PART C

Guide for Managers

Preparing for Life

Support • Nurture • Thrive

PART C | Guide for Managers

Introduction

This section of the manual is for programme managers and team leaders. It is intended to help managers, new and old, to understand:

- How the programme is implemented and how the team leader supports quality implementation and fidelity
- The actions needed by managers and team leaders to achieve the programme's full potential.

More detailed descriptions of how the programme is delivered on the ground are provided in Part B.

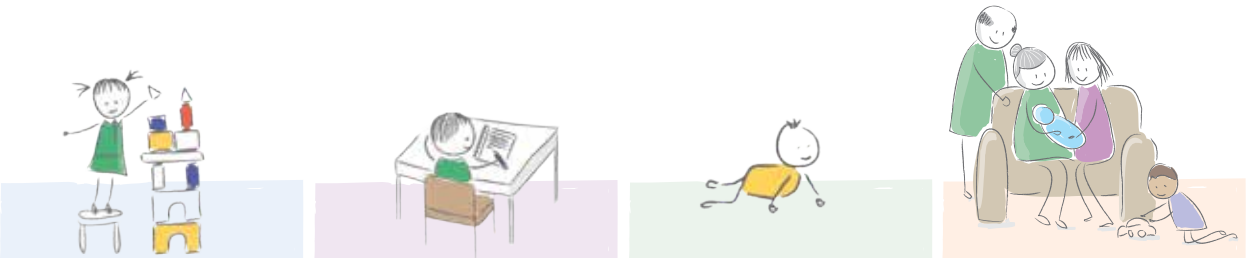
16. INTRODUCTION TO IMPLEMENTATION

Implementation is about putting a plan into action – the 'how to' and the 'what'. Using a stages-of-implementation approach can help your organisation prepare and plan to implement the Preparing for Life home visiting programme from the very beginning. Underlying implementation practice is implementation science, which is the scientific or formal study of how interventions are incorporated into service settings. It seeks to identify specific activities, contexts and other factors that increase the likelihood of successful implementation and improve people's outcomes (Centre for Effective Services, 2024). Drawing on the insights gained from implementation science allows us to understand the process of implementation as well as the factors that may enable or inhibit successful implementation. Successful implementation depends on (a) having the right programme, (b) implementing it with fidelity, (c) in the context of the local environment. This section will allow local leaders to decide if Preparing for Life is the right programme for their community, provide guidance on how to implement the programme with fidelity and discuss how to ensure an appropriate "fit" between the programme and their community.

17. STAGES OF IMPLEMENTATION

The manual describes the processes and requirements for implementing the programme using a 'stages of implementation' approach. Using this approach will help the organisation consider the programme's implementation from initiation through to sustained implementation. The four stages are described below:

Figure 22 Stages of Implementation



Stage 1:
Exploring

Fundamental questions are answered about how the programme fits within the context of your community and local organisations.

Stage 2:
Getting Ready for Implementation

The foundation for effective implementation of Preparing for Life is laid.

Stage 3:
Implementing Preparing for Life

Preparing for Life is implemented for the first time.

Stage 4:
Maintaining Progress

Preparing for Life is fully operational and integrated into the community.

Stage 1: Exploring & Preparing is the first stage of the implementation process. It will help to answer questions about how Preparing for Life can benefit children, parents and the community, its suitability to the context that you are implementing in, and the key stakeholders that should be involved.

Stage 2: Getting Ready for Implementation will help you plan for and consider the resourcing requirements to implement Preparing for Life, including establishing a team, governance, and management structures and putting together an implementation plan.

Stage 3: Implementing Preparing for Life focuses on the actual implementation and delivery of the programme. This manual considers issues like delivering the core components, monitoring quality, line management and case supervision.

Stage 4: Maintaining Progress is the last stage in the implementation process. The manual describes what is required to maintain the partnerships built up over the previous stages and ensure that the programme has the best chance of being sustainable in the longer term.

In practice, implementation rarely follows a straight path from one stage to the next, and you may find yourself moving back and forth between stages. To assist in the successful implementation of the programme, tools are included to support you in carrying out certain tasks within each implementation stage. Specific tools contained in this manual include the following:

- Hexagon tool to support programme exploration and planning
- Implementation plan template
- Organisation readiness checklist
- Programme fidelity checklist
- Home visiting programme checklist
- Sustainability planning tool

18. STAGE 1: EXPLORING PROGRAMME SUITABILITY

18.1. Introduction

Preparing for Life home visiting is a community-based programme designed to ensure that children arrive at school, ready to learn and thrive. The programme was initially developed through a "bottom-up" process of engagement, consultation and co-creation by local stakeholders, practitioners, and families in partnership with expert academic and professional support. The group undertook a formal analysis of the existing resources in the community as well as the actual circumstances of children and families. The research focused on the issue of readiness to start school, including its long-term implications for education and economic viability. The group was committed to finding concrete ways of translating policy and practice commitments into better outcomes for children and, in the process, showing that the initiative delivered what it promised.

This engagement and development process resulted in a clearly defined, manualised model that was built on and closely integrated with the existing local resources in the area. Sites wishing to implement a home visiting programme need to consider whether Preparing for Life is the right programme for the community and how it can be embedded with local service providers.

During Stage 1, Exploring Programme Suitability, sites are considering if Preparing for Life home visiting is the right programme for the children, parents, and community. This section of the manual provides guidance and some useful tools to help managers decide on whether to proceed. Ideally, this collaborative process includes families, service providers, schools and statutory organisations. Preparing for Life is most successful when it is well embedded in the community, and staff can work collaboratively with partners to ensure the best possible service for families. The Preparing for Life implementation team is available to offer information and advice during this implementation stage.

18.2. Leadership

Implementation requires a leadership structure to bring stakeholders together and to ensure follow-through on decisions. Preparing for Life recommends that stakeholders form a local governance group to oversee the programme's overall implementation (see figure 23). This should represent the community and include representatives of local organisations, schools and service providers. As the primary beneficiaries of the programme, families must be actively included in the decision-making process. Groups need to be aware of the potential challenges faced by families in participating, and it may be necessary to ensure that they are fully supported to attend through the provision of childcare support or transportation. Depending on the resources and experience of the members of the governance group, it may be necessary to recruit external advisors with particular expertise, such as research and evaluation or communications.

The governance group will be responsible for:

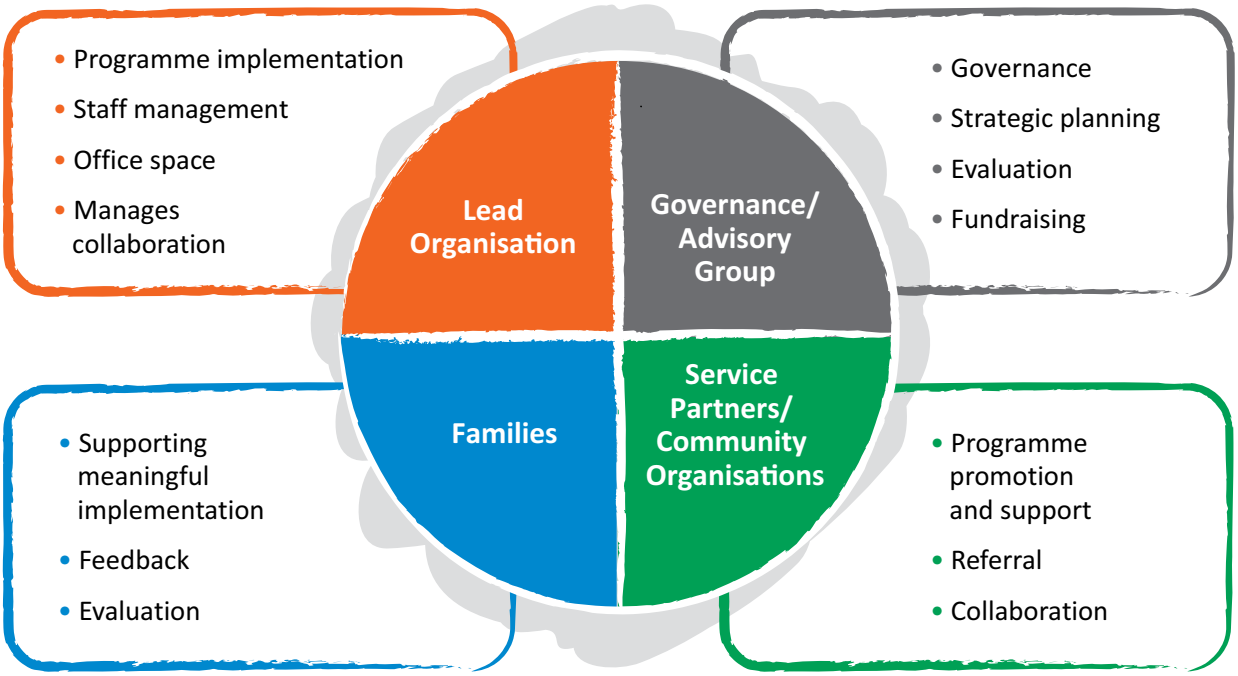
- Overall development of the programme
- Financial sustainability
- Ensuring quality and fidelity in service delivery
- Communications with the community, funders and supporters.

