



Child Abuse Prevention Service

**CAPS
ANNUAL REPORT
2016/2017**

**Empowering families
to thrive**





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CAPS VISION

CAPS is the preferred and trusted provider of effective programs and services that build connections in families, so children can feel safe, supported and loved.

CAPS MISSION

Through its innovative approach to prevention and early intervention, CAPS fosters positive child development by:

- enhancing child wellbeing
- building resilience in children
- supporting connected families

MEMBERS OF THE BOARD



Chair – Andrew Grech Andrew was elected Chair in May 2012 and joined the Board as Treasurer in July 2010. Andrew holds a Master of Commerce and Bachelor of Economics degrees and a Graduate Diploma in Applied Corporate Governance.

He is a Chartered Accountant and spent more than ten years in public accounting in Australia and the Czech Republic before joining an international consulting company in their Business Process Outsourcing (BPO) business. Over several years in BPO, Andrew held general management roles with an emphasis on business start-up and people management. Since 2013 Andrew has worked in the secondary education sector.



Vice Chair – Anthony Blyth Anthony joined the Board in July 2012 and has been Vice Chair since April 2013. Anthony has a Bachelor of Commerce degree and Graduate Diploma in Applied Finance and Investments. Anthony has extensive experience as a management and technology consultant within the Energy, Government and Banking sectors.

He has managed major projects for Commonwealth Bank, NSW Roads and Maritime Services, ANZ, ING, BNP Paribas, Coles Myer, Energy Australia, Origin Energy, Powercor Australia and Integral Energy.



Secretary – Clare Perkins

Clare joined the Board as Secretary in June 2015. Clare has a Bachelor of Commerce (Accounting, Finance) from the University of NSW, is a Chartered Accountant and is accredited with the Australian Financial Markets Association. Clare has extensive experience across banking and finance, and has worked in Australia and the United Kingdom. Clare has worked in banking for over 10 years for companies including Westpac, UBS, Deutsche Bank, Credit Suisse, Citibank and Ernst & Young. Clare is also actively involved in both the graduate and mentoring programs across Westpac.



Treasurer – Daniella Traino Daniella joined the Board in August 2013. Daniella is an information security and risk management executive and has worked across Management Consulting, Banking and Finance, State Government and more recently High Tech Research & Development. Daniella is a graduate member of the Australian Institute of Company Directors (AICD) and holds a Bachelor of Commerce (Computer Science, Accounting) from the University of Sydney. She is a Certified Information Security Manager (Information Systems Audit Control Association ISACA) and a Chartered Accountant (Chartered Accountants Australia and New Zealand). Daniella is currently the lead executive for cyber security business development and innovation partnerships in Australia and Internationally for a large high tech research & development organisation.



Kieran Le Plastrier Kieran joined the Board in February 2017

Dr Le Plastrier graduated with Honors from Monash Medical School in 2002 and has since studied and trained in a diverse range of clinical settings including surgery, internal medicine, psychiatry, and community medicine. Dr Le Plastrier holds a Master of Psychiatry, is a Fellow of the Australasian College of Health Informatics, and is completing his general practice training in Sydney, Australia, where he also acts as Clinical Lead at Jewish House.

John Cowell John joined the Board in August 2013. He is General Counsel and Company Secretary for Healthdirect Australia. Healthdirect Australia is funded by Commonwealth, State and Territory Governments to deliver national tele-health and E-health solutions to the general public. John holds a Bachelor of Laws Degree and has more than 19 years' public and private practice experience in commercial and corporate advisory. He has held internal legal and governance roles in Australia, Bangladesh, China, India, Singapore, South Korea and the UAE.

Resigned Members for the period:

Ellen Stuebe resigned Dec 2016

CHAIR'S REPORT

Dear CAPS supporters,

2016 -2017 was the second year of our current strategic plan and proved to be a fruitful year indeed. Already it has yielded much in terms of strengthening the basis for how CAPS enhances child wellbeing, builds resilience in children and supports connected families.

Jeff and his team have clarified the CAPS Theory of Change, undertaken a comprehensive review of all CAPS programs and completed an in depth review of programs both in Australia and abroad, which could enhance the CAPS service offering.

All the while, volunteers have continued to flock to CAPS to assist our staff in these new programs and activities. It is heartening in this Annual Report to hear from two recent volunteers and their view on the work done at CAPS.

