The following six pieces of evaluation have been tackled during 2003, with some of the work ongoing. Brief details are included below for the purposes of this summary. The full reports of work described will be available through NESS and the Northern Hull programme.

1) Early Years Report

In 2001 a baseline satisfaction survey was conducted in our area with participation from the parents at every stage. However, the evaluation worker for the programme at that time moved on from the post without having had time to write the report and use the data. This ‘Early Years Report 2003’ completes the process, but rather than just presenting data that would be quite out of date in 2003, it connects the findings to developments that have taken place in the programme since. As such it has proved to be quite a substantial piece of work.

One of the ways that we have used findings in the programme development has been in the focus of our evaluation in 2004. Many parents told us that one of their major concerns was the ever-present influence of older children in the community, whether siblings, at school, or in the streets. We are planning to spend time seeking the views of older primary children, and also widening the collaborative opportunities for working with other organisations operating services for older children in our community.

2) Speech Therapy: The Journey

In early November 2003 the Speech Therapy Team conducted a workshop at the regional conference ‘Making a Difference in Child-Centred Practice’ for the Yorkshire and Humberside programmes. The workshop was entitled ‘A Family-Centred Approach to Language Development’ and the presentation told the story of the evolutionary journey that the team had been taking in creating the speech therapy service at Northern Hull. The presentation has been written up as a narrative piece, including evaluation methods employed by the team and the way in which these have informed development along the way, such as in changing the level of input from Health Visitors and planning an increase in frequency of home visiting.

The sense of ‘story’ during the workshop was completed by the participation of a parent who had been involved as a new mother, and who told of the significant changes that had taken place in her life and that of her child through the early support of the service. Her ongoing level of participation at the programme here is such that there is much more narrative to be told. The rest of the story will no doubt contribute to evaluation in other ways in due course.
3) The Home-Start Group: Valuing Different Approaches

Home-Start, as a partner agency, has been running a group for some time that is consistently very well attended. Towards the end of 2003 a questionnaire was developed for attending parents that was designed to discover exactly what is most valued about this group and why, since it is quite different to other Sure Start sessions. The questionnaire was informally integrated into a day’s activities and was well received. It has yielded some important information particularly concerning the social, friendship needs of parents as well as giving the Sure Start programme specific evidence of successful practice and joint working. The findings are currently being collated in writing in conjunction with student social workers who have been working here as part of their qualifying placement, and will be used to review the progress of the group and this particular approach to parent support.

4) Midwives Asking Questions About Domestic Violence

Throughout most of the life of the service, the Sure Start Midwives have been collecting information from mothers-to-be about any experience of domestic violence, and are currently still doing so during the normal course of their consultations. Findings from October 2001 to October 2002 were collated in early 2003. The paper produced includes an introduction to the context in which the research takes place generally, the questions routinely asked, findings, and the conclusions that have been drawn from the data gathered between the specified dates.

There are some mainstreaming issues attached to this research in that the results indicate that the process is a non-intrusive, well-received way of gathering information, and one that, results show, could be critical to the health of a substantial percentage of mothers and babies. It has been decided that the mainstream midwifery service at present, though having been made aware of results, and having been made aware of the potential for incorporating the simple procedure into all routine consultations, will not be using this method of support.

5) Mapping for a Culture of Evaluation

In order to make sure that all the staff are taking part in evaluation and have the support they need to do so, an inventory is underway of all the current methods of data collection and evaluation that staff are involved in. This is with the aim of co-ordinating the approach to evaluation across the programme on an ongoing basis, and addressing any gaps that there have been up until now as well as strategies for using findings in forward planning. Focusing the mapping process on staff roles rather than activities is done with a view to developing a culture of evaluation and ensuring that it can be consistently about people and not just paper. The process began in the second half of 2003 following a change of evaluation staff, and findings from it have also contributed to the development of a new, more comprehensive evaluation strategy to run from January 2004 to May 2005.
6) Cost-effectiveness

The unit costings for 2003 have been deduced and this information will form part of a more detailed evaluation of cost-effectiveness in 2004, using a thematic approach.