

Kettering 4Wards Sure Start

Evaluation Report 2004-05

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Kettering 4Wards Sure Start

Evaluation Report 2004-05

Part 1: Summary

1. Introduction

This is the final report of the external evaluation of Kettering 4Wards Sure Start for the period 2004-05. The report is in two sections: Part 1 is a summary of the main findings with recommendations for action by the management team and partnership board. Part 2 comprises a number of appendices containing the main research activity undertaken during the year.

The evaluation priorities for the year were agreed by the Partnership Board as follows:

- a. **To identify the expectations which stakeholders have of the programme** and the evidence they would need to measure progress against those expectations. The aim of this exercise was to establish a baseline against which to measure progress on the issues which are important to local people, staff, and the commissioners of the service.
- b. **To evaluate the effectiveness of current partnership working.** With the establishment of Children's Centres to build on the work of Sure Start, and the aim to create seamless services, good partnership working is essential. The evaluation sought to identify the strengths and areas for development of the current partnerships and make recommendations for action.
- c. **To evaluate the "reach" of the Programme**
'Reach' is the extent to which the programme engages all children and families in the Sure Start area in its services. This includes children and families who may be at risk of social exclusion for reasons of ethnicity, disability or mental health issues affecting parents. Evaluation of reach is used for focusing efforts to engage these families.
- d. **The robustness of parental involvement**
Parental involvement and capacity building in the community is a fundamental aspect of the Sure Start approach. This section of the evaluation appraises the level of involvement of local parents in the programme, and the extent to which they have shaped its development.

This report summarises the results of the evaluation under each of the above headings, and draws together key themes for development in the future, and makes recommendations for action. The detailed reports of each part of the evaluation are attached as appendices.

2. Stakeholder Expectations

The first task in the overall evaluation of the Kettering 4 Wards Sure Start programme was to identify the expectations of stakeholders. This process identified a baseline of performance measures against which future progress could be judged, and help to ensure that the programme continues to be relevant to the local population. Following establishment of the baseline, progress can be reviewed on a 6 monthly or annual basis.

We identified priority areas in discussions with parents, staff, board members and key staff from partner agencies. The consultation process identified a range of expectations of the Sure Start programme, which have been grouped into expectations of **what** is provided – services, and expectations of **how** they are provided – underpinning values and principles.

Stakeholder's general expectations of service delivery are summarised below:

Kettering 4Wards Sure Start should:

- Promote learning and play
- Promote health
- Support parents
- Build confidence and skills of parents/carers
- Provide local and accessible services
- Extend the reach of the programme
- Extend community engagement
- Develop partnerships with other organisations and services

The tables below summarising progress are taken from the March 2005 update of the Stakeholder expectations report. The original report and the update (page 24) are contained in the appendix and should be read in full.

2.1 Summary of progress

Stakeholder expectation	Evaluation summary
Promote learning and play	Good progress
Promote health	Services only just getting under way – no evidence to judge progress
Support parents	Some evidence of good progress in providing child care in the area. More information needed to evaluate Sure Start services. See also section on parental involvement.
Build confidence and skills of parents/carers	Good progress. See section on parental involvement.
Provide local and accessible services	Insufficient evidence to judge progress
Extend the reach of the programme	Some progress. Registration of members from minority ethnic groups is consistent with the numbers in the general population. Need more information on service uptake by minority communities. Recent initiatives are starting to engage fathers. See also section on Reach.
Extend community engagement	Good progress in general See section on Reach for additional information on hard to reach populations Insufficient information on volunteer engagement
Develop partnerships with other organisations and services	Good progress at local level resulting in collaboration in providing services. Less progress in engagement with partners at the strategic level. See also section on partnership working.

Stakeholders also identified a range of values and principles, which they felt should underpin service delivery. These can be measured both qualitatively and quantitatively.

1. Services should be welcoming, friendly, enthusiastic, non judgmental
2. Staff should be professional, knowledgeable, and trained for the job
3. Service should be run **with** not **for** people
4. Parents should have trust and confidence in the service

Summary of progress

Stakeholder expectation	Evaluation summary
Services should be welcoming, friendly, enthusiastic, non judgmental	Excellent progress in this area – strong commitment from all staff and other stakeholders
Staff should be professional, knowledgeable, and trained for the job	Good progress in this area
Service should be run with not for people	This approach is a defining characteristic of the Kettering programme, but needs to be further developed to include all groups in the population. See sections 4 and 5
Parents should have trust and confidence in the service	Those who are significantly involved do have trust and confidence. Other groups need further engagement to build trust and confidence. See sections 4 and 5

2.2 Conclusions

Identifying stakeholder expectations has been an important first step in engaging the local community and ensuring that services are relevant to their needs.

The Sure Start team are now in a position to monitor progress against many of these expectations, which are also relevant to the objectives of Sure Start nationally, and the required outcomes of the Children Act 2004.

This has been a very valuable exercise which should be maintained and built upon for the future. It will be particularly useful in the development of Children's Centres and mainstreaming services in the Kettering area.

2.3 Recommendations

1. The Stakeholder expectations framework should be used by the Management Team and the Partnership board in the planning and development of the Children's Centre, and the mainstreaming of services.
2. The performance measures contained in the framework should be monitored and progress reviewed by the partnership board annually. Some aspects may be prioritised for more frequent review.
3. Staff responsible for each part of the programme should maintain and develop monitoring and evaluation mechanisms to ensure that there is sufficient evidence on which to assess progress. This will be essential to promote service continuity within the development of the Children's Centre and mainstreaming services.

3. Partnership Working

3.1 Introduction

Governance of programmes by interagency partnerships of statutory and voluntary agencies and local parents is an underpinning principle of the Sure Start approach. The importance of interagency working is promoted strongly in 'Every Child Matters' and supported in the Children Act 2004.

This section of the evaluation report is based on the following sources of information:

- A questionnaire based survey of partnership board members
- The partnership board and team event held on 24th February 2005
- Individual interviews with board members as part of the Stakeholder expectations exercise
- Analysis of partnership board minutes

Board members have been very co-operative with the evaluators during this process and their helpful and enthusiastic approach has been much appreciated.

3.2 Working in partnership

Sure Start, and its constituent services have been successful in developing partnership working with a range of statutory and voluntary bodies including:

- Community midwives
- Community health visitors
- Kettering General Hospital
- Health promotion
- Parentzone
- Home Start
- Social Services
- CAMHS
- Schools
- Age concern
- Fire Service
- Kettering borough council
- Citizens Advice bureau
- Welfare rights
- Probation service
- Job Centre +
- Neighbourhood learning project

The Sure Start Partnership Board

Kettering 4Wards Sure Start has a partnership board comprising 6 parents (one of whom is the Chair), 4 members of Sure Start staff, 6 voluntary sector representatives and 8 statutory agency representatives. Most of the statutory and voluntary sector representatives are based in the Kettering area, and have a local, rather than countywide role.

Values and principles

Partnership board members place a high value on working together with parents and with staff from other organisations, sharing different skills and experiences and supporting each other. They value the variety of the task, and the feeling that their efforts are achieving real results for local people.

Board members, in particular parents, have felt valued and that their contributions are heard. They value the freedom to develop their roles in the way they wish and to try new approaches. They feel very happy to be part of the Sure Start team.

The commitment to good communication, friendliness and approachability is strongly supported. Parental involvement is seen as essential in maintaining and developing the service.

3.3 Processes

Board activities

Board members are involved in a wide range of activities to support the programme. These include:

- *Developing plans*
- *Approving plans*
- *Reviewing progress against plans*
- *Setting and agreeing budgets*
- *Reviewing budgets*
- *Agreeing changes to budgets*
- *Recruiting staff*
- *Capital Programme / Building plans*
- *Promoting the programme*
- *Extending membership*
- *Approving Children's Centre Plans*

Most board members are happy with their current levels of involvement in the above activities, although representatives from voluntary agencies said that they would prefer to have a greater level of involvement. Some parents would like more involvement in approving and reviewing plans, work on buildings and the capital programme, and in approving Children's Centre plans.

3.4 Contribution to discussion and decision making

Statutory and voluntary agency representatives and staff feel confident in making contributions in board meetings. Parent board members say that they feel less confident in doing so. All however feel confident that the voice of local parents is clearly heard in the discussions.

Familiarity with Children's Centre development and mainstreaming of services

Sure Start staff and statutory agency representatives are most confident in their knowledge of future agendas and developments. Voluntary agency representatives and parents feel much less confident and familiar with the issues.

Achievements and outcomes

The achievements most valued by partnership board members include:

- Providing services to support families
- Making good progress on Sure Start objectives
- Working to a user focused model of service
- Developing the parent representative group
- Including parents in staff selection processes and interviews
- Developing the newsletter and parent involvement pack
- Developing increased confidence in service users
- Employing effective staff
- Working in partnership
- Providing training programmes
- Benefits advice

Attendance at board meetings

The table below summarises attendance from board members over the course of 8 meetings. Generally attendance has been good throughout the period, typically with 15 – 18 attending each meeting.

Parent representative attendance has normally been good, with some falling off of attendance over the summer months.

Voluntary organisations have maintained the highest level of attendance, with consistent attendance notably by the pre-school learning alliance, Centre for the unemployed, CAB and NCH (programme line management)

There has been good support from statutory organisations in the health sector, and some obvious gaps from key agencies such as Social Care and Health, KBC and education / schools. Job Centre + has shown erratic attendance.

Agenda items and issues discussed

A number of items have been discussed regularly at board meetings notably Family / Children's Centre development, finance and staffing.

Other issues discussed included:

- Risk assessment
- Parent involvement strategies and surveys
- Capacity building
- Mainstreaming
- Acceptable behaviour
- Special needs
- Planning for the forthcoming year
- Sub groups
- Widening membership
- Complaints process
- Developing new services and business planning

Reports from the parent representative group and the monitoring officer featured only twice. It may be that the parent representative issues should form part of a standing agenda for each meeting, and monitoring reports at quarterly intervals.

Overall the agenda demonstrated a useful balance between business management issues, developmental issues and one off items needing discussion. This is consistent with the views expressed by board members summarised above.

