

SURE START HAPPY ELEPHANT

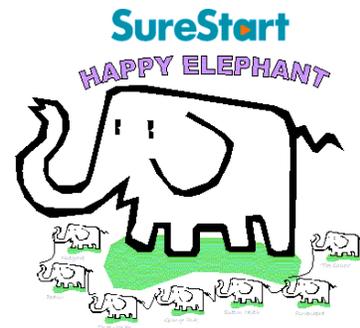
LOCAL EVALUATION REPORT

(First 18 months)

By

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March 2004



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ACKNOWLEDGEMENTS

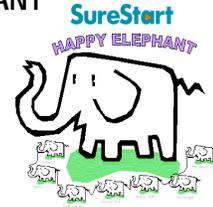
The evaluation team would like to thank the Happy Elephant staff, including the Management Board, partners and parents for their cooperation and support with this evaluation of the programme. In addition, we thank Janis Jarvis and John Hughes for their assistance with the data collection and analysis. Lastly, we are grateful for the administrative support in the preparation of this document.



LOCAL EVALUATION OF SURE START HAPPY ELEPHANT

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SUMMARY – March 2004

The 27 month evaluation began in December 2002 and will be completed in March 2005. The aim of the evaluation is *to generate clear judgments relating to the extent to which the priorities in the Sure Start Delivery Plan and the specific project funding criteria have been effectively addressed and met.* This summary provides a brief overview of the general findings relating to the effectiveness of the programme over the **first 18 months** of the evaluation process.

The evaluation employed a mixed methodology and collected both quantitative and qualitative data. Data collection methods included;

- Documentary Analysis
- Observations
- Survey of Professionals' and Volunteers' Views
- Survey of Residents' Views
- Groups/Individual Interviews
- Audit of in-house evaluations

Ethical approval was sought from the Local Research Ethics Committee.

This summary provides key findings in relation to both **process** and **outcomes** of the programme. The full report is available at Sure Start Happy Elephant.



"People are doing things they would not have done – like Aqua Tots, going swimming with their child. We see parents implementing some of the things they have been taught, like in the behaviour management group... it definitely has a knock on effect with their relationship with their children. They bond better. And they see that it is not only them that have the problem." (HE worker)

KEY FINDINGS

There has been much effort, energy and commitment to develop Happy Elephant over the past 18 months by a dedicated core of people, who work well independently and as a team. These individuals should be congratulated for their hard work. Clearly the programme is making a very real difference to parents and children in the catchment area.

Governance

1. Governance arrangements are in place in line with National Sure Start guidance.
2. Happy Elephant has a healthy working relationship with their Accountable Body.
3. Over the relatively short life of the programme to date, some management/strategy groups have disbanded and others have formed as the needs and developmental stages of the programme shift.
4. Currently, some of these groups are experiencing low attendance. This is not being ignored by the Happy Elephant team, but is constantly being monitored. There is evidence that the team regularly questions the effectiveness of its governance arrangements and look for measures to improve them.
5. The parents' forum (Parents and Carers Unite) has been actively responsible for several activities, such as recruiting Happy Elephant workers, agreeing and preparing core policies and procedures etc.
6. The Management Board has worked hard to increase its effectiveness, e.g. by holding developmental days. The evaluation team suggest that it reviews its membership to consider including more 'hands on' workers such as a health visitor, midwife, speech and language therapist etc. Further, attendance at Management Board meetings needs to be reinforced to ensure progress.
7. Safety and standards policies and procedures are in place and used by the team, e.g. for child protection; commissioning services; safety; equal opportunities; grievance capabilities; whistle-blowing etc. Further, documents such as protocols for meetings and roles and responsibilities of staff have been developed and are understood by workers involved in the programme.

Infrastructure

8. It could be argued that the Programme Manager is key to the success of the programme. Happy Elephant has suffered from the original Programme Manager's extended periods of absence before she left to take up a new post in October 2003. Happy Elephant has subsequently been without a manager for five months.

'We have not had a Programme Manager for a while... there is no one directly responsible for things... you go to one person and that is not the right person... so you don't get a straight answer because we are not all doing our own job because we have gaps... when we got an acting manager it got better... but like we wanted to work with the dads, but then we have our jobs to do and helping out others because we are short, so we haven't got time to implement the things we would like with the dads.' (HE worker)

9. Time has also been spent recruiting other new staff. Several key positions, e.g. the speech and language therapist, have been advertised without success several times. In addition, there have been problems with the midwifery appointment. The recruitment difficulties have created some additional pressures on existing staff and has had a knock-on effect on the progress of the programme, resulting in several milestones not being met by the initial target dates set.
10. There was clear evidence that the majority of staff are motivated. Support in their role has been sparse, at times, due to the lack of a programme leader and other key staff.
11. Induction of new staff and continuing staff development opportunities are evident.
12. Staff understand the Sure Start philosophy and, in general, reflect this philosophy in the way they work.

'My commitment to community support and the principles of Sure Start is you know, what interests me... I am actually living a vision of this...' (HE worker)

'I think some more than others understand the Sure Start philosophy. I think people are aware of the underlying principles, but when faced with the immediacy of the work you get influenced by other people... there is not always time to reflect when short-staffed.' (HE worker)

13. Happy Elephant is still at a relatively early stage of development. This has meant that much time has been spent undertaking consultation exercises, getting an infrastructure in place and securing permanent premises. Involvement of individuals, particularly the community, can be very slow and will only develop more strongly as the programme embeds.
14. A lack of conspicuous permanent premises has, perhaps, hindered the impact and profile of the programme in the community.

Services

15. Five Core Service Teams are in place (*Outreach and Home Visiting; Support for Families and Parents; Support for Good Quality Play, Learning and Childcare; Primary and Community Health; Supporting Children and Parents with Special Needs*). These have actively been developing and running services for local families. Staff have been successfully working across teams where key members of staff were not in place. While this could have some negative consequences (when individuals are not 'expert' in the field), it does have the added benefit of workers gaining insights into other areas of service provision.
16. The balance between family support, health and early learning needs to be constantly considered.
17. Ensuring services are *accessible* and *inclusive* to different individuals and groups living in the catchment area are issues that are clearly on the agenda, e.g. in the 'Hard to Reach' Task Group they identified issues that they as a group needed to focus on, such as; *Not being tokenistic; Getting out and about, talking face-to-face with families; Taking a critical look at venues – are they suitable? Can accessibility be improved? Transport? Times – suitable especially for male carers? Identification of those families not accessing the services, and then ensuring marketing and advertising reaches them – or taking services to them!* Etc.
18. Parental feedback *clearly indicates their satisfaction with the groups and services offered as part of Happy Elephant*. Further, the findings indicate the *positive difference Happy Elephant was having on their lives and their children's lives*.

19. As well as the Happy Elephant programme considering the sustainability and mainstreaming of services, mainstreaming is being approached strategically across the five Sure Start programmes in St Helens. It is less evident that the statutory agencies themselves are engaged in the mainstreaming agenda.

Partnerships and Collaboration

External

20. Parental involvement is high on the agenda for the Happy Elephant staff. Continual parental consultation is evident, as is their representation in the various Groups. Further scrutiny of documents and survey results, however, revealed that it is often the same parents who are involved in various aspects of the programme, although... *'the Christmas Grotto went very well with over 80 families attending'* (HE worker).
21. It is recommended that the Parents and Carers Unite meetings focus not only on *information sharing* but also on actively planning and developing the services. There is evidence that this is taking place much more than in the early months – this is to be welcomed and encouraged.
22. 'Joined up' working appears to be improving. Again, recruitment difficulties have hindered this process, as well as some traditional ways of working within professions (as opposed to a more 'multiprofessional teamwork' approach), e.g. there are instances involving a resistance to sharing information etc. on some occasions.

'When I approach other partners they know about Sure Start. We can help to share resources and not duplicate. They don't feel threatened by us. We can support each other because they have similar targets.' (HE worker)

'Partnership working is difficult at times... and the law doesn't help, data protection doesn't help. You are taking professionals from all different agencies and organisations like the health service with different policies and procedures and you say 'well off you go!' (laughs). It takes time to work out how you can work together. I'm not sure that had been thought through when the earlier Sure Start programmes started. Hopefully now it has improved. It is not simple... it is about respecting and valuing other peoples' work. Some statutory agencies have trouble working amongst themselves let alone others ! (laughs) The voluntary sector is better, partnership is part and parcel of the way of working.' (HE worker)

23. Links with other local initiatives are apparent, such as some workers being members of several local strategic planning groups that enable them to keep up-to-date with the current context. Further, this helps to (i) avoid duplication in services (ii) identifies gaps in service provision and (iii) ensures better use of resources by sharing and collaborating on projects to ensure both value for money and sustainability.
24. Communication between agencies is hindered since they are still not all linked via email, but this is improving.
25. Time for meetings and getting everyone together (competing commitments) can be a problem in relation to the continuity and development of the programme.

26. Happy Elephant has successfully joined forces with other St Helen's Sure Start Programmes over activities that have borough-wide implications. Further, a particularly effective partnership has developed with Sure Start Central Link – another 5th wave programme in St Helens. The two programmes share a boundary and right from the beginning they made a commitment to work together for the benefit of both programmes.

Internal

27. The evaluation team feels that communication between the Happy Elephant team is, in general, healthy. There is clear evidence of strong collegiality and collaboration between team members.
28. On occasions, however, observations highlighted that there is a tendency to retreat into general discussion/chat during meetings, as opposed to the more difficult task of critical reflection, challenging each other, questioning and suggesting a strategy to move forward that involves a shift in attitudes and behaviour.

Quality and standards

29. The 6 monthly risk assessment, carried out by the Sure Start Unit, appears to be an effective vehicle for benchmarking specific areas within the programme and ensuring these benchmarks are met at regular intervals. Happy Elephant responded well when rated 'high risk' and became 'low risk' on the subsequent assessment.
30. M3's highlight that the productivity of the Programme is meeting the expected outcomes, given the age of the programme.
31. Safety and standards protocols for a range of important areas are evident, and appear to be implemented (see Governance section above).
32. On some occasions documents did not clearly state important information e.g. dates, what action is required and by whom etc. Further, some documents were not located in the correct file. Several files contained loose papers, documents that did not always relate to the name of the file. It was difficult, at times, during the documentary analysis to locate information pertaining to specific task groups, sub groups, core groups etc. We would suggest tighter attention is paid to recording details on significant paperwork and filing documents
33. There was clear evidence that collecting current information and evidence on which to base practice is an *intention* and several box files are in place for this purpose. It is hoped that once the staff is at full complement more emphasis can be placed on keeping up to date with current evidence.
34. Financial systems appear to be effective and directives from the Sure Start unit has helped to formalise systems for recording and monitoring significant financial data.

Evaluation and monitoring

35. The programme has allocated 5% of their funding to evaluating the programme. To ensure a robust and objective evaluation Happy Elephant commissioned an external evaluation team from the local university to work with the programme for 27 months.
36. The evaluation team have undertaken training and workshops for Happy Elephant staff in order that they become proficient at undertaking their own in-house evaluations. The evaluation

workshops have been successful in putting evaluation on the agenda for workers and helping them to undertake the process.

37. Equipment for evaluation purposes at Happy Elephant has been purchased.
38. In-house evaluation of service provision in relation to the needs of the community is apparent, although perhaps a little ad hoc at times. It is important that this is executed and that help is sought from the external evaluation team to ensure robust and measurable outcomes. In addition, time needs to be made available to analyse and reflect on the findings, and disseminate the results.
39. Several areas for the evaluation over the coming year have been identified by Happy Elephant staff in collaboration with the evaluation team

Marketing and publicity

40. A range of publicity campaigns have been undertaken to build up local awareness and knowledge of the programme e.g. newsletters, posters, activity days etc. A sustained effort is needed in this area as there is still a lack of certainty and expectation about the programme by some residents in the community.

'The admin person's role has been redefined to include marketing. When we send things out it is visually quite good and eye catching. But we do not really plan ahead...we have a very reactive approach and do not really promote things as well as we could. This is something we are working on.' (HE worker)

Key points from the residents' survey and the Happy Elephant workers survey are presented separately below.

RESIDENTS' VIEWS

There were 84 surveys completed by residents. The findings only represent **a small minority of residents (around 17%) and, therefore, cannot be generalised to the catchment area as a whole.**

Level of use of current community services

1. Nearly half the respondents (49%) did *not* use the health centre/clinic and a similar percentage did not visit the dentist. The chemist was frequently used by respondents. These results could imply that several residents purchase over-the-counter medications, as opposed to going to get a prescription from a health professional.
2. 57% of respondents used the library regularly and 32% attend church.
3. The best used community service was the chemist (82%).
4. The least attended community services were social services (2%), the job centre (7%), college (10%).
5. Nine different venues were used by the 24% of respondents who attended playgroups. The total number of respondents had 86 children under the age of 4. Therefore, it is perhaps surprising that a higher proportion of respondents did not use the playgroup facilities.

6. The main reason why individuals did not use the community services was that they did not need them. However, several additional comments indicated that respondents felt some of the services were poor, or open during inconvenient hours.
7. Respondents were asked about their satisfaction with the level of information they received (i) when pregnant, (ii) if suffering from post-natal depression, (iii) on child health issues, and (iv) employment training services. It appears that information could be improved in the area of post-natal depression.

Awareness and use of Happy Elephant

8. The majority of respondents (87%) had heard of Happy Elephant. This indicates that advertising and marketing campaigns are largely successful at the awareness stage. In addition, the health visitors and other professionals appear to be visible advocates for the programme. Word of mouth, from friends and neighbours, is also a valuable recruitment approach and appears to be effective for Happy Elephant. In light of this perhaps an incentive for parents should be offered for recruiting other parents into the programme and who will subsequently become actively involved themselves in the services.
9. Several reasons as to why respondents did not use the service were given. Reasons included their children being too old, their children were about to start nursery and they were too busy. One person believed their child was too young for the Sure Start – this is a further indication that respondents were not always sure of the purpose of Sure Start. One further comment was that the programme was '*for council parents*', indicating that some stigma may be attached to it.
10. Some respondents who did not currently use the programme displayed an intention to use it in the future.

Satisfaction with Happy Elephant

11. Where individuals had used Sure Start services, *they were all very satisfied or satisfied with the service*, with a few exceptions.
12. The majority of respondents who used Happy Elephant said the service is what they expected; with some saying it was better than expected.
13. 'Fun & Play' was the most frequently used service amongst the respondents to this survey. Only 1 respondent had used 'Little Voices' and was not happy with this service.
14. No gaps in services for the 0-4 age group were identified, but several residents commented on the lack in provision for the older children and the elderly.
15. In general, *respondents praised Happy Elephant services*.

Benefits of Happy Elephant

16. The benefits that the respondents identified for their *children* appear to contribute towards National Sure Start Objective 1 (*Improving Social and Emotional Development*); 3 (*Improving the Ability to Learn*) and 4 (*Strengthening Families and Communities*) but support for *Improving Health* (Objective 2) appeared to be weak.

Examples of benefits for their children...

'Brought on development'; 'Improved social skills'; 'Learn to share'; 'Speech development.' (Parents)

'Improved his interest in art and crafts.' (Parent)

'They enjoy new things to do and joining in with other children.' (Parent)

'Allowed child to mix with other children as is an only child.' (Parent)

'With Aqua Tots to be confident and not scared of water.' (Parent)

17. The benefits that the respondents identified for *themselves* appear to contribute towards *all* the four Sure Start objectives.

Examples of benefits for themselves...

'Improved depression (was suffering from depression).' (Parent)

'Kept sane.' (Parent)

'Brought me out of myself.' 'Get to meet more people.' (Parents)

'Crèche helps with time for yourself'; 'Get some peace.' (Parents)

'Help and advice always at hand.' (Parent)

18. The three most common reasons why individuals were attracted to Happy Elephant activities were; *activities for children, comfortable surroundings and staff always available.*

Suggested Improvements

19. Several suggestions were offered as to how Happy Elephant could encourage residents who do not currently use the services to do so, e.g. 'more outdoor activities'; 'advertise more in local venues'; 'drop off coach nearer to house'; 'offer more places' etc. However, some of these were not feasible, such as offering services for older children, or the programme was already doing, e.g. distributing promotional materials.
20. Respondents felt Happy Elephant would improve if it could accommodate services for older children. While this age group is beyond the remit of the programme, improving links with services for older children need to be reviewed.

PROFESSIONALS' AND VOLUNTEERS' VIEWS

Twelve surveys were completed, therefore, **this small sample should be remembered when percentages are given e.g. 33% only equates to 4 people.**

Satisfaction with their work

1. The enthusiasm of the workers and management team is evident.

We can listen to people and have the potential to meet their needs. For me that is the actual joy of working with Sure Start and the flexibility we have...we have the opportunity to turn things around fairly quickly and change practice...there is a huge emphasis on reflection which is very important. The whole thing about Sure Start is very exciting.'

2. With only a few exceptions, Sure Start workers appear to be motivated, valued and supported in the work they do for Happy Elephant. In addition, they feel they have professional development opportunities. However there were a small percentage of respondents who felt the interest and level of challenge in their job could be improved.
3. 100% of workers agree that Happy Elephant is well resourced financially.

'[I've] been with Sure Start for 8 months, feel we all try to do our best for the community and their children. Groups we have for our parents are well planned and their children are taken care of where we all promote the ethos of Sure Start and take great care in what we do. I love my job.' (HE worker)

'I have worked in health where money is tight, with Sure Start you have more money so you can go out in the community (knocking on doors, visiting schools and just walking around the community) and identify what they want and then do something about it – provide the groups that they want. You know you can get to the root of the problems and do something about them.' (HE worker)

Meeting objectives and targets

4. Workers are less able to clearly state **outcomes** of the services they provide in relation to the four Sure Start objectives and targets. We recommend stressing the importance of monitoring and evaluating *measurable* outcomes at subsequent staff development events, although, as evidenced in the following quote, workers are mindful of their expected outcomes.

'We work together to try and deliver the service. We work with our milestones that fit around the targets, but I don't look at them as often as I should. When we do our action plan we do refer to the targets.' (HE worker)

Views on the effectiveness of services

5. 90% of respondents feel that community spirit and support for families with young children have increased '*... seeing people in groups that you wouldn't have expected to see there.*'
6. 100% of respondents felt that Happy Elephant is providing an excellent service to local residents.
7. Workers believe, however, that the number of families involved with some of the services is low. Thus, while recruitment is constantly on the agenda, reinforcing the importance to increase the number of families involved should be considered.

'Parents/carers are becoming volunteers and accessing training.' (HE worker)

8. Several examples of activities that have gone particularly well are described by Happy Elephant workers (see full report), e.g. Aqua Tots, speech group, Christmas grotto etc. However, with the odd exception (e.g. the speech group), the **reasons** for their success were not always recognised.

'Introduction of baby massage (group and one-to-one) in the home to try and alleviate symptoms of post natal depression. Gone well as staff trained to highest level and present course in friendly, comfortable manner.' (HE worker)

9. Several examples of activities that have **not** gone particularly well are, again, described by Happy Elephant workers (see full report) and the reasons are being recognised and can be valuable learning experiences for workers. The main reason given was 'no shows' when places are booked etc.

'Trips, people were phoning in for places but were not arriving on the day, this then made the trips lacking in numbers.' (HE worker)

10. Some insightful gaps in provision have been identified by respondents and it is hoped by the evaluation team that they provide a focal point for future programme development. Gaps focused on **processes** e.g. greater advertising needed, better access needed, wider recruitment needed, as well as **services** e.g. teenage parents session needed, support group for fathers/male carers, better midwifery services etc.

- *'Same people accessing groups so more promotion needs to be done to encourage new families to attend groups.'* (HE worker)
- *'Specific family support service that is more structured i.e. referrals given specific to this area of work – social services and town centre GPs still unsure about what we can offer, should be more informed then possibly receive more home visit referrals.'* (HE worker)
- *'Midwifery service, teenage groups and activities, domestic violence initiative, drop-in type groups.'* (HE worker)

11. 33% of the respondents did not agree that Happy Elephant services are well advertised. The evaluation process collected slightly contradictory data in relation to the effectiveness of the marketing and advertising strategy, however, we recommend a sustained effort is put into this area of the programme (see p.6)
12. 60% of the respondents felt they needed to make more of an effort to involve 'hard-to-reach' families (see p.6, pt.17).

Benefits of the services

13. Happy Elephant workers feel that parents have increased their confidence and feel better supported as a result of their involvement in the programme. However, they recognise that it appears to be the same parents using the services and, again, a sustained effort to recruit new parents needs to be continued.

'We get a lot of people coming because they have been told by their friend that it was good. The baby massage class is a good example and it is really successful.' (HE worker)

14. Happy Elephant professionals and volunteers feel that the young children using the services are developing into happy children who enjoy learning.

'[Children are] happy and their development has improved since accessing groups.' (HE worker)

Partnership working

15. While communication between Happy Elephant workers was in general good (75% agreed), there was room for improvement.
16. Respondents feel greater communication between the other St Helens Sure Start programmes should be encouraged.
17. 100% of the respondents feel that parents are encouraged to become involved in Happy Elephant, and are consulted about the services.

'One house I went to I took a parent worker with me and they recognised her and they said 'oh, do you know ... well you can come in then!' So there is a lot to be said for involving local parents.' (HE worker)

Views on management

18. The management structures appear to be well understood and offer good lines of communication. All Happy Elephant staff were greatly looking forward to the arrival of the new Programme Manager in March.

Monitoring and evaluation

19. A sustained effort to collect baseline data (just over 50% said they have collected baselines) and the current undertaking of monitoring and evaluation needs to be continued. Further, there is room to improve the evaluation workshops.
20. Workers did understand the need for evaluation and monitoring of their services and several have begun to undertake credible in-house evaluations.

