

Barton, Tredworth & White City Sure Start Year Three Evaluation Report

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Executive Summary

1: This report provides an assessment of the extent to which the programme has been successful in meeting Sure Start objectives and working to national principles. It reviews programme delivery including the effectiveness of management and staffing structures and the value and achievements of specific projects. It offers analysis of two key process areas – partnership working and parental involvement.

2: A 'Participative Evaluation' approach has been adopted in undertaking the evaluation that emphasises the active involvement of all key stakeholders and in particular the programme's beneficiaries. This approach provides insights not available with more traditional evaluations and helps ensure ownership of the evaluation. It informs the on-going development of the programme, has the potential for personal development for those involved, and is consistent with the overall ethos of Sure Start.

3: In reviewing the extent to which the programme has been successful in meeting both the national and local objectives of Sure Start, the available monitoring data gives a positive, though limited picture of the programme's progress. The staff group, including the Programme Manager, overall are positive about the progress being made, though there are areas of under-achievement such as work with fathers and teenage parents. Partnership Board members were constrained in their comments by their level of knowledge and experience, but also by limitations in the available baseline data to measure progress against.

4: The next phase of the local evaluation will need to ensure that key stakeholder groups have relevant, accessible and up to date output data to reflect on in making their own assessment of progress against national and local objectives. The development of the two Children's Centres in the local programme area will require accurate baseline data in relation to their agreed service targets. Equally important will be the need for a robust monitoring system, which should be taken account of in meeting Sure Start's intervening monitoring requirements.

5: A mixed picture emerged in assessing the extent to which the programme is achieving Sure Starts principles. The underlying ethos of BTWC-Sure Start being a *relationship based organisation* has helped it engage with those families most in need.

6: The extent to which there is significant variance in key stakeholders views about the attainment of Sure Start principles suggest that this is an area that the programme as a whole should review. This will also be an important area for consideration in the development of the two Children's Centres in the Sure Start area.

7: The effectiveness of the programme's organisational and management arrangements are questioned by some key stakeholders and there is evidence that work needs to be done to be improve aspects of this.

8: All projects and initiatives funded by the programme have undertaken a self-assessment of their individual progress. This activity has produced information that is quite variable in its detail and there are important gaps that will need to be addressed in the next phase of the evaluation.

9: The programme's staff represents its most important resource. Their morale has been a cause of concern during the last year. The County Council job evaluation process probably had a negative impact on morale and relationships within the team. Another factor has been the perceived lack of clear direction for the programme. It is perhaps surprising then, to find high levels of job satisfaction expressed by nearly half the staff group surveyed.

10: Sure Start members were surveyed to establish what their experience of the programme has been. Two-thirds said they were 'very satisfied' with the services they received, with the remainder 'satisfied'. A different perspective might be given by those who chose not to access these services, or had stopped using them. The next phase of the evaluation should try to find out their views.

11: While the overall effectiveness of the programme has been a prominent concern within the evaluation, questions to do with efficiency and value for money have been much less so. In the next phase of the evaluation this should be a more significant area of consideration. The quality of the work undertaken within the programme is also closely

linked to questions about effectiveness and efficiency. This is again an area that should be subject of much greater discussion within the programme.

12: The local evaluation has identified aspects of how the BTWC-Sure Start partnership works that are of significant concern and that need to be addressed. One cause for concern has been the low level of involvement by Board members in evaluation activities; another is the overall level of commitment to the programme, as evidenced by involvement in Board meetings. Board members taking part in the survey in general recognised limitations in the extent to which the Board acted strategically. This has implications for the level of responsibility vested in the Programme Manager, who can be regarded as pivotal in the decision-making processes.

13: At the local level there is good evidence of effective partnership working as evidenced through work with Family Centres. Working arrangements with Sure Start are now effective, which is largely credited to the willingness and efficiency of Sure Start staff on one side, and proactive approaches to facilitating communication by Family Centre Coordinators on the other.

14: The Partnership Board has established a sub-committee to deal with issues of mainstreaming. However, the development of Children's Centres, which will need to be operational by April 2006, has major implications for mainstreaming of services.

15: Parental involvement offers the Sure Start programme the opportunity to strengthen the base of its activities by drawing on the local knowledge and experiences of parents and carers who are, and whose children are, direct beneficiaries of the services it provides. Their contributions can help to make services more appropriate, more effective and more efficient. Parents have been actively involved in the management and evaluation of the programme, but this has declined and staff have expressed concerns that parental involvement does not have the priority it should have. The appointment of a key worker for parental involvement should help to address some of the concerns raised. At its most recent meeting the Partnership Board has taken the decision to create such a post.

Recommendations

16: The Partnership Board should develop and agree local measures for the performance of the programme that measure what the programme is achieving.

17: The programme needs to stick to and reinforce the agreed process for operational decisions. When this does not happen it should be discussed at the monthly meetings between Development Workers and the Programme Manager. These meetings should also be used to discuss programme wide actions and strategy that come out of the discussions and decisions made at delivery sub groups.

18: There should be a logical sequence for meetings that is planned in advance and communicated clearly i.e. delivery sub groups, then full delivery group, then Board, so that the correct process is followed. The Development Workers should be involved in agreeing dates for these meetings and should ensure that members of the delivery sub groups know which items require a decision.

19: The weekly meetings of the Involvement Workers and Community Nursery Nurses should become the basis for more formal peer review and be used by the Sure Start team as a way of assessing and monitoring quality.

20: Building on the development of a new policy for Parental Involvement, an action plan for implementing this policy should be agreed by the Board.

21: The process of developing the Parental Involvement action plan should involve discussions within Sure Start management teams and delivery sub groups about the implications for the programme of implementing the policy e.g. staff time. Parental involvement activities should be prioritised and the potentially key role of Involvement Workers in supporting parental involvement should be developed.

22: Systems and resources to adequately support parents who want to get involved need to be agreed. These might include an induction pack [based on the Volunteer pack], CRB checks, codes of conduct, and appropriate training and support. The new Parental

Involvement Worker should work with parents and the staff team to put these systems and resources in place.

23: Over the next two years Sure Start workers should move, where possible, from running groups / activities themselves to supporting parents to run them, following the BIBs model. This capacity building approach will require an attitudinal / cultural change within the staff team and access to appropriate skills, support and funding for the groups. The Sure Start team should identify which groups could work towards this model and set markers to measure progress towards this happening. This should be seen as a key part of the mainstreaming strategy for the programme.

24. The next phase of the local evaluation should have a renewed emphasis on the active involvement of parents in evaluating the services they use.

25: The terms of reference of all the different groups within Sure Start should be reviewed to ensure that they are relevant, clear and to give members a chance to sign up to them again. This process should begin with the Partnership Board, followed by the delivery sub groups. The Board should also review the way that it operates strategically. It should be driving the mainstreaming of Sure Start services and disseminating the lessons from the programme within partner agencies.

26: All agencies involved in the development of Children's Centres should come together to agree a shared vision / ethos. This will enable them to deal effectively with any changes in Government policy.

1: Introduction

1.1: This report presents the main findings of the local evaluation of the Barton, Tredworth and White City Sure Start programme during the past year and considers the overall progress of the programme, against the national objectives of Sure Start, at the end of its third year. It does not attempt to present all the information gathered and assessed by the local evaluation, which would require a much longer and more detailed report.

1.2: The report is designed to inform the delivery of the programme over the next two years, making recommendations which build on existing good practice and that also respond to identified gaps in provision. In addition, it may inform the development of wider policy and service planning, including the mainstreaming of services developed by Sure Start, through dissemination to Local Strategic Partnerships, including the Children and Young People's partnership, and other key partner agencies.

1.3: This report provides an assessment of the extent to which the programme has been successful in meeting Sure Start objectives and working to national principles. It reviews programme delivery including the effectiveness of management and staffing structures and the value and achievements of specific projects. It offers analysis of two key process areas – partnership working and parental involvement.

1.4: The report concludes with the key lessons drawn from the evaluation activity and recommendations for the future, which have been identified and agreed by the Evaluation Working Group and Icarus. It will be of interest to:

- The Sure Start Partnership Board
- National / regional Sure Start Units
- Children and Young People's Strategic Partnership
- Gloucestershire Health, Education and Social Services
- Other key partners, agencies and initiatives

Background

1.5: The Barton, Tredworth and White City Sure Start programme was approved in October 2000, as a Wave 2 initiative. The Programme Manager came into post in January 2001. There were some initial delays in appointing staff and acquiring premises, which meant that the delivery of the programme commenced in the summer of 2001. In effect, therefore, although the programme was approved 3 years ago, this evaluation report reviews 2.5 years' activity.

1.6: The programme serves all families with children under 4 living in the Barton, Tredworth and White City areas of Gloucester (848 as at 31.3.02). The White City Community Project acts as lead body for the programme, with the Barton and Tredworth Community Trust as associate lead body. Gloucestershire County Council Education Department is the accountable body and as such is also the employer for all directly employed staff. (Appendix one provides an organisational diagram of BTWC-SS).

1.7: The Partnership Board was established with representation from parents, and the statutory and voluntary sector. The initiation of the programme was particularly complex as the decision had been taken to spread service delivery between 6 community-based centres – 4 Education-run Early Years Centres (Finlay combined with White City Community Project based at the Starvaell Centre, Tredworth, Widden and Hatherley), Roshni Women's Centre and the Trust Centre where the Barton and Tredworth Community Trust is based. All these venues successfully applied for physical refurbishment through Sure Start's capital programme which was in excess of £1million and this occupied a considerable amount of Partnership Board and management time for the first year.