Attendance at partnership board meetings

	25/9/03	13/11	15/1/04	26/2/04	20/5/04	1/7/04	9/9/04	21/10/04
Job Centre +		1	1					1
Speech and language	1	1				1	1	1
Health visitor		1	1	1	1	1		1
Library	1	1	1	1	1		1	1
KGH Midwifery	1	1	1	1		1	1	
Lifelong learning					1	1		
KBC					1			
Social Care and Health	1					1		1
Total statutory agencies	4	5	4	3	4	5	3	5
Home start	1	1	1				1	
CAB	1	1	1	1	1		1	1
Northants childminding network	1	1				1	1	1
Volunteer centre		1			1		1	
Centre for unemployed	1		1	1	1	1		
Pre-school learning alliance	1		2	1	1	1	1	2
NCH			1	1	1	1	1	1
Total voluntary agencies	5	4	6	4	5	4	6	5
Parent representatives	3	4	4	4	2	2	0	4
Sure Start staff	4	5	4	3	4	4	3	4
Total	16	18	18	14	15	15	12	18

3.5 Strengths of the Partnership Board

The strengths of the partnership board are seen as:

- Good communications and information exchange
- The ability to discuss specific issues effectively and solve problems
- Good relationships between board members
- Bringing a wide perspective to the programme
- Good representation from local agencies and parents

3.6 Areas for development / improvement

Board members identified the following areas which needed improvement or development:

- More detailed knowledge of the programme and involvement in planning
- More information and knowledge about the future agenda and the development of Children's Centres
- More financial scrutiny
- More parental involvement
- More transparency in the workings of the board 'Demystification'
- Greater knowledge of each other's professions and approaches
- More involvement of staff in the work of the board
- Developing better links with the strategic planning processes, including the County's Preventative Strategy and Local Strategic Plans

3.7 Opportunities

The near future represents a period of great change for Sure Start services and interagency working. There will be opportunities to mainstream some of the Sure Start services and approaches in line with government policy. The development of Children's Centres provides opportunities for local agencies to work together and co-locate some services, as well as providing a much improved base for activities.

Despite reductions in the overall budgets of Sure Start programmes, ongoing financial security has been established, giving a sound basis for future planning, particularly in partnership with other agencies.

The inclusion of local parents in the planning, monitoring and delivery of services has been promoted by Kettering 4Wards Sure Start, which in turn creates opportunities for parents to be involved in the planning of other agency services. A good opportunity is provided as Sure Start services become mainstreamed, and empowered parents can also take advantage of the service user inclusion policies of these agencies, ensuring that their voices are heard.

3.8 Threats

Although funding for the future of Sure Start services is now more secure, control of the budget, currently ring fenced, has been transferred to the local authority, which may have different priorities and ways of working.

There is a danger of 'silo thinking' between the agencies involved at a county level, which may reduce the potential impact of joint working and service development. To mitigate this it is important that the County's Sure Start programmes, both separately and jointly, ensure their involvement in planning at a strategic level and make appropriate links with the Preventative Strategy and Children's Services plans.

3.9 Conclusions

The Kettering 4Wards Partnership Board has demonstrated a good level of commitment from its members, and is developing a substantial track record of achievement. It actively supports the engagement of local parents, and indeed is chaired by a local parent. Relationships between representatives of different agencies, staff and parents is good and can form the basis of joint working in the future.

The Partnership Board has tended in the past to focus on the development and direct delivery of services provided by Sure Start. There has been less emphasis on partnership working in providing services, or on mainstreaming. This is entirely consistent with the needs of the Sure Start programme in its initial and early development, but the emphasis will need to switch to partnership working and mainstreaming services in the future. This is already beginning to happen, as shown in initiatives elsewhere and in the board / team event held on 24th February.

The Kettering 4Wards partnership board consists of mainly local agency representatives. While this has benefits in planning and developing local services, it may lead to lack of engagement with the strategic level agenda. Agency representatives should ensure that they maintain links with strategic level managers in their own agencies.

To support this change of focus there is a need to address the variable knowledge / confidence about Children's Centre development particularly with parents and with voluntary sector representatives. Parents will need additional support and coaching in understanding the agenda so that they can make informed contributions to the discussions and decision making process.

3.10 Recommendations

1. Partnership board members representing Sure Start and partner statutory agencies should ensure that they maintain links with the County level strategic agenda for the development of Children's Centres and mainstreaming services. This will help to ensure maximum benefit for Sure Start members in the Kettering area.
2. The management team should continue to inform staff and services users about the development of Children's Centres to promote ownership, maximise benefits and reduce anxiety about change

4. The Reach of the programme

The Kettering 4Wards Sure Start strategy defines 'reach' as: "delivering information about the Sure Start Project to that family and that family responding by signing up as members and accessing services".

The evaluation carried out an initial 'desktop review' (see appendix 3), which used the programme's statistics to identify sections of the local community which appeared not to be reached by the programme. These were:

- Minority ethnic groups, especially Indian and Irish families but also other ethnic groups who may be Sure Start members but are not service users²;
- Male carers, including fathers and grandfathers
- Lone carers;
- Children with disabilities and illnesses;
- Children in St Mary's ward.

Following this analysis it was recommended that Phase 2 of the evaluation of reach focused on one of the following areas:

- Analysis of membership forms – to establish where members heard about Sure Start and relate this to the Hard-to-Reach Strategy as baseline information;
- Evaluation of public awareness and perceptions of Sure Start in St Mary's ward, through a questionnaire survey within the ward conducted by parent volunteers, with questionnaire design and analysis by etc (this may be repeated in other wards);
- One or two focus groups (e.g. an afternoon and/or an evening session) with male carers and staff on Sure Start premises in order to identify barriers to involvement, test further the suggestion made by a parent of sport activities for parents and children together, and consult on solutions; with publicity by means of leaflets and posters distributed by Sure Start staff, and appropriate incentives;
- A similar focus group (evening) with lone carers;
- One-to-one semi-structured interviews with two or three volunteer Sure Start members from an under-represented ethnic community, as individuals or as a group (this could be repeated with other ethnic groups at a later date) to inform a strategic approach to extending reach.

The Partnership Board were asked to prioritise a number of these recommendations for further action in phase 2.

Progress to March 2005

4.1 Focus group with lone carers

It proved not possible to gather together a group of lone carers as a focus group. As a substitute, informal interviews were held with lone carers who used Sure Start services, conducted by Sharon Milo Jones. A full report of these interviews is attached at appendix 6.

All parents were very positive about their experiences of Sure Start, and would be prepared to get more involved, perhaps as volunteers. The things they particularly liked were:

- The support of the Ante Natal service, particularly its flexibility
- The breast feeding programme
- Baby Massage
- Post natal group with crèche
- The father's group

Key themes were flexibility and opportunities to meet with other parents and to share experiences and support.

What they would like to see changed or improved included:

- More flexible service times which did not conflict with work or access arrangements. Late afternoon may be most suitable (5.30 to 6.30pm)
- More information about services, especially a full description about what they entailed – they didn't like to feel they were asking for help
- More practical information, eg benefits advice, rights on returning to work etc
- An exclusive single parent's group, to share issues and support unique to the lone carer role

Some of the issues identified above can form barriers to accessing services for lone carers, and need to be addressed in future planning.

4.2 Interviews with users of the father's group

Informal interviews were held with fathers attending the Saturday morning group. Key issues are summarised below:

Awareness of programme

- Through girlfriend (2)
- Publicity material received through the post is good
- Posters etc in surgeries, nurseries OK but don't pay a lot of attention
- Heard about it through main drop in group – encouraged by programme manager
- Should be more information in advertisements saying what the group does, what age groups etc

Accessibility

- Would need to know that other men attend
- Feel out of place in a majority women's group
- Can't get involved during day – working
- Too busy to go on trips

Services

- Father's day out would be good
- Important to do things as a family
- Father's group provides respite in a long day
- Father's group is enjoyable – made to feel welcome
- Father's groups need to be at the weekend – too tired in the evening

- A good resource for fathers on access visits to their children – somewhere relaxed to go to. Otherwise it can be a struggle to keep children occupied.

Quality

- Sure Start does a fantastic job – staff friendly and very helpful. Staff actively try to involve people and make you feel at home. Brilliant. (3)

Involvement in service development

- Some fathers have been involved from the initial planning stage
- One parent uses his professional skills in helping to write the newsletter
- Never thought about being a parent board member but would consider it
- Would like to get more involved

Ideas for improvement

- Sport training with boys on a Saturday – Kettering Leisure Village is expensive
- Making a banner to advertise the group
- Make the group more frequent – every week if possible. Some thought every 2 weeks would be better – Saturday is best
- Would not object to paying £2-3, or voluntary donations if it could help the service expand (2)
- Buddy system to help introduce other parents
- Helping other parents through Sure Start using father's practical and trade skills
- More public events – fetes, fund raising, raffles
- Bulletin boards in local shops and pubs - 'Attention Dads'

4.3 Analysis of membership forms

Not yet completed

4.4 Survey in St Mary's ward by local parent volunteers

In hand but not yet completed

4.5 Interviews with members of minority ethnic communities

Letters have been written to known members of minority communities inviting them to have discussions with the evaluators. To date none have been prepared to be involved.

4.6 Issues for the development of Sure Start services

Kettering 4Wards Sure Start has made significant strides in engaging local families in services, including many 'friends of Sure Start'. It has also been successful in attracting parents to be part of the Sure Start programme, and to be part of the parent's reference group and the partnership board.

Despite this, the service, in common with many others, has been less successful in engaging parents and families from 'hard to reach' communities. Many ideas have been developed to facilitate this, as detailed in the Hard to Reach strategy. These communities may represent some of the most isolated and socially excluded children and families, including those linked with increased likelihood of involvement with the statutory care agencies.

Engagement with these communities, building on the initiatives already started, should be a priority for the programme in the forthcoming year to ensure that services are not provided exclusively for 'mainstream' families.

4.7 Recommendations

The programme should increase efforts to identify and engage members of 'hard to reach' and potentially socially excluded communities including:

- Members of ethnic minority communities
- Lone parents (both mothers and fathers)
- Fathers
- Families in the St Mary's ward

5. Parental Involvement

The involvement of local parents in the design, delivery and evaluation of services is an essential feature of the Sure Start approach and prioritised by all stakeholders. Kettering 4Wards Sure Start has designed a **Parental Involvement strategy** to promote this approach which contains the following elements:

- The use of a variety of advertising methods to improve reach, taking into account differing language and literacy skills – includes the parent involvement pack, publicity and leaflets
- Use of a variety of methods of consultation with local parents – includes formal and informal discussion, surveys etc
- Different levels of involvement – as volunteers, parent rep group, board members etc
- Strategic involvement in planning and service delivery – includes partnership board, parent rep group
- Support for involvement – including child care, direct support from staff

An appraisal of progress on the strategy is included at appendix B of this report

5.1 Progress on implementing the strategy

Information to inform this appraisal on progress implementing the strategy comes from the following sources:

1. A survey conducted by Jan Sherlock in July / August 2004
2. A discussion with and questionnaire to all members of the parent representative group based on findings from the above survey
3. A focus group session with parents at the post natal group facilitated by Sharon Milo Jones (see appendix)
4. The partnership board / Sure Start team event held at the Cornmarket Hall in March 2005.

5.2 Current position

The use of advertising and marketing methods to improve reach

- Stands at community and public events – a number of events have been supported including the Newlands Centre and the Warkton forum.

