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**Comparing areas of commonality and distinction
between the national practice models of
Meitheal and *Signs of Safety***

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1.0 Introduction

In this document, a characterisation is provided on the central elements/principles that are contained within the Meitheal and the Child and Family Support Networks and Signs of Safety practice models. Both represent two distinctive national practice models within Tusla's service delivery system of Family Support and Child Protection. In the case of Meitheal, this model functions as part of Tusla's Programme for Prevention, Partnership and Family Support. While the Signs of Safety practice model is operating within the confines of Tusla's Child Protection and Welfare Strategy. Therefore, our primary emphasis in this context is to highlight areas: of alignment/overlap; where there are distinctions; and how both practice models complement each other.

In the following sections, this document presents:

- The central elements of the Meitheal Model within the Programme for Prevention, Early Intervention and Family Support.
- The core elements and principles contained in the Signs of Safety Practice Approach.
- Identifying areas of commonality between the National Practice Models of: Meitheal and Signs of Safety.
- An outline of where Meitheal and Signs of Safety fits within Tusla's Clear Response Pathways along the Continuum of Need.

2.0 Central elements of the Meitheal Model within the Programme for Prevention, Early Intervention and Family Support

As a national practice model, Meitheal functions as an integral part within the Programme for Prevention, Partnership and Family Support¹. One of the central objectives of the Programme is to ensure that families throughout the country receive preventative and early intervention services at a localised level. In this context Meitheal is a National Practice Model to ensure that the needs and strengths of children and their families are effectively identified and understood and responded to in a timely way so that children and families get the help and support needed to improve children's outcomes and realise their rights. It is an early intervention, multi-agency (when necessary) response tailored to the needs of an individual child or young person.

¹ In addition to Meitheal, the PPFS Programme contains four other work strands which includes: Parenting Support and Parental Participation, Children's Participation, Commissioning and Public Awareness.

In this context, the principles of the PPFS and key commitments of Tusla are outlined as follows:

1. To focus on the wishes, feelings, safety and well-being of children while abiding the principles as set out in legislation (i.e. Children's First: National Guidance for the Protection and Welfare of Children, 2011).
2. To provide support at the earliest point with focus concentrated on family strengths and capacities.
3. To focus, with all service providers, on improving outcomes for children and families and tracking progress and results.
4. To strike a balanced approach between developing primary prevention and early intervention services whilst maintaining services at other levels of need. Tusla will ensure that services at higher levels of need are adequately funded.
5. To be mindful of the latest research about what works well for families and what families need when planning, monitoring and evaluating services.
6. To work in partnership with children, families, communities, child and family practitioners and other agencies; statutory, community and voluntary.
7. To ensure services will be cost-effective and will demonstrate value in terms of promoting better outcomes for children.
8. To ensure practitioners and services promote human rights and social inclusion, addressing issues around ethnicity, sexuality, disability and rural/urban communities.

(Tusla, 2017a: 5)

In achieving these objectives, Meitheal as a national practice model operates a process-based system. It represents an approach which can be applied by community and voluntary sector organisations, by Tusla and other statutory agencies (Cassidy, Devaney and McGregor, 2016). This process is facilitated through a set of principles and structures which serve to ensure that the type of support a family can expect to receive is the same across the country irrespective of the integrated service area they live in (Tusla, 2015). In Table 1 below, the core elements and principles of the Meitheal national practice model are outlined.

Table 1: Central Elements and Principles contained in the Meitheal Model.