OVERALL RECOMMENDATIONS

Overall the results of the evaluation to date highlight that Happy Elephant appears to be providing an invaluable service to families in terms of support, advice and services. The evaluation team has a few recommendations - *however, they are not intended to detract from the good work that is clearly being carried out.*

1. The programme now needs to focus on *embedding* the services and effectively using the operational framework that it has spend so much time developing over the past 18 months.
2. Once the full complement of staff are in place in the near future, in particular the new Programme Manager, it may be useful to redefine role and responsibilities and effective teamworking practices in light of the core services and teams.
3. A more strategic approach, linking and strengthening established Happy Elephant links with national and local initiatives such as the Children's Strategic Partnership; Community Plan; Regeneration Agency; Education Action Zones; Health Action Zones; Early Years Development and Childcare Plan and Partnership; Home Start, etc. should be a focus when considering sustainability and mainstreaming of services.
4. At Central Link, they had clearly identified other initiatives in the area and how the programme could link with them. Further, existing services were then matched to the four Government objectives for Sure Start programmes, in order to identify gaps in service provision in relation to the four key areas. This appeared to be a valuable exercise and one that Happy Elephant may want to consider.
5. Collecting and comparing baseline data, and using the data collected centrally, including health indicators, education indicators, social service indicators, early years and play indicators, and advice service indicators needs to be prioritised in order to ascertain value for money and the difference Happy Elephant is making in the community.
6. It is important that service providers are able to clearly state, often (but by no means exclusively) in measurable terms how their service is working to achieve the Sure Start objectives and associated targets.
7. Whilst it is recognised that staffing shortages have put pressure on the workforce, it is recommended that a more systematic approach to documenting the work of task groups may be beneficial. The evaluation team feels much more planning and thinking has taken place, within the team, than is evidenced by the paperwork.
8. Continuing to strengthen partnership working between the five Sure Start Programmes in the borough, in order to make best use of resources and expertise, as well as providing an integrated approach to the delivery of services for parents and young children in the area is encouraged. Some Happy Elephant workers felt constrained to advertise their own local service, rather rolling it out for the benefit of families outside their area. It is suggested, therefore, that the potential for more shared opportunities are investigated.
9. Further, since recruiting individuals to key positions within the Sure Start programme has been difficult, we also recommend expanding the potential to share expertise and specialist services across other St Helen Sure Start programmes.
10. Word of mouth, from friends and neighbours, is a valuable recruitment approach and appears to be effective for Happy Elephant. In light of this, perhaps an incentive for parents should be offered for recruiting other parents into the programme and who subsequently become actively involved in the services.

11. A systematic approach to staff development and training (including an up-to-date record/log of who has undertaken what training and when etc.) would be useful for identifying gaps as well as expertise. It may also introduce a fair system of allocation to continued professional development.
12. Encouraging staff to be reflective and critical (in a constructive way) may help to move the programme forward, by challenging traditional ways of working, stereotypes and 'stuck in a rut' tendencies. There is much energy amongst staff to be capitalised in a positive way!
13. This evaluation report contains much data which can be subject to further analysis and comparison. It is suggested that the contents of this document, together with any further analysis, is used for programme development.
14. Involvement of parents in evaluating services, as well as developing depth to the evaluation of specific services need to be priority areas for the local evaluation over the next year.



What the parents say about Happy Elephant...

***'Really, really helped me and little one, recommend it to anyone.'* (Parent)**

***'It's great - crafts, play, opportunities.'* (Parent)**

***'Loads of fun.'* (Parent)**

***'Fantastic supervision.'* (Parent)**

***'Happy Elephant is excellent in my view.'* (Parent)**

Many thanks to all those who contributed to the evaluation process

1.0 INTRODUCTION

The Department of Health Care Studies in partnership with the Department of Psychology and Speech Pathology, at Manchester Metropolitan University were successful in their bid to undertake a local evaluation of the Happy Elephant Sure Start programme in St Helens. The 27 month evaluation began in December 2002 and will be completed in March 2005. The evaluation has three aspects: (i) to provide evaluation workshops to staff and parents, (ii) to help Happy Elephant with their 'in-house' evaluations and (iii) to provide an objective evaluation of the programme. This **interim report** relates to point (iii) and provides **general findings** relating to the effectiveness of the programme over the **first 18 months** of the evaluation process. The report includes an assessment of aspects (i) and (ii). This has resulted in the document being lengthy. It still does not claim to evaluate every aspect of the programme, but significant areas, given time and resources available.

2.0 CONTEXTUAL ISSUES

2.1 What is Sure Start?

The aim of Sure Start is to work with parents-to-be, parents and children up to four years old to promote the physical, intellectual and social development of babies and young children - particularly those who are disadvantaged - so that they can flourish at home and when they get to school, and thereby break the cycle of disadvantage for the current generation of young children. It does this by setting up local Sure Start programmes to improve services for families with children under four. Each programme works towards objectives and targets that the Government wishes to achieve, but may also add more local objectives and targets.

All Sure Start programmes have to involve parent representation on the local programme board. In addition, all programmes have to:

- Develop local targets for ensuring links between the local Sure Start partnership and Employment Service Jobcentres.
- Work with their EYDCP to help close the gap between the availability of accessible childcare for 0-3 year olds in Sure Start areas and other areas.

The design and content of each Sure Start programme varies according to local needs, but all programmes must have a number of core services:

- Outreach and home visiting
- Support for families and parents
- Support for good quality play, learning and childcare experiences for children
- Primary and community health care, including advice about family health and child health and development
- Support for children and parents with special needs, including help in getting access to specialised services.

To ensure a consistent approach, the Government expects every programme to work from a shared set of key principles. Sure Start services must:

- Co-ordinate, streamline and add value to existing services in the Sure Start area.

- Involve parents, grandparents and other carers in ways that build on their existing strengths.
 - Avoid stigma by ensuring that all local families are able to use Sure Start services.
 - Ensure lasting support by linking Sure Start to services for older children.
 - Be culturally appropriate and sensitive to particular needs.
 - Promote the participation of all local families in the design and working of the programme.
- (DfES, 2001, p.6-7))

The evaluation team has taken into consideration these key aims and principles outlined by the Government in the local evaluation of Happy Elephant.

2.2 Sure Start St Helens

Currently St Helens has five Sure Start Programmes. One 1st wave, one 4th wave, two 5th wave and one 6th wave. Happy Elephant is a 5th wave programme.

2.3 Sure Start Happy Elephant

Sure Start Happy Elephant (5th wave programme A) is located geographically in the Thatto Health area of St Helens. The Children's Society became the accountable body for Sure Start Happy Elephant on May 1 2002 and the programme subsequently received approval from the Sure Start Unit in June 2002. Thus, the programme has been running for a period of 20 months at the time of this report.

Happy Elephant serves a population of just over 28,000 with around 700 being under the age of four. In 2001 just prior to the programme commencing there were 527 families with children under four, of whom a large proportion are lone parents. There are approximately 141 live births to mothers in the Sure Start area per year. There is a very small minority of single fathers in the area. The ethnic population in the catchment area is predominantly white British, with only approximately 14% being of Chinese, Asian or Irish origin. Movement within the local area is low, with many families having been resident in the area for most of their lives. However, local community spirit is less evident than in previous years. All three Wards that cover Happy Elephant are in the worst 10% in ranking for Index of Multiple Deprivation. Health status is also poor, with low birth weight, teenage conceptions, post-natal depression and smoking levels being a concern. Crime rates in the area are amongst the highest in the borough for violence, robbery and juvenile disturbance. Drug and alcohol misuse is also becoming an increasing problem. Information gathered from parents at the planning stage of Sure Start and expert knowledge from professionals working in the area identified several key issues faced by families living in the area, namely; unemployment, lack of money, stress, low self confidence, social exclusion, poor housing, crime and a lack of quality child care.

The programme is structured around a core team and is supported by agencies, organisations and other professionals. The wider multi-disciplinary team including Health Visitors (HVs), Social Workers, Nursery Nurses, Speech and Language Therapists, Midwives, adult education workers, community workers etc. on occasions appeared to be peripheral to the Sure Start team.

Happy Elephant appears to be committed to developing a flexible, reactive and responsive programme so that all families in the area can access a non-stigmatised coordinated range of health, education and community services to meet their changing needs. The evolving programme is delivered through service agreements with suitable organisations. The programme offers advice, information, practical help and resources to families, and individual family members, through 'drop in' and pre-booked activities at designated centres. In addition, there are outreach services and special needs services being provided by home visiting teams made up of professionals from the statutory and voluntary sectors, as well as trained volunteers.

To date, the programme has not so much emphasised *sustainability* and *mainstreaming*, but *development and delivery* of services.¹ The programme is in its infancy, plus, it has been in the unfortunate situation of being without a Programme Manager for a sustained period of time. Personal circumstances led to the manager having much time away from the programme in 2003 and then subsequently leaving the position in October 2003. The new Programme Manager will not take up the post until March 2004. **While the assistant Programme Manager and other Happy Elephant staff have worked very hard to fill the gap, the lack of leadership, we feel, has slowed the progress of the programme.**

The **Accountable Body** for Sure Start Happy Elephant is The Children's Society, a registered charity and company limited by guarantee for the purpose of company law. Documentary analysis highlighted that the role and function of the accountable body was clearly written. The acting Programme Manager found the accountable body '*very supportive*' with the only negative comments being the amount of paperwork required and some of the compulsory training (e.g. child protection) placing time demands on staff. Often staff have short notice about the training and this has a knock on effect on the day-to-day running of the programme.

2.3.1 Happy Elephant Premises

From the commencement of the programme Happy Elephant has been located in temporary accommodation, having a base off Elephant Lane and services provided from a number of community buildings within the area. The main base currently houses the key workers. Prior to the premises being the Sure Start base it was a Family Centre, used by the Children's Society as an assessment unit for families who had child protection issues etc; so '*locally it perhaps has still got a reputation for being under that*'. The accommodation is decorated with many photographs of events that have taken place. Colourful notice boards advertising the activities are apparent. The latest newsletter is available. Sheets are available for comments and suggestions from parents and visitors to the programme. A sign in and out book is in operation. There has been varying degrees of activities at this base. On some occasions few workers were apparent, while at other times a crèche facility was available for parents attending meetings such as the Management Board or Parents and Carers Unite.

¹ Sustainability and mainstreaming issues are addressed to a large extent via the St Helens Strategic Group. This group is for all Sure Start Programmes in St Helens to look at how programmes can link together to share learning and ensure sustainability of Sure Start once the initial funding has run out. In addition they deliver a 'Signposting Service' and share an administrator to act as a central point for all professionals seeking to refer families to the correct Sure Start Programme

Happy Elephant uses several other venues for their services. *'I think this is good because it makes us go out into different parts of the community and distribute the services better and give us a higher profile, rather than us just being tucked away somewhere'* (HE worker).

Planning the new Sure Start Happy Elephant Centre has taken up a considerable amount of time and has, on occasions, dominated Management Board meetings as key decisions needed to be made. Further, the lack of space in the temporary accommodation has hindered the progress of the programme. The new centre appears to have been well planned around key considerations such as:

- Represents good value for money
- Will contribute to meeting the targets in the Public Service Agreement
- Will meet the registration requirements for full day care
- Contributes positively to the neighbourhood and community, and so on...

Evidence of local community consultation lead by the Sure Start Neighbourhood Development Coordinator was apparent. Parents, carers, children and professionals were consulted on the physical design, layout, services and activities proposed for the new centre. For example, surveys, photographs, plans etc. were used to ascertain viewpoints. Further, children were asked which toys they like to play with and then observed at play. The findings of the consultation exercise were presented in a report; *Capital Consultation 2003*.

Happy Elephant plan to become a children's Centre in September 2005, once located in the new build, since it is already striving to reach the same objectives as those set for Children's Centres. This will enable Happy Elephant to strengthen their work on the education and care of children over the age of three and further develop their mainstreaming plans and to work more closely with agencies towards an integrated approach.

3.0 LOCAL EVALUATION

Since each local Sure Start programme is expected to conduct its own local evaluation, Happy Elephant developed a tender for an external local evaluation in Summer 2002, in conjunction with Central Link. The Department of Health Care Studies and The Department of Psychology and Speech Pathology at Manchester Metropolitan University were successful with their tender.

The evaluation is based on the following principles:

- (i) It is developmental for the various partners involved, whilst remaining appropriately rigorous and independent
- (ii) It is comprehensible to all concerned
- (iii) It is team-based, involving agreed review cycles both within the evaluation team and between the project teams and evaluation personnel
- (iv) It demonstrates that a process of critical consultation has been followed
- (v) It is flexible in order to need the changing needs of the programme
- (vi) It ensures confidentiality

- (vii) It generates clear judgments relating to the extent to which the aims and objectives of the initiative have been achieved AND recommendations for action during the life of the activity and at its summation.

The Programme Manager was very keen that *'the evaluation must involve us [Sure Start workers] and parents engaging actively in the evaluation process, to learn how to do it properly, so we are able to continue once you leave.'* As stated in the requirements for local evaluation (Sure Start Unit, 2000), considering the phase of development for Happy Elephant the evaluation will consider both **process** and **outcomes**.

3.1 Methodology

3.1.1. Aims and Objectives

In the document *'Support to Local Sure Start Programme Evaluations'* (NESS, n.d.) it states that local evaluation should concentrate on;

- 1) The process of delivering services
- 2) How well the Sure Start principles have been implemented
- 3) The effects these are having on progress in service provision

This evaluation encompasses these areas by achieving the following aim and associated objectives.

Aim: *To generate clear judgments relating to the extent to which the priorities in the Sure Start delivery plan and the specific project funding criteria have been effectively addressed and met.*

Objectives:

- *To actively involve the use of Sure Start workers, parents/carers and the community in the evaluation.*
- *To train Sure Start workers and parents/carers to undertake evaluation tasks.*
- *To evaluate the processes used to deliver services e.g. partnership work, parental involvement etc.*
- *To evaluate the quality of the services and activities.*
- *To assess the use of resources and their allocation.*
- *To assess the extent that the outcomes meet the Government targets.*
- *To identify 'good practice' in St Helens and suggest ways of further disseminating it.*
- *To discover gaps in provision/barriers to progress and development, and recommend ways of managing the programme more effectively.*
- *To establish if the programme provides value for money.*
- *To address issues of embeddedness, sustainability and mainstreaming.*
- *To present the findings in a creative and clear way.*

The evaluation has employed a mixed methodology and has collected both quantitative and qualitative data. Ethical approval was sought from the Local Research Ethics committee (see appendix i).

3.1.2 Documentary analysis

The documentary analysis is a continuous process throughout the evaluation. The documents consulted included the majority of paperwork connected to the Happy Elephant programme e.g. minutes of a wide range of meetings; policy and procedure documents; job specifications, remits, roles and responsibilities; consultation findings; action plans; the delivery plan; letters, memos and other communications between key stakeholders and organisations; work of subgroups; reports produced by various individuals and organisations; financial details; capital details; National Sure Start literature; information/research connected to service provision; Sure Start monthly and quarterly returns and so on.

The documentary analysis has four key aims:

- 1) To facilitate a contextual understanding of processes and outcomes of the Happy Elephant programme.
- 2) To evaluate the effectiveness of the programme from different aspects.
- 3) To guide the team regarding the evidence they wish to collect via surveys, observations, focus groups and interviews.
- 4) To evaluate the congruence between policy (what should be done) and practice (what is being done).

3.1.3 Observations

The evaluation team have attended a range of meetings and some group sessions. This generally involved observation and taking field notes during and after the session. In addition, other Sure Start activities have been observed e.g. the team has attended the Happy Elephant base on several occasions. The aims of these observational sessions were:

- To develop a deeper understanding of the Sure Start activities.
- To collect rich descriptive data of the general milieu of Happy Elephant.

3.1.4 Survey of Professionals' and Volunteers' Views

A survey was developed and administered to professionals/volunteers identified as being part of the Happy Elephant workforce. The instrument was constructed by the evaluation team (in conjunction with the Programme Manager, who consulted with some of her team) using information/data gathered via observations and informal discussions with those involved with the programme (see appendix ii). The survey was driven by the following questions:

- *What is the nature of their work and how effective do they think they are?*
- *What is their opinion of the process and outcomes, to date, of the programme?*
- *What are the gaps in the current provision?*

The surveys were administered by the Happy Elephant team in November/December 2003. The response rate was approximately 80%. The survey collected both quantitative data (mainly in the form of frequency counts, percentages and means (averages)) and qualitative data (views, suggestions etc.). Respondents were anonymous.

3.1.5 Survey of Residents' Views

The survey to residents - i.e. parents/carers of children aged up to four years living in the Happy Elephant catchment area - also aimed to examine the effectiveness of processes and the outcomes of the programme, as well as to ascertain their satisfaction with the community services in general. It was hoped the survey would provide some baseline data in order to measure the difference Happy Elephant is making to the community. Again, the instrument was constructed by the evaluation team, in conjunction with the Programme Manager, who consulted with some of her team and parents (see appendix iii). Information/data gathered via documentary analysis, observations and informal discussions with those involved with the programme shaped the instrument. The survey was driven by the following questions:

- *How effective are the current community services?*
- *What is their opinion of the process, services and outcomes, to date, of the Sure Start programme?*
- *What are the gaps in the current provision?*

It was the intention to administer 100 surveys. The evaluation team administered 60, while the Happy Elephant staff took responsibility for 40. However, due to time constraints only 24 were completed by the latter. The survey was administered in February 2004. To ensure a 100% response rate, the survey was completed by asking the parents face to face the survey questions and filling in their responses. To ascertain the views of a diverse range of parents, the data were collected by approaching parents at a range of different local venues. These included primary schools, post office, local shops the library etc. Consent was granted to access residents at all the venues used and information about the evaluation was available (see appendix iv). Again, the survey collected both quantitative and qualitative data. Respondents were anonymous.

3.1.6 Focus Groups/Individual Interviews

Individual interviews, focus group interviews and informal conversations were undertaken with members of the Management Board, the Programme Manager, parents, leader of services and other Happy Elephant workers. Ten interviews and a focus group were undertaken for this evaluation report. Notes from several informal conversations and group meetings have also been drawn upon.

Prior to commencement, the aim of the interview/focus group was explained to all participants. Anonymity was assured - no names are stated in this report. Verbal consent was given by all the participants. Semi-structured interview schedules were developed; examples of the questions asked in interviews are in appendix iv.

The aims of the focus groups and individual interviews were to:

- Understand the processes and outcomes of the initiative from the perspective of those involved in different capacities, i.e. those who were involved in the planning, implementation and delivery of the services, as well as those on the receiving end of the services.
- Explore further any interesting/significant findings from the surveys and documentary analysis.

- Enlighten the team about the way Sure Start is positioned in and by local community.

The focus groups/interviews were taped. Transcribing was undertaken with a proportion of the tapes. The qualitative data collected is not subject to quantification. The intention is very much to provide illuminative data, rather than setting out to 'prove' something. The data was subjected to thematic analysis. Direct quotes have been used in this report in order to provide evidence to the reader and a voice to the key individuals involved with Happy Elephant.

3.1.7 Audit of in-house evaluations

An audit of the in-house evaluations carried out by Happy Elephant staff was undertaken by the evaluation team. Details of the approach to this are provided in section 8.

Using this multi-method approach to the evaluation has resulted in the evaluation team collecting vast quantities of data. In order to construct this interim report compromises as to what data was used had to be made. This document, therefore, does not include all Sure Start activities and partnerships. The aim of the report is to offer a flavour of the work being done; discuss some significant cross-cutting themes (such as mainstreaming, partnership working etc.); provide parental and professional/volunteer/management perceptions; identify some key issues raised by the evaluation team and indicate areas for further evaluation as the process enters year 2.

4.0 FINDINGS (i): DOCUMENTARY ANALYSIS

Findings from the documentary analysis can be found throughout this report; however, several key themes are discussed here.

4.1 Partnership Working

Happy Elephant staff appear to be committed to partnership working from the initial stages of developing the programme to implementing and embedding services. As a result there is broad membership from the local community. Gaining an effective balance between what the community wants/needs and what local providers are able to offer is a goal of the programme, but is not always easy to obtain. Currently, Happy Elephant has a wide range of partnerships, some of which are particularly effective. The level of effectiveness possibly relates to the extent to which those involved have embraced the challenges and opportunities of 'joined up' working.

As previously stated the programme is structured around a core team and wider external partnerships. While many of the partnership arrangements are positive, there is a sense that links with health are weak, e.g. Happy Elephant has experienced difficulty bringing midwives 'on board'. A primary reason for this was the time commitment. However, a full complement of workers, including health and speech and language input is expected in the very near future.

During their field work the evaluation team found evidence of positive factors promoting effective partnerships between Sure Start workers, and between these workers and the wider community. In addition, some factors that hindered the process were also evident:

4.1.1 Factors promoting effective partnerships

- a shared understanding of the Sure Start philosophy
- a willingness to adopt a 'give and take' attitude
- a genuine commitment to the community in which they are working
- recruiting from the community
- a willingness to share resources, knowledge and expertise
- a co-operative and positive attitude and generous personality
- a realistic approach to the 'messy' reality in which partnership working resides
- a positive attitude to learning about other peoples' roles and working out how they 'fit in'
- a commitment to 'joined up working'
- good listening and communication skills
- good time management
- a positive attitude towards change
- staff experienced in working with families

4.1.2 Factors hindering effective partnerships

- overloaded work commitments
- people protecting their own turf
- traditional ways of working and thinking
- an attitude that focuses on who is *doing* more/less and who is *getting* more/less
- stereotyping
- a cynical view of Sure Start, 'management' and the work of others
- constant change in the workplace
- lack of resources including jobs not being filled immediately
- level of administration and paperwork and the development of an audit culture
- different geographical locations and in some cases temporary premises
- on occasions lack of Internet (email facilities) or other IT equipment
- lack of clarity regarding the interface of roles and responsibilities

Links with other initiatives in the area is apparent when analyzing the documents. In particular, commissioned services include NSPCC, Homestart and Portage. In the future, the evaluation will examine to what extent these links are effective and active. Another Sure Start programme in the area had clearly identified what the other initiatives were in the area and how the programme could link with them – a protocol was developed as to how this would be done. Existing services were then matched to the four Government objectives for Sure Start programmes, in order to identify gaps in service provision in relation to the four key areas. The emphasis was to '*reshape*' services to better meet the needs of families with under fours in the local community and avoid duplication of services. This appeared to be a valuable exercise and one that Happy Elephant may want to consider.

