



Summary of Consultation Process and
Strategic Implementation Plan
for the
Introduction of Community Families in
Ballyfermot, Chapelizod and Cherry Orchard
and
Parents' and Home Visitor feedback from the
Ballyfermot Community Families Pilot



The logo features the word "Liffey" in a teal, sans-serif font. Below it are three wavy lines in a darker blue color, representing water. Underneath the waves, the word "PARTNERSHIP" is written in a smaller, dark blue, all-caps, sans-serif font. The background of the page is white with large, abstract shapes in teal, blue, and yellow, outlined with thin yellow and blue lines.

Liffey
PARTNERSHIP



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- Generous funding and support provided by the Katharine Howard Foundation Children's Promise Fund to Liffey Partnership for this project.
- Commitment and active participation of Liffey Partnership staff, in particular Anne Fitzgerald and Liz O'Sullivan, in both the development of the Readiness Assessment and the Strategic Implementation Plan and assistance with our engagement with local stakeholders.
- Extensive contribution of the Project Steering Group members: Maria Hayes Tusla, Pamela Belton Tusla; Catherine Hanley HSE PHN; Alice Corbett DCC, Aoife Hanlon, DCC who so generously shared their professional experience and expert knowledge to the project and the contents of the report.
- Positive engagement of local community and statutory stakeholders working with children and families in the area and ABC Consortium members, including -

- ~ Ballyfermot MABS
- ~ Ballyfermot Dept of Social Protection
- ~ Familibase – Child, Parent and Youth service
- ~ Tusla PPFS- Manager and Family Support Workers
- ~ Local Parents/Home Visitors
- ~ HSCL of 3 Primary schools
- ~ HSCL 1 Post Primary school
- ~ School Completion Programme Manager
- ~ Saoirse Domestic Violence Service outreach worker
- ~ Ballyfermot Local Drug and Alcohol Task Force
- ~ Local TD and Councillor representative
- ~ Dublin City Council Childcare committee
- ~ HSE Child Health Programme Development Officer
- ~ Cherry Orchard Family Resource Centre
- ~ Early Years Services- focusing on supporting those with addiction

- 
- Constructive contribution of national statutory stakeholders whose targets and outcomes are addressed by Community Families, including -

- ~ TUSLA PPFS manager-
- ~ HSE Assistant Director of Public Health Nursing-
- ~ HSE Community Healthcare Network Manager
- ~ HSE-Senior Health Promotion and Improvement Officer
- ~ Tusla National Home Visiting Programme Manager
- ~ Local Elected Councillor DCC
- ~ Liffey Area Partnership CEO

While their insights and feedback were instrumental in shaping the final report, any omissions, mistakes, inaccuracies etc are the responsibility of the Early Learning Initiative, National College of Ireland



1. Introduction

In order to mitigate against significant milestone delays in babies and young children in the area, which is exacerbated by intergenerational trauma poverty, Liffey Partnership, awarded Early Learning Initiative (ELI), National College of Ireland (NCI), the contract to develop a strategic and operational plan, for an early intervention and prevention 'Community Families' home visiting programme in the Ballyfermot and Cherry Orchard areas. It was intended that this service would complement the current suite of wraparound supports being offered to families by Family Matters Area Based Childhood (ABC) Programme and other community and statutory partners in the area. This report summarises the process used along with the findings from a community review and consultation sessions, along with a Strategic Implementation Plan.

Aims:

This project sought to establish the key steps in Liffey Partnership readiness for implementation of Community Families (CF) and inform the final strategic plan.

Rationale:

- Gap in the provision of a community-based home-visiting service to/with perinatal parents in the Dublin 10 area.
- Since the Community Mothers service ceased in the area a number of years ago, there has been no replacement of this invaluable service, as a universal provision for expectant parents and parents of new babies.
- Additionally, primary care services and supports for expectant parents and parents of new babies are currently under pressure due to severe recruitment challenges.
- National statistics indicate key deprivation data for the Dublin 10 area, including higher than average rate of lone parent families, early school leavers and unemployment rates.

Dublin 10

2. Process

For the consultation process and strategic plan development, a community action research approach (CAR) was taken i.e. in collaboration with local stakeholders, we explored what is happening now, what is needed, how can it be implemented over the next 5 years taking the national and local context and resources into consideration. Incorporating national developments including the establishment of the Children’s Fund and the National Home Visiting Office in Tusla, this enabled us to engage in meaningful conversations with local and national stakeholders and to ensure co creation and ownership of the final Strategic Plan. A trauma informed approach and infant mental health lens was used during all stages of this process.