<p><i>Inclusivity in the Meitheal model</i></p>	<p>The Meitheal model privileges the voices of parents/carers (i.e. Participation in Meitheal Review Meetings) and children (i.e. through tools such as My World Triangle) and recognises them as experts in their own situations. As such, the Meitheal process serves to assist them in identifying their own needs and ways of meeting them.</p>
<p><i>Voluntary Process</i></p>	<p>All aspects of the Meitheal process are led by the parent/carer and child/young person, from the decision to enter the process, to the nature of information to be shared, the outcomes desired, the support delivered, the agencies to be involved and the end point of the process.</p>
<p><i>Strengths-Based Tool</i></p>	<p>Meitheal is a strengths-based approach that identifies the strengths and needs of children and young people and provides coordinated multi-agency support to families and children if necessary. This approach emphasizes the child’s strengths, resilience and developmental needs in the context of their family and community.</p>
<p><i>Partnership in meeting the Needs of Children, Young People and Families.</i></p>	<p>The establishment of Meitheal and Child and Family Support Networks form a central component in the implementation of an area based approach to the PPFs Programme and in supporting children and families on a continuum of need. The CFSN, as multi agency networks, are responsible for the setting up of local networks which include statutory services (i.e. Garda, HSE, Dept. of Education) and the Community and Voluntary Sector. In exercising its functions successfully, CFSNs are required to work in partnership with families to ensure that there is <i>no wrong door</i> for families to access support and services at a local level.</p> <p>This process also involved:</p> <ul style="list-style-type: none"> • Dedicated co-coordinators to facilitate the implementation of Meitheal and support parents to access support services: • Enabling collaboration and partnership through agencies and/or local community and voluntary sector within the CFSN’s membership and in the delivery of services: • Developing the CFSN’s as an integrated and cohesive support system: • Facilitating the coordinated development of Meitheal, through the CFSN, in identifying a family’s needs and strengths.
<p><i>Meitheal Review Meetings</i></p>	<p>When a multi-agency Meitheal process is organised regular meetings should take place with all the participants in the Meitheal. Their main purpose is to review progress to date and develop action plans for helping a child, young person or family to reach their desired outcomes. They cannot be held without the presence of one parent.</p>
<p><i>Lead Practitioner</i></p>	<p>The lead practitioner is a key person in the Meitheal process. Typically they are expected to have a previous relationship with the family who are participating in a Meitheal, and they are responsible for initiating a Meitheal with a family, which includes completing the required documentation. In addition, they are expected to take a lead role in liaising with the family and other members of the Meitheal process.</p>

(adapted from Tusla, 2017a; and Cassidy, Devaney and McGregor, 2016)

3.0 Core elements and principles contained in the Signs of Safety Practice Approach

At the outset, the signs of safety practice approach aims to take a constructive cultural approach around child protection organisation and practice. An important component in this context is the use of specific practice tools and processes where professionals and family members can engage with each other in partnership in addressing issues of child abuse and neglect. As such, maintaining a strong constructive working relationship between professionals and family members, and between professionals themselves is a key precursor to facilitating effective practice in the process of keeping children safe from harm. In Table 2 below, some of the central elements and principles contained in the Signs of Safety Practice Model are outlined.

Table 2: Core elements and principles contained in the Signs of Safety Practice Model

<i>Risk Assessment</i>	<p>Providing a practice framework that utilises a comprehensive approach to risk assessment which ensures that:</p> <ul style="list-style-type: none"> • It is simultaneously forensic through exploring harm and danger with the same rigour as exploring strengths and safety • Brings forward clearly articulated professional knowledge while equally drawing upon family knowledge and wisdom • Undertakes risk assessment with the full involvement of all stakeholders, both professional and family • Is holistic in that it naturally brings everyone, both professional and family member, to the assessment table.
<i>Signs of Safety Assessment and Planning</i>	<p>A specific set of rules and arrangements created by parents and support persons which describes how the family will live its everyday life as a means of showing children, the family’s own network and the statutory agencies that children will be safe into the future. Some of the elements in this context include:</p> <ul style="list-style-type: none"> • <i>Preparation</i> – when undertaking a safety planning process with parents, all key professionals must be committed and know what their role will be in the process. • <i>Signs of Safety framework for inquiry</i> – this involves investigating what the primary concerns of children are in terms of past harm, future danger and complicating factors. Additionally, it also takes into consideration what has been working well by way of existing strengths and safety along with assessing future safety needs. • <i>Establishing a working relationship with the family</i> – building safety plans that are meaningful requires establishing a robust working relationship between child protection professionals and parents/families. <p>Equally significant in this context is the establishment of shared goals and a trajectory of clear steps with measurement scales. As such, this represents a form of mapping which focuses on the critical worries of children and what is working well.</p>
<i>Involvement of a Lifelong Network</i>	<p>Involvement of everybody that has a natural connection with children as a means of leading to effective and lasting safety and healing which includes kin, families, neighbours and professionals (teachers, family doctor, etc.). On the part of practitioners, this involves the use of methods to find and involve support networks available to child protection professionals.</p>
<i>Involvement of Children</i>	<p>Signs of Safety community of professionals and agencies both develop and continually refine the tools and processes which give children a strong voice in child protection work and to more actively involve them in assessment, in understanding why professionals are intervening in their lives and safety planning. The tools used are: My Three Houses Tool; Fairy/Wizard Tool; Words and Pictures explanations; and Child relevant safety plans.</p>