Until her departure, the Programme Manager was a member of several strategic planning groups of other St Helens initiatives (files with minutes of the meetings of various groups the Programme Manager attends were available to the evaluation team). The acting Programme Manager has attended several of these meetings. Where she has not attended, the minutes of meetings are still on file to ensure Happy Elephant management are kept informed on developments in the area

impacting on the programme. On some occasions the absence of Happy Elephant representation at meetings was apparent e.g. at the meeting regarding the 'St Helens Play strategy', but again the evaluation team feels this is a result of the lack of a Programme Manager, rather than a lack of interest.

Working in **partnership with parents** has been a key focus for Happy Elephant since the planning stage for the programme. Indeed this report cites several examples. It is, after all, a strategic requirement of the programme (Sure Start Unit, 2002).

4.1.3 Partnerships with other Sure Start Programmes

An effective partnership developed with Sure Start Central Link – another 5th wave programme in St Helens. The two programmes share a boundary and right from the beginning made a commitment to work together for the benefit of both programmes. For example, the two programmes undertook joint recruitment of the Programme Managers and the local evaluation team. Further, they have shared premises, in the early stages, and administrative support.

Happy Elephant has also joined forces with other St Helens' Sure Start programmes over activities that have borough-wide implications. They have a single database for all programmes and a central signposting service for residents and professionals to direct them to the Sure Start Programme in their relevant area. The Programme Manager was a member of the **Sure Start Strategic Management Group**, and currently the acting Programme Manager attends these meetings. This group meets to promote and support partnership arrangements between St Helens Sure Start Programmes (see footnotes on page 12). The acting Programme Manager has attended these meetings regularly and a file of the minutes was available (the evaluation of the effectiveness of this group is beyond the scope of this evaluation). The acting Programme manager is also a member of the **Programme Managers' Group** and minutes of these monthly meetings are available. This group comprises the five programme managers and a representative from the Early Excellence Centre (with a view to the development of a Children's Centre).

More recently a **Professionals' Forum** has developed in an effort to enable professionals and other borough-wide agencies to reduce the number of meetings they attend from approximately 20 across the Sure Start area to just 4 meetings per year. The forum is also used for information sharing/gathering in order to gain a better overview of all the Sure Start programmes in the area. The minutes highlight that the group is beginning to share ways of working, develop networks and more collaborative ways of working. Note: this professional forum is not to be confused with the Professionals' Forum established at Happy Elephant. The latter was set up to provide a '*network which could facilitate the sharing of good practice and current research and development in terms of children and families. Members of the group would also be invited to form task groups to develop areas of practice.*' One set of minutes was available for the latter dated February 3, 2003. This group apparently met every two months, but very little information was available.

4.1.4 Volunteer programme

There appears to be a well planned volunteer programme in place. A policies and procedures manual has been developed for recruiting and supporting volunteers. An induction pack has been developed along with application forms, reference forms, risk assessments, supervision, induction

checklists, expenses, etc. However, there was no evidence shown to the evaluation team of the usage of these forms. The neighbourhood Development Coordinator has taken the lead on the volunteer programme. To date only five parents are involved; *'with hopefully another two starting'*. Unfortunately, the coordinator is due to go on maternity leave in March, so a temporary replacement for her position is being advertised in the near future – it is hoped that this situation will not hinder the volunteer programme by interrupting continuity.

4.2 Governance Structure

Documentary analysis highlighted that the role and function of the Accountable Body was clearly written. Communications between The Children's Society and Happy Elephant appear to be open and supportive, with the Chair of the Management Board (an employee at the Children's Society) taking more of an active role in the programme recently, due to the absence of the Programme Manager.

The management initially consisted of a **Partnership Group** and **four sub-groups** with specific functions:

- the Community Involvement Sub-group
- the Services Sub-Group
- the Capital Sub-group
- the recruitment, training and education Sub-group.

When the Delivery Plan was finalised, the Partnership Group had a core membership of 78 – parents, local community members, employees/ers of agencies who provide services to families with children under 4 years (from both the voluntary and statutory sectors). The majority of members attended the meetings, thus, ensuring a true collaborative approach to decision making and the development of a shared vision for Happy Elephant. Since the partnership was too large to be truly effective on an operational and general management level, it was agreed by its members to form a **Management Board**. The management model involves both the direct management of staff delivering services and coordinating staff who are line-managed elsewhere. This could cause some difficulties with communication channels and lines of accountability. The Management Board has a responsibility to inform the partnership of programme development. The Partnership Group has retained the ultimate authority to approve and sanction capital spending above a certain threshold. This group currently meets every three months. Membership of this group began to tail off after approximately one year. This may have been due to the Management Board taking over the general running of the Programme, or that people felt the main business in getting the Sure Start Happy Elephant programme up and running was achieved. A re-launch of the Partnership Groups was made on the first anniversary of the Programme in the summer of 2003. This resulted in greater attendance at the September 2003 meeting.

More recently, a decision was made to develop and formalise the participatory role of the **Parents Forum** in relationship to the decision-making processes of the Partnership and Management Board. This was an interesting move, since parents are currently represented at both the Partnership Group and at the Management Board. To ensure parental contribution ease of accessibility to meetings was ensured (e.g. timing of meetings, child-care facilities, disability

access, transport issues, training/skills development in relation to business conduct and decision-making processes etc. were considered).

Governance functions and membership arrangements for the Partnership Group, Management Board, sub-groups, Parents Forum and Practice Development Forum were all in place as evidenced by the documentary analysis, as were the **roles and responsibilities** of the Programme Manager.

4.2.1 The Community Involvement Sub-group

The remit of this group was to develop a strategy for consulting and engaging the community. Membership, therefore, included individuals with knowledge of the community. This group have actively been involved in awareness-building events and administering surveys to the community in order to elicit the views of residents. An initial consultation with the community using a questionnaire that was modified by the Community Involvement Sub-group, highlighted the following when asking *what do children and parents want?*

- Increased opportunities for social interaction and early learning
- Safe play areas
- Opportunities to meet with other parents
- Accessibility to health advice
- A crèche for parental activities and training
- Access to swimming groups
- Information on existing services
- New toys and play groups
- Child-friendly library facilities
- Quality and affordable child-minding

The group appear to have drawn on best practice for consultation and involving parents and communities, since the file contained several strategies from other sources e.g. other Sure Start programmes, St Helens PCGs, internet resources etc. Several strategies appear to be in place. To what extent they are operational will be examined in more detail as the evaluation proceeds.

The Community Involvement subgroup lapsed for a while, however, it has been recently restarted. The minutes of the January meeting (2004) did highlight that the group was attended by 11 people from different agencies. Parents/carers had been invited, but none were present. It is currently being reviewed as to whether this sub-group and the Parents and Carers Unite should become one, *'we have to look at the terms of references and make sure we do not have duplication.'*

4.2.2 The Services Sub-group

The remit of this group was to develop proposals for service delivery taking into account the findings of the consultation process, existing provision and unmet need. This disbanded when the delivery plan was accepted.

4.2.3 The Capital Sub-group

One of the main tasks of the Capital sub-group has been the planning of the new Sure Start Happy Elephant Centre. Minutes of these meetings appeared random. Those that were available focused on the new build. As previously stated, an extensive consultation exercise was carried out by the Neighbourhood Development co-ordinator with residents in the area (parents, carers, children and professionals working in the area) to ascertain their views on the physical design, layout, services and activities for the new centre. (see section 4.2.1)

4.2.4 Recruitment, training and education Sub-group

This sub-group were very active in the early days of the programme since not only parents and children needed to be involved, but also the recruitment of Sure Start staff. This group again has disbanded.

In relation to recruitment, Happy Elephant have experienced a sluggish response to key posts such as an Early Years Coordinator and a Speech and Language Therapy Consultant. Also, they have experienced a turnover in staff in key positions such as the Programme Manager post and chair of the Management Board etc. In her Annual report for 2002/3 the Programme Manager commented ...*'a primary barrier to their [original milestones] achievement is the staff recruitment process'*.

4.2.5 Task Groups

By December 2002 it appeared that some sub-groups were becoming less active. The minutes of the Management Board showed that regular reporting of the sub-groups had tailed off. It was suggested in the Board meeting in February (2003) that the Capital sub group would continue, but the other three sub groups be replaced with task groups tailored to meet specific areas/issues, for example;

- Hard-to-reach families
- Behaviour management
- Family Support

Two further task groups set up later in 2003;

- Safety
- Health

Recently (2004) a further task group has been formed;

- Finances and services

Some task groups commenced early in 2003. The task groups were described as *'short term'* and *'time limited'* *'they were set up for a specific task and then once that was done the task group may not meet again, or it may be a while until they meet again.'* A file entitled 'Task Groups' was empty apart from an agenda for the Health Task Group (January 2004) and an article on post natal depression. Sparse information on the task groups were held in separate folders. Below briefly outlines the information available on some of these groups.

Hard-to-reach families

A list of members of this task group was available. It highlighted the group comprised 4 parents; teacher (travelling site); children's worker; portage development worker; 2 health visitors; neighbourhood development coordinator. Three sets of minutes were available – one set from February 2003 and two from March 2003. This group identified hard-to-reach groups such as travellers; dads/male carers; grandparents; temporary residents; 'choose not to access' families; teenage parents/carers; families with special needs etc. Barriers to involvement, existing resources and resources needed were identified for many individuals/groups, but not all. It appears this activity was started and then abandoned. Workers were also matched against specific hard-to-reach groups. Further, what strategies needed developing, performance indicators and what evidence is needed to show what has been achieved were all identified. Over this coming year, the evaluation process will look for evidence that these well-considered policies and procedures have been implemented.

A 'hard-to-reach' strategy has been developed. It is called 'inclusion strategy'. Happy Elephant are trying to make all workers aware of a way of working that is inclusive. (See section 4.4.2)

Behaviour Management Strategy Group

This file had no minutes in it, except for one hand written set. Some information was also in the file, but it was not organised. Several blank pieces of paper were also in the file. A separate file had details of the membership (3 parents; 2 health visitors, children's worker, portage development worker, school nurse, NSPCC representative) and minutes from monthly meetings from March – June 2003. The group dealt with issues such as the home visiting programme; the health visitor package; referral system etc. It was unclear why this group stopped meeting.

Family Support

A file contained the membership details (outreach and family health coordinator; neighbourhood development coordinator; early years coordinator; 2 parents; health visitor; Homestart workers and social services representative), and minutes of the monthly meetings from March–July 2003. The meetings highlight a promising strategic approach to family support. For example, there was evidence that the group spent time defining family support; identifying services currently available; examining services needed and what funds were available to extend the services. An action plan was also developed. Visitors/partners were invited to these meetings to share information about their services and what they could provide. The development of strategies was discussed, e.g. a home visiting strategy and the need for resources and services, such as a resource library; training programmes that were needed etc. Evidence as to the actual activities the members of this group have engaged in is sparse. This does not imply that nothing has been done.

Finances and services task group

This is a recent group that has developed. Only one set of minutes is available for February 2004. The membership comprises of 3 parents; the Management Board chair; the acting Programme Manager; the finance and administration manager; the neighbourhood development coordinator; a counsellor and a health visitor. The group deals with funding available for services and requests for services. Minutes were very short and the next meeting is scheduled for March 2004.

It is recommended that a more systematic approach to documenting the work of task groups may be beneficial. The evaluation team feels much more planning and thinking has taken place, within the team, than is evidenced by the paperwork.

4.2.6 Management Board

From January 2002 - April 2002 the Management Board was named the Steering Group. The first meeting of the Steering Group took place in January 2002 i.e. prior to the Delivery Plan being submitted. By April 2002 the Delivery Plan had been accepted; the Programme had a name as well as a manager. The Management Board is a non-executive body and an alliance of key agencies and individuals.

All the minutes of both the Steering Group and the Management Board were read by the evaluators. Several key points are made below in relation to the analysis of these documents.

- The Management Board comprises a balanced partnership of interested parties – statutory, voluntary and local people (n=18), and there was evidence that members are continually reviewing the membership to sustain a fair representation. Board members include several senior managers, but *fewer* ‘hands on’ workers such as health visitors, midwives, speech and language therapist etc. The Board is aiming for 50% parental representation (in accordance with Sure Start Unit (2002)), though this figure has not yet been achieved. It is hoped that more parents will become involved via Parents and Carers Unite.
- The Chair of the Board is deliberately NOT the Sure Start Programme Manager, but a person from the Accountable Body. (It was noted that the Board has now had three chairs. Such changes in personnel can have an effect on continuity.) In March 2003 when the last chair took over it was with a view to be in this position for 12 months, after which it was hoped a parent (who had undertaken training in chairing meetings) would take over the responsibility.
- A deliberate move to include the Chair of Central Link (Programme c) as a member of the group was made, in order that the two programmes can learn from each other and share resources where possible. This collaboration appears to be working very well as evidenced at several meetings attended by the evaluators.
- Attendance at the meetings has been sluggish at times. This has led to an audit of the attendance records and a ruling about attendance (or stepping down from the Board). Parental representation has been achieved at all the meetings to date.
- Board members do seem to understand the mission, aims and objectives of the Board, although training for this role appear to be sparse and aimed towards the parents.
- In September 2003 the Management Board received a letter from two parent Board Members outlining their *disillusion* with the purpose of the Management Board. They felt it was too ‘*target driven*’ and failed ‘*to accept that communication is a two-way process*’ and that the programme was becoming led top-down rather than bottom-up. Several points were put forward by board members to improve the Management Board. They appear to have been successful.
- Observation of Management Board meetings highlight that a genuine partnership appears to be evident between parents and the professionals delivering the programmes. Parents’ opinions were encouraged, heard and acted upon.
- Scrutiny of the minutes of Board meetings showed evidence that members are kept informed of current and future activities, budgetary issues, issues such as parental involvement, quality and standards, extending partnership working, baseline data review, staffing update etc.

Specifically assessing the progress towards meeting the objectives was not clearly apparent in the minutes that were scrutinised, although mechanisms, such as regular progress reports, provide a vehicle for this.

- Management Board minutes have greatly improved since the programme began, with key information and action points being presented. Generally action points from one meeting to the next are revisited.
- The Management Board have developed an action plan that they are following.

The team suggests that as the evaluation continues, the following areas in relation to the Management Board be examined:

- The decision-making processes that the Board members are involved with at policy and practice levels.
- The information Board members receive in relation to the measurable and meaningful outcomes the programme generated in relation to meeting Government objectives and well as other locally identified needs.

4.2.7 Parents Forum

The Parents Forum meets monthly with approximately 8-10 parents (all females). There appears to be approximately 19 parents on the register for this group. A remit and ground rules for the group have been developed. The minutes of the meetings suggest they lean more towards *information giving* rather than suggesting and developing services and strategies to move the programme forward. More recently the group has been chaired by a parent rather than a Sure Start worker (often the Neighbourhood development coordinator). This move has helped to put the focus back on the parents owning and running this group.

The chair of the management Board met with the Parents Forum on October 2003. The chair wanted to gain feedback from the parents in relation to how parental involvement can be increased; what preparation parents need to be involved in various groups and activities such as hiring the new Programme Manager etc. The parents wanted to express their frustration that they felt slightly tokenistic on the Management Board. They wanted to feel more able to contribute, but the jargon used was off-putting. This was addressed at a subsequent Management Board meeting and a strategy for improving the Management Board was developed in consultation with parents.

The parents renamed the Parents Forum to Parents and Carers Unite in October 2003. Three parents undertook a 'personal development course' designed to give greater understanding of Sure Start and to look at development of communication and chairing skills. Other training opportunities for parents seem to be apparent, e.g. a Community Development Training Programme; an Introduction to Computers course etc. The uptake of these training places is not clear.

4.2.8 Staff meetings

Monthly staff meetings take place, with dates being available well in advance. Minutes of meetings were available. These were well supported and the agendas tended to be centred around developing policies and procedures, feeding back on capital plans and other financial issues,

staffing and developing services and partnerships further. Minutes did not contain action points, but they did contain matters arising from the previous meeting, so some updating and continuity was apparent.

4.2.9 Co-ordinators' meeting

Monthly meetings of the coordinators between early years, family support, health community development, finance and administration takes place *'they help the coordinators to know what is going on in the other groups'*.

4.3 Quality and Standards Procedures

From the documentary analysis it appears much work is done in relation to monitoring the quality and standards of provision within the Sure Start programme on a continuous basis. Examples of the range of these activities are briefly outlined below:

4.3.1 Child Protection Policies

The Sure Start Child Protection Policy is in place and is derived from current legislation and National Guidelines. It is also supported by further guidance provided by partnership agencies/organisations. A small file with related literature on child protection was also evident highlighting that Sure Start Happy Elephant take this issue seriously. A one-day Child Protection Training course has taken place for all Happy Elephant staff and in-house training is given to volunteers as part of the induction package. A child protection incident file revealed clear documentation had been kept. *Child in Need Referral Forms* had been used. Broader issues relating to child protection issues did appear on minutes of staff meetings, such as need for more gloves and aprons for changing children; policy needs to be drawn up for handling challenging behaviour etc.

4.3.2 Safety procedures

Box files full of information and leaflets on safety in the home and community were available. Risk assessments had been carried out by one of the team to identify risks in the venues used by Sure Start for their services, such as the crèches. A log of the safety equipment given to parents was evident. The equipment included safety gates, socket covers, fever strip, inflatable bath protector etc. Happy Elephant have a health and safety notice board located by the kitchen, and an Insurance certificate is on display. Records show that fire drills have not taken place and that these are needed urgently.

4.3.3 Commissioning Services

Commissioning Policy and Procedures for Happy Elephant services were clearly written. A detailed application form (electronic version was also available) for new work is required from all applicants. The application form requires details of the proposed project; evidence of the need and consultation for the service; how the service meets Sure Start objectives and targets; how the project would be delivered; resource and finance implication; the impact of the service; any risk

assessment areas to be identified; future outlook for the project; how the project would be publicised to families; an outline of the milestones for the first year and a reference.

4.3.4 Other policy documents were also in place, such as an 'Inclusion Policy', 'Referral Procedures' and a 'Volunteer Recruitment Policy'.

4.3.5 Complaints procedures

A complaints file contained one incident. Some paper-work was available, but a final resolution to the incident was not in the file. A Whistleblowing Policy, for the disclosure by staff of alleged issues of concern has been written and is in operation.

4.3.6 Risk Assessment

The Sure Start Unit carries out Risk Assessments every six months. To date, Happy Elephant has had a 6,12 and 18 month risk assessment. The aim of these assessments is to benchmark nine areas of the Programme to ensure that the programme is operating effectively at various stages of development. The risk assessment involves a documentary analysis in the areas identified below. *This evaluation report does not intend to duplicate the work undertaken by the Sure Start Unit. Evidence of effectiveness in these areas can be accessed via the Risk Assessment report housed with Happy Elephant.*

In February 2003 Happy Elephant had a 'high' Risk Assessment score at six months. This assessment was made by the Sure Start Unit. Several issues were identified as needing attention, mainly relating to documentation rather than an overall lack of activity within the programme. This high score was a clear shock to the Management Board who then worked hard to rectify the situation. Six months later at the Risk Assessment in August 2003 the programme was rated 'low' risk.

The results of the first two assessments are as follows (18-month figures not available):

Area	6 month score	12 month score
1. Child protection	0	3
2. Parent & community involvement and participation	4	0
3. Productivity	4	0.16
4. Finance	4	0.25
5. Governance & partnership working	0.25	0
6. Personnel management	0	0
7. Capital	0	0
8. Working with diversity	0.07	0
9. Health & safety	0.13	0

The Sure Start Unit claimed Happy Elephant has *'made significant progress since the 6 month risk assessment in formalising and documenting procedures/ policies and agreeing them with relevant agencies... This clear progress is all due to the commitment and hard work of the Programme*

Manager and her team to develop appropriate systems and Sure Start services and to the solid support provided by The Children's Society as the accountable body'.

4.4 Other Issues

4.4.1 Staff development and training

There was some evidence of staff development and training initiatives, for example;

- A team building course was provided to Happy Elephant workers in February 2003. This was undertaken with an external consultant and 7 individuals. Feedback records highlight it was a valuable session.
- In-house Community Development Training was given to Happy Elephant workers in March 2003.
- Training for smoking cessation was also organised for staff to enable them to be able to identify support services for residents in the area who want to give up smoking.
- The NSPCC have offered to carry out training for staff, volunteers and parents on child protection and domestic violence.
- A list of multi-disciplinary/joint training was available, but no date was on this record. The contents highlighted the following examples of training had taken place; 3 day portage training; 'know your rights' training; mental health training; coping with children's behaviour management course; IT training etc.
- Following the Programme Manager's absence 'Team Planning Days' were organised each month for programme development purposes. Evidence of these days was not apparent to the evaluation team. A box file entitled 'team meetings' was empty except for two sets of minutes (dates September 2003 and January 2004).
- Evidence of other training was in the files but only appeared current to the summer 2003.

A systematic approach to staff development and training (including an up-to-date record/log of who has undertaken what training and when etc.) would be useful for identifying gaps as well as expertise. It may also introduce a fair system for allocation of continued professional development. Since the Happy Elephant staff are relatively new, the training taking place is centring on the required induction programme.

4.4.2 Inclusion

Happy Elephant developed an 'Inclusion Strategy' in 2003 along with a 'Capacity Building Strategy' and a 'Parents and Community Involvement Strategy'. These documents may become one, more user friendly document in the future, *'that is owned by the wider community', 'they perhaps need to be made more jargon free'*. Trying to make all workers develop a way of working that is inclusive is a priority. It is hoped when the new Programme Manager takes up his post in March, this area will continue to be high on their agenda.

The Programme believes that there are 25-40 families that could be defined as 'hard to reach'. They recognise that some families choose not to become involved. With families who have expressed a desire *not* to access the services, a note has been placed on the database. These families will still receive information, if they change their mind.

