

Sure Start Chinnbrook Project

Reflective Evaluation Report, 2005

Clare Nankivell

**Monitoring and Evaluation Team
Sure Start City
St Luke's Old School
Bristol Street
Birmingham
B5 7BN**

Email:

clare.nankivell@southbirminghampct.nhs.uk

Tel: 0121 622 8244

July 2005

Contents

- 1 Introduction..... 2
- 2 Aims 2
- 3 Methodology..... 2
- 4 Evaluation activities 3
 - 4.1 Childcare Audit 3
 - 4.1.1 Key findings and recommendations.....3
 - 4.1.2 Methodologies employed.....4
 - 4.1.3 Use made of the Childcare Audit findings.....4
 - 4.2 Parental Consultation 5
 - 4.2.1 Key findings and recommendations.....5
 - 4.2.2 Methodologies employed.....5
 - 4.2.3 Use made of the Consultation findings5
 - 4.3 Local Evaluation Report 2003 6
 - 4.3.1 Key findings and recommendations.....6
 - 4.3.2 Methodologies employed.....7
 - 4.3.3 Use made of the Evaluation findings7
 - 4.4 Review and Evaluation 2004/5..... 7
 - 4.4.1 Key conclusions and recommendations7
 - 4.4.2 Methodologies employed.....8
 - i. Use made of the Evaluation findings8
- 5 Reaching the community 9
- 6 Milestone targets 10
 - 6.1 Progress against milestones 2001-2 10
 - 6.2 Progress against milestones 2002-3 11
 - 6.3 Progress against milestones 2003-4 11
- 7 Interviews 12
 - 7.1 Meeting targets and objectives..... 12
 - 7.2 Data and systems..... 13
 - 7.3 Management 13
 - 7.4 Parental involvement..... 14
- 8 Conclusions..... 17
- 9 Recommendations for Evaluation Strategy 2005-6 18
 - 9.1 Impact of Sure Start Chinnbrook Project on local families..... 18
 - 9.2 Demographic data 18
 - 9.3 Value for money exercise..... 18
 - 9.4 Parental involvement strategy 18
- Appendix 1 Documents and people consulted 19
- Appendix 2 Progress against milestones..... 21

1 Introduction

This report details the findings of a short research project designed to evidence evaluative and project development work which has occurred within the lifespan of the Sure Start Chinnbrook Project (SSCP). The evaluation project aimed to provide information to inform the future development of SSCP and the evaluation agenda for the next 18 months.

SSCP was one of 60 'Trailblazer' Sure Start programmes established in 2001. SSCP was based on Chinnbrook Children's and Parents' Project (CCPP), a voluntary organisation, and the projects merged to form one project. The Project is based in Billesley ward in Birmingham, which has a mainly white British population. In early 2005 there were 928 families within the SSCP catchment area, 603 of which were registered for SSCP services.

2 Aims

The reflective evaluation project aimed to provide a summary of:

- evaluation work already undertaken by or on behalf of SSCP, to include a review of data collection methods used and the use made by the Project of any evaluation findings, conclusions or recommendations
- evidence of progress in services set up towards tackling Sure Start targets and objectives
- general Project developments since implementation
- evidence of parental involvement and training or support provided to parents.

Additionally, the reflective evaluation project aimed to provide recommendations for an evaluation strategy for the coming three years.

3 Methodology

The prime method used to collect evidence for this report was document analysis. A broad range of documents were read and analysed to explore the evidence on SSCP evaluations, progress against targets and general Project developments. Documents consulted included: Annual reports, Board meeting minutes, milestone plans and evaluation reports. Further information was collected via a series of unstructured interviews with SSCP managers. A full list of documents consulted and people interviewed can be found in Appendix 1.

4 Evaluation activities

Evaluation and research activities have been conducted as part of the Sure Start Chinnbrook Project from the outset. Due to the current part-time nature of the role, the Programme Manager has been supported in fulfilling the responsibility for monitoring and evaluation activities by the Chair of the Board. Senior managers (the Finance, Centre Services, Outreach and Community Development and Support Services Managers) within SSCP also have some evaluation responsibilities and the Support Service Manager also has significant monitoring responsibility.

Previous evaluation activities have largely been conducted by consultants, with some being done by existing staff and parents. Annual reports also contain summaries of activities and developments within SSCP over the previous year.

The key evaluation activities studied for this report were:

1. A Childcare Audit conducted by Sue White Consultancy in November 2000
2. Consultation with parents to inform the development of SSCP, entitled 'Toward a Sure Start for Families in Billesley, Qualitative research with and by local parents Nov 2000-Jan 2001'.
3. A Local Evaluation Report conducted by SCAIchemy in September 2003
4. An Annual Evaluation Report for 2004
5. A Review and Evaluation Report conducted in 2004/5

The rest of this section of the report summarises the key findings and recommendations of each piece of evaluation, provides a critique of the methodologies used and an assessment of the use made by SSCP of the evaluation findings.

4.1 Childcare Audit

This research involved two key phases; an audit of current childcare provision in the area and an interview survey of parents' views on childcare, conducted by parents trained by the consultants.

4.1.1 Key findings and recommendations

The key findings from the parent interviews were:

- Parents were unsure of the childcare available locally
- Parents of under three year olds were wary of childcare provision, did not want full-time childcare places but would use parent and toddler groups
- Young single parents lacked the confidence to go to new places on their own
- Parents of 3-4 year olds were looking for full-time childcare
- Most parents wanted holiday and out-of-school childcare provision.

The audit also found that many local facilities were undersubscribed.

Short term recommendations included:

- setting up a local childcare information line using Outreach Workers from SSCP
- running an information campaign for local parents about childcare in the area
- developing out of hours and holiday childcare facilities
- establishing more parent and toddler groups, playgroups, crèches and holiday provision
- reviewing childcare services.

In the longer term the consultants recommended having a Playbus, providing local transport for families to access childcare, increasing the Outreach Team to co-ordinate childcare information, providing a Community Day Nursery and improving the Take a Tumble facility.

4.1.2 Methodologies employed

The consultants trained a small group of parents to conduct interviews with other parents about their childcare needs, to analyse the data captured and to work on the final report. A sample strategy was devised to cover different groups of parents and all research tools were piloted with local professionals working in the field. The data on current provision in the area was conducted via telephone interviews, again mainly led by parent researchers trained by the consultants.

The report is not clear about the methodological problems, although these are occasionally alluded to. For example, the report comments that it was difficult to access families from specific ethnic origins, but does not say how these problems have had an impact on the findings nor on the methodologies employed. Given these difficulties, the reliability of the sampling frame must be called into question.

It is hard to gauge the reliability and validity of the research methods used, especially relating to the audit of childcare provision as the report omits the detail of how this aspect was conducted, for example who was asked about their childcare facilities and services.

