



## **SURE START GLODWICK, ST MARY'S & HIGGINSHAW ANNUAL MONITORING AND EVALUATION REPORT**

**1<sup>st</sup> January 2005 – 31<sup>st</sup> December 2005**

### **1. INTRODUCTION**

Sure Start is a government funded programme set up to achieve significant and lasting improvements to the educational, health and emotional well being of children living in the programme areas. Sure Start Glodwick, St Mary's & Higginshaw is a round six programme and is the last (out of 4) in the Metropolitan Borough of Oldham. Demographically, the ward areas approximately\* hold a population of 12,317 and 29% of whom are under the age of 16. The community is ethnically diverse and highly mobile, having more than half the population from minority ethnic groups (41%). The challenge for the programme is to serve these families in ways that respond sensitively to the cultural, religious and ethnic needs of the whole community. (\*Note: the population data is only an estimate since the Sure Start catchment areas do not match exactly to ward boundary).

Oldham Primary Care Trust is the lead agency for two Sure Start programmes in the Metropolitan Borough of Oldham (Sure Start Werneth, Freehold & St John's and Sure Start Glodwick, St Mary's & Higginshaw). A review has taken place on service delivery plan and a staffing structure is put in place which will take the programme forward into a Children's Centre. The team is strongly focusing on and is working towards achieving outcomes from '*Every Child Matters, Change For Children*'. These outcomes are:

- Be Healthy
- Stay Safe
- Enjoy and Achieve
- Make A Positive Contribution
- Achieve Economic Well-Being

Apart from '*Every Child Matters, Change For Children*', the programme also work with a clear focus on '*Sure Start Objectives*' and '*National Service Framework*'.

## 2. THE IMPORTANCE OF MONITORING AND EVALUATION

Monitoring and evaluation are management tools or systems used to address the accountability concerns of stakeholders, give programme managers information on progress toward achieving stated targets and objectives, and to provide substantial evidence as the basis for any necessary mid-course correction in policies, programmes or projects. However, there are differences between monitoring and evaluation.

*Monitoring* is a continuous function that uses the systematic collection of data on specified indicators to provide management and the main stakeholders of an ongoing development intervention with indication of the extent of progress and achievement of objectives and progress in the use of allocated funds.

*Evaluation* is the systematic and objective assessment of an ongoing or completed programme or policy, including its design, implementation and results. The aim is to determine the relevance and fulfilment of objectives, development efficiency, effectiveness, impact and sustainability. An evaluation should provide information that is credible and useful, enabling the incorporation of lessons learned into the decision-making process and future development.

### 2.1 Why Evaluation Is Important?

All Sure Start Local Programmes are required to conduct a local evaluation of their services from Sure Start Unit as an integral part of programme development and management. Hence, evaluation on services of a programme is essential so that local programmes could demonstrate and provide evidence of what works and what does not work to Sure Start Unit on various aspects, for instance:

- How well services are performing
- Building an evidence base of which aspects of services work well and which do not
- Is the programme achieving the targets and outcomes from *'Every Child Matters, Change For Children'*
- Developing an effective evidence base
- Effective decision making, such as allocation of resources
- Accountability for resources used
- Reshaping and planning improvement
- Delivering better services

Evaluation, and particularly outcome evaluation, therefore validates the programme's inputs and activities by linking them to specific outcomes and impacts.

## 2.2 Monitoring & Evaluation Aims:

- To account to the community and Sure Start Unit for the way in which Sure Start grants are used and programmes implemented on their behalf, and to help ensure that this is done in an efficient and effective way.
- To inform the development of the programmes at management, service and partnership board levels.
- To assist the programmes in tracking their progress towards 'Every Child Matters' targets and outcomes.
- To work within, and actively promote, the principles of Sure Start.

## 3. MONITORING AND EVALUATION METHODOLOGY

Monitoring or statistical output data will only make sense if targets and outcomes are associated with such a record of programme productivity, and outcomes will only be meaningful if they are presented in the context of activities and outputs. For Sure Start local programmes, outcomes are impacts or changes in the people the programme comes into contact with. Therefore, evaluation especially outcome evaluation should validate the programme's activities by linking them to specific targets and outcomes, namely 'Every Child Matters – Outcomes Framework'.

Outcome evaluation is more of an approach than a particular method, since it relies upon such a wide range of data collection techniques, both quantitative and qualitative. The quantitative evaluation is to measure and monitor the productivity of the programme. This often relies on collecting and reporting reach data such as attendance at activities, number of families reached and the number of new contacts compared to existing contacts over a certain time period. On the other hand, the qualitative evaluation asks questions about what has changed as a result of the programme and its activities. Hence, outcomes will be an integral part of demonstrating the value of a service, activity or programme. Due to the nature of Sure Start local programme, it is difficult to demonstrate long-term outcomes within short period of time. Thus, various methods will be used to measure 'soft' outcomes from families that will lead to long-term outcomes in a given timescale.

The methods for measuring 'soft' outcomes include examination and analysis of monitoring data (activity records and participation rates); the use of observation (both observing group activities and observing participants by staff) to detect changes in behaviour and development of parents/carers and children; feedback and comments from families and a number of specific case studies. All the information collected by different methods will be brought together based on 'Every Child Matters – Outcomes Framework'.

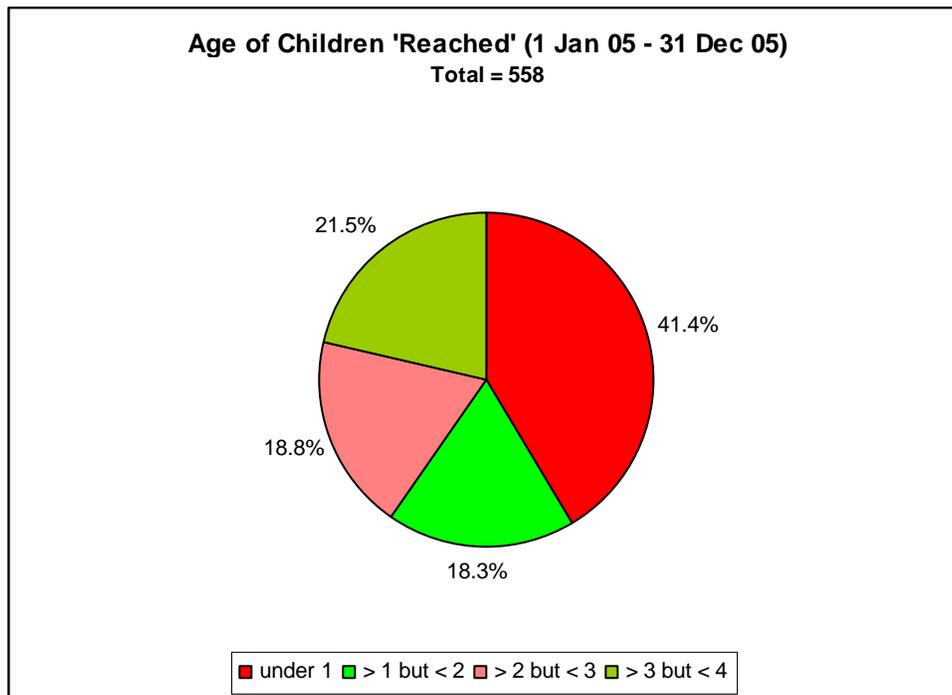
#### 4. REGISTRATION AND FAMILIES 'REACHED'

By 31<sup>st</sup> December 2005, the programme has registered **869 Families** (595 Within Area – **68.5 %**), **815 Parents/Carers** (589 Within Area – **72.3%**) and **1118 Children** (818 Within Area – **73.2%**). From 1<sup>st</sup> January 2005 to 31<sup>st</sup> December 2005, the team has 'reached' or contacted **558** children aged 4 or under and **510** parents/carers within **502** families. In other words, for the past 12 months, the programme has managed to engage with **62.6% (510 out of 815)** of parents/carers and **49.9% (558 out of 1118)** of children who are registered and on the programme's database since the programme started.