- Promotion via Midwives, and Health Visitors within 2 months of birth has been partly implemented.
- The Parent Involvement Pack has now been developed and is being distributed. This gives a range of useful information about Sure Start, and can be used by local parents to help recruit new members
- Little progress has been made on translating material into community languages
- Parents who were heavily involved in Sure Start, such as parent rep group members felt that communications from Sure Start were good and that they were kept informed. Communication from Sure Start was seen as a problem area by parents who were less intensely involved, particularly on the range of services available. More publicity was thought to be needed.

The use of a variety of methods of consultation with local parents

- Written and verbal questionnaires have been frequently used. Parents consulted felt that these were a good way to get information, particularly from less confident people.
- Local parents have been involved in developing and implementing a survey of the local community, and a further parent led survey is being developed for the St Mary's ward as a follow up to the Reach report. This is a very positive role for the parent representative group.
- Verbal consultation via Parent Rep group, Stay and Play, toddler groups, promotional events are seen as useful, although parents say that they had not been asked for a lot of feedback
- The idea of an issues log to record issues from consultation has not been developed

Different levels of involvement

- Local parents are involved as volunteers, contributing to the newsletter, parent rep group, in consultations and as board members. There is a strong commitment from Sure Start staff to involving parents, and parents have a role in many of the Sure Start functions including the recruitment of staff. Involvement of parents is seen as key to future development.
- While some parents are heavily involved in the parent rep group, there is limited awareness among service users of opportunities for involvement – parents at the focus group did not know in what ways they may become involved or the supports available to them.
- There is a need for more flexibility of commitment. The focus group suggested that they would be more likely to become involved on a flexible basis rather than feel under pressure to attend something on a regular basis. They also suggested an 'open meeting' approach where parents would be asked to give feedback on a particular topic or undertake a specific task without long term commitment.

Strategic involvement in planning and service delivery

Sure Start has a strong commitment to involving parents in all aspects of the work including strategic planning. Some parents are heavily involved in planning and service delivery through the partnership board and the parent rep group. The strategy lists a number of actions to promote effective parental involvement including:

- The promotion of an inclusive style of chairing meetings. The chair of the partnership board is a local parent and efforts are made to fully include parents. Parent attendance at the partnership board is generally at a high

level. The board feels confident that the voice of local parents is clearly heard.

- The involvement of parents in decisions wherever possible. Parents, particularly board members and parent rep group members, are encouraged to be involved, and feel that their contributions are valued. Some parents would like more involvement in the management of Sure Start, including reviewing and approving plans, and involvement in building decisions.
- Support of parents via buddy or mentoring system. Not yet in place.

Support for involvement

The strategy lists a number of actions to support parental involvement:

- Provision of childcare and transport. Help is available in providing child care to enable parents to be involved. Assistance with transport can also be provided.
- Other help according to the need of parent and activity, e.g. language/literacy support, training, help with babies and toddlers, accompanying parents, support as appropriate e.g. to raise self esteem. Limited support is available for language difficulties. Poor literacy in the general population is an issue for Kettering Borough, and may provide barriers to involvement.
- To be effective in making contributions, parents need to understand the future change agenda. At present they do not feel confident that they have the necessary knowledge. Steps are currently being undertaken to improve the knowledge base of parents, staff and other stakeholders.
- The recent partnership board / team away day generated a number of ideas for increasing parental involvement including:
 - More involvement in meetings such as working groups
 - Better advertising of opportunities to become involved
 - Staff using the parent rep group to share information and ideas
 - Holding a parent day
 - Parent forum
 - Parents to sell idea of parental involvement, but be trained to do so – the development of parent ambassadors

5.3 Conclusions

Parent involvement is a key feature of Sure Start nationally, and the theme has been enthusiastically embraced by the Kettering 4Wards programme. Great efforts have been made to involve parents and staff have a strong commitment to the principle, and go out of their way to make the service welcoming.

Certain parents are heavily involved in the programme, notably those in the parent representative group. There is less success in involving parents from minority communities, and advertising and other forms of marketing need to be used to involve more parents. Support for parents in the representative group and board is essential to ensure that the parent's voice is heard in the forthcoming change agenda and the full implementation of Children's Centres and the mainstreaming of services. This will include support in understanding this agenda, and support in building confidence to put their views forward.

5.4 Recommendations

- Despite considerable progress there remains a need to invest in publicity and marketing of Sure Start services in the local area. Sure Start should specifically

develop marketing to address the needs of minority communities and 'hard to reach' groups.

- o The programme should increase its support of parents on the Partnership Board and the Parent Representatives group to ensure continued understanding of the change agenda and to ensure that the parent's voice continues to be heard.

6. Summary of Recommendations

1. The Stakeholder expectations framework should be used by the Management Team and the Partnership board in the planning and development of the Children's Centre, and the mainstreaming of services.
2. The performance measures contained in the framework should be monitored and progress reviewed by the partnership board annually. Some aspects may be prioritised for more frequent review.
3. Staff responsible for each part of the programme should maintain and develop monitoring and evaluation mechanisms to ensure that there is sufficient evidence on which to assess progress. This will be essential to promote service continuity within the development of the Children's Centre and mainstreaming services.
4. Partnership board members representing Sure Start and partner statutory agencies should ensure that they maintain links with the County level strategic agenda for the development of Children's Centres and mainstreaming services. Some work is currently being undertaken in this area through Board Members with a countywide role, which could be further developed. This will help to ensure maximum benefit for Sure Start members in the Kettering area.
5. The management team should continue to inform staff and services users about the development of Children's Centres to promote ownership, maximise benefits and reduce anxiety about change
6. The programme should increase efforts to identify and engage members of 'hard to reach' and potentially socially excluded communities including:
 - a. Members of ethnic minority communities. Links are currently being developed with these communities.
 - b. Lone parents (both mothers and fathers)
 - c. Fathers
 - d. Families in the St Mary's ward
7. Despite considerable progress there remains a need to invest in publicity and marketing of Sure Start services in the local area. Sure Start should specifically develop marketing to address the needs of minority communities and 'hard to reach' groups. The recent appointment of a publicity officer should assist this process.
8. The programme should increase its support of parents on the Partnership Board and the Parent Representatives group to ensure continued understanding of the change agenda and to ensure that the parent's voice continues to be heard.

Appendix 1

Report to Kettering 4 Wards Sure Start Partnership Board: September 2004

Identifying Stakeholder Expectations

1. Introduction

An early task in the overall evaluation of the Kettering 4 Wards Sure Start programme has been to identify the expectations of stakeholders. This process was intended to identify a baseline against which future progress could be judged, and help to ensure that the programme continues to be relevant to the local population. Once the baseline is established, progress will be reviewed on a 6 monthly or annual basis.

2. Methodology

A number of stakeholder groups were identified as follows:

- Local parents who use Sure Start services
- Staff and managers from partner organisations in the statutory and voluntary sectors
- Sure Start programme staff and managers
- Members of the Sure Start Partnership Board.

The researchers conducted both individual and group consultations with members of these stakeholder groups. Details of the individuals consulted are shown in the appendix to this report.

We also had access to information collected by the Sure Start Information Manager, and from partner organisations.

The results of this exercise are summarised below:

3. Stakeholder expectations

The consultation process identified a range of expectations of the Sure Start programme, which have been grouped into expectations of **what** is provided – services, and expectations of **how** they are provided – underpinning values and principles.

Stakeholder's general expectations of service delivery are summarised as follows:

- To promote learning and play
- To promote health
- To support parents
- To build confidence and skills of parents/carers
- To be local and accessible
- To extend the reach of the programme
- To extend community engagement
- To develop partnerships with other organisations and services

Stakeholders identified a range of values and principles, which they felt should underpin service delivery. These can be measured both qualitatively and quantitatively.

5. Services should be welcoming, friendly, enthusiastic, non judgmental
6. Staff should be professional, knowledgeable, and trained for the job
7. Service should be run **with** not **for** people



8. Parents should have trust and confidence in the service

Stakeholders agree that good progress has been made in the development and implementation of the Sure Start programme. They report very positive views about both what is being provided and how it is delivered.

Some services are already included in the programme, and it is therefore possible to identify the current baseline position and measure progress; others have been suggested and are not yet in place but should be taken into account for future developments. Issues marked (P) are those raised by parents during consultation.

This evaluation task will help to monitor and ensure that current standards are maintained and appropriate new services developed.

3.2 Service expectations

3.2.1 Promote learning and play

Service	Performance measure	Baseline position – April 04
Toy library	Number of sessions per month Number using facility	Not due to start until Autumn 04
Play opportunities with peers and parents – including messy play	Number of sessions per month Numbers attending	79 messy play session in the year = 6.5 sessions per month Average of 114 children per month and 89 carers per month
Access to books and opportunities to read together(P) – bookstart, rhymetime, library membership	Numbers of session per month Numbers attending Library membership	3 sessions per month – 16 children, 17 carers Library membership figures to be obtained
Promote educational achievement	Education assessment at primary school compared with children outside Sure Start area	Baseline requested in September 04
Promote play opportunities	Number of playgroups and mums and tots groups in the area No of child places	
Quick access to speech and language services	Time taken from referral to appointment Trends in referral data	To be obtained

Other suggestions:

Physical play session e.g. tumbletots

Twilight sessions for parents to promote leaning

Early access to specialist educational support for children with special needs

Raised awareness of education processes – e.g. how to register your child for school

3.2.2 Promote health and welfare

Service	Performance measure	Baseline position – April 04
Health promotion sessions – smoking cessation (P), breast feeding support, healthy eating, weight advice (P), family planning	Number of interventions, numbers attending Numbers ceasing to smoke	Only just starting – to be revisited in 6 months
Services for children with	Specific services in place and	Development of services

special needs, including challenging behaviour	take up by families Numbers of parents reporting problems in managing behaviour Outcomes of Child development tests at 2 years for the Sure Start area	underway through Child Development and Assessment centre – revisit in 6 months
Support for parents to reduce risk of harm to children	Numbers of children in the area on the Child Protection register Number of re-registrations Number of children assessed as being “in need” in the area No of admissions to hospital	

Other suggestions:

- Clinics deliver services in the locality at other venues
- Pre-conception advice
- Support for post natal depression – on line in January
- More health visitor availability at other Sure Start services (P)

3.2.3 Support parents

Service	Performance measure	Baseline position – year to April 04
Benefits advice, debt counselling (P) and household budgeting	Number of individual advice sessions Value of additional benefits claimed	Additional £200,000 in benefits coming into the Sure Start area
Parentcraft classes (P)	Number of sessions per month Number attending	3 sessions per month 10 carers per month
1-1 support to individual families	Number of visits made per month by individual team members	Average 19 children seen per month
Family fun days	Number offered per year Number of families attending	2 97 children, 72 carers
Baby massage sessions to promote parent/child relationships	Number of sessions per month Number attending	0 in ¾
Appropriate child care	Number of childminders registered in area Number of child places	Jigsaw to provide

Other suggestions:

- New mums to spend time with expectant mums
- Crisis telephone line (P)
- Saturday stay and play to involve fathers and grandfathers (P)
- Summer activities for older children, provided in partnership with other agencies (P)
- Common assessment – parents do not have to repeat the same story
- Shoppers crèches (P)
- Buddying – 1-1 support for new users (P)
- Approved childminding service (P)

3.2.4 Confidence and skill building

Service	Performance measure	Baseline position – April 04
Involvement of parents in the Sure Start programme	Number of parents involved in planning and delivery of service Percentage of staff interviews which include a parent as a panel member No of parent helpers and volunteers	A total of 8 carers have attended 3 Partnership Board meetings 1 carer has been involved in 3 staff interviews

Other suggestions:

- Budgeting sessions
- Training on parenting alongside childminders
- Keep fit for mums (P)
- First aid

3.2.5 Local and accessible services

Service	Performance measure	Baseline position – April 04
Service which are within buggy pushing distance	Map distance from parts of Sure Start area to services	Could undertake a plotting exercise – possibly using GIS

Other suggestions:

- One centre that delivers many services

3.2.6 Extend the reach of the programme

Service	Performance measure	Baseline position – April 04
Involvement of minority groups	Numbers of families from minority ethnic communities registered Numbers attending	To be ascertained – NB another part of the evaluations is focusing on the reach of the programme
Involvement of fathers and grandfathers	Numbers attending	Ditto

Other suggestions:

- Sport activities for parents and children together (P)

3.2.7 Extend community engagement

Service	Performance measure	Baseline position – April 04
Involvement of volunteers	Number of volunteers recruited from the local community to help with Sure Start	To be obtained

Other suggestions:

- More volunteering opportunities

3.2.8 Develop partnerships

Service	Performance measure	Baseline position – April 04
Links to partner agencies	Contacts and involvements, formal and informal, between Sure Start staff and partners	<p>A survey of Sure Start staff involvement in formal interagency liaison was conducted in August 2004. A detailed summary of this survey is attached in the appendix to this report. It should be acknowledged that this survey was carried out over the holiday period and does not include all staff.</p> <p>A wide range of organisations are covered, particularly through multiagency programmes such as Teenage Pregnancy.</p> <p>Contact is maintained through a variety of means: formal meetings, occasional meetings, joint project work and liaison through named members of staff.</p> <p>The 8 members of staff who responded to the survey average 33 days per year per staff member on partnership activity, which represents a considerable commitment to interagency working.</p>

Other suggestions:

- Development of Children's Centre – underway – need to track involvement in strategic development across agencies

3.3 Measuring values and principles

Ways to evaluate	Performance measures	Baseline
Parents are involved	Number of parent helpers Number of parents involved at all levels Parents introduce other parents Parents participate in training Individual family work is planned and agreed with parents	8 carers have been involved in the Partnership Boards, and 1 carer involved in staff interviews. Numbers of parent helpers are to be obtained. A file study could be carried out to ascertain individual involvement in family support plans.
Parents come back repeatedly	Attendance data	To be obtained
Complaints are responded to	Number of complaints and time taken Number of informal complaints	1 in 03/04 - immediate investigation, resolved in 2 weeks
Staff are settled and committed	Number of staff applying for posts Number of staff leaving Number of staff on long term sick leave Number of training sessions offered/taken up	To be obtained
Services are well run	Parents and children's views Press coverage	Work to be done on this aspect over the next three

	Attendance data Referrals from other agencies No of compliments received	months.
Parents are happy with the service provided	No of services working to full capacity Numbers attending	Work to be done on this aspect over the next three months.

4. Conclusions

The stakeholder consultation contacted a large number of people involved with the programme, all of whom participated with enthusiasm and commitment.

It was agreed during the consultation process that evaluation is the responsibility of everyone involved, and not just the external evaluators. Effective collection and analysis of monitoring information can enhance individual services, and help to provide evidence to support sustainability in the future.

The consultation has established:

- A set of current or potential performance measures based on stakeholder expectations of the programme
- A baseline of numerical (quantitative) information for some performance measures
- Incomplete baseline information for some performance measures, collected by partner agencies. These will be completed in the near future once information is received.
- A framework for 'soft' (qualitative) information. This information will be collated from interviews, further consultation and other aspects of the evaluation process.
- Stakeholders' suggestions for future service development, which have not as yet been formally considered. These services will need to be prioritised by the management group and partnership board, and implemented if agreed.

5. Next Steps

Work will now continue to develop the baseline information, with emphasis on gathering more qualitative information. A further review, using the same performance framework will be undertaken in January 2005, and reported to the February partnership board.

The Partnership Board is requested to consider this report and identify any areas of priority for the follow up stage of evaluation of stakeholders' views.

The Board is also asked to take into account the stakeholders views on service development in planning the next stage of the programme.

Brian Atkins and Sue Brunton-Reed
August 2004
(Updated September 2004 following meeting)

Appendix 2 Stakeholder Expectations: Update Report March 2005

The first task in the overall evaluation of the Kettering 4 Wards Sure Start programme was to identify the expectations of stakeholders. This process identified a baseline of performance measures against which future progress could be judged, and help to ensure that the programme continues to be relevant to the local population. Following establishment of the baseline, progress can be reviewed on a 6 monthly or annual basis.

We identified priority areas in discussions with parents, staff, board members and key staff from partner agencies. The consultation process identified a range of expectations of the Sure Start programme, which have been grouped into expectations of **what** is provided – services, and expectations of **how** they are provided – underpinning values and principles.

Stakeholder's general expectations of service delivery are summarised below:

Kettering 4Wards Sure Start should:

- Promote learning and play
- Promote health
- Support parents
- Build confidence and skills of parents/carers
- Provide local and accessible services
- Extend the reach of the programme
- Extend community engagement
- Develop partnerships with other organisations and services

2.1 Summary of progress

Stakeholder expectation	Evaluation summary
Promote learning and play	Good progress
Promote health	Services only just getting under way – no evidence to judge progress
Support parents	Some evidence of good progress in providing child care in the area. More information needed to evaluate Sure Start services. See also section on parental involvement.
Build confidence and skills of parents/carers	Good progress. See section on parental involvement.
Provide local and accessible services	Insufficient evidence to judge progress
Extend the reach of the programme	Some progress. Registration of members from minority ethnic groups is consistent with the numbers in the general population. Need more information on service uptake by minority communities. Recent initiatives are starting to engage fathers. See also section on Reach.
Extend community engagement	See section on Reach Insufficient information on volunteer engagement
Develop partnerships with other organisations and services	Good progress at local level resulting in collaboration in providing services. Less progress in engagement with partners at the strategic level. See also section on partnership working.

Stakeholders also identified a range of values and principles, which they felt should underpin service delivery. These can be measured both qualitatively and quantitatively.

9. Services should be welcoming, friendly, enthusiastic, non judgmental
10. Staff should be professional, knowledgeable, and trained for the job
11. Service should be run **with** not **for** people
12. Parents should have trust and confidence in the service

Summary of progress

Stakeholder expectation	Evaluation summary
Services should be welcoming, friendly, enthusiastic, non judgmental	Excellent progress in this area – a defining characteristic of the programme
Staff should be professional, knowledgeable, and trained for the job	Good progress in this area
Service should be run with not for people	See section on parental involvement
Parents should have trust and confidence in the service	See sections on reach and parental involvement

The sections below outline progress against these expectations by listing successes, planned but not yet implemented services, areas where there is insufficient information, and areas where there has been no progress. Issues marked (P) are areas which were raised in consultation by parents. A major exercise to update this information is planned for April 2005.

Service planning and delivery

2.1 Promote learning and play

Parents and other stakeholders emphasised the importance of Sure Start in promoting learning and play.

Successes:

- Messy play – good numbers of children and parents attend messy play sessions
- Access to books and learning (P) – many opportunities have been developed including bookstart, rhymetime, increased use of libraries by children and families
- Promoting play opportunities – there is a good provision of preschool playgroups and mums and tots groups in the area

Waiting for information

- Quick access to speech and language services

Planned but not yet started

- Toy library

Long term outcomes

- Information needed on the education assessment at primary school of children from the Sure Start area in comparison with the general population

Evaluation summary

Good progress

2.2 Promote health

Health promotion sessions were viewed as important by the parents consulted:

Successes

- None evidenced at present

Only just starting

- Health promotion sessions – smoking cessation (P), breast feeding support, healthy eating, weight advice (P), family planning
- Services for children with special needs, including challenging behaviour

Waiting for information

- Support for parents to reduce risk of harm to children

Evaluation summary

Services only just getting under way – no evidence to judge progress

2.3 Support Parents

Another commonly supported theme was the role of Sure Start in supporting parents

Successes

- Providing appropriate child care. There are 21 childminders in the area, with provision for 52 children.

Waiting for information

- Benefits advice, debt counselling (P) and household budgeting
- Parentcraft classes (P)
- Support to individual families
- Family fun days
- Baby massage sessions to promote parent / child relationship

Evaluation Summary

Some evidence of good progress in providing child care in the area. More information needed to evaluate Sure Start services.

2.4 Build confidence and skills of parents/carers

Successes

Involvement of parents in the Sure Start programme: A total of 8 carers have attended 3 Partnership Board meetings. 1 carer has been involved in 3 staff interviews.

A full report on this issue is attached in the appendix and is summarised in part 4.

Evaluation summary

Good progress in this area

2.5 Provide local and accessible services

Successes

- None evidenced at present

Waiting for information

- Services which are in buggy pushing distance – mapping exercise to be undertaken

Evaluation summary

No evidence to judge progress

2.6 Extend the reach of the programme

Current progress

- Involvement of ethnic minority groups: registration of members from minority ethnic groups is consistent with the numbers in the general population. A separate report has been completed on this issue (See section 3 of this report). No data is currently available for attendance at services by minority groups.

Waiting for information

- Involvement of fathers and grandfathers – to be updated in April 2005

Evaluation summary

Some progress. Registration of members from minority ethnic groups is consistent with the numbers in the general population. Need more information on service uptake by minority communities. Recent initiatives are starting to engage fathers. See also section on Reach.

2.7 Extend community engagement

Waiting for information

- Involvement of volunteers – no information at present

2.8 Develop partnerships with other organisations and services

This is a key area for the future development of Sure Start services and is required under the Children Act 2004. A full report is available in the appendix and the issues are summarised in section 2 of this report.

Successes

Contact with other agencies is maintained through a variety of means: formal meetings, occasional meetings, joint project work and liaison through named members of staff.

The members of staff who responded to a survey average 33 days per year per staff member on partnership activity, which represents a considerable commitment to interagency working

Evaluation summary

Good progress at local level resulting in collaboration in providing services. Less progress in engagement with partners at the strategic level. See also section on partnership working.