Happy Elephant has made a sustained effort to ensure their services are inclusive. In the 'Hard to Reach' Task Group they identified issues that they as a group may need to focus on. These included for example;

- Not to be tokenistic
- Be supportive to parents and volunteers - encourage progression
- Get out and about, talking face-to-face with families
- Develop a 'buddy' system
- Take a critical look at venues – are they suitable? Can accessibility be improved? Transport? Times – suitable especially for dads?
- Constantly review the services being provided – what types of activities are we offering?
- Identification of those families not accessing the services, and then ensuring marketing and advertising reaches them – or taking services to them!
- Develop a welcome pack for new registrations and think about promotional materials – video/audio?
- Develop a welcome pack for new volunteers
- Ensure positive, inclusive images are used on publicity materials –e.g. males, children with special needs, different ethnic groups
- Ensure workers are able to tell parents of the value of Sure Start to them and their children
- Offer friendly services, etc.
- Use 'freebies' more and the banner

It appears that much work has been done to try and include **fathers**. An inclusion document entitled 'Fathers Involvement' has been written. Partner agencies that Happy Elephant should link with have been identified such as 'Fathers Direct Network'; Sure Start New Steps; Connexions etc. A Dads' group runs every week but with only 1-2 dads attending. As children's workers commented *'we went out into the community – even B&Q to talk to dads. They say at the time 'oh yeah, I will come along' and then they don't. We call them and they say 'something came up, but I will come next week' and they don't again'*. A 'Hard to Reach' consultation was done involving two fathers. Designated time for work with fathers has been allocated and a worker is recently in place to focus on this group of residents (Men and their Children – MATCH). Progress in this area will be reviewed by the evaluation team over the next year.

An inclusion strategy for **Teenage Parents** has also been developed. This included the identification of partners and the need for joint planning with Sure Start Plus and other partner agencies. However, a joint consultation meeting in December 2003 with Sure Start Plus for all teenage parents on the database, resulted in no parents attending. The 'Valentines Pamper Day' on February 12th 2004 was attended by a group of teenage parents.

An inclusion strategy for **travellers and gypsies** is also in existence. The group residing in the Happy Elephant catchment area have been involved in Sure Start via portage services and some basic skills courses run at the local church. A children's worker comments *'from my experience they like us to go to them, but they do not want to be involved in the rest of the community'*. There was evidence that a Happy Elephant worker had been involved in wider network groups for Gypsy and Travelling communities in St Helens, e.g. further information had been gathered on similar groups in a different region in the UK.

An inclusion strategy for **Children with additional needs** had also been developed. It appears that Happy Elephant services were not being used by these children and families, except for the portage development workers and the 'Busy Bees' group. Happy Elephant has been able to provide physical support in terms of equipment and information as to the social, emotional and developmental support these families may obtain from other services. A new portage worker takes up her position at Happy Elephant in February 2004. A parent with special needs has recently become involved in Sure Start, and so it is hoped that her expertise can be drawn upon to develop more effective service provision in this area.

The evaluation team suggest Happy Elephant consider emphasising that the programme is funded for ten years, so the expectations of residents may be raised as to its usefulness for them. Evidence shows that they are used to more short term funded initiatives that often disappear. Further, there may be problems with inclusivity – i.e. local politics, family rivalry, prejudices etc. that need to be recognised, understood, accommodated and managed.

4.4.3 Evidence based practice

Evidence of research documents to base their practice on, e.g. papers outlining the latest research into childcare; breast feeding; post natal depression; inclusivity; safety etc. had begun to be collected. There was clear evidence that collecting current information and evidence is an *intention* and several box files are in place for this purpose. It is hoped that once the staff is at full complement more emphasis can be placed on keeping up-to-date with current evidence on which to base their practice.

4.4.4 Monitoring and Evaluation

Happy Elephant has commissioned this **local evaluation** carried out by Manchester Metropolitan University in order to provide an external, objective assessment of the effectiveness of the programme. This evaluation has been commissioned over an extended period of time (see introduction). Further, several **in-house evaluations** have been conducted on several services (see section 8) by Sure Start workers. The **monthly and annual returns** to the Government also provide a structured means to measure progress.

Scrutinising the **quarterly performance plans** indicated that for the first two quarters, the majority of Happy Elephant **milestones** were not met due to recruitment difficulties. However, latterly their milestones are being met.

At an early stage in the programme the manager asked the evaluation team to suggest **baseline data** that could be collected. The evaluation team produced a document for use by both Happy Elephant and Central Link managers (see appendix vi) to aid them in the collection of baselines. There has been some work done in this area, but it is suggested that baseline data needs to be prioritised to enable comparisons to be made that highlight the difference Sure Start is making in the community.

4.5 Reach Analysis

Since Sure Start Happy Elephant was in round 5 of Sure Start programmes established nationally, it is still in the development stage. A breakdown of the quarterly reach figures is kept. These were made available to the evaluation team. An example of monthly statistics for December 2003 (the most current available) is presented here:

Children seen

82 children were seen. This includes 22 new children and 60 existing children below the age of 4. The figures include a further breakdown of children: under one; 1-2 year olds; 2-3 year olds and 3-4 year olds. Further information about the children such as an ethnic breakdown (all white except for 8 'unknown'), the number of disabled children or those with special needs (6) is also recorded.

Pregnant women seen

No pregnant women were seen during the month of December 2003. The figures indicated that 3 existing pregnant women were seen, and of these 2 were lone women. No teenage (under 18) women were seen; no woman with disabled/special needs was seen. These figures need further investigation as they appear very low.

Families and parents seen

22 new families were seen during December, making 95 families seen in the last month and 85 parents. Of these, 19 were lone mothers and 1 was a lone father. 1 new teenage parent was seen. No disabled parents or parents with special needs were seen (NB a portage worker was not in post at this time).

New births/new babies visited

Number of live births in December was 13. The number of babies who were aged 2 months at any time during the month was 17. 13 visits were recorded by the Sure Start team in the first two months of the baby's life, which is in line with Government targets.

4.6 Objectives and Targets

Currently the Government has four long-term objectives and associated national targets for Sure Start programmes. There are 4 Public Service Agreement targets specifically designed to improve children's wellbeing and development, and 12 Service Delivery Targets that are associated with programme implementation that Happy Elephant is expected to work towards. For around 5 programmes, current Public Service Agreement (PSA) targets must be achieved by March 2006. Happy Elephant is also encouraged to formulate additional goals based on local needs, but did not do so at the development stages of the Delivery Plan.

In relation to the objectives and targets, a key question this evaluation needs to begin to address is:

- What evidence is there that Happy Elephant has *made a difference to families in the local communities?* i.e. What *measurable* and *meaningful outcomes* are there?

There was documentary evidence that new services were matched against the services objectives and targets. What appear to be less clearly identifiable, at this stage in the programme, are

measurable outcomes of these services against the service specifications. Coupled with the newness of the programme, there is also the **difficulty of measuring the less tangible outcomes**. For example, many parents comment that their participation in the programme has led to *'increased self esteem and confidence'; 'a better sense of well-being'; 'a greater sense of feeling supported and belonging'*.

Below provides a range of examples of initiatives and services set up as part of Sure Start Happy Elephant. Several of those identified meet more than one service objective, however, they have been identified under core services / teams here.

4.7 Core Services/Teams

Several documents were available that described, amongst other things, the targets; milestones; responsibilities of coordinators in light of the targets; project development in light of the targets and so on. However, it was very difficult to get beyond these sketchy plans or descriptions. When asking workers about the core services and targets, discussions were somewhat vague. A sample of the work of each core service / team is provided here.

4.7.1 Outreach and home visiting

- Home visiting service has been sluggish due to staff shortages, however the 'universal Home Visiting Strategy' has now been launched with health visitors
- Children's workers have been home visiting all children in the area between 22-26 months as part of the National Sure Start Language measure
- Ant- natal contact and support provided
- Development of practical support for children with disabilities and special needs – new portage development worker recruited
- Dad's worker recently hired – to run a range of fathers' and fathers'/children's/family groups
- Lack of Homestart coordinator for Happy Elephant – resulted when previous person left

4.7.2 Support for families and parents

- A lack of a Happy Elephant community centre could be seen to hinder programmes to support families
- Group is led by a Neighbourhood Development coordinator and is supported by Children's workers
- A comprehensive volunteer programme was developed – volunteers will work towards St Helens CVS's Volunteer Certificate
- A successful Parents and Carers Unite group was developed
- A 'know your rights' day for St Helens Sure Start programmes was been co-ordinated
- 'Happy Chappies' group was run.

4.7.3 Support for good quality play, learning and childcare experiences for children

- Lost a key worker, so have has staff shortages in this area.

Examples of activities;

- Child care and family help
- Play and learning resources

- Various play groups / play days
- Crèches and parent/toddler groups
- 'Stay 'n' play' - weekly at local library
- Pamper group
- Family respite
- Extensive school holiday plan

4.7.4 Primary and community health care, including advice about family health and child health and development

'Local midwives are enthusiastic about becoming involved with Sure Start but cannot commit the time'

Examples of activities

- Post natal depression support/advice
- 'Safe in houses' initiative
- 'Ready steady cook' group
- Smoking cessation support

4.7.5 Support for children and parents with special needs, including help in getting access to specialised services.

- New portage development workers joining team in March 2004
- Several attempts to hire Speech and Language therapist
- Speech and language measures have been completed by children's workers
- Services for children with disabilities and special needs
- Provision of equipment for children with special needs

5.0 FINDINGS (ii): SURVEY RESULTS: HAPPY ELEPHANT PROFESSIONALS AND VOLUNTEERS

5.1 Profile of respondents

NOTE:

(i) This survey has a small sample of respondents, this should be remembered when percentages are given e.g. 33% only equates to 4 people.

(ii) Where the actual respondent's words are used these are in *italics*.

There were 12 questionnaires completed. Job titles of the respondents were as follows:

Job title	Number	Percentage
Children's worker	4	33%
Crèche worker	3	25%
Finance and Administration manager	1	8%
Neighbourhood Development Coord.	1	8%
Parent involvement worker	1	8%
Publicity and monitoring officer	1	8%
Administrator	1	8%
Volunteer	1	8%

83% of respondents were funded entirely by Sure Start. One children's worker was partially funded and the volunteer was not funded at all.

5.2 Sure Start Involvement of Respondents

Respondents were asked which Sure Start service they were involved with. Responses included:

- *Running of crèches*
- *Parent/community involvement*
- *Early years and groups and family support*
- *Home visiting*
- *Parent and child groups*
- *Fun and Play playgroup*
- *Fun days, health walks*
- *All of it*

Two respondents stated that they were not directly involved in services.

5.3 Meeting Objectives

When asked which Sure Start objective their service/s aim to address, 8 respondents replied and 7 felt that *all* the objectives were met. One respondent replied that objective 4 was addressed mainly. The Sure Start objectives are:

Objective 1: Improving Social and Emotional Development

Objective 2: Improving Health

Objective 3: Improving the Ability to Learn

Objective 4: Strengthening Families and Communities

Respondents were asked to state **how** their service/s was/were meeting these objectives, by providing two outcomes to date. The majority of responses were **not** stated as outcomes, or were relatively vague in measurement terms in relation to impact and effectiveness. For example:

- *A lot of the groups meet all the objectives or more but once they are full there is nothing to signpost parents to*
- *Aqua Tots group meets all 4 objectives, extremely positive feedback, been running for a year, group would like to advance to swimming lessons*
- *Aqua Tots enables mums to come along with their child. Children overcome fear of going into water*
- *Home visiting – early identification of problems with speech and language development*
- *Improving emotional and social development – engaging in groups*
- *Parents/carers becoming involved in all aspects of the programme*
- *Providing mums to be at Aqua Natal exercise, talk with midwife which overcomes stress and worries*
- *Speech and language support*
- *Strengthening families/communities by getting more families involved with Sure Start*

- *Improving the ability to learn, speech group – good uptake*
- *Parents/carers becoming volunteers and accessing training*
- *Respite for parents*
- *Strengthening families and communities. Empowering parents. Support and advice to encourage parents to make choices re their child's development, growth, health and education.*

While the statements above are positive, it is important that service providers are able to clearly state, often (but by no means exclusively) in measurable terms how their service is working to achieve the Sure Start objectives and associated targets.

5.4 Effectiveness of Services

The **uptake** of the service/s offered by respondents varied from between 5-15 families depending on the service.

Respondents were asked to describe an activity that had gone **particularly well** and explain why. Examples included:

- *Aqua tots. At first children sat on the side of the pool now they join in the activity swimming on their own using armbands and have grown in confidence*
- *Christmas grotto went very well with over 80 families attending*
- *Decorating cards and biscuits, making things, painting with hands*
- *Development of Parents and Carers Unite group, parents/carers taking on roles within the group and contributing to the agenda*
- *Discussions around sleep routines with new babies and feeding, also pamper sessions. Parents enjoy the aspect of having something for them as adults*
- *Health walks, Halloween and Christmas sessions. Well planned out with 3 sessions throughout the day so that most children accessed the event. Well liked by everyone*
- *Introduction of baby massage (group and 1:1) in the home to try and alleviate symptoms of post natal depression. Gone well as staff trained to highest level and present course in friendly, comfortable manner*
- *Speech group – the Sure Start speech and language measure highlights children who are having problems related to speech. We can refer on to speech group and give programmes for families to work on*
- *Speech group is going well, I feel this is because it is structured and children stay by themselves and we have targets to aim for.*

They were then asked to describe an activity that had **not gone well** and explain why they thought that was the case. Examples included:

- *All the trips, people were not turning up for them after booking a place*
- *Home visiting. Did four age led visits originally. Reviewed due to not gaining needs. Now do 2 year visit and introductory visit only. 2 year visits come from birth list, [families have] often moved by 2 years. Waste of staff time.*
- *Low attendance to group on run up to Christmas. Last 3 sessions very low numbers 1-3, due to sickness and possibly commitments change during December.*

- *National Play Day. 1 family accessed this. Feedback was that people made their own way there and just didn't require the transport that we provided.*
- *Planned in conjunction with others to set up a drop-in (employment advice etc). Didn't happen as agency going to take it on lost their contract. Not adequate time to make alternative arrangements.*
- *Speech group at the beginning as we didn't have the right amount of staff needed to start the group as other groups had been booked in.*
- *Summer trips as parents put name down to go but did not take up place because of other commitments on the day.*
- *Trips, people were phoning in for places but were not arriving on the day, this then made the trips lacking in numbers.*

These examples of what went well and not so well highlight that the workers have reflected on the activities they have been involved in and they appear to have learned valuable lessons. A clear theme to emerge is the poor attendance, in particular parents booking a place and then not turning up.

Respondents were then asked what they thought had been the **biggest differences** they had seen since Happy Elephant began 18 months ago in the following areas:

The local community in general

- *Accessing provision set up by Sure Start*
- *Becoming more involved. Seeing people in groups that you wouldn't have expected to see there.*
- *Community/organisations working together, specific services, increase in services*
- *Happy to see new changes and new groups*
- *More involved and empowered, more awareness of us is needed though*
- *Still hard to get into visits, starting to get involved in Sure Start.*

With parents

- *Are being involved more by volunteering, doing training courses, running their own parents' unit and attending Management Boards*
- *Are more involved in all aspects of Sure Start*
- *Comments made over telephone, how good Sure Start is, they say it's so much better for them*
- *Confidence, assertiveness, active participation*
- *Empowerment, confidence*
- *Happy to have someone to talk to with similar experiences*
- *More confidence when attending different groups and becoming more involved*
- *Parents are more involved with management boards and with volunteering*
- *Playing a vital role in planning and evaluation*
- *They are accessing more Sure Start services*
- *They look forward to our events, more aware of Happy Elephant*

With children

- *Accessing more groups to develop their own skills*
- *Accessing services that they wouldn't have without Happy Elephant*
- *Are happy and their development has improved since accessing groups*
- *Are socialising, healthy-eating in groups. Sure Start crèches giving them confidence socially, interacting more with other children*
- *Changes in children's learning progress*
- *Happy they have somewhere to play and make new friends*
- *Increase in confidence and skills*
- *Development has improved.*

5.5 General views on Happy Elephant

Professionals and volunteers were asked to agree or disagree with a series of statements. The results were as follows:

	N	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
Happy Elephant is providing an excellent service to local residents	12	50%	50%	-	-	-
The Management Board is effective	12	-	91.3%	8.7%	-	-
I understand the role of the Management Board	12	33.3%	58.3%	8.3%	-	-
I have attended the partnership group at least once	11	63.6%	36.4%	-	-	-
I am involved in a sub group/task group	11	36.4%	45.5%	9.1%	9.1%	-
Strong consultation with parents is evident	11	45.5%	54.5%	-	-	-
Parents are encouraged to become involved in Happy Elephant	12	66.7%	33.3%	-	-	-
Happy Elephant services are well advertised	12	25%	41.7%	33.3%	-	-
Happy Elephant has improved community spirit	10	10 %	80%	10%	-	-
I know who to contact at Happy Elephant for information	12	50%	50%	-	-	-
The same parents tend to use the services	12	33.3%	58.3%	8.3%	-	-
I need to make more of an effort to encourage 'hard to reach' families to become involved	10	40%	20%	30%	10%	-
Happy Elephant provides me with opportunities for professional development	11	54.5%	36.4%	9.1%	-	-
Happy Elephant appears to be well resourced financially	12	58.3%	41.7%	-	-	-
Communication between local Happy Elephant workers is good	12	25%	50%	25%	-	-
Communication between Happy Elephant workers and management is good	12	16.7%	75%	8.3%	-	-
I am involved in evaluating and monitoring the service I provide	12	33.3%	58.3%	8.3%	-	-
I have collected baseline data	11	18.2%	36.4%	27.3%	18.2%	-
I attended the evaluation training workshops	12	33.3%	50%	8.3%	8.3%	-
I found the workshops good	9	11.1%	55.6%	33.3%	-	-
I am fully aware of the Sure Start objectives and	12	83.3%	16.7%	-	-	-

targets						
I am proud to tell people that I work for Happy Elephant	11	72.7%	27.3%	-	-	-
I share the values of Happy Elephant	11	81.8%	18.2%	-	-	-
I feel motivated to do the best I can in my job	11	63.6%	34.4%	-	-	-
I understand clearly what is expected of me	11	54.5%	45.5%	-	-	-
My work is valued at Happy Elephant	11	54.5%	45.5%	-	-	-
I find my work interesting	12	33.3%	50%	16.7%	-	-
I find the level of challenge in my work manageable	12	33.3%	41.7%	8.3%	16.7%	-
I receive support from my manager	12	72.7%	27.3%	-	-	-
I make a positive difference to people who use our services	11	63.6%	26.4%	-	-	-
I have the information to do my job	12	58.3%	41.7%	-	-	-
I am satisfied with my 1:1 contact with my line manager	11	63.6%	36.4%	-	-	-
I am satisfied with Happy Elephant team meetings	11	36.4%	45.5%	18.2%	-	-
I am satisfied with Happy Elephant team development days	11	27.3%	45.5%	18.2%	9.1%	-
I am satisfied with the individual team meetings	11	27.3%	63.6%	9.1%	-	-

The data above has been computed using a scoring formula as follows: 1 = strongly agree, 2 = agree, 3 = neither agree nor disagree, 4 = disagree and 5 = strongly disagree. By calculating the *mean score* the statements which prompted **most** agreement or disagreement may be ascertained. The table below shows the statements in order starting with those that respondents agreed with the most.

	Mean score
I am fully aware of the Sure Start objectives and targets	1.17
I share the values of Happy Elephant	1.18
I am proud to tell people that I work for Happy Elephant	1.27
Parents are encouraged to become involved in Happy Elephant	1.33
I feel motivated to do the best I can in my job	1.36
I have attended the partnership group at least once	1.36
I am satisfied with my 1:1 contact with my line manager	1.36
I have the information to do my job	1.42
Happy Elephant appears to be well-resourced financially	1.42
My work is valued at Happy Elephant	1.45
I understand clearly what is expected of me	1.45
Communication between Happy Elephant workers and management is good	1.46
I know who to contact at Happy Elephant for information	1.50
Happy Elephant is providing an excellent service to local residents	1.50
Happy Elephant provides me with opportunities for professional development	1.55
Strong consultation with parents is evident	1.55
I am involved in evaluating and monitoring the service I provide	1.75
I understand the role of the Management Board	1.75
The same parents tend to use the services	1.75
I am satisfied with Happy Elephant team meetings	1.82
I am satisfied with the individual team meetings	1.82

I attended the evaluation training workshops	1.83
I find my work interesting	1.83
I am involved in a sub group/task group	1.91
I have attended the evaluation training workshops	1.92
Happy Elephant has improved community spirit	2.00
Communication between local Happy Elephant workers is good	2.00
The Management Board is effective	2.08
Happy Elephant services are well advertised	2.08
I find the level of challenge in my work manageable	2.08
I am satisfied with Happy Elephant team development days	2.09
I need to make more of an effort to encourage 'hard to reach' families to become involved	2.10
I receive support from my manager	2.18
I found the evaluation workshops good	2.22
I make a positive difference to people who use our services	2.27
I have collected baseline data	2.45

5.6 Gaps in services

Responses included:

- *Advertising our groups. This could be improved. Some people accessing groups.*
- *Fathers/male carers support group, family support in terms of parent befriending project, employment/training development, a little done – more needed.*
- *Midwifery service, teenage groups and activities, domestic violence initiative, drop-in type groups.*
- *Need to make some of the groups more self-sufficient so that staff can put on more groups in the future.*
- *Not every family accessing groups. Fathers not accessing any groups.*
- *Same people accessing groups so more promotion needs to be done to encourage new families to attend groups.*
- *Specific family support service that is more structured i.e. referrals given specific to this area of work – social services and town centre GPs still unsure about what we can offer, should be more informed then possibly receive more home visit referrals.*
- *Teenage groups, drop-in for parents i.e. if groups are full there is nothing left for new families to attend.*
- *Teenage parent sessions. Dads' involvement.*

5.7 Additional comments

Professionals and volunteers were given the opportunity to make a final comment. Examples included:

- *Been with Sure Start for 8 months, feel we all try to do our best for the community and their children. Groups we have for our parents are well planned and their children are taken care of where we all promote the ethos of Sure Start and take great care in what we do. I love my job.*
- *I feel that I do not find my work challenging enough having come from a work background that was challenging and stimulating. I feel the title of children's worker does not reflect*

what I actually do within my job and does not make me feel valued and gives parents and other professionals the wrong impression of my role. Most people think I'm a crèche worker when I tell them my title. I would definitely like this to change as I feel I do a lot more and am capable of doing more than what people's expectations of what a children's worker actually does or can do. I like the way Sure Start encourages parents' personal power and opens up future choices to them.