	Parent/Carer	Child
<b>Total Registration</b>	815	1118
<b>'Reached' between 1<sup>st</sup> Jan 2005 and 31<sup>st</sup> Dec 2005</b>	510	558
<b>% Reached for the past 12 months</b>	<b>62.6%</b>	<b>49.9%</b>

In terms of the age of the **558** children 'reached', **231** were under 1, **102** were over 1 but under 2, **105** were over 2 but under 3 and **120** were over 3 but under 4. Out of the total number of 558 children reached, **9** are disabled children or children with additional needs.

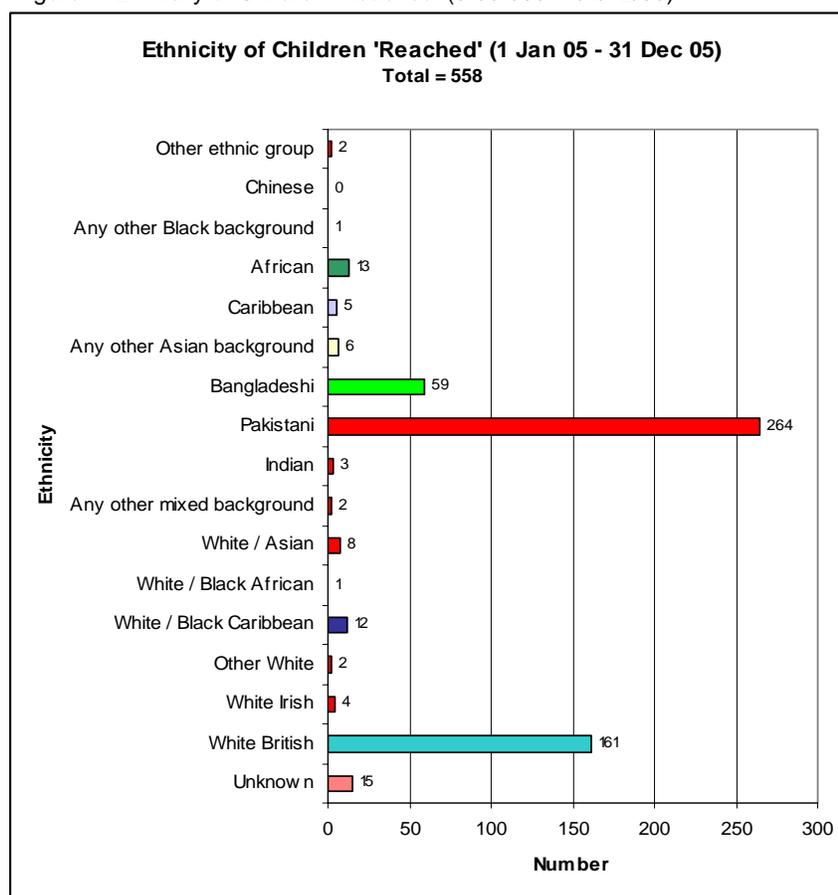
Pie Chart 1: Age of Children 'Reached' (01/01/05 – 31/12/05)



The ethnicity profile of children 'reached' for the past 12 months is as follow:

Ethnicity	Total No. of Children Registered	Total No. of Children 'Reached' for the past 12 months	% 'Reached' for the past 12 months
White British (WB)	292	161	55.1%
Irish (I)	7	4	57.1%
Other White (OW)	3	2	66.7%
White/Black Caribbean (W/BC)	23	12	52.2%
White/Black African (W/BA)	3	1	33.3%
White/Asian (WA)	15	8	53.3%
Other Mixed Background (OMB)	4	2	50.0%
Indian (IN)	7	3	42.9%
Pakistani (PA)	514	264	51.4%
Bangladeshi (BA)	130	59	45.4%
Other Asian Background (OAB)	9	6	66.7%
Caribbean (CA)	11	5	45.5%
African (AF)	17	13	76.5%
Other Black Background (OBB)	4	1	25.0%
Chinese (C)	0	0	0.0%
Other Ethnic Group (OEG)	4	2	50.0%
Unknown (UN)	75	15	20.0%
<b>Total</b>	<b>1118</b>	<b>558</b>	<b>49.9%</b>

Figure 1: Ethnicity of Children 'Reached' (01/01/05 – 31/12/05)

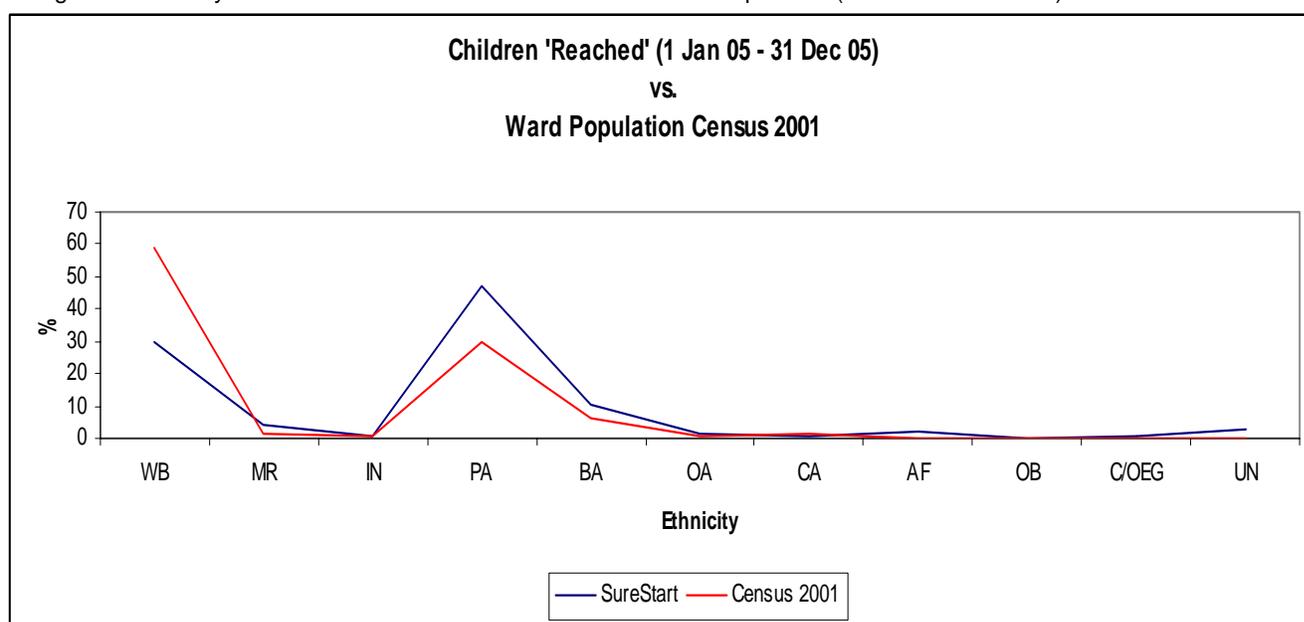


The mapping of the ethnicity of children 'reached' (1<sup>st</sup> January 2005 – 31<sup>st</sup> December 2005) against the Census 2001 ward population is as below:

Ethnicity	Total No. of Children 'Reached' for the past 12 months	% of Ethnicity of Children 'Reached'	Census 2001 Ward Population (%)
White or White Irish (WB)	167	29.9	58.9
Mixed Race (MR)	23	4.1	1.7
Indian (IN)	3	0.5	0.6
Pakistani (PA)	264	47.3	30.0
Bangladeshi (BA)	59	10.6	6.0
Other Asian (OA)	6	1.1	1.0
Caribbean (CA)	5	0.9	1.2
African (AF)	13	2.3	0.1
Other Black (OB)	1	0.2	0.1
Chinese or Other Ethnic Group (C/OEG)	2	0.4	0.3
Unknown (UN)	15	2.7	0.1
<b>Total</b>	<b>558</b>	<b>100.0%</b>	<b>100.0%</b>

From the mapping, the statistics have indicated that the ethnicity profile of children 'reached' (1<sup>st</sup> January 2005 – 31<sup>st</sup> December 2005) matched quite well with the ward population profile except the group 'White or White Irish'. There is still a big gap in reaching the 'White or White Irish' parents and children within the Sure Start area. More outreach needs to be planned and carried out within the St Mary's and Higginshaw areas in order to engage more 'White or White Irish' parents. On the other hand, the programme seems to have engaged with the 'Pakistani' community very successfully. This could be due to the fact that most activities/events were carried out in the Glodwick area where the majority of the community are Pakistani.