1.8: The last year of capital spending has just been completed and will enable the development of the Bartongate Children's Centre at Widden. The other Children's Centre in the Sure Start area will be based at Finlay / Starvaell.

1.9: The allocation of activities in the various centres has been gradually assessed and reviewed by the Programme Manager over the past 2 years and a more sustainable programme of activity, particularly within Family Centres, has been established. During

that period, most of the Sure Start team, who had been housed in various centres, were brought together either in the Trust Centre or at the Starvaell Centre.

2.0: This report aims to reflect on some of these developments and to highlight what has worked and where improvement could still be made over the next 2 years of the programme. Key learning points identified by the Evaluation Working Group are emphasised in boxes.

2: The approach to the local evaluation

2.1: Icarus was commissioned to undertake the local evaluation of the programme in November 2001. Icarus's approach to this task is based on 'Participative Evaluation' (PE©), which it has developed in response to the limitations of other forms of evaluation. Central to this approach is an emphasis on the need for the active involvement of all key stakeholders. In particular there is a concern to ensure that the programme's beneficiaries, parents and carers in the case of Sure Start, are at the heart of the evaluation.

2.2: The involvement of key stakeholders extends to identifying the questions that the local evaluation needs to answer and assessing and interpreting the information gathered. It can also involve them in designing the evaluation tools and in carrying out aspects of the evaluation. This approach helps to ensure 'ownership' of the evaluation process, which in turn means that its findings and recommendations are more likely to be acted on in a positive way.

2.3: This approach was consistent with that advocated by the Partnership Board, which had taken the decision to delegate responsibility for the local evaluation to the Parents Forum. On being commissioned, Icarus initiated the formation of the Evaluation Working Group (EWG) with representation from partner agencies, staff and parents. The EWG was seen as central to ensuring the active involvement of key stakeholders and helping to facilitate wider participation in the evaluation.

2.4: Other important aspects of a PE approach include it being a developmental process that not only informs the on-going development of the programme, but that also has the potential for personal development for those involved. Again, this is seen as particularly valuable in relation to programme beneficiaries who may gain in confidence, skills and knowledge through active involvement in the evaluation. This can happen indirectly or directly as in the case where parents are trained to undertake certain evaluation activities e.g. running a focus group and then assessing the information gathered.

2.5: Another important feature of a PE approach is that of trying to get the 'whole picture', which means going beyond reliance on output data as the primary, or even sole source of information about how well the programme is doing. Within a PE approach there

is an attempt to put what is happening within a 'context', both at the macro and micro level, to take account of the 'inputs' the programme has at its disposal and to look at the 'processes' at work within the programme. All of these help provide an understanding of why things have happened in the way that they have and not just what has happened, which tends to be the case when there is an over-emphasis on outputs. This can also provide a better basis for predicting and interpreting longer-term outcomes.

2.6 Appendix two shows a diagram of the evaluation framework. Appendix three provides an outline of the main activities undertaken within the local evaluation.

3: Meeting national and local objectives and Sure Start principles

3.1: This section of the report provides an overall assessment of the extent to which the programme is meeting both national and local objectives and is working to Sure Start's principles. It draws on monitoring data generated by the programme and the views of key stakeholders, though not those of parents whose experiences are given later. Appendix four presents a matrix giving both national and local objectives, baseline information, targets and milestones and progress made as represented through monitoring data.

National and local objectives

3.2: In general the available monitoring data gives a positive, though limited picture of the programme's progress. This perspective is reinforced by that given by the Programme Manager who reported good progress in relation to all the national targets with the exception of improving the social and emotional development of children, where she felt only average progress had been made. Even here she was able to point to areas of progress such as more families using the well baby clinic and taking up developmental checks and the work of the BIBS project in supporting breastfeeding.

3.3: In relation to the national target of improving the availability, accessibility, affordability and quality of childcare, the programme publicises and actively promotes the use of childminders, day nurseries and other registered provision. Through the Neighbourhood Nursery Initiative it is providing 12 new places accessed by over 30 children a week. The new Bartongate Children's Centre at Widden, when it opens in February 04, will provide 50 places of which 26 are new.

3.4: The Programme Manager felt there was a similarly positive picture in relation to the other national targets; improving children's ability to learn, improving health and strengthening families and communities. Amongst the evidence she gave to support this view was a large increase in the take up of nursery education places by the Bangladeshi community, 100 families a week using the Trust Centre, an improved perception of the area as a good place to bring up young children, the testing of all two year olds for speech and language development resulting in a much earlier intervention offered to those with difficulties, and a 30% increase in use of library services.

3.5: The wider staff group also felt that in general the programme was meeting its objectives and the needs of its beneficiaries, though they tended to judge this in relation to children. Their level of knowledge of the local objectives of Sure Start was higher than their knowledge of national ones, though most had a reasonable or good knowledge of both.

3.6: The staff group's assessment of the programme's achievements and under-achievements in respect of Sure Start's objectives, identified working with 'hard to reach' groups as both an area of significant achievement and underachievement. This apparent contradiction may be due to the generic nature of the term 'hard to reach'. Sure Start commissioned research into the needs of 'hard to reach' groups, defined as: families with illness or disability; working parents; homeless or transitional families and people for whom English is not their first language, but there was a feeling that little had happened as a result. Specifically work with fathers and teenage parents was mentioned by several staff as an area of underachievement and one commented that Sure Start "*needed to adopt a different approach*" to reaching these groups.

3.7: The Sure Start team may have higher expectations than other services about accessing 'hard to reach' groups. Family Centre co-ordinators, for example, identified this as a successful area for Sure Start, noting that families suffering domestic violence and illness/mental illness had also been reached and supported. Other achievements identified by staff were activities such as drop-ins and baby group, the Sure Start Neighbourhood Nursery at Furlong Road and effective partnership working at a local level.

3.8: Partnership Board members gave a range of responses to the extent to which they thought the programme was meeting national objectives, but also indicated that their ability to comment on particular objectives varied, depending on their personal experience and knowledge. Comment was also made about the limitations of baseline data available for gauging progress and contradictions between available data and stated milestones.

3.9: 'Improving health' was the objective in which it was felt the programme was performing least well. Partnership Board members thought 'improving access to childcare' and 'strengthening families and communities' were the objectives they thought the programme was making best progress against.

In the next phase of the local evaluation it will be important to ensure that key stakeholder groups identify what relevant, accessible and up to date output data to reflect on in making their own assessment of progress against national and local objectives. Individual projects and initiatives and the staff working to these will also have to be clear about which national and local objectives they are attempting to meet. At present this is not always the case (see organisation and management page 16).

3.10: The development of two Children's Centres will require accurate baseline data in relation to agreed service targets. Equally important will be the need for a robust monitoring system, with information gathered and shared between the agencies concerned. This development should be taken account of in meeting BTWC-Sure Start's intervening monitoring requirements.

Sure Start principles

3.11: Partnership Board members again varied in their views as to how well they felt the programme was doing in meeting Sure Start principles. In no instance did they feel the programme was fully achieving these and in general they saw the need for work to be done in respect of each principle. 'Cultural sensitivity' and 'avoiding stigma by enabling all families to access services' were the two principles that they thought the programme was meeting most fully.

3.12: The Programme Manager felt the principle of 'avoiding stigma' was being fully adhered to and that the programme was also being successful in co-ordinating, streamlining and adding value to existing services.

3.13: The principle of involving all parents, grandparents and other carers in ways that build on their existing strengths was proving more difficult, particularly in relation to first time mothers-to-be. Fathers were also difficult to engage unless it was for 'one-off' activities that had a particular emphasis on them. There was a spectrum of involvement from the most needy to the least needy families.

3.14: There had also been difficulty in relation to the principle of ‘developing and supporting links with services for older children’ and it was not always possible to meet the needs of older children and younger siblings within the same premises. ‘Promoting the participation of all local families in the design and working of the programme’ was also a challenge given the time commitments this can place on parents, though in some areas there was good participation, particularly the BIBs initiative. The Programme Manager also felt they had only been moderately successful in achieving the principle of being culturally appropriate and sensitive to particular needs.

3.15: Staff members overall had a good knowledge and understanding of Sure Start principles. They gave a mixed view of how well they felt the programme was doing in meeting these principles, though they tended towards a more positive than negative position on this. Comment was made on Sure Start not always being consistent in relation to its principles. An example of this was given as the tension between the national target to get parents back to work and the overall aim of Sure Start to support good parenting. Family Centre co-ordinators also supported this view.

3.16: Beyond the individual principles that the programme is working to, there is the suggestion that there is an underlying ethos about BTWC-Sure Start being a *relationship based organisation* which has helped it engage with those families most in need:

“We have built up strong relationships and trust in the communities we work in and this has enabled us to reach the ‘hard to reach’ families and identify the children in greatest need, working with voluntary and statutory organisations to achieve this. The exchange of information has improved and it helps that everyone knows who to contact and where they are based. Sure Start is built on relationships with local families and I feel that this is our most significant area of achievement.”

The extent to which there is significant variance in key stakeholders’ views about the attainment of Sure Start principles suggests that this is an area that the programme as a whole should review. Importantly there should be a focus on considering how Sure Start’s underlying principles are translated into practice. This will also be an important area for consideration in the development of Children’s Centres, where different agencies working to their own principles and value systems will have to forge a coherent service.