This process consisted of three stages: Exploration & Consultation; Installation & key requirements for implementation and Strategic Plan to move to Initial and Full Implementation. The following sections outlined the key actions under each stage.

2.1 Exploration & Consultation

The exploration and consultation stage began with an updated scoping of the Perinatal Home Visiting local and national policy and practice context. This was a desk review of what is happening on a national and local level, incorporating documents, policies and services locally and nationally. In addition, a desk review of the Community Families Programme requirements was carried out with an updated readiness assessment for a new site developed. These were used as the starting point for discussions at consultation sessions.

Consultations were carried out through a mix of Steering Group and consultation meetings with key stakeholders along with ongoing dialogue with Liffey Partnership ABC manager to explore how current systems used by Liffey Partnership would need to be amended for Community Families. All of these discussions fed into the review and the strategic implementation plan.

Steering Group Meetings:

A Steering Committee was established drawing from Liffey Partnership staff, Family Matters ABC Consortium and key ELI staff. It offered guidance and direction for the Project Team, reviewed progress and planned for the next phase of the work. The initial meeting established a detailed shared vision and terms of reference for the project. Steering Group members were Maria Hayes/Pamela Belton Tusla; Catherine Hanley HSE; Alice Corbett/Aoife Hanlon, DCC; Anne Fitzgerald Liffey Partnership; Liz O’Sullivan Liffey Partnership.

Consultation meetings:

Using a Community Action Research, consultation sessions were held with local and national stakeholders including:

● Local community and statutory stakeholders working with children and families in the area and ABC Consortium members, including -

- ~ Ballyfermot MABS
- ~ Ballyfermot Dept of Social Protection
- ~ Familibase – Child, Parent and Youth service
- ~ Tusla PPFs- Manager and Family Support Workers
- ~ Local Parents/Home Visitors
- ~ HSCL of 3 Primary schools
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- ~ Cherry Orchard Family Resource Centre
- ~ Early Years Services- focusing on supporting those with addiction

● National statutory stakeholders whose targets and outcomes are addressed by Community Families, who included -

- ~ TUSLA PPFs manager-
- ~ HSE Assistant Director of Public Health Nursing-
- ~ HSE Community Healthcare Network Manager
- ~ HSE-Senior Health Promotion and Improvement Officer
- ~ Tusla National Home Visiting Programme Manager
- ~ Local Elected Councillor DCC
- ~ Liffey Area Partnership CEO

An initial review of strengths and challenges to include needs analysis, programme fit and organizational readiness was carried out at the first Steering Group meeting in March 2025. The readiness assessment examined the local governance, staffing, CRM data and interagency cooperation requirements for Community Families and what was required for Liffey Partnership to implement the programme. The findings from this discussion fed into the consultation sessions, where participants were asked their views on the proposed plan, how it aligned with existing services and how Community Families could help them achieve their objectives in their work with children and families (pre-natal and anti-natal). All of these discussions informed the findings of this report and the Strategic Implementation Plan.

2.2 Installation and key requirements for implementation

Throughout the project, we examined the key requirements for implementing Community Families in Liffey Partnership. An action plan was developed at each meeting that looked at various elements that needed to be installed prior to delivering Community Families.

2.3 Strategic Plan to move to Initial and Full Implementation

The Strategic Plan was developed using a Community Action Research Approach with iterative versions of the plan developed following feedback sessions from the Steering group and key stakeholders. However, the strategic plan is a living document that will require annual implementation reviews and planning cycles to enable it to be adapted to emerging needs and issues.

3. Review



As part of the process of establishing the key steps in Liffey Partnership's readiness for implementation of Community Families and the development of the strategic plan, the hopes of the Steering Group and local stakeholders for Community Families in their area was discussed as was their existing strengths along with the implementation challenges. These discussions, which are detailed in this section, informed the direction of the project, the readiness assessment and the strategic implementation plan.

3.1 Hopes for the Project

There was overwhelming support for Community Families among the stakeholders consulted, all of whom agreed that there was a gap in services for the 0-2 age group since the Community Mothers Programmes ceased. There was also agreement around the implementation of a model as proposed by the Steering Group, of building capacity of local people in delivering the programme. The following points were highlighted:

- The current gap in service for this age cohort was acknowledged.
- Need to enhance the existing prevention and early intervention work being done in the area, including improving existing maternal and infant mental health system.
- One-to-one delivery would be favourable for many families who are not able to get to the group settings. This prompted further discussion on the challenge some families have in attending groups and why home visiting can be vital for them.
- The parent focus of the programme was appreciated, for example the power of the Home Visitor simply asking the parent "how are you?", as many don't often get asked this. So often parents are asked "how's the baby doing?" and there is no focus on the parent.