Figure 2: Ethnicity of Children 'Reached' vs. Census 2001 Ward Population (01/01/05 – 31/12/05)



## 5. Core Services

The programme has various models of delivery depending on children's age, developmental stage and social or emotional needs. The path of service delivery is in a continuum with a range of services from a single general contact, dissemination of information through one off events, regular activities, structured programmes to even intensive family/home support.

Hence, the starting point for a family to engage with the programme could be by receiving information on activities and events, and then started attending various activities, seeking further help, receiving intensive family/home support, or even been referred to other courses, training or care packages from other agencies.

Since working with families requires a holistic approach with overlapping services, in the second year of its full operation, Sure Start Glodwick, St Mary's & Higginshaw has initiated and delivered a breadth of Core Services. The core service is defined by the Sure Start unit as working '***with parents and parents to be to improve children's life chances through better access to: Family Support, Advice on nurturing, Health services and Early Learning***' for families with children 0 – 4 within a defined geographical area' (Sure Start Website.)

The Core Services are: *Supported Opportunities for Play and Learning, Support for Families, Capacity Building and Health Promotion*. Day-to-day monitoring of 'Staff General Contact' has also been analysed to demonstrate the target of **Stay Safe and Improved Access to Services, Advice & Guidance**.

Activities/events that have been organised and delivered under these Core Services for the past 12 months are as follow:

Table 1: Activities/Events for the past 12 months under different Core Services

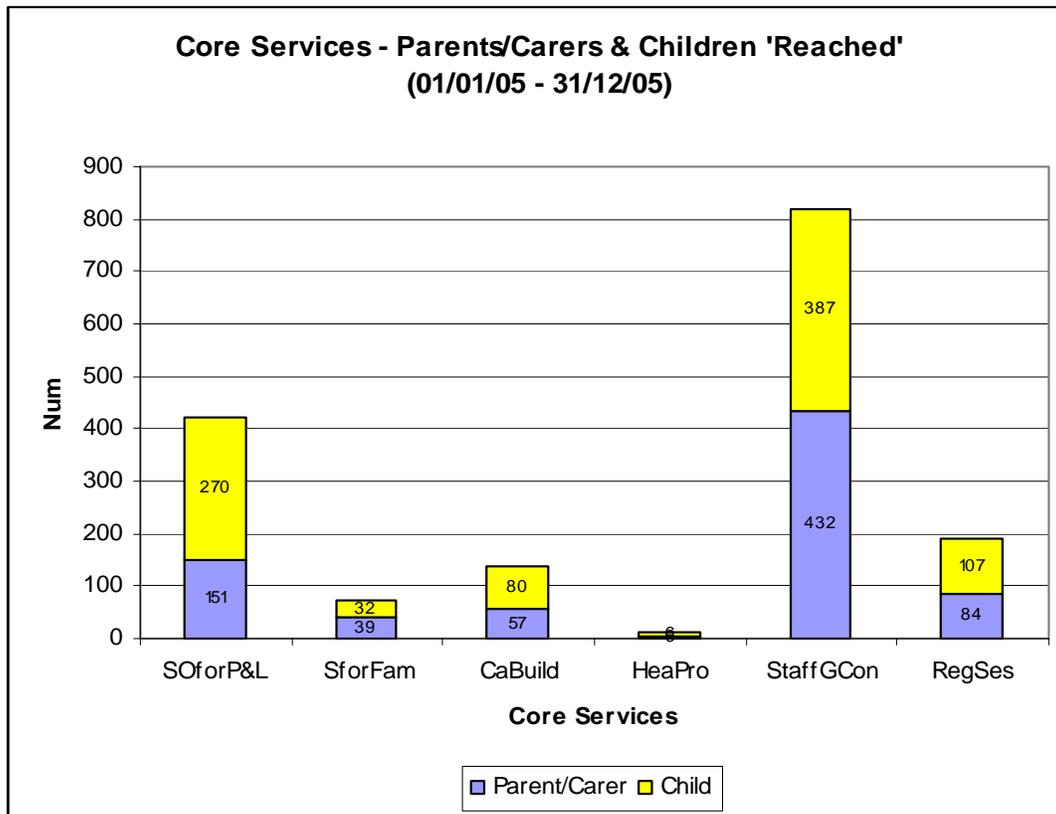
<b>Supported Opportunities for Play &amp; Learning</b>	
Play & Stay / Sessional Activity	<i>Play &amp; Stay (Monday Munsters)</i> <i>Play &amp; Stay (Mother &amp; Toddler Group)</i> <i>Squirrels Crèche</i> <i>Supporting Crèche for Webster-Stratton</i> <i>Drop In Crèche</i> <i>Drop and Shop</i> <i>Crèche for Volunteer Meeting</i> <i>Survival Skills Crèche</i>
Preschool	<i>Little and Larger Preschool</i> <i>Park View Preschool</i> <i>Tiny Tots Preschool</i>
Toy / Book Loan	<i>Toy and Book Loan</i> <i>Toy Library</i>
Play & Learning	<i>Christmas Party</i> <i>Play and Tumble</i> <i>Teddy Bear's Picnic</i> <i>Visit to Play Oldham Ltd.</i> <i>Bring &amp; Share</i>
Physical Activity	<i>Music and Movement</i> <i>Swim and Splash</i> <i>Toddler Gym</i>
Early Development	<i>Baby Babble</i> <i>Baby Fun</i>
<b>Support for Families</b>	
Family / Home Support	<i>Intensive Family / Home Support</i>
Parenting & Behavioural Management	<i>Webster-Stratton</i> <i>Pathways To Parenting</i>
<b>Capacity Building</b>	
Community Capacity Building	<i>Information and Pampering Session</i> <i>Key To The Door (TOYS &amp; Little TOYS)</i> <i>Parent Volunteers Meeting</i> <i>Women's Event</i>
Community Forum/Group	<i>Men Behaving Dadly</i> <i>Parents Forum</i> <i>Parents Group</i>
<b>Health Promotion</b>	
Health Promotion	<i>One-to-One Weaning Visit</i>
<b>Specialist Services</b>	
Antenatal/Postnatal	<i>Antenatal / Postnatal Drop In</i> <i>Breast Feeding Peer Support</i> <i>Oldham Postnatal Infant Attachment Project (OPIA)</i>
<b>Staff General Contact</b>	
Staff General Contact	<i>See next section</i>
<b>Improved Access to Services, Advice &amp; Guidance</b>	
Improved Access to Services, Advice & Guidance	<i>See 'Staff General Contact'</i>

Table 2: Summary for Core Services, Parents/Carers and Children 'Reached' for the past 12 months

Core Services	No. of Activity/Event	Parents/Carers Reached	Children Reached
<b>1. Supported Opportunities for Play &amp; Learning</b>	<b>22</b>	<b>151</b>	<b>270</b>
1a. Play & Stay / Sessional Activity	8	84	128
1b. Preschool	3	~	114
1c. Toy / Book Loan	2	40	48
1d. Play and Learning	4	63	82
1e. Physical Activity	3	40	48
1f. Early Development	2	7	9
<b>2. Support for Families</b>	~	<b>39</b>	<b>32</b>
2a. Intensive Family / Home Support	N/A	29	32
2b. Parenting and Behavioural Management	2	13	~
<b>3. Capacity Building</b>	<b>9</b>	<b>57</b>	<b>80</b>
3a. Community Capacity Building	6	43	54
3b. Community Forum/Group	3	30	35
<b>4. Health Promotion</b>	N/A	<b>6</b>	<b>6</b>
<b>5. Specialist Services</b>	~	~	~
5a. Antenatal / Postnatal	2	11	8
5b. OPIA	*Separate Analysis	*Separate Analysis	*Separate Analysis
<b>6. Registration Session</b>	<b>11</b>	<b>84</b>	<b>107</b>
<b>7. Staff General Contact</b>	~	<b>432</b>	<b>387</b>

Note: The number of Parents/Carers and Children reached under different types of activities/events do not add up to the total of the Core Services because a same family might attend different activities/events at the same time.