4: Programme Delivery

4.1: This section of the report reviews programme delivery in respect of key aspects of its operation: organisation and management, individual projects and initiatives, staffing, the experience of parents and carers, the effectiveness and efficiency of the programme and the quality of work undertaken.

Organisation and management

4.2: The effectiveness of the programme's organisational and management arrangements are questioned by some key stakeholders and there is evidence that work needs to be done to improve aspects of this. This is illustrated by the review of the delivery sub groups undertaken as part of this evaluation.

4.3: Within the programme there are four delivery sub groups, relating to the different objectives of Sure Start. Each delivery sub group is co-ordinated by a different Development Worker. Icarus facilitated a session with the Development Workers to agree which projects relate to which delivery sub groups for monitoring and evaluation purposes. Subsequently, and independently, the Programme Manager repeated this exercise with the rest of the staff team and it produced different results. It has, therefore, proved difficult to agree definitively which projects come under which delivery sub group. This should not have been a difficult process but has resulted in confusion all round and lack of clarity about who is responsible for developing, managing and evaluating different activities.

4.4: The effectiveness of the delivery sub groups was reviewed with the Development Workers, focussing on what has worked well, what has not worked so well and key lessons and recommendations.

4.5: On the positive side the delivery sub groups have been effective at getting relevant partners, including parents, involved in decisions about the delivery of the programme. This has helped to join up services and spread the load with different members of the groups taking on different tasks. All the groups have, at times, made operational decisions and have become more confident in enforcing their decisions. The sub groups have

provided a focus for the different activities within Sure Start and recently have helped the Development Workers be clearer about their focus and communication.

4.6: What has not worked so well is that decisions have often been made elsewhere, without reference to the delivery sub groups. This has led to ill-informed decisions, the sub group's role being undermined and has created bad feeling. In particular, communication between Programme Manager and delivery sub groups has been poor. The Development Workers felt that, for the sake of expediency, the Programme Manager often became involved in operational decisions that should have been made by the delivery sub groups and that this undermined their role and authority as Development Workers.

4.7: Over time the membership of the sub groups has widened so that it is not longer drawn just from the membership of the original Delivery Group but is now representative of key stakeholders, including some parents. However, in the past the scheduling of meetings to facilitate providing crèches affected attendance at delivery sub groups.

4.8: The staff group as a whole were not in agreement about the extent to which the programme has a clear and effective management structure and, following on from this, how well the management structure worked. Reference was made to the lack of clear direction and consistency, one person commenting that '*things change on a whim and are often not thought through*'. Others felt the management structure was clear and effective and worked well. However, staff scoring on this was lower than had been the case when they had been surveyed previously [see Interim Report, June 2002] and may in part reflect changes in team structures.

4.9: The effectiveness of internal communication in particular was an issue identified by some staff, though others felt this was reasonably good. The wide range of views suggests that some staff feel well informed but that others are 'outside the loop'. In general external communication scored more highly. Some Partnership Board members also had concerns about communication, though most felt it was satisfactory and had improved.

4.10: The Programme Manager in commenting on whether she felt the organisational structure had been effective said she felt that changes introduced in relation to the Development Workers line management responsibilities had produced a clearer system. She identified problems associated with working from different sites including

communication issues and staff making 'on the spot' decisions without reference to their line managers. The introduction of information sharing sessions between staff had brought about improved communication and helped staff understand the constraints under which the programme operates.

Projects

4.11: Two thirds of the projects and initiatives funded by the programme have been interviewed about their individual progress. Half of these were projects run by other organisations and half were run by Sure Start staff. The purpose of these interviews was to gather accurate information about each project's activities, how they related to Sure Start's objectives, and how each project assessed its quality, efficiency, effectiveness, impact and value for money. Questions were also asked about how parents influenced the work of the projects and how they involved 'hard to reach' groups. The interviews were essentially a self-assessment by the staff running the projects and beneficiaries were not involved.

4.12: The visits also had a developmental aspect, focussed on discussing with each project how they approached monitoring and evaluation and how this could be developed in the future, with the aim of Sure Start, via the local evaluation, providing training and support where needed and in particular, in supporting parental involvement in evaluation activity.

4.13: This activity produced information that is quite variable in its detail and there are important gaps that will need to be addressed in the next phase of the evaluation. As well as informing this report, the data from the interviews was discussed by the Evaluation Working Group and was also passed to the relevant delivery sub groups.

Objectives:

4.14: The objectives of the individual activities were clearly expressed in general terms but most projects did not have SMART (specific, measurable, achievable, relevant, timed) objectives. The general nature of project's objectives made it difficult for them to measure their progress and to judge if they were being successful. Most activities related to two or more of Sure Start's national objectives and four related to all of the Sure Start objectives.

4.15: Often projects do not contribute to targets that Sure Start uses to measure each of the five objectives, although they do relate broadly to that objective. For example, several projects thought that they contributed to the 'strengthening families and communities' objective but they did not contribute to the targets by which this objective is measured (reducing the number of children living in households where no-one is working; increase the proportion of families reporting an improvement in family support services; and parent representation on the Board). The difficult issue for the local programme is that the national Sure Start targets do not measure what it is being delivered locally.

4.16: Projects often assessed how well they were meeting their objectives through informal feedback from parents or other professionals. However, this was not always recorded (for example, in a comments book) so evidence of positive feedback was not always available. Overall there is a need for more focus on collecting evidence of progress towards both Sure Start's objectives and the individual projects' objectives.

Efficiency, Effectiveness and Impact:

4.17: Over half of the projects run by other organisations cited uncertainty about future funding as a barrier to the effectiveness of the project. Annual funding makes it hard for organisations to plan ahead, particularly in the context of large budget cuts by the programme in the current financial year as a reaction to overspending in the previous year.

4.18: Unsurprisingly, several projects (including those run by Sure Start) mentioned lack of resources and funding as a barrier to efficiency and effectiveness. This was particularly the case with Care and Repair where the lack of funding for materials undermined the effectiveness of the whole scheme. Within the programme the issue was sometimes lack of dedicated resources. Several Sure Start projects mentioned the physical resources, such as room size or lack of storage as barriers to effectiveness.

4.19: Information about, and promotion of the externally funded services by Sure Start was mentioned by several projects. They felt they could be more efficient and effective if there was more accurate information available about what they did and if more Sure Start members were made aware of their service.

Externally funded projects worked best where there was flexibility to 'mix and match' Sure Start funding with other funding. For example, the Speech and Language Therapist was funded by both Sure Start and the Health Service. This allowed her to be more flexible about which days she saw people on. She also recognised that working through Sure Start was more effective because it was easier to keep in touch with families e.g. following up on missed appointments via Involvement Workers. In this way families did not 'slip through the net' and problems were more effectively dealt with at an early stage. This is exactly the kind of 'new way of working' that Sure Start was set up to develop and mainstream.

4.20: The value and impact of several of the projects was providing support for isolated parents and improving their relationship with their children. Interestingly, the quality of the relationship between staff and parents was viewed as an essential foundation for working with the families. This fits well with Sure Start's original aim of being a relationship - based organisation.

4.21: Many of the projects had a preventative element to them and the impact of this is difficult to assess in the short term.

Quality:

4.22: None of the projects interviewed used recognised quality assurance systems such as PQASSO (Practical Quality Assurance System for Small Organisations) or IIP (Investors in People), although one had started piloting a system and then stopped because of an imminent move when systems and procedures would change. Childcare projects, such as the crèches and nurseries, have to meet OFSTED standards involving regular independent inspections.

4.23: Within Sure Start, the weekly meeting of the Involvement Workers and Community Nursery Nurses has facilitated the development of peer review and assessment. This process could usefully become more formalised within the Sure Start team as a way of assessing and monitoring quality.

Value for money:

4.24: Most of the projects felt that they represented good value for money, although in some cases it was hard to justify this assessment. Further work needs to be done on assessing the costs of different services in relation to comparable services and the outcomes for Sure Start. Other 'Best Value' criteria may not be applicable, or easy to apply.

4.25: Two projects run by Sure Start assessed themselves as not offering such good value for money. Crèches are resource intensive, and can involve up to five members of staff. The Dads Group is expensive in relation to the small numbers attending but is at an early stage of development.

Involving parents and 'hard to reach' groups:

4.26: All the regular groups run or funded by Sure Start involved parents in planning sessions in an informal way. Staff talked to parents during sessions to get feedback about what they had enjoyed and what they would like at future sessions. This was not always written down. Some sessions, such as the Starvaell Drop-in, also involved parents in running particular parts of the sessions e.g. craft activities. The only fully parent-led group was BIBS, the breastfeeding group which was planned and run by parents with support from Sure Start and health professionals.

4.27: The therapeutic projects aimed to work in partnership with parents and speech and language therapy in particular aimed to transfer skills wherever possible.

Most projects were aware on the need to target 'hard to reach' groups. The link with the Involvement workers was critical for the projects who had been particularly successful at this. Home visits and the on-going personal relationships that the Involvement Workers had with 'hard to reach' families enabled these families to be identified and then proactively encouraged to attend appropriate groups.

4.28: Of the externally funded projects, Colwell Nursery has been particularly effective in targeting 'hard to reach' groups particularly Black and Minority Ethnic (BME) families and families for whom English is not their first language. They felt this was because they employed local workers from the community some of whom speak different languages.