- The ability of the Home Visitors to link in with services and provide long-term stable support was noted as sometimes services aren't stretching far enough to reach some families. An example of school transition programmes was discussed, and it was said that this sort of model, with long-term support, can support attendance. As if attendance is poor in the early years it tends to be poor throughout. Linking in with the schools can really help this.
- The peer-led model would be key for acceptance by families. Initially, parents would be invited to come on board as co-researchers and critics. They can let us know how it works in their home and their community. The programme should be owned by the parents and the community.
- The long-term impact of the Community Families on children and families was highlighted. There was a need to raise awareness about third level educational opportunities and support parents to both raise and achieve their aspirations for their children. The low level of transfers from second to third level in the area was concerning.
- Alignment with Government policies, in particular, First Five, and HSE/Tusla strategies along with those of Liffey Partnership and other local services was highlighted as was the need for parents to be receiving one rather than multiple messages from the professionals they come in contact with.
- The need to secure sustainable long-term funding for Community Families home visiting was highlighted with attendees supportive of Liffey Partnership's proposed plan. They all agreed that the full costs of delivering the programme must be included in the budgets.

3.2 Strengths

The existing strengths in relation to the future delivery of Community Families are summarised below with participants identified the current infrastructure, which would support the installation and implementation of Community Families in the area.

- Liffey Partnership is a community-led local development organization with core values of community development; empowerment; integrated and person-led development; inclusion and participation; equality, equity and accountability. These values are in line with those of Community Families as is Liffey Partnership's methodology for strengthening the bonds between individuals and neighbourhoods and providing a path for diverse voices to be heard, respected and celebrated.
- Cherry Orchard Implementation Board is a cross government initiative, led by the Department of An Taoiseach, has been created with the underlying principles around interagency and community cooperation and will focus on co-ordination and effective targeting of supports for the Cherry Orchard Community, as well as supporting local organisations, groups and Community activists as they work to progress projects and improve safety and wellbeing in the area. Support for family wellbeing and health is one of its key principles, which aligns with

Community Families. Liffey Partnership is represented on the Board and supports its work.

- Introducing Community Families is addressing a real need identified by local stakeholders and professionals. The intention is to build on and enhance existing provision and practice rather than starting afresh i.e. complementing what Liffey Partnership already does.
- Commitment to evidence-based practice and associated data gathering is at the core of Community Families. There is extensive prior experience of delivering PEI evidenced based programmes in the area. Liffey Partnership already uses Salesforce to gather data, which will enable it to easily introduce the Community Families CRM. The following programmes that are already in operation would complement and enhance the delivery of Community Families -

- ~ Incredible Years
- ~ Family Matters ABC Programme
- ~ ParentChild+
- ~ Healthy Community
- ~ Trauma-informed practice
- ~ Infant mental health network
- ~ Supports around income, food, employment, education etc.

- Interagency relationships, activity and networks are active, strong and working well in the area. This fits well with the Community Families principle of integrated working/ no wrong door with integrated working seen as essential for successfully achieving outcomes for children, parents and families and a core standard for the delivery of Community Families.
- As outlined in Sláintecare, PEI community development and services is prioritised in Liffey Partnership as a first step rather than immediate clinical provision and/ or more specialist services. This is aligned with Community Families as it enables early identification of need, empowers parents to become agents for their own and their child's health and wellbeing and supports them in their engagement, if needed, with clinical provision and/or more specialist services.
- The involvement of and leadership provided by Tusla, HSE and Dublin City Council through the Steering Group was welcomed. It was agreed that interagency collaboration was key to the success of the project. Cross-sectoral communication was important and there was a need to communicate with all relevant stakeholders and agencies. Inviting key local players to the initial consultation meeting was important. Follow-up consultation meetings would be held with potential close partners, who may be able to support funding proposals and referrals.
- At the Community Consultation meeting, it was recognised that this programme is so beneficial to counteract parent isolation and can support for example those suffering from postnatal depression or those from an abusive background who can learn what healthy relationships can look like.

3.3 Challenges

The following challenges in relation to the future delivery of Community Families are summarised below with participants having identified what would be required to support the successful installation and implementation of Community Families in the area. Memories of the previous Community Mother Programme and its closure were still strong and fed into this discussion, hence the repeated emphasis on the need for long-term sustainable funding from statutory agencies for this project.