Figure 3: Parents/Carers and Children 'Reached' under different Core Services



[SOforP&L = Supported Opportunities for Play & Learning; SforFam = Support for Families; CaBuild = Capacity Building; HeaPro = Health Promotion; StaffGCon = Staff General Contact; RegSes = Registration session]

## Core Service – Chapter One Supported Opportunities for Play and Learning

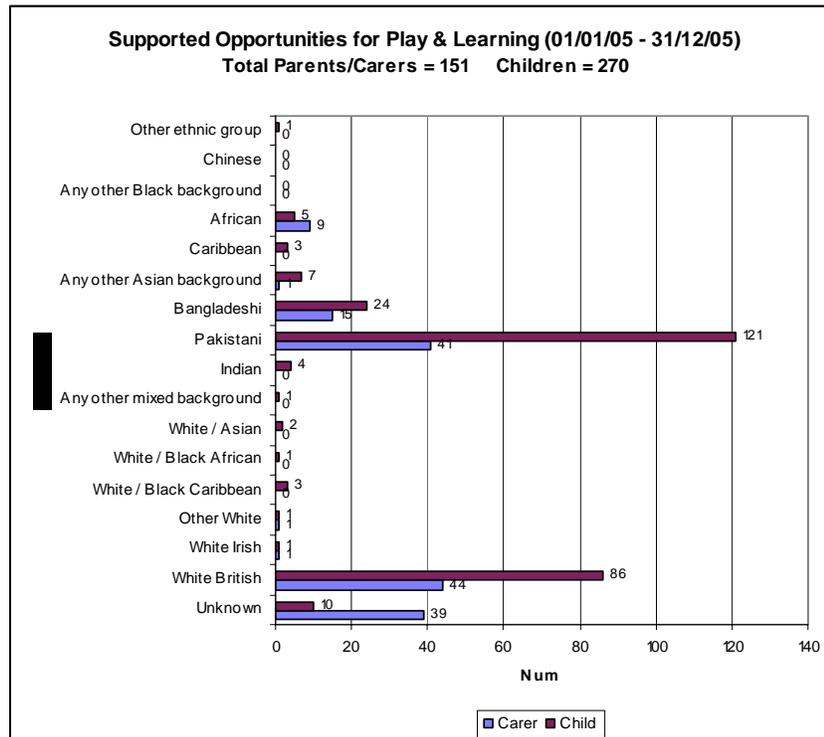
### Activities

The rationale behind **Supported Opportunities for Play and Learning** is to provide a range of activities/events with appropriate materials and timescales in order to promote and support children’s academic, social and emotional development. The types of activities/events within the core service are Play & Stay / Sessional Activity, Preschool, Toy / Book Loan, Play and Learning, and Physical Activity.

### Outputs – Monitoring

For the past 12 months, **22** activities/events under the core service of **Supported Opportunities for Play and Learning** had been organised or delivered to families living within the area. Out of **22** activities/events, **4** are one-off-events while the rest of the **18** are either long-term regular activities or short-term rolling programme of structured activities. Through the **22** activities/events, the programme has managed to engaged with **151** parents/carers and **270** children within the Glodwick, St Mary’s & Higginshaw area. For names of activities/events please refer to Table 1 and Table 2.

Figure 4: Ethnicity Profile - Supported Opportunities for Play & Learning



## Outcomes : Qualitative Evaluative Evidence

### Every Child Matters – Outcomes Framework

#### **Target 1: Be Healthy**

##### i) ECM Inspection Judgements/Evidence:

***“Parents and carers receive support to keep their children healthy”.***

Through activities/events from Supported Opportunities for Play and Learning, one of the actions is to provide information, advice and guidance on infant's/child's general health, attachment, feeding practices, nutrition & diet and smoking cessation (both antenatally and postnatally) in order to support parents or parents-to-be to keep their children healthy. Opportunities were also provided for parents to get to know their child's general health development. Evidence that had been collected is as followed:

##### Health Advice and Knowledge

Dental health worker has joined the sessions and provided advice and information for number mothers on children's dental care. (2 occasions)

Health visitor gave information on bottle feeding and weaning to those mothers who requested advice in Play and Stay.

Staff has facilitated discussion among parents on sleep routine, weaning and making their baby more relaxed.

4 children with different feeding needs were benefited from the weaning session.

A mum commented that the group has given her opportunity to get to know her own baby's health.

*“...getting to know what my baby likes.”*

*“...my baby seems relaxed.”*

*“My baby is sleeping better.”*

*“I've learnt useful techniques to get my baby sleep at night time”.*

*“I've learnt how to relax my baby and wind her down gently for bed”.*

##### ii) ECM Inspection Judgements/Evidence:

***“Action is taken to promote children and young people's physical health”.***

Various physical activities such as Music and Movement, Swim and Splash and Toddler Gym had been delivered to promote exercise and to encourage the development of children's physical health. These activities have benefited 40 parents/carers and 48 children. The evidence that has been collected regarding children's general physical development is as followed:

### The Development of Limbs and Body Movement

As a result of soft play toys, a few mums commented that the sessions have enabled their babies to improve their crawling.

Staff observed that children were balancing, climbing, sliding and rolling everywhere enjoying themselves in the session.

Staff observed that younger children were crawling around and exploring the physical environment.

Staff observed that children were climbing, balancing and jumping confidently.

A few mums commented that children were enjoying the swim.

Staff observed that children were dancing and moving smoothly with the music.

*"He loves to be in the water."*

*"He has never been swimming before and he is getting confident."*

### iii) ECM Inspection Judgements/Evidence:

#### ***"Action is taken to promote children and young people's mental health".***

Young children's or infant's social and emotional well-being are very important for their mental health. Hence, promoting interaction and bonding between parents and children has always been a crucial element within all activities/events delivered by the programme. The evidence of such action being promoted is as below:

#### Improved Relationship and Interaction Between Parents and Children

Staff observed increased interaction between parents and children in the sessions. (3 observations)

Parents and children were engaging constantly with eye contacts, smiles and gestures.

Staff observed that parents enjoyed playing with children and children enjoyed the attention from their parents in the activities. (5 observations)

A mother commented that she enjoyed spending quality time with her baby.

Staff observed that parents and babies were interacting, parents entertained their babies and encouraged their responses.

A few parents commented that they enjoyed sitting down at snack time with their children together and have a good time.

Staff observed that mum and baby were giving each other eye contact and smile.

A baby was responding to eye to eye contact with her mother and talking to her mother by kicking her legs, moving her arms and making noises.

*"I feel the closeness to my baby."*

*"I feel the bonding at evening whilst doing massage."*  
*"I'm feeling that I'm close to my baby and bonding more."*  
*"I feel like I'm bonding more with my baby by massaging her".*

iv) ECM Inspection Judgements/Evidence:

***"Healthy lifestyles are promoted for children and young people".***

Healthy lifestyles and health promotion have always been integrated in all activities/events as one of the main focuses. For instance, healthy food or healthy snacks was always provided in all activities/events in order to promote healthy eating. Information and advice on healthy lifestyles were also disseminated or provided on a regular basis.

Healthy Foods/Snacks

Parents commented that there is positive impact at home (since the sessions introduced healthy snacks) as children ask for fruits instead of sweets. (2 occasions)

A few parents commented that the healthy snacks provided during the activity have given them ideas as to what to cook at home as an alternative.