Much, of course, remains to be done and in the third year of the strategic plan we are eager to see the local launch of an overseas program that will strengthen families and the parent-child bond – an essential foundation for a thriving childhood.

In the coming year, the finalisation of the funding strategy and the involvement of new sources will increase the long term sustainability of CAPS. This funding will supplement the ongoing and much appreciated financial support of our existing funders and donors.

In its oversight role, the CAPS Board continues to be enthused by the developments made by Jeff and his team. The CAPS Board is a small and stable group strongly aligned with the direction of the organisation. We are pleased with the reach of CAPS activities.

While governance of an organisation comes with many concerns, it is immensely satisfying to be part of the evolution at CAPS. This Annual Report provides some insight into the children, families and communities which are positively impacted by the work of CAPS. I trust that you will be similarly impressed.

A big thank you to all CAPS supporters, in whatever capacity you have helped on our journey in 2016. I also extend a big thank you to Jeff and the team who have taken us there.



Andrew Grech
CAPS Chair
CA, FGIA, MCom, BEc.

“This Annual Report provides some insight into the children, families and communities which are positively impacted by the work of CAPS.”

GENERAL MANAGER'S REPORT

Dear CAPS supporters,

CAPS 2016 -2017 year was a year of development in CAPS, establishing a great foundation for the next three years.

Achievement of strategic goals, financial security, and development of new and innovative programs has been our focus during 2016-2017.

CAPS financial position has been assured with CAPS securing the Department of Family and Community Services ongoing funding with the Board agreeing to sign a service contract until 2020.

We have also returned a small surplus for the 2016-2017 year, demonstrating sound financial management, and an increase in securing club grants and philanthropic grant funding. This has been as a result of polishing our application writing process and engaging Trent Hammond as a grant writer.

CAPS Theory of Change has set the platform for CAPS to enhance our service delivery with our flagship program Safe Children, Safe Families and develop and refinement of measurement tools.

Our Theory of Change enlightens the development of new and innovative programs, such as our Thriving Families Project, which incorporates attachment based programs that are evidence informed and encompass didactic educational platform for young, new and vulnerable families.

The CAPS Theory of Change, based on attachment theory and the neuroscience understanding of trauma, provides the basis of programs we use with new parents

and parents-to-be to educate and support their child rearing practices. These programs enhance children's sense of security within the family unit, thus reducing negative relationships and impact by trauma. Raising children with secure attachment builds healthy adults with substantially healthier adult relationships and family resilience.

We continue our mission of fostering positive child development by enhancing child wellbeing, building resilience in children, and supporting connected families through all of our work.

We strive for excellence within our Governance and management, as well as our clinical oversight, policies and procedures.

We promote safety for children, within the home and family environment, within our community and organisations.



Jeff Taylor

General Manager

B.A (Psych), Grad Dip Counselling, Cert IV TAE
Registered Mediator FDRP

STRATEGIC VISION AND PRIORITIES

JULY 2015 – JUNE 2019

FOCUS AREA

1 Service delivery excellence

We will consolidate our core service delivery portfolio with a focus on local excellence, delivering effective prevention and early intervention programs.

2 Funding diversity and sustainability

We will be financially strong, growing our income and be operationally efficient with the resources to support innovation.

3 Service innovation

We will identify and deliver a new set of evidence-based programs that increase child health and wellbeing and fit our core capabilities.

4 Empowered workforce

We will empower our people with the skills, expertise and resources to best meet the needs of our clients and build greater alignment between staff and the board.

5 Impact measurement and communication

We will clarify our theory of change and build our capacity to measure, evaluate and communicate our positive social impact and use this to improve service delivery and communication.



CAPS THEORY OF CHANGE

Government reports and community identified needs indicate that agencies such as CAPS need to develop a thorough understanding of how we make social change.

The impact of our programs are well documented in both research and in experiential evidence. However, we now need to show how these programs translate into social change.

We have developed a Theory of Change which outlines the specific theories and approach that we apply to make the change we desire to achieve in our quest to realise the CAPS mission.

The table on the next page summarises the key factors in our service logic.