They had a good reputation and were known and trusted by the community. They also did a lot of networking with other agencies in the area.

Monitoring and Evaluation:

4.29: All the projects kept monitoring records for Sure Start, recording who has attended or used the service. This is essentially quantitative information. Sure Start staff and some other projects also keep case records for the families that they are working with. Sure Start staff involved in running regular groups have also started doing end of session evaluations that inform the planning of future sessions. However, overall projects are doing little qualitative evaluation that collects evidence of direct feedback from parents and carers and assesses the difference that the project is making. The major barrier that stopped projects doing this kind of evaluation was time. One project commented *“We can see the difference we are making but if we spend a lot of time recording it, it feels like we are wasting time.”*

4.30: Workers also felt that for some new or very informal groups e.g. Dad’s Group, formal evaluation techniques would be inappropriate and might scare people away. The impact of some of the projects, particularly those with a preventative emphasis can only be measured in the longer term.

4.31: If projects are to effectively carry out their own evaluation they will need support and resources from Sure Start to help them do so. Time for evaluation has not generally been built into projects funding or allowed for in the weekly schedules of the staff team. Future evaluation activity has been identified in relation to each project / initiative and its envisaged that the local evaluation should provide support and training where needed and, in particular, in supporting parental involvement in evaluation activity.

Staffing

4.32: The programme’s staff represent its most important resource. Their experience of the programme and employment within it provides vital information for ensuring the continued successful delivery of the programme.

4.33: Staff morale has been a cause of concern amongst the staff group during the last year. Staff have talked about ‘being unsettled’, ‘infighting’ ‘competitiveness’ and ‘moaning’.

The County Council job evaluation process, which resulted in the downgrading of some roles within the team and the upgrading of others probably had a negative impact on morale and relationships within the team.

Another factor that can be seen to affect morale has been the perceived lack of clear direction for the programme. Staff referred to '*moving goal posts*' and '*unrealistic Government targets*'. The Evaluation Working Group acknowledged that it is likely that this will happen with any national programme, including Children's Centres, and recognised that a strong shared vision for the partnership locally is important.

4.34: It is perhaps surprising then, to find high levels of job satisfaction expressed by nearly half the staff group surveyed and with only one person reporting a level of satisfaction below 50%.

Parent and carers experience

4.35: Sure Start members were surveyed to establish what their experience of the programme has been. The membership survey was conducted by the Involvement Workers and this probably influenced the findings as parents may have been reluctant to be openly critical of Sure Start. In total 89 parents were interviewed, the majority of whom were mothers but some fathers (n14) and grandparents (n2) were included.

4.36: This information only represents the views of parents and carers using Sure Start services and a different perspective might be given by those who chose not to access these services, or had stopped using them. The next phase of the evaluation should try to find out their views, though it is likely to be a challenging exercise.

Overall satisfaction with Sure Start services:

4.37: Two-thirds (n60) of people said they were very satisfied with the services they received and the remainder (n29) were satisfied. This very positive picture needs to be tempered to some extent by the fact that interviewees were people by definition using services and that if people found services unsatisfactory they might well have stopped using them. This finding echoes the results of a previous survey of members.

Which Sure Start services did they use and how useful did they find them:

4.38: What appears to be a high percentage of interviewees had not heard of the care and repair service (n60), play therapy (n58), the 2's group (n55) and information, advice and guidance (n50). This is not surprising as these are targeted services that are not promoted to all Sure Start members. In general the people found the services that they used to be either very useful or useful, with home visits getting the most positive response and being the only service that everyone had heard of (it is the only universal service that Sure Start provides). The care and repair service had the highest percentage of people who felt the service had not been useful.

What people liked about services:

4.39: People gave a range of reasons for liking particular services. There was a consistent view that the staff were helpful, supportive and friendly. It's relevant to note that face-to-face contact (n23) and staff being friendly (n20) were the two most common choices for what people felt was important about Sure Start staff.

4.40: Many people said they liked the opportunity to 'get out of the house' and to meet other parents and make friends. Similarly many commented on the value of having somewhere where their child could go to socialise with other children. A number of people also said they particularly liked home visiting as well as drop-ins. There were also a number of other specific comments made about particular services and the help people had received e.g. the toy bus with access to toys that the parent couldn't afford.

What people disliked:

4.41: There were many more positive comments made about services than negative ones and a majority of the negative comments related to not using services, rather than any specific criticism of them. There were one or two criticisms of staff attitudes such as not listening and a few other specifics e.g. lunch not being provided at a nursery, or the use of the free phone service.

The difference there would have been if services had not been available:

The most frequent comment was made that people would have been 'stuck at home' and unable to go out if they had not had access to Sure Start services. The social element of what the programme offers comes through very clearly in these comments with people valuing the opportunity to socialise and make new friends, which was also true for their children. The importance of this should not be underestimated as a large number said they would have suffered from depression, would have had a 'nervous breakdown' or suffered from their 'nerves' if they had not had this opportunity. This indicates the preventative nature of the services Sure Start provides.

4.42: Again, there were a number of specific services that people had found of benefit that they would have otherwise not had access to and also help and advice e.g. a disabled person helped to complete DLA forms, and someone else who could not have afforded a repair without the help of the care and repair service.

Finding out more about Sure Start activities:

4.43: Involvement workers were the first point of contact for such advice by most of the people interviewed (n62) with popping into a local Sure Start centre as the most frequent second choice (n42). The free-phone was only the first choice of 3 people, the same number who would have asked a friend or found out from a newsletter.

Other things that Sure Start could be doing:

4.44: Activities at weekends and holidays, along with things for older children to do were the most common suggestions made. Linked to this were the provision / improvement to outside play areas. There were quite a few comments about increasing the level of existing services e.g. more health courses and more baby groups. Again, there were a number of very specific suggestions made individually e.g. overnight in crisis service, a weekly baby clinic at Starvaell.

Centres used:

4.45: Interpreting use of the different centres used needs to be considered in respect of a range of factors that effect their use; access to transport, local knowledge, specific activities and services happening, the centre's capacity both physical, staffing and times etc. This is reflected in the variety of comments made about why people don't use some

centres. Once a centre had been chosen and friends made there was usually no reason to want to go to another where parents would not know people or would find it more difficult to get to.

4.46: It is not surprising to find the occasional comment saying that someone wouldn't want to use a particular centre because they did not like the people who attended it, or felt it had a bad reputation. These comments were infrequent and there is no real pattern discernable in the negative things said about different centres. In contrast people volunteered a range of positive comments about Sure Start in general and appreciation for the services provided.

4.47: This survey has been subject to review by both the EWG and staff group and used to reflect on how the programme is being delivered. In the next phase of the evaluation it is hoped that parents views will more readily feed into individual projects / initiatives by staff being directly involved in gathering this information and involving parents in evaluating their performance.

Effectiveness, Efficiency and Quality

4.48: While it can be said that the measure of effectiveness within the programme is the extent to which it is meeting its objectives, consideration should also be given to factors that impede effectiveness. Reference has already been made to organisational and management and staffing issues that almost certainly have a bearing on effectiveness. Having adequate and appropriate resources are also clearly important in relation to the programme's effectiveness and its efficiency.

4.49: The staff group has considered this question and has expressed a range of views about whether Sure Start had adequate resources, though most feel that they have the right resources to do their own job. They are less positive about how efficiently Sure Start uses its resources, with a view that existing resources could be used to better effect.

4.50: From their experience of delivering the programme the staff group identified what would enable Sure Start to be effective in the future:

- ▶ Having a clear focus – keeping the big picture

- ▶ Maintaining good relationships with families, the community and partners and continuity of care
- ▶ Taking good practice in to the future
- ▶ Effective teamwork and happy staff
- ▶ Clear direction from the LEA and other partners on preventative work
- ▶ More funding

4.52: The potential threats or things that might make Sure Start ineffective were identified as:

- Lack of parental involvement and disillusion from families
- Lack of consultation and follow through on decisions
- Infighting within the team and not working together
- Staff illness and changes, including relocation
- Key partners not participating fully
- Lack of resources
- Inability to implement mainstreaming effectively

4.53: While the overall effectiveness of the programme has been a prominent concern within the evaluation, questions to do with efficiency and value for money have been much less so. The programme itself has carried out a cost benefit analysis of home visiting and found that Sure Start was more cost effective than other similar services provided by health and Social Services. Only in one instance has efficiency and value for money been a significant area of focus within the evaluation. This was in respect of the Babies in Gloucester initiative where a decision was taken to cease funding based on the relatively high costs per child / family using the service. In practice much of the discussion around this initiative revolved around how the decision was made rather than consideration of its efficiency and value for money.

4.54: In the next phase of the evaluation this should be a more significant area of consideration. 'Best Value' criteria (challenge / compare / consult / consider) have not been used within the local evaluation and we are not aware of them being used elsewhere within the programme. It is perhaps unrealistic to expect individual Sure Start programmes to adopt a rigorous 'Best Value' exercise for all aspects of their operation, though value for money and efficiency should be an important considerations for key areas of service

delivery, which will certainly have a bearing on the 'mainstreaming' of any of these services.

4.55: The quality of the work undertaken within the programme is also closely linked to questions about effectiveness and efficiency. This is again an area that should be subject of much greater discussion within the programme to determine what quality means within specific service settings, how to ensure it is achieved and how it can be measured.