'5-A-Day' was promoted by staff and mums have great interests.

A few mums commented that their knowledge of healthy eating has improved after the session.

Since healthy snacks were promoted in the sessions, a few mums have carried on the healthy snacks at home. (3 occasions)

Healthy snacks were introduced and both parents and children were enjoying them. (3 observations)

Healthy food was provided and both parents and children were enjoying it.

A group of parents have been given advice on nutrition, healthy eating, '5 A Day' and recipes for fruit smoothies. (2 occasions)

One parent said her child didn't like fresh fruits but now he enjoys eating them at home since the activity has introduced fresh fruits to him.

Staff observed that mothers and young children were enjoying the healthy fresh fruits and juices. (4 observations)

Staff observed that children were resistant to moist food initially but after a few sessions they were enjoying it (ie.custard).

v) ECM Inspection Judgements/Evidence:

***“Children and young people have access to an appropriate range of support if they feel troubled”.***

For the past 12 months, the programme has signposted/referred parents/carers and children to different agencies, services or activities on **177** different occasions. The efficient signposting/referral system of the programme has ensured that families have access to a range of support suitable for them. Out of the **177** signposting incidents, **30 (17%)** are signposting to Preschools/Schools, **29 (16%)** are internal signposting from one activity to another activity, **26 (15%)** are to Education or Training Institutes and **12 (7%)** to Health Services. Some qualitative comments collected from parents/carers are as below:

Some Examples of Signposting

One new parent wanted to be registered with Sure Start after attending an open event.

One parent was signposted to family/home support for behavioural management.

With arrangement and signposting by staff, a few parents were managed to visit other Sure Start Local Programmes.

A child with behavioural issues has been signposted to family/home support.

One parent was signposted to Baby Club.

Extra support is provided for parents who have difficulty speaking English through signposting by staff.

### **Target 3: Enjoy and Achieve**

Various Play and Learning opportunities, either one-off events or regular activities, have been organised for young children and their parents in the area to play, learn and enjoy. For the past 12 months, 12 activities/events (either regular or one-off) have been delivered within the area and these activities/events have managed to engage 84 children and 128 parents/carers. The evidence collected on Enjoy and Achieve is as followed:

i) ECM Inspection Judgements/Evidence:

***“Parents and carers receive support in helping their children to enjoy and achieve”.***

Through play activities such as Play and Stay, parents have the opportunities to acquire skills and knowledge and receive support in helping their children play and enjoy themselves. Below are some examples:

Enhanced Knowledge of Parents on Play

Parents have actively encouraged children to play and share with other children.

A mum commented that the sessions had given her ideas of what to do or how to play with her baby.

A mum commented that she has learnt how to role model in play with her children.

ii) ECM Inspection Judgements/Evidence:

***“Early Years provision promotes children’s development and well-being and helps them meet early learning goals”.***

Apart from helping parents/carers to acquire knowledge on how to play with their children, activities/events from Play and Learning also aimed at providing a supported environment for children to play, learn and socialize with other children to build up their confidence and to support their transition through different ages or developmental stages to ensure they meet early learning goals.

Gaining Confidence and Learn To Play

Staff observed that children were enjoying playing with sand pit, sharing and interacting and talking to each other.

A few mothers commented that the social skills of their children have improved and they are more confident when interacting with other children.

Staff observed that children enjoyed playing with each other confidently without the presence of their parents.

Children were showing what they have achieved: *“Look at me!”*

Staff observed that children were able to play and learn in a safe environment. (2 observations)

Children were encouraged to play alone as well as being co-operative by staff.

A mum commented that her child has become less shy and has participated more in the music session.

A very shy child has begun to play with other children after coming for a few sessions.

Staff observed that young babies and toddlers have become more confident and more verbal in the sessions.

A child has developed his confidence to 'have a go' in the play session without assistance from his parent.

Staff observed that older children were 'negotiating' their activities in the play area independently.

A parent commented: "My son enjoys coming to the toy library and play with the toys and he's not that shy anymore!"

"I am not scared now."

"I can go down the slide by myself."

"He is getting a lot braver."

"He is able to let off steam here."

iii) ECM Inspection Judgements/Evidence:

**"All children and young people can access a range of recreational activities, including play and voluntary learning provision".**

As well as helping children to meet their early learning goals, different one-off recreational events were also provided for children to play and enjoy. During those events, the qualitative observations and comments that were collected are as followed:

Enjoying and Playing

Staff observed that a few children have expressed delight in the water with beaming faces. (2 observations)

A few mums commented that their children enjoyed the role play and music.

A 4 years old child said: "We've had fun today, haven't we?"

iv) ECM Inspection Judgements/Evidence:

**"Ready for school".**

Apart from promoting play and providing opportunities for children to enjoy themselves, most activities/events were also designed to encourage and promote children's language development so that they will be ready for school. Evidence on two major objectives 'the development of vocabulary and conversation' and 'the encouragement of reading' was collected as below:

The Development of Vocabulary and Conversation

Staff observed that mothers were talking more to their children and also observed that there was more utterance of short sentences from children after a period of attending the sessions.

Staff observed that parents have used a lot of words and praises to encourage children's conversation.

One child sang a whole song confidently with big smiles on his face.

The activity equipment has encouraged children's use of language, such as children were using the equipment to make up stories.

Staff observed that children were enjoying the story sessions and talking about the puppets and treasure boxes.

One parent mentioned that her little girl didn't know the words of the song 'Wheels On The Bus' when she first started the gym but now she is singing the song at home.

Parents were encouraging children to explore their use of words and language through singing. (2 observations)

A 2 years old little girl were singing clearly "twinkle little star" & "baa baa black sheep."

A boy took initiative and requested songs to sing and instruments to play.

*"I'm very pleased with my little boys talking."*

*"My child could not talk, now he's saying words."*

#### The Encouragement of Reading and Writing

A mother commented that after the activity her children also like to 'draw and write' at home.

A few mums commented that both themselves and their children were impressed with the free books.

A few parents commented that regular play sessions have been developed at home due to the availability of toys and books.

A parent commented: *"I think book loan is a good idea for my child because my child reminds me to read his book at bed time."*

*"She enjoys sitting down and looking at books."*

### **Target 4 : Make A Positive Contribution**

#### **i) ECM Inspection Judgements/Evidence: "Voluntary and Community Engagement".**

In order to promote community engagement and to reduce isolation among parents/carers within the area, numerous opportunities were provided for parents/carers to share experiences, to build support networks and to promote community cohesion.

Parents Sharing Experiences and Giving Advice to Each Other

Staff observed that parents enjoyed the opportunity to meet other parents and share their experiences. (3 observations)

Two parents in the group were exchanging tips on establishing sleep routine and offering supportive comments to each other.

Staff observed that parents were sharing their experiences with other parents and staff. (4 observations)

Reduced Isolation

A mother said she enjoyed getting out of the house and meet other parents.

Mothers commented they enjoyed getting out and meeting each other and chatting away. (3 occasions)

Parents commented they enjoyed meeting new mums. (5 occasions)

One mum commented that she enjoyed the group because it gave her a chance to talk to other mums.

One mum commented that she really enjoyed the friendly atmosphere and talking to other mums.

A mum commented that she really enjoyed the service provided: *"It's great to have two hours peace without my son and daughter"*.

*"I enjoy coming to toy library with my son, enjoy helping choosing a book and meeting other parents."*

Community Cohesion

Some parents from Glodwick had never been to St Mary's before but now they have the opportunity to mingle with parents there.

One parent from Glodwick commented that it's nice to meet with other mums from St Mary's and described them as 'nice and friendly'.

iii) ECM Inspection Judgements/Evidence:

***"Engage in decision making and support the community and environment"***.

Apart from focusing on children's development, the programme also aimed at engaging the community in the decision making process so that they will have a voice in how to safeguard their children's well-being. Various opportunities have been provided for parents/carers to get involved in planning and service delivery of the programme.