5.8 Key points

- The enthusiasm of the workers and management team is evident.
- 90% of respondents feel that community spirit and support for families with young children have increased. 100% of respondents felt that Happy Elephant is providing an excellent service to local residents.
- The number of families involved with some of the services is low. Thus, while recruitment is constantly on the agenda, reinforcing the importance of increasing the number of families involved should be considered.
- Several examples of activities that have gone particularly well are described in this report e.g. Aqua Tots; speech group; Christmas grotto etc. However, with the odd exception (e.g. the speech group) the **reasons** for their success were not always recognised.
- Several examples of activities that have **not** gone particularly well are described in this report and the reasons are being recognised and can be valuable learning experiences for workers. The main reason given was 'no shows' when places are booked.
- Some useful gaps in provision have been identified by respondents (see section 5.6). Gaps focused on **processes** e.g. greater advertising needed; better access needed; wider recruitment needed, as well as **services** e.g. teenage parents session needed; support group for fathers/male carers; better midwifery services etc.
- Workers were less able to clearly state **outcomes** of their services in relation to the four Sure Start objectives and targets. We recommend stressing the importance of monitoring and evaluating **measurable** outcomes at subsequent staff development events.
- A sustained effort to collect baseline data (just over 50% said they have collected baselines) and the current undertaking of monitoring and evaluation needs to be sustained. Further, there is room to improve the evaluation workshops.
- 33% of the respondents did not agree that Happy Elephant services are well advertised. Thus we recommend more effort is put into this area of the programme.
- 60% of the respondents felt they needed to make more of an effort to involve 'hard to reach' families.
- 100% of the respondents felt that parents are encouraged to become involved in Happy Elephant, and are consulted about the services.
- While communication between Happy Elephant workers was in general good (75% agreed), there was room for improvement. In addition, greater communication between the other St Helens Sure Start programmes should to be encouraged.
- The management structures appear to be well understood and offer good lines of communication.
- With only a few exceptions, Sure Start workers appear to be motivated, valued and supported in the work they do for Happy Elephant. In addition, they feel they have professional

development opportunities. However there was a small percentage of respondents who felt the interest and level of challenge in their job could be improved.

- 100% of workers agree that Happy Elephant is well resourced financially.
- Parents have increased their confidence and feel better supported. However, it appears to be the same parents using the services, thus, a sustained effort to recruit new parents must continue.
- Happy Elephant professionals and volunteers feel that the young children using the services are developing into happy children who enjoy learning.

6.0 FINDINGS (iii): SURVEY RESULTS: HAPPY ELEPHANT RESIDENTS

6.1 Profile of respondents

- There were 84 completed questionnaires from residents.
- 76 (91%) were female and 8 respondents (9%) were male
- 54 (64%) respondents lived within the WA9 postcode area. The other 30 (36%) respondents lived in the WA10 postcode area.
- 45% of residents had lived in the area for 5 years or less and 21% had been resident in the area for more than 20 years.

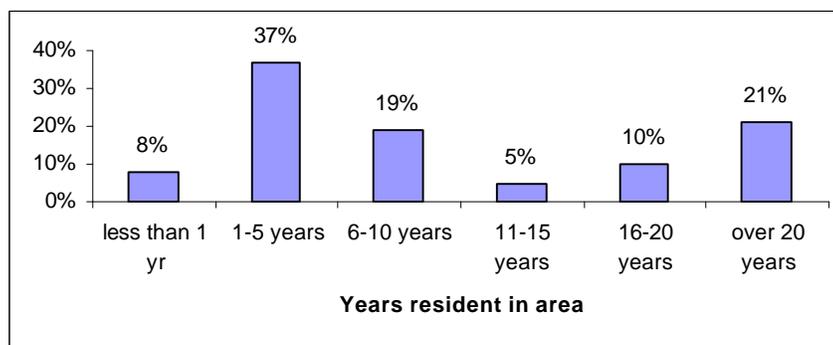


Chart 1 – Length of residence in area

Numbers and ages of children

- Respondents had between 0-9 children each, with a total of 183 children between them. 2 respondents had no children. A breakdown of their ages shows 86 children aged 0-3 years, 73 children aged 4-11 years, 21 children aged 12-16 years and 3 children aged 17-18 years.

Households

- 53 (63%) lived with their partner, one lived with her mother, one lived with her brother and sister in law and one lived with her partner's brother and family. The remaining 28 respondents did not report that they lived with anyone.
- 29 (35%) reported that they were lone parents.
- 4 (5%) respondents reported that someone in the household was pregnant.
- 44 (52%) reported that someone in the household was working full-time and 40 (48%) reported that there was no-one in the household working full-time.
- None of the respondents reported that they were asylum seekers or refugees.
- All respondents reported that they were British and that their first language was English.

6.2 Quality of Current Community Services

Health Centre/Clinic

- 43 (51%) of the respondents reported they used the health centre
- 67% of those that use the health centre/clinic did so once a month or more.
- 49% never use it
- 95% of those who use the service are either very satisfied or satisfied with it.

Library

- 48 (57%) of the respondents reported they used the library
- 87% of the respondents who used the library did so at least once a month
- 43% never use the library
- 100% of the library users were satisfied or very satisfied with the service

Church

- 27 (32%) of the respondents reported they attended church
- 56% of the respondents who attended church do so at least once a month
- 68% never attend church
- 100% of those who attended church were satisfied or very satisfied with the service

Chemist

- 69 (82%) of the respondents reported they used the chemist, only 8% *never* use this service (the remaining 10% did not respond to this question).
- 91% of the respondents who use the chemist do so at least once a month
- 100% of those who used the chemist were satisfied or very satisfied with the service

Play Groups

- 20 (24%) respondents reported that they used playgroups. These playgroups included:
 - *Butterflies*
 - *Emmanuel St Thomas*
 - *Library*
 - *Manley Place*
 - *Salvation Army*
 - *Tiddlywinks*
 - *St Austin's School*
 - *St Matthew's Playdays*
 - *West Street*
- 25% of those who attended their play group did so more than once a week.
- A further 70% use it once per week
- 76% did not use play groups
- 100% of those who used the playgroups were satisfied or very satisfied with the service

Dentist

- 43 (51%) respondents reported that they visited the dentist (this figure seems rather low)
- All the respondents who had visited the dentist did so in the last year

- All were either satisfied or very satisfied with the service

Social Services

- 2 (2%) respondents reported that they used social services. One named the service as Sunbary Street. Both visited the services once a month. One respondent reported that she was very satisfied with the service and the other was satisfied.

Housing

- 17 (20%) respondents reported that they used the housing service. 12 respondents named the housing service as Helena
- 94% of the respondents who used the housing services did so at least once a month
- 80% never used the housing services
- 67% of those who used the service were satisfied or very satisfied, 33% were not satisfied

Job Centre

- 6 (7%) respondents reported that they used the job centre.
- 17% of the respondents who used the job centre did so more than once a week
- 67% used it once a week
- 93% never used the job centre
- 100% of those who used the service were satisfied or very satisfied

College

- 8 (10%) respondents reported that they used the college
- 44% of the respondents used the college more than once a week
- 22% attended once a week
- 90% never attended college
- 86% of those who attended college were satisfied or very satisfied

Generally

Most respondents did not report why they did not use a service. The most common response of those that did was that the service was not needed.

There were a few comments about the services. These included:

- *Clinic could be open longer hours*
- *Customer service at Helena poor*
- *Health centre/walk is patronising*
- *Housing service needs improving*
- *Wait ages to hear about housing*
- *St Helens good college*
- *Generally very happy with services*

Respondents were asked what gaps they thought there were in community services. It should have been emphasised that the gaps in provision related to the 0-4 age group and their families, since several responses focused on a lack of facilities for older children and the elderly – these being outside of the remit for Sure Start. Examples included:

- *Could be more free facilities for over eights, like Sure Start*
- *Provision for between 4 and 5 years*
- *Something for older kids (12+) that's safe*
- *I am a childminder, I feel there is a gap for care of older children before and after school*
- *I would like to see more groups/services for elderly*
- *Local swimming pool*
- *More stuff for kids to do*
- *Information on the area before you move in as some areas are rough*
- *Would prefer services offered at the health clinic to be available more locally so parents have less distance to travel.*

6.3 Sure Start Happy Elephant

73 respondents (87%) had heard of Sure Start Happy Elephant and 11 (13%) had not.

Comments included:

- *I find Sure Start very good, providing funding for things and putting on great events/activities*
- *Very good for young children*

6.3.1 How did you hear about Happy Elephant?

Respondents reported that they had heard about Happy Elephant through a wide variety of sources. The most reported sources were health visitor (13 people), friends (10 people), leaflets (8 people) and playgroup (7 people). Other sources included:

- | | |
|--------------------------------|------------------------------------|
| • <i>Neighbour</i> | • <i>Letter through door</i> |
| • <i>Poster, local paper</i> | • <i>Library</i> |
| • <i>Partner, family</i> | • <i>Nursery</i> |
| • <i>Mum and toddler group</i> | • <i>Promotion</i> |
| • <i>Children's worker</i> | • <i>Salvation Army</i> |
| • <i>Clinic</i> | • <i>School</i> |
| • <i>Home visit</i> | • <i>Someone came to the house</i> |
| • <i>Social worker</i> | |

50 respondents (60%) reported that they were registered with Happy Elephant and 20 (24%) reported that they were not. (There were 70 valid responses.) 2 further respondents reported that they used to be registered but are not now and 1 reported that she was not sure if she was registered.

6.3.2 Is Happy Elephant what you expected?

Out of 48 responses, 44 (92%) reported that it was what they expected.

Comments included both positive and negative feedback, for example:

- ... really helped both of us
- Better than expected
- It's great, crafts, play, opportunities
- Loads of fun
- Bit too remedial, expected crèche facilities to be better
- Didn't know what to expect
- Not gone myself but partner didn't like it
- Not used it yet

6.3.3 Have you told neighbours/friends about Happy Elephant?

44 (52%) respondents reported that they *had* told neighbours/friends about Happy Elephant and 28 (33%) reported that they had not. (72 valid responses.)

Comments included:

- *Friends were already registered*
- *Friends wouldn't go*
- *No family in the area*
- *No one with little ones*
- *People already know*
- *Told everyone.*

6.4 Sure Start Happy Elephant Services

6.4.1 Services used

Aqua Tots

- 10 (12%) respondents reported that they had used Aqua Tots.
- 9 respondents reported that they were very satisfied with the service '*Interesting*' '*Like fact that got picked up for Aqua Tots*' '*Lovely*'

Busy Bees

- 3 (4%) respondents reported that they had used Busy Bees. They were all very satisfied with the service.

Crèche

- 12 (14%) respondents reported that they had used the crèche.
- All reported that they were very satisfied, or satisfied with the service; '*Fantastic supervision*'; '*Happy to leave child with crèche workers*'

Fun & Play

- 20 (24%) respondents reported that they had used Fun & Play.
- 18 (92%) of those were very satisfied with the service; '*Fantastic supervision*'; '*Brilliant, fantastic*'
- 1 (5%) was satisfied and 1 respondent did not comment.

Happy Chappies

- 2 (2%) respondents reported that they had used Happy Chappies. One respondent reported that she was very satisfied with the service. The other participant did not comment.

The Incredible Years

- 3 (4%) respondents reported that they had used 'The Incredible Years' and they were all very satisfied with the service.

Infant Massage Group

- (8%) respondents reported that they had used the Infant Massage Group and they were all very satisfied with the service; '*Brilliant, fantastic*'; '*Helped baby bonding*'

Little Voices

- 1 (1%) respondent reported that she had used Little Voices but that she was not satisfied with the service. She did not comment on the service.

Mind & Body

- (5%) respondents reported that they had used Mind & Body. 3 respondents reported that they were very satisfied with the service and 1 was satisfied.

Pamper N Peep

- (8%) respondents reported that they used Pamper N Peep. They were all very satisfied with the service; '*Good location*'; '*Great to meet people*'

Toys R Fun/Stay N Play

- 12 (13%) respondents reported that they had used Toys R Fun/Stay N Play and 11 of these reported that they were very satisfied with the service; '*we both look forward to it*'. The other participant did not comment.

6.4.2 Benefits of these services to child

Comments included:

- *Brought on development; Improved social skills; Learn to share; Speech development*
- *Help and advice on child behaviour problems*
- *Child enjoyed going; Very content and happy in himself*
- *Child gets bored, provides things for them to do in holidays; Keeps them occupied*
- *Getting used to different adults – ready for school; Preparing them for school and learning*
- *Improved his interest in art and crafts*
- *They enjoy new things to do and joining in with other children*
- *Interaction with other people and children; Meet new friends; Helped child to bond with other children; Allowed child to mix with other children as is an only child*
- *Child became less shy; Confidence building; Brought child out of himself*
- *Pamper N Peep because it gives mum time with new baby*
- *With Aqua Tots to be confident and not scared of water*

- *Baby massage was beneficial to my baby daughter*

6.4.3 Benefits of these services to adult

Comments included:

- *Allowed parent to get out of house*
- *Improved depression (was suffering from depression); Kept sane; Brought me out of myself; Chance of a break*
- *Crèche helps with time for yourself; Get some peace*
- *Enjoyed it; Lots of fun*
- *Get to meet more people; Made friends; Good to meet other parents*
- *Help and advice always at hand*
- *Helps me socialize as childminders can sometimes feel isolated*
- *Course very encouraging*
- *Feel satisfied that he is mixing and socializing as well as me*
- *Training time for me*

The following comment was made that was *not* a benefit

- *It can be a hassle taking kids to the schemes, it gets you out of your routine (not a benefit)*

6.4.4 Knowledge of Happy Elephant services

31 (37%) respondents reported that they knew that these services were part of Sure Start Happy Elephant, 6 (7%) reported that they did not. (There were 37 valid responses.)

One respondent commented that she didn't know '*at first but the more involved I got the more I found out what was on offer*'.

6.4.5 Transport to services

30 (36%) respondents walk to the services, 8 (10%) use a car. (38 valid responses.)

One respondent reported that she got a coach for Aqua Tots and another reported that she '*initially got a lift off a Sure Start worker, later on got there by taxi paid for by Sure Start*'.

6.4.6 How could Happy Elephant improve?

Comments again focused on lack of facilities for older children and included:

- *Could accommodate older children*
- *More activities for children over 4 years*
- *Drop off from coach nearer to house*
- *More outdoor activities*
- *More places available for people, possible extend the area covered by Happy Elephant*
- *Run it on day supposed to, not so remedial, carers more involved with the kids, weren't interacting with the kids when went*
- *Good as it is*

6.4.7 How could Happy Elephant encourage residents who do not currently use the services to do so?

Comments included:

- *Advertise more in local venues; More flyers*
- *Phone parents up instead of just sending leaflets; Introduce self and scheme over the phone and invite parents personally to use*
- *Let people know, they only found out through a poster in the library*
- *Already a lot of information on Happy Elephant*
- *Enough information already provided, it's up to parents if they want to use them*
- *Encourage by telling others to join*
- *If provided things for older children at the same time as the schemes for younger children, you could take all your kids*
- *Put the age limits up*
- *Need to get people over that initial step and go, once there will be fine*
- *Offer services from more venues, especially towards Ecclestone*

6.4.8 Why do you not use Happy Elephant services?

Comments included:

- *Both parents working full time so difficult to take kids to schemes, child in nursery most days*
- *Working part time and only found out about the scheme last week.*
- *Can cope on own, would use it if needed*
- *Child is frequently ill (suffers from anaphylactic shock) and frequently attends hospital so have little time to use; Too busy*
- *Child was starting nursery when heard about it; Did use before child went to nursery; Not bothered as child starting nursery*
- *Children now attending full time school; Have 9 children mostly adopted at ages too old for scheme*
- *Didn't know about it*
- *Only just moved into area*
- *Don't like the parents who use the services 'for council parents'*
- *Lack of time*
- *No reason just not got round to it yet*
- *Partner has kids more*
- *Child too young*
- *No children yet*

6.4.9 What could Happy Elephant do to encourage you to use the services?

Comments included:

- *Didn't need services; Don't see need for services*
- *Intend to use services when child a bit older*

- *May use in future; Will probably use now know about it*
- *More flyers in store windows*
- *Nagging*
- *Nothing as child now attending nursery*
- *Things for older siblings*

6.4.10 General comments about Happy Elephant services

- *Good to have around*
- *Happy Elephant good for taking older kids as well in the school holidays*
- *Happy Elephant is excellent in my view*
- *It's a very worthwhile thing, make it more readily available*
- *Keep it up, I like it*
- *Pleased with everything – had happy times from onset – enjoy opportunities available*
- *Really, really helped me and little one, recommend it to anyone*

6.4.11 What attracts you to the services?

Respondents were given a set of statements about the services and asked to choose the *three* statements which were most likely to attract them to use the services. In order of popularity these statements were:

Statement	Number of times selected by respondent
Activities for the children	29
Comfortable surroundings	19
Staff always available	11
Play equipment is of good quality	9
Chance to find out what else if going on for children and families	9
Easy to get to	8
Know other parents who use it	6
Staff can advise on child development	6
Open at convenient times	5
Nothing else to do round here	2
Refreshments are available	0

6.4.12 Reception at Happy Elephant

37 (44%) respondents reported that the reception at Happy Elephant was always welcoming and friendly. 2 (2%) responded that it was usually welcoming and friendly. (39 valid responses.)

6.4.13 Satisfaction with Happy Elephant Services overall

29 (35%) respondents reported that they were very satisfied with Happy Elephant services, 4 (5%) reported that they were satisfied and 1 (1%) reported that they were not satisfied. The rest did not comment on their satisfaction level.

6.4.14 Level of information received when pregnant

Respondents were asked how satisfied they were with the level of information they received when they were pregnant. 65 responses were received.

88% were either very satisfied or satisfied with the information they received.
12% were either dissatisfied or very dissatisfied

Comments included:

- *Didn't get any; Didn't get much*
- *Less than did with previous kids*
- *Little info given but didn't need much*
- *Not much information, was working*
- *Knew everything so it didn't matter*
- *There was lots of help and information in the Bounty Pack*

6.4.15 Level of support received if suffered from post natal depression

Respondents were asked, if they suffered from postnatal depression, how satisfied were they with the level of support they received. 18 responses were received.

61% of those who responded were either very satisfied or satisfied with the level of support.
39% were either dissatisfied or very dissatisfied.

Comments included:

- *Awful didn't help at all*
- *Doctor not very good*
- *Only got information from doctor*
- *Shit*
- *A centre for them or a person who could help*

6.4.16 Amount of information available on child health issues

Respondents were asked how satisfied they were with the amount of information available to them on child health issues. There were 73 responses.

97% of those who responded said they were either very satisfied or satisfied.
3% were dissatisfied.

Comments included:

- *Could do with more information on hearing problems*
- *Don't get a lot of information*
- *Only told things when asked; Sometimes you have to chase information*
- *Had information anyway*
- *NHS helpline good*

6.4.17 Employment training services

Respondents were asked if they had used employment training services, how satisfied were they with the services. There were 17 responses to this question.

84% of those who responded were either very satisfied or satisfied with the services. 6% (1 person) was very dissatisfied. The remaining respondents were 'neutral'.

Comments included:

- *Gave job centre details but they never got back*
- *Computer course*
- *Found out about training through Happy Elephant*

6.5 Key points of residents' survey

- Although there were 84 completed surveys only 73 respondents had heard of Happy Elephant and 50 were registered. **Therefore, opinions about the services only represent a small minority of residents and therefore, cannot be generalized to the catchment area as a whole**
- Nearly half the respondents (49%) did *not* use the health centre/clinic and a further 49% did not visit the dentist. The chemist was frequently used by respondents. These results could imply that several residents purchase over the counter medications, as opposed to going to get a prescription from a health professional.
- 57% of respondents used the library regularly and 32% attend church.
- The least attended community services were social services (2%), the job centre (7%), college (10%).
- Nine different venues were used by the 24% of respondents who attended playgroups. The total number of respondents had 86 children under the age of 4. Therefore, it is perhaps surprising that a higher proportion of respondents did not use the playgroup facilities.
- The main reason why individuals did not use the community services was that they did not need them. However, several additional comments indicated that respondents felt some of the services were poor, or open during inconvenient hours.
- No gaps in services for the 0-4 age group were identified, but several residents commented on the lack in provision for the older children and the elderly.
- The majority of respondents (87%) had heard of Happy Elephant. This indicates that advertising and marketing campaigns are largely successful at the awareness stage. In addition the health visitors and other professionals appear to be visible advocates for the programme. Word of mouth from friends is also a valuable recruitment approach and appears to be effective for Happy Elephant. In light of this perhaps an incentive for parents should be offered for recruiting other parents into the programme and who will subsequently become actively involved themselves in the services.
- Where individuals had used Sure Start services, they were all very satisfied or satisfied with the service, with only a few exceptions. Fun & Play was the most frequently used service amongst the respondents to this survey. Only 1 respondent had used Little Voices and was not happy with this service.