4.1.3 Use made of the Childcare Audit findings

It is clear from early SSCP Annual Reports and Board minutes that the childcare audit findings were taken on board by the Project in making decisions about specific services to develop. Some decisions were taken as a direct result of the recommendations, such as establishing more parent and toddler groups. Other decisions were made on the findings of the report, such as developing a means of keeping parents informed of services and facilities via outreach workers and an Early Years Network pack, but not developing an information line as recommended in the report. Some recommendations and findings were not taken on Board at this stage by the Project as impracticable or unsustainable, such as establishing a Community Day Nursery and a Playbus for the area. The Project could usefully have repeated the work a year or two later using reliable and valid methods to gain an up-to-date and accurate picture of both childcare provision and childcare needs in the local area. This might still be a useful exercise for the Project to undertake, to account for local demographic changes and to help plan for the Children's Centre agenda to be introduced over the next eighteen months.

4.2 Parental Consultation

This research aimed to inform the development of SSCP's work with local parents and families, to provide service development pointers. It was also seen as a significant contributor to SSCP's commitment to community consultation and parental involvement.

4.2.1 Key findings and recommendations

The conclusions of the research were grouped under four main headings:

1. Communication with parents
2. Developing services
3. Enhancing confidence, skills and opportunities
4. Family and community development.

Most of the conclusions were generic and could be used as a starting point in terms of general principles and ethos for SSCP.

Recommendations were based on further research needed and included:

- feasibility studies for actions arising from this research
- further training for parents in research methods with accreditation
- a questionnaire survey for parents to explore further needs
- development of outcome measures for SSCP which were locally meaningful and defined by local parents
- evaluation proposals for SSCP.

4.2.2 Methodologies employed

The research was conducted by parents trained in research techniques interviewing other parents using a semi-structured face-to-face interview schedule. Some of the research was conducted using focus groups. Analysis was conducted by the research facilitator in liaison with the parent researchers. The total number of parents surveyed was low (35) and most parents surveyed were white mothers. Whilst the methods chosen appear to have been appropriate for the work, the numbers of parents consulted mean that the findings are weak and cannot be said to be reflective of the whole community's needs and perceptions. The report contains no copy of the questionnaire used and the numbers surveyed were very low, which means that SSCP cannot do a meaningful comparative study to explore the impact of its work on parental satisfaction.

4.2.3 Use made of the Consultation findings

As the conclusions were largely generic in nature, it is hard to see whether SSCP made use of the consultation exercise in any great depth. However, it appears from Milestone Plans and minutes of Board meetings that some of the key findings have been acted upon, specifically in relation to developing parents' skills, confidence and opportunities and in family and community development. There is little evidence that any of the further areas for research have been addressed by SSCP in a formal or systematic way.

4.3 Local Evaluation Report 2003

This report was researched and written by consultants, SCAlchemy, who were commissioned jointly with Sure Start Ladywood. It focused on outreach services, parental involvement, partnership working, communication and hard to reach families. The research was required to focus on the impact and effectiveness of SSCP against national and local targets and to concentrate on parental involvement, partnership working, communication, outreach and home visiting and hard to reach families. The research involved interviews with Board members, visits and interviews with host organisations, interviews with SSCP staff, observations of SSCP groups and feedback from parents.

4.3.1 Key findings and recommendations

Key conclusions of the report are presented under the main areas the work considered:

- Outreach and home visiting services had recently improved with new staff bringing new passion and planning, systems and good working relationships established
- Parental involvement in the Project was developing well with parents contributing at all levels, based on the foundation of parental involvement with CCPP.
- Partnership working had been initially difficult but had shown significant improvements with some barriers still to overcome
- Communication between the centre and remote groups remained difficult and a barrier for the Project
- The local community needed more information about SSCP and its services.

Although the conclusions were fairly generic, the report made some tangible recommendations for SSCP as follows:

- Develop Parent Forums
- Develop a strategy for sustaining parents' involvement in the Project and moving them on
- Develop access to hard to reach families
- Clarify the purpose of SSCP and the roles, responsibilities and accountabilities of each partner agency
- Develop a stable workforce with appropriate training available, managed in a sensitive and realistic manner
- Develop a communication strategy
- Introduce email and networked computing access to all agencies and staff involved, to reduce paperwork and speed up communications
- Develop a means of responding quickly to families in need
- Reach more families within the area.

4.3.2 Methodologies employed

The consultants employed to conduct this evaluation sought the views of the major stakeholders in the SSCP. The methods were largely qualitative and perception based and these provided some useful data for the Project. However, the consultants did not put this data in the context of national or local targets, which was the key element of their brief, so in some cases the findings and recommendations seem to stand as 'lone targets' at odds with where the Project was aiming at the time and as evidenced through milestone targets and Sure Start PSA targets.

4.3.3 Use made of the Evaluation findings

Many of the conclusions of this Evaluation report noted improvements already being made by SSCP, which clearly were built on in subsequent months. Specific recommendations have also been acted on. For example:

- each partner organisation now has a clear idea of the roles, responsibilities, targets and overall aims of the work SSCP is funding them to perform
- email is being used to communicate within the Project and between the Project and other partners
- Families in need are responded to quickly via a referral process set up which ensures that Health Visitors liaise with outreach workers to refer parents in need
- More families in the area are being reached, as evidenced by monitoring data.

4.4 Review and Evaluation 2004/5

This includes two reports from 2004/5 which contain findings of a thorough review and evaluation of SSCP's work, including that of partner agencies, against key PSA targets. The work involved reviews of monitoring and evaluation documents and a questionnaire survey of partner agencies and services delivered directly by, tracking their progress against targets. The findings were fed back to a Sub-Committee of the Board and all service areas fully reviewed in the light of the findings. One report was a public document, the Annual Evaluation Report, whilst the other was a report for the Board only.

4.4.1 Key conclusions and recommendations

The Review and Evaluation concluded that:

- Cost effective multi-agency working is now established as part of SSCP
- Local needs have been properly identified and services developed to better help local families
- Parental confidence has increased in the area and this in turn has led to changes in service delivery mechanisms and higher levels of parental development in the area
- The increased provision of childcare locally has been welcomed and rapidly absorbed, with oversubscription an issue for the Project and wider area
- New birth visits are effective and families with complex needs are identified early, with multi-agency support set up from the outset

- Early intervention and targeted support has led to services designed to have an impact on education
- Parental participation at all levels of the project has led to parents being involved in voluntary work and a programme of sustained training and assistance into employment
- The development of paraprofessionals has been effective, especially within the Primary Care Trust.

Recommendations were based on the conclusions and were largely designed to further the service development of SSCP to meet ongoing needs. Recommendations included:

- The impact of the Project on parents should be evaluated
- Parental satisfaction with changing service delivery models should be monitored
- A costing methodology and system should be introduced to monitor value for money of all SSCP services as funding tapers off
- Additional training and support should be developed to further the Project's inclusive approach to service delivery.