Involvement in Service Delivery

Parents have acquired the skills to organise events such as planning, publicising and carrying out risk assessment.

Parents were facilitating, leading and managing the day trip event.  
Parents have become trained volunteers who are able to organise and deliver an event. (2 day trips been organised)  
Parents commented that they feel more involved.

iv) ECM Inspection Judgements/Evidence:

***“Children and young people are supported in developing socially and emotionally”.***

Children’s social and emotional skills are also key focuses of programme’s activities or events. Interaction and communication are actively encouraged during activities among children to ensure their social and emotional development.

Socializing With Other Children

Children were playing together, socialising and using spontaneous language in the session. (3 observations)

Staff observed that children were playing and interacting with each other.

Staff observed that children were laughing and playing with each other with smiling faces.

Some older children were assisting younger children to play in the play session.

v) ECM Inspection Judgements/Evidence:

***“Children and young people, particularly those from vulnerable groups, are supported in managing changes and responding to challenges in their lives”.***

Children with behavioural issues have been successfully managing their behavioural changes through support on parenting and advice on behavioural management provided by staffs to parents/carers during activities or events. Evidence is recorded as follow:

Parents Have Acquired Knowledge and Skills on Behavioural Management

Advice on behavioural management and toilet training has been given to a parent by a staff.

Parents were playing with their children using appropriate language and praise tactics.

Advice has been given to a child who has behavioural issues.

### **Target 5: Achieve Economic Well-Being**

i) ECM Inspection Judgements/Evidence:

***“Action is taken by partners to support families in maximizing their economic well-being”.***

By using capacity building approach, the programme also provided families various opportunities on education, training and employment through activities or events.

#### Education, Training and Employment Opportunities

Five mothers have been signposted and been recruited to Key To The Door TOYS course (a social/educational skills training course for young parents under 21).

One parent has been signposted to English classes.

Two parents have been signposted to R2E (employment agency).

## Core Service – Chapter Two Support For Families

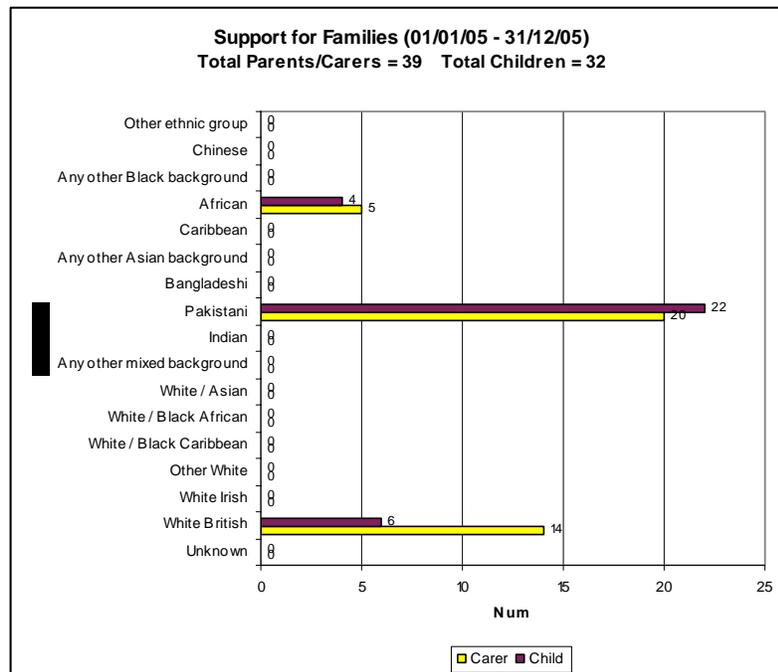
### Activities

There are two main services from ‘Support For Families’ which are providing parenting courses such as Pathways to Parenting and Survival Skills (Webster Stratton) and one-to-one intensive family/home support. The recruitment for parenting courses came from referrals within Sure Start, from health visitors, parenting coordinator within the area and social services. On the other hand, one-to-one intensive family/home support is provided for families who are experiencing difficulty in managing their children or who are concerned about their children’s general health, behavioural and learning development. The intensive family/home support may extend to step up or step down support for families at risk of referral to Social Services or families who have previously been with Social Services.

### Outputs – Monitoring

From 1<sup>st</sup> January 2005 to 31<sup>st</sup> December 2005, staffs have set up **34** family case files and have provided intensive family/home support to **34 parents/carers** and **32 children**. The majority of family cases are about language development delay, behavioural management, social and emotional support and refugees and asylum seekers. Through ‘Pathways to Parenting’ and ‘Webster Stratton’, **13 parents/carers** have also gained benefit and skills in parenting that have significantly improved their relationships with their children.

Figure 5: Ethnicity Profile: Support for Families



## Outcomes : Qualitative Evaluative Evidence

### Every Child Matters – Outcomes Framework

#### **Target 1: Be Healthy**

##### i) ECM Inspection Judgements/Evidence:

***“Parents and carers receive support to keep their children healthy”.***

Through family/home support, one of the actions is to provide information, advice and guidance on infant’s/child’s general health, attachment, feeding practices, nutrition & diet and smoking cessation in order to support parents to keep their children healthy. Opportunities were also provided for parents to get to know their child’s general health development. Evidence that had been collected is as followed:

2 babies have received weaning advice from staff during the family/home support session.

2 parents received advice on feeding through family/home.

2 parents have received one-to-one behavioural and health advice from staff during parenting course.

One isolated mum was depressed and might be at risk of PND, staff has signposted her to health visitor during family/home support session.

*“This parenting course helped me to learn about my children.”*

*“The parenting course has given me knowledge and understanding of how to bring my child up.”*

##### iii) ECM Inspection Judgements/Evidence:

***“Action is taken to promote children and young people’s mental health”.***

Young children’s or infant’s social and emotional well-being are very important for their mental health. Hence, promoting interaction and bonding between parents and children has always been a crucial element within family/home support. The evidence of such action being promoted is as below:

#### Improved Relationship and Interaction Between Parents and Children

Staff observed that the mother is able to interact with her child more effectively after a few sessions of family/home support.

Staff observed that both the mother and the child have smiled a lot since the family/home support started.

A mother and her child are interacting better without shouting after the mother started the parenting course.

2 mums learned more ideas on how to communicate with their children through Pathways to Parenting.  
*"Mummy, you're a lovely lady."*

ii) ECM Inspection Judgements/Evidence:

***"Children and young people have access to an appropriate range of support if they feel troubled".***

Through intensive family/home support, a few parents have been signposted to other appropriate services that meet their complex needs.

For full statistics on signposting and referrals please refer to page 14.

Some Examples:

1 child with development delay was signposted to specialist service.

2 parents with young children were signposted to dentist.

A child has been signposted to preschool.

Family/home support on language development has been provided to a boy.

Staff has supported a mum to access other health services for her own health problems and her child's general health problems.

A boy was provided funding to attend preschool 5 days per week.

iv) ECM Inspection Judgements/Evidence:

***"Healthy lifestyles are promoted for children and young people".***

Healthy lifestyles and health promotion have always been integrated in all activities/events as one of the main focuses. For instance, healthy food or healthy snacks was always provided in all training courses in order to promote healthy eating. Information and advice on healthy lifestyles were also disseminated or provided on a regular basis through family/home support.

Healthy Foods/Snacks

5-A-Day has been introduced during the parenting training session and the awareness of vitamin D deficiency and sun care have also been given.

Since the family/home support started, the mum has the motivation to attend exercise classes and go on a healthy diet.

## Target 2: Stay Safe

i) ECM Inspection Judgements/Evidence:  
***“Safe from accidental injury and death”.***

A home safety session was provided to parents and they commented it was very useful.

Funding was provided to purchase 6 safety gates for 6 families with young babies.