- There is a gap in provision for perinatal home visiting as well as the 0-2 provision, which Community Families could meet.
- PHN's are one of the greatest advocates and referral pathways for Community Families. Recently their staffing levels were not adequate to cover their workload and preventative home visits to parents have been reduced with families and children receiving care if there is a clinical need or parental concern. Child protection is always a priority for PHN service.
- Influencers and partners are required to create ownership of the project locally, understand the need for Community Families, help secure funding and promote its introduction.
- Resources and time are issues as all organisations involved have resource, capacity, workload and oversubscription challenges, which make it difficult to plan for, let alone implement, Community Families.
- Getting Community Families off the ground, establishing trust with parents and families along with referrals pathway takes time and effort. This needs to be recognised and built into the strategic implementation plan.
- Training Home Visitors to deal with the complex situations they will face in many homes was paramount.
- Securing long-term sustainable funding that covers the full cost, including overheads, of delivering the programme is a challenge.

3.4 How does Community Families fit the need?

Community Families is a community home visiting programme for parents of children 0-3 years old, which puts parents first, empowering them through trusted relationships with a Home Visitor during their child's early years. It provides information, support and builds friendships and connectivity in local communities. Core outcomes, all of which were identified by stakeholders as needed in the area, are:

1. Parent and child relationships: Strong, secure and positive parent-child relationships and grounded in attachment
2. Increased breastfeeding
3. Positive parental mental wellbeing
4. Infant Mental Health

5. Healthy Families: Child, parent and family physical health – this includes sleep; nutrition; physical activity and healthy weight
6. Supported and confident Parents: Parents feel competent, confident and supported in their parenting role
7. Early identification of needs: Early identification of child's emerging additional needs.

Community Families has taken the core values of the Community Mothers Programme, which have been tried and tested over its 40-year history. Community Mothers ran very successfully in Dublin 10, until the PHN who coordinated the service retired and was not replaced by the HSE. There has been no replacement of this invaluable service, as a universal provision for expectant parents and parents of new babies. Additionally, primary care services and supports for expectant parents and parents of new babies are currently under pressure due to severe recruitment challenges. This project seeks to re-establish this critical service for children and families in the Ballyfermot, Cherry Orchard, and Chapelizod areas.

Community Families also has a core focus on infant mental health, a key component of Liffey Partnership's ABC Programme Family Matters. Reinstating Community Families will supplement and enhance their existing infant mental provision by supporting at risk children and their parents in their own homes.

National statistics indicate key deprivation data for the Dublin 10 area, including higher than average rate of lone parent families, early school leavers and unemployment rates. Significant evidence highlights those children and adults from lower socio-economic backgrounds do not achieve the same outcomes as from more affluent backgrounds. Growing up in Ireland outlined that 9-year-olds were more likely to be at risk of socioemotional difficulties if they were from lower income families, had a parent with lower levels of education, and were from a one-parent family.

All ABC programmes including Community Families aim to mitigate this thereby supporting the social justice, economic and policy arguments for change for those most impacted by poverty. The findings from the National Evaluation of the ABC Programme demonstrated positive changes across a range of domains for children and their parents, such as increases/improvements in: positive parent child relationships; children's socio-emotional wellbeing; parental stress; children's home learning environment; and school readiness for participating children. Introducing Community Families to Liffey Partnership's ABC Programme Family Matters ensures that supports start earlier for the more vulnerable children and families.

A Community Families readiness assessment, which focused on local governance, staffing and CRM requirements to deliver the programme with fidelity and to a high standard, was completed as part of the project. Liffey Partnership's ability to deliver on key tasks in each of these areas were assessed and is central to the strategic implementation plan in the next section.

4. Strategic Implementation Plan

The Strategic Implementation Plan was developed using the process described in section 2. It evolved incrementally throughout the project informed by discussions with key stakeholders.

The plan was underpinned by the following agreements:

- A phased incremental approach dependent on funding will be taken with decisions reviewed quarterly to ensure implementation
- The introduction of Community Families to the Ballyfermot, Chapelizod and Cherry Orchard areas is complementary to and building on existing infrastructure and supports in these areas
- Programme delivery is by local people to local parents (Programme participants can apply to be a Home Visitor)
- Local ownership, referral pathways and signposting are key principles and will be integrated into all aspects of the programme.

This section outlined the key elements of the strategic implementation plan:

1. Programme Delivery
2. Proposed Target Families and Catchment Area
3. Proposed Timeline and Implementation Action Plan
4. Recruitment and Training Pathways
5. Implementation Funding.

4.1 Programme Delivery

Community Families consists of the following five elements, all of which are operating in the Ballyfermot, Chapelizod and Cherry Orchard area in some form. A key task was to identify what was required to begin implementing Community Families.

