Introduction

Sure Start Acton is a fourth wave local programme that was launched in March 2002. In 2004-5 a detailed evaluation report was produced covering the first three years of evaluation of the local programme which gave recommendations for the next stage of the evolution of the programme. (This report is available on the Sure Start national evaluation website – www.NESS.bbk.ac.uk)

The year 2005-6 has seen a major step made in the mainstreaming of Sure Start local programmes and for the Acton local programme team the amalgamation with the South Acton Children’s Centre. This has resulted in a significant shift in the running of the programme as the team become incorporated into the local authority and are answerable to the governing body of the Children’s Centre. A large part of 2005 has dealt with this transfer and this has meant that 2005-6 has been a sparser year for evaluation, but there will be the need to measure outcomes in 2006 in relation to the Children Centre targets and the overarching Every Child Matters outcomes.

This report will look at the 2003-6 PSA outcome statistics and developments in reach for the local programme and then look in more detail at specific innovative developments within the health and family support work for Sure Start Acton. Details of methodology and findings will be included with reference to the full reports for further reading.

Public Service Agreement Outcome Measures of Sure Start Local Programmes

Below are the seven key target areas of outcome that were requested to be collected nationally in the 2004-5 financial year. Comparisons are made to the data collected for the previous two years to show progress in these areas.

It has often been commented that the impact of Sure Start local programmes will be proven more in long term outcomes as children prove to be more successful in school and in later years as parents, from their original ‘sure start’. These targets are what the Department for Education and Skills deemed to be outcomes measures on a more short term basis that could act as indicators of the impact of Sure Start. In fact many of the statistics are fairly static as improved contact with families by the Sure Start programme has in practice brought more cases to light and data collection has become more detailed. Nevertheless the monitoring data has proved to be useful in ensuring that the local programme services are working towards national goals.

1. Target: All families with new babies to be visited within the first two months of their babies life and given information about the services and support available to them.

Out of 199 births in the period 01.04.2004 -31.03.2005 156 new birth visits (78% of all new births) were made by the Sure Start Acton Team

(compared to 2003-4 when 77 visits were made out of 179 new births = 43% of all families with new babies visited)
2. Target: Information and guidance on breastfeeding, nutrition, hygiene and safety to all catchment families.

*For the period 01.04.2004 – 31.03.2005:*

Out of 153 mothers whose breastfeeding status was known at birth 122 were breastfeeding = **80% of mothers**

Out of 139 mothers whose breastfeeding status was known at 6 weeks 95 were breastfeeding = **68% of mothers**

Out of 124 mothers whose breastfeeding status was known at 17 weeks 58 were breastfeeding = **47% of mothers**

*(Compared to 2003-4 125 out of 162 mothers (status known) breastfed at birth = 76%)*

*95 out of 139 mothers (status known) breastfed at 6 weeks = 68%*

*76 out of 130 mothers (status known) breastfed at 17 weeks = 58%)*

3. Target: 10% reduction in children in SSA catchment admitted to hospital as an emergency with gastro-enteritis, a lower respiratory infection or a severe injury.

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of admissions</th>
</tr>
</thead>
<tbody>
<tr>
<td>2002-3</td>
<td>8</td>
</tr>
<tr>
<td>2003-4</td>
<td>15</td>
</tr>
<tr>
<td>2004-5</td>
<td>14</td>
</tr>
</tbody>
</table>

4. Target: Ante-natal advice and support to all pregnant women in SSA catchment

*In the period 01.04.2004 to 31.03.2005:*

Out of 199 new births in the SSA catchment area 68 were contacted by the local programme during pregnancy = **34%**

*(compared to 2003-4 when 20 ante-natal contacts were made out of 162 live births = 12%)*

5. Target: Achieve by 2005-6 an increase in the proportion of young children with satisfactory speech and language development at the age of 2 years.

*In the period 01.04.2004 to 31.03.2005:*

<table>
<thead>
<tr>
<th>Period</th>
<th>Percent of children with P score</th>
<th>Percent of children with Q score</th>
<th>Percent of children with R score</th>
<th>Percent of children with S score</th>
</tr>
</thead>
<tbody>
<tr>
<td>01.04.2003 – 31.03.2004:</td>
<td>7.69%</td>
<td>7.69%</td>
<td>12.31%</td>
<td>72.31%</td>
</tr>
<tr>
<td>01.04.2003 – 31.03.2004:</td>
<td>12.73%</td>
<td>1.82%</td>
<td>5.45%</td>
<td>80%</td>
</tr>
<tr>
<td>P score =</td>
<td></td>
<td>Q score =</td>
<td>R score =</td>
<td>S score =</td>
</tr>
</tbody>
</table>
2003-4  Number of children scoring above cut off for low word count = 45 out of 55
Sure Start Local Measures carried out = 82%

2004-5  Number of children scoring above cut off for low word count = 52 out of 68
Sure Start Local Measures carried out = 76%

**Key to Sure Start language measure scoring:**
The definitions of P, Q, R and S are given again below. They are generated by the
Excel spreadsheet automatically once the child data for word count score and
parental language concern has been entered.