CAPS Service Logic

Stakeholders	Activities	Outputs
Parents and carers New parents-to-be Prenatal and post-natal groups	<ul style="list-style-type: none"> • Education groups • Supported Playgroups • Mellow Parenting program • SafeChildren, SafeFamilies 	<ul style="list-style-type: none"> • # programs • # services • # referrals • # attendees • # services used • % material usefulness • % skills usefulness • % increase parenting skills
Children (0–5 years old)	<ul style="list-style-type: none"> • Wraparound service provision (Early learning Centres) • Primary prevention, prenatal support, post-natal parenting programs, Screening and assessment at Childcare centres • SafeChildren, Safe Families program • Mellow Parenting program 	<ul style="list-style-type: none"> • # children serviced • # screening conducted – speech, OT and hearing, sight • % of children recognition of feelings • % of safety situational awareness • % safety rules understood
Parents/Carers with Children (0–12 years old)	<ul style="list-style-type: none"> • In-person/online service delivery for individuals and groups 	<ul style="list-style-type: none"> • # programs • # services • # referrals • # attendees
Parents and/or carers	<ul style="list-style-type: none"> • Early intervention Case work, Childcare centre support services • SafeChildren, Safe Families program • Mellow Parenting program 	<ul style="list-style-type: none"> • Number of parents engaged in support services • Change measures for each family • Change measures for service groups • # programs • # services • # referrals • # attendees • # services used • % material usefulness • % skills usefulness • % increase parenting skills
Community service employees	<ul style="list-style-type: none"> • Professional development, training, and conference • SafeChildren, Safe Families program • Mellow Parenting program 	<ul style="list-style-type: none"> • Number of professional development sessions run • Number of participants
Community members	<ul style="list-style-type: none"> • Community development & education 	<ul style="list-style-type: none"> • Number of participants
Active referrals to services	<ul style="list-style-type: none"> • Face-to-face service delivery (individual & groups) 	<ul style="list-style-type: none"> • Number of programs and services referred to

	Outcomes (short term)	Outcomes (intermediate)	Outcomes (long term)
	<ul style="list-style-type: none"> Parents increased knowledge and skill Increase in the application of parenting skills Parents decreased daily hassles Parents increased wellbeing Improvement in parents difficulties and strengths 	<ul style="list-style-type: none"> Increase in social connectedness for children and families Improved parental mental health Improved child mental health 	<ul style="list-style-type: none"> Growth in child health and wellbeing Secure attachment, parent-child attachment
	<ul style="list-style-type: none"> Greater knowledge of child protection issues Increase in child and parent awareness Increase in child and parent connectedness and communication around safety issues 	<ul style="list-style-type: none"> Greater collaboration and support through parents and childcare centres. 	<ul style="list-style-type: none"> Improvement in safety network Decrease in child maltreatment Increase in family connectedness, increased child wellbeing and resilience Secure parent-child attachment
	<ul style="list-style-type: none"> Parents decreased daily hassles Parents increased wellbeing Improvement in parents' difficulties and strengths Children and families increased emotional maturity, and social confidence 	<ul style="list-style-type: none"> Children and families improved connectedness, communication skills Improved parental mental health Improved child mental health 	<ul style="list-style-type: none"> Decrease in child maltreatment Increased secure attachment processes
	<ul style="list-style-type: none"> Increase in community participation Increase in competency based parenting. Increase in family connectedness, increase in child wellbeing measures, increase in resiliency measures. Increase in parents' knowledge and skill Increase in the application of parenting skills Decrease in parents daily hassles Increase in parents' wellbeing Improvement in parents difficulties and strengths 	<ul style="list-style-type: none"> Improvement in individual and family relationships Improvement in family connectedness, healthy attachment in children and family functioning Increase in social connectedness for children and families Improvement in parental mental health Improvement in child mental health 	<ul style="list-style-type: none"> Decrease in child maltreatment, improved family relationships, social competence and participation Secure parent child attachment
	<ul style="list-style-type: none"> Increase in trust, confidence and skill of workers in the field. 	<ul style="list-style-type: none"> Increase in competence of community services workers 	<ul style="list-style-type: none"> Decrease in dependence on government services (especially child protection)
	<ul style="list-style-type: none"> Greater collaboration and cross referral 	<ul style="list-style-type: none"> Increase in childcare sector awareness Improvement in safety network for children 	<ul style="list-style-type: none"> Decrease in child maltreatment Earlier response to child maltreatment
	<ul style="list-style-type: none"> Sector integrated support 	<ul style="list-style-type: none"> Greater effectiveness and efficiency of the sector 	

SAFE CHILDREN SAFE FAMILIES (SCSF)

What it is

The SCSF program is a unique evidence-based program. CAPS is the exclusive provider of SCSF in the world.