4.4.2 Methodologies employed

The Review was conducted using a questionnaire survey of all partners and service managers of the Project. The documentation – questionnaire and explanatory notes – was launched at an event for staff, directors and partners, all of whom then had to complete the questionnaire within a specified timescale. The completed questionnaires were then reviewed by the Sub-Committee and evaluated against a specially devised list of key criteria, after which recommendations were made on the continuation of each service. This review was confidential and went to the Board as a report for its consideration and decisions. All partner agencies were informed of the content of the report relating to their services before it went to the Board and given the opportunity to comment. Once the Board had made decisions partner agencies were informed about the results and consequent impacts on their services.

The Annual Evaluation Report contained a summary of the findings of the Review exercise and additional information from monitoring data and reviews of progress of services against targets.

4.4.3 Use made of the Evaluation findings

The Review had specific outcomes for SSCP as services run by and with partner agencies were all extensively evaluated. Decisions were made by the SSCP Board to discontinue two services which were not meeting any of the local or national targets. Decisions were also made to continue some services in their existing format as they continue to meet targets, local need and were cost effective. Other services were asked to alter the way they were being delivered, to ensure that they continued to meet targets and local needs.

5 Reaching the community

Monitoring data on the extent to which the Project reaches its target community has to be submitted to the Sure Start Unit every quarter. The data discussed in this section of the report came from M3 forms which report quarterly on the numbers of parents, children and families which the Project has seen and the demographic details of these. The data available covered 16 consecutive months from October 2003 to January 2005.

During this period an average of 176 children were seen each month, with 23 of these being newly registered with the Project. These averages mean that over 20% of all the children under the age of 4 are seen each month by the Project and new children are coming into contact with the Project on a regular basis. On average 77 parents were seen each month, with 14 of these being newly registered to the Project. The numbers of families seen by the Project was only required for 11 months of this period (October 2003-August 2004) and the average was 209 families. Numbers varied month to month, with August and December seeing the fewest contacts with parents, children and families.

The numbers of new children seen by ethnic origin against the 2003/4 demographic figures for children under 4 years old in the SSCP area, show that fewer than expected children from white, mixed and Asian backgrounds were seen by the Project and more than expected from Black, Chinese and other backgrounds were seen. During the 16 month period studied, seven new children with disabilities or special needs were seen by the Project.

The numbers of pregnant women seen each month was quite low, averaging 5 per month against an annual figure of 214 live births. Similarly low figures were recorded for the number of live births, which averaged 2 per month. On the other hand, almost nine children per month were recorded in the Project area as being under two months old. This suggests that the figures for live births were not being provided to the Project accurately, although this appears to be resolved now as Child Health provides the data to SSCP on a monthly basis. Of the 139 babies under two months, 133 were seen within the Sure Start Unit target of two months from birth. This represents a considerable achievement for the Project. Very few lone parents or parents with disabilities or special needs were recorded as being seen by the Project.

6 Milestone targets

Initially, the Sure Start Unit required all local programmes to develop and provide annual and quarterly milestone plans and to report on progress against these. SSCP produced annual milestone plans for 2002-6 and 2003-6 and quarterly ones for 2001, 2002 and 2003. These plans and the reports against progress were analysed in detail for this report to explore the extent to which the Project has met Sure Start and local targets. Progress against the milestones for 2003-6 was not required by the Sure Start Unit, but the Project still compiled quarterly reports on progress against milestones, which were reviewed for this report. Additionally, the Annual Evaluation Report exercise in 2004 reviewed progress against milestones and targets in 2004.

The targets related to the key Sure Start objectives:

1. Improving social and emotional development
2. Improving health
3. Improving learning
4. Strengthening families and communities

In earlier years there was also an objective to improve productivity or operations within the Project.

This section of the report contains a commentary on the analysis of the milestone reports, which can be found tabled in full in Appendix 2.

6.1 Progress against milestones 2001-2

During this first year for which milestones and progress are recorded it is evident that much progress was made in establishing requirements for the Project, in ascertaining local needs and in developing initial services. Most targets were achieved or partially achieved although many were ongoing. For example, reaching 100% of families within two months of a birth was not achieved as a target but outreach and midwifery services were in place early on to address this target; unfortunately, staff sickness and vacant posts meant that progress was slow in the second half of the year. This first year demonstrates initial problems in accessing reliable monitoring data for a number of crucial targets, for example, exclusions from primary schools in the area, numbers of low birth weight babies and numbers of parents smoking.

There is a lack of data for some targets from the second two quarters of the year, making it hard to see the progress made overall during the year. Two targets where this was the case were a 2% reduction in low birth weight babies and improving the average to 93% of children having normal speech and language development.

Finally, many milestones included a requirement to monitor or evaluate progress in the latter part of the year and there is no evidence of evaluation activities being conducted. Some targets where review or evaluation were included, but not achieved, were supporting mothers with post natal depression and reviewing both the health visiting and nursery nurse posts. It is clear that most energies were being targeted at establishing services, so the Project might have lacked the resources to evaluate or not have sufficient service development to evaluate by the end of this first year.

6.2 Progress against milestones 2002-3

Year two of the Project shows similar progress to the first year, with many targets being partially met and ongoing development of services designed to meet these targets. It also shows that more posts were filled (Outreach Librarian, speech and language therapists and Link worker, for example) and more agencies brought into the project to deliver services (e.g. Kidscape, Home Start, St Basils). Again it shows that the Project had difficulty in accessing reliable and regular monitoring data from other agencies. Baseline data was established during the year for a number of key targets, such as numbers of women who smoke during pregnancy and low adult literacy rates in the area.

Key targets that were achieved included achieving a 5% reduction in the number of children with speech and language problems requiring specialist intervention by the age of 4 and working with EYDCP to close the gap between availability of accessible childcare for 0-3 year olds.

Partially achieved targets were largely those where the services were still being developed to address them. They included all children having access to good quality play and learning opportunities, reaching 100% of families within two months of a new birth and decreasing the percentage of home-based accidents.

6.3 Progress against milestones 2003-4

Year three of the Project shows greater progress being made towards targets, a significant increase in the range and number of staff employed and services offered and most targets being fully or partially met. It is clear that the Project continued to have difficulty in accessing reliable and regular monitoring data from other agencies. On the other hand, baseline data was established during the year for a number of key targets, such as numbers of women breastfeeding, numbers of children with speech and language problems and numbers of women with postnatal depression.

Key targets that were achieved included providing parenting support and information to all parents, providing guidance on breastfeeding, hygiene and safety, increasing the use of libraries by families with young children and ensuring all children have access to good quality play and learning opportunities.

Partially achieved targets were largely those where the services were still being developed or revised to address them, or where essential data was not yet available. These included reaching 100% of families within two months of a new birth (where the Project moved to a new system based around health visitors working in liaison with the Project's Outreach team), achieving a 10% reduction in the number of children aged 0-3 admitted to hospital as an emergency with gastro-enteritis, respiratory infection or severe injury, and reducing the teenage pregnancy rates.