Word count score is given on line 10 of the child information coversheet, and
entered into column 10 of the spreadsheet / paper summary score sheet page 1.
Parental language concern is given on line 8 of the child information coversheet and
entered into column 8 of the spreadsheet / paper summary score sheet page 1.
P = AA / N x 100% = percentage of children with a low word count score, and
parental language concern = yes;
Q = BB / N x 100% = percentage of children with a high word count score, and
parental language concern = yes;
R = CC / N x 100% = percentage of children with low word count score, but parental
language concern = no;
S = DD / N x 100% = percentage of children with a high word count score, but
parental language concern = no.)

<table>
<thead>
<tr>
<th>WORD COUNT SCORE</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>13 or less</td>
<td></td>
</tr>
<tr>
<td>14 or more</td>
<td></td>
</tr>
<tr>
<td><strong>P</strong> = AA / N x 100%</td>
<td><strong>AA + BB</strong></td>
</tr>
<tr>
<td><strong>Q</strong> = BB / N x 100%</td>
<td><strong>BB</strong></td>
</tr>
<tr>
<td><strong>R</strong> = CC / N x 100%</td>
<td><strong>CC + DD</strong></td>
</tr>
<tr>
<td><strong>S</strong> = DD / N x 100%</td>
<td><strong>Total N</strong> = <strong>AA +BB + CC + DD</strong></td>
</tr>
</tbody>
</table>

This is the number of children scoring at 14 or above.
This is the total number of children given the SSLM–R

P, Q, R and S are defined with reference to the table below. The numbers AA, BB, CC and DD are the numbers of children in each group. Multiply AA / N by 100 to get a percentage figure (and so on).
6. Target: all Sure Start programmes to have representation on local programme boards (management board)

The Sure Start Acton Management Board has regular representation by four parents on the management board out of 12 total members (2002-3, 2003-4, 2004-5)

(33% parent representation)

7. Target: by 2005-6 achieve a 6% reduction in the number of mothers who continue to smoke during pregnancy

2002-3  No data available/collectable

2003-4  10 mothers smoked at the beginning of pregnancy and 7 of those gave up during pregnancy out of 142 pregnant mothers whose smoking status was known.

(7% of pregnant women (whose smoking status was known) smoked at the beginning of pregnancy and 5% of those gave up smoking during pregnancy.)

2004-5  12 mothers smoked at the beginning of pregnancy and 11 of those gave up during pregnancy out of 177 pregnant mothers whose smoking status was known.

(7% or pregnant women (whose smoking status was known) smoked at the beginning of pregnancy and 6% of those gave up smoking during pregnancy.)

Local Programme Reach

A major part of the local programme was to contact at least 25% of its catchment population every month by ensuring hard to reach families were encouraged to attend Sure Start groups and that existing families were involved in developing services further. This contact is particularly significant for new births, as indicated in the statistics above, and for families traditionally isolated in the community such as new arrivals, ethnic minorities, single parents and refugees. The reach for 2005-6 has reached its optimum level and is now fulfilling the national target of 30% every month. The task now is to ensure continued attendance/contact and make sure that new parents are constantly brought into the programme.

The chart below shows the reach figures for the last year. The total catchment population is a total of 634 under 4 year olds, so the monthly reach would need to be 159 children per month.(25%) It is important to note that these are single contacts and do not reflect the reality of multiple contacts that are made with families every month by the Sure Start Acton team.
The reach target has been achieved by a focussed effort on home visiting of new births and marketing Sure Start services at baby clinics within the health centre. The liaison with the health visitor team has been particularly supportive in ensuring that their initial home visits includes publicity for Sure Start activities and further promotes new parent involvement. Within the groups the parent team have constantly responded to parent requests for variations in the services, including timing, structure and even venues so that parents are encouraged to continue attending. In fact the whole decision making process being in the hands of the parents is what keeps the reach sustained as parents feel they are being listened to and accommodated by the Sure Start services.