<i>Constructive Working Relationships</i>	Establishing constructive relationships both between professionals and families and between professionals themselves is seen as a crucial component for effective child protection practice. The success of the Signs of Safety Practice Model has been its provision of clear and detailed guidance as a means of assisting practitioners in exercising their statutory roles rigorously while working collaboratively with families and children.
<i>Practice-based Evidence and Learning Organisation</i>	Signs of Safety has evolved to research what has actually worked for the service deliverer and service participant. Thus, this places the Signs of Safety within the traditional spheres of action research, collaborative and appreciative inquiry, practice-based evidence, and critical best practice. As a learning organisation, there is a strong emphasis on affording staff the opportunity to grow and develop within an environment that supports a learning culture.

(adapted from Turnell and Murphy, 2017b and Tusla, 2017).

4.0 Identifying areas of commonality between the National Practice Models of: Meitheal and Signs of Safety

When reviewing the operation of both models within the child protection and welfare system, it is clear that both models address different levels along Tusla’s continuum of needs framework (see section 5.0 below) in terms of preventative family support and child protection services. However, the operating principles of *partnership, the building of strengths-needs based model, the inclusivity of children, evidence based practice* and *stakeholder collaboration* are aligned in both models.

In Table 3 below, an outline is provided of where there are clear areas of alignment/overlap and points of distinction between both practice models. Furthermore, it is also highlighted how both models complement each other.

Table 3: Areas of commonality between *Meitheal* and *Signs of Safety Practice Models*

Meitheal	<i>Relationship between parents and practitioners</i>	Signs of Safety
	Both models advocate for the growth of positive relationships between practitioners and parents/families through encouraging engagement with parents (i.e. Signs of Safety Assessment and Planning: Social Worker and Parent/families; Meitheal: Parent and Lead Practitioner). This forms a significant element in advancing towards a partnership and collaborative approach in terms of advancing the well-being and outcomes of children, young people and families.	
	However, what distinguishes both approaches is that while Meitheal stress parental involvement as <i>voluntary</i> , this is not the case within the Signs of Safety practice model.	
	<i>Emphasis on building a strengths-needs based model</i>	
	Through the development of constructive relationships between Parents, the family and Practitioner both the Signs of Safety and Meitheal practice models place a significant emphasis on parental and family <i>strengths</i> and what has been working well. The positive relationship developed also demonstrates how both models approach the creation of a sustained exploration of what the <i>needs</i> are in regards to the child/young person/family.	
	<i>Inclusivity of Children</i>	
The adoption of a child-centred approach to service delivery is clearly apparent in both the decision-making processes. Both the Meitheal and Signs of Safety practice models privilege the voice of the child through the provision of tools and practice guides. In the case of the Meitheal model, tools such as <i>My World Triangle</i> is utilised, while the Signs of Safety Practice model has adopted tools such as <i>My Three Houses</i> . Although both models come from a differing viewpoint (i.e. Signs of Safety approach comes from the perspective of <i>Child Protection</i> and Meitheal from the viewpoint of <i>prevention, early intervention and family support</i>) both share a commonality in their drive towards achieving positive impacts and outcomes for children and young people.		
<i>Evidence Based Practice</i>		
Both models place a significant emphasis on the building of a strong evidence base as a means of helping professionals and child welfare and protection. In the context of Meitheal, there is a clear focus on the provision of evidence informed prevention and early intervention services. While the Signs of Safety model fosters evidence based practice through documenting constructive practice as described by frontline practitioners, parents and children. Thus, the focal point is on practitioner and recipient defined best practice.		
<i>Stakeholder collaboration/Involvement of Lifelong Network</i>		
In observing the operation of both Meitheal and the Signs of Safety: Assessment and Planning practice models, it is clear the there is a strong emphasis on adopting an ecological stance when assessing the needs of children, young, people and families. Under the Signs of Safety model, there is a focus on involving every possible person who has natural connections to the child (kin, friends, neighbours and professionals (teachers, family and doctor)). This is also similar to the Meitheal process, where the needs of children and young people are identified and supported through a variety of practitioners.		
<i>Adopting a spirit of inquiry</i>		
When reviewing the adoption of the <i>Munro Maxim: Thinking Critically, Fostering a Stance of Inquiry</i> , another noteworthy commonality exists between both models. Under this perspective, there is an emphasis on moving away from a paternalistic approach to child protection to a vision which requires all processes that inform practice to foster a questioning approach or spirit of inquiry as the core professional stance of the child protection practitioner. This is similar to the Meitheal approach and the existence of <i>Meitheal Review Meetings</i> , where multi-agency participants become involved in the development of action plans for helping a child, young person or family reach a shared understanding of what needs to be done in the improvement of outcomes.		