7 Interviews

7.1 Meeting targets and objectives

Interviewees felt that SSCP had really taken off in the last two years. Initially a lot of the effort staff and managers made was groundwork, such as planning, research and 'selling' the Project. For example, encouraging parents to register with SSCP and developing good working relationships with Health Visitors took up a considerable part of staff time in the first phase of the Programme. This groundwork was vital, however, as good working relationships had to be in place in order for targets to be met and parents had to register in order for their to be a community to be supported.

Initially some staff were a little frightened about targets, in the sense that they feared having their services or jobs cut if they failed to meet short term targets. Initially there were also too many local targets, but these were removed in 2003. Staff fears were allayed in part through a joint exercise completed at an away day, which showed that everyone's work went some way to meeting all targets. This meant that staff could see that the responsibility for meeting targets was not an individual onus, but a joint, shared responsibility. Staff ownership of the targets was also encouraged by meetings with managers to discuss how each target was met. Team development and team work around the five objectives has also been very helpful as teams explore how targets can be met by the team as a whole. The ethos is no longer hierarchical, which sometimes stifled creativity within the teams but is focused on meeting local need within the broad framework of Sure Start and its objectives. This meant that although everyone broadly works to all targets, each individual knows which targets he or she has to report on and, furthermore, will have contributed to defining the target.

The CCPP always had targets, so managers were used to working within a framework of targets. The move to being a Sure Start Programme effectively just added more and different targets. SSCP works with Sure Start targets. The Sure Start targets are broadly what staff and managers think that they should be working to anyway in order to meet local needs, which has also helped in making targets manageable and effective for the Project. Additionally, the Project has found creative and innovative ways to meet Sure Start targets whilst also meeting local needs. Targets and milestones are reviewed annually at an 'away day' for Board and staff.

Action plans for each service area helped to lead to staff having more control in relation to targets and new reporting mechanisms have minimised targets so its easier for staff to complete reports.

Managers felt that SSCP has developed well and to meet specified parental need and that the Project is flexible in noting changes in local needs and making appropriate service changes to meet these. For example, some groups started by staff are now self-sufficient and individuals and communities are thus empowered. One example where this has occurred is the Billeseley Asian Women's network. The Review in 2005 has formalised this approach and its findings will lead to some services losing funding from SSCP as they are (no longer) delivering in the way SSCP needs in order to meet community needs. Contracts with all partner agencies are reviewed annually and difficult decisions are made to ensure that SSCP continues to meet targets and local need.

Recent successes in relation to targets which managers mentioned were:

- hard to reach groups have started to attend SSCP centre-based activities and services
- information about the Project and what happens there is spreading locally, mainly through word of mouth supported by drop-in sessions
- Children's groups have grown, extended and specialist groups run regularly.

7.2 Data and systems

Managers reported that the evidence and statistics available from the Project's systems often seem to be at odds with what they and their staff know to be going on within SSCP. Last year's Evaluation report included data from the monitoring database and all staff wanted to have more information like this more often to help them plan and deliver their services. Some staff find it easier to collect and record monitoring data as they are used to doing so; for example Early Years staff will be accustomed to keeping registers and reporting on attendance.

Recently the data input system has been simplified and training has been undertaken, so there is less data to input and all staff know what information they need to collect and record.

All staff and partners are expected to contribute to monitoring and have to complete quarterly reports on their service activities against milestones. This has led to a greater sense of ownership which in turn has led to more accurate and complete data recording of activities across the Project. For the last twelve months all data required has been captured accurately and completely.

7.3 Management

The CCPP and SSCP are completely different in their origins. CCPP was community driven with limited funding, whereas SSCP is a top-down state-sponsored and well-funded project. This difference led initially to the projects having to run concurrently as CCPP was not ready to take on the full responsibility of Sure Start at the outset.

Initially the Board was very anxious that it would lose parents and local interest if the projects became one from the outset. The specific concern here was that parents feared losing the intimate nature of the community-driven CCPP. There were also concerns about Sure Start having a much narrower catchment area than the CCPP, which covered the whole ward. Furthermore, some staff did not want change and found it hard when the projects did merge, but management encouraged all staff to move with the project.

Once the projects were amalgamated and they became one entity housed in the same building management became much easier and more transparent. In hindsight it would have been brilliant to have been able to join the work at an earlier stage. When the two projects ran alongside each other many parents were confused about what was going on and this was negative publicity for SSCP. One building to house all the teams really helped to make the merger work and to make it feel like a complete, single project.

The new format of a merged project with company limited by guarantee status is now working well. However, it remains a challenge for the Project to ensure parity between staff, who work to different contracts, terms and conditions depending on who employs them.

Management has worked well in respect of the Sure Start community development ethos as SSCP has 'grown its own' in some cases and developed many staff in post. Management has also been very supportive of Outreach work, allowing and encouraging creativity and excellent teamwork.

The major challenge for the successful management of SSCP is sustainability as the Sure Start grant begins to taper from April 2006.. Another major challenge for the future also centres around the move to becoming a Children's Centre, as there is insufficient management time to allow strategic decision making to happen within the SSCP team. Many interviewees commented that it was hard to see how SSCP could develop further without a full-time Programme Manager.

Sharing the building with the local authority Play provision has been and remains problematic. Although the accommodation was specifically designed for 0-12 year olds it does not work effectively in practice. Further work needs to be done with the City to ensure that problems do not worsen and that the building can become a Children's Centre.

Another challenge lies in the success of the Project in 'growing its own' staff. It has always been a success of the Project that parents have been empowered to develop themselves and have often been taken on as employees. However, this can give rise to challenges for managers of having staff with differing agendas, particularly when some staff are closely integrated within the community in which they work. Concerns or problems raised by the community can be seen by some staff as a personal attack or threat and this requires sensitive handling, extra support and guidance from managers.

People management can take up a significant amount of time for managers across the Project, as in any staff-intensive, service-oriented organisation. Staff are all highly committed and communication is excellent, but some interviewees felt that this was occasionally in spite of, rather than because of, the circumstances. The Children's Centre will need a full-time operational manager, possibly across both Children's Centres within the ward.

7.4 Parental involvement

Parental involvement has always been a vital and integral element of both the CCPP and SSCP. Interviewees agreed that initially parental involvement was key to the whole project but also felt that this then somewhat diminished, partly because of the absence of any formal strategy for parental involvement. They also felt that parental involvement then picked up again as a new set of parents became involved via volunteering through SSCP. Now it is changing again as parents move on, some into positive new areas such as jobs or training and others simply dropping out of involvement with the Project.

When the Sure Start opportunity was first a possibility many parents had similar reactions to staff: some wanted to move, innovate and be forward-looking, others felt that any change would be negative. Parents were kept on board with Sure Start from the outset, with regular meetings and discussions about its development. Some parents found the Sure Start ethos hard to grasp, specifically the emphasis on hard to reach groups. The influx of new people to the Project as a result of Sure Start also shocked some parents.

One local perception is that the parents groups can be very cliquy, which interviewees felt was probably true in some cases and certainly at the outset of the SSCP. The Outreach Team has worked hard to involve new parents, especially hard to reach groups and to ensure that nobody feels left out. Interviewees felt that this work has particularly been effective in the last 6-9 months and noted that new parents are starting to take regular part in activities and parents' groups.