5: Partnership working

Overall effectiveness

5.1: Sure Start depends on an effective and committed partnership being established and maintained over the lifetime of the programme. The local evaluation has identified aspects of how the BTWC-Sure Start partnership works that are of significant concern and that need to be addressed. One of the causes for concern has been the low level of involvement by Board members in evaluation activities. Only seven Board members took part in a survey looking at the partnership's effectiveness, which is reported below. Efforts to involve Board members in evaluation workshops over the last year have had an even poorer response, despite evidence that Board members value the approach to the local evaluation and see its importance.

5.2: Board members were asked to take part in a survey based on work done by Sure Start nationally to identify the characteristics of effective partnerships and compare how well they felt the partnership was doing in relation to these. At the outset two members expressed concerns about the level of commitment to the partnership, one commenting that only six partners had been regular attenders at Board meetings over the last 15 months.

5.3: There were mixed views about partners' willingness to work together, with questioning of whether partners were clear about their roles and the requirement not to simply represent their agencies viewpoint. While positive progress has been made in relation to making Board meetings accessible, there were issues about how inclusive these were with the suggestion that some Board members tended to dominate meetings. There was also a range of views as to how transparent decision-making was within the partnership.

5.4: The Programme Manager when asked to comment on the effectiveness of the Board felt it had been effective in getting the delivery plan together and in making decisions about the capital programme. However, once the staff group were in place she thought it had displayed less commitment and a view that decisions should be made '*on the ground*' and that they now tended to look for a '*steer*' in making decisions.

5.5: She also expressed concerns about the level of commitment within the Board and felt that this was not conducive to joined up working. A factor influencing this was that the agenda was becoming Education focused and tied to the creation of Children's Centres.

Strategic planning

Board members taking part in the survey in general recognised limitations in the extent to which the Board acted strategically. Two people felt that the Programme Manager took the majority of strategic decisions, though most did not take this view. However, the majority were concerned about the limited extent to which the Board was taking strategic decisions, one person commenting that *'its our biggest weakness – it means there isn't a partnership approach, or ownership to improving services and identifying barriers to change.'* Another thought there were implications for the mainstreaming of services in not being *'a real partner'*.

5.6: The programme manager also felt that Board members had quite a limited involvement at the strategic level, which was attributed to limited background knowledge and ability to get involved. This has implications as to the level of responsibility that the Programme Manager has in the decision-making processes within the programme.

Local level

5.7: At the local level there is good evidence of effective partnership working as evidenced through work with the four Family Centres.

5.8: Asked to describe the positive impact Sure Start has had on their services, the Family Centre co-ordinators all agreed that the capital expenditure to expand and improve their premises had increased their capacity and provided better facilities for families and children. Regular support during some sessions from Sure Start workers, plus the ability to accompany Family Centre staff on home visits to new babies, and access to a Play Therapist had also increased their capacity.

All of the Co-ordinators felt that Sure Start had added value to their services. They identified 3 key factors for this:

- ▶ The availability of Involvement Workers to introduce new families to the Family Centres has increased general uptake of their services with key target groups.
- ▶ The ability of Involvement Workers and Community Nursery Nurses to provide additional information on referred families, drawn from home visit assessments, to enable Family Centres to offer appropriate services.
- ▶ The ability of Sure Start to act as a point of contact, or referral agency, to other key service providers, for example for parents in need of benefits advice, or with a housing problem.

5.9: The general view of Co-ordinators was that working arrangements with Sure Start now are effective. This is largely credited to the willingness and efficiency of Sure Start staff on one side, and proactive approaches to facilitating communication by co-ordinators on the other. Co-ordinator membership of Sure Start working groups also helps, for instance the Delivery Group and the Evaluation Working Group.

5.10: Reflecting back, all four agreed that working arrangements had improved over the 3 years, as relationships have developed, although one did note that recently some Sure Start staff had been moved around at short notice, which had affected continuity of communication and service delivery.

5.11: Co-ordinators were particularly impressed with Sure Start's success in recruiting families described as 'hard to reach' [see p. 12]. The factors identified which contributed to this success, were the flexibility and range of skills and experience within the Sure Start staff team, for instance bi-lingual skills; the networking ability of team members and their willingness to use the knowledge and resources of other local agencies.

5.12: When asked what difference they thought Sure Start was making to families in the area, Co-ordinators recognised that staff were supporting families with practical and emotional problems; befriending them; helping them to access services and enabling them to take up opportunities outside the home. Importantly, being offered services through Sure Start, which is a universal programme, has no stigma.

Mainstreaming

5.13: The Partnership Board has established a small sub-committee to deal with issues of mainstreaming, although this group has not always been well attended. The Programme Manager has identified the Trust Centre as an initiative that needs to be mainstreamed. However, the development of Children's Centres, which will need to be operational by April 2006, has major implications for the mainstreaming of services.

5.14 The sustainability of Sure Start services will also depend on the extent to which there is local ownership of, and involvement in, running them. The BIBs group offers a good model for how other activities currently run by Sure Start staff could become more parent-led and sustainable in the long term.

6: Parental involvement and participative evaluation

6.1: Parental Involvement offers the Sure Start programme the opportunity to strengthen the base of its activities by drawing on the local knowledge and experiences of parents and carers who are, and whose children are, direct beneficiaries of the services it provides. Their contributions can help to make services more appropriate, more effective and more efficient.

6.2: For the parents and carers involved, they have opportunities to learn new skills, to influence decisions that have a direct bearing on the lives of the families and children in their community, to gain knowledge and confidence and, potentially, to prepare themselves for new roles in the workplace.

Partnership Board

6.3: At the beginning of the programme, the Partnership Board demonstrated a commitment to parental involvement. In the first year, there were 6 named parent representatives on the Board itself. A structure for involvement was devised based on Parent Groups in each of the, then, 6 centres of operation for Sure Start, feeding into a Parents Forum made up of representatives from the centres. From the Parents Forum, representatives would be nominated on to the Board.

6.4: Parent representatives were regular attendees at Board meetings, several had been involved in the process since before the delivery plan was approved and therefore had a good understanding of how the programme had developed. They were able to draw on that experience to contribute to discussions at Board level. In the early months, however, the capital programme was of primary concern to the partners and parent representatives felt there was little they could usefully contribute.

6.5: The Board delegated responsibility for the local evaluation to the Parents Forum and parent representatives' main contributions to the Board meetings were reports on the progress of the Parents Forum and the Evaluation Working Group [EWG].

6.6: Over a period of time, parents who had been involved from the beginning, and who had developed skills and knowledge through that process, moved on into other spheres, including paid work, especially when their children no longer qualified for Sure Start support.

6.7: A parent representative has recently been elected as Chair of the Partnership Board. She is, however, the only parent currently regularly attending the Board meetings. The Board has received a report of the evaluation of the Parents Forum, with recommendations to produce and implement a specific policy on parental involvement. It has recently agreed to appoint a Parental Involvement support worker to further develop and implement parental involvement.

Parents Forum

6.8: Responsibility for the local evaluation provided an opportunity to review the role of the previously informal Parents Forum and the rights and responsibilities of parent representatives. Sure Start commissioned an independent development support worker for the Parents Forum, from Gloucester CVS, who was able to work with the parent representatives to agree terms of reference, training needs and priority areas of work. Parents subsequently participated in training designed to support their roles as representatives, identified issues and discussed parent members' concerns.

6.9: A committed group of parents was involved with the Parents Forum for quite a long time but attendance dropped significantly over time. EWG members felt, on reflection, it may have been the 'neutrality' of the independent facilitator that helped to keep the Parents Forum together. Parents had felt they could facilitate Forum meetings themselves, but that turned out not to be the case. In addition, there were difficulties in providing childcare for parents attending various meetings, which was a barrier to consistent parental involvement.

6.10: By the Spring of 2003, the suggestion was made to the Evaluation Working Group that an evaluation of the Parents Forum be undertaken. A parent was involved in planning, devising and undertaking the evaluation with Sure Start staff members.

6.11: The purpose of the evaluation was to explore how the Forum had worked over the previous 20 months; to identify its strengths and weaknesses and to gain a clear understanding of its function and purpose within Sure Start. The key groups contacted, interviewed as individuals, were parents, Sure Start staff, Family Centre co-ordinators and Board members.

6.12: The findings of the evaluation revealed that parent representatives were motivated by a wish to support the work of Sure Start, from which they had personally benefited. All respondents were dismayed by the lack of communication between the Parents Forum and other areas of Sure Start. No grouping interviewed had a clear understanding of where the Parents Forum fitted into the organisation as a whole.

6.13: Parent representatives felt that they were not listened to and not kept up-to-date with developments. They could not see that their involvement was making a difference. What they wanted was a closer working relationship with Sure Start staff, especially the Involvement Workers. They wanted clear communication and feedback routes and to know that their views would count.

6.14: The staff team, Family Centre co-ordinators and Board members identified some historical factors which may have contributed to difficult communication with, and within, the Parents Forum – territoriality, strong personalities, working with pre-existing parent groups. They also identified the need for a closer ‘team’ approach to working with parent representatives and the need for appropriate training and support to be available. Board members identified the need to recognise and value parents’ contributions, including incentives like the Fair Shares initiative that would reward parents for the time they committed. This was a key issue that had been discussed, and options presented, by the Parents Forum but which had not been resolved.