**Group/health promotion evaluation**

**Summer Trips**

One of the most popular service that the Acton local programme offers is the summer trips which are always well received by parents and have this year involved the parents in actually planning the venues they would prefer and the approach to trips. During all the summer trips an evaluation survey was carried out of what parents gained by the trips and the report is as follows:

Trip evaluation forms have provided the feedback for the summer trips. These were filled in by the families on the coach on the way home. One of the less popular summer outings was the family picnics in local parks. Very few families attended the picnics. The weather the previous day and on the morning of the picnic had been wet and may have put people off. One family said the plans on the day were misleading as we made alternative plans in case the weather was bad. The Family support team agreed it may be better to make definite plans in case of bad weather. Families at the trip review meeting thought this was a good idea and also thought that these plans could be made clear to parents/carers as part of the information when the trip was booked.
Recommendations by parents for family picnics

- As far as the picnics were concerned parents felt that families might not have attended because they were in local parks and they could go there at any time.
- However parents thought that the picnics could be improved by adding some sort of focus. Some of the ideas discussed were, face painting, physical activities, arts and crafts, and a multicultural picnic where everyone brings a dish to share. Hiring a bouncy castle was another idea.

Recommendations for other trips in the future

- We have had verbal feedback from parents about having more opportunities to do things as a group on trips, thus giving the opportunity for families to make friends. This is highlighted in the feedback where 35% of families said that the trip gave them the opportunity to meet new people. Hopefully we can see this as something to improve on and work towards as part of Sure starts objective to strengthen communities.
- One of the trips to Southend was on public transport and this was an opportunity to go with a smaller group showing how to get there using public transport. This trip highlighted how smaller group trips can be a way of families getting to know each other better. People seem more likely to stay together because the group is smaller. This may make it easier for people on their own to mix if they don’t want to ‘do their own thing’ on trips.
- However this is not for everyone and some families prefer to spend the time out with their children and family members or chosen friends on their own.
- One of the parents whose child is starting school suggested a trip for those children before they started school as well as a party at one of the groups where all children who are due to start school could attend.
- Ideas from Family Support team about using local activities as a focus for some of the trips so that families become aware of what’s nearby and easy for them to get to Walpole festival for example. Also ideas about ‘bringing events to us.’
- Another suggestion from the family support team was for Sure Start to provide some sort of activity sheet for parents to use with their children on the journey.
- On the whole 70% of the families said that they were able to have their first choice of trip and over 90% said that their children had enjoyed the trip.

- Complaints were to do with the weather, coaches not leaving on time and bumpy rides.
- Some families thought it would be helpful if we gave out more information about the venue on the day, something printed, showing where facilities and play areas are as well as suggestions about what to do there.

The trips have proved to be popular and have particularly involved fathers in strengthening family relations. Many of the families had not had any opportunity to travel outside of London and appreciated the support of other families to get to know other areas of the country and enable their children to experience new environments.
Sure Start Acton Information Centre – Six monthly evaluation of the service

The Information Centre continues to have a steady flow of enquiries with 349 callers being recorded in the last six month period. (As we have only been opening part time this is a particularly high number of callers.) Childcare dominates the nature of enquiries with more and more parents trying to find ‘affordable’ childcare and any financial support, ie Working Tax Credits that exists to support their childcare costs.

There have also been enquiries around training for childcare and the EYDCP’s flexible training programme of NVQ courses has proved very popular. This certainly augurs well for training in the new South Acton Children’s Centre, though there is an overwhelming need for crèche support for any kind of parent training as many parents have not been able to pursue College training courses due to the limited childcare provision.

A quite significant role that the Information Centre has taken on is a ‘tourist information’ introduction to Acton. We have had many families coming to the Centre who have just moved into Acton and are wanting to know what facilities exist for their children and for leisure activities. They are particularly pleased to be able to find out about all aspects of Acton in one place and we have developed a series of leaflets to introduce different aspects of Acton to families. This is particularly pertinent in the light of the massive regeneration of South Acton where so many families are being moved into the area and have no knowledge of local services. Once we have moved into South Acton Children’s Centre we will be even closer to the new housing development and our satellite information service will be directly on site.

A recent achievement at the Information Centre has been receiving the Community Legal Services Partnership quality mark for assisted information giving. In order to gain this quality mark we had to go through a number of policy developments and audits to ensure we were offering impartial advice and making full use of referral systems to professional legal bodies such as Law for All. We are very fortunate in Ealing in that we have a strong Advice Forum where agencies across all sectors of society meet and share good practice in referrals. This Forum has proved to be an invaluable network for referrals as you are aware of the personnel and services in depth and this leads to far more accurate referrals.

The Centre is now open 9.15 – 5.00pm Monday – Friday again and this has already increased the numbers coming in. Ideally, in the future, we would like to transfer the whole information service to the Children’s Centre, but at present the service will continue at King Street until it is suitable to transfer the service.