Parental involvement in the Project Board has been very positive and initiatives to fully involve parents were initially effective. For example, meetings of parents' representatives and the Chair were held before Board meetings to allow parents to clarify the agenda and items on it, query things in confidence and make suggestions they might feel uncomfortable making in full board meetings. However, attendance of parents at Board meetings has recently been poor and the meetings with parents' representatives before the Board meetings has fallen off. The responsibilities of involvement at Board level are very high indeed and conflicts of interest can also be very high.

On the other hand, involvement in Parents Forums has developed in recent months. Discussion points, queries and requests are taken directly from these meetings to service managers for discussion and feed back to the next Forum. The Forums have been able to discuss and challenge SSCP activities as well as the cliquy nature of parental involvement and empowerment overall. Establishing effective Forums was difficult and initially it felt like lip service was being paid to parents' concerns, but more recently there has been a more equal sharing and feeding back process. Management has been supportive of and responsive to parental feedback. Some interviewees felt that the Project needed to be clearer about how it responds to parental feedback, as there is the potential for a power imbalance to emerge, with parents expecting the Project to respond to every request they make, rather than to consider parental feedback within the Project's ethos and targets and to make the best decisions in a considered manner. SSCP managers and staff need to develop a policy for dealing with parental requests and the confidence to say no to ideas or requests which do not fall into broad SSCP objectives or targets.

One of the basic principles of the Project was that you cannot meet children's needs unless you meet parents' needs and you cannot change things unless parents' needs are identified and met. Some families are quite able to access services and facilities without support and these will need much less support from SSCP, so the challenge for the Project was to focus resources on where the perceived needs are. The Project is just starting to address the needs of hard to reach groups and to involve parents in these groups. For example, fathers and young mothers are now being targeted.

A dads' group was established after concerns expressed by fathers during the antenatal period, particularly around their feelings that hospitals were resistant to encouraging fathers to be involved. This group meets once a month and has been going for over four years now. There is also now second dads' group which has been going for 18 months and runs as a Stay and Play. The initial group of fathers involved with this are starting to move on and the group needs to be promoted to a new group of fathers now.

Staff have plenty of examples of how SSCP has empowered and enabled parents. For example a parent who did the childcare training, went on to work for SSCP and now has a job at a local nursery and parents who work as buddies within the Project are going on to train as nurses. Managers have seen some complete transformations from parents having no self-belief or confidence to being equipped and confident to gain employment.

In the light of the changing levels of parental involvement in the Project, interviewees felt that it would be useful to go back to the parents now and seek their views on how SSCP is doing, how it has affected users and how involved or empowered parents feel as a result of SSCP. It would also be useful to explore those parents and families who do not use SSCP, partly in order to have an unbiased view and partly to explore the reasons why some parents choose not to become involved with the Project.

Interviewees also felt that it would be interesting to explore the changing nature of the demographic profile of the area, specifically in terms of ethnic origin, as there is a growing population of families from ethnic minorities living in private housing in the area. Community profiling or tracking mechanisms via nursery or reception class intakes could be a useful mechanism to explore this.

8 Conclusions

The documents studied for this report are supported by the data collected from interviews with managers. This consistency suggests a coherence within the Project and progress being made along agreed lines.

The Project has clearly been running successful activities and services over the past three years, after an initial period of sustained work on developing teams, links with other agencies and appropriate services and defining baseline data. This preparatory work was extremely time consuming but absolutely essential in order to have the required services running.

Early problems have still not all been resolved. For example, data from external providers is not available reliably to the Project, such as from school exclusions, re-registrations on the Child Protection Register, low birth weights or smoking rates in pregnancy. Baseline data has also been extremely hard to identify reliably, such as literacy levels, numbers of households with no-one in paid employment and teenage pregnancy rates. Other early problems involved the recruiting of staff to various posts, such as the Outreach Librarian, Childcare Network Co-ordinator or Midwifery teams.

Key milestones have been achieved or partially achieved throughout the Project's history. The 2004 Review and Evaluation Exercise was the first time the Project had useful and usable formal review and evaluation of its services, despite the Project having commissioned such work earlier in its history.

Targets for the Project are now defined and used in an effective way, with all staff having ownership of targets in their area and an understanding of broader targets, clear responsibilities and minimal but appropriate targets for each member of staff. The systems to monitor and report on progress towards targets is also now developed to a stage at which it works effectively across all teams and individuals.

Initially there were tensions between the SSCP and CCPP when they operated separately and the Project staff were spread across various sites. Both these factors led to management difficulties and staff tensions across the Project which are now resolved. Management concerns which need to be addressed now concern the need for more Programme Manager time and the need for a changing ethos to ensure that staff feel comfortable within the community in carrying out their jobs.

Parental involvement has had a cyclical history which is likely to be maintained as parents become involved, develop with the Project and move on as their children grow older or as they move into training and employment themselves. It is clear that the Project has had a significant positive impact on some parents but there is no evidence about the extent or sustainability of this across all parent groups. The Project needs to address parental involvement at the moment, particularly of those in hard to reach groups, at all levels (Board, Forum and groups) and plan for a future cycle of involvement. It needs a strategy for parental involvement to take account of this cyclical pattern. The strategy also needs to address parental expectations and how the Project meets these, to include clear communication about the Project's nature and the roles parents can play in developing the Project.

9 Recommendations for Evaluation Strategy 2005-6

The Review and Evaluation 2004/5 and the interviews with managers all suggest that there are a few key areas of evaluation which the Project should focus on over the next year. The Board should consider these ideas and develop a strategy to prioritise evaluation activities and ensure that the work is conducted over the next twelve months.

9.1 Impact of Sure Start Chinnbrook Project on local families

The Project should consider an evaluation exercise to explore the impact the Project has had to date on families in the local area. This could be achieved through interviews with parents with differing levels of involvement in the Project, for example:

- Those who have made heavy use of the services, become volunteers or gained employment
- Those who have regularly attended groups, such as Stay and Plays or the Dad's group
- Those who have had minimal contact, perhaps just the initial reach visit or attendance at one session of a Stay and Play
- Those who have not engaged with the Project at all

This research should build on previous parental involvement work and should involve parents as researchers with accredited training provided for them. The focus of the evaluation should be on impact of existing services, needs for the future and preferred means of accessing services.

9.2 Demographic data

The Project should consider collecting new data on the changing demographic profile in the area, particularly in the light of the move to Children's Centres in 2006. The data should provide a basis on which the Project can plan for the future delivery of services appropriate to local needs.

9.3 Value for money exercise

The Project should initially develop costing mechanisms for all areas of service delivery so that it has a basis on which to evaluate the value for money of each area of its work. The need for evidence that each service or facility is both meeting local need and national targets and is doing so at an appropriate cost will become increasingly important to the Project over the next eighteen months. The initial costing mechanisms should be the first stage of a longer term piece of evaluation work.