In most situations, the governance group will select or appoint a lead agent to deliver the programme. Typically, this will be a nonprofit, local service provider with a strong track record supporting families. The lead agent should be well respected in the community and have the legitimacy to be a trusted partner for families and service providers.

The lead agent must also have a robust corporate infrastructure to recruit and support the home visiting staff and ensure appropriate day-to-day financial management and oversight. As the employers of record, they will also be responsible for compliance with all regulatory requirements such as child protection, health and safety, financial audit, etc.

The lead agent will establish, nurture and maintain strong collaborative partnerships with local service providers, community groups, statutory agencies and community residents to ensure the ongoing success of the programme. Home visitors will be aware of local resources and collaborate to connect families to necessary support. Community partners will support the ongoing implementation of Preparing for Life, working in partnership with the home visitors and providing additional support when appropriate.

Figure 23 Leadership and Governance Structure



18.3. Engaging with Key Stakeholders

Identifying and consulting with key stakeholders is an important part of this exploration period. Engagement with key stakeholders will help the community to understand if the programme is a good fit for families, community groups and service providers. The consultation process is also a helpful way to raise awareness about the Preparing for Life programme among stakeholders. Stakeholders in the community that should be consulted include:

- Parents
- Maternity services
- Public health nursing services
- Early years care and education providers
- Schools
- Other child and family support services, including statutory, community and voluntary service providers.

This list is not exhaustive, and there may be stakeholder groups particular to the community that should be included in the consultation process. The original programme set up an interagency group to explore the potential for the programme, and this helped to develop important pathways and contacts that supported the programme in its infancy in the Darndale community. This process supported the developers to understand some important factors that made the initial rollout of the programme in the community more accessible. The following tool, Table 30 Identifying Stakeholders, can help managers to think about the stakeholders that should be consulted and why.

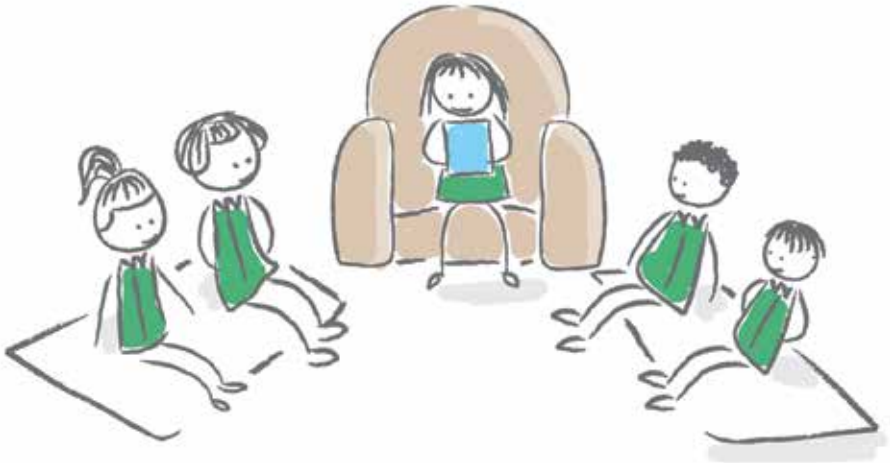


Table 30 Identifying Stakeholders

Who Are Your Key Stakeholders?	What Are Their Interests?	Role: - Informed - Consult with - Collaborate with	How Are They Likely To Engage With The Programme?	What Strategies Do We Use For Engagement

Adapted from Centre for Effective Services (undated). Stakeholder Engagement Template.
https://www.effectiveservices.org/resources/stakeholder-engagement-tool

18.4. Assessing Programme Suitability

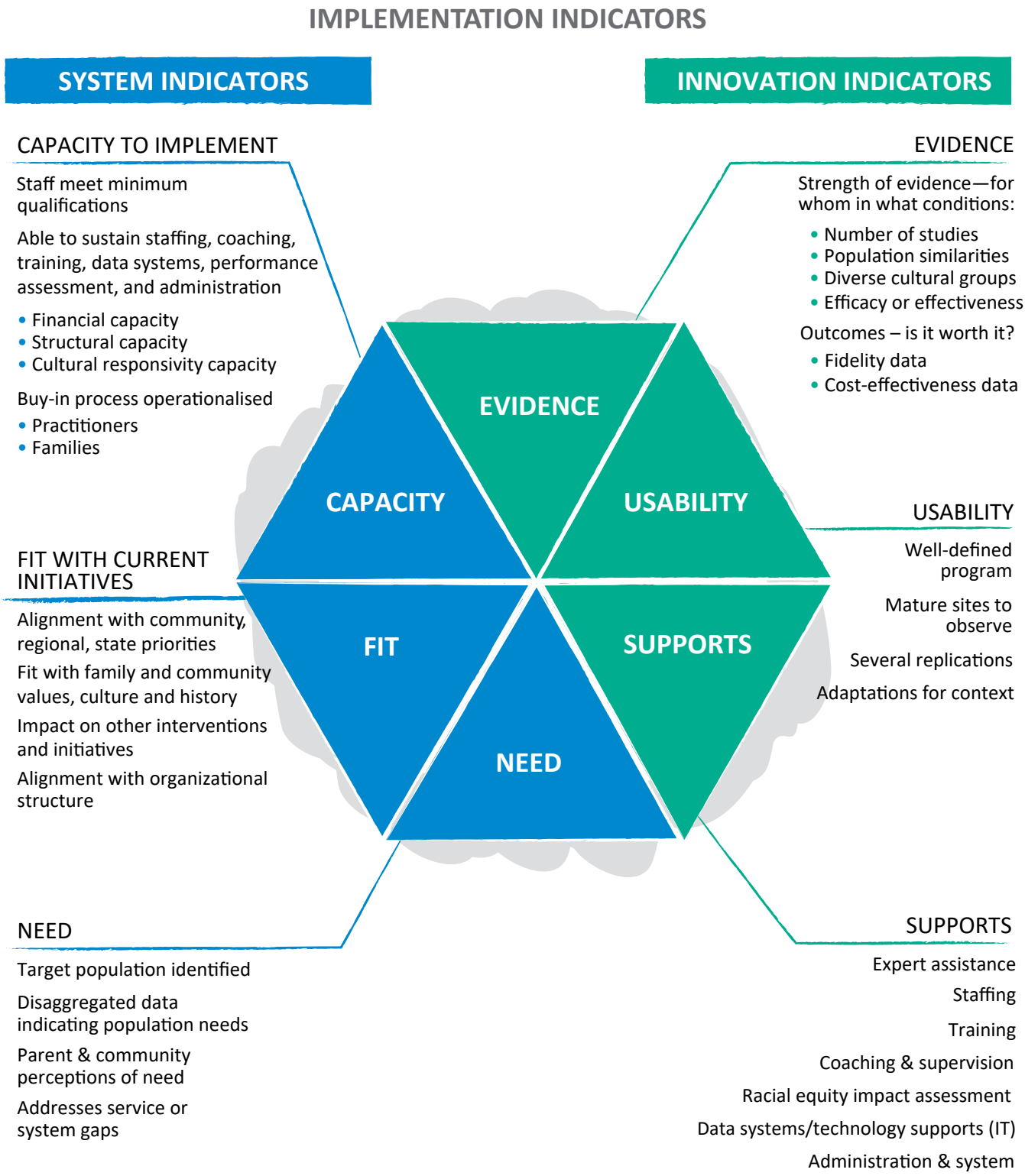
Investing time and effort in assessing if the Preparing for Life programme is right for the community will prevent problems later. It is important from the outset that the suitability of the programme is considered across a number of dimensions:

Table 31 Assessing Programme Suitability

Evidence:	What is the evidence for this programme? Does it work best under certain circumstances or with specific groups?
Usability:	Has the programme been implemented elsewhere? What have you learned from that implementation experience?
Supports:	What resources are required to deliver the programme? Do we currently have these resources? Will new resources be needed to deliver the programme? How will Preparing for Life integrate with existing services?
Need:	What are the characteristics of the potential programme participants? What is the need in your community, and how does the programme address those needs? How will Preparing for Life add value to the current suite of services?
Fit:	How does the programme fit with the current services available in the community? How does the programme fit with your organisation's wider strategic vision and the broader policy context?
Capacity:	Does your organisation have the capacity to implement and sustain the programme's implementation into the future? Will there be a long-term commitment from local stakeholders to support the programme?

In addressing these and other questions about the suitability of the Preparing for Life programme, organisations should identify and consult with the range of relevant stakeholders in their community. The following Hexagon Tool (Metz & Louison, 2019) can be used with stakeholders to explore whether the Preparing for Life programme is right for the community and organisation. Consider each element of the Hexagon below and then complete the tool on the following page. For more detailed information on how to complete the Hexagon, see Metz & Louison, 2019 at: https://implementation.fpg.unc.edu/wp-content/uploads/NIRN-Hexagon-Discussion-Analysis-Tool_September2020_1.pdf

Figure 24 Hexagon Tool



Adapted from the National Implementation Research Network (NIRN) Hexagon Tool by the Centre for Effective Services, with permission from NIRN. Original version available at: https://implementation.fpg.unc.edu/wp-content/uploads/NIRN-Hexagon-Discussion-Analysis-Tool_September2020_1.pdf

Table 32 Hexagon Tool (1 of 2)

Using the prompts in the Hexagon, give a rating of between 1 and 5 to each element of the Hexagon. For all domains, a score 1 is the lowest and 5 is the highest. Please provide some explanation/rationale for your score.

PROGRAMME INDICATORS

EVIDENCE	No Evidence	Minimal evidence	Some Evidence	Evidence	High evidence
	1	2	3	4	5

USABILITY	Not usable	Minimally usable	Somewhat usable	Usable	Highly usable
	1	2	3	4	5

SUPPORTS	Not supported	Minimally supported	Somewhat Supported	Supported	Well Supported
	1	2	3	4	5

Table 32 Hexagon Tool (2 of 2)

Using the prompts in the Hexagon, give a rating of between 1 and 5 to each element of the Hexagon. For all domains, a score 1 is the lowest and 5 is the highest. Please provide some explanation/rationale for your score.

IMPLEMENTING SITE INDICATORS

NEED	Does not meet the need	Minimally meets the need	Somewhat meets the need	Meets the need	Strongly meets the need
	1	2	3	4	5

FIT	Does not fit	Minimally fits	Somewhat fits	Fits	Strong fit
	1	2	3	4	5

CAPACITY	No capacity	Minimal capacity	Some capacity	Adequate capacity	Strong capacity
	1	2	3	4	5

Adapted from Metz & Louison (2019).

The ratings given for the domains are important, but the ratings are not the only things that should be considered when deciding to move to the next implementation stage.

It can be helpful to return to the Hexagon Tool at the end of each stage to reflect on progress. As the implementation moves forward, new partners may be identified, and problems resolved, and these can be recorded by re-visiting the Hexagon at later stages. Throughout this process, the implementation team is available to provide support and advice.

18.5. Stage 1 Milestones

During this stage, managers should take the time to consider if the Preparing for Life programme is the right fit for the children and families they serve, the lead agent, and other partners, and if it can be effectively embedded in the community. Consultation with stakeholders is a key element of this stage, hearing their views and sharing information about the programme. Doing the groundwork ahead of implementation with greatly assist the process of implementation later.

By the end of this stage, the manager should have:

- Identified and consulted with stakeholders about the need for and the potential to introduce and implement the programme.
- Established a clear leadership group with a good representation of the local stakeholders.
- Identified a lead organisation to take responsibility for the practical delivery of the Preparing for Life programme.
- Assessed the programme's suitability, using a tool such as the Hexagon, to explore important issues such as need, fit and capacity to implement.

19. STAGE 2: PREPARING FOR IMPLEMENTATION

19.1. Introduction

During this stage, the foundations are laid for future effective implementation of the Preparing for Life home visiting programme. This section of the manual describes what is needed to get the programme up and running.

By this stage of implementation, it has been agreed that the Preparing for Life home visiting programme is a good fit for the children, families, and community, and a lead agent has been identified to manage the programme. The following sections provide information about and describe the operational requirements that should be in place prior to delivering the programme.

19.2. Building the Preparing for Life Team

The number and exact composition of the team needed to deliver the Preparing for Life programme will vary depending on:

- Level of demand/need for the programme
- Needs of the families participating in the programme
- Case load capacity
- Existing service level agreements with funders
- Range of other services offered by the organisation.

Usually, the Preparing for Life team will be a distinct unit, based in a single lead organisation. However, the exact arrangements may vary with elements such as antenatal supports, baby massage or evidence-based parenting programmes delivered through service-level agreements with local partners. It is important to think through these options and ensure that clear recruitment, referral, and case management pathways are defined and supported.

The recommended Preparing for Life team is outlined below. Although each site will vary depending on the needs and resources in the community and the resources available to the site, a typical team with a caseload of approximately 75–80 families will include, at a minimum, the team leader and three full-time home visitors. Additional recommended staff are a part-time community midwife, part-time evaluation officer, part-time outreach officer and part-time administration support.

Detailed job descriptions and person specifications for the staff are provided in Part D - Tools and Resources with recommended salary scales commensurate with experience and qualifications (although this may vary depending on the local situation).

Preparing for Life is implemented over a five-year period to allow for support from pregnancy to school entry. Sites should allow for the additional costs in the first year to include training, tip sheets, and set-up. As the programme becomes established, these costs will be reduced but it will be important to plan for staff turnover and ensure that there is adequate budget for ongoing training and staff support.

Table 33 Team Members (1 of 4)

Title	Essential/Desirable	Role	Qualifications/ Experience
Team leader	The team leader is an **essential** role in the Preparing for Life home visiting programme. Please see Part D - Tools and Resources for a detailed job description and person specification for the team leader role.	Support and supervise the work of the home visitor in delivering the programme. Develop collaborative relationships with partner agencies and services. Monitor and ensure quality implementation of the programme. The team leader may or may not carry a caseload, the capacity to do so will depend on each organisation's own management structures.	Third-level qualification in social work, social care or related field. Ideally, up to 5 years experience in social work, social care, or a family support environment. Experience in supervision and coaching.