Below is a chart showing the breakdown of enquiries and the numbers using the Centre.
Conclusion

The Sure Start Acton Information Centre has now passed its two year anniversary and has proved to be an invaluable service both in promoting Sure Start services and as a focal point for information for Acton families. We have worked closely with Acton Community Forum and Action Acton to provide a community location for Acton events such as the recent Winter Festival where the information centre was transformed into Santa’s Grotto, and we have held a number of health promotion events at the Centre including Breastfeeding Awareness Week and No Smoking Day. The location of the Centre in the middle of the Sure Start Acton catchment area has highlighted the local programme to the whole area. The service that has been developed so far will provide a strong foundation for the new Children’s Centre and will be able to link directly with promoting the training programme at the Centre and other new services.

3. REPORT ON THE NATIONAL BREASTFEEDING AWARENESS WEEK 8th May - 15th May, 2005

1. Introduction

Sure Start Acton decided to organise a campaign on several fronts in partnership with Ealing PCT Health Visitors, Acton Community Health Educators, and a representative from the National Childbirth Trust, the PCT Oral Health Promoter, Acton High Extended Schools Coordinator, and the School Health Advisor. The campaign itself was organised by Gill Peabody (Sure Start Public Health Coordinator), Andrea Gunpot (Sure Start Administrator) and myself, Juliet Albert (Sure Start Midwife).
2. Aim of the week

Our aim as community-serving health professionals is to remind people of the enormous benefits of breastfeeding. Not only is breastfeeding good for babies but it is also good for mums too. Breast milk contains antibodies, which offer protection against sickness and diarrhoea, chest infections, ear infections and urine infections. Research suggests that breastfed babies have better mental development, and there is less eczema and less diabetes. For mothers, breastfeeding reduces the incidence of breast and ovarian cancer and osteoporosis.

3. Activity in Acton Health Centre

We organised a stand in the foyer on the Monday morning with leaflets, posters and banners with large display boards. The stand was manned at various times by Health Visitors from Acton Health Centre.

4. Acton High School

It was very encouraging to see that all of the staff tried to engage individual students. The schoolteachers themselves were very helpful in encouraging children to come forward and supervising them if there were too many pupils at one time.

The event was well organised beforehand by the extended school coordinator so that the children had held discussions in the classroom about breastfeeding prior to the event. Consequently the pupils were interested and quite knowledgeable about the advantages of breastfeeding.

A lot of time was spent preparing materials the day before yet despite the number of freebies we still ran out of quizzes as there was more interest than expected.

Working inside the dining hall was a great success as it meant that all the children had to pass by the stand. The reason for being inside was due to the rain and it meant that a few members of our team did not know where we had set up initially. However due to the unpredictable nature of the English weather it was unavoidable.

It demonstrated how successful partnership on the day could work with so many interested parties supporting us.

5. Activity outside Safeways 10th May

On Tuesday afternoon we went to Safeways and set up outside the entrance from 2-4pm. We handed out balloons and encouraged passers-by to fill out our quiz. Breakdown of those who visited the stall:-
119 people in total approached the stand. The majority were found to be mostly women of childbearing age with young children, those who were currently breastfeeding or have recently breastfed. This is likely to be a result of the fact that we were giving out balloons to the under 5's.

**Breastfeeding quiz results:-**

78 people in total filled out the quiz.

1. "Breastfeeding protects your baby from infections and other illness? " (answer TRUE)
   
   Correct/True - 73; Incorrect - 5

2. "Breastfeeding is cheap and convenient? " (answer TRUE)
   
   Correct - 75; Incorrect - 3

3. "Breastfeeding mothers tend to lost weight more easily? "(answer TRUE)
   
   Correct - 66; Incorrect - 8

4. "You need to eat a special diet when you are breastfeeding? "
   (answer FALSE)
   
   Correct- 44; Incorrect - 34

5. "Breastfed babies are less likely to overfeed and become overweight? " (answer TRUE)
   
   Correct -57; Incorrect - 21

6. "Breastfeeding stops you getting pregnant? " (answer FALSE)
   
   Correct - 57; Incorrect - 20 (1 person did not answer)
7. “Breastfeeding is more hygienic? ” (answer TRUE)

Correct - 73; Incorrect - 5

The first three questions and question 7 at the end overwhelmingly demonstrate that certain messages about breastfeeding are getting through to the general public. However, perhaps we should say that those who filled out the quiz already have a raised awareness when it comes to breastfeeding otherwise they may have been less likely to come forward to view the stand at all in the first place.

Question (4) about diet when breastfeeding is contentious in it and is a question that is meant to invoke discussion. This shows clearly with the number of replies being almost half and half of those asked giving a different answer. Of course you should not drink caffeine or alcohol when you are breastfeeding (or certainly very little of both), you should drink more water and you should probably avoid certain foods such as peanuts or cabbages etc. This type of information should not detract us from reassuring mothers that, however, they do not need to go out and spent money on a so-called 'special diet' when they are breastfeeding.