- **Referral system** – this is already in place for ParentChild+, groups and other programmes. The existing system will be reviewed and updated to incorporate Community Families home visits and the upcoming national data framework. Funding is already available for this element.
- **Home Visits** – this is happening for ParentChild+, but upskilling is required to deliver Community Families. It was agreed to use the existing home visiting team as the base to build a Community Families service within proposed catchment areas: Cherry Orchard, Park West, Ballyfermot Social Housing in Lower Ballyfermot- De La Salle Stonebrook & Cornamona Court, Cluid Social Housing in Chapelizod, Labre Park, Bridgeview and St Olivers. Additional funding will be required for this element with limited funding available for a small-scale pilot with existing Home Visitors and 10 families. Long term sustainable support to scale up from 10 families will be required.

- **Groups** – Parent baby/toddler, anti-natal courses, baby massage, Circle of Security, IY Baby and PEEP are already running in the area and can be incorporated easily into the Community Families programme. Funding is already available for this.
- **Signposting** – this is already happening through the consultation process with existing programmes and services. It will continue through the various networks and the ABC Steering Committee. Funding is already available for this.
- **CRM data collection** – Salesforce is already in use in Liffey Partnership. There is a need to assess the similarities in the data being collected along with any adaptations required. It has been agreed that the National Community Families CRM training and support will work with the Liffey Partnership team to ensure their data collection is aligned with national data framework.

As the referral system, groups, signposting and CRM systems are already in place, they will be adapted to include the Community Families Programme. Support will be provided by the National Community Families training and support team for these elements. The main focus of this strategic plan is on introducing and implementing the home visiting element of the Community Families programme alongside Liffey Partnership's suite of prevention and early intervention programmes.

4.2 Proposed Target Families and Catchment Area

Community Families home visiting offers support from pregnancy until the youngest child is 3 years of age. Engagement is reviewed on a regular basis with some families, based on needs, transitioning to groups, ParentChild+, ECEC or other community services.

The aim is to engage 80% of families before the youngest child is 3 months old. A minimum of 15 home visits from birth to 3 years of age is recommended with each home visit lasting approximately 1 hr.

The universal standard schedule of home visits is outlined below, and these can be scaled up in line with need under progressive universalism:

0-6 weeks = **weekly visits**
 6-24 weeks = **fortnightly visits**
 6-24 months = **monthly visits**
 2-3 years = **bimonthly visits.**

However, in the pilot start-up Phase 2 and until funding is available for a universal approach, a targeted approach will be used, which will likely require weekly home visits. Priority will be given to first time/lone parents living in social, overcrowded or multigenerational housing the Ballyfermot, Cherry Orchard, and Chapelizod agreed catchment areas. The following criteria will also be used to decide on intakes with high need and at-risk families given first places:

- Families with additional needs
- Parents who have post-birth difficulty / complex birth
- Referrals from PHN or Tusla or maternity hospital.

Transient families will be excluded until programme is established and more funding available. They and families who do not meet the threshold of need above are put on a waiting list and will be offered support through ABC parent support groups and other activities.

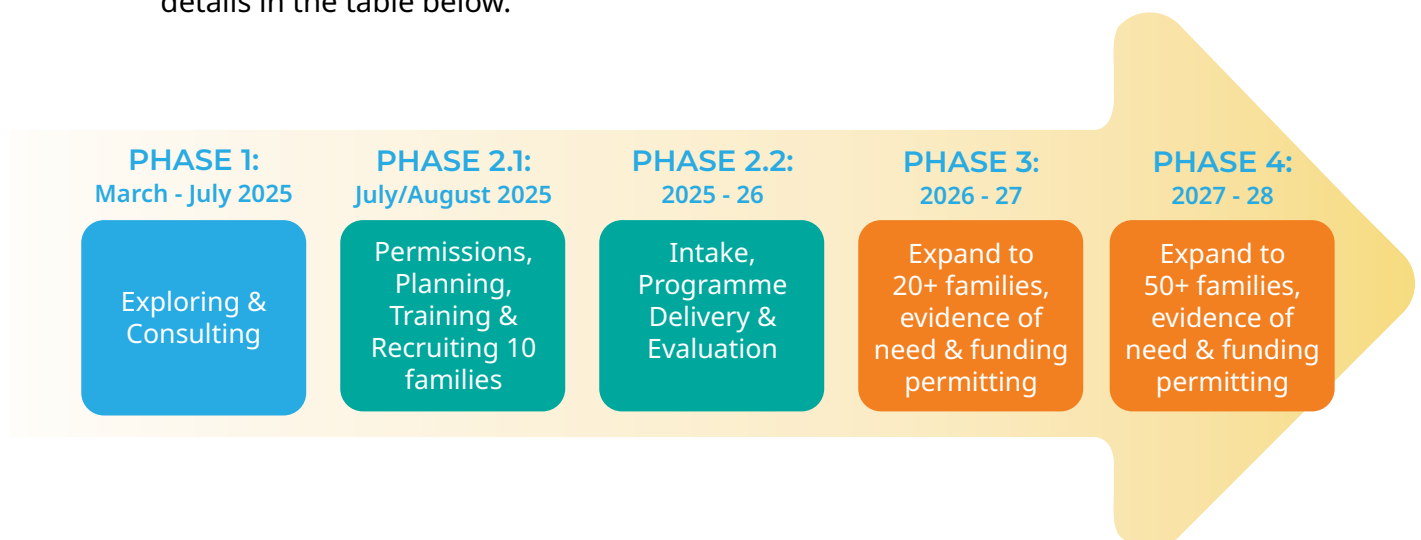
Initially 10 families will be recruited in Phase 2 with an ambition to secure funding for Phase 3 and extend to more families. Funding permitting, the programme will be extended to transient families in Phase 3. These decisions will be reviewed and amended at the end of each phase or as additional funding opportunities become available.