Values and principles

2.9 Services should be welcoming, friendly, enthusiastic and non judgemental

Successes

- Parents are involved in Sure Start. There is a good level of parental participation. There are currently 5 parents on the board, including the chair. The Parent Representatives Group has an average attendance of 7 parents. 2 parents are involved in newsletter production and 2 in interviewing.
- Parents introduce other parents. Parent ambassadors are not yet in place. The number of members who were first introduced to Sure Start by other parents is to be analysed in April 05.
- Two parents are currently involved in training

Waiting for information

- Individual family work – information not available
- Parents come back repeatedly – information to be collated in April 2005



Evaluation summary

Excellent progress in this area – a defining characteristic of the programme

2.10 Staff should be professional, knowledgeable, and trained for the job

Current progress

- Responding to complaints – good responses to complaints are an essential element of the professional role: there was one recorded complaint in March 2004 which was quickly resolved. 2 informal complaints are currently in progress.
- Staff are settled and committed: 2 staff have left the team during the year, and one is on long term sick leave.
- Services are well run – evidence from interviews with staff, service users and partner agencies report a high level of satisfaction
- Parents are happy with the services provided: good levels of user satisfaction noted

Awaiting information

- There is currently no information on the involvement of staff in formal training
- Need collation of data on attendance

Evaluation summary

Good progress in this area

2.11 Services should be run with not for local people

Parents are significantly involved in the running of the programme as evidenced in sections 4 and 5 of this report.

2.12 Parents should have trust and confidence in the service

Parents who are significantly involved have trust and confidence in the service as shown in sections 4 and 5 of this report. Efforts need to be made to engage occasional users, and those not taking up service, as discussed in these sections

Appendix 1 – Sure Start stakeholders interviewed as part of this process

Name	Organisation
Gill Correa	KBC
Nelister Curry	NCC Lifelong Learning
Maggie Don	Ward councillor
David Freeth	CAB
Judy Garside	Health Visitor
Lynn Hopkins	Regional NCH
Ailish Kennedy	Midwifery Service KGH
Frank McMahon	Sure Start Programme manager
Kerri Macallister	PLA
Lynne Mackness	KBC
Tina Maltman	NCMA
Peter Nix	Volunteer Bureau
Paula Orr	NCC Integrated Children's Services
Claire Sutton	Community development Sure Start
Rob Dixon	Kettering 4 Wards Sure Start
Ingrid Mercer	Northamptonshire Libraries
Debbie Camozzi	Sure Start
Kathy Patrick	Sure Start
Glenys Humphreys	Sure Start
Clare Sutton	Sure Start
Angela Roberts	Sure Start
Nadine Hale	Sure Start
Donna Johnson	Sure Start
Victoria Lee	Sure Start
Shelley Osbourne	Sure Start
Rachel Taplin	Sure Start
Lynn Hudspith	Sure Start
Lynda Spelling	Sure Start
Chrissy Bray	Sure Start
Susan Burdett	Sure Start

Group consultations

1. Kettering 4 Wards Sure Start staff team (Individuals listed above)
2. Stakeholder consultation meeting
3. Parent consultation meeting (7 mothers attended)
4. Attendance at staff team away day
5. Consultation on partnership working (8 Sure Start staff responded to the questionnaire)

Appendix 3

Liaison with partner agencies and services

Questionnaires were issued to all Sure Start staff. Replies were received from a total of 8 staff, and are summarised in the table below. The survey took place over the summer holiday period, which limited the response. We plan to add to this table during the course of the evaluation.

Agency / Service	Type of liaison	Staff time pa	Staff involved	Comments
NCH (Accountable Body)	RM JP	9d	Finance officer	Regional and head office meetings, and liaison with other Sure Start programmes
Sure Start Regional Office	RM	2d	Finance officer	Focus on finance issues and information exchange
Partnership Board	RM	8d	Finance officer	Presentation of financial reports Useful for contact with partner agencies
Kettering Library	RM	4d	Finance officer	Financial management. Part of partnership board
	JP	1d	Office manager	Administrative issues
Kettering CAB	RM	6d	Finance officer	Part of financial management sub group. Issues and information exchange Part of partnership board
	JP	1d	Office manager	Administrative issues
Heartlands PCT	RM	6d	Finance officer	Part of partnership board
	N	6d	Health Visitor	Health Visitor meetings Staff Roadshow
Kettering General Hospital	RM	6d	Finance officer	Part of partnership board Phone and document exchange
	RM JP N	10d	Health Visitor	Maternity Unit Liaison
	JP RM N	12d	Midwife	Maternity Unit Liaison
Grange community neighbourhood nursery	JP	As required	Finance officer	Project work
Children's Centre Development	JP	As required	Finance officer	Project work
Grange Methodist Church Hall	JP	As required	Finance officer	Use of premises and development
Grange School	N	As required	Admin Assistant	Room booking
Social Services	N	As required	Admin Assistant	Family based work
Kettering Youth Information and Counselling Service	RM	10	Admin Assistant	Volunteer work

Agency / Service	Type of liaison	Staff time pa	Staff involved	Comments
William Knibb Centre	RM JP N	4d	Admin Assistant	General contact
			Health Visitor	Young parents group
Volunteer Forum	OM	3d	Volunteer co-ordinator	Part of volunteer development role
Volunteer Centre	OM	As required	Volunteer co-ordinator	Part of volunteer development role
	JP	1d	Office Manager	Administrative issues
	OM	2d	Community Development Worker	Community development
Teenage Pregnancy Forum	RM	4d	Health Visitor	Multi-agency meeting
	RM	4d	Midwife	Multi-agency meeting
Postnatal Group	RM	8d	Health Visitor	Multi – disciplinary group
Protected learning time	RM	6d	Health Visitor	For all PCT employees
Home and Road Safety Awareness weeks	OM N	3d	Health Visitor	Multiagency, short term project
Stakeholders event	OM	1d	Health Visitor	Interagency and inter – Sure Start programmes
Breastfeeding Support Group / working party	RM	12d	Health Visitor	Multidisciplinary group
	RM	12d	Midwife	Multidisciplinary group
Kettering Local Health Group communication forum	RM	3d	Health Visitor	Multidisciplinary group
Smoking Cessation Alliance / Liaison	RM JP	6d	Health Visitor	Multidisciplinary group
	RM	6d	Midwife	Multidisciplinary group
Fire Service Liaison	OM JP	As required	Health Visitor	Focus on home safety
Post natal depression forum	RM N JP	10d	Health Visitor	Multiagency group including parents
	RM N JP	10d	Midwife	Multidisciplinary group
Parentzone	JP	6d	Health Visitor	Multiagency group
Midwifery liaison	OM JP	2d	Health Visitor	Multiagency group
Warkton forum (area profiling)	RM	2d	Health Visitor	Multidisciplinary group
	RM	2d	Community Development Worker	Multidisciplinary group
Community practitioners and health visitors association	N JP	1d	Health Visitor	Professional support group
Antenatal group	RM JP	10d	Health Visitor	Multidisciplinary group
	Om	1d	Midwife	Cooking / nutrition courses
Child Safety Forum	OM JP N	4d	Health Visitor	Accident prevention week – intense short programme – safety

Agency / Service	Type of liaison	Staff time pa	Staff involved	Comments
				equipment delivered
Baby Café	OM N	As required	Health Visitor	Multiagency group
Bodywise outreach	JP OM	Occasional	Health Visitor	Multidisciplinary group
	JP	Occasional	Midwife	Multidisciplinary group
Kettering Development and Assessment Team (special needs register)	RM JP	2d	Health Visitor	Multidisciplinary group
Homestart	OM JP N	2h	Health Visitor	Support for programme
Young Parents Housing Needs	OM	3d	Midwife	Multidisciplinary group
Child protection case conferences	OM	5d	Midwife	
Midwife supervision / liaison	RM	4d	Midwife	Formal supervision of midwives Liaison with East Midlands Sure Start midwives
Post natal support group	RM	12d	Midwife	Multiagency group
Kettering Borough Council	N	10d	CAB Sure Start advisor	
Benefits agency	N	10d	CAB Sure Start advisor	
Tax credit Department	N	10d	CAB Sure Start advisor	
Job Centre Plus	N	6d	CAB Sure Start advisor	
Lifelong Learning	OM JP N	3d	Community Development Worker	

NB: Agencies involved in multiagency / multidisciplinary groups include:

- Heartlands PCT
- Connexions
- NCC Lifelong Learning
- NCC Social Care and Health
- Northamptonshire Healthcare PCT Trust
- Kettering BC Housing Services
- Homestart
- GPs
- Health Promotion
- Youth workers
- District nurses
- Practice nurses
- Age Concern
- Fire Service
- Cressetts Centre
- Paramedics
- Neighbourhood Learning
- Family Support Wardens

Appendix 4

Sure Start Kettering 4Wards

Evaluation of the Reach of the Programme Phase 1 - Desktop Review

Report to the Partnership Board
6 September 2004

Jan Sherlock
Research Associate
Effective training and consultancy limited



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1. Introduction

Sure Start Kettering 4Wards exists to develop and provide services to families with a child under the age of four living in Avondale, St. Andrew's, St. Mary's and Warkton wards. It aims to reach all families in the area, including families who are identified as hard to reach, and to work with them to give their children a better start in life. Sure Start Kettering 4Wards started providing services in December 2002, and now needs to evaluate the reach of the programme – what has worked (and not) and what new effective methods can be used. *Effective training and consultancy* have been commissioned to undertake this evaluation as part of a wider brief.

2. Methodology

Contextual and service data provided by the Sure Start Monitoring Officer have been analysed and the findings are set out in Section 3.

The Hard-to-Reach and Parent Involvement Strategies have been analysed and review schedules completed by Sure Start staff – attached as Appendices A and B. The schedules are considered in the discussion in Section 4 and have informed the recommendations in Section 5.

3. Current extent of reach – data analysis

Two types of family are recorded on the Sure Start database: 'members' and 'friends'. Members are the Sure Start target group; they must live within the Sure Start area, have one or more children under the age of four or be a mother-to-be. Friends include anyone else who has signed a registration form or a consent form.