## Target 3: Enjoy and Achieve

i) ECM Inspection Judgements/Evidence:  
***“Early years provision promotes children’s development and well-being and helps them meet early learning goals”.***

During intensive family/home support, part of the support care package is to stimulate and promote children’s playing skills and their confidence to ensure they will be equipped with appropriate personal and social competence that will enable them to meet early learning goals. Some examples of evidence collected were as below:

Gaining Confidence and Learn To Play

Staff observed that children were able to play and share with other children in the crèche.

A girl has managed to play and socialise with other children after receiving support from behavioural management and play programme through family/home support.

A child with behavioural issues has become more sociable and able to play and share toys with siblings and other children after a short period of family/home support.

ii) ECM Inspection Judgements/Evidence:  
***“Ready For School”.***

For those who have language development delay, the focus of the family/home support will be promoting and stimulating appropriate language development through play.

### The Development of Vocabulary and Conversation

A child with development delay has started to vocalize sounds of animals from books.

A child with development delay loves to look at books now and try to learn the words from the books, and she is also using more vocabulary on colours and shapes.

A child's language and social skills have improved massively since funding was provided for day care and extra family/home support.

After family/home support was provided for language development, the mother commented : *"Oh, he's trying to speak, he's really trying to speak!"*

## **Target 4: Make A Positive Contribution**

### **i) ECM Inspection Judgements/Evidence:**

***"Children and young people, particularly those from vulnerable groups, are supported in managing changes and responding to challenges in their lives".***

Through intensive family/home support and parenting courses, specific behavioural strategies or behavioural management programmes have been provided to parents/carers to support their children's changes in behaviour.

### Change of Behaviour (Child)

The child's behaviour has improved a lot after support from behavioural management.

Staff observed that the behaviour of a child has improved a lot since started the day care and behavioural management.

### Parents Have Acquired Knowledge and Skills on Behavioural Management

A mother commented that she found it much easier to manage her child's behaviour after behavioural management support.

A father has learnt to interact with his child better without shouting at him and mother has engaged with the child more by using praise strategies a lot.

A mum has adopted a sticker chart strategy to encourage her 6 years old son to eat vegetable with great success.

*"The children listen to me more."*

*"My boys go to bed when asked."*

*"I feel more confident and happy to manage my children's behaviour."*

*"My children wrote the house rules they thought I would want."*

*"I have learnt how to control my children's behaviour and my temper when they play up".*

*"I know how to manage my child's temper and how to control her activities in a calm situation".*

*"I've learnt to really listen to my children".*

*"I'm more positive and confident than I was before this course and spend more quality time with my child".*

*"I've learnt the importance of listening and talking to children, which I've tried and made my daughter happier".*

## Core Service – Chapter Three Capacity Building

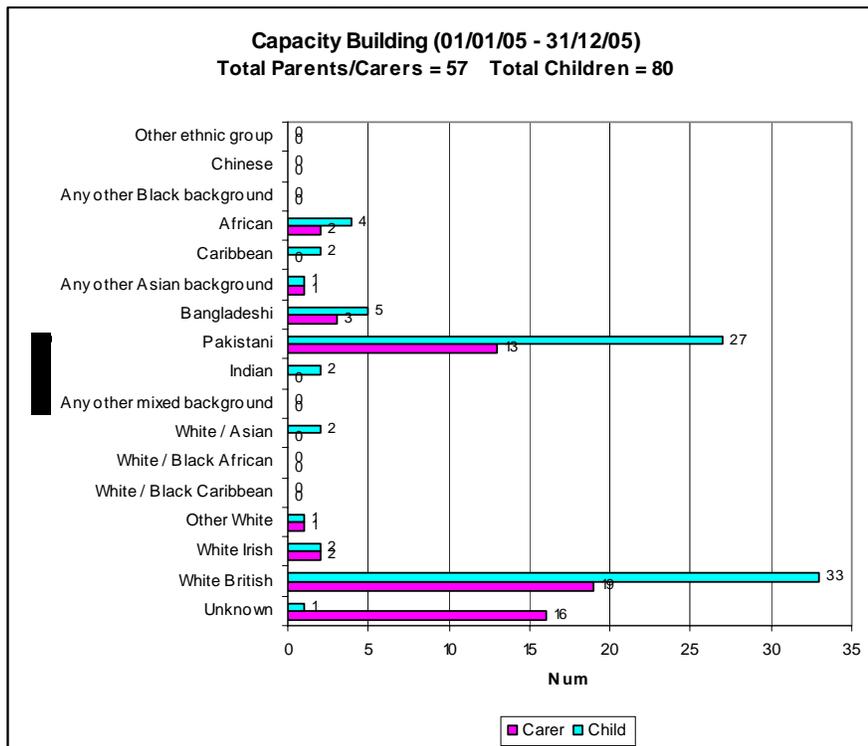
### Activities

By using capacity building approach, the programme has provided various opportunities for the community to be involved in planning and decision-making through the Partnership Board and different community forums/groups such as ‘Parents Forum’, ‘Parents Group’, ‘Men Behaving Dadly’. ‘Parent Volunteer Meeting’ and ‘Key To The Door (TOY Course for young parents under 21)’ have also provided volunteering opportunities and training for community members/parents so they could develop their confidence, self esteem, reduce isolation and have access to employment opportunities.

### Outputs – Monitoring

For the past 12 months, 9 activities or groups have been set up within the local area for both men and women who are also parents/carers. Through these activities/groups, the programme has managed to engage **57 parents/carers** and reach **80 children**. ‘Information and Pampering Session’, ‘Key To The Door (TOYS & Little TOYS)’, ‘Parent Volunteers Meeting’ and ‘Women’s Event’ seems to be the most successful group which has managed to engage **43 parents/carers** and **54 children** from the local community.

Figure 6: Ethnicity Profile - Capacity Building



## Outcomes : Qualitative Evaluative Evidence

### Every Child Matters – Outcomes Framework

#### **Target 1: Be Healthy**

ii) ECM Inspection Judgements/Evidence:

***“Children and young people have access to an appropriate range of support if they feel troubled”.***

Through intensive family/home support, a few parents have been signposted to other appropriate services that meet their complex needs.

For full statistics on signposting and referrals please refer to page 14.

#### Some Examples:

Parents were eager to get information and to get signposted to other local services for their children.

Five parents expressed interest and wish to sign up for the next Webster-Stratton Course.

3 parents were signposted to dentist for their young children.

#### **Target 4: Make A Positive Contribution**

i) ECM Inspection Judgements/Evidence:

***“Voluntary and community engagement”.***

Activities from ‘Core Service – Capacity Building’ such as ‘Women’s Event’ and ‘Pampering & Information Session’ were aiming at engaging parents in the area and reducing isolation as well as providing opportunities for community development. Below are some examples of qualitative evidence:

#### Sharing Experiences and Reduce Isolation

Parents commented that they enjoyed the session and felt relaxed meeting other parents.

Parents commented about the 'calming nature' of the group.

Staff observed that parents helped each others with suggestions and smiled a lot.

Parents commented that they really enjoyed the 'time out'.

There was a discussion session on children's behavioural issues within the parents.

Staff observed that parents were becoming more relaxed and started to talk to each other about their children and family issues.

Parents commented that they were relieved that they are not on their own.

*"It's great to have 2 hours a week to spend on me."*

ii) ECM Inspection Judgements/Evidence:

***"Engage in decision making and support the community and environment".***

Apart from reducing isolation, parents/carers were also engaged in the decision making process such as:

Parents were willing to share ideas regarding how to set up activities for future sessions.

Parents were interested in giving out their ideas for planning future events.

Parents were taking responsibilities to manage a group of 10 adults and 17 children to play session.

Parents were taking responsibilities to plan a trip consists of 10 adults and 3 children.

Parents took on responsibilities for areas of work for next meeting and they have become more aware of the planning and risk assessment process.

Parents have managed to plan and put forward two proposals for day trips.

## Target 5: Achieve Economic Well-Being

i) ECM Inspection Judgements/Evidence:

***“Action is taken by partners to support families in maximizing their economic well-being”.***

As well as providing volunteering and parental involvement through various events/activities, parents/carers were also signposted to various education, training or employment agencies in order to support them to achieve maximized economic well-being.