Although Question 5 should be answered true we can see that as many as 21 people, that is nearly 30%, got the wrong answer. It is interesting that the picture of big fat babies seen on the front of formula containers are clearly not associated with terms such as 'overfeeding' or overweight' babies.

Similarly with question 6, 20 out of 77 people said that breastfeeding could stop you getting pregnant. This means that over a quarter of those answering did not know that you should still use precautionary contraception whilst fully breastfeeding as it is not a 100% safe form of contraception.

Comments

• "It is the best protections against cancers "
• "I could only feed from one breast and I still managed to feed 3 children "
• “Breast is best”
• "I have breastfed both my children and have thoroughly enjoyed it"
• "I did it (breastfed) for 3 years "
• "Thank you very much for doing this good job "
• "I was made to feel the worst mother in the world for not breastfeeding"

Most of the above comments are extremely reassuring and shows that a number of people expressed their support for breastfeeding. It is also important to recognise the difficulties that some women have to successfully breastfeed. Often this is due to
the lack of professional specialist expert advice at a very crucial time in a woman’s life.

The final comment reminds us as health professionals that there are women who are left feeling extremely guilty that they did not/could not breastfeed, and we must be careful that we give support not put draconian pressure.

**Conclusion - SAFEWAYS**

This is a fantastic location for setting up a stand. The display boards donated by Linda Cardona (the Ealing oral health promoter) is an absolute essential. We also discovered that balloons for the kids were our greatest attraction. This event was extremely well staffed with the support of Sarah Millar (a National Childbirth Trust breastfeeding counsellor), Claire O'Riordan (Health Visitor), Vivienne Anderson (Community Health Educator), Alexis Yemoh (Health Visitor Nursery nurse) and Linda Cardona (Oral Health Promoter for Ealing PCT), Gill Peabody (Sure Start Public Health Coordinator) and myself, Juliet Albert (Sure Start Midwife). We even managed to engage a few expectant fathers who also showed their interest.

It also would have been helpful to have a Somali speaker with us as many Somali women and children live in this locality. We also ran out of some of the literature early on.

**6. Pampering Session and Anniversary Celebration**

We held a pampering session on the Wednesday for all those women who attend the breastfeeding and postnatal support group. 16 women came with 17 babies (one woman has two children under 18 months of age), pushchairs and a few older siblings in tow. Of these 16 women 7 were from BME background and 9 Caucasian.

**Activities**

We had: - Alda Counago (Sure Start nursery nurse) doing facials; Valerie Graham (the Sure Start bookkeeper) doing make-up; Roxana Usseglio (Sure Start nursery nurse) gave mini manicures; and Mina Mistry (Sure Start speech and language therapist) did a relaxation and breathing session for the mums.

We even had our very own pink special anniversary cake made by Vivienne Anderson (Community Health Educator) to celebrate the fact that we have been running the breastfeeding and postnatal support group for a whole year now!

We also organised extra help to look after the babies while their mothers were enjoying being pampered. Other than Halina Malcher (health Visitor) who runs the group with myself Juliet Albert (Sure Start Midwife) there was also Shabila (a student health visitor); Najma Tirmizi (a Sure Start family support worker); and Alexis Yemen (Health Visitor’s Nursery Nurse).
Comments

• "had a fantastic time. Thanks for the pampering - really enjoyed it and it's great to meet so many other mums"
• "Wonderful afternoon, just to have a bit of time out, a big thank you for organising"
• "Thanks! What a lovely treat... and the babies are happy too!"

Evaluation

From last years session we knew to send out invitations at different times so that there was a staggered arrival. This proved to be a great success as it meant that everyone did not arrive at once.

Shortened the time that each pampering was allowed which meant that every woman was ensured at least one session. Last year we had to turn women away, and stress levels rose because individual pampering were taking too long.

Staffing levels were sufficient and the perfect number of mothers and babies actually attended the event.

There was a very friendly and relaxed atmosphere. The food was healthy and went down very well, including strawberries, Satsuma's and bananas, cake, water and fruit juice. We also used a spare room to store the extra pushchairs, which was very helpful.

Unfortunately there was the inevitable rush to clear up at the end of the event because the building closes at 4.30pm.

It also might have been better to provide separate individual comment sheets so that women couldn't see what other people had written.

OVERALL CONCLUSION

It was good to see greater involvement each year of our partners in providing health for the community; particularly noticeable was that of the Health visitors from Acton Health Centre. Especially Claire O'Riordan who attended planning meetings and encouraged her colleagues to get involved and Halina Malcher who runs the breastfeeding and postnatal support group in conjunction with myself (Sure Start Midwife) and Alda Counago, (Sure Start Nursery Nurse).