Table 33 Team Members (2 of 4)

Title	Essential/Desirable	Role	Qualifications/ Experience
Home visitors	Home visitors play an **essential** role in the Preparing for Life programme. Please see Part D - Tools and Resources for a detailed job description and person specification for the home visitor role. .	Implement the programme through one-to-one work with families. Provide information on existing services to families and carry out case management and collaborative work with partner agencies and services. Deliver the chosen evidence-based parenting programme and the baby massage classes. However, the parenting programme and baby massage classes may be delivered in partnership with other organisations/agencies. A full time home visitor will maintain a caseload of approximately 25 families, depending on the complexity of the cases. While the number of home visitors per team is a matter for each organisation, it is recommended that a minimum of two are employed to deliver the programme. Peer support and collaboration are key features of Preparing for Life programme delivery, where home visitors are encouraged to discuss their practice and case challenges with each other and to share their learning. Therefore, delivering the programme with only one home visitor undermines this key principle and is not advisable.	Third-level qualification in social work, social care or a related field. Three years experience in social work or family support, particularly working in homes. Strong communication skills.

Table 33 Team Members (3 of 4)

Title	Essential/Desirable	Role	Qualifications/ Experience
Community Midwife **Please see Part D - Tools and Resources for a detailed job description.**	A Community Midwife is **recommended** to be part of the Preparing for Life team, but it is not essential. This role can be provided through a collaborative arrangement with local services, but there are advantages to being a full member of the team for the position. Each site must decide how to fill this role, given their relationships with local services and the resources available to them.	Provide antenatal education. Provide post-natal support and follow-up. Facilitate breastfeeding groups. Provide lactation consultation.	Antenatal education should be provided by a qualified midwife, public health nurse or other practitioner with appropriate qualifications and training to provide antenatal education.
Research & evaluation support	A formal evaluation framework using standardised measures has been specially designed for Preparing for Life home visiting. This has been designed to support the delivery of the programme and to assess its impact over time. Support for the implementation of this framework is available from the team. Still, it is **recommended** that each site include a part-time Research and Evaluation officer with expertise in data collection, analysis and programme evaluation. Further information is available in the evaluation framework document.	Ensure the effective and accurate implementation of the Preparing for Life evaluation framework. Support the home visiting team to gather data appropriately. Analyse the collected data and produce reports. Support the team in reflecting on the findings and adapting the programme appropriately.	Masters-level qualification. 3 years experience.

Table 33 Team Members (4 of 4)

Title	Essential/Desirable	Role	Qualifications/ Experience
Outreach and recruitment officer	An outreach and recruitment officer is **recommended**. Since participation in Preparing for Life is voluntary, reaching out to potential participants and ensuring a clear referral pathway to the programme from local service providers is important.	Promote the home visiting programme in local community sites such as maternity hospitals, health clinics, schools, etc. Provide initial information to potential participants. Meet with local service providers and developing referral pathways. Promote of the programme via social media, etc.	Excellent communication skills. Knowledge of the local community and resources. Familiarity with social media.
Administrative officer	Administration support for home visiting is **recommended**.	Maintaining supplies of programme resources, stationery, etc. Maintaining financial records. Supporting the home visiting team with room bookings, appointments, etc.	

19.3. Selecting Staff

The evaluation of the programme identified the relationship between the home visitor and parents as one of the most critical factors in the programme's success. The team leader and home visitors must have experience working with families in various settings, particularly disadvantaged communities, have knowledge and experience of coaching and are committed to using a strengths-based, positive approach to working with families. The core skills and competencies required for home visitors include:

- Knowledge and experience of child development.
- Knowledge and experience in supporting families using a home visitor and coaching approach.
- Ability to work in a non-judgmental way with all families, regardless of the families' circumstances.
- Demonstrated knowledge and experience in working with families in a range of settings, including homes, particularly in an area of disadvantage.
- Good communication skills and an ability to build good relations and liaise effectively with other service providers.
- Capacity to reflect on their practice and accept their limitations.

- Openness to accepting feedback and coaching support.
- Where possible, home visitors should hold a relevant third-level (level 7) qualification.

19.4. Training and Support

Once home visitors are recruited, Preparing for Life provides a formal programme of induction to the Preparing for Life model and ongoing coaching and support to ensure fidelity to the programme model. Ongoing and refresher training can also be provided and is negotiated and agreed upon between the contracting organisation and the implementation team on a case-by-case basis.

19.5. Induction Training and Orientation

New home visitors participate in the mandatory induction and orientation training provided by experienced Preparing for Life managers and team leaders. Training takes place via facilitated interactive workshops held over five days. Following the five-day workshops, home visitors have the opportunity to shadow an experienced home visitor in the home with a parent and will engage in a formal debrief and peer reflection. Following completion of the training and after the new home visitors have been working with a caseload of families for approximately six months, the implementation team is available to provide coaching support to all new home visitors. The coaching session includes observation of at least one home visit annually and a facilitated reflection and feedback session following the home visit.

The induction training covers:

- Theory & logic model of the Preparing for Life home visiting programme.
- Programme content, including the tip sheets and resource packs used during the home visits.
- The Preparing for Life ethos and principles of engagement strategies for working with families, including the recruitment and retention of families to the programme.
- Recommended supervision and peer support structures.
- Programme outcomes and evaluation.

An overview of the complete training programme is provided in **Part D - Tools and Resources.**

19.6. Support and Supervision

Staff supervision and active case management are critical elements of the programme and are the responsibility of the team leader in each organisation that implements the programme. Recommended staff supervision and support processes are described in Section 15. The Preparing for Life programme development team also provide ongoing coaching and mentoring support. The purpose of the ongoing coaching and mentoring support is to provide quality assurance and opportunities for reflective practice and ensure that continuous practice development remains aligned with the ethos, principles, and approach. A summary of essential and optional supports is provided below.

Table 34 Support and Supervision Options

Activity	Number Of Hours	Number Of Events Per Year	Attended By	Facilitated By	Essential/ Optional
Learning and development session/case reviews	3	3	Home visitors from multiple sites	Preparing for Life implementation & fidelity team	Essential
Team leader action learning	2	3	Team leaders from multiple sites	Implementation & fidelity team	Recommended
Annual conference	7	1	All Staff	Implementation & fidelity team	Recommended
Home visitor 1:1 supervision	2	4	Home visitors	Implementation & fidelity team	Optional (assuming local supervision arrangements are in place)
Team leader 1:1 supervision	2	6	Team leader	Implementation & fidelity team	Optional
Evaluation support	3	4	Team leader & home visitor	Evaluation Officer	Optional

The level of ongoing support will vary from site to site and can be negotiated with the implementation team during the development phase. However, it is recommended that these sessions take place at least every three months. The sessions focus on ensuring programme fidelity, dealing with challenges and providing coaching support to the new home visitors.

19.7. Learning and Development Session and Case Reviews

The objective of home visiting peer learning is to build a positive, supportive culture across all sites that offers encouragement, a space to celebrate success and learning opportunities, and creates space to identify gaps or challenges in service delivery.

- Review successes and challenges.
- Identifying key learning with input from members and guests.
- Case review using an action-learning approach. Home visitors present a case with an opportunity for reflection and coaching to support and promote fidelity to the programme.

Peer learning sessions last two hours each and take place three times per year.

19.8. Team Leaders Action Learning

In order to support the ongoing implementation of home visiting, Preparing for Life facilitates a collaborative network with programme managers and organisational representatives. This network meets quarterly and is designed to support sites in areas such as governance, evaluation, and communications. The purpose of these sessions is to:

- Reflect on and learn from individuals and their team's experience.
- Improve awareness of how assumptions, beliefs, attitudes, and organisational interests influence thinking, decisions, and actions.
- Develop a culture of staff engagement, involvement, and performance.
- Become a reflective and learning organisation.
- Become more strategic in goal setting.
- Enhance the capability to reflect on and learn from collective experience.

Team leader action learning sessions last two hours each and take place three times per year.

19.9. Individual Supervision

While most sites will have internal support and supervision structures in place, the Preparing for Life implementation team can provide individual supervision for home visitors. This can be arranged on a case-by-case basis but usually takes place every 5-6 weeks for 90 mins.

19.10. Annual Conference

The annual conference provides an opportunity for staff, participants and stakeholders from all Preparing for Life sites to meet and share experiences and knowledge. Sites are encouraged to attend and participate in this peer-learning experience.