- The benefits that the respondents identified for their *children* appear to contribute towards Sure Start Objectives 1, 3 and 4, but support for improving health appeared to be weak.
- The benefits that the respondents identified for *themselves* appear to contribute towards *all* the Sure Start objectives.
- Respondents felt Happy Elephant would improve if it could accommodate services for older children. Since this is beyond the remit of Sure Start it appears several respondents were unsure of the purpose of the programme.
- Several suggestions were offered as to how Happy Elephant could encourage residents who do not currently use the services to do so. However, some of these were not feasible, such as offering services for older children, or the programme was already doing, e.g. distributing promotional materials.
- The three most common reasons individuals were attracted to Happy Elephant activities were; *activities for children, comfortable surroundings and staff always available.*
- Respondents were asked about their satisfaction with the level of information they received (i) when pregnant, (ii) if suffering from post natal depression, (iii) on child health issues, and (iv) employment training services. It appears that information could be improved in the area of post natal depression.
- Several reasons as to why respondents did not use the service were given. Reasons included their children being too old, their children were about to start nursery, they were too busy. One person believed their child was too young for the Sure Start – this is a further indication that respondents were not always sure of the purpose of Sure Start. One further comments was that the programme was *'for council parents'*, indicating that some stigma may be attached to it.
- Some respondents who did not currently use the programme displayed an intention to use it in the future.
- In general, respondents praised Happy Elephant services.

7.0 FINDINGS (IV) FOCUS GROUPS AND INTERVIEWS

Several interviews and discussions were carried out with key staff at Happy Elephant. Due to the sheer volume of data generated by these taped sessions this report can only provide a **snapshot of these discussions**. What is presented here is a range of themes that became apparent after revisiting the tapes and transcribing sections of the dialogue. We have deliberately not added too much text, as evaluators, in order to provide a voice to the staff at Happy Elephant. To preserve anonymity the quotes have not been attributed to specific individuals.

7.1 Happy Elephant Workers

7.1.1 Commitment to Sure Start

Staff appeared to be very committed to the programme;

'My commitment to community support and the principles of Sure Start is you know, what interests me... I am actually living a vision of this. When I was a health visitor I would visit families and get very frustrated because the services they needed were not around, for example a mother who was heading towards post natal depression and felt very isolated and had no way of getting to a toddler

group with her other children. Sure Start can help someone like her. We can listen to people and have the potential to meet their needs. For me that is the actual joy of working with Sure Start and the flexibility we have...we have the opportunity to turn things around fairly quickly and change practice...there is a huge emphasis on reflection which is very important. The whole thing about Sure Start is very exciting.'

'We need to get out there and build up a relationship with the families – it is all about building up a rapport first.'

'... It is also about sharing good practice.'

'Our main aim is providing quality care to children in the Sure Start area.'

7.1.2 Sure Start Philosophy

Staff talked about their way of working and by doing so described what they felt to be the Sure Start philosophy;

'I think some more than others understand the Sure Start philosophy. I think people are aware of the underlying principles, but when faced with the immediacy of the work you get influenced by other people... there is not always time to reflect when short-staffed.'

One member of staff provided an example;

'...An example is empowerment - community empowerment. You find out that there is a need for service such as a playgroup or a crèche. Some workers would then organise the delivery of that service without the thought of 'well actually this is about empowerment and how do we support and help people to develop their own services?'....us providing things can actually disempower people. The difficulty was that in the early stages there was a requirement to set up services very quickly, and yet that was at odds with my way of thinking about community empowerment, which would take a long time to involve and support individuals to deliver the service themselves with our support.'

The issue of mainstreaming was part of the philosophy discussed;

'... we were discussing mainstreaming with the team and trying to get them to think about 2006 when we should be handing over the reins really to the community... they obviously hadn't really thought about it and about how what they do now in the planning and delivery of services has an impact on the mainstreaming and sustainability issues down the road. So we have started progress here, about getting them to really think about Sure Start being about empowering communities.'

'Sure Start is not about setting up new services so much as working with the community and building on what is there. It has to be mainstreamed, although we are not going to pull out of communities in a hurry because of the longer term funding.'

And the importance of a preventative approach;

'A lot of people who work for Sure Start do understand the preventative approach rather than crisis intervention.'

There was also a clear understanding and appreciation that change in the community was slow;

'You need to be patient and consistent to bring about community change.'

7.1.3 Partnership working

Partnership working was discussed at length. Here we highlight some examples of how the staff at Happy Elephant described their experiences and attitudes towards partnership working;

'... we link in with the early years strategy across St Helens, making sure we are following policy and procedure, so that there is a coordinated approach rather than every one going off and doing their own thing.... But we also have to identify and listen to what the families need in the area and how we can support them.'

'I do a lot with other Sure Start programmes in St Helens, we share resources and we have done some training programmes. We are also working on a joint volunteer programme.'

'What binds us together, provides the link, is that we all want to work with families and children to better provide for them. We have a common goal, but different input into achieving that goal... we share ideas and benefits.'

'When I approach other partners they know about Sure Start. We can help to share resources and not duplicate. They don't feel threatened by us. We can support each other because they have similar targets.'

'I think people will come into partnership with Sure Start because we have money. For example the health visitors want to do lots of things with families that they cannot afford to do in the health service, but working in partnership with us they can – we have the money.'

'We have just got two parent involvement workers and one will work with the dads and look at how we can involve them differently to what we have been doing. We want them to be involved in task groups and eventually the Management Board.'

Some staff were aware of the dangers of being over-zealous with their 'partnership' drive;

'Some communities have been consulted to death! They are sick of being asked what they want and need.'

And of the problems with partnership working;

'Partnership working is difficult at times... and the law doesn't help, data protection doesn't help. You are taking professionals from all different agencies and organisations like the health service with different policies and procedures and you say 'well off you go!' (laughs). It takes time to work

out how you can work together. I'm not sure that has been thought through when the earlier Sure Start programmes started. Hopefully now it has improved. It is not simple... it is about respecting and valuing other peoples' work. Some statutory agencies have trouble working amongst themselves let alone others ! (laughs) The voluntary sector is better, partnership is part and parcel of the way of working.'

7.1.4 Sure Start adding to services

Staff talked very positively about what Sure Start was able to do for the young families in the local community;

'I have worked in health where money is tight, with Sure Start you have more money so you can go out in the community (knocking on doors, visiting schools and just walking around the community) and identify what they want and then do something about it – provide the groups that they want. You know you can get to the root of the problems and do something about them.'

'Sure Start allows me to pilot innovative ways of working with families so that they are identifying a need and we are working with them to work in a different way. We have the luxury of being able to pilot it and evaluate it because we have money! You know it can be as simple as giving some toys or training to a group... another area I am interested in post natal depression. They is nothing available for these people. They need to have some support, like going in to them in the morning and helping them get their older children off to school. You know this kind of support is so important when you have post natal depression.'

'With Sure Start the Government has recognised that some of the qualitative outcomes of improving families are important. A lot of initiatives are short-term funded for 1,2,3 years, but it takes you that time just for people to be using things, but Sure Start is long-term funded so that is the opportunity for a preventative approach rather than crisis management.'

'We need to support and develop rather than set up ourselves.'

'My role as a health visitor for Sure Start is in addition to what is already out there. My role was to identify gaps in the health provision that I could take on, that they did not have time to do because of their high case-load.'

7.1.5 Outcomes for families and children

Several examples of how families and children have benefited from the programme were discussed;

'People are doing things they would not have done – like Aqua Tots, going swimming with their child. We see them [the parents] implementing some of the things they have been taught, like in the behaviour management group... it definitely has a knock on effect with their relationship with their children. They bond better. And they see that it is not only them that have the problem.'

'I worked with a family who had some sleep problems with their child. They were resistant to what I was asking them to do in the beginning but then they tried it and it worked. She was like a different

person once she started getting her sleep and the whole family benefited. After this she was like 'oh ok what groups can I do next to sort me out!'

'I have been involved in the Parents Forum. In the beginning I would bring things to the meetings and not getting much feedback and not much involvement of parents in actively discussing things and suggesting things. Now we have a parent chair that is very good. Straight away, I felt you could see...that although we still had an agenda but you could bring other things in and they did get involved... for example they raised what we are doing for 3-4 year olds. As a result we now have a slot on the Management Board to discuss this and now as a programme we are now starting to work with schools more and things like that.'

'A lot of families rely on Sure Start, you know the contact they have with staff and the groups and the support that they can get... I have heard people say like that they suffered from post natal depression and now I want to give something back because if it wasn't for Sure Start I would still be suffering from post natal depression.'

7.1.6 Marketing / Importance of word of mouth

While staff recognized their successes, they still understood the continual emphasis needed in the marketing and advertising of the programme;

'The admin person's role has been redefined to include marketing. When we send things out it is visually quite good and eye-catching. But we do not really plan ahead...we have a very reactive approach and do not really promote things as well as we could. This is something we are working on.'

'We get a lot of people coming because they have been told by their friend that it was good. The baby massage class is a good example and it is really successful.'

7.1.7 Resistance to Sure Start

Resistance was experienced by some community workers for example;

'On a couple of home visits I did there were people who had been involved with social services and as soon as you say who you are they put you in that category and the brick wall comes up and they won't let you in and they don't want to know about it. One house I went to I took a parent worker with me and they recognised her and they said 'oh, do you know ... well you can come in then!' So there is a lot to be said for involving local parents.'

7.1.8 Meetings Objectives and Targets

Staff were aware of the importance of the Sure Start objectives and targets and they described how this affected the planning and delivery of their services;

'When we are planning our services we sit down with the objectives and make sure that what we want to do also fits in with the objectives.'

'We work across the board – across all the objectives. We work in task groups. I am not sure about the sub groups...'

'We work together to try and deliver the service. We work with our milestones that fit around the targets, but I don't look at them as often as I should. When we do our action plan we do refer to the targets.'

'The health aspect has had to take a back seat because of the lack of a manager and me having to deputise. I have had to deal with the immediacy of things...I have not been able to work with the local health visitors in the way I had hoped or the way they were hoping either. They have complained about that, they thought they would see a lot more of me. I just have not had the time to do a lot of what I anticipated. We have worked together in my previous role as a health visitor and we were looking forward to working together with Sure Start and developing some new initiatives.'

7.1.9 Factors hindering progress

In order to improve the programme, staff were open and willing to reflect on factors that had hindered the progress to date.

7.1.9.1 Lack of Programme Manager

'We have not had a Programme Manager for a while... there is no one directly responsible for things... you go to one person and that is not the right person... so you don't get a straight answer because we are not all doing our own job because we have gaps... when we got an acting manager it got better... but like we wanted to work with the dads, but then we have our jobs to do and helping out others because we are short, so we haven't got time to implement the things we would like with the dads.'

'When I was new in post I wanted to have direction and that didn't happen for me. Obviously, someone who had to deputise for the Programme Manager, it meant she wasn't really a colleague that you could work with and plan services together, because she was too busy managing the programme that she was not able to concentrate on her job – the one she was hired for. It has also had an effect on the whole team that we have not had a Programme Manager available, when someone stepped in it did help bring the team together more... we have just been keeping things ticking over and trying to keep the motivation and enthusiasm amongst the team really.'

'Lack of a Programme Manager has had a huge impact, it cannot be underestimated. I started on the Monday as the Family Outreach and Health Visitor Coordinator... this had a wide remit... and 3 days later I was acting Programme Manager. I got a three day induction into the programme. Then the Programme Manager was off on carer's leave for 8-10 weeks. I really hit the ground running; I didn't get a chance to orientate myself. So the health input has not established itself really... I have been doing things, but it is difficult to keep it high profile. Things have been delayed. Without a programme manager there was also a lack of focus, you know, people tending to go off and do their own thing. They were not communicating as a team working together, they were quite fragmented. For example the early years were doing their job very well

and the neighbourhood and community were doing a good job, but they were not working together, there was no one there to coordinate the work, link it in and make it more inclusive.'

'I have just started and given that they have not had a Programme Manager for so long I think they have done fantastically well to sustain the level of services they have.'

7.1.9.2 Recruitment of other staff

As well as the problem with the lack of a Programme Manager, the programme also experienced other staffing issues;

'Problem hiring a midwife...she didn't know if she had time to take it on... it is a difficulty for the midwifery services because they are understaffed too... same position with the speech and language... in the end we will probably have half a day at the end of April... it is not ideal, but it is better than nothing... I think she will be in a more consultative role.'

7.1.9.3 Time Pressures

The shortage of staff tended to account for the time pressures;

'We have been really pressured for time. We have been working without key staff. We have a lot of groups and services and they have to be maintained. That takes a lot of time.'

'After Christmas I thought what am I supposed to be doing (laughs) because you get pulled in so many different directions that you just loose your focus.'

But for many, now that the staff would soon be to full complement meant...

'... finally I think we are getting somewhere...we can all get back to our jobs!'

7.1.9.4 Targets

External targets also put pressure on the programme;

'The Sure Start outcomes put a massive amount of pressure on community work – I mean the Sure Start unit and the risk assessment - and how programmes are measured on it...[talked about experience with another Sure Start Programme] the pressures to get early service out there is massive and as a result... it was almost like we have to get bums on seats. The risk assessment is all about being able to tick all the boxes and get a 'low' risk ' and that is wonderful – but what quality are we providing? We need to go woah! we need to really look at this... we are supposed to be working with the community and the community won't be hurried along, it is going to take a while.'

7.1.10 Financial resources

There appeared to be a general consensus that the programme was well financed;

'Sure Start has the resources to do things other agencies cannot do.'

'I had trouble spending the money I was allocated last year. We have no problems with resources. This was because I was doing quite a few things in partnerships with others and they could provide some of the training and venues for free.'

7.2 Parents

Interviews and a focus group were conducted with parents who were attending Happy Elephant services. The range of parents interviewed ensured representation from those who use some of the services, those involved in Task Groups and those on the Management Board. Their children ranged in age from 5 months to 11 years and ranged in number from one to three children. They had been involved in Sure Start activities for between 6 -16 months.

The parents had accessed and talked about the following range of services:

Reflexology, Aquatots, Just for You, Play 'n' fun sessions, home visits, NVQ Early Years Child Care course, day trips and half term walk, Safe and Sound, CVS Volunteer training, Computing course and Story Sacks (latter two via "Family Learning").

Interviews and focus groups provided insights into the ways in which respondents viewed Happy Elephant. These elicited descriptions of events and practices but also the underlying thoughts, feelings and opinions of parents and workers. Within the interview format, these were explored and clarified by the evaluators.

Details of individual interviewees are omitted in order to preserve confidentiality, and thus some names have been changed.



Interviewing a parent during a Fun & Play session

7.2.1 Benefits of Sure Start Happy Elephant

The parents' views are presented here mapped against the Sure Start targets. Numbers refer to the percentage of parents indicating that Sure Start Happy Elephant had benefited them in these ways.

Improving social and emotional development

1. Maximising your contact with your child 71%

"People take their children swimming once and they are scared of the water, but you see them becoming more and more confident in the water."

"It's breaking the cycle of parents not caring for their children."



Spending time together

2. Helping with antenatal care 0%
None of the parents interviewed had been offered any antenatal services linked to Sure Start.

3. Preventing postnatal depression 29%

"It's having friends to talk to, people you can phone with problems, places to go"

4. Increasing the involvement of fathers 0%

"My husband works full time. If there were more things going on at week ends, he might be able to come along."

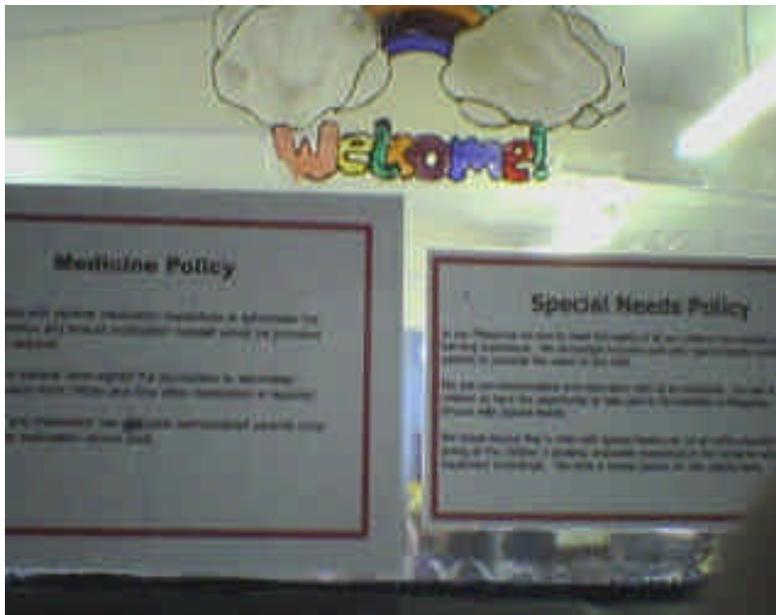
Typically, the mothers interviewed had partners who were working.

Improving health

1. Helping to reduce smoking 0%
2. Helping to encourage breastfeeding 29%
3. Advising about other health and hygiene issues 71%

The safety in the home course had been welcomed by several parents interviewed. Apart from this, parents did not explicitly link Sure Start Happy Elephant to these health improvement targets, although all activities provide a smoke free environment, healthy snacks are offered during groups and some groups e.g. Aqua Tots specifically target physical health and development.

In addition this photograph below shows one of the ways that health information is conveyed to parents – through policies displayed for all to access.



The door of the Emmanuel building

Improving children’s ability to learn

1. Preventing delayed language development 29%

Parents did not express any strong feelings about this issue and did not express concern about their children’s language development but felt that attending the group activities offered would ‘probably be beneficial’. One parent commented;

‘He had a language check when he was 2 – it was better to have it at home ‘cos he was more relaxed.’

2. Providing good quality childcare and play opportunities 100%

'If it's through Happy Elephant, you know there'll be a proper crèche.'

'They have quality toys and do things I'd tend not to do at home like the messy activities – we did drippy glue here'



Different activities to choose from stimulate the children

Strengthening families and communities

1. Providing advice and guidance 86%

'I trust the advice I get here'

'They don't talk down to you – they don't judge'

Parents value Happy Elephant staff and believe they have their interests to the fore when they give advice or make suggestions.

2. Offering education and training opportunities 71%

Many parents have attended courses through the programme and these are valued. Parents appreciate the consideration given to making training accessible to them, e.g. by providing a crèche and considering school pick-up times.

'It's giving me new interests – like the reflexology'

'With the NVQ I'll do my placement through Sure Start'

3. Suggesting employment opportunities 14%

Parents commented that occasionally vacancies are mentioned to them when they attend groups.

All the parents interviewed were enthusiastic about what the programme is able to offer them and their children. In particular they greatly value the high quality child care and play opportunities and the training courses offered.

Other

1. Parents' engagement in the programme

Parents expressed a stronger sense of community as being a direct result of the Sure Start programme;

'I know a lot more people in the community now.'

The parents are engaged with the programme and view this very positively. They feel strongly that their views are used to shape services.

'That's why it's good, 'cos they ask you for your opinion and discuss things with you.'

'They always encourage you to be involved and you get asked what you want to do so you feel you're helping to run it.'

They view their involvement in Management Board and task groups as vital in shaping a programme which is sustainable and relevant to their community.

Several parents have become parent volunteers.

2. Sure Start's influence on the local area

Parents have a clear commitment to making a difference in their community. Their concerns about safety on the street have been communicated to the Council. They feel they have more impact as a Sure Start group than they would have had as individuals. The Sure Start workers are seen as facilitative of these processes and as empowering of parents.

7.2.2 Negative aspects of Happy Elephant

Parents were overwhelmingly positive about their experiences of Sure Start Happy Elephant. The only 'downside' they felt was in not being able to come with friends and family who lived just out of the Sure Start boundary. They felt Sure Start should be more open to anyone who wanted to come and to involve older children more fully.

Parents were asked what might stop other parents in the area from attending. They hypothesized that this might be because of concerns about the motives of Sure Start workers – particularly where

Social Services premises were used as venues. For the parents interviewed, contact with Sure Start workers had made them quickly realise that Sure Start was 'different' and was something 'safe to be doing'.

8.0 FINDINGS (V) AUDIT: EXTENT AND EFFECTIVENESS OF 'IN-HOUSE' EVALUATIONS OF SERVICES

The evaluation team audited examples of the in-house evaluations that have been carried out by Sure Start workers. Consideration was given to the breadth of the services evaluated and the methods used. It has been important for Sure Start workers to develop a sensitive approach to collecting data from parents to ensure that the evaluations are not too intrusive (where they could present a barrier to accessing services).

8.1 Range of Services Evaluated

A broad range of services has been evaluated

- Weekly groups e.g. Peeps group, Friday Group Carers and Kids (which became Fun and Play as a result of the evaluation)
- Day trips e.g. Windmill Farm visit, Walton Hall Gardens
- Education courses e.g. Baby massage, First Aid training
- Special events e.g. Spooky activity, Teddy Bears' picnic

One overarching primary aim of these evaluations has been the perceived relevance and quality of the services for their users. However, as identified in Section 8.1.1 below, some evaluations include specific reference to Sure Start targets.

Several of the evaluations had been undertaken as part of an analysis of the complete programme of activities for Summer 2003.

No evaluation was received for management-related activities such as the Parents' Support Task Group, although it is clear from the Evaluation Group's interviews that parents and carers participate in these structures, value them and recognise their role within them. For example, the two parents interviewed reported that parental involvement had initially been tokenistic and that the Management Board had spent too much time on "waffle". They felt that they and other parents had had a considerable impact on this and that the Management Board meetings had become "more informal but more structured". "There is now more grass roots stuff". Furthermore, they feel they have more impact as a Sure Start group than they would have had as individuals. The Sure Start workers are seen as facilitative of these processes and as empowering parents.

8.1.1 Purpose of evaluations

Currently in-house evaluations have focused primarily on aspects of services which relate to service-user satisfaction. This is an important feature of the developmental stage of the programme where the focus is on drawing parents in to what Sure Start has to offer and ensuring that services develop according to the Sure Start targets and in ways which address the particular community in which the programme is situated.

Whilst sometimes not explicitly stated, the services offered by the programme relate clearly to the identified Sure Start targets and the in-house evaluations provide robust evidence that these services are valued by the parents and children who attend them.

In some cases, notably the "Peeps Group" and the "Baby Massage" questionnaires, the evaluation specifically addresses Sure Start targets and the extent to which participants consider they have been met. These examples demonstrate systematic and well thought out evaluations which elicit useful information for planning future activities and feedback on the positive impact of the activities.