So what are the lessons learned? That we can always do with more staff particularly during the preparation stage, getting materials ready to give out on the day. Although we must not over order as some of the Department of Health publicity material was not used. In addition that the number of quizzes ran out at Acton high school.
Ultimately we should recognise that partnership works and we should always look for new partners.

**Evaluation report on Men’s Health Week Activities 13-19 June 2005**

**Aim of the activities**

The aim of the activities was to raise awareness amongst the male population of Acton on health issues relevant to them, raise awareness about local health services and to provide the opportunity for them to take advantage of the free screening services provided at the events. The activities were provided by a multi-disciplinary team composed of the NRF projects namely the Community Health Educators, TB Outreach Worker, Somali Health Advocate and Male Sexual Health Worker to work in partnership with the Acton Health Living (Sports Outreach Project), Acton Community Nurses, The Ealing Oral Health promoter and a local Dentist.

**Activities conducted**

The activities which took place over 2 days included a information stall providing information on CHD, smoking, nutrition & exercise, sexual health, and dental health and local health services services outside Safeways supermarket. This also provided the opportunity to promote the second event which was a open air mini health fair in a gazebo in the Woodlands park Crown Street.

At the Crown Street event a local dentist was on hand to provide a quick dental check up. Community nurses offered the opportunity for men to have their blood pressure and blood sugar checked. This event was very well attended and as a result 12 men were referred to their GP's as a result of hypertension and 60 residents were seen by the dentist who registered 45 new patients that afternoon.

The final event took place at the local Swimming Pool where men were invited to have their blood pressure and teeth checked and information was provided on a range of health issues included sexual health, smoking, CHD, diabetes, nutrition, exercise and dental health.

**Attendance numbers**

During the week 180 men attended the activities The safeways stall was visited by 29 men, 14 of whom were from BME communities. A staggering 86 residents attended the Crown Street event of whom 65 were from BME communities and 38 men visited the event at Acton Swimming pool of whom 24 were from BME communities.

**Conclusions**

All staff involved with the organisation of the events felt that the week had been very successful. It was a good example of partnership working and the good preparation and organisation before the events paid off. The innovative gazebo idea with the dentist and Community Nurses on hand to provide screening proved to be a very good way of getting men to come forward.
CHILD SAFETY WEEK REPORT 20th June to 25th June 2005

Introduction

This year Child safety week theme was "Not every accident is a lucky escape". We set up a series of activities to highlight Child safety week. We worked in partnership with Acton Health centre’s Health Visitors, Acton Fire Station.

2. Aim of the events

Our aim was to remind people, Sure Start parents and carers, that accidents and injuries are a major threat to the health and well being of children. All children are exposed to hazards as part of their every day lives as they play, travel around and even when they are sleep. Injuries are preventable and with the right interventions there is considerable scope for a reduction in accidents and injuries.

3. Activities

We devised activities which were conducted by Sure Start Acton, Health Visitors and the Fire Service.

Information was distributed through Home safety packs (Home safety Handy Hints leaflets in English/ Somali/ Arabic/Urdu, distributed in groups, a variety of NHS Safety Leaflets, CAPT (Child Accident Prevention Trust) leaflets and Fact files Sheets, and a safety item such as door stoppers, sockets plugs, sun hat, or room thermometer.

A Quiz produced by CAPT with prizes, was distributed.

Acton Fire Station distributed Fire Engine and Fire safety information leaflets.

The activities were as follows:

Monday 20th am: Acton vale Community Centre
Stay & Play Group. Information stand.
Acton health Centre
Health visitors Information Stand.

Tuesday 21st am: Acton Health Centre
Health Visitors Information Stand.

pm: Priory Community Centre
Stay and Play. Information Stand.

Wednesday 22nd am: Acton Health Centre
Health Visitors Information Stand, pm:
Acton Health Centre
Breastfeeding and postnatal support group.
Information and First Aid advice from GP Katy Willis
Acton Health Centre
4. Child Safety Week Quiz Results

The objective of the quiz was to test parents and carers safety knowledge. 42 persons completed the quiz and the results were as follows below:

Question 1
Your toddler plays with the hot tap in the bath. How long is it before hot water from the tap causes a serious scald?
Five seconds, fifty seconds or five minutes

Answer: Five seconds  (correct 82% incorrect 18%)

Question 2
It is safe to leave bleach by the side of the toilet because a child-resistant top is childproof.
True or false

Answer: False  (correct 90% incorrect 10%)

Question 3
How many children under five are admitted to hospital with scalds caused by bath water?
One a day, one a week or one a month

Answer: One a day.  (Correct 82% incorrect 18%)

Question 4
Your toddler can run off and be out of sight in seconds. What's the best way of keeping them safe near traffic?
Holding there hand very tightly, telling them firmly to stop and came back or using harness and reins.