20. PREPARING A BUDGET

The costs of implementing home visiting will vary considerably based on the current resources of the host, the potential for local partnerships and collaborative arrangements and the particular needs of the community. Preparing for Life is designed to be integrated into the existing resources of a community and build on the strengths and resources of that community. While it is expected that the core elements of home visiting, antenatal, breastfeeding support, baby massage and an evidence-based parenting programme be included, the specific arrangements for how each element is provided may vary from site to site. The following sections outline the elements of a basic Preparing for Life team with associated overhead and programme costs. However, the implementation team will work with each site to develop a customised and accurate assessment of costs which will inform the implementation plan. Implementing Preparing for Life requires financial support for three main cost centres:

- Staff and programme: salary, pensions and employers tax for the Preparing for Life team; resource materials including tip sheets, promotional materials, etc; and meeting and event costs.
- Operations: office space, IT equipment and organisational costs including insurance, administration etc.
- Implementation support: training, resource material, coaching and supervision support.

20.1. Staff Costs

Sites should budget for the appropriate staff members depending on the planned caseload and the particular implementation plan for Preparing for Life in their community. Sites should budget for salaries, employers' taxes, and pension contributions as appropriate to their organisations.

20.2. Programme Materials and Resources

The programme requires the purchase of the Preparing for Life tip sheets covering a range of child development and parent support topics arranged by age. These are provided in loose-leaf binders, allowing each sheet to be transferred to the families' binder over the programme's life. These packs can be ordered as needed on an annual basis based on the ongoing recruitment of families into the programme. Please note that **tip sheet packs cannot be copied or distributed** without the explicit permission of Preparing for Life/Northside Partnership. The topics covered are:

- Cognitive Development
- Socio-Emotional Development
- Nutrition
- Safety & Supervision
- Parental Support
- Rest & Routine
- Transition to Primary School.

20.3. Developmental Resources and Books

Preparing for Life has identified a set of resources and books to be delivered to parents as the programme progresses. All developmental resources include a customised tip sheet. These materials are generally available through local suppliers or can be conveniently ordered in bulk via Preparing for Life. These items and the delivery schedule are listed below:

Table 35 List of Developmental Resources & Books

RESOURCE MATERIALS	AGE IN MONTHS					
	0-12	12	24	36	48	60
BOOKS (includes tip sheet for each book)						
Face cloth book	X					
Goodnight Moon		X				
Owl Babies			X			
Postman Bear				X		
Don't Let the Pigeon Drive the Bus					X	
DEVELOPMENTAL PACKS (Includes tip sheets for each item)						
Play mat	X					
Teething ring	X					
Weaning cup	X					
Household safety pack	X					
Blender	X					
Stacking toy		X				
Tea set			X			
Wooden puzzle				X		
Lace up toy					X	
Connect 4 game						X
RHYMES AND GAMES BOOKLETS						
Action and Counting Rhymes 1	X	X	X			
Action and Counting Rhymes 2		X	X	X		
Nursery Rhymes and Songs	X	X	X	X		

20.4. Group Events

Sites should allow for the cost of group events such as holiday celebrations, information events, etc. These events allow participants to build connections with each other and provide peer support. It is important to mark key transitions in the lives of children and families, such as national holidays or children starting school, as all provide valuable opportunities to bring families together. These events also act as supports for families to continue with the programme. Sites should budget for room rental, refreshments, and entertainment for these events.

20.5. Premises

Premises are required to manage and coordinate the implementation of the Preparing for Life programme. Appropriate and adequate office space is required to accommodate the team leader, home visitors, and administrative support and to provide at least one private meeting space to facilitate supervision and line management meetings.

While it is desirable to have a space within the premises to deliver the baby massage classes and group-based evidence-based parenting programme, it is not essential as:

- Home visiting occurs in families' homes or alternative venues, if necessary.
- Evidence-based parenting programmes and baby massage classes can occur in statutory and community settings such as schools, health centres, community centres and crèches.

20.6. Administration

Sites should ensure an adequate budget for ongoing administration costs such as stationery, staff travel and regular organisational expenses such as financial audits, insurance and health and safety costs.

20.7. Communications and Promotional Materials

Preparing for Life has developed a series of promotional collateral, including flyers, posters, tri-folds as well as social media templates. These can be adapted for each site with local addresses, logos, etc. The implementation team will work with each site to customise the collateral. Preparing for Life can provide finished print-ready documents, which can then be sent to a local print company, or final printed material can be provided by Preparing for Life.

20.8. Training

Preparing for Life provides an introductory group training programme for new sites (Please see **Part D - Tools and Resources** for more details). This training programme covers the following areas for new sites:

- Background to the Preparing for Life programme and underlying theories
- The core elements of the programme
- The Preparing for Life approach and building and maintaining relationships with families
- Case management and record keeping
- Supervision and support structures
- Evaluation and outcome measurement.

Training is provided through a five-day group workshop for new home visitors and team leaders. Following the group sessions, new home visitors will accompany experienced home visitors on home visits. After the new home visitors have started delivery, the implementation team will observe the new home visitors and provide support and feedback to ensure fidelity to the programme.

In addition to the core programme training, Preparing for Life recommends that home visitors are trained in an evidence-based parenting programme (preferably Triple P) and baby massage. Both of these programmes require a one-time training programme, which can be organised with the support of the implementation team.

20.9. Support, Supervision and Quality Assurance

Successful implementation of Preparing for Life requires a close support and supervision structure. The implementation team will work with sites to review any existing support and supervision structures, and recommend additional support as necessary. At a minimum, Preparing for Life will provide quarterly case reviews and fidelity support to ensure the programme is delivered appropriately. Additional supports can be provided, subject to negotiation with local sites. The programme costs are broken into four phases:

1. Exploration
2. Preparing for implementation
3. Implementation
4. Maintenance.

The following diagram outlines the various costs associated with delivering the programme. In addition to the core cost of delivering a programme, such as staffing, premises, overheads, etc. there are a number of costs that are paid directly to Preparing for Life for activities and materials, such as training, tip sheets, coaching and mentoring of staff, etc. These costs will vary according to the local resources available in each site and are subject to negotiation with the Preparing for Life Development Team. Costs payable to Preparing for Life directly are indicated by the logo:

Table 36 Implementation Costs

	Exploration	Preparing to Implement	Implementation	Maintenance
Staff Costs		Coordinator (1 FTE - Essential)		
			Home Visitors (2 FTE - Essential)	
			Midwife (0.2 FTE - Recommended)	
			Evaluation (0.4 FTE - Recommended)	
			Admin (0.5 FTE - Recommended)	
Programme Delivery			Manuals	
			Tipsheets	
			Developmental Packs	
			Events/Photo shoots etc	
Overheads			Rent	
			Office	
			Travel/Subsistence	
			IT/Communication	
			Insurance	
			Health & Safety	
			Audit	
Training			Home Visiting Programme	
			Parenting Programme(s)	
			Baby Massage	
			Evaluation Framework	
Consultation /Supervision	Programme Development			
			Peer Learning/Case Review	
			Team Leader/Action Learning	
			Evaluation Support	
Evaluation			Client Database/Software	

21. GOVERNANCE AND MANAGEMENT

Partner organisations adopting the Preparing for Life programme will likely have their own governance and management arrangements in place. Service agreements and a memorandum of understanding to ensure fidelity to the Preparing for Life programme model will be negotiated between Preparing for Life and the host site.

21.1. Record Keeping

Implementing the programme requires an active case management approach, with a case file opened and maintained for every family participating in the programme. Organisational experience of active case management is essential.

