increase parent capacity, family functioning, achieve child safety and enhance conditions for child development.**

*who was now walking and following me out the door as he showed off his new skill."*

It is often during these moments when reading a practitioner's account of their work, that we are reminded of just how tough it can be, and when everything is mounting up, the impact this has on one's ability to provide not only for the needs of those much younger who need such intimate care and support, but also the impact this can have on a mother's own mental health.

### Highlights

#### Persistence and Sheer Determination

Mum came to our services as a referral for an intensive intervention due to a notable deterioration in her mental health and her use of prescription medication on the rise. With no rent being paid on her home and the conditions in the house becoming unliveable, a community report was made to Child Protection, and the children were removed from mum's care.

As with many families in crisis, the mum was not entitled to access emergency housing as the children

were not in her care. But there was no chance for the children to be returned to mum's care until she could provide stable housing. And so, a vicious cycle was underway.

Through the efforts of staff, a 13-week crisis accommodation was secured after an agency agreed to "stretch their rules to support the family". With this in place, mum attended every contact session with her children, complying with the court requirements with one clear goal in focus – to be reunited with her children.

In May 2019, with a return to court, the good news for mum was the return of her children to her immediate care.

Two months on... mum and the children are doing well. They have been supported to secure furniture and household goods and the children are getting involved with swimming and other community activities.

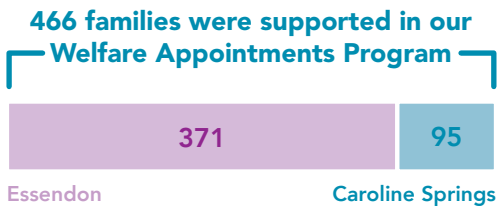
Along the way, they have also been supported to develop a budget to prevent future crisis to pay the bills, and they are well on the way to making other strong connections into local community networks.

# Our Clients in Melbourne

This year we supported over 731 families.

## Welfare Appointments Program

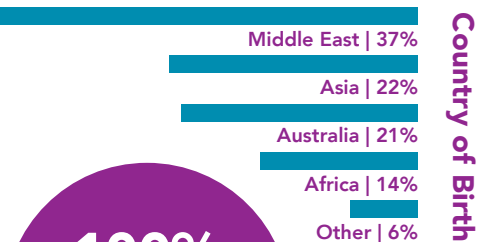
Since the introduction of CSnet on 1 February 2019, we have supported 1,052 people including 494 children.



with pregnancy counselling, support with new and pre-loved goods and linkage to support services.

Our clients most prevalent issues are associated with financial crisis, poverty and isolation, many of whom face challenges associated with being a migrant or refugee –

**60% OF ISSUES** reported fall into these areas



**79% OF CLIENTS**

were not born in Australia



"The caseworker was wonderful. She was kind and understandable"

35% were referred to an additional service for support

"This group does an excellent job, thank you"

**64% RATED OUR APPOINTMENTS AS EXCELLENT** and 23% very good





# Our Clients in Melbourne

## Family Services Program

265 CLIENTS AND THEIR FAMILIES WERE SUPPORTED



for the longer term in our family services, homelessness and intensive programs. We work with these families for approximately 6 months to help them set and achieve goals.

Our clients most prevalent issues are associated with parenting skills, financial crisis, mental health and family violence

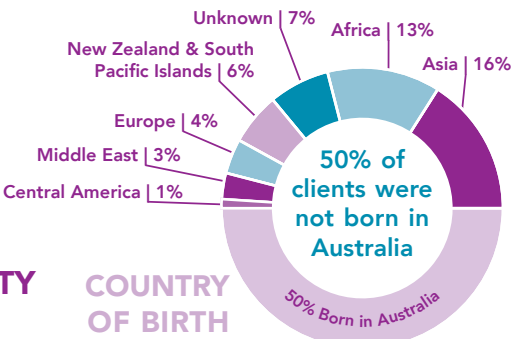
48% OF ISSUES REPORTED fall into these areas