Answer: Using harness and reins (correct 82% incorrect 18%)

Question 5
How many under fives are rushed to hospital because it's thought they've been poisoned by something in the bathroom?
One a day, two a day or three a day

Answer: Three a day  (correct 55% incorrect 45%)
Question 6
Your four year old wants to climb out of the window just like the Spiderman. What's the best way of keeping him safe?
Hiding his Spiderman costume, fitting locks to all the windows he can reach or telling him that only the real Spiderman can climb buildings.

Answer: Fitting locks to all the windows he can reach (correct 100%)

Question 7
Where's the safest place to store your cleaning products?
In the cupboard under the sink. On the kitchen work surface or in a locked cupboard, well out of reach.

Answer: In a locked cupboard, well out of reach (correct 100%)

Question 8
What percentage of serious hot drinks scalds involve children under five? 90%, 60% or 30%

Answer: 90% (correct 73% incorrect 27%)

Question 9
Your toddler finds the high-dose iron tablets you took while you were pregnant. How many must they swallow to cause serious poisoning? 3-4 tablets, 13-14 tablets or 30-40 tablets.

Answer: 3-4 tablets (correct 90% incorrect 10%)

Question 10
At what age is it safe to let a child ride in a car without a booster seat or booster cushion?
Four, seven or eleven.

Answer: Eleven (correct 82% incorrect 18%)

5. Number of persons who visited each venue.

<table>
<thead>
<tr>
<th></th>
<th>Acton Vale Community Centre</th>
<th>Acton Health Centre</th>
<th>Priory Community Centre</th>
<th>Breastfeeding &amp; Postnatal Support Group AHC</th>
<th>SACC Family Room</th>
</tr>
</thead>
<tbody>
<tr>
<td>6-18 Caucasian</td>
<td></td>
<td></td>
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<td>5</td>
<td></td>
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<td></td>
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<tr>
<td>6-18 Caucasian male</td>
<td></td>
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<td>Age Group</td>
<td>ActonVale Community Centre</td>
<td>Acton Health Centre Health</td>
<td>Priory Community Centre</td>
<td>Breastfeeding &amp; Postnatal Support Group AHC</td>
<td>SACC Family Room</td>
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<tr>
<td>6-18 Bme female</td>
<td>4</td>
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<tr>
<td>6-18 Bme male</td>
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<tr>
<td>19-40 Caucasian Female</td>
<td>3</td>
<td>15</td>
<td>7</td>
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<td>1</td>
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<td>4</td>
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<tr>
<td>19-40 Bme female</td>
<td>6</td>
<td>42</td>
<td>10</td>
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<td>5</td>
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<tr>
<td>19-40 Bme male</td>
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<tr>
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<td>8</td>
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<tr>
<td>40-60 Bme male</td>
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<tr>
<td>Caucasian male</td>
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<tr>
<td>40-60 Bme female</td>
<td>3</td>
<td>12</td>
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<td>40-60 BMemal</td>
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<tr>
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<tr>
<td>60+ Bme female</td>
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<td>60+ Bme male</td>
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<tr>
<td>Total</td>
<td>12</td>
<td>108</td>
<td>19</td>
<td>6</td>
<td>6</td>
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<tr>
<td>Grand Total</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>151 (of which 99 were BME)</td>
</tr>
</tbody>
</table>
6. Debriefing from working group members.

- Working group worked well, and communication between representatives flow adequately. Good partnership work.

- Positive commitment from planning committee. Sharing resources with Health Visitors for the stands.

- Good preparation and time allowed to plan/prepare. Good different locations / days /times.

- A Flyer highlighting the activities for the week was distributed prior to the events at groups, clinics and displayed at SS Information Centre, Acton Health Centre, Sure Start Groups.

- The Quiz from CAPT- (Children Accident Prevention Trust) (English language only) with prize offered by Capt was an appropriate resource for the events, parents took leaflets to do it at home and send this directly to CAPT, others parents completed the quiz during the events.

7. Lessons to be learned.

- Starting preparation for an event involving a number of venues needs to start at least 6 weeks in advance.

- Allowing sufficient time to prepare information bags, display boards pays off on the day of the event.

- Having a smaller pro-active planning committee is better than having a larger committee, also members of the committee worked as representatives passing information and linking with more staff that helped on the day.

8. Conclusions.

1. This event was a positive step that contributed to raising awareness to parents and carers that accidents and injuries are preventable.

2. We should continue linking up with local organisations that have experience working in the accident prevention field such as the local fire brigade and local charities, maybe organising fun days with the fire brigade where children can sit in fire engines play with hoses and are taught the dangers of playing with matches/fire.