The initial catchment area includes:

- Cherry Orchard
- Park West
- Ballyfermot
- Social Housing in Lower Ballyfermot- De La Salle Stonebrook & Cornamona Court
- Cluid Social Housing in Chapelizod
- Labre Park, Bridgeview and St Olivers

4.3 Proposed Timeline and Implementation Action Plan

There are a Coordinator and five home visitors delivering ParentChild+ and they will be upskilled and given extra hours to deliver Community Families. Support will be available from Community Families National training and support team. More staff can be recruited as funding becomes available and waiting lists emerge. This requires engagement with Liffey Partnership's HR and Community Families National training and support team. The following diagram illustrates the proposed high-level timeline for the delivery of Community Families by Liffey Partnership with more details in the table below.

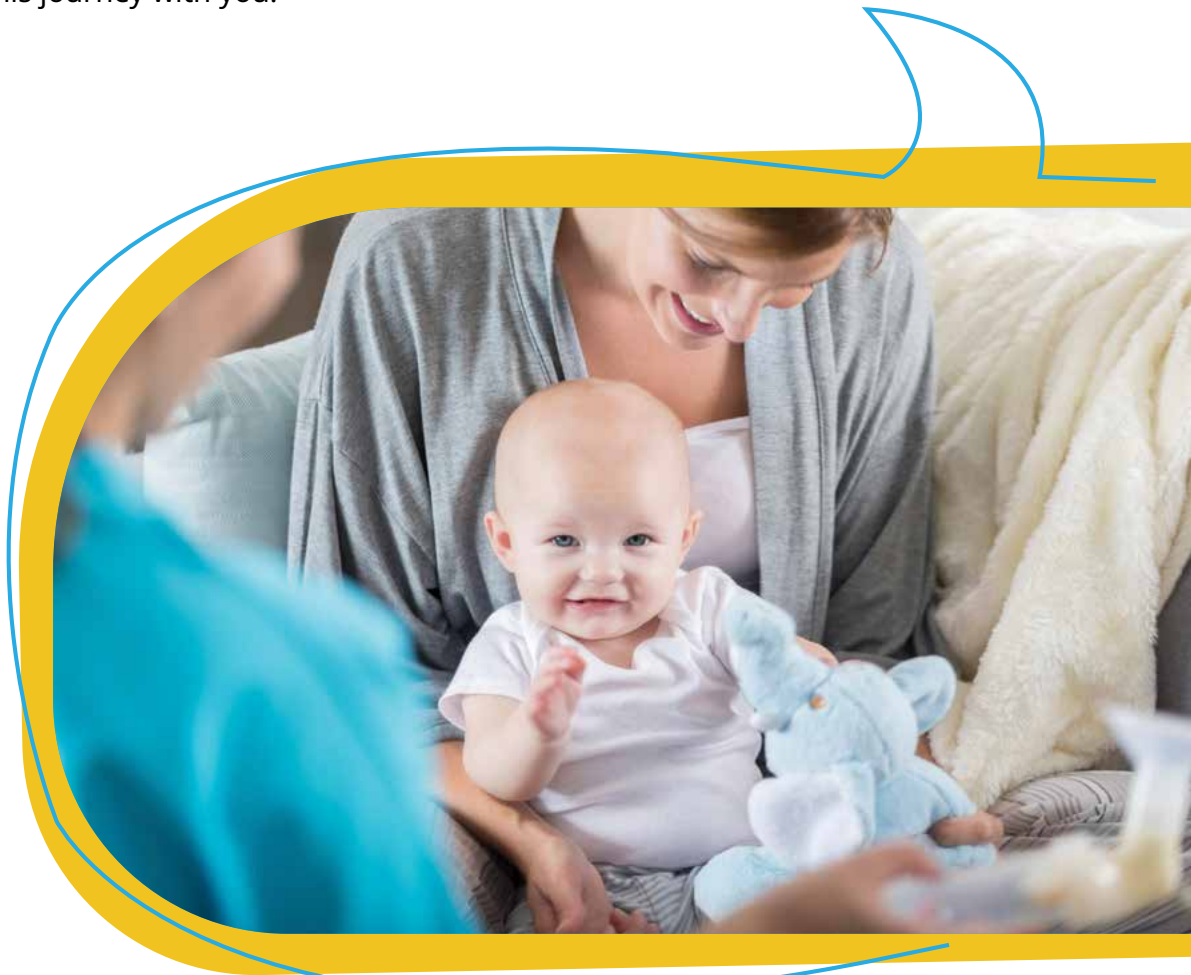


5. Conclusion

Community Families has taken the core values of the Community Mothers Programme, which ran very successfully in Dublin 10, until the PHN who coordinated the service retired and was not replaced by the HSE. There has been no replacement of this invaluable service, as a universal provision for expectant parents and parents of new babies.

This project sought to re-establish this critical service for children and families in the Ballyfermot, Cherry Orchard, and Chapelizod areas through the development of a strategic and operational plan. The implementation of Community Families as outlined in this summary will complement the current suite of wraparound supports being offered to families by Family Matters Area Based Childhood (ABC) Programme and other community and statutory partners in the area.