3.1 Reach to members

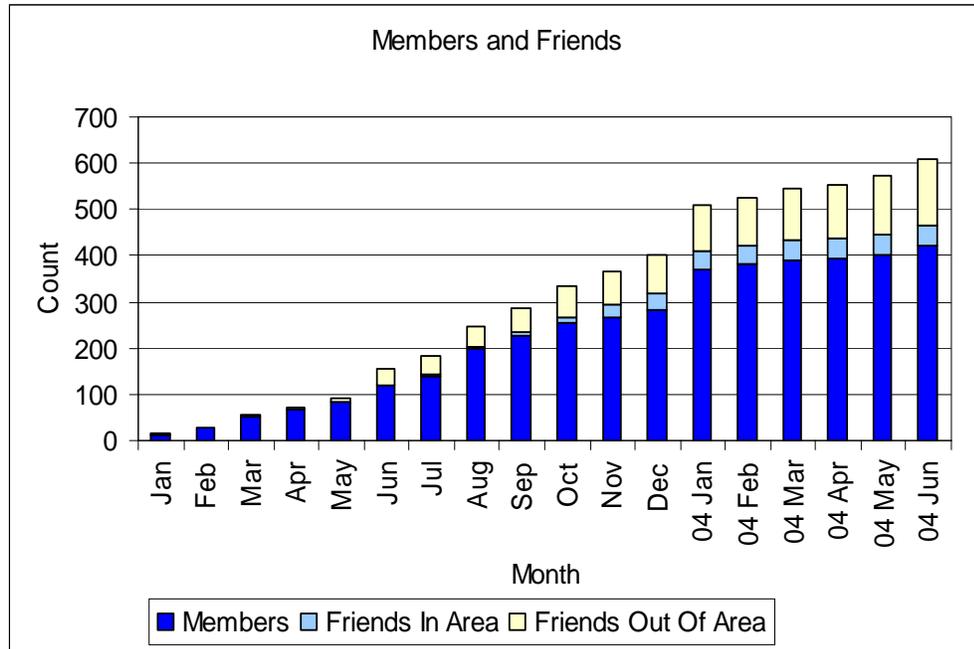
The table below shows the reach to members achieved by mid-June 2004 in terms of families, carers and children of all ages.

	Families	Carers	Children (all ages)
Members	412 (70%)	513 (74%)	650 (76%)
Friends	173 (30%)	182 (26%)	208 (24%)
All	585	695	858

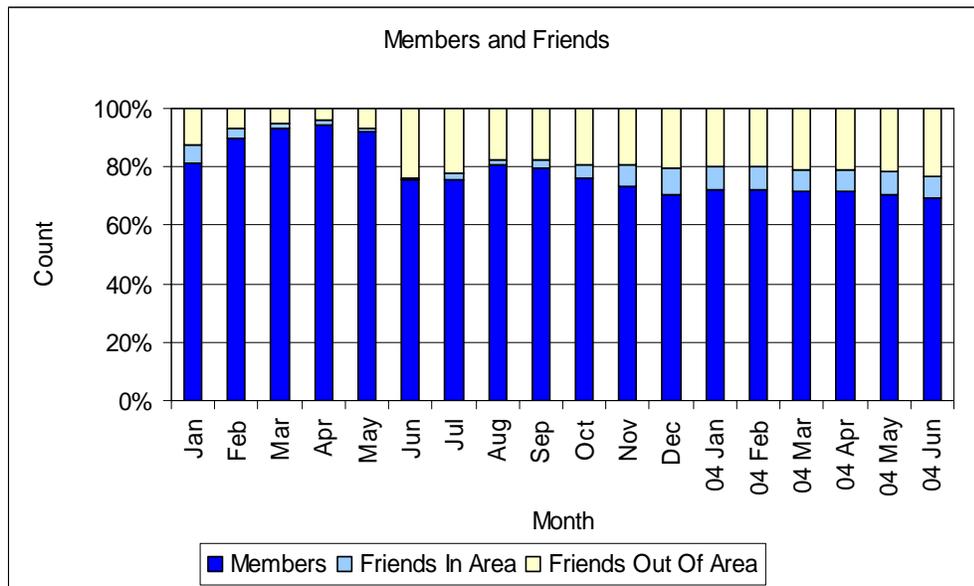
It can be seen that three out of four carers registered with Sure Start Kettering 4Wards are members, that is they live within the area and have at least one child under the age of four or are pregnant.

3.2 Reach to families

The chart below shows the rate of increase of family membership and a steeply rising trend through 2003, with peaks in August and January following holiday periods. Membership has continued to rise, at a slower pace, in 2004.



It may also be noted that the number of 'Friends Out Of Area' is continuing to rise. The chart below shows that the rise is disproportionate to the Sure Start target group, with membership reducing as a proportion of the total.



As member children attain the age of four, the number of 'Friends in Area' may continue to rise. These two trends may combine to create capacity issues for Sure Start if efforts to extend reach increase demand for services from the target group.

3.3 Reach to ethnic minority families

Ethnicity data is not available from the Child Health dataset; therefore the analysis of reach by ethnic group has used data from the 2001 Census and

the Sure Start membership data which includes all signed-up carers and children of all ages living within the SureStart area who stated their ethnicity (around 75% of the total). It should be noted that the interpretations are only tentative due to the limitations of the data; it would be desirable to access Child Health ethnicity data in the future and achieve higher rates of compliance with ethnicity recording.

The Census data shows that the local population is mainly White British (91.2%) with significant numbers of White Other. The largest minority community is Indian (2.2%), and there is also a relatively sizeable Irish community of 163 people, and other smaller minority groups.

	Census		SureStart	
	No.	%	No.	%
White British	13756	91.2	938	90.3
White Irish	163	1.1	5	0.5
White Other	387	2.6	19	1.8
Mixed White and Black Caribbean	67	0.4	6	0.6
Mixed White and Black African	30	0.2	11	1.1
Mixed White and Asian	37	0.2	4	0.4
Mixed Other	45	0.3	2	0.2
Asian or Asian British Indian	328	2.2	15	1.4
Asian or Asian British Pakistani	9	0.1	4	0.4
Asian or Asian British Bangladeshi	24	0.2	11	1.1
Asian or Asian British Other	45	0.3	1	0.1
Black or Black British Caribbean	21	0.1	0	0.0
Black or Black British African	68	0.5	6	0.6
Black or Black British Other	16	0.1	6	0.6
Chinese	46	0.3	5	0.5
Other	42	0.3	6	0.6
	15084	100.0	1039	100.0

Ethnic group representation within the Sure Start membership follows the Census order for the three largest ethnicity categories: White British, White Other, Indian; however the extent of representation varies, with some groups being under-represented and others over-represented. Care needs to be taken in interpreting the data because the numbers are small and there will be differentials in the age and family profiles in line with local patterns of immigration over time.

The numbers of Irish and Indian Sure Start members are low relative to the size of the respective communities, and Black Caribbean families are absent from Sure Start. Other Black groups, Chinese and Bangladeshi families are over-represented, however, which may seem to suggest that Sure Start has had more success in reaching these ethnic groups. However Sure Start ethnicity data for children seen over the period September 2003 to July 2004 shows that while membership may indicate above average representation, the same pattern is not found within the contact data.

	SS contacts	SS contacts as a % of total
White British	948	78.3%
White Other	12	1.0%
Mixed White and Black African	12	1.0%
Mixed White and Asian	2	0.2%
Asian or Asian British Indian	15	1.2%
Asian or Asian British Bangladeshi	24	2.0%
Unknown	198	16.4%
Total	1211	100.0%

The data suggest that while ethnic minorities are signing up to Sure Start no groups are taking up services in representative numbers. It may be noted that in one in eight contacts the ethnicity of the child is unknown, and 25% of registered members do not complete the ethnicity information. There may be a need to improve ethnicity recording, and raise awareness of why it is needed.

It should be noted that the narrow definition of reach in the Hard-to-Reach Strategy would not address the lack of service uptake by the ethnic minority groups who are signed-up to Sure Start.

Overall there is clearly a need to extend reach to ethnic minority groups in order to achieve equality of access. It is noted from the 2003-04 Annual Report and Business Plan that there is a Diversity Strategy, and from the audit of the Hard-to-Reach Strategy that some leaflets have been translated but that outreach to meeting places of ethnic groups has failed. A more detailed strategy towards ethnic minority groups may now need to be formulated to take into consideration the perceptions of Sure Start among ethnic minority groups, with the negotiated and sustained involvement of community leaders over time.

3.4 Reach to carers

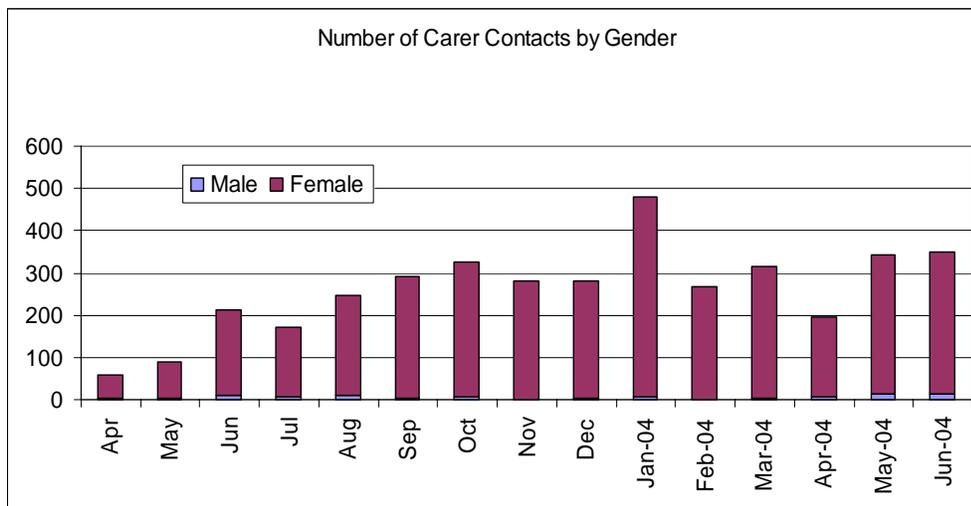
The number of carer contacts with Sure Start staff one-to-one or at events increased steadily in the first six months and has been fluctuating from month to month since October 2003, with a large increase in activity in January.

3.5 Reach to lone carers

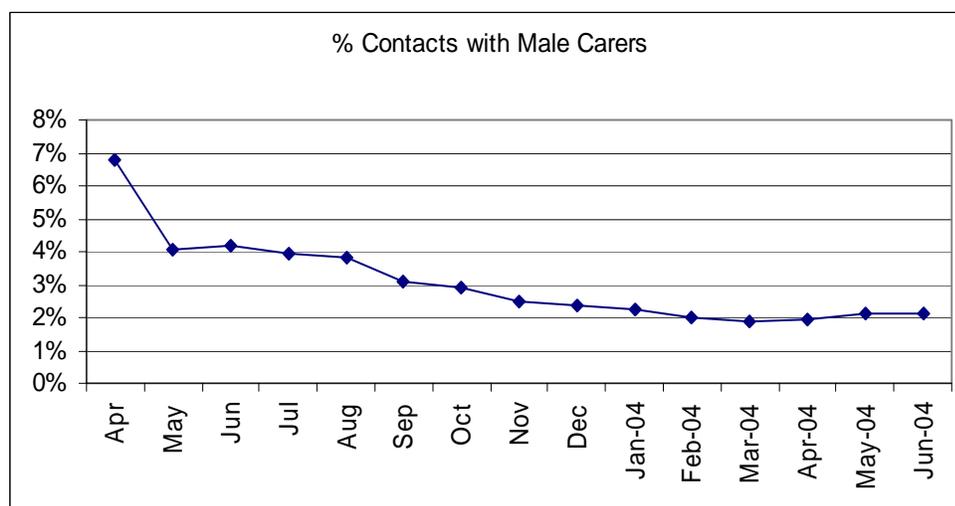
Neither the registration form nor the M3 monitoring return identifies lone parents, however a survey of 92 Sure Start members indicated that 15% considered themselves to be lone parents.