### Some Examples:

2 parents have taken information on English classes.

5 parents have signed up to join Credit Union.

1 parent took information on Community Champion and wanted to be a volunteer.

7 parents have signed up to visit Oldham College.

A few parents were interested in childcare training courses.

A few parents are able to use internet and telephone to research information with confidence.

One parent was interested in childcare work and she was signposted to Family Academy.

A small group of parents have shown the ability to use planning sheet and risk assessment form.

A group of parents managed to evaluate the day trip they organized.

A small group of parents have expressed willingness to take up more tasks and responsibilities.

Staff has supported two parents to complete and submit the Millennium Volunteering Form.

Parent's representation on the Partnership Board was discussed and agreed, three parents were 'observing' at the next Partnership Board Meeting.

A small group of mothers have given their inputs and views on the '10 Years Strategy for Childcare'.

## Chapter Four

### Health Promotion, Staff General Contact & Request for Contact/Visit Analysis

#### Health Promotion: One-to-One Weaning Visit

Two staffs from the programme have been trained and working alongside health visitors to carry out primary visits and weaning/nutritional visits. Some examples of health promotion that were provided by staffs are as below:

##### Some Examples:

The nutritional visits have benefited 30 children.

Infant feeding routine was given to a few mums during weaning visits.

As a result from staff's advice, a mum has started to swap jar food to blended cooked food for her baby.

A boy with eating issues has been eating better since weaning advice was provided to his mother.

4 mums and their babies were benefited from weaning advice given by staff.

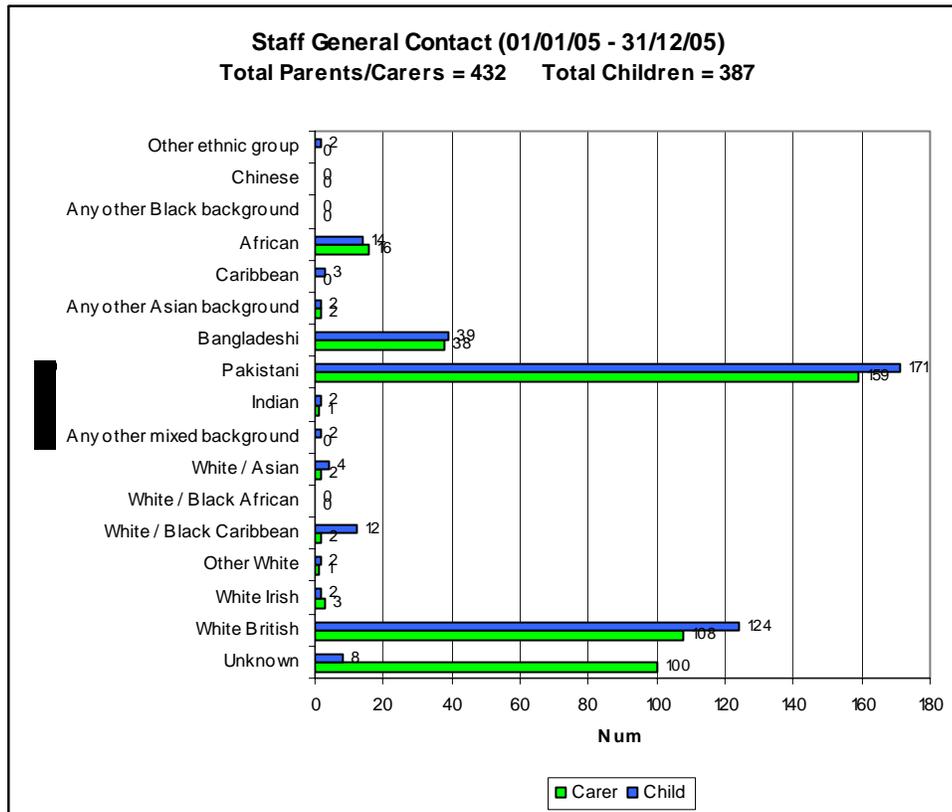
A mum said the nutritional visit has helped her a lot to cook and eat more vegetables for both herself and her baby.

A mum has learnt to cut down salts in her cooking for her family through support and advice from staff during nutritional visits.

#### Staff General Contact

Staffs general 'day-to-day' contact seems to be the most effective way of engaging and supporting families within the community. For the past 12 months, the team has engaged **432 parents/carers** and **387 children** during their day-to-day operations. The number of contacts made and the types of contact have been analysed as below:

Figure 9: Ethnicity Profile – Staff General Contact



### i) Improved Access to Services, Advice & Guidance through Staff General Contact

From 1<sup>st</sup> January 2005 to 31<sup>st</sup> December 2005, the team has made **2163** contacts with **432** parents/carers and **387** children. Within the 2163 contacts, **26.1%** (565) were various contacts for support for families, **29.7%** (643) were various contacts to engage families under the programme including outreach and dissemination of Sure Start information. Further analysis has also shown that the programme has signposted parents/carers and children to different agencies, services or activities for the past 12 months on **177** different occasions. Out of the **177** signposting incidents, **30 (17%)** are signposting to Preschool/School while **29 (16%)** are signposting from one activity to another activity and **26 (15%)** are to Education or Training Institutes.

Moreover, apart from improved access to various other services, the 'Every Child Matter's' outcome: "Action is taken by partners to support families in maximizing their economic well-being" has also been achieved through contracted employment workers (funded outside provider). For the past 12 months, the contracted employment workers have managed to support parents to complete **29** Curriculum

Vitae, to carry out **16** job interview rehearsals, to help parents to carry out **32** job searches and to give **12** parents advice on job seeking.

### ii) Integrated Front-Line Delivery

Apart from effective signposting, the programme has also managed to promote effective integrated front-line delivery and partnership work. For the past 12 month, staffs have been working in liaison with Health Visitors on **105 (63%)** occasions, with Preschool/School/Nursery on **25 (15%)** occasions and with various Voluntary Organisations on **18 (11%)** occasions. Obviously, the programme has established successful relationships with different services and agencies within the local area and efficient partnership work has been operationalized.

### Request for Contact/Visit Analysis

Apart from outreach and inviting families to activities, formal Request for Contact/Visit is also another significant way to make initial engagement with families. From the past 12 months, **64 requests** have been made by different bodies to visit or contact families in the area. **71.9%** of the requests were made by **parents/carers** themselves. This suggests that the level of needs from the families is very high and the programme has publicised itself very well within the community. Below is the summary of 'Request Made By':

Total Number of Request for Contact/Visit from 1<sup>st</sup> Jan 2005 to 31<sup>st</sup> Dec 2005 = **64**

<b>Request Made By</b>	<b>Number</b>	<b>%</b>
Parent/Carer	46	<b>71.9%</b>
Health Visitor	10	<b>15.6%</b>
Social Services	3	<b>4.7%</b>
Others	5	<b>7.8%</b>
<b>Total</b>	<b>64</b>	<b>100.0</b>

Out of **64 requests**, **23.4%** are requests for 'activities/events information' and **14.1%** are requests for 'behavioural management' and another **14.1%** are requests on various 'health issues'. **93.3%** of the requests for 'activities/events information' were made by parents/carers. On the other hand, **66.7%** of the requests for 'behavioural management' were also come from parents/carers. Similar pattern also applies to requests for 'health issues' (parents/carers – **66.7%**).

Type of Request	Number	%
Registration & Welcome Visit & Info	6	9.4%
Request Activities Info	15	23.4%
About Playgroup/Crèche/Childcare	5	7.6%
Language Development Delay	3	4.7%
General Practical Support	6	9.4%
Family Support	3	4.7%
Behavioural Management	9	14.1%
Home Safety Issues	6	9.4%
Signposting	1	1.6%
Health issues	9	14.1%
Others	1	1.6%
<b>Total</b>	<b>64</b>	<b>100.0</b>

Figure 10: Types of Request for Contact/Visit