53%

of our clients felt they had a



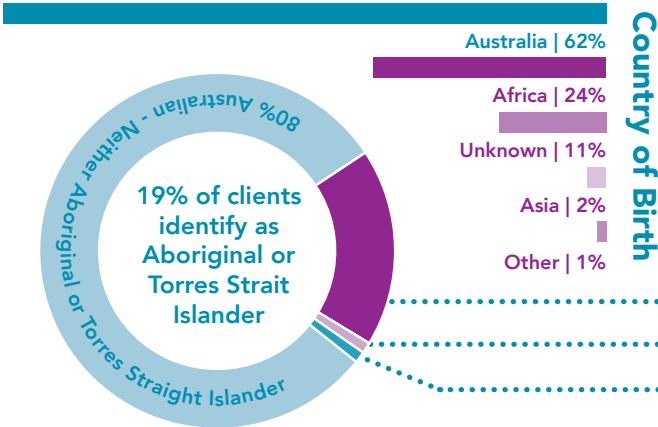
'BIG INCREASE' IN THEIR CAPACITY TO PARENT



during the time we worked with them (up from 36% last year)<sup>1</sup>

1. As reported using Outcome Star

## Homelessness Program



38% OF CLIENTS were not born in Australia

18% | Australian Aboriginal  
1% | Unknown  
1% | Torres Strait Islander

# Our Clients in Goulburn Valley

Known best for our community engagement and new and pre-loved goods, our service in Goulburn Valley is an innovative service working with a range of people.

We are very fortunate with the support of a team of volunteers with diverse life and work experiences who make it possible to deliver welfare appointments and material aid and goods. Overseen by our Lead Practitioner, our service in Goulburn Valley meets both the Human Services Standards and the QIC Health and Community Service Standards.

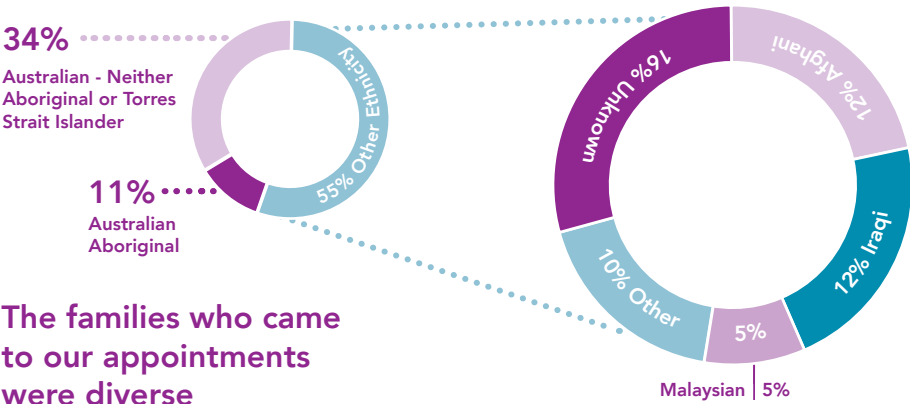
*"I enjoy the camaraderie with other volunteers. We enjoy each other's company whilst fulfilling a genuine need in the community. Volunteering is very rewarding, and I feel fortunate to be able to provide assistance to those in need"* – Volunteer, Goulburn Valley Pregnancy and Family Support Service

## 563 welfare appointments held

Given out 1,845 items or packs with total value of \$161,000



Goods given out include 611 PACKS OF CHILDREN'S CLOTHES, 38 prams and 35 car seats



# Our People

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## Our Board

**We are privileged to have a professional and dedicated voluntary Board who are committed to achieving our vision and mission.**



Michael Christie  
President & Director



Stuart Rowland  
Vice President  
& Director



Stephen Mullins  
Treasurer & Director



Phil Gatens  
Company Secretary  
& Director



Sarah Notaro  
Assistant Company  
Secretary & Director



Tess Fogarty  
Director



Wendy Hunt  
Director



Kate Rowsell  
Director



Paul Webster  
Director



Penny Badwal  
Director  
(since June 2019)

## Our Team



Jennifer Weber  
Interim CEO



Amanda Moore  
Director, Corporate  
Services

Led by Jennifer and Amanda, we are incredibly fortunate to have a team of hard-working staff who make our work possible. We cannot thank our staff enough for the commitment and passion they bring each day. The warmth and generosity of spirit they share with clients, supporters and our communities is admirable.

We owe enormous gratitude to our volunteers and members who make our work possible. Their kindness, generosity, dedication and unwavering support over many years never ceases to amaze us.

To the ladies of our regular Bonnet and Shawl Stall in Moonee Valley,

thank you for your many years of dedication and fundraising.