6.15: One recommendation that emerged from the evaluation was that the Board adopt a clear policy on parental involvement to be implemented across the Sure Start programme. A key message was that parental involvement needed a ‘fresh start’ within the Sure Start programme and that more member parents should be offered a range of ways to be involved.

Delivery Group

6.16: Within the Sure Start structure, the Delivery Group is the operational management centre of the programme. There has always been a parent member on the main Delivery Group but the remit of the group was not previously clear so the contribution of the parent member was restricted.

6.17: In response to EWG recommendations, decision-making has been devolved to delivery sub groups – one per Sure Start objective area. Delivery sub groups are able to broaden out their membership to all stakeholders with an interest in a particular objective area, for example Strengthening Families and Communities, and are obvious groups for parents to be involved in.

Projects

6.18: The review of currently funded projects, to assess their current monitoring and evaluation processes, asked how parents/carers influenced the work of each project:

- ▶ Only one project is currently 'parent-led'. BIBS, the breast-feeding support group, is run by parents who have been trained as peer supporters, 7 of them are from the Sure Start area although the group is open city-wide. Parents plan and deliver the activities of the group and are supported by staff from Sure Start and other agencies, on request. This provides a helpful model for other similar groups within Sure Start.
- ▶ A few projects have actively canvassed parents input into planning sessions by recording their comments on clip boards, with post-its and 'quick listing' activities during sessions. These include the Baby Group, the Dads Group and the Starvaell drop-in.
- ▶ Home visits are considered to be 'parent-led' as the parent/carer sets the agenda for the visit and Involvement Workers do not call with a pre-set agenda.
- ▶ Other services are delivered 'in partnership' with parents/carers, for instance Speech & Language Therapy. External services like the Library van and Care and Repair have feedback forms but more generally in other projects the feedback is informal and verbal. Suggestions are not recorded, but workers listen and parents' comments may inform delivery.

6.19: As a consequence of the review, projects are now considering more on-going participative approaches to feeding parents/carers views into service planning and delivery on the ground.

A new approach to parental involvement

6.20: With the structure for parental involvement currently under development, those few parents who continue to be actively involved are acting more as individuals than representatives.

6.21: The Objective 4 [Strengthening Families and Communities] delivery sub group considered options for the future of parental involvement in the programme and came up with a new model, which has been agreed by the sub group and ratified by the Board.

6.22: The model is based around parents/carers becoming involved through delivery sub group membership. An induction and training package would be put in place to inform all interested parents/carers of the options for involvement: sub group, sub group and EWG or Board etc. They would then receive the appropriate information and support to enable them to participate effectively in those groups. Support could include childcare to cover time commitment, expenses [Fair Shares] and the opportunity to work closely with a named member of staff.

6.23: Parents would not be 'representatives' but could be linked with a particular centre and take responsibility to act as a role model to other parents in that centre who might be interested in becoming more involved and help to keep other parents/carers informed generally about the Sure Start programme.

6.24: To replace the Parents Forum, there would be a Parents Assembly, once a year, at which involved parents will be expected to report back to the wider Sure Start community about what they have been doing. At the Assembly parent/community representatives to the Sure Start Board would be elected to stand for one year. Involved parents would be seen as equal members of the Sure Start team and registered as Sure Start Volunteers.

6.25: Effective creche provision was a key barrier to active parental involvement in decision-making. This has now been overcome by creative thinking within the staff team. Childcare / crèche provision is now being managed by linking meetings to existing crèches / activities and making the best use of available crèche resources. This provides an efficiency gain and makes parental involvement more achievable.

Evaluation Working Group

6.26: The EWG membership has been drawn from the range of stakeholders in the programme – parent representatives, staff, representatives of partner agencies. All members, including parent representatives, have been involved in identifying key themes for the Local Evaluation, devising questions and methods for evaluation research. They have had some training on evaluation processes and techniques and have been actively involved in collecting and analysing data and making recommendations.

6.27: Although the EWG has maintained regular attendance by at least 2 parent representatives until very recently, the links with the issues and concerns of the Parents Forum have been, on reflection, less robust. The sense of the local evaluation being the responsibility of the Parents Forum was lost along the way and the routes into the decision-making delivery sub groups, in order to ensure responses to the recommendations of the EWG, became stronger

6.28: With the decline of the Parents Forum, active parental involvement in the EWG has also reduced. This has implications for the delivery of the local evaluation using the Participative Evaluation approach.

6.29: The EWG has undertaken several strands of evaluation activity to inform this report. The issue of parental involvement has emerged in all but one. The membership survey did not ask specific questions about respondents' views on being involved in the planning or management of the programme. The focus of the survey was to collect data on members' use of Sure Start services.

In the Staff survey, low scores were recorded for the extent to which staff think beneficiaries are able to directly influence the work of Sure Start and several staff members commented on this as an area for improvement. Parental involvement was identified as one of the most significant areas of underachievement in the programme. The changes that staff would like to see included more parental involvement in decision making, better consultation with parents and clear, active responses to suggestions made.

6.30: When interviewed for the evaluation, the programme manager recognised that parents would have to give significant time and commitment to participate effectively in decision-making processes within the organisation.

6.31: She would like to see more parental involvement but needs to prioritise limited resources and time towards preventative work with very vulnerable children and families. Less vulnerable parents might have time they could contribute to the programme, but the workers who could induct and support their involvement are limited in the time they have available and, in the Programme Manager's opinion, this activity is not currently a priority.

6.32: In reflecting on the findings of the various evaluation activities in relation to parental involvement, the Evaluation Working Group identified a number of issues:

- ▶ There is a need to define where the overall responsibility for setting up the necessary procedures for parental involvement lies – i.e. induction packs, CRB registration etc. Some work has been done for BIBS on these points within the Health objective because it became a priority for the Development Worker in order to support active parents.
- ▶ Support is the key to successful parental involvement – both practical, for instance childcare or transport, and 'buddying' – linking up with already involved parents.
- ▶ There is a need to value people's input - parents need to know that their input will make a difference.

Sure Start needs to take a capacity building approach to ensure long-term sustainability and mainstreaming. It needs to work with parents / carers in a different way, offering graduated support [intensive to 'hands off'] leading to parents running groups and activities themselves. The programme should build on and adapt the BIBS project model across the programme.

7: Conclusion

7.1: The findings of the local evaluation show that the BTWC Sure Start programme has many positives: parents and carers who are using the services are satisfied with them; the programme appears to be on track in meeting its targets against national objectives; there is a generally high level of job satisfaction amongst the staff team, particularly those working directly with families; working relationships with local partner agencies and organisations have steadily improved over the lifetime of the programme so far and the programme is being successful in accessing families considered to be 'hard to reach'.

7.2: These findings do need to be qualified however. The local evaluation has not obtained the views of parents and carers who do not use, or who have stopped using, Sure Start services; the monitoring data and the management systems for recording projects' achievements against targets towards national objectives is insubstantial and confused and there are gaps in the information available to determine programme efficiency and value-for-money. The identification of these information gaps has been useful and should inform the next phase of the local evaluation. The importance of collecting evidence of achievement towards targets, and of 'what works', cannot be over-emphasised, especially in planning future services.

7.3: Nevertheless, the positive responses from service users and local partners should be acknowledged and recognised within the programme and by partner agencies. Qualitative and anecdotal evidence suggests that successful interventions with families are happening throughout the programme.

7.4: Issues have also emerged from the evidence which require action. The level of commitment to the Partnership Board and programme overall is a cause for serious concern, which has implications for the development of Children's Centres. The degree of strategic decision-making required to progress this development appears to be absent from the Board. The level of responsibility implicitly vested in the Programme Manager in this situation is not appropriate.

7.5: The reported lack of parental involvement undermines the delivery of the programme, including the local evaluation which is based on a participative model, and is

counter to the principles of Sure Start. Regrettably, the only national target for parental involvement is to have parents as members of the Partnership Board. This has served to reduce, to some extent, the prioritising of support for parental involvement elsewhere in the decision-making process. It is to be welcomed that the Board are currently supporting proposals to re-prioritise that support by the creation of a dedicated post.

8. Recommendations

Programme delivery

8.1 The Partnership Board should develop and agree local measures for the performance of the programme that measure what the programme is achieving.

8.2 The terms of reference of all the different groups within Sure Start should be reviewed to ensure that they are relevant, clear and to give members a chance to sign up to them again. This process should begin with the Partnership Board, followed by the delivery sub groups.

8.3: The programme needs to stick to and reinforce the agreed process for operational decisions. When this does not happen it should be discussed at the monthly meetings between Development Workers and the Programme Manager. These meetings should also be used to discuss programme wide actions and strategy that come out of the discussions and decisions made at delivery sub groups.

8.4: There should be a logical sequence for meetings that is planned in advance and communicated clearly i.e. delivery sub groups then full delivery group then Board, so that the correct process is followed. The Development Workers should be involved in agreeing dates for these meetings and should ensure that members of the delivery sub groups know which items require a decision.

8.5 The weekly meetings of the Involvement Workers and Community Nursery Nurses should become the basis for more formal peer review and be used by the Sure Start team as a way of assessing and monitoring quality.

Parental involvement

8.6 Building on the development of a new policy for Parental Involvement, an action plan for implementing this policy should be agreed by the Board.

8.7 The process of developing the Parental Involvement action plan should involve discussions within Sure Start management teams and delivery sub groups about the implications for the programme of implementing the policy e.g. staff time. Parental involvement activities should be prioritised and the potentially key role of Involvement Workers in supporting parental involvement should be developed.