There are two examples of evaluations being used to inform current or future activities. These are the consultation exercise on Friday Group Carers and Kids and the report on the Summer Activities Programme which was evaluated systematically with an analysis of several aspects, including take-up of activities and costs. This will be used to inform planning for the Summer Activity Programme 2004.

With the exception of these two, the evaluation material received does not indicate how use is made of the findings. However, the Evaluation Group's interviews provided several examples of parents reporting Sure Start Happy Elephant's workers' commitment to acting on parents' views on activities.

"They always encourage you to be involved and you get asked what you want to do so you feel you're helping to run it"

8.2 Evaluation methods

Sure Start workers view evaluation of the services as an integral part of their role and use informal methods of **asking** and **observing** routinely. This became evident in interviews with parents; *'That's why it's good 'cos they ask you for your opinion and discuss it with you.'*

Happy Elephant staff also plan specific evaluations to look at aspects of their services. They did not tend to use the evaluation planning sheets, developed through training workshops, to focus their planning. In stead, new questionnaires were devised for each activity.

Their evaluations creatively employ a range of evaluation tools:

- *Questionnaires* – this is the most frequently used method and the audit revealed that questionnaires are structured to keep literacy and completion time demands low.
- *Photographs* – these are used to capture children's experiences and provide a powerful way to record changes in the programme
- *Rating systems* – children are encouraged to be evaluators through the use of, for example, sad and happy face ratings. In a few examples, e.g. Baby massage, parents are asked to rate specific aspects of activities.

Talking is a highly valued informal method of gathering parents' and members of staffs' views on aspects of the programme. However, there is very limited use of interview and focus group methods in collecting data by the Happy Elephant staff. Its absence in planned evaluations potentially relates to several issues:

- i) evaluation training has been late (November 03) to address interviews/focus groups in formal sessions
- ii) equipment choices (mini-disks, tape recorders) were made only after the hardware had been trialled by staff in an evaluation session and has only recently been purchased
- iii) talking methods require more time and analysis than many other methods

No further training sessions for Happy Elephant workers have been requested. Instead, one member of the Evaluation Team will spend half a day per fortnight within Happy Elephant, working with individuals and small groups to develop their evaluation strategies and help with analysis of data and preparing material for dissemination. This will give rise to an increased repertoire of evaluation techniques coming on line.

8.3 Impact of evaluations - Influence on Service Planning and Delivery

The impact and influence of evaluations upon service planning, delivery and quality is important, particularly since there is a cost involved in developing and conducting evaluations.

With the exception of the stated intention that the Summer Activity Programme report would inform planning for Summer 2004, there was little consistent documentary evidence of the planned decisions made following the data collection phase of in-house evaluations.

Despite this lack of formal written evidence, the evaluation planning sheets provide a record of the evaluation purpose, attendance and user satisfaction. Where changes have been made following evaluation, for example, in the Friday Group's change of name, the decision-making process and rationale for the revised service is not clearly stated. For example, how is information interpreted, "weighed" (i.e. set in context) and judged? This gives rise for some concern since lack of transparency about those factors which catalysed the evolution of the programme makes it difficult to evaluate and interpret this process effectively.

Further, the impact of evaluations is limited by insufficient use of clear evaluative frameworks for analysing the data, which although not a major problem for small data sets, will become more important in the next stages of the programme. The development of procedures which record the dates and context of questionnaires, rating scales and photographs will significantly increase the efficiency and accuracy of the evaluation process.

8.3.1 Dissemination

Dissemination is a vital part of a 'real world' project, since a major focus of the evaluation is to have a positive impact on both the overall direction of the project and the day-to-day experience of those using and working on the project.

Dissemination of evaluations needs to reach stakeholders in all areas of the programme:

- i) those who influence policy and practice e.g. members of the partnership board,
- ii) those who use services e.g. parents who attend current services
- iii) the wider community who are eligible to register for Sure Start Happy Elephant services but have not yet done so.

8.3.2 Evidence of dissemination

Interview data suggest that findings from evaluation and consultations are fed up through the Parents' Support Task Group for discussion at the Management Board where decisions about changing practice/ policy are made. Developing clear procedural guidelines to ensure that this process is systematic will further develop effective dissemination.

Limited other information on dissemination was given to the Evaluation Team. However, it may well exist and be being used effectively. Photographs included in the evaluation material will give useful feedback to parents if dated and contextualised.

Information which could have been submitted would include publicity information, such as leaflets, posters and news letters produced by Sure Start Happy Elephant. Dissemination is important and needs to continue to be developed to embed the programme in the community.

8.4 Developing Local Evaluation

The Sure Start Happy Elephant programme has been actively involved in evaluating its service provision in relation to the needs of its community. Skills in evaluation are being developed across the range of staff and the programme. Workers, however, still need to extend their own evaluation skills and to devote more time to analysis, impact and dissemination of evaluated data.

8.4.1 Achievements

The Sure Start Happy Elephant programme has successfully developed strategies for evaluating parents' and, to a lesser extent, workers' experiences of being involved in the programme. In particular, the programme displays strengths in its development of:

- A sensitive range of ways of accessing adults' and children's views of activities, including approaches particularly suited to those with limited literacy skills and which involve children
- Organising evaluations across a wide range of service areas
- Relating evaluation to Sure Start targets in some areas
- Using evaluation to influence delivery of the programme

8.4.2 Refinements

The Sure Start Happy Elephant programme needs to strive to incorporate refinements to its evaluation programme over the next phase to maximise the impact and value of evaluation. This could be achieved by:

- Extending the explicit relating of evaluation activity to Sure Start outcome targets e.g. improving social and emotional development; improving health and monitoring this across all the targets
- Continuing to engage in professional development relating to evaluation techniques, e.g. through regular informal and responsive training contacts with the external evaluation team
- Developing the analysis and interpretation of data gathered

- Developing ways of recording the outcome of all evaluation activities
- Ensuring all evaluation materials and data are dated to allow for meta-analysis of change over time
- Involving the external evaluators in the further development of a coordinated approach to evaluations across the programme
- Developing the capacity of parents involved in the programme to generate evaluation questions e.g. through the Parents' Support Task Group, and to carry out data collection to address these questions.

9.0 REPORT OF THE EVALUATION TRAINING WORKSHOPS

Happy Elephant requested a series of evaluation training workshops for Sure Start workers. The workshops were undertaken jointly across Happy Elephant and Central Link. This section will describe the ethos and rationale for the approaches utilised, the content of the training and the training process. Cross-referencing will occur between this section and Section 8 which contains an audit of the evaluation undertaken, thus far, by Sure Start Happy Elephant workers.

9.1 Rationale and Ethos

The aim of the training has been to develop the knowledge, skills and positive attitude to evaluation required for staff to evaluate the services in which they are involved. The ethos informing the approach to evaluation has been consistent with principles of Sure Start in the following ways:

- The evaluation approaches introduced within the training build on existing, everyday skills. Hence all staff and, eventually, parents will be able to be involved in evaluation.
- Ownership of evaluation approaches and findings should lie with Sure Start workers and families rather than with the evaluation team.
- The evaluation approaches must be inclusive in terms of seeking feedback from children as well as adults, and from those with limited confidence or competence in literacy.
- All evaluations should contribute to accountability, in that results should be used to inform service planning.
- The findings of evaluations should be disseminated to key stakeholders. Hence, a diverse range of sources of evidence should be sought and feedback should be presented in accessible formats.
- Evaluation should be seen as providing formative feedback and thus be a supportive, developmental activity rather than a negative one.

The extent to which evaluation undertaken, thus far, conforms to these principles has been discussed in Section 8.

9.2 Content of Training

The content of the training was designed to fit the ethos outlined above. The varied backgrounds and experiences of training participants meant that the content of the earlier sessions had to demystify the evaluation process and demonstrate its relevance to all staff.

The content of the sessions was designed to build incrementally, whilst providing some practical outcome from each session. Protocols were developed to help staff structure their evaluations and prevent overlap. There is some limited evidence from the audit of these planning sheets being used.

Below the aims of each session are outlined in brief.

Sure Start Evaluation Workshop 1: Friday, 2nd May 2003 9.30-1.30

Session outcomes: This session will:

- *develop your awareness of what evaluation means, in relation to Sure Start*
- *enable you to identify your evaluation skills*
- *develop your awareness of the evaluation skills of your team members*
- *develop your awareness of different evaluation methods*
- *enable you to identify new skills you would like to acquire*
- *enable you to identify how evaluation relates to your role in Sure Start*

Sure Start Evaluation Workshop 2: Wednesday 21st May 2003 9.30-1.30

Session outcomes: This session will:

- *develop your awareness of your evaluation philosophy*
- *enable you to choose appropriate evaluation methods for particular questions*
- *develop your awareness of ethical and consent issues*
- *develop your skills in setting up an evaluation*

Sure Start Evaluation Workshop 3: Wednesday, 2nd July 2003 9.30-1.30

Session outcomes: This session will:

- *begin to develop procedures to ensure your evaluation is transparent, participatory and supportive*
- *enable you to consider the range of factors which impact on your evaluation decisions e.g. timing, sampling*
- *develop ways to ensure good communication networks*

Sure Start Evaluation Workshop 4: Tues 9th September 2003 9.30-1.30

Session outcomes: This session will:

- *review the procedures designed to ensure the evaluation is transparent, participatory and supportive*
- *review both groups' evaluation timetable*
- *plan future directions for evaluation*

Sure Start Evaluation Workshop 5: Thurs 6th November 2003 9.30-1.30

Session outcomes: This session will:

- *introduce the use of Cliés for data collection*
- *cover skills in interviewing and videoing*

In place of further sessions, Sure Start Happy Elephant Management Board have asked that one member of the evaluation team be available on-site for half a day a week on a rota basis to support evaluation activities.

9.3 Procedure and Participation

- Training has followed a half-day workshop format with lunch provided to allow more time for discussion and sharing of ideas. Participants have been encouraged to discuss issues around evaluation with the team, and to bring examples of plans for particular evaluations and results of evaluations to the training sessions.
- The training programme for each session and all handouts and worksheets are emailed to the Sure Start office to ensure that staff unable to attend have access to training materials and can follow up issues with the evaluation team.
- Participation by staff has been good, both in numbers attending and in levels of commitment. Between 12 and 18 Happy Elephant workers have attended most sessions. However, participation changes over time, making the accessibility of information more critical. Participation in the final session was lower. This was helpful in allowing all participants opportunities to try a range of activities. However, it means that, for some, further skills development will be necessary.
- All categories of staff have been involved in evaluation training, though there have been relatively few people from a health background. This seems to reflect current staffing, rather than any lack of interest. The enthusiastic participation of administrative staff was particularly welcomed.

Positive learning points

- The evaluation team has been delighted with the active engagement of the participants in the training sessions.
- Some participants have contacted the evaluation team separately to discuss their evaluation tools and needs.
- There is evidence of genuine sharing of resources between the two Sure Start programmes.
- The audit of evaluation revealed the use of a wide range of methods for accessing adults' and children's views of activities, including approaches particularly suited to those with limited literacy and children.
- The evaluations carried out thus far provide a large body of feedback on service users' views of activities.
- The Summer Activity Programme report provides an effective summary of activities, costings and consumers' views in an accessible format. The report states that it will be used to inform planning for Summer 04. Relevance of activities to Sure Start targets is not given, but can often be inferred.

Implications for Future Evaluation Support from the Audit of Evaluations (see section 8.0)

- Some additional training is required to clarify how ways of exploring the extent to which key Sure Start targets are being achieved by particular activities can be addressed more explicitly in evaluations. Modifications to the evaluation planning sheet could be made to support this.
- Training could look explicitly at the range of targets to be met and the activities/services provided, as a matrix.

- These inputs could be offered in the form of one-to one or small group sessions based around evaluation of specific services or activities rather than through group workshops as this is the preferred mode identified by Happy Elephant management.

10.0 COST EFFECTIVENESS AND VALUE FOR MONEY

This interim report can only discuss the cost effectiveness and value for money to a limited extent, since the initial stage of an initiative tends not to display the sorts of outcomes that one anticipates at later stages. So far, much effort has gone into establishing infrastructure and ways of working which are not conducive to 'hard outputs'. Thus, the 'embedding' stage, following the 'developmental' stage can create a different picture in relation to 'value for money'.

What we would offer by way of comment at this stage is that we have identified a number of pointers which suggest that Happy Elephant is offering value for money. In particular:

- an infrastructure has been put in place
- performance measures and indicators are specified
- some baselines have been collected for comparisons
- clear links with other initiatives are developing
- a wide range of activities has been instigated within a short time scale

To ensure the programme offers value for money the key workers and the Management Board should regularly;

- challenge why and how services are being provided
- undertake regular consultation exercises to ensure they are working towards performance targets that are congruent with local community needs and national objectives
- undertake comparison with the performance of others

As the evaluation progresses, in relation to value for money, we will assess the extent and ways in which new patterns of working have been established; are they effective? – why? and how?; what broader impact do they have (e.g. within the town)? and are the partnership/services sustainable?

Assessing value for money is an ongoing requirement of the programme and the evaluation team has attended the regional workshop presented by the National Evaluation of Sure Start (NESS) on undertaking a **cost benefit analysis**. Work on this will continue with staff at Happy Elephant over the next year.

11.0 MAINSTREAMING

Mainstreaming is being tackled on a local level by the five Sure Start Programme Managers in St Helens via the Strategic Management Group. It is less evident that the statutory agencies themselves are engaged in the mainstreaming agenda. A Mainstreaming strategy document has been drafted. This documents suggested several routes for achieving mainstreaming;

- Combining services in existing settings, e.g. Sure Start staff working with mainstream staff to enhance services, twining staff – core team members offering services in other agencies, job swaps between Sure Start and other agencies

- Multi-disciplinary and joint training, e.g. within the individual Sure Start programme teams, between Sure Start programmes and with mainstream staff
- Developing the use of para-professionals to work alongside trained staff, e.g. with untrained worker or parents either paid or unpaid in recruitment, service delivery and management.
- Use of information sharing to achieve joined-up services
- Disseminating evidence regarding effectiveness of Sure Start practice
- Increasing job opportunities
- Reshaping to provide locally based care e.g. health visiting, midwife, social workers.

The extent to which these have been achieved will be examined over the next phase of the evaluation process.

12.0 FUTURE DEVELOPMENTS

The data highlights that management and workers continue to be motivated and committed to the Sure Start programme. Several initiatives, services and priority areas have been planned/identified for the future. For example:

- Development of two new premises for Happy Elephant, including the provision of full day care
- Real commitment to the St Helens Strategic Group, building on the belief that much learning and sharing can be done to promote a St Helens approach to Sure Start
- Sustained commitment to reach more families – especially ‘hard to reach’ families
- Sustained commitment to advertising and promotion of services
- Continue to work with fathers/male carers
- Continue to pursue active involvement from the wider community team
- Improve partnership working and contacts
- Actively involve parents in evaluating services

13.0 WAY FORWARD FOR THE EVALUATION

Although this interim evaluation report clearly identifies several areas of positive practice, the team found evidence to suggest potential gaps in some areas. Several areas have already been highlighted in this report. Here we offer number of questions we have developed that will provide a focus for us as the evaluation proceeds.

Emphasis

- Is there evidence that the service providers are adhering to key Sure Start principles?
- Is there a healthy balance between emphasising the achievement of service objectives and targets *statistically* (it could be argued this is reinforced by the Government’s reporting mechanisms), with concern for the actual *process* involved? While the outcome is obviously important, paying attention to the process is vital in order to ensure that the quality of the outcome is high and, further, that the outcome is sustainable.

- Is there an emphasis on secondary/tertiary prevention at the expense of primary prevention? For example, several of the services have an approach '*If your child has a problem with...*'

Wider community

- How does Happy Elephant 'fit' with the wider regeneration responsibilities in St Helens, i.e. within the context of the development of a local strategic partnership and community plan?
- What is the nature of strategic planning at a borough level in relation to the overall delivery of children's services, given recent Governmental policy around Children's Centres? Is there recent evidence of a review of skills and skill mixes needed for childcare and other workers?
- How does the programme link to services for older children?

Strategic Planning

- What is the strategic planning in relation to adding value to existing services; meeting the objectives; partnership working; mainstreaming and sustainability etc.?

Service provision

- How has the provision of services been changing since Sure Start developed in the area? (How, and if so, for which populations and under what conditions?)
- Are existing services improving? (How, and if so, for which populations and under what conditions?)
- Are more children, families and communities benefiting? (How, and if so, for which populations and under what conditions?)
- Are changes in the community likely in the near future, which need to be considered?
- Is the programme providing value for money?

Evidence-Based Practice

- Where do practitioners go for 'expert' advice? Do they make full use of computer technology, e.g. the Internet and email to obtain knowledge, information and evidence for decisions in practice? Are journals, reference books, information leaflets and other materials readily available to practitioners? What gaps are there in the knowledge base?

Continuing Professional Development (CPD) of Sure Start workers

- What strategic planning is involved in the professional development of Sure Start workers? What benefits are evident as a result of the CPD? The evaluation team believes the CPD of Sure Start workers is vital, since the programme will only be as good as the worker delivering it.

Partnership working

- How are individuals from different agencies continuing to work together? Do the current structures and processes; policies and procedures support effective multiprofessional working and a holistic approach to service delivery?
- Are parents becoming actively involved in the evaluation of service provision?

Inclusion

- What families/individuals are still being excluded as the programme embeds? Why? Strategy to overcome exclusions?

Other aspects we will be considering as the evaluation continues are;

Listening to the children

- Thought will be given to how children's voices can be heard in the evaluation process as it proceeds. The evaluation team is keen to have their voices represented either in words or pictures.

Depth and breadth

- While it was important for this early evaluation to cover *breadth* in examining the progress and outcomes at this stage, it will be looking at a sample of individual services in more depth this coming year. The evaluation team have already met with Programme managers and the Management Board Chair and identified some areas for closer scrutiny.

Innovative practices

- We are keen to identify innovative practices as well as other positive practice that can be shared on the National Evaluation Sure Start web site.

14.0 RECOMMENDATIONS

Overall the results of the evaluation to date highlight that Happy Elephant appears to be providing an invaluable service to families in terms of support, advice and services. The evaluation team has a few recommendations - *however, they are not intended to detract from the good work that is clearly being carried out.*

1. The programme now needs to focus on *embedding* the services and effectively using the operational framework that it has spend so much time developing over the past 18 months.
2. Once the full complement of staff are in place in the near future, in particular the new Programme Manager, it may be useful to redefine role and responsibilities and effective teamworking practices in light of the core services and teams.
3. A more strategic approach, linking and strengthening established Happy Elephant links with national and local initiatives such as the Children's Strategic Partnership; Community Plan; Regeneration Agency; Education Action Zones; Health Action Zones; Early Years Development and Childcare Plan and Partnership; Home Start, etc. should be a focus when considering sustainability and mainstreaming of services.
4. At Central Link, they had clearly identified other initiatives in the area and how the programme could link with them. Further, existing services were then matched to the four Government objectives for Sure Start programmes, in order to identify gaps in service provision in relation to the four key areas. This appeared to be a valuable exercise and one that Happy Elephant may want to consider.
5. Collecting and comparing baseline data, and using the data collected centrally, including health indicators, education indicators, social service indicators, early years and play indicators, and

advice service indicators needs to be prioritised in order to ascertain value for money and the difference Happy Elephant is making in the community.

6. It is important that service providers are able to clearly state, often (but by no means exclusively) in measurable terms how their service is working to achieve the Sure Start objectives and associated targets.
7. Whilst it is recognised that staffing shortages have put pressure on the workforce, it is recommended that a more systematic approach to documenting the work of task groups may be beneficial. The evaluation team feels much more planning and thinking has taken place, within the team, than is evidenced by the paperwork.
8. Continuing to strengthen partnership working between the five Sure Start Programmes in the borough, in order to make best use of resources and expertise, as well as providing an integrated approach to the delivery of services for parents and young children in the area is encouraged. Some Happy Elephant workers felt constrained to advertise their own local service, rather rolling it out for the benefit of families outside their area. It is suggested, therefore, that the potential for more shared opportunities are investigated.
9. Further, since recruiting individuals to key positions within the Sure Start programme has been difficult, we also recommend expanding the potential to share expertise and specialist services across other St Helen Sure Start programmes.
10. Word of mouth, from friends and neighbours, is a valuable recruitment approach and appears to be effective for Happy Elephant. In light of this, perhaps an incentive for parents should be offered for recruiting other parents into the programme and who subsequently become actively involved in the services.
11. A systematic approach to staff development and training (including an up-to-date record/log of who has undertaken what training and when etc.) would be useful for identifying gaps as well as expertise. It may also introduce a fair system of allocation to continued professional development.
12. Encouraging staff to be reflective and critical (in a constructive way) may help to move the programme forward, by challenging traditional ways of working, stereotypes and 'stuck in a rut' tendencies. There is much energy amongst staff to be capitalised in a positive way!
13. This evaluation report contains much data which can be subject to further analysis and comparison. It is suggested that the contents of this document, together with any further analysis, is used for programme development.
14. Involvement of parents in evaluating services, as well as developing depth to the evaluation of specific services need to be priority areas for the local evaluation over the next year.

REFERENCES

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Sure Start Unit (2000) *Guidance on Local Evaluation*, August. London: Sure Start Unit

Sure Start Unit (2002) *Risk Assessment Summary*, January. London: Sure Start Unit.

APPENDICES

- (i) Ethical approval letters
- (ii) Professionals' & Volunteers' Questionnaire
- (iii) Residents Questionnaire (questions asked verbally)
- (iv) Information letter resident's survey
- (v) Interview Topics of Sure Start Workers
- (vi) Baseline Evidence

Appendix i

Dr E Whelan
St Helens & Knowsley Local Research Ethics Committee
St Helens & Knowsley NHS Trust
C/o C-Garrd
Whiston hospital
Prescot L 35 5DR

March 10, 2003

Dear Dr. Whelan

I am writing to you in your capacity as Chair of the St Helens & Knowsley Local Research Ethics Committee. I am leading an evaluation of the Central Link and Happy Elephant Sure Start Programmes in St Helens and I wish to enquire if we need approval from the Committee for this evaluation. I have enclosed a copy of the proposal. As you can see, we are not intending to access children, but to be involved with parents and Sure Start workers primarily. We would very much appreciate if you could advise us as to our position re ethical approval to undertake this evaluation.