To our volunteers in Shepparton, you are the foundation of our service in the Goulburn Valley and your passion and kindness in supporting the local community has no limits.

We wish to acknowledge the passing of Mary Reilly, our friend and life member of the Society on 12 February 2019 and Aneta Moody, Former Lead Practitioner at CCS Goulburn Valley Pregnancy and Family Support Service between 2015-2017, who passed away on 31 July 2019. Our deepest condolences to their families, and may they rest in peace.

# Treasurer's Report

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This year has been one of personal celebration as Sally-Anne and I welcomed our first grandchild in May. It reinforced our belief that it truly does take a village to raise a child, and I express my gratitude to the staff, members, volunteers and supporters of the Society who work tirelessly to provide a unique and welcoming support service for families.

The Board approved a budgeted deficit in March 2018 for the following two financial years to invest across several areas of the organisation. Aligned to our strategy, this year we made a significant financial investment in our new Client Relationship Management System (CRMS) to better monitor our service outcomes and we have implemented additional quality oversight of our services and processes. For our people, we made additional investment in training and development to support our culture of learning. We increased our leadership capacity to allow additional focus on revenue generation. For our clients, we reopened welfare appointments in Caroline Springs and increased the opportunity for direct client contact with qualified practitioners at both Melbourne offices.

For the year ended 30 June 2019 the Society generated a net deficit of \$227,804 against a budgeted deficit of \$278,942. The Society has a strong net asset base of approximately \$3.3 million, underpinned by our two fully owned properties at 977 Mt Alexander Road, Essendon and 1 Darebin Place, Caroline Springs.

We are very grateful to those organisations which, and individuals who, provide financial assistance to support the Society's objectives. It is also important that we diversify our revenue stream further and this is a significant focus for our Board and Leadership Team. Donor support and fundraising enable us to support mothers and families with young children in need outside our government contracted commitments and where the Society has many capabilities to support our 'village' communities. In an environment of increasing costs and compliance, our cost base is constantly under review and further efficiencies sought to make the best use of our resources and assets.

# Treasurer's Report

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On behalf of the Board of Directors, I am pleased to present the audited financial statements for the year ended 30 June 2019. The full set of audited financial statements can be found on our website at [www.caroline.org.au](http://www.caroline.org.au). Our Statement of Income and Position is contained on the next pages.

Thank you to the Finance Committee and Amanda Moore (Director, Corporate Services) and her team for your support and service during the year with a special acknowledgement to Marie Panzera (Finance and Property Officer) for her dedication and contribution to the Society over the last 20 years.

Stephen Mullins  
Treasurer



# Our Financials

## Statement of Profit or Loss and Other Comprehensive Income for the year ended 30 June 2019

	2019 \$	2018 \$
<b>Income from Operating Activities</b>		
Revenue From Funding Bodies	1,910,429	2,428,397
Other Income	83,749	54,313
<b>Total Operating Revenue</b>	<b>1,994,178</b>	<b>2,482,710</b>
<b>Expenditure from Operating Activities</b>		
Employee Expenses	1,728,665	1,719,937
Program Expenses	92,550	120,757
Depreciation	107,069	104,243
Occupancy Expenses	53,871	48,572
Communications and IT	83,379	81,760
Travel Expenses	35,151	36,514
Motor Vehicle Financing Costs	-	859
Other Expenses	131,198	145,176
<b>Total Operating Expenses</b>	<b>2,231,883</b>	<b>2,257,818</b>
<b>Net (Deficit)/Surplus for the Year from Operating Activities</b>	<b>(237,705)</b>	<b>224,892</b>
Finance Income	9,901	10,031
<b>Total Comprehensive (Loss)/Income for the Year</b>	<b>(227,804)</b>	<b>234,923</b>

A complete copy of Caroline Chisholm Society audited financial statements are distributed at our AGM. The full set of audited financial statements can be found on our website at [www.caroline.org.au](http://www.caroline.org.au)