5.0 Clear Response Pathways along the Continuum of Need.

In identifying where the national practice models of Meitheal and Signs of Safety fits within the wider Child Protection and Welfare System, Tusla's *Clear Response Pathways along the Continuum of Need* framework offers descriptor of the remit and context in which both approaches come into force. As Table 4 outlines below, services within this framework are delivered on the basis of low, medium or high prevention, the aim being to ensure that children and families receive integrated and high quality services at the earliest opportunity across all levels of need. The Meitheal national practice model is depicted on the continuum as *low-medium prevention/level of needs*. While the Signs of Safety practice approach is contained in the *medium prevention services/level of needs* strand. Within this framework, Tusla maintains that the principles of participation, partnership and collaboration in service delivery formulated by the Meitheal and Signs of Safety models are practiced across the three levels (Tusla, 2017).

However, it is important to note that differentiating between low, medium and high levels of need is not always straightforward. This in turn highlights the need to be cognisant of the distinction between *family support* and *child protection/risk management* when identifying a level of need along a continuum. In defining the essence of family support, Dolan et al. (2006: 16) highlight that:

“...The primary focus of [family support] services is on early intervention, aiming to promote and protect health, wellbeing and rights of all children, young people and their families. At the same time, particular attention is given to those who are vulnerable or at risk”.

This contrasts with a Child Protection/Risk Management focus where emphasis is placed on the processes associated with protecting children identified as either suffering or likely to suffer significant harm as a result of abuse or neglect (HSE, 2011).

Table 4: Clear Response Pathways along the Continuum of Need framework.

	Low Prevention Services	Medium Prevention Services	High Prevention Services
Service Delivery Focus	Where a child or young person is identified as having additional needs, supports are provided as a means of reaching their full potential. Additional supports in this instance may relate to a variety of issues such as health, education or social issues.	At this level, a focus is placed on providing parents with support in their parenting role through targeted and intensive parenting and therapeutic supports. In the event of problems being more entrenched, clinical guidance from social care and health care professionals are provided. In this instance it is clear that there is an emphasis on the management of risks in conjunction with supporting parents.	At this level, the child or young person who may be at risk of harm will require specialist assessment from a collaboration of experienced professionals. This strand is aimed at children who are on the edge of alternative care or who are currently in alternative care.
Thresholds	Reasonable grounds for concern	Welfare or Protection Response	Significant Harm requiring Alternative Care
Medium of Service Delivery	This strand is concerned with providing a range of parenting and family support services through the funding of the community and voluntary sector programmes. Through Tusla partnership with other agencies in the implementation of Meitheal, this enables the strengths and needs of children and families to be identified and in the process bringing a team around the child to deliver preventative support.	In this strand, Tusla are implementing the Signs of Safety Practice approach as a way of enabling child protection practitioners to adopt a rigorous focus on child safety in partnership with children, families and a wider network of support. In responding to situations where children suffer abuse, this approach acknowledges the constructive working relationships between practitioners and families and between practitioners themselves in the effective delivery of services.	Within this strand Tusla is implementing Creative Community Alternatives. The programme provides alternative care for children. It is delivered by a multi-disciplinary and highly adaptable team and services, underpinned by the Signs of Safety process. Creative Community Alternatives also aims to develop the problem-solving skills, coping skills, and self-efficacy of young people and their family members. In this regard, there is a focus on integrating the young person into their local community and building the family's social support network.
Supporting Strategies	Area Based Approach Strategy and PPFs	Child Protection and Welfare Strategy	Alternative Care Strategy

(adapted from Tusla, 2017a)

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