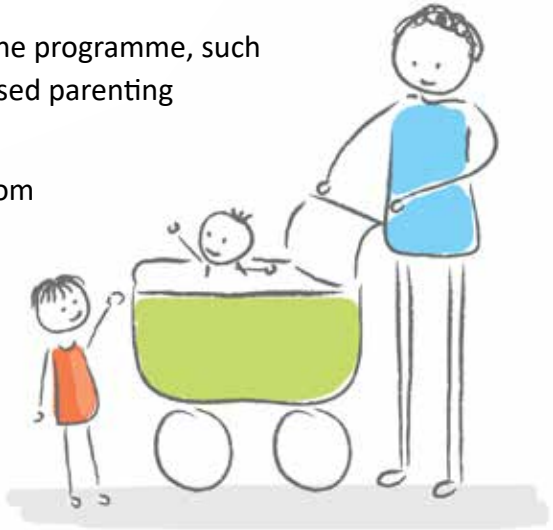
Templates and examples of case management forms are available from the implementation team should your organisation require them. For more details of Preparing for Life's case management and record-keeping processes, please see Part B - Guide for Home Visitors and Part D - Tools and Resources.

21.2. Interagency Working

Interagency collaboration is central to the success of the programme.

Preparing for Life is embedded in the community, and programme staff support families through all the key transitions as their children grow and develop. Positive and constructive working relationships and partnerships with all the local services are critical as:

- A way to connect with the range of services that families naturally come into contact with throughout their child's early childhood, such as early care and education providers, public health nursing services, and schools.
- Potential sources for referrals to the programme or for signposting expectant or new parents to the programme, e.g. maternity and antenatal services.
- The family's home visitor plays a key role in encouraging and supporting families to engage successfully in locally available public health education and antenatal support.
- Partner organisations may deliver elements of the programme, such as the baby massage classes or the evidence-based parenting programme.
- Families participating in the programme may, from time to time, need to be referred to or need support to access other statutory and non-statutory community-based services.



21.3. Referring and Signposting

It is important during this phase of implementation to build on the Stage 1 engagement and consultation with your stakeholders. This will enable the organisation to identify and agree on appropriate referral and signposting processes and protocols for families for whom the Preparing for Life home visiting programme will be suitable.

Referrals in the context of the programme encompass self-referral, voluntary referrals via another agency and expressions of interest in the programme gathered through the recruitment process. The organisation will need to consider and agree:

- The most likely source of referrals and signposting to the programme in the community.
- The processes and protocols for referring and signposting families from these organisations to the programme.
- Promotional and other information material that can be shared with these organisations.

Important sources of referral and signposting for the programme include:

- Maternity hospitals and services in the area
- Antenatal support and education services
- Public health nursing services
- The Prevention, Partnership and Family Support Services in Túsla
- Family support services and family resource centres
- Early years care and education services.

Other organisations and services specific to the community may be considered as potential referral or signposting partners.

The development team is available to offer advice and support in developing referral and signposting processes and protocols.

22. IMPLEMENTATION PLAN

An implementation plan aims to help the organisation identify the key tasks and activities involved in implementing the programme, who is responsible for managing and/or delivering the implementation of the activities and the timeframes in which they should be given. The implementation plan should be regularly revised to ensure it is appropriately guiding the programme's implementation. A comprehensive implementation plan should:

- Detail the implementation objectives
- Outline the tasks and activities necessary for implementation
- Identify who is responsible for the delivery of activities
- Outline timeframes and milestones
- Identify monitoring and reporting processes.

While there are many different types of implementation plans, a suggested implementation plan template is provided:

Table 37 Implementation Plan Template

Activities	Person Responsible	Timeframe	Resources Needed	Expected Outcome And Verification

(National Implementation Network, 2013)/(Department of Health, 2018).

22.1. Assessing Implementation Readiness

Once the lead organisation has established the systems and processes described above, it is ready to move to the next implementation stage. The tool below can assess readiness to move to the next implementation stage.

Table 38 Implementation Readiness Tool (1 of 2)

	IMPLEMENTATION READINESS TOOL	Not Even Close	Some Way To Go	Nearly There	We Are There
A	**Organisational Capacity**	**1**	**2**	**3**	**4**
1.	There is leadership support from top management				
2.	This organisation's policies and procedures facilitate implementation of this programme				
3.	Governance and oversight mechanisms and processes are in place				
4.	Adequate financial resources to introduce and sustain programme costs have been secured				
5.	Appropriate office space for staff has been secured				
6.	The home visiting team leader/project manager, home visitor, and administrative support are recruited/secured				
7.	Interagency working relationships and partnerships are established				
8.	There is capacity to monitor and evaluate the programme's implementation and outcomes				
B	**Staff Capacity**	**1**	**2**	**3**	**4**
1.	Staff understand how the programme works and how it fits with the mission and goals of this organisation				
2.	Management and staff are clear about which components of the programme they will deliver and what components are to be delivered by partner organisations				
3.	Staff demonstrate commitment to using the programme with fidelity				
4.	The introductory training programme has been delivered to staff				
5.	Coaching and mentor arrangements for staff have been set up				
6.	Staff are familiar with and able to use the outcomes measurement framework				

Table 38 Implementation Readiness Tool (2 of 2)

	IMPLEMENTATION READINESS TOOL	Not Even Close	Some Way To Go	Nearly There	We Are There
C	Operational Considerations	1	2	3	4
1.	Any programme adaptations have been agreed with the Preparing for Life team				
2.	The Memorandum of Understanding and any service agreements have been agreed				
3.	Referral and signposting pathways for families to access the programme are agreed and in place				
4.	Case management and record keeping processes are established				
5.	Caseloads have been agreed				
6.	Promotional and information materials are finalised				
7.	There is a communication plan in place for communication with key stakeholders				

22.2. Stage 2 Milestones

By the end of Stage 2, the following milestones will have been met:

- Clarity in how the programme will be delivered directly by the lead organisation.
- Formal working agreements will be in place in situations where certain elements are to be delivered through collaboration with other organisations.
- Have secured funding and agreed on a budget to implement the programme.
- Recruited and trained a team leader and home visitor with experience in active case management and working collaboratively with families.
- Agreed caseload capacity replace with for home visiting with the team and funders.
- Agreed to the Memorandum of Understanding with stakeholders.
- Mapped out and strengthened interagency and collaborative working with partner organisations to ensure appropriate referral and signposting pathways can be put in place.
- Appropriate record-keeping and outcome measurement processes will be identified and ready for implementation.

23. STAGE 3: IMPLEMENTING THE PROGRAMME

During Stage 3, the home visiting programme is being implemented. At this stage of implementation, it has been agreed that the Preparing for Life programme is a good fit for children, families and the organisation. The work preparing for implementation, such as recruiting and training staff, allocating budget, and putting in place the logistical arrangements (e.g. record-keeping systems) that will support implementation, has been completed.

PLEASE NOTE: The processes described in this section of the manual refer to the types of processes recommended by the implementation team. The organisation may have other case management supervision and support processes and procedures. The manager should consult their organisational policies, processes, and procedures to assess for alignment and fit with the Preparing for Life programme approach during Stage 1 of the implementation cycle.

23.1. Outreach and Recruitment

The team leader is responsible for managing the intake of families to the Preparing for Life programme. In the early days of implementation, it is desirable to have a team member dedicated to the recruitment and registration of families to the programme. This is particularly useful when building relationships with new referral pathway organisations, such as maternity and other antenatal services, public health nurses, or other medical and social care professionals. Having a single named individual can help build trust and establish clear lines of communication.

In the absence of a dedicated team member responsible for recruitment, home visitors may also have responsibility for recruiting families. The degree to which home visitors are involved will depend on whether the organisation/service has a dedicated role in promoting the programme and recruiting families. The process of recruiting families can include, but is not limited to, the following:

- Visiting and/or attending meetings at the local maternity hospital and raising awareness of the programme with staff.
- Promoting the programme in different venues and outlets, e.g. local shopping centres, health centres, or antenatal classes.

23.2. Group Events

Group events provide an important opportunity for participants to build informal peer support networks as well as providing formal education and support programmes in addition to the home visiting. The Preparing for Life programme provides for a range of group events, beginning with antenatal classes and progressing to breastfeeding supports and formal Triple P or other evidence-based parenting programmes as the child grows. Informal events are also very important in building connections for families and supporting the ongoing retention of families in the programme. Informal holiday events, cultural or arts activities allow for a celebration of cultural diversity and can help participants to feel respected and accepted in the programme.