3.6 Reach to male carers

It may be seen from the graph below that the vast majority of staff contacts have been with female carers, although numbers of male carers have reached double figures in recent months.



While numbers now appear to be rising, the graph below shows that contacts with male carers have been falling proportional to contacts with female carers and are stabilising at just above the 2% level.



While child care for babies and younger children is traditionally associated with mothers, it would no doubt be beneficial for both the mothers and the children if more male carers could be involved. Thus it is recommended that reach to male carers is prioritised in Phase 2 of the evaluation of the reach of the programme.

3.7 Reach to children

At 15 June 2004, the age groups of members and friends living in and out of the Sure Start area, including the number of pregnancies were as follows:

	Families	Carers	Aged 0-3	Aged 4+	Pregnancies
In area	455	558	449	260	41
Out of area	130	137	105	44	12
	585	695	554	304	53

Over one-third of the children are aged four and over, suggesting that links to services for these children to move on to may need to be developed and promoted to carers alongside efforts to extend reach to under Under-4's. Examples of services include open access play schemes and targeted services for more vulnerable children such as Children's Fund projects. If such services are not available, this may be an area of strategic development to be addressed.

A measure of the extent to which children under the age of four living in the area have been reached can be gained from a comparison of the Sure Start membership data for children aged 0-3 and the local Child Health Data. This shows uptake increasing rapidly over time with almost seven out of every ten children aged 0-3 in Kettering 4Wards having been reached by June 2004.

The extent of reach varies between wards, with St Andrews being highest at 85% of children under the age of four, and St Mary's being lowest at 53%, and Warkton and Avondale falling in between.

	Child Health Data	Member Children					
		September 2003		November 2003		June 2004	
Avondale	247	81	33%	93	38%	182	74%
St Andrews	241	124	51%	134	56%	205	85%
St. Mary's	279	61	22%	81	29%	148	53%
Warkton	185	67	36%	77	42%	124	67%
K4Wards	952	333	35%	385	40%	659	69%

These data suggest that efforts to extend reach may be more fruitful in St Mary's ward, other things being equal; however there may be local factors to be taken into account in approaches to improving reach.

It may be noted that registration data is available at 'Output Area' level, however no clear patterns are discernible. However it would be valuable to map Child Health and Sure Start data to postcodes to identify where there are gaps in reach however there may be data-sharing barriers to be overcome. The Survey Report 2003/04 undertaken by Tracy Bosworth indicates that there is demand for information about toddler groups, childminders and enrolling at pre-school and these needs may provide a vehicle for engaging families who may have the impression that they do not need to link into Sure Start.

3.8 Reach to children with disabilities

National prevalence rates¹ for children aged 0-4 with severe disabilities indicate that there may be no more than two or three severely disabled children aged 0-3 in the Sure Start catchment area, but proactive efforts to include these families may be appreciated by the carers themselves, if not already achieved.

National data indicate that ethnic minority groups are disproportionately affected by disabilities: there has been a steady increase in the proportion of

¹ The Health of Children and Young People, ONS, March 2004

Pakistani, Black-Caribbean and Black-Other severely disabled children. The implications of this may need to be considered by the Partnership Board.

Prevalence rates are much higher for mild disabilities and illnesses; the rates for the most common disorders and the numbers of children (all ages) who may be affected in Kettering 4Wards are as follows:

	National prevalence	Children aged 0-3 in Sure Start area
Serious disability	15 per 10,000	2-3
Mild disability or illness	14 per 100	133
• Asthma	42%	56
• Skin problems	8%	11
• Deafness/ear defects	6%	8
• Musculo-skeletal	5%	7
• Vision defects	4%	5

Although Sure Start keeps records of disabled carers, child disability data is not collated, so it is unclear to what extent families affected by these problems are accessing Sure Start services, and this may merit further investigation in the future in order to maximise inclusion of such children.

4. Extending reach

The Hard-to-Reach and Parent Involvement strategies contain a wide range of ideas for overcoming barriers to reach and for broader parent involvement.

4.1 *The Hard to Reach Strategy*

The strategy defines 'reach' as: "delivering information about the Sure Start Project to that family and that family responding by signing up as members and accessing services". The strategy for reaching families uses three media:

- Written information – distributed via universal statutory services: newsletters and flyers via schools, nurseries, pre-schools and toddler groups; posters in health centres and libraries;
- Local media publicity – press releases and radio announcements;
- Word of mouth recommendation and referrals – from midwives, health visitors, other agencies, friends and neighbours.

In the strategy, the 'hard to reach' families are categorised as being those:

- a) who cannot or do not receive information through these media;
- b) who receive information but have difficulty reading or understanding it because of literacy and language barriers;
- c) who receive information but remain detached because of:
 - lack of trust;
 - too many other commitments;
 - fear of being judged, of not fitting in, of problems being exposed;

- restrictions imposed by family;
- parental depression, lack of confidence or self esteem;
- practical issues e.g. transport, childcare, trips with new baby;
- other problems: unemployment, debt/low income, housing;
- own support network being sufficient for their needs.

The Hard-to-Reach strategy sets out approaches to overcoming these barriers and, through these approaches, reaching 'hard to reach' families. The audit of the strategy shows that many of the approaches have been fully or partly implemented and a few have not – please see Appendix A. Knowledge of what is most effective is very limited, however, and baseline measures and monitoring mechanisms are needed in order to evaluate the effectiveness of the existing approaches to reach. One relatively straightforward action would be to collate the responses to the question on the registration form – “where did you hear about Sure Start?” and correlate the results with other variables such as gender, ethnicity and postcode.

The structure of the Hard-to-Reach Strategy has enabled Sure Start to adopt non-stigmatising approaches to outreach, tackling issues that many parents not just those that are hard-to-reach may have in common: lack of trust, transport problems, fear of being judged, and so on. It is now timely and may be necessary to add a further dimension to the strategy by exploring in more depth the needs of specific groups which, despite best efforts, remain unquantified or hard-to-reach.

These target groups should include those identified by the Sure Start data: specific ethnic minorities such as Indian, Irish and Black communities, male carers, lone carers, disabled children, and wards where membership or uptake is lower. As Sure Start Kettering 4Wards becomes increasingly embedded in the community, an increase in focus on the more vulnerable carers and children in the area, such as those with drug or alcohol problems, may be possible without stigmatising Sure Start and existing families by association. This strategy towards the most vulnerable carers will need to proceed in a planned way with the sustained involvement of existing and new partners in the community, initially through outreach to other settings, drawing on national research, local evaluation and local community knowledge.

4.2 Parent Involvement Strategy

Parent involvement is being evaluated separately; however the strategy is also relevant to the evaluation of reach. The Parent Involvement Strategy sets out a wide spectrum of opportunities for parents to get involved, from signing up as a member of Sure Start Kettering 4Wards and receiving information (the Sure Start definition of reach) to being employed by the project. The audit of the strategy shows that most of the planned approaches have been fully implemented – see Appendix B.

Signed-up members, through their involvement, can directly or indirectly support Sure Start's aim of fully extending the reach of the programme, while at the same time sustaining and intensifying the quality of their own experience. Robust parental involvement creates a 'virtuous circle', and is a positive marker for maximising the reach of the programme and for programme sustainability. In order to maximise and evaluate the role of parental involvement in relation to extending reach it will be necessary for Sure Start to monitor the level of involvement achieved by individual

members, and perhaps to consider incentives to promote greater involvement of parents and grandparents.

5. Recommendations

5.1 *Strategic recommendations*

It is recommended that the Hard-to-Reach Strategy is updated to include targeted approaches towards the above groups, to be informed by national and local research findings and stakeholder views. A first step would be to review the strategic audit schedules attached as Appendices A and B to identify the approaches that have not yet been fully implemented that may be effective with the target groups, e.g. buddying system, offering different meeting times perhaps through sessional staff.

It is also recommended that services for children aged 4+, including Children's Fund projects, are promoted alongside efforts to extend reach to the target groups to protect Sure Start from over-capacity issues which the data reveal may need to be addressed.

It is also worth noting for the future that the evaluation of reach would be more reliable and comprehensive if the following data was to be made available:

- Ethnicity being part of the Child Health dataset;
- Disability and ethnicity data – children and adults in the target area;
- Parental mental health and substance misuse data;
- GIS maps of Child Health and Sure Start postcodes.

It is possible that relevant members of the Partnership Board may be able to facilitate these developments.

5.2 *Recommendations for Phase 2*

The data analysis has highlighted that Sure Start has been successful in reaching large sections of the catchment area and has identified where efforts now need to be focused in order to extend reach further, as follows:

- Minority ethnic groups, especially Indian and Irish families but also other ethnic groups who may be Sure Start members but are not service users²;
- Male carers, including fathers and grandfathers²;
- Lone carers;
- Children with disabilities and illnesses;
- Children in St Mary's ward.

Given the resource limitations of the current evaluation exercise, the range and complexity of the areas of enquiry, and the need to take a long-term approach to some of these, it is recommended that Phase 2 focuses on one of the following areas:

- Analysis of membership forms – to establish where members heard about Sure Start and relate this to the Hard-to-Reach Strategy as baseline information;

- Evaluation of public awareness and perceptions of Sure Start in St Mary's ward, through a questionnaire survey within the ward conducted by parent volunteers, with questionnaire design and analysis by etc (this may be repeated in other wards);
- One or two focus groups (e.g. an afternoon and/or an evening session) with male carers and staff on Sure Start premises in order to identify barriers to involvement, test further the suggestion made by a parent² of sport activities for parents and children together, and consult on solutions; with publicity by means of leaflets and posters distributed by Sure Start staff, and appropriate incentives;
- a similar focus group (evening) with lone carers;
- one-to-one semi-structured interviews with two or three volunteer Sure Start members from an under-represented ethnic community, as individuals or as a group (this could be repeated with other ethnic groups at a later date) to inform a strategic approach to extending reach.

Enquiries not prioritised for Phase 2 may be considered at a later dates as part of a revised Hard-to-Reach Strategy, if required.

6. Next Steps

The Partnership Board is requested to consider this report and identify one of two areas of priority for Phase 2 of the evaluation of the reach of the programme, and also to take account of these in considering the follow-up stage of the evaluation of stakeholder expectations, in order to maximise the resources available for evaluation and achieve synergies.

The Board is also asked to consider the strategic recommendations made in Section 5.1 in due course.

Jan Sherlock

ETC Limited
September 2004

²

Identifying Stakeholder Expectations, Report to Partnership Board, September 2004



Aim of strategy: SureStart Kettering is committed to reaching all families living in the area. It aims to identify those families who might find it harder to reach Sure Start Kettering and look at ways to make it easier.