I would like to thank everyone involved in the project who gave so generously of their time and fed into the reviews, readiness assessment and Strategic Implementation. Your insights, expertise and suggestions were much appreciated, and I hope are reflected in this summary and the main report. We wish you all the best with the re-introduction of Community Families and the implementation of the Strategic Plan, which is a living document that will require annual implementation reviews and planning cycles to enable it to be adapted to emerging needs and issues. As the lead agency for Community Families nationally, we look forward to walking this journey with you.

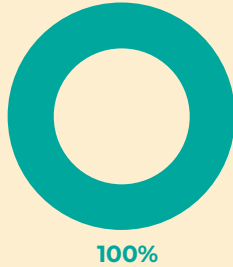


Appendix 1 :

Feedback from Families who took part in the Ballyfermot Community Families Pilot Q4 2025-Q1 2026.

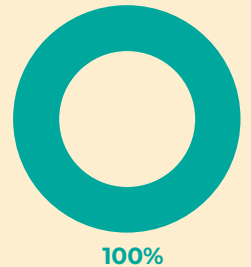
I found the programme to be useful

Strongly disagree	0
Disagree	0
Not sure	0
Agree	0
Strongly agree	7



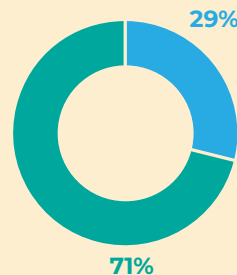
I feel supported by my Home Visitor

Strongly disagree	0
Disagree	0
Not sure	0
Agree	0
Strongly agree	7



I found the resources provided useful

Strongly disagree	0
Disagree	0
Not sure	0
Agree	2
Strongly agree	5



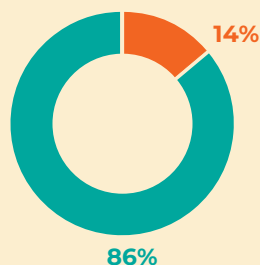
I feel confident in using the approaches/ideas with my child

Strongly disagree	0
Disagree	0
Not sure	0
Agree	0
Strongly agree	7



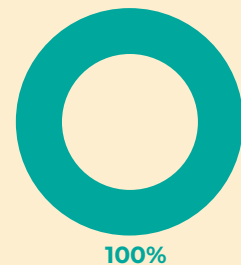
Have you learned any new approaches/ideas from your Home Visitor that you can now use yourself?

Yes	6
No	1



Would you recommend the Community Families Programme to a friend?

Yes	7
No	0



What did you learn from the programme?



What did your child learn from the Programme?



Are there improvements that could be made to the programme?

ID	Name	Responses
1	anonymous	That you can have a cup of tea with the home visitor as it gains a great relationship with the home visitor and makes both feel more comfortable.
2	anonymous	None
3	anonymous	No

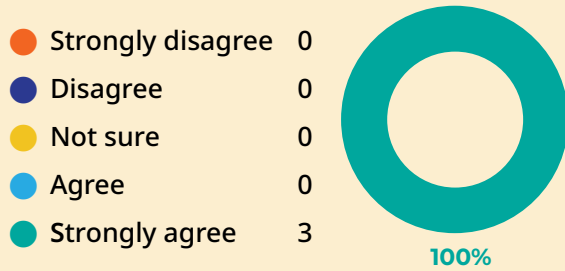
Do you have any other comments on the Community Families Programme?