The program uses a triad education model to ensure that the significant people in a child's life and the children themselves receive the appropriate information, education and skills to support the safety of the child, develop emotional maturity, social competence and improved communication about sensitive issues.

The purpose of SCSF is to promote child safety, prepare preschool children for formal education and provide an informed child safe network. It does this by providing adults with the information and skills they need to better protect the children in their care. It also improves the children's emotional maturity, social competence and communication skills.

THE SAFE CHILDREN SAFE FAMILIES PROGRAM 2016/2017

CAPS provides an essential primary prevention program that aims to prevent child abuse, enhance personal safety, develop emotional intelligence and enhance family and community connectedness for children, families and early childhood educators: The Safe Children Safe Families (SCSF) program has been implemented in early learning centres, pre-schools and playgroups since 2015.

The SCSF program for children 3 to 5 year old, consists of three sessions for pre-school aged children. These fun and interactive sessions cover topics such as identifying feelings, safe and unsafe feelings, safe and unsafe situations, safe and unsafe touches, the No Go Tell safety rule, and the Helping Hand personal safety network. The SCSF Parent Information Nights and the Professional Development workshops provide parents and professionals (respectively) with important information about what they can do to prevent child abuse and make the children in their care safer.

SCSF is designed to mitigate social disadvantage, build resilience and strengthen vital protective factors in young children, their families and their communities.

2016 – 2017 was a very busy year for the SCSF program, with the program being implemented in over 26 early learning centres, pre-schools, playgroups and one primary school in the Sydney region and further afield in Berry Springs, Northern Territory. Evaluation data from the SCSF continues to be collected, with both the qualitative and quantitative feedback indicating extremely positive results. Examples of feedback collected from adult participants in the SCSF program include the following:

Through this session I came to the realisation that the prevention of child abuse should be of number one priority across our nation. I have been an Early Childhood Educator for the past 5 years and it was not until this training provided by CAPS that I actually understood the severity and importance of this issue. This program is absolutely fantastic and I recommend it to all.
(Early childhood educator).

I believe this kind of educational program is helpful in opening dialogue between my work peer group and discussion and knowledge can be very helpful in identifying risks and behaviours.
(Early childhood educator).

Very informative and well delivered. Information given allowed us as a team to reflect in our practice and observation of children in our care. Thank you
(Early childhood educator).

I really like the resources shown in the educational seminar that we can introduce to the children aged 3-5 years old. The picture books and laminated pictures of safe and unsafe scenarios and good and bad feelings are useful and informative resources (parent).

Even though the content is confronting, it is very important and serves as a reminder to be aware of behaviour that may signify a child's experience with abuse
(Parent).

I found it very practical and easy to relate to everyday communication with my daughter (parent).