It is vitally important to recognise and celebrate key transition phases in a child's development. Birth, first steps, starting early education, and starting school should be celebrated and acknowledged.

Providing for group events involves a degree of organisation and teamwork, with the team working together to ensure successful planning and implementation of the event. Key to the success of these events is an accessible, family-friendly space where participants feel welcome and accepted, as well as appropriate food and refreshments that are sensitive to the participants' culture.

23.3. Case Management and Collaboration

Part B - Guide for Home Visitors provides detailed information on case management practices for home visitors. Team leaders will take responsibility for ensuring compliance with policies and procedures, including participant consent and information management, child protection, case notes and collaboration with external organisations.

23.4. Monitoring and Evaluation

Monitoring and evaluating outcomes are core features of the programme, and all organisations implementing the programme are required to do so. The evaluation framework describes the outcomes measurement framework used to monitor and evaluate the achievement of outcomes for the programme and has been published as part of this series of manuals. The framework provides guidance on a robust, efficient evaluation framework that should be implemented as part of the delivery of the programme. The framework draws on existing standardised measures and forms to allow for the ongoing evaluation of the home visiting programme.

23.5. Staff Support and Supervision

The Preparing for Life programme uses the Tony Morrison method of supervision which promotes a coaching approach, reflective practice and personal development. However each site should choose the approach that works best for them. Preparing for Life has enhanced this process with the introduction of the Facilitating Attuned Interactions (FAN) Model and this is now being rolled out with all sites (Gilkerson, et al., 2012).

Typically, home visitors and team leaders draw up a supervision contract and expectation agreement, which are reviewed once a year. A sample contract is included in Part D - Tools and Resources. Formal supervision of home visitors should happen at least once a month, with interim sessions included as necessary. It is likely that greater frequency will be required in the initial stages of programme implementation. Supervision for home visitors always includes a review of the home visitors' current cases, especially for families with high levels of needs.

Home visitors should be encouraged to discuss any challenges that they may be experiencing with their team leader as the need arises. The team leader should prioritise supervision and should attend to requests for ad hoc supervision immediately, whenever possible, e.g. when an issue arises regarding self-care for the home visitor.

To support the case management process, Preparing for Life also recommends that home visitor peer meetings be held fortnightly to provide an opportunity for home visitors to come together to reflect on their practice and discuss issues that are arising in their work. The meetings last between 60 and 90 minutes and should include all home visitors in the organisation. Responsibility for chairing and minute-taking rotates. All home visitors contribute to setting the agenda. Every second meeting, i.e. once a month, an hour is allocated for peer support. This takes the form of a case review. Each home visitor brings a case for review in turn. Issues and challenges are flagged and discussed, and discussions are solution-focussed. Peer support is most important during the first year.

23.6. Promoting a Culture of Reflective Practice and Learning

To build a culture of trust and mutual support, it is important that time is allocated for informal connection and space for the team to get to know each other. Team leaders have a key role in defining a culture that values psychological safety and encourages staff to bring their authentic selves to the work environment. It is important to celebrate happy events with the team and to stand in solidarity with them in times of grief and sadness.

23.7. Communication

The governance group has a critical role, particularly in the first year, to "be the eyes and ears" for the Preparing for Life team in the community. If it is properly constituted, the governance group will have strong community representation and will be able to provide early feedback on how Preparing for Life is perceived in the local community to provide feedback to the team and support the team in adapting the programme to the local conditions. The governance group can also represent the programme in the community, providing legitimacy for the programme and supporting the team to connect with potential participants and important local services and organisations.

23.8. Evaluation, Planning and Development

While the lead agent will carry the day-to-day responsibility for the evaluation of the Preparing for Life programme, the governance group provides the opportunity for strategic review and planning. The governance group should support the culture of reflective practice in the team and provide regular opportunities for the team to report on programme operations and outcomes. In this way, the team can identify problems early and develop appropriate responses to ensure the success of the programme.

23.9. Financial Oversight and Sustainability

The governance group also has a key role in ensuring the sustainability of the Preparing for Life programme in the community. Depending on the situation in each site, the governance group and the lead agent will work together to prepare regular financial reports for funders and explore new opportunities for building the long-term viability of the programme.

23.10. Monitoring Quality and Fidelity

A rigorous evaluation of the Preparing for Life programme has shown it to have had a large and substantive impact on multiple aspects of children's lives, including their cognitive, socio-emotional, and behavioural development. Changes in parenting behaviours led to significant improvements in children's development and their readiness for school. The evaluation has shown that the changes observed in parenting behaviours resulted from the extensive support offered to families, including intensive coaching, parent training, and baby massage classes.

To maximise the potential to achieve these same outcomes, the Preparing for Life programme must be implemented as designed and described in this manual and the manual for home visitors. However, evidence-based programmes are not one-size-fits-all and may need to be adapted to meet the needs of the local population or to create a better fit with the local context. Before adopting the Preparing for Life programme, it is important to consider the following:

- Are adaptations necessary?
- How important is it to make these adaptations?
- What adaptations are suggested?
- Are resources available to implement the adaptation?

The core element of the Preparing for Life programme is the home visit, and trained professional home visitors facilitate them. Without the home visits, an organisation cannot be said to be implementing the Preparing for Life home visiting programme. Every effort should be made to ensure that families are offered the additional elements of antenatal education, breastfeeding support, baby massage, and evidence-based parenting programmes and should be encouraged to participate in these programmes as much as possible.

In addition to the particular programme elements, an essential part of the programme is the approach used to deliver the programme—core to the Preparing for Life home visiting programme in a collaborative, reciprocal relationship with parents. Families and home visitors work together as a partnership, and the relationship is based on trust and empathy. The goals and needs of families should be kept at the centre of all interactions.

Similarly, the team leader must also create an environment of psychological safety for the home visitors and use a positive coaching approach to support the team. Further details on the Preparing for Life practice principles are in Part B - Guide for Home Visitors.

Evidence demonstrates that positive outcomes for children and parents are achieved when the programme is implemented with fidelity to the programme model. Therefore, implementing the programme to a high standard, as described in this manual is critical.

Quality and fidelity are monitored in several ways in the programme, including through the following:

- Case management and support and supervision processes
- Use of programme checklists and other tools and resources
- Maintenance and review of files and other record-keeping processes
- Ongoing assessment of outcomes using the programme evaluation framework.

The following checklists can be used to monitor that the programme is being implemented as intended. Two types of checklists are provided:

- Preparing for Life whole-of-programme checklist, which provides a high-level assessment of the extent to which the programme as a whole is implemented. This checklist can be used as a 'look back' tool to assess past fidelity to programme implementation, or it can be used to assess current implementation practices.
- The Preparing for Life home visitor checklist provides an in-depth assessment of implementation fidelity for the home visiting programme. It can observe implementation practices at the individual home visitor level.

Both checklists are developed around three core concepts in fidelity measurement ((IRIS Center, Peabody University, 2024), (Carroll, et al., 2007)):

- Adherence to programme content
- Frequency and duration
- Quality of delivery.

Table 39 Programme Fidelity Checklist (1 of 2)

Adherence To The Preparing For Life Programme	Yes	No	Comments
Intake and registration processes are managed by the team leader.			
All case files include a completed and signed expectation agreement and consent form.			
All parents engaging with Preparing for Life are offered antenatal care and education support.			
All parents engaging with Preparing for Life are offered breastfeeding education and support during the antenatal period and following birth.			
All parents engaging with Preparing for Life have a home visitor that provides home visiting support.			
All parents engaging with Preparing for Life are offered baby massage classes/ individual baby massage sessions.			
All parents engaging with Preparing for Life are offered the opportunity to participate in an evidence-based parenting programme.			
All parents are invited to explore their goals and aspirations, and those of their families, at regular intervals.			
All parents take part in regular progress reviews with their home visitor.			
Case closure processes are followed as described in the manual.			
The outcomes evaluation framework is being used and outcomes data are recorded in the database.			
Families are referred or sign-posted to other services in the community where the programme is unable to meet their needs or where appropriate.			