9.4 Parental involvement strategy

In addition to these areas of evaluation research the Project should also prioritise the development of a strategy for parental involvement.

Appendix 1 Documents and people consulted

Annual reports

Chinnbrook Children and Parents Project	1996-7
Chinnbrook Children and Parents Project	1997-8
Chinnbrook Children and Parents Project	1998-9
Chinnbrook Children and Parents Project	1999-2000
Chinnbrook Children and Parents Project	2001-2
Sure Start Billeseley	2000-1
The Surestart Chinnbrook Project Ltd	2003-4

Sure Start Interim Advisory Board (SSIAB) Meeting Minutes

3/5/00 (Terms of reference)	5/4/01	9/11/01
18/7/00	14/6/01	16/1/02
10/10/00	20/7/01	27/3/02
6/12/00	12/9/01	12/6/02
25/01/01	3/10/01 (extraordinary mtg)	11/9/02

Transition and merger

Inaugural Joint Meeting of Chinnbrook Mmt Committee and SSIAB	21/2/02
Additional mtg of SSIAB to discuss recommendations on merger	7/11/02
Joint Meeting of Chinnbrook Mmt Committee and SSIAB	12/2/03
Joint Meeting of Chinnbrook Mmt Committee and SSIAB	19/3/03
Wind up meeting of Chinnbrook Mmt Committee	16/4/03

Sure Start Board of Management Meeting Minutes

16/4/03
 11/6/03
 17/9/03
 12/11/03
 14/1/04
 17/3/04
 12/5/04
 29/9/04
 17/11/04
 25/1/05
 Board Away day Dec 03
 1st AGM, 11/6/04
 Board/partner/staff Meeting 15/7/04

Milestone plans

Annual plan 2003-6
 Annual plan 2002-6
 Quarterly plan 2002-3
 Quarterly plan 2001-2
 Quarterly plan 2000-1

Monitoring and other data reports

M3 forms showing the Project's reach figures; monthly figures for October 03 – January 05 and February 03 – March 03.

M4 forms showing progress against quarterly milestone plans: 2001-2; 2002-3 and 2003-4.

Evaluation reports

Childcare Audit November 2000
Annual Evaluation Report 2004
Review and Evaluation 2004/5
Toward a Sure Start for Families in Billesley, Qualitative research with and by local parents Nov 2000-Jan 2001
Local Evaluation Report by SCAlchemy September 2003

People Consulted

Amanda Massey Programme Manager
Sylvia Fry Chair of the Board
Ian Barber Outreach Worker
Angela Rainbow Parent Support Co-ordinator
Gina Graham Community Development and Outreach Manager
Karen Wood Support Services Manager
Ruth Eccleston Centre Services Manager

Appendix 2 Progress against milestones

Quarterly milestones 2001-2

Objective One: Improving social and emotional development

Sure Start Unit objectives	
Reduce the proportion of children aged 0-3 who are re-registered on the child protection register within twelve months	Achieved through intervention and monitoring of CPR registrations and children 'looked after' on a monthly basis
Agreed and implemented ways of identifying and supporting mothers with post natal depression, in a culturally sensitive way	Achieved through training, parental involvement, post natal support work and additional visits. Its unclear whether the planned evaluation and review of the support was carried out.
100% of families contacted by the Programme within two months of a new birth	Partially achieved. Outreach and midwife services were in place but continuation of the service was difficult later in the year due to staff sickness and vacant posts
Local objectives	
Continue existing health visiting	Achieved though its unclear from the last two reports whether the evaluation and review of the service was carried out
Continue existing Nursery Nurse post	Achieved though again its unclear from the last two reports whether the evaluation and review of the service was carried out
New providers (Health Visitors) fully operational	Achieved
Decrease in sessions lost in primary schools	Achieved in the first half of the year but staffing absences meant that the second half of the year the support work with children was less effective. In the second quarter parental consent for a tracking programme of all Sure Start children was being sought for a ten-year period. There is no mention of this in the second half of the year, however.
Integration worker working with local schools on improving attendance, particularly of 4 year olds	This was achieved in the first two quarters of the year, but there is no record of it in the final two quarters' reports
Monitoring of exclusions from primary schools in the area	Achieved and links with the LEA were being established to pursue this, though its unclear whether it was maintained, as there is no mention of it in the second half of the year
Provide services which demonstrably affect the security and safety of children in the community	Achieved throughout the year through social worker support focusing on supporting victims of domestic violence,

	holding support sessions, representation on Birmingham Domestic Violence Forum and information sharing. It is unclear whether any evaluation of this aspect of the Programme was conducted as planned in the last quarter of the year.
Monitor new services on post natal depression and ensure that they match expectations	Achieved in the first half of the year through parent survey and review of services but no record of progress in the second half.
Complete work on design of new Health Visitor database	Partially achieved with Health Visitor continuing to work with a city-wide group
Maintain number of children 'looked after' at a low level	Achieved

Objective Two: Improving health

Sure Start targets	
Achieve a 10% reduction in the number of women who smoke during pregnancy by 2004	Not achieved but ongoing work to establish smoking cessation sessions, to liaise with local hospital and to develop further proposals
Parenting support and information available for all parents in the Sure Start area	Achieved
Provide guidance on breast feeding, hygiene and safety	Achieved through breastfeeding support from midwives and team members and training courses on food safety and hygiene
Local targets	
2% reduction in low birth weight babies	Partially achieved but reports mention difficulties in monitoring this and there is no record of it in the reports for the second half of the year.
Reduction in number of parents smoking	Not achieved, although much work set up to begin to tackle it and difficulties in monitoring smoking rates were reported. No evidence of evaluation or review of services
Review target on the number of children admitted to hospital as an emergency in their first year of life	Not achieved though developments to address it were in place and again difficulties in monitoring were reported and no record of it appeared in the report on the second half of the year
Increased involvement of parents in ante-natal activities	partially achieved through parentcraft group, early pregnancy sessions, fathers' group and evening ante-natal sessions
Percentage increase in breastfeeding rate	Partially achieved in the first half of the year but no record of it in the second half. No evidence of evaluation of

	breast feeding diaries
Develop public health priorities for outreach services in consultation with the local community	Partially achieved and plans in place using the Health Visitor to further develop these