APPROACH TO IMPROVING REACH			EVIDENCE THAT THE APPROACH IMPROVES REACH	
Hard to Reach Group.	Strategic approach. <i>Please see strategy for more details</i>	Implemented? Yes, Partly, No. <i>If No, please say why.</i>	Does it work? Yes, Partly, No, Don't Know.	<i>If you put Yes, Partly or No, please say how you know. If you put Don't Know, please suggest sources of evidence</i>
1. Families who do not receive information from conventional sources	Publicity at community events	Yes	Partly	Increases awareness, limited effect on recruitment
	Leafleting in shopping centre, supermarkets, etc	Yes	Yes	Success of Newlands campaign on membership
	Publicising nursery places, local toddler groups, pre-schools, etc.	? Partly		
	Partnership approaches towards specific target groups	Partly Expectant parents Fathers Young parents Sikh Temple	Yes	Partnerships with Homestart etc
	Incentives for Sure Start membership	Yes Services / Trips Information Goody Bags Safety Bags Bookstart Plus Bags		
	Regular analysis of membership numbers and profile to identify gaps in a ward or a certain group	Yes		Produced by Rob Dixon

APPROACH TO IMPROVING REACH			EVIDENCE THAT THE APPROACH IMPROVES REACH	
Hard to Reach Group.	Strategic approach. <i>Please see strategy for more details</i>	Implemented? Yes, Partly, No. <i>If No, please say why.</i>	Does it work? Yes, Partly, No, Don't Know.	<i>If you put Yes, Partly or No, please say how you know. If you put Don't Know, please suggest sources of evidence</i>
2. Families who have difficulty reading or understanding information	Word-of-mouth recommendation	Yes		? How many?
	Appropriate support with filling in registration forms	Yes		
	Translation of basic information	? Partly		
	Ability to access interpreters when necessary	Yes		Via Language line
3a Families who choose not to access services because of lack of trust	Building reputation and word-of-mouth recommendation	Yes		
	Home visits to build trust and confidence	Partly		Midwife Family Support team
	Sample events e.g. drop-ins, fun events	Yes		
	Non-institutional approach, e.g. letters in 'friendly' font	Partly		Friendly font used for much of communications Further work on meeting etc
3b Families who choose not to access services because of too many other commitments; work, study, caring, etc	Varying days and times; events, home visits, phone calls	Partly		Monday – Friday 9-5pm Increasing weekend services
	Outreach to workplaces	No		
	Outreach to colleges	No		
	Asking parents what they need, where/when to discuss	Yes		Evaluation / Feedback from groups PRG Parent Survey

APPROACH TO IMPROVING REACH			EVIDENCE THAT THE APPROACH IMPROVES REACH	
Hard to Reach Group.	Strategic approach. <i>Please see strategy for more details</i>	Implemented? Yes, Partly, No. <i>If No, please say why.</i>	Does it work? Yes, Partly, No, Don't Know.	<i>If you put Yes, Partly or No, please say how you know. If you put Don't Know, please suggest sources of evidence</i>
	Link to community organisations e.g. carers' centre	Yes		Warkton Forum, KVS, HLC, KBC, SMARTA
	Emphasizing that different levels of commitment are possible			Promotion of levels of involvement
3c Families who choose not to access services because of fear of being judged by staff, parents (parenting skills, smoking, swearing, etc)	Offering parents a quality experience with their children	Yes		Feedback from parents regarding services
	Appropriate dress	Yes		Contact figures Need to seek parents views
	Building on strengths	Yes		
	Respecting diversity and difference	Yes		
	Sensitive reinforcement of behaviour ground rules	Yes		
	Respect for parents' choices	Yes		
	Maintain non-judgemental attitude/positive regard	Yes		
3d. Families who choose not to access services because of fear of not fitting in: age, gender, ethnicity, culture	Alternatives to home visits	Yes		Groups
	Group for older or younger parents	Partly		With Homestart
	Encourage fathers into groups and other father-focused approaches	Partly		Fathers Group

APPROACH TO IMPROVING REACH			EVIDENCE THAT THE APPROACH IMPROVES REACH	
Hard to Reach Group.	Strategic approach. <i>Please see strategy for more details</i>	Implemented? Yes, Partly, No. <i>If No, please say why.</i>	Does it work? Yes, Partly, No, Don't Know.	<i>If you put Yes, Partly or No, please say how you know. If you put Don't Know, please suggest sources of evidence</i>
	Home visits when both parents are at home	Partly		
	Diversity in publicity materials	No		Working on translation of material
3e Families who choose not to access services because of fear of problems at home being exposed e.g. DV, abuse, drugs	Outreach to meeting places of ethnic groups	Failed		
	Group work programmes	Yes		Parentzone Cookery
	Closed groups	Partly		Family Support
	Opportunities to talk confidentially; rules of confidentiality	Yes		Ground rules established
	Sensitive referral systems, promotion of SSD as source of help;	Yes		Mostly re Child Protection / Disability issues
	Honesty about child protection procedures	Yes		Case Files
3f Families who choose not to access services because of restrictions by family e.g. DV, cultural	Access to drug programmes	No		Contact with CAN
	Informing parents about rights	No		Need to have information accessible through translation
	Informing other parties and building their confidence	Partly		

APPROACH TO IMPROVING REACH			EVIDENCE THAT THE APPROACH IMPROVES REACH	
Hard to Reach Group.	Strategic approach. <i>Please see strategy for more details</i>	Implemented? Yes, Partly, No. <i>If No, please say why.</i>	Does it work? Yes, Partly, No, Don't Know.	<i>If you put Yes, Partly or No, please say how you know. If you put Don't Know, please suggest sources of evidence</i>
3g Families who choose not to access services because of parent's depression	Whole family events	Yes		Family Fun Day Day trips Services e.g. Stay 'n' Play
	PND self help group	No		Will start in January 2005
3h Families who choose not to access services because of parent's lack of confidence or self esteem	Screening by HVs and midwives	Yes System in place		More referrals from Health visitors
	Buddy system	No		
	Partnership with parents	Partly		Support systems working but not formalised yet – Bring a Friend Scheme coming soon
3i Families who choose not to access services because of practical issues e.g. transport, childcare, trips with new baby	Confidence building groups	Yes		
	Identify when services are being discussed	Yes		
	Putting in appropriate resources	Use of taxis Pram pushing distance		
	Buddy system	No		
3j Families who choose not to access services because of being overwhelmed with other difficulties: unemployment,	Accessible venues and facilities	Yes		
	Encourage retraining	Partly		New Monday Drop - In
	Voluntary work	Partly		Volunteer Development Co-ordinator now in post and successfully recruiting volunteers

APPROACH TO IMPROVING REACH			EVIDENCE THAT THE APPROACH IMPROVES REACH	
Hard to Reach Group.	Strategic approach. <i>Please see strategy for more details</i>	Implemented? Yes, Partly, No. <i>If No, please say why.</i>	Does it work? Yes, Partly, No, Don't Know.	<i>If you put Yes, Partly or No, please say how you know. If you put Don't Know, please suggest sources of evidence</i>
debt/ low income, housing problems.	One stop shop to work, training, benefits, childcare	Partly		Begins in September 2004
	Debt counselling	Yes		Citizens Advice Bureau
	Sensitivity to small costs of involvement	Yes		
3k Families who choose not to access services because they perceive no need, e.g. because they have adequate support.	Advice service	Yes		
	Respect parents choice but keep door open	Yes		Need to ask why not interested in involved and promote spectrum of involvement

Aim of strategy: SureStart Kettering is committed to the importance of parental involvement. The strategy aims to set out what Sure Start Kettering believes and how they intend to put it into practice.

APPROACH TO IMPROVING REACH		EVIDENCE THAT THE APPROACH IMPROVES REACH		
Parental Involvement <i>Please see strategy for more details</i>		Implemented? Yes, Partly, No. <i>If No, please say why.</i>	Does it work? Yes, Partly, No, Don't Know.	<i>If you put Yes, Partly or No, please say how you know. If you put Don't Know, please suggest sources of evidence</i>
1. Use a variety of advertising methods to improve reach, taking into account differing language and literacy skills.	Leaflets translated into common community languages	No		
	Stands at community and public events	Yes		Warkton Forum, Events in 2003, Newlands Centre
	Promotion via Midwives, HVs within 2 mths of birth	Yes	Partly	Contact figures
	Parent promotion: increase and support by creating Parent Involvement Induction Pack	Yes		
2. Use a variety of methods of consultation	Written and verbal questionnaires	Yes		
	Formal and informal meetings	Yes		Building design PRG Focus Groups
	Groups or 1:1 basis.	Yes		
	Questionnaires based on revised baseline survey	Yes		Report
	Verbal consultation via Parent Rep group, Stay and Play, toddler groups, promotional events.	Yes		

APPROACH TO IMPROVING REACH		EVIDENCE THAT THE APPROACH IMPROVES REACH		
Parental Involvement <i>Please see strategy for more details</i>		Implemented? Yes, Partly, No. <i>If No, please say why.</i>	Does it work? Yes, Partly, No, Don't Know.	<i>If you put Yes, Partly or No, please say how you know. If you put Don't Know, please suggest sources of evidence</i>
	Issues log to record issues in informal consultation	No		
3. Different levels of involvement	Encourage parents to take part actively, find where they fit in, nurture them, build their confidence	Yes		Involvement in PRG, Partnership Board, Working Groups, Confidence Building etc
	Allow parents to go at their own pace, do not overload them	Yes		Ask parents and monitor involvement
	Acknowledge and respect the voluntary nature of the contribution	Yes		?
	Respect and accommodate other demands on time, eg. vary meeting times, differentiate between term-time and school holidays	Partly		Times of meetings are not varied not accessible to all
4. Strategic involvement in planning and service delivery	Promote inclusive style of chairing meetings	Partly		Need to ask parents Develop parents confidence / skills
	Support parents via buddy or mentoring system	No		
	Involve parents in decisions where possible	Partly		Involvement in PRG, Board Need to develop involvement in sub groups
	Provide feedback	Partly		Needs formalizing to be able to gather evidence

APPROACH TO IMPROVING REACH		EVIDENCE THAT THE APPROACH IMPROVES REACH		
Parental Involvement <i>Please see strategy for more details</i>		Implemented? Yes, Partly, No. <i>If No, please say why.</i>	Does it work? Yes, Partly, No, Don't Know.	<i>If you put Yes, Partly or No, please say how you know. If you put Don't Know, please suggest sources of evidence</i>
5. Support for involvement	Provision of childcare and transport	Yes		
	Other help according to the need of parent and activity, e.g. language/literacy support, training, help with babies and toddlers, accompanying parents, support as appropriate e.g. to raise self esteem	Partly		Limited language assistance Support literacy needs Confidence Building has lead to further involvement
	Be friendly, approachable, accepting to build up trust	Yes		
	Be open about targets but non-judgemental	Yes		