SAFE CHILDREN SAFE FAMILIES FOR CHILDREN WITH SPECIAL NEEDS

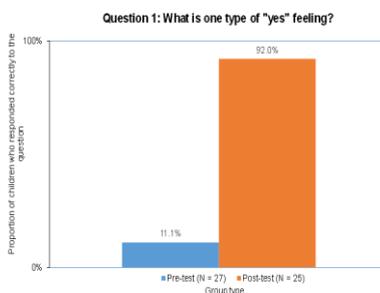
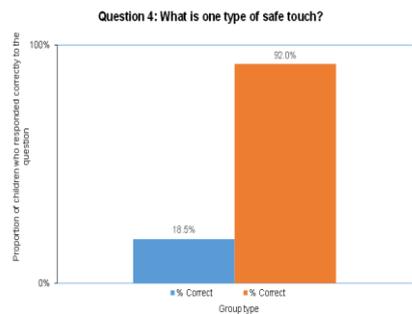
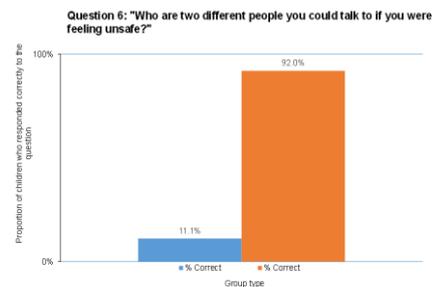
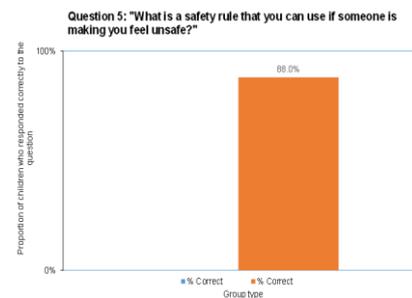
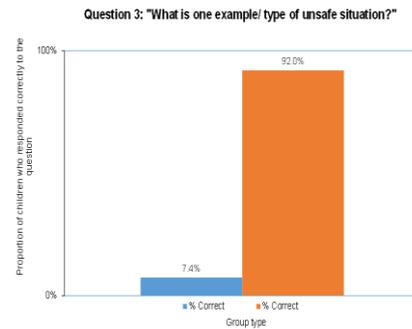
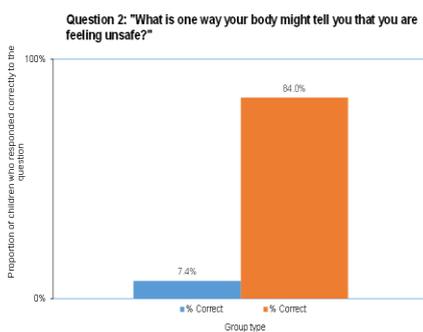
Children with special needs are particularly vulnerable to abuse and exploitation. International research has reported that up to 69% of girls and 30% of boys with an intellectual disability experience sexual abuse before they turn 18 years old (Senn, 1988). Personal safety education for children with special needs, their parents and carers, and early childhood educators is therefore especially imperative.

The SCSF program was implemented at Plumtree Preschool, including the original program as well as a follow up "booster" program. Professional staff from Plumtree participated in the SCSF Professional Development workshop. Pre and post program data was collected from the children, including after the "booster" SCSF program.

Data was collected from approximately 27 pre-school-aged children attending Plumtree preschool. Six questions relating to key personal safety concepts were asked before the program ("Pre") and then at the end of the program ("Post"). The questions were verbally administered by the Primary Facilitator and the answers collected and recorded by the Co-facilitator. The children's knowledge of key personal safety concepts was measured by their responses to six questions.

Children's knowledge of personal safety improved greatly after participation in the SCSF program. The children became much better at identifying feelings, safe and unsafe situations and their safety network and actions to take.

Pre and post test data from the original and booster programs for children are presented in the graphs overleaf.