8.8 Systems and resources to adequately support parents who want to get involved need to be agreed. These might include an induction pack [based on the Volunteer pack], CRB checks, codes of conduct, and appropriate training and support. The new Parental Involvement Worker should work with parents and the staff team to put these systems and resources in place.

8.9 Over the next two years Sure Start workers should move, where possible, from running groups / activities themselves to supporting parents to run them, following the BIBs model. This capacity building approach will require an attitudinal / cultural change within the staff team and access to appropriate skills, support and funding for the groups.

8.10 The next phase of the local evaluation should have a renewed emphasis on the active involvement of parents in evaluating the services they use.

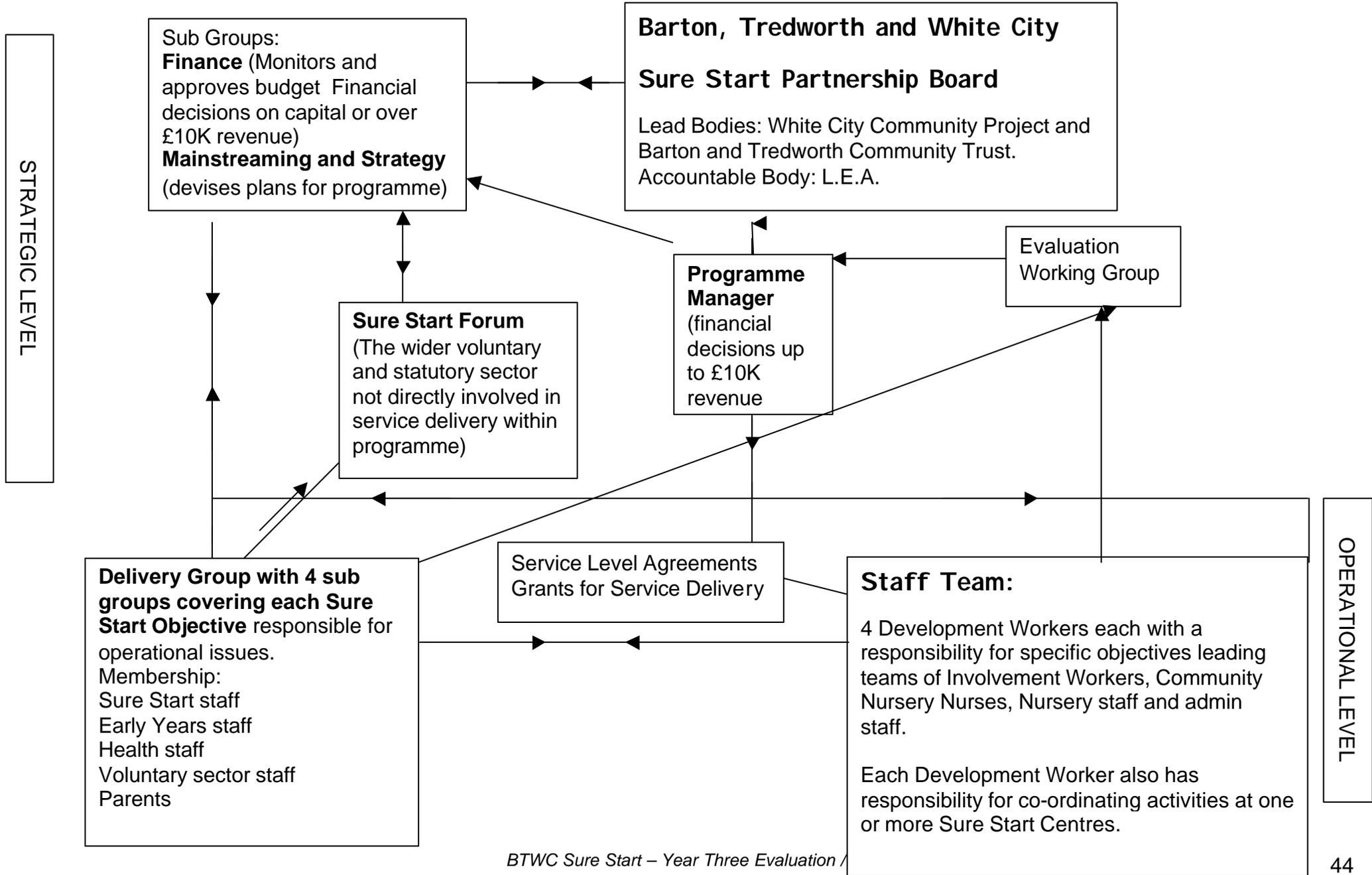
Mainstreaming

8.11 The Sure Start team should identify which groups could work towards following the BIBS model and set some markers to measure progress towards this happening. This should be seen as a key part of the mainstreaming strategy for the programme.

8.12 The Sure Start Partnership Board should review its terms of reference and also the way that it operates strategically. It should be driving the mainstreaming of Sure Start services and disseminating the lessons from the programme within partner agencies. This may require a cultural change within partner organisations.

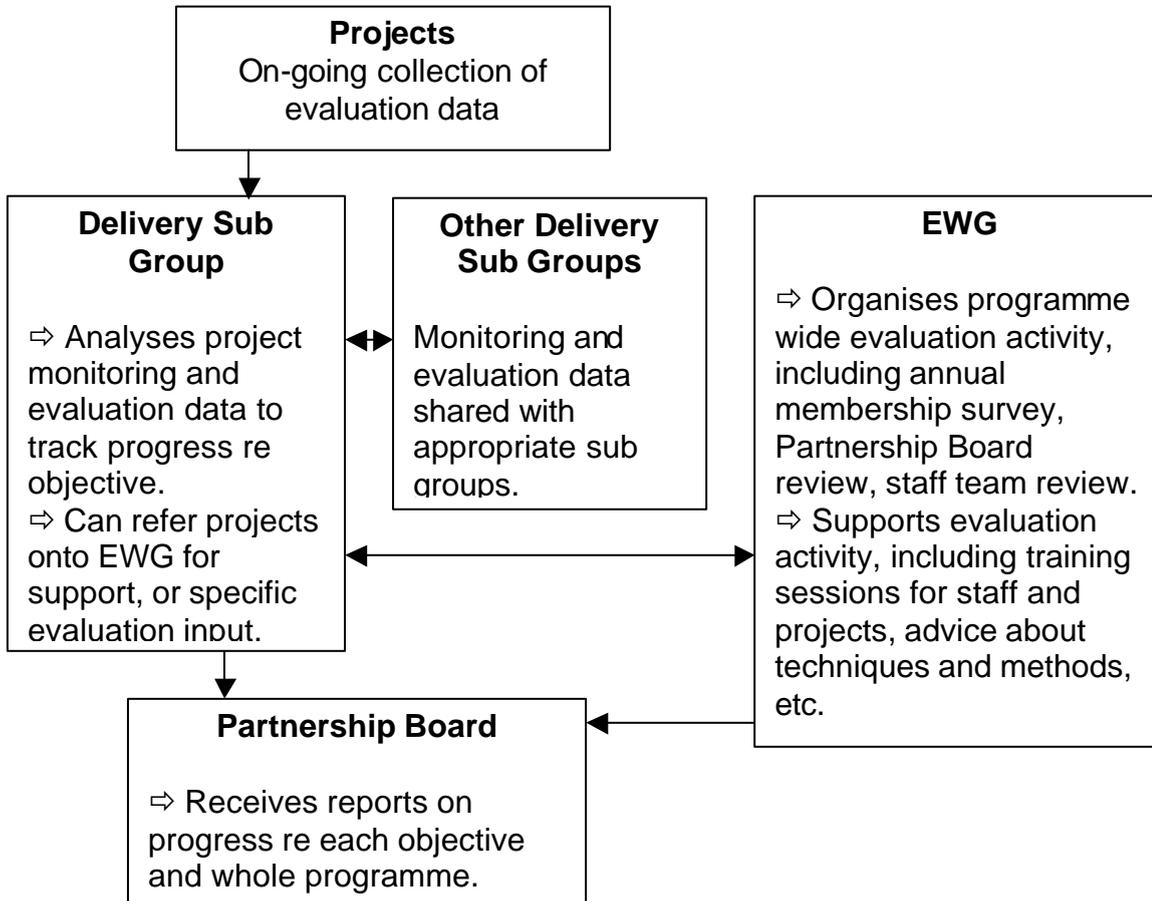
8.13 All agencies involved in the development of Children's Centres should come together to agree a shared vision / ethos. This will enable them to deal effectively with any changes in Government policy.