Table 39 Programme Fidelity Checklist (2 of 2)

Frequency/Duration	Yes	No	Comments
All parents engaged with the home visiting programme are offered at least one home visit from their home visitor each month.			
All parents engaged with the home visiting programme are offered home visiting sessions that last on average 60 minutes.			
All parents engaged with the home visiting programme are offered the opportunity to participate in the programme prior to the birth of their baby.			
The Preparing for Life programme is offered to all parents from pre-birth until their child starts school.			
Quality Of Delivery	**Yes**	**No**	**Comments**
Staff are trained to deliver the programme.			
Staff are trained in and familiar with infant mental health practices.			
Staff are trained in and familiar with developmental parenting practices and approaches.			
Staff are trained in at least one evidence-based parenting programme.			
Staff are trained in baby massage.			
Staff receive regular coaching to support effective practice.			
Staff participate in regular peer networking meetings.			

For the programme checklist, the following detailed items are included.

Adherence to programme content: is the programme content delivered as specified in the manual? Are the tip sheets and other materials shared with and discussed with the family in the order described in the manual?

Frequency and duration: are the home visiting sessions delivered as frequently and for as long as are specified in the Preparing for Life manual?

Quality of delivery: are the principles and ethos underpinning the programme evident in its delivery? For example, does the home visitor adopt a welcoming and non-judgmental approach? Does the home visitor recognise that the parents with whom they are working are the experts of their families and situations?

Table 40 Home Visiting Fidelity Checklist (1 of 2)

Dimension Of Fidelity ***1** = Implemented as intended* ***2** = Partially implemented* ***3** = Not implemented*	**Rate**	**Comments**
Adherence to home visiting programme		
Home visitor opens the visit and gives time for the parent to relax with family news, etc.		
Home visitor follows up on any issues highlighted from last visit and gives feedback.		
Tip sheets are introduced, and the home visitor highlights the key points.		
The home visitor and parent discuss and consider the questions and answers on the tip sheet topic together.		
The session includes demonstrations and practical activities as appropriate to content.		
The home visitor and parent review the key points from the session and arrangements made for next visit.		
Any other issues, e.g. sibling behaviour, family health, family events, are discussed.		

Table 40 Home Visiting Fidelity Checklist (2 of 2)

Dimension Of Fidelity ***1** = Implemented as intended* ***2** = Partially implemented* ***3** = Not implemented*	**Rate**	**Comments**
Duration and frequency		
Parents receive a home visit at least once a month.		
The home visit lasts on average 60 minutes.		
Quality of delivery		
The home visitor uses a facilitative, non-didactic, way of engaging with the family.		
The home visitor does not present themselves as the 'expert' but recognises and draws on the strengths of the family.		
The home visitor is respectful and non-judgemental in their engagement with the family.		
The home visitor's engagement with the family is demonstrably informed by the programmes practice principles.		

23.11.Stage 3 Milestones

During stage 3, the lead organisation has started implementation of the programme. Team leaders and home visitors are delivering the programme 'on the ground'; referral and sign-posting pathways into the programme are working; and expectant parents have joined the programme. During this stage, organisations will incrementally build the home visitors' caseload as more parents are recruited to the programme. By the end of this stage of implementation, the organisation will have:

- Started delivering the Preparing for Life programme
- Established referral and recruitment processes
- Put in place case management systems
- An understanding of, and be using, the outcome monitoring processes described in Preparing for Life's outcomes monitoring framework
- Established processes to monitor fidelity and ensure the programme is being delivered as intended.

24. STAGE 4: MAINTAINING AND BUILDING ON PROGRESS

24.1. Introduction

During stage 4, the emphasis is on consolidating implementation and developing high-quality delivery and practices that can respond to the evolving needs of the families in the community.

At this stage, the Preparing for Life programme is up and running; recruitment and referral processes are in place; families are taking part; relationships with partners and other stakeholders are in place and working well; and staff are well-trained and supported to implement the programme with fidelity. The following sections provide information on strategies that can be used to maintain partnerships and sustain the programme in your community

24.2. Maintaining Partnerships

A critical component of the success of Preparing for Life is the collaboration with local service providers, early years education and care settings and statutory agencies, including Tusla and the HSE. Maintaining and sustaining these relationships is essential for the effective implementation of the programme and for achieving outcomes for children and parents. The team leader needs to regularly communicate with partner organisations in ways that build relationships and trust. Participation in local networks and forums can be helpful in this regard.

The implementation team facilitates peer support and reflection sessions for organisations delivering the programme. These meetings take place quarterly and are primarily focused on operational issues, programme delivery and challenges such as recruitment and retention of families in the programme. For more information about these meetings, refer to Section B - Guide for Home Visitors.

24.3. Sustainability

While it is important to consider the sustainability of the programme from the very beginning, it is likely that the organisation will have more time to concentrate on sustaining and building on your progress during Stage 4.

Sustainability can be understood as the processes by which interventions, approaches, practices, or relationships in local areas are supported so that they can continue to be delivered over time, institutionalised within settings, and have the necessary capacity built to support their delivery.

The Centre for Public Health Systems (Schell, et al., 2013), identify eight domains that, when strengthened, can help build an organisation's capacity to sustain a programme; these include:

- Environmental support: having a supportive internal and external context for your programme
- Funding stability: having a consistent financial foundation for your programme
- Partnerships: building relationships between your programme and your stakeholders
- Organisational capacity: having the internal support resources to effectively manage and deliver the programme
- Programme evaluation: assessing the programme to inform planning and programme delivery
- Programme adaptation: making changes to the programme to ensure ongoing effectiveness
- Communications: having strategic communications with stakeholders
- Strategic planning: using processes that inform the programme's directions, strategies and goals.

Paying attention to and strengthening the processes and structures around these eight domains can help your organisation build sustainability capacity.

There are some questions that organisations should consider when thinking about the key sustainability elements, these include:

Table 41 Planning for Sustainability

Key Elements	Questions
Planning for sustainability	• What do we sustain – the whole programme or part of it? • Is sustainability planning an active component of all stages of implementation? • Can existing organisations, agencies etc. integrate the programme?
Credibility of the evidence	• Are benefits to service users, staff, and organisations visible? • Is there evidence that this type of change has been achieved elsewhere?
Seeking commitment and support	• What leaders and managers in the community support the programme? • Is the programme congruent with other policy objectives/political contexts at the time and in the future?
Engagement and partnerships	• Is there evidence that appropriate and influential community members are accepting/supportive of the programme?
Programme champions	• Are there local 'champions' to promote the value of the programme and is interest likely to be ongoing?
Fit with organisation	• Is the programme contributing to the overall organisational aims? • Is 'fit' assessed in an ongoing manner?
Building capacity – organisational and community	• Are staff involved in the implementation of the programme? • Is there a capacity-building infrastructure to ensure the skills necessary to continue implementation will exist/remain?
Infrastructure for sustainability	• Have crucial elements of the programme been embedded into policies and procedures? • Are new requirements built into job descriptions?
Adaptability	• Do structures and policies allow adaptation and evolution, as required, to maintain and improve outcomes?
Monitoring & evaluation	• Are outcomes measured to determine continued benefit? • Is evidence used to develop and improve implementation? • Are there feedback mechanisms in place to communicate results and initiate action?
Funding	• Is funding available to support implementation to a level that effects are maintained (or increased)? • What other funding sources can we investigate?
Political/economic environment	• What changes are occurring in the political and economic environment that may have an impact on innovation?

24.4. Stage 4 Milestones

During Stage 4, it is 'business as usual' for the organisation to implement the Preparing for Life programme. By this stage, the team is confident and competent to implement the programme as intended; parents are engaging with the programme and the organisation is beginning to see evidence of positive outcomes for parents and their babies; and referral and signposting processes are working effectively. During this stage of implementation, the organisation will focus on how best to maintain the partnerships it has developed with all programme stakeholders and will focus on how best to sustain the programme in the longer term, while paying attention to the needs of the families and communities that the organisation supports.