ID	Name	Responses
1	anonymous	Great programme
2	anonymous	I have learnt so much in myself when I was having such a tough time after having my beautiful twin girls I have so much more confidence in myself and my girls and gained a lovely supportive relationship with xx I gained a good supportive friend in from this programme and my girls have gained one too. I'd like to thank this lovely programme for helping me mentally physically. I would recommend so many people to do this programme.
3	anonymous	It was very helpful and informative and great to have an hour a week to talk with someone outside of the usual family routines. xx was a lovely person to work with and she is very thoughtful and caring she really helped me open up about some of my own struggles recently, she was supportive and nonjudgemental and really put me at ease.
4	anonymous	I'm very thankful for the Home Visitor's information and support. She gave us information and let join to the services of the Community Families Programme that I was interested and wanted to learn from. These services are really helpful not only to the new moms/parents but to all parents.
5	anonymous	I felt so supported and listened to and the attention to every thing with my child was remarkable.

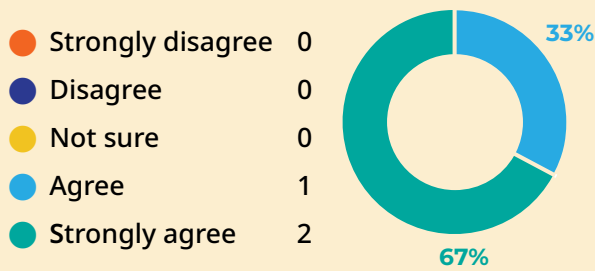
Appendix 2 :

Feedback from Home Visitors who took part in the Ballyfermot Community Families Pilot Q4 2025-Q1 2026.

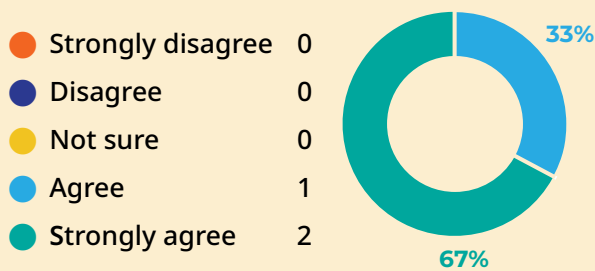
I feel the Community Families Programme is benefiting the families I work with



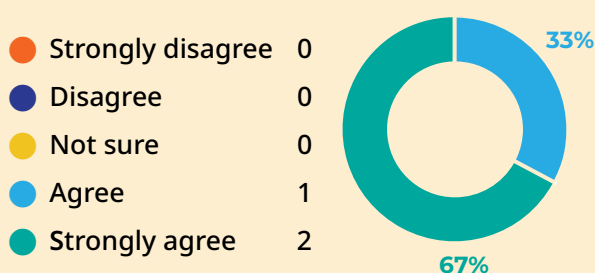
I feel I received good training to support me to deliver the community Families programme



I feel supported by the Community Families Coordinator



I feel confident supporting my families



What do you think doesn't work well and could be improved on?

ID	Name	Responses
1	anonymous	More one to one with coordinator.
2	anonymous	Team meeting's with other participating Home Visitors to gain practical advice that could help with other families participating on the programme.
3	anonymous	Maybe in the weekly meetings or after them the Home Visitors should have the time to look up the information they need for their next visits or put in a time to meet with the coordinator to learn how to find the information themselves if they don't already know how.

Do you think any changes need to be made to the format of the visits or training?

ID	Name	Responses
1	anonymous	Having a sign sheet
2	anonymous	In-person training would be more beneficial rather than listening to other Home Visitors experiences
3	anonymous	A set weekly time for our training/meetings as this was a pilot and the Home Visitors have set times for the other programme they do, it was hard to find the time each week to fit it in. But it needs to be a set time every week.



Can something else be included regarding the training provided?

ID	Name	Responses
1	anonymous	If we could sit in on different programs eg, weaning workshops, sleep workshop's, IY babies.
2	anonymous	Having some talks with the PHN if possible, A resource pack of what is available to support parents in their local communities.
3	anonymous	Shadow visits with an established Community Families Home Visitor would have been ideal.

What further support/advice would be helpful for you delivering the programme in the future?

ID	Name	Responses
1	anonymous	More supervision to go over salesforce
2	anonymous	Some practical work shops on breastfeeding feeding, weaning etc.
3	anonymous	Community of Practice with other Community Families Home Visitors as I find the Community of Practice for PC+ is extremely beneficial for all home visitors.





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