Appendix 1



Appendix 2

Sure Start Evaluation Framework



Appendix 3

Outline of work undertaken as part of the Local Evaluation

November 2001	<ul style="list-style-type: none"> ▪ Icarus commissioned ▪ initial contacts with key people ▪ desk review, background to BTWC Sure Start
December	<ul style="list-style-type: none"> ▪ evaluation framework design workshop [small group key people] ▪ agree the outline evaluation framework and process ▪
2002	
January	<ul style="list-style-type: none"> ▪ first EWG meeting – introduce members to PE ▪ locate EWG within BTWC SS organisational structure ▪ prepare to familiarise other BTWC Sure Start stakeholders with PE
February / March	<ul style="list-style-type: none"> ▪ introducing stakeholders to PE and ensuring their support for the process <ul style="list-style-type: none"> ○ Parents Forum ○ Delivery Group [Programme management team] ○ Sure Start Board
February	<ul style="list-style-type: none"> ▪ EWG meeting: <ul style="list-style-type: none"> ○ monitored stakeholder familiarisation ○ planned first phase evaluation, strategic level interviews with Board members ○ began to identify key questions for the evaluation
March	<ul style="list-style-type: none"> ▪ Parents Forum <ul style="list-style-type: none"> ○ agreed Terms of Reference ○ discussed questions to ask parents & best ways to reach them ▪ EWG meeting <ul style="list-style-type: none"> ○ detailed planning phase 1 evaluation ○ interview guide – strategic level ○ questionnaire – staff ○ pinboard questionnaires/discussion groups - parents ▪ staff and parents training workshop <ul style="list-style-type: none"> ○ identified staff/parents barriers to involvement in evaluation/Sure Start & how to overcome them ○ familiarisation with methods for evaluation ○ staff/parents contributions to content ○ planned putting evaluation into practice ▪ prepare evaluation materials
April	<ul style="list-style-type: none"> ▪ prepare update for national Sure Start evaluation team ▪ undertake focus groups/ pinboards with parents [staff/parents] ▪ arrange & undertake partner interviews [icarus] ▪ evaluation workshop with Sure Start Forum ▪ EWG meeting <ul style="list-style-type: none"> ○ planned analysis of phase 1 findings & timetable for

	<ul style="list-style-type: none"> interim report o planned phase 2 evaluation
May	<ul style="list-style-type: none"> ▪ undertake focus groups/ pinboards with parents ▪ undertake partner interviews ▪ planned Delivery Group involvement ▪ staff meeting – questionnaire follow up ▪ EWG meeting <ul style="list-style-type: none"> o Analysed data from focus groups and pinboards o identified initial recommendations
June /July	<ul style="list-style-type: none"> ▪ Interim report circulated to: <ul style="list-style-type: none"> o EWG o Board evaluation sub group meeting o Delivery Group o Parents Forum ▪ Application to Board member to act as Evaluation champion ▪ Plan evaluation activities over the summer <ul style="list-style-type: none"> o Identify volunteers o Prepare & produce materials
August	<ul style="list-style-type: none"> ▪ Evaluation activity/SS stall – Starvaell fun day ▪ Evaluation activity – Teddy Bears Picnic
September	<ul style="list-style-type: none"> ▪ EWG meeting – recorded responses to evaluation recommendations ▪ Delivery Group review [1] – feedback on evaluation process
October	<ul style="list-style-type: none"> ▪ Delivery Group review [2] – new structure/roles and responsibilities ▪ EWG - Plan short term Health Objective evaluation to inform SS budget setting <ul style="list-style-type: none"> Produce monitoring data Scrutinise Service Level Agreements & compare with monitoring data Identify parents & Involvement Workers to be involved Devise interview guides Allocate interviewers
November	<ul style="list-style-type: none"> ▪ Evaluation presentation to Parents Forum ▪ Health Objective evaluation interviews undertaken & written up by EWG members ▪ Plan feedback to general membership via SS newsletter article ▪ EWG <ul style="list-style-type: none"> o Analysis of HVA/MVA findings o Initial recommendations agreed including follow up evaluation activity in New Year
December	<ul style="list-style-type: none"> EWG - review HV/MW evaluation <ul style="list-style-type: none"> o Plan activities until end of March & EWG meetings for 2003 o Proposal for on-going evaluation

2003	
January	<ul style="list-style-type: none"> ▪ EWG – plan EWG review ▪ Evaluation champion identified ▪ Article produced for SS newsletter ▪ Involvement Worker focus group
February	<ul style="list-style-type: none"> ▪ EWG review session – champion participated ▪ Babies in Gloucester evaluation ▪ Additional HVA/MWA evaluation survey planned ▪ Plan stakeholder workshop
March	<ul style="list-style-type: none"> ▪ Stakeholders evaluation workshop ▪ Survey with HVs/MWs ▪ Collation of survey results
April / June	<ul style="list-style-type: none"> ▪ EWG – discussion of Health Objective findings <ul style="list-style-type: none"> ○ feedback from stakeholder workshop ▪ Interim evaluation report
Jul / Sep	<ul style="list-style-type: none"> ▪ Evaluation of Parents Forum
Oct / Nov	<ul style="list-style-type: none"> ▪ EWG ▪ Evaluation of Baby Group ▪ Project visits: Supporting individual projects develop their own systems for evaluation ▪ Membership survey: questionnaire administered by Involvement Workers during their usual contact with parents ▪ Partnership Board evaluation workshop ▪ Partnership Board survey ▪ Meetings with Development Workers about Delivery sub groups
Dec	<ul style="list-style-type: none"> ▪ EWG – analysis of survey results ▪ Staff team evaluation workshop ▪ Review of Delivery sub groups ▪ Interview Programme Manager
2004	
Jan	<ul style="list-style-type: none"> ▪ EWG – developing recommendations for Year 3 Report ▪ Survey Family Centre Coordinators

Appendix 4: Overall progress against national and local objectives

National Sure Start Target	Baseline	National / local objectives	Timetable / Milestones	Progress – monitoring data
1: Improving the availability, accessibility, affordability and quality of childcare	Childcare places was 20FTE as at 31/03/01	<p>A 12% reduction in the proportion of children under 5 in households where no one is working</p> <p>To create new childcare places and out of school childcare places.</p> <p>Get childcare leaflet published – better take up of local provision</p>	<p>By March 2006 Number of places within 1% of county average.</p> <p>July 03</p>	<p>As at Sept 03 = 38%</p> <p>As at Sept 03 increased to 124</p> <p>Published July 03</p>
2: Improving children's ability to learn	<p>Baseline at 2001 = 76% Reading, 86% writing, 65% spelling, 90% maths, at 2002 76% Reading, 86% writing, 66% spelling, 90% maths)</p> <p>Baseline in March 2001 = 4% of families</p>	<p>5 years old on DfES Foundation Stage Profile and 2 years old using Sure Start Speech and Language Measure</p> <p>An increase in the use of libraries by families with young children.</p> <p>All staff Hanen trained so that all 2 year olds can be measured using SSLM and develop appropriate support - Improvement in DfES</p>	<p>April 04</p>	<p>As at Sept 03 % of children with Speech and language development delay = 28%</p> <p>Figure as at 31 March 02 = 63%</p>

		Foundation Stage Profile (communication, language and literacy)		
3: Improving social and emotional development	<p>Normal development on SSLM at March 2002 = 90%</p> <p>Baseline at 2001 =3</p>	<p>All families with new born babies to be visited within 2 months of birth.</p> <p>Develop protocol with health so that programme can intervene with families earlier - 100% target of visiting all families with a new baby within 2 months of birth</p> <p>Develop evidence on social and emotional development within Sure Start Neighbourhood Nursery setting - Improvement in DfES Foundation Profile</p> <p>Decreased the numbers of children re-registered on the child protection register within 12 months.</p> <p>Get Sure Start Neighbourhood Nursery established as separate company</p>	<p>Sept 03</p> <p>Aug 03</p> <p>April 04</p>	<p>51% within 2 months</p> <p>Nearly 100% within 4 months</p> <p>At 2003 =4</p>
4:Improving health	Baseline 37 children admitted to hospital for emergency treatment of severe injury, lower respiratory infection or	Nutrition, safety and hygiene advice given to all parents. Reduction by 10% in the number of children admitted to hospital as an emergency with gastro-enteritis, a lower respiratory infection or a severe injury.	Sept 03	

	<p>gastro-enteritis as at December 2000</p> <p>First time mothers contacted by Sure Start 0% to March 2001</p> <p>Baseline as at March 2001 = 51%</p> <p>Figure as at March 2001 = 24%</p> <p>Mothers breastfeeding at birth = 51% as at March 2002</p>	<p>Ante-natal advice and support available to all pregnant women.</p> <p>Develop better links with other agencies to ensure equality of access - Programme aware of all families in ante-natal period and groups available to all to receive advice and support</p> <p>An increased percentage of mothers with Post Natal Depression receiving appropriate care.</p> <p>Reduction in the number of mothers smoking in pregnancy</p> <p>Breastfeeding supported</p>		<p>4% as at 2002)</p> <p>As at Sept 2003 = 100%</p> <p>As at Sept 2003 = 27%</p> <p>As at Sept 2003 = 57%</p>
5:Strengthening families and communities	Households with a child under 5 where no-one is working -	A 12% reduction in the proportion of children under 5 in households where no one is working	Needs to reduce to 33.11% by March 2006	Note: may be to many variables to assess impact that programme makes e.g. state of the local and national economy

	<p>percentage as at 31/5/01 was 37.62%</p> <p>19% of parents satisfied or very satisfied with local services as at 2001</p> <p>Baseline as at 2001 = 3</p>	<p>An increase in the proportion of families with young children, reporting personal evidence of an improvement in the quality of family support services.</p> <p>An increase in parental satisfaction with services</p> <p>Increased parental representation on programme board.</p> <p>Effective links with Jobcentre Plus, local training providers and FE/HE institutions.</p> <p>Complete IAG Matrix</p> <p>Get parents to produce newsletters</p>		<p>As at Dec 2003 = 100% of those surveyed were satisfied or very satisfied with Sure Start services</p> <p>As at Sept 2003 = 3</p> <p>Accreditation achieved Jan 04</p> <p>First issue Nov 03</p>
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