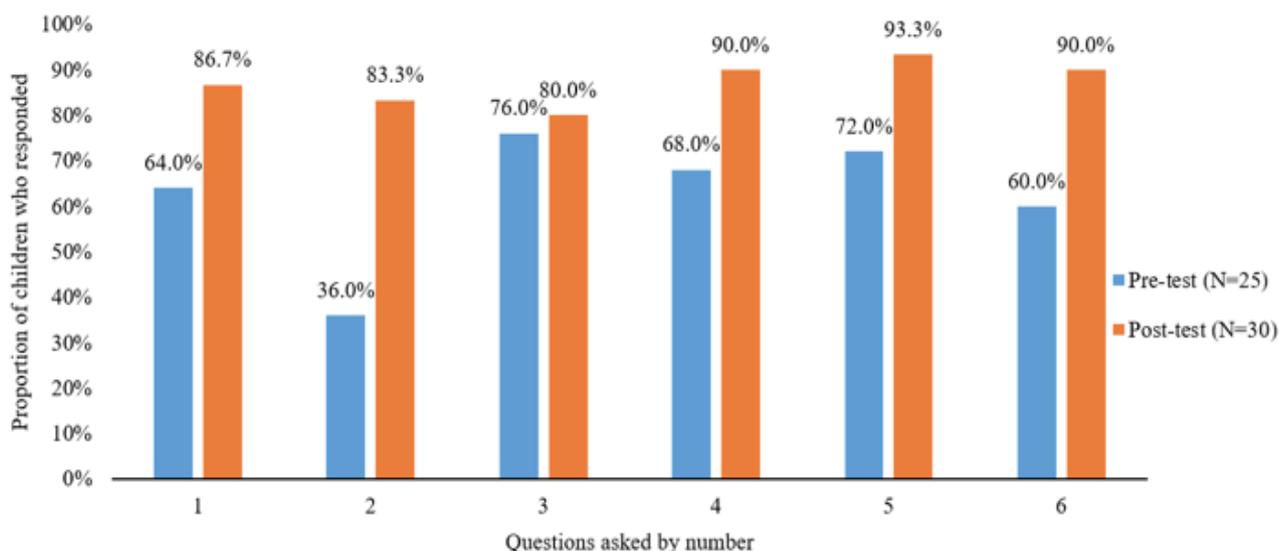


SCSF "BOOSTER" PROGRAM FOR CHILDREN WITH SPECIAL NEEDS

The SCSF "Booster" program was implemented with the children approximately three months after the original program and included revision of the SCSF content with the inclusion of the SAFE book series (NSW Office of the Children's Guardian). At least 25 3-5 year old children from Plumtree Preschool participated in the 3 session "booster" program. The Pre and Post test questions were used in the Booster evaluation and the results are presented in the graph below.

Safe Children Safe Families program at Plumtree Preschool: Personal safety programs are especially important for children with special needs.

The results of the preliminary evaluation of the SCSF program implemented within Plumtree Preschool indicate that the community benefits from a specialised child abuse prevention program for children who have special needs. Preliminary results suggest the SCSF program is effective at increasing the knowledge and skills of children's personal safety. Booster programs, enable knowledge and skill gains to be maintained over time.



Parents, carers and early educators who have participated in the SCSF program have provided overwhelmingly positive feedback.

SCSF RESULTS AND FEEDBACK

The below is a summary of the critical questioning analysis of children’s responses to six structured questions. These questions were given both pre intervention and post intervention, representing knowledge, awareness and application of safety techniques.

The purple colour demonstrates the effectiveness of the children’s retention of the material after three sessions with regard to the six key safety areas:

Key safety area	Australian Early Developmental Census	Before	After
1. Emotional recognition	Emotional Maturity development	6.5%	83.6%
2. Warning sign feelings	Emotional Maturity Development	6.2%	73.8%
3. Safe and unsafe situations	Social Competence	12%	82.9%
4. Safe and unsafe touches	Social Competence	6.5%	81.5%
5. Safety Rule knowledge and application	Communication Skills	9.4%	79.2%
6. Safety network	Social Competence and Communication skills	14.9%	83.6%



PARENTING PROGRAM FOR MANDARIN SPEAKERS IN ASHFIELD

In the CAPS tradition of reaching out to Culturally and Linguistically Diverse (CALD) communities, CAPS staff facilitated a parenting program for Mandarin speaking people.

The program ran for four sessions across four weeks. It included a one-on-one meeting for every participant, plus two telephone follow up support sessions.

The one-on-one meeting and follow up telephone support provided participants a chance to reflect on their lives, emotions, values, and provided encouragement to the parents to keep up their practice of new skills.

The program introduces skills for parents to use in when they have difficulties with their children. It also shows parents how to embrace and support their child's development through environmental and learning stimulus.

During the program, parents shared how they interacted and communicated with their children at home.

The participants also obtained awareness of their own emotions and behaviours that helped them improve the parental-child relationship.





VOLUNTEER INVOLVEMENT

Volunteers are essential to CAPS's success. They generously offer their time, skills and expertise to deliver a vital service to those in need. During the financial year we had 30 different volunteers across that period.

Volunteers contribute in many ways. They:

- facilitate the playgroup
- assist with childcare during group activities
- document statistical information
- serve on the Board
- organise and maintain office resources
- assist with administrative tasks, and many other activities.



CAPS' SUPPORTERS

CAPS would like to thank the following organisations and individuals for their kind support:

Organisations

NSW Department of Family and Community Services
The Cornucopia Committee
Myer Stores Foundation
Collier Charitable Fund
Wests Ashfield Leagues Club
Guildford Leagues Club
Club Ashfield
Burwood RSL Club
Strengthening Families, Resourcing Parents
Inger Rice Foundation
Petersham RSL
Club Five Dock
Campsie RSL Club
City Tattersalls Club
Ashfield RSL
St Johns Park Bowling Club
Dooley's Lidcombe
Rotary Club of Campsie
Auburn Council

Individuals

We thank the many people who have generously provided services and made donations to CAPS this year, and in particular to Margaret Cantor for her ongoing and valuable support of CAPS, and to Lorraine Levy and Norma Gillespie-Gray, for their dedication and commitment to service.

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Empowering Families to thrive

CHILD ABUSE PREVENTION SERVICE (SYDNEY) INC