# Our Financials

## Statement of Financial Position as at 30 June 2019

	2019 \$	2018 \$
<b>Current Assets</b>		
Cash and Cash Equivalents	597,282	745,326
Other Assets	26,899	24,350
<b>Total Current Assets</b>	<b>624,181</b>	<b>769,676</b>
<b>Non-Current Assets</b>		
Property, Plant and Equipment	2,949,134	2,984,120
<b>Total Non-Current Assets</b>	<b>2,949,134</b>	<b>2,984,120</b>
<b>Total Assets</b>	<b>3,573,315</b>	<b>3,753,796</b>
<b>Current Liabilities</b>		
Trade and Other Payables	99,108	76,000
Deferred Income	54,774	35,083
Hire Purchase Liability	-	3,600
Employee Benefits	66,238	59,598
Other Liabilities	-	-
<b>Total Current Liabilities</b>	<b>220,120</b>	<b>174,281</b>
<b>Non-Current Liabilities</b>		
Employee Benefits	41,038	39,595
Hire Purchase Liability	8,556	8,515
<b>Total Non-Current Liabilities</b>	<b>49,594</b>	<b>48,110</b>
<b>Total Liabilities</b>	<b>269,714</b>	<b>222,391</b>
<b>Net Assets</b>	<b>3,303,601</b>	<b>3,531,405</b>
<b>Equity</b>		
Reserves	118,953	118,953
Retained Earnings	3,184,648	3,412,452
<b>Total Equity</b>	<b>3,303,601</b>	<b>3,531,405</b>

# Supporting Us

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## Every Mother Matters and Every Child Counts

There are many ways you can help us make a difference.

With your generous support we can continue to deliver on our promise to be there for vulnerable mums, bubs, children and their families as they seek our pregnancy counselling and support appointments, ongoing family support services and new and pre-loved baby and maternity goods.

### Make a Donation

No matter how small or large your generous donation will make a difference to the lives of vulnerable mums, children and their families as we support them through homelessness, family violence and mental health crises. Donate online at [caroline.org.au/donate-now](https://caroline.org.au/donate-now) Donations greater than \$2 are tax deductible.

### Become a Monthly Donor

Sign up as a regular donor and make an ongoing difference throughout the year. It is simple and straightforward online at [caroline.org.au/donate-now](https://caroline.org.au/donate-now)

## Join us as a Corporate Partner

Our Corporate Partners are critical to our service. There are many ways to get involved such as corporate volunteering, sponsorship of specific support programs and in-kind donations.

### Leave a Bequest

Leaving a bequest is a special and generous way of supporting Caroline Chisholm and makes a lasting impact in our work. Bequests will go directly to delivering our longer-term vision of creating respite care for mums and bubs in the West.

## Donate New and Pre-loved Baby Goods

We rely on the very generous donations from individuals and organisations of new and pre-loved baby goods. Our website contains details of donation drop off points and times, along with the pre-loved goods we can accept. If you are an organisation please give us a call to discuss beforehand.



# Supporting Us

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## Invite us to Speak

We love nothing more than being asked to speak at local schools, events and community gatherings about the need in our community and the ways we can all help.

## Fundraise on our Behalf

Please consider fundraising on behalf of the Society. Get involved, get creative and have fun. This year our supporters have held barbeques, morning teas, pamper days, community events and movie nights. Celebrate a special event by donating

instead of accepting gifts. We greatly appreciate local community groups and schools creating gift packs and donating new baby goods. If we can help, get in touch.

## Give the Gift of Your Time

The gift of your time is invaluable to us. Caroline Chisholm Society was born from the generous offering of one person's commitment and compassion to walk along-side and support pregnant women and young families. Get in touch online at [caroline.org.au/volunteer](http://caroline.org.au/volunteer) or give us a call.



# Contact Us

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## HELPLINE

Statewide – 1800 134 863

## APPOINTMENTS

(including pregnancy support, welfare support and  
new and pre-loved baby and maternity goods)

Shepparton – 03 5821 0826

Essendon – 03 9361 7000

Caroline Springs – 03 9361 7000

## SPECIALIST HOMELESSNESS SERVICE

03 9361 7000

Western Melbourne

## INTEGRATED FAMILY SERVICE

03 9361 7000

Western Melbourne

Brimbank / Melton

Engaging Wyndham Families – Early Intervention Program

Intensive Family Services

Thank you for supporting Caroline Chisholm Society.



1800 134 863  
[secretary@caroline.org.au](mailto:secretary@caroline.org.au)  
[www.caroline.org.au](http://www.caroline.org.au)

The pattern of this cover is inspired by the concept design for a quilt celebrating 50 years of Caroline Chisholm Society from the Lions Club of Quilters Victoria.