3. In the future have access to a London Fire Brigade Officer to visit Sure Start families to identify what safety equipment is required and make arrangements for fittings to take place.

4. Through observation from the results of Child Safety Quiz, we need to pass the message to parent and carers of the danger that children under
five are exposed to be poisoned by something in the bathroom, and also are exposed to serious hot drinks scalds. We need to work towards prevention, and reduce the number of children involved on those incidents.

5. Introduce and sustain the message within Sure Start Groups that accidents and injuries are preventable, providing seminars, talks, and groups' discussions at least on a monthly basis.

"Mother Music" - Music Therapy at Acton Sure Start

Acton Sure Start has been running a pilot music therapy project, working with mums and their new babies each week at Acton Health Centre from June 2005. The aim of the group was to help new mums who may be feeling isolated, overwhelmed or depressed. We wanted to provide a confidential, non-judgemental space for mums to share their feelings, support each other, and to use music as a fun and joyful way of promoting bonding between mum and baby. As a music therapy trainee (at Bristol university) students were required to set up a final placement of our choice, and for me as a local mum of two who had myself suffered from post natal depression, this was something I really felt passionate about. I felt sure Music Therapy could be a useful intervention in this area.

Alda Counago (SureStart nursery nurse) and I initially worked together to promote "Mother Music" to those on the ground who would be referring local mums. We had to explain to the health visitors and SureStart team what we felt music therapy could offer this client group.

- Music forms a simple yet deep path to emotions.
- Creative music making helps people to express themselves in a non-verbal way. Sometimes it is too painful or difficult to share emotions with words, or perhaps English is not the first language.
- Making and sharing music together is fun! It can build self-confidence, and build relationships between mums across boundaries of class, culture and language.
- Babies love music - hearing mum's voice and music stimulates positive interactions between mum and baby, and thus promotes healthy bonding. We also talked about Mum and baby "tuning in" to one another, using music and singing to build a sensitive, responsive relationship.

We felt the benefits of the above could be enormous, and tapped right into the SureStart agenda for caring for new mums and their babies in an innovative and culturally sensitive way.
Alda’s work was invaluable. She already knew lots of the new mums through her popular baby massage and breastfeeding support groups. From her and health visitor referrals we began to build a group, and in the seven weeks before the summer holidays we had seven women and their babies (and some toddlers too!) come each week for one hour to Acton Health Centre for "Mother Music". The group was an eclectic mix - we had mums who originated from Poland, Somalia, Mexico, and Afghanistan, as well as mums whose first language was English. We discovered that wherever you come from, being a mum is full of the same conflicting feelings of love, despair, worry, anger, guilt, tiredness, loneliness and back to love again. The mums shared their feelings, along with songs and lullabies from their own cultures, which was fantastic! The group always began with sharing time as everyone talked about their week, and how things were for them. This generally led into a discussion where the mums all helped each other with their experiences and advice - this could have gone on all day! We then moved into the music; I would play my guitar and the mums would hold the babies, singing well known and improvised songs with them. I encouraged eye contact, and asked mums to notice their baby - what he likes, what noises he makes, how he feels .......... this would then inevitably lead to more discussion. Sometimes mums would offer their own songs and music, picking up the instruments in the middle of our circle and sharing, for example, a wedding song from Afghanistan, or a lullaby from Poland. This felt very special - and seemed to me to be a very positive, enabling experience for these women who often feel de-skilled and isolated. We always finished with relaxation and breathing as I played my violin. I wanted the mums to hold their babies - often they were breastfeeding at this time - and have a moment of peace, closeness and reflection before getting back into the rush of daily life.

An anonymous questionnaire came back from the mums with comments such as: "Talking to other mums made me feel that I was not alone going through everything about a new baby" and "We gained a lot and my baby was so relaxed after the session....... he ... go to seep for hours when I take him home which was great".

Early intervention is vital - getting the mum/baby relationship back on track can mean all the difference to a child in terms of mental health, school achievement and his/her own healthy adult relationships. Helping mums to feel supported, positive and confident is therefore so important, not just for her and her baby but for future generations.
Conclusion and Future Evaluation

In 2005 Sure Start Acton has reached its full operational goals of sufficient reach of its catchment population and has achieved most of the national public service agreement targets as detailed in the first part of this report. The specific service evaluations which have been included show focussed achievements in health promotion work and successful interagency partnership working.

For 2006 the main focus of the evaluation will be on the short term outcomes of the Sure Start local programme and how the best features of the programme can be integrated into the mainstream Children’s Centre schedule. It is planned that an external evaluator will be employed to provide an impartial view of how Sure Start has impacted on families’ lives and what improvements can be seen in the children’s development. The results of this evaluation will feed into the delivery of services in conjunction with the Early Years Education Department.