Objective Three: Improving the ability to learn

Sure Start targets	
Achieve a 5% reduction in the number of children with speech and language problems requiring specialist intervention by the age of 4	Partially achieved via speech and language therapist setting baseline and developing 5 year plan
All children to have access to good quality play and learning opportunities	Achieved
Increased use of libraries by families with young children	This was a new target and initial work was being undertaken to establish a programme of work to ensure it was met in the future
Local targets	
Improve average to 93% of children having normal speech and language development	Achieved though not mentioned in reports for the second half of the year
Liaise with Early Years Development and Childcare Partnership to check current levels of play and learning opportunities	Achieved
Increase the amount of play and learning provision for 0-3 year olds	Achieved through ongoing provision
Set realistic targets for the Flying Start and Toy Library contracts	Achieved
Implement community book loan scheme	Achieved
Consult parents on improving reading and implement methods of assessing parental reading	Partially achieved and plans in place to develop further
Increase basic literacy enrolments and provision and reduce levels of low adult literacy to 19%	Partially achieved and plans in place to set up a contract to address this. No baseline data established as yet.
Increase in places at Chinnbrook Centre	Achieved
Increase in places in the community	Achieved through development of the mobile crèche
Continue monitoring of anticipated need for baby places and planning for increases	Partially achieved as the childcare network co-ordinator post was vacant for some time
Improved retention of childminders	Achieved and new childminders going through the registration process at the end of the year
Set targets for improvements to services for children with disabilities and provide groups sessions	Achieved with regular attendance at the support group recorded at the end of the year
Monitor KS2 children to provide baseline	Partially achieved although no record of it is made in the last half of the year

Monitoring mechanisms for baseline results in place	Partially achieved although no mention is made of it in the reports on the second half of the year
Support uptake and fair distribution of nursery places	Achieved in liaison with local nursery providers and schools
New outdoor play provision installed at Chinnbrook	Not achieved although in progress at the end of the year
Investigate funding for outdoor play provision elsewhere in the area	Achieved in liaison with ward advisory group
Improve links between the Programme and the local library	Achieved through librarian providing a variety of sessions.

Objective Four: Strengthening families and communities

Sure Start targets	
Reduce the number of 0-3 year olds living in households where no-one is working	Not achieved. This was a new target and preparatory work was established to address it in future years
75% families report an improvement in quality of services	Not achieved but evaluation plans in place by the end of the year
Have parent representation on board	Achieved and a Parents Forum planned but not established
Develop local targets to ensure links between the Programme and Employment Service Jobcentres	Not achieved. This was a new target for the Programme and preparatory work was established to address it in future years
Work with EYDCP to close gap between availability of accessible childcare for 0-3 year olds	Partially achieved in the second half of the year. Another new target for the Programme, preparatory work was in place to address it.
Local targets	
Ensure integration of the Programme with Community Safety initiatives	Achieved via links with police and fire services
Monitor juvenile crime annually	Achieved
Monitor number of young people smoking	Not achieved as data difficult to collect and no data recorded in second half of the year
Monitor number of 16-19 year olds in economic activity or training	Not achieved as data difficult to collect and no data recorded in second half of the year
Reduction in teenage pregnancy rates	Partially achieved as appropriate support established and health promotion campaign begun
Improve service uptake by young homeless mothers	Partially achieved as a new target via work with Health Visitor and outreach work. No evidence of review or evaluation, however.
Ensure all parents have access to information about services for 0-3 year olds	Partially achieved through Outreach Team, activities and centre provision
Every family receives twice the visits they did in 1998-9 from health Visitor	Achieved

Increase levels of take up of services by black and minority ethnic families	Partially achieved but needing to appoint a community parent post to support the work
Improve access to services for those families encountering difficulties reaching services	Achieved through outreach work
100% of families referred for home-based support receiving a service	Achieved through outreach and Home Start services
Increase numbers of training places and conduct training needs analysis	Achieved and new training courses delivered
Commence new parent and toddler places	Achieved
Maintain level of parents support groups and expand to include parenting education	Achieved via additional groups and individual support.
Monitor CAB and Neighbourhood Office sessions to ascertain whether levels are adequate	Achieved

Quarterly milestones 2002-3

Objective One: Improving social and emotional development

Sure Start Unit objectives	
Reduce the proportion of children aged 0-3 who are re-registered on the child protection register within twelve months	Largely achieved although data in the second half of the year was unavailable from Social Services
Agreed and implemented ways of identifying and supporting mothers with post natal depression, in a culturally sensitive way	Achieved through Health Visitor work, support groups and additional one-to-one support. Its unclear whether the planned training, evaluation and review of the support was carried out.
100% of families contacted by the Programme within two months of a new birth	Partially achieved. New strategy for visits introduced to address the shortfalls.
Local objectives	
Decrease in sessions lost in primary schools	Partially achieved after appointment of a new Link Worker to liaise with local Primary Schools.
Provide services which demonstrably affect the security and safety of children in the community	Achieved throughout the year through partnership with Kidscape and a variety of domestic violence support initiatives.
Maintain number of children 'looked after' at a low level	Achieved Partially achieved but lack of data from Social Services has made monitoring impossible
Continue centre-based services for 4-6 year olds	Achieved through the work of the new Link Worker
Offer a comprehensive service to families caring for a child with a disability or special need	Achieved via Inclusion Workers, courses and groups, though little evidence of links with benefits and welfare advice or of promoting the social model of disability.

Objective Two: Improving Health

Sure Start targets	
Achieve a 10% reduction in the number of women who smoke during pregnancy by 2004	Partially achieved through smoking cessation sessions and local support groups. Baseline data established but no accurate data available on smoking rates in pregnant women
Parenting support and information available for all parents in the Sure Start area	Largely Achieved
Provide guidance on breast feeding, hygiene and safety	Partially achieved
Achieve a 10% reduction in the number of children aged 0-3 admitted to hospital as an emergency with gastro-enteritis, respiratory infection or severe injury	Partially achieved but without a baseline figure the Programme could not monitor progress.
Local targets	
Increased involvement of parents in	Achieved through parentcraft group,

ante-natal activities	early pregnancy sessions, fathers' group and evening ante-natal sessions
Decrease in percentage of home-based accidents	Partially achieved through joint working with fire and other agencies
Develop public health priorities for outreach services in consultation with the local community	Partially Achieved by the end of the year.

Objective Three: Improving the ability to learn

Sure Start targets	
Achieve a 5% reduction in the number of children with speech and language problems requiring specialist intervention by the age of 4	Achieved through speech and language therapists, outreach work and various group activities
All children to have access to good quality play and learning opportunities	Largely achieved
Increased use of libraries by families with young children	Some progress reported in the first two quarters but no mention made of it in the second half of the year. Delays due to late start of Outreach Librarian in post
Local targets	
Increase parental reading by encouraging parents to read to their children	Achieved through groups and outreach work
Reduce low adult literacy levels to national average of 15%	Not achieved though planning in place and baseline established
Increase access to centre based 0-3 provision	Achieved through increased provision and additional sessions
Increase in places in the community	Achieved through new sessions and links with other providers
Increase number of baby childcare places	Achieved and monitored regularly
Improved retention of childminders	Achieved through regular contacts and support for OFSTED registrations
Increase access to play and learning opportunities for children with a disability	Achieved through providers such as Portage and through groups and outreach work. No apparent evaluation of behaviours management course
Maintain levels of nursery education for 3 and 4 year olds	Achieved through regular links with pre-school and nursery providers in the area
Improve access to outdoor play provision for young children	Achieved at Chinnbrook
Improve links between the Programme and the local library	Achieved through librarian providing a variety of sessions.