Yours sincerely,

Dr. Sheila Stark
Evaluation Lead

Sure Start Happy Elephant Local Evaluation
Professionals & Volunteers Questionnaire



We, at Manchester Metropolitan University, are undertaking the local evaluation of Sure Star Happy Elephant. We would very much appreciate your cooperation in completing this questionnaire. Your responses will remain anonymous and we will ensure you are not identified e.g. by your job title etc. Please could you return it in the prepaid envelope by December 24th 2003. Many thanks. The results of the survey will be fed back to Happy Elephant.

Please tick or complete your response in the spaces provided.

1. What is your professional role / job title?
.....
2. Is your post funded by Sure Start? Entirely? Partially? I am a volunteer
3. What Sure Start service are you involved with?
.....
4. Which Sure Start objective/s does the service aim to address?.....
5. In what way/s do you feel the service is meeting these objectives? (please provide two key outcomes of the service to date)
.....
.....
.....
6. What is the average uptake of the group/activity?.....
7. Describe an activity that has gone particularly well and why.
.....
.....
.....
8. Describe an activity that has **not** gone well and explain why you think this was the case.
.....
.....
.....
9. In your opinion what are the current gaps in the Happy Elephant service provision?
.....
.....
.....
10. Since Happy Elephant began 18 months ago what are the biggest differences you have seen in:
 - the local community in general.....
 - parents.....

- young children.....

11. Please complete the following statements

I think...	Statement	Strongly Agree	agree	disagree	strongly disagree	
1.	Happy Elephant is providing an excellent service to local residents	1	2	3	4	
2.	The Management Board is effective	1	2	3	4	
3.	I understand the role of the Management Board	1	2	3	4	
4.	I have attended the Partnership Group at least once	1	2	3	4	
5.	I am involved in a sub group/task group	1	2	3	4	
6.	Strong consultation with parents is evident	1	2	3	4	
7.	Parents are encouraged to become involved in Happy Elephant	1	2	3	4	
8.	Happy Elephant services are well advertised	1	2	3	4	
9.	Happy Elephant has improved community spirit	1	2	3	4	
10.	I know who to contact at Happy Elephant for information	1	2	3	4	
11.	The same parents tend to use the services	1	2	3	4	
12.	I need to make more of an effort to encourage hard to reach families to become involved	1	2	3	4	
13.	Happy Elephant provides me with opportunities for professional development	1	2	3	4	
14.	Happy Elephant appears to be well resources financially	1	2	3	4	
15.	Communication between local Sure Start workers is good	1	2	3	4	
16.	Communication between Sure Start workers and management is good	1	2	3	4	
17.	I am involved in evaluating and monitoring the service provide	1	2	3	4	
18.	I have collected baseline data	1	2	3	4	
19.	I attended the evaluation training workshops	1	2	3	4	
20.	I found the workshops good	N/A	1	2	3	4
21.	I am fully aware of the Sure Start objectives and targets	1	2	3	4	
22.	I am proud to tell people I work for Happy Elephant	1	2	3	4	
23.	I share the values of Happy Elephant	1	2	3	4	
24.	I understand clearly what is expected of me	1	2	3	4	

25. I feel motivated to do the best I can in my job	1	2	3	4
26. My work is valued at Happy Elephant	1	2	3	4
27. I find my work interesting	1	2	3	4
28. I find the level of challenge in my work manageable	1	2	3	4
29. I receive support fro my manager	1	2	3	4
30. I make a positive difference to people who use our services	1	2	3	4
31. I have the information to do my job	1	2	3	4
32. I am satisfied with the 1:1 contact with my manager	1	2	3	4
33. I am satisfied with Happy Elephant team meetings	1	2	3	4
34. I am satisfied with Happy elephant Developmental Days	1	2	3	4
35. I am satisfied with the individuals team meetings	1	2	3	4

Please feel free to make any additional comments

.....

.....

.....

.....

Many thanks for your cooperation with this survey

Service	How often More than once a week = 1 Once a week = 2 Once a fortnight =3 One a month = 4 Once a year =5 Never = 6	No – why not?	Yes – satisfaction level Very satisfied = 1 satisfied = 2 Not satisfied =3
Housing services (Which?)			
Social services (Which?)			
Dentist			
Job centre			
College			
Any other?			

Do you have any comments on any of these services?

.....

.....

.....

.....

13. What gaps do you think there are in local community services?

.....

.....

.....

Question	Yes(Y) No(N)	Response/comment
14. Have you heard of Sure Start Happy Elephant? <i>(if no turn to question 29)</i>		
15. How did you hear about Happy Elephant? e.g. Health centre/clinic, friend, neighbour, leaflets, posters etc.		
16. Are your registered with Happy Elephant?		
17. Is Happy Elephant what you expected? Why/why not...		
18. Have you told neighbours/friends about Happy Elephant?		
19. Have you used any of the following Happy Elephant services?		

Service	Y/N	Satisfaction level 1= v.sat. 2= sat. 3=not sat.	Comments
Aqua Tots			
Busy Bees			
Crèche			
Fun & Play			
Happy Chappies			
The Incredible Years			
Infant Massage Group			
Little Voices			
Mind & Body			
Pamper N Peep			
Toys R Fun/Stay N Play			
20. Can you state two benefits to your child of these services?	Comments		
21. Can you state two benefits to you of these services?	Comments		
22. Did you know these services were part of Happy Elephant?	Y / N and comments		
23. How would you rate the reception at Happy Elephant?	Always welcoming and friendly <input type="checkbox"/> Usually welcoming and friendly <input type="checkbox"/> Sometimes welcoming and friendly <input type="checkbox"/> Unwelcoming and unfriendly <input type="checkbox"/> No opinion <input type="checkbox"/>		
24. Thinking of all the Happy Elephant services that you and your children have used, would you describe your feelings about them as:	Very satisfied <input type="checkbox"/> Satisfied <input type="checkbox"/> Dissatisfied <input type="checkbox"/> Very dissatisfied <input type="checkbox"/>		

25. What form of transport do you usually use to get to Happy Elephant services?	Comments
26. How could Happy Elephant improve?	Comments
27. How could Happy Elephant encourage residents who do not currently use the services to do so?	Comments

28. Can you say which of the following attract you to use the services? (*Identify only the top 3*)

- Comfortable surroundings
- Activities for children
- Staff always available
- Know other parents who use it
- Refreshments are available
- Play equipment is of good quality
- Open at convenient times
- Staff can advise on child development
- Chance to find out what else is going on for children and families
- Easy to get to
- Nothing else to do around here

29. (Only to respondents who have been pregnant/ or partner has been pregnant)

How satisfied were you with the level of information you received when you were pregnant?

Very satisfied Satisfied Dissatisfied Very dissatisfied

Comments?.....

30. If you have suffered form post natal depression how satisfied were you with the level of support you received?

Very satisfied Satisfied Dissatisfied Very dissatisfied N/A

Comments?.....

31. How satisfied are you with the amount of information on child health issues that is available to you?

Very satisfied Satisfied Dissatisfied Very dissatisfied

Comments?.....

32. If you have used employment/training services, how satisfied were you with these services?
Very satisfied Satisfied Dissatisfied Very dissatisfied N/A

Comments?.....

33. Why do you **not** use Happy Elephant services?

.....
.....
.....
.....
.....

34. What could Happy Elephant do to encourage you to use the services?

.....
.....
.....

Do you have any other comments?

.....
.....
.....

THANK YOU VERY MUCH FOR TAKING THE TIME TO ANSWER THESE QUESTIONS



Sure Start Happy Elephant Local Evaluation

January 16 2004

Many thanks for considering completing this verbal survey.

Who are we?

We are a team from the Manchester Metropolitan University who has been commissioned to undertake an evaluation of the local Sure Start Happy Elephant Programme over two years.

What are we doing?

As part of the evaluation process we need to know what residents in the area feel about current community services. Also, if they know about and use Happy Elephant.

What will we do with your response?

We are hoping to collect around 100 residents' views. Your response will be analysed with all the others. A report will be written for Happy Elephant in order that they can use the data to improve the services they offer to the local community.

Will my name be used?

NO your responses will remain anonymous.

Where can I get more information about this evaluation?

Dr. Sheila Stark
Manchester Metropolitan University
Department of Health Care Studies
Hathersage Road
Manchester
M13 0JA

Tel: 0161 247 2509

Thank you for your support!

Appendix v

INTERVIEW TOPICS FOR SURE START WORKERS

Context

1. Strategic view? Long term vision
2. Base on what philosophy?
3. What are the key problems the programme is trying to tackle?
4. How do you identify gaps in service provision?

Management

5. Management model – top down bottom up?
6. management style - are you encourages to take responsibility and do you have autonomy

Partnership

7. Experiences of partnership working?
8. Distinctiveness of partnership working at Happy Elephant?
9. What are the main challenges of community involvement?
10. How do you ensure continuity (joined up working) in the work of the Sure Start workforce
11. What was the history of community involvement? Were you able to build on this?
12. Why reluctance to become involved? - Doubtful of initiative? Stigma?
13. What characteristics hinder/help partnership working

Resources

14. What has the lack of staff meant? - in particular, the Programme Manager?
15. Effects of the temporary premises?

Other

16. Hard to reach groups – definition? What is the problem? Family rivalries, others not wanting those families etc.
17. How do you identify gaps in service provision?
18. To what extent is the monitoring you currently have in place effective?
19. What skills do you consider the core services coordinators need?
20. Where does the responsibility lie if a core service does not progress towards meeting Governmental targets?
21. Newsletter?

Staff expertise and staff development

22. What strategies are in place to ensure the workforce who is delivering this programme having up-to-date knowledge and skills to deliver the programme and achieve the Government's aims effectively? How do you identify continuing development needs of workers?
23. What skills have been developed?

Outreach and home visiting

1. What strategies have you in place for the following;
(SEE SURE START GUIDANCE...) and...
 - Supporting early bonding
 - Helping families to function
 - Identifying and supporting early on children with emotional and behavioural problems

- Reducing re-registration of children on the child protection register
 - Supporting mothers with post natal depression
2. What information have you developed in relation to supporting families?
 3. Where do you get your information and evidence from to base your practice on? For example how did you know what approach, information and support mothers with post-natal depression needed? How did you ensure it was culturally sensitive? Up to date? Etc.
 4. What have been;
 - The gaps in your knowledge as a team?
 - The continuing professional development needs of your team?
 5. How have these been addressed?
 6. How do you ensure your strategies are sustainable e.g. if funding was to dry up?
 7. What emphasis do you put on the *process* to achieve the *outcome*? What is involved in your process/describe your process?
 8. Can you give some examples of interprofessional working in achieving the targets with your core service group?
 9. How effective is communication?
 10. What mechanisms are there in place for following things up that are raised in meetings?
 11. How does the core service group ensure continuity in their work?

Primary and Community Health and social Care

1. What strategies have you in place for the following and how were they developed; **(SEE SURE START GUIDANCE...)** and...
 - Reducing mothers who smoke during pregnancy
 - Reduce the number of low weight babies
 - Reduce the number of children admitted to hospital as emergencies during first yr. of life with severe injuries; gastroenteritis, respiratory infection
2. What information have you developed?
3. Where do you get your information and evidence from to base your practice on?
4. What have been;
 - the gaps in your knowledge as a team?
 - the continuing professional development needs of your team?
5. How have these been addressed?
6. How do you ensure your strategies are sustainable e.g. if funding was to dry up?
7. What emphasis do you put on the *process* to achieve the *outcome*? What is involved in your process/describe your process?
8. Can you give some examples of interprofessional working in achieving the targets with your core service?
9. How effective is communication?
10. What mechanisms are there in place for following things up that are raised in meetings?
11. How does the core service group ensure continuity in their work?

Support good quality play, learning and child care

1. What strategies have you in place for the following and how were they developed; **(SEE SURE START GUIDANCE...)** and...

- Enhancing speech and language skills
2. What information have you developed?
 3. Where do you get your information and evidence from to base your practice on?
 4. What have been;
 - the gaps in your knowledge as a team?
 - the continuing professional development needs of your team?
 5. How have these been addressed?
 6. How do you ensure your strategies are sustainable e.g. if funding was to dry up?
 7. What emphasis do you put on the *process* to achieve the *outcome*? What is involved in your process/describe your process?
 8. Can you give some examples of interprofessional working in achieving the targets with your core service?
 9. How effective is communication?
 10. What mechanisms are there in place for following things up that are raised in meetings?
 11. How does the core service group ensure continuity in their work?

Support for families and community

1. What strategies have you in place for the following; **(SEE SURE START GUIDANCE...)** and...
 - Improving the existing services to need local needs
 - Enhancing families opportunities to be involved in the community
 - Reduce number of children living in households where no one is working
2. What information have you developed?
3. Where do you get your information and evidence from to base your practice on? For example to know what the community needs.
4. What have been;
 - the gaps in your knowledge as a team?
 - the continuing professional development needs of your team?
5. How have these been addressed?
6. How do you ensure your strategies are sustainable e.g. if funding was to dry up?
7. What emphasis do you put on the process to achieve the outcome? What is involved in your process/describe your process?
8. Can you give some examples of interprofessional working in achieving the targets for the core service?
9. How effective is communication?
10. What mechanisms are there in place for following things up that are raised in meetings?
11. How does the core service group ensure continuity in their work?

Help to access specialist services

1. What strategies have you in place for the following; **(SEE SURE START GUIDANCE...)** and...
 - Identifying and supporting early on children with learning difficulties
 - Reduction in the number of children who require specialist intervention
2. What information have you developed?
3. Where do you get your information and evidence from to base your practice on? For example to know what the community needs.

4. What have been;
 - the gaps in your knowledge as a team?
 - the continuing professional development needs of your team?
5. How have these been addressed?
6. How do you ensure your strategies are sustainable e.g. if funding was to dry up?
7. What emphasis do you put on the *process* to achieve the *outcome*? What is involved in your process/describe your process?
8. Can you give some examples of interprofessional working in achieving the targets for the core service?
9. How effective is communication?
10. What mechanisms are there in place for following things up that are raised in meetings?
11. How does the core service group ensure continuity in their work?

Extended services e.g. regeneration etc.



Manchester
Metropolitan
University

Local Evaluation of St Helens Sure Start Central Link and Happy Elephant Manchester Metropolitan University

Baseline Evidence

Why do we need baseline evidence?

In order to evaluate ('measure') the *effectiveness* of your Sure Start Programmes it is imperative baseline data are identified and recorded. The Government will not continue to fund initiatives like Sure Start unless there is evidence that they provide value for money and that the programmes have made a difference. Baseline evidence will enable you, as coordinators of local programmes, to:

1. identify and monitor contextual issues impacting on your programmes
2. understand how well your services are performing in terms of both *process* and *outcomes*
3. keep track of your progress in meeting the objectives and targets for Sure Start (accountability).
4. ascertain the extent your programmes are providing value for money in terms of *efficiency* (what level of resources are being used to achieve the desired outcome?); *effectiveness* (is the best possible outcome being achieved given the level of resources?); and *economy* (are the fewest level of resources being used as possible to achieve the desired outcome?)
5. make changes to your programmes as a result of the ongoing evaluation.

What baseline evidence is needed?

- *Measurable data* is desirable by the Government, e.g. the number of mothers experiencing postnatal depression, the number of children having access to good quality play and learning opportunities.
- However, *qualitative data* is also needed to provide more descriptive detail in relation to the quality of the outputs (i.e. things that can't be measured): For example, the developmental and emotional changes in children as a result of some of the Sure Start services, the improved esteem of individuals in relation to their parenting skills and so on.
- If you would like to be more creative with your baseline data, the use of photographs and video footage could provide some excellent evidence of activities/services 'in action'.

Who collects this baseline evidence and how?

The baseline evidence that could be useful to you is at different organisational levels. Much of this evidence is clearly visible in your developmental plans. It is suggested, therefore, that a longitudinal perspective is taken over the next few years to enable regular comparisons to be made between, say, annual data and the original baselines identified in the developmental plan. Baseline should be recorded at the following organisational levels:

1. Macro level - Catchment Area Baselines

- These will be useful to monitor and compare any trends/patterns in your area, such as the introduction of new social inclusion initiatives in St Helens, or the level of unemployment since your Sure Start services developed and embedded into the area/culture etc. This evidence will provide a bigger demographic picture of the health, education and social profiles of residents and families in the area. Any improvement in these areas may be due *in part* to the Sure Start programmes. Since several other initiatives may be working alongside Sure Start it would be impossible to say the improvements are

because of the programmes. The programmes, however, would *contribute* to and *reinforce* other initiatives such as EYDCP, Children's fund, Neighbourhood Renewal fund etc.

Examples of catchment area baselines

Profile of the area (see Local Authority data and other sources outlined in the developmental plan p.38 central Link)

- level of unemployment
- average income
- level of households receiving benefits
- context e.g. profile of schools, adult learning provision, places of worship, community facilities, industry etc.
- crime rate
- children (all ages) on child protection register
- health and dental profile of residents
- housing profile
- education profile, including levels of literacy and numeracy

Data directly relevant to Sure Start

- total population
- population under four
- families with children under four
- ethnic breakdown of total population, identification of families where English not a first language
- number of traveling families and asylum seekers
- live births to mothers in catchment area
- teenage pregnancy rate
- number of children (0-4) on child protection register
- number of children (0-4) in care
- number of single parent families
- data on childcare and early years education places for 0-3 year olds

Other data

- resources available by wards
- links to strategic initiatives in St Helens

2. Meso level – Programme Level Baselines

- As Sure Start coordinators, you are collecting and returning data regularly for national usage. This includes number of parents registered on the Sure Start Programme, number of parents involved in the management and strategy groupings etc. This evidence will highlight trends in relation to the expansion and implementation of the scheme. It should also give an indication of the areas of development you, together with key stakeholders, have been particularly active in addressing over time. However, it may not necessarily provide evidence of the *effectiveness* of the actual services.

Examples of programme level baselines

- management structures - number and profile of groups (e.g. Management Board, Parents Forum, Professional forum, Task Groups, Sub Groups etc.)
 - memberships of groups
 - ongoing record of meetings
 - number of complaints etc.

- number and profile of partnerships - ongoing record of meetings
- number and profile of Sure Start employees (fully funded by Sure Start, partially funded by Sure Start)
- number of families registered
- significant financial baselines
- number of accidents, and so on...

3. Micro Level - Service Level baselines

- Identifying and recording baseline evidence in relation to the impact of the services to date on families in the community is crucial. However, this data is likely to be largely subjective e.g. obtaining the views of parents in relation to the value of particular activities. In order to obtain more quantitative evidence at this level Sure Start workers need to identify and record statistics, such as how many parents attended specific activities, how many children did they treat and so on.

Examples of Service level baselines

- number of parents (mums/dads)/carer/grandparents involved in the individual services
- number of children involved
- drop out rates
- quantitative indicators of effectiveness of their services – will need to be tailored to different services e.g. Health Visitors will record number of mothers experiencing post natal depression in first year of their babies' life; Speech and Language Therapists will record the number of children age 4 with speech and language development delay etc.
- qualitative indicators of effectiveness of their services – ensuring the users of the services AS WELL AS those residents in the area who do NOT use the services have a voice
- data on home visits
- data on specialist services
- data on health promotion training initiatives, and so on...

Availability of the evidence?

Collecting baseline evidence could be seen by some to be a significant 'add on' to what they are currently doing in their professional role. Thus, any action to record baseline data needs to be realistic in terms of time and what is actually being requested (e.g. how often the data is recorded needs to be agreed upon, using what Proforma? Etc.)

What has been done so far in relation to recording baselines?

- Delivery Plans for both Central Link and Happy Elephant provide detailed demographic data as outlined under 'catchment area baselines' (see 1. above)
- During the developmental stages of the delivery plan each programme undertook a consultation exercise with parents using a questionnaire.
- A questionnaire was used to analysis of services (and gaps in services), providers and costs at the onset of the programme and prior to the formulation of the Developmental Plans, with respect to achieving each objective.
- Monthly monitoring data is provided to the national body.

What needs to be done?

- As Programme Coordinators, you have to decide what baseline evidence you require at the macro, meso and micro levels in order to 'measure' the effectiveness of the programme being offered in order to meet each objective and associated targets. This needs to be done in collaboration with Sure Start workers delivering specific services.

- Once the baselines have been identified then the frequency of recordings; administration procedures for the recording and analysing of the data etc. have to be established.
- We suggest that identification of baselines and how they will be/are recorded should be established as a priority with existing services and new services as they come on stream.
- 'User friendly' Performa may then need to be developed for recording baseline data.
- Revisit the data collected during the initial consultation to ensure useful baseline evidence has been identified. Given the aims and objectives of the questionnaires designed these should have resulted in some excellent baseline evidence, the significance of which may not have been apparent at the time of collection or the preliminary analysis. For example the extensive work done on the gaps identified and how the services would be reshaped could be used as a baseline to highlight to what extent these gaps have been filled as a result of developing Sure Start services.
- The consultation exercise also highlighted some gaps in the level of contact with certain groups of resident in the community, such as fathers and parents under the age of 18 years. Gathering some baselines from these hard to reach groups may need to be identified as a priority for you.

Examples of questions you need to ask?

1. How can I justify the money spent on these services?
2. Where is my evidence that these services are needed?
3. What evidence do I have that the services are effective?
4. Have I identified what I consider to be 'effective' criteria?
5. Are these congruent with the Government's criteria?
6. Is my evidence robust (strong)? Objective? Reliable and valid?
7. Should my data (evidence) be qualitative/quantitative or a mixture of both?
8. How often do I need to collect evidence?
9. Who should be (i) collecting and (ii) analysing this evidence?
10. How should it be recorded?
11. How can I build the recording of baseline data and subsequent data into the routine work of Sure Start workers?
12. In light of my responses to the above what do I need to now?! Further, how can the two programmes work together to develop a framework that ensures baselines are (i) identified (ii) recorded and (iii) used for comparative and accountability purposes.