Objective Four: Strengthening families and communities

Sure Start targets	
Reduce the number of 0-3 year olds living in households where no-one is working by 12%	Achieved through links with other agencies and development of parents within the Programme
75% families report an improvement in	Achieved through appointment of

quality of services	evaluation consultants and programme to train parent evaluators
Have parent representation on board	Achieved
Develop local targets to ensure links between the Programme and Employment Service Jobcentres	Achieved through Community Development Worker and other initiatives
Work with EYDCP to close gap between availability of accessible childcare for 0-3 year olds	Achieved through links with partnership and regular meetings
Local targets	
Improve service uptake by young homeless mothers	Achieved early in the year via work with St Basils, but later in the year this fell off as the centre was temporarily closed.
Increase levels of home visiting in excess of standard health visiting	Achieved
Increase levels of appropriate targeted ongoing family support within the home	Achieved through outreach and Home Start services
Increase opportunities for centre based training with crèche facilities	Achieved and training plan developed in conjunction with local college
Increase opportunities for joint learning approaches for children and parents	Achieved and maintained via weekly groups
Increase levels of take up of services by black and minority ethnic families	Achieved through specific groups and outreach work
Increase levels of parent support activity	Achieved and maintained
Increase access to advice and maintain and improve family life	Achieved via links with CAB and Neighbourhood Offices
Improve access to services for those families encountering difficulties reaching services	Achieved via outreach services and groups
Monitor number of 16-19 year olds in economic activity or training	Partially achieved through links between Health Visitors, Social and Youth Workers
Reduction in teenage pregnancy rates	Partially achieved

Quarterly milestones 2003-4

Objective One: Improving social and emotional development

Sure Start Unit objectives	
Reduce the proportion of children aged 0-3 who are re-registered on the child protection register within twelve months	Partially achieved although no data available from Child Protection Register. Profile of social worker raised within Programme, ongoing work and liaison, referrals to social worker and close liaison between Programme and Social Care and Health.
Agreed and implemented ways of identifying and supporting mothers with post natal depression, in a culturally sensitive way	Partially met. Support offered in the groups at the Centre and on a one-to-one basis and baseline being calculated
100% of families contacted by the Programme within two months of a new birth	Partially met, though service delivery changed through the year to health visitors being responsible in liaison with the outreach team.
Local objectives	
Decrease in sessions lost in primary schools	Partially met. Links with schools made then target revised mid year
Provide services which demonstrably affect the security and safety of children in the community	Achieved. Leaflets produced and distributed, talks given, domestic violence project ongoing, courses delivered
Maintain number of children 'looked after' at a low level	No monitoring data available
Continue centre-based services for 4-6 year olds	Achieved. Increase in the number of 4-6 year olds using the Playcentre
Offer a comprehensive service to families caring for a child with a disability or special need	Achieved. Support offered by inclusion worker in various settings according to need; groups, Centre, home. Links made with other teams and with KIDS. Leaflets produced and distributed.

Objective Two: Improving Health

Sure Start targets	
Achieve a 10% reduction in the number of women who smoke during pregnancy by 2004	Partially met. Referrals being made, information produced and distributed. No baseline data available. Groups sessions
Parenting support and information available for all parents in the Sure Start area	Achieved via the health visitor and outreach team work with groups and individuals.
Provide guidance on breast feeding, hygiene and safety	Achieved. Sessions run, baseline figures established, mentoring training started
Achieve a 10% reduction in the number of children aged 0-3 admitted to hospital as an emergency with gastro-enteritis,	Partially achieved. No baseline data available. Links with the Fire Station and safety work done in homes

respiratory infection or severe injury	
Local targets	
Increased involvement of parents in ante-natal activities	Achieved via increase in sessions available and parentcraft classes
Decrease in percentage of home-based accidents	Partially met.
Develop public health priorities for outreach services in consultation with the local community	Partially met. Work started to develop a strategy. Targeted work completed, e.g. dental care pack and healthy eating leaflets

Objective Three: Improving the ability to learn

Sure Start targets	
Achieve a 5% reduction in the number of children with speech and language problems requiring specialist intervention by the age of 4	Achieved. Baseline assessments done. Services extended, new groups established, leaflets provided, SSLM in use
All children to have access to good quality play and learning opportunities	Achieved via support group, toy library, childminder support and training, publicity, specialist support for children with additional needs
Increased use of libraries by families with young children	Achieved. Links made between groups and the library. Sessions run at the Centre. Community loans. Visits to the library. Monitoring established
Local targets	
Increase parental reading by encouraging parents to read to their children	Achieved via bookstart bags, Playcentre work and other groups
Reduce low adult literacy levels to national average of 15%	No information available
Increase access to centre based 0-3 provision	Achieved. Visits to groups, new parents reached, new groups. Building at capacity most days
Increase in places in the community	No information available
Increase number of baby childcare places	Partially met. Support for childminders and links made between childminders and Childcare Information Bureau.
Improved retention of childminders	Achieved. More childminders available and working together.
Increase access to play and learning opportunities for children with a disability	Partially met. Portage working well. Courses on behaviour management and inclusion worker working with families on a on-to-one basis
Maintain levels of nursery education for 3 and 4 year olds	Partially met. Some services ceased and new ones were established
Improve access to outdoor play provision for young children	Partially achieved at the Centre, although there were maintenance problems
Improve links between the Programme and the local library	Partially met via staff links and visits from the librarian to the Centre

Objective Four: Strengthening families and communities

Sure Start targets	
Reduce the number of 0-3 year olds living in households where no-one is working by 12%	No information available
75% families report an improvement in quality of services	Not met, although an evaluation strategy was developed and a comments/suggestions/comments system established
Have parent representation on board	No information available
Develop local targets to ensure links between the Programme and Employment Service Jobcentres	No information available
Work with EYDCP to close gap between availability of accessible childcare for 0-3 year olds	Partially met. Links made between SSCP and pre-school workers
Local targets	
Improve service uptake by young homeless mothers	Partially achieved, though problems with St Basils being closed early in the year meant this was delayed
Increase levels of home visiting in excess of standard health visiting	Achieved. Individual family support offered
Increase levels of appropriate targets ongoing family support within the home	Achieved via support to families in their homes
Increase opportunities for centre based training with crèche facilities	Achieved. Courses run on childcare, stress management, hair and beauty, for example, all with crèche
Increase opportunities for joint learning approaches for children and parents	Achieved via groups, trips and toy library
Increase levels of take up of services by black and minority ethnic families	Achieved via local groups and ESOL classes with a crèche
Increase levels of parent support activity	Achieved via groups, fathers group, coffee bar., establishing parents forum
Increase access to advice and maintain and improve family life	Achieved via CAB services delivered at the Centre and fully booked
Improve access to services for those families encountering difficulties reaching services	Achieved via groups, outreach work and links with schools
Monitor number of 16-19 year olds in economic activity or training	No information available
Reduction in teenage pregnancy rates	Partially met via groups sessions, links with health centres, leaflets and appointment of a community support nurse.