

Brighton & Hove Central Sure Start
SureStart

Evaluation Activity 2002-2003

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Introduction

This report provides a short summary of the evaluation activity undertaken within the Brighton and Hove Sure Start Programme during 2002-2003. The structure of this report will provide details of:

- evaluation projects undertaken within the programme;
- planned evaluation work for the forth coming year;
- evaluation projects undertaken within the programme by teams on an autonomous basis by individual core and commissioned services.

Details of the strategic approach to evaluation employed within the programme can be found in the Programme's Evaluation Strategy. The primary objective of the programme's Evaluation Strategy is to use evaluation as a tool with which to assess the achievement of the Programme so far, in order to improve the future life experiences of our local population and facilitate mainstreaming.

Evaluation Projects

Evaluation projects Undertaken Within the Programme

Health Visiting profile of targeted children from the Health Visiting record & their use of Sure Start Services Status - finished

This evaluation had two objectives: firstly to develop a profile of the characteristics of those children on the Sure Start health visitor's targeted caseload; and secondly to examine their referral to and use of the Programme's services. Implicit within these objectives were the assumptions that if the programme was meeting the requirements of those children identified as being at greatest need within the local community then this might stand as an indicator of success. Similarly, if these needs did not appear to be met this information could be used to support possible changes in service delivery or provision.

The case notes of all children on the targeted caseload were screened against a defined set of criteria. This data was then amalgamated with that produced from the Sure Start Registration Database which provides details of the uptake and use of services.

The findings of this work indicated that children and their families who have been placed on the targeted caseload experience higher than expected levels of unemployment; are more likely to live in lone parent households and occupy rented accommodation and come from Black and Minority Ethnic groups. These experiences provide an important backdrop against which to review their reasons for targeting. Levels of postnatal depression are higher than would be expected for the Sure Start community as a whole. Rates of breast feeding are lower than would be expected for the Sure Start community as a whole. Possible under assessment and subsequent under identification of post-natal mental health exists amongst these families. These issues are particularly evident amongst members of the black and minority ethnic communities. The incidence of social isolation is disproportionately high in members of the black and minority ethnic communities. Children targeted

for reasons associates with mental health issues are less likely to be referred to Sure Start services, or any other service within Brighton and Hove, than those with other reasons for targeting. This finding may indicate a lack of service provision for families with these needs within the Sure Start programme and across the wider Brighton and Hove area. Children are also less likely to be referred to or use Sure Start's services if they have Child Protection or environmental issues as their main reason for being targeted. Children are more likely to use Sure Start's services if they have been targeted for reasons associated with social isolation or child medical issues.

Recommendations

The findings of this work have significant implications for the delivery of all our services particularly around those relating to social isolation and mental health. As a result of this work a project group was established to review issues around "Emotional Well-Being". The information gleaned through this process will also act as a significant resource in respect of the needs of our community during the re-commissioning and re-structuring of services for the 2004-2006 period.

Full report available on request.

Evaluation of the Family Support Worker Service Status – *implementing recommendations*

This project was undertaken in order to assess the preventative effect of the work of the Family Support Work service operating within the Central Brighton and Hove Sure Start Programme. The project has sought to establish reliable information about the number and type of referrals received by the service, and in particular to capture the complexity of the issues with which clients present. The second objective of this work was to develop a system that effectively recorded clients' expectations of the service on initial contact and satisfaction on closure.

This evaluation has been successful on both accounts. The service profile has provided robust evidence indicating that the Family Support Team are meeting their team objectives and form an effective part of the multi-disciplinary team that makes up the Central Brighton and Hove Sure Start Programme. Analysis of this data has indicated that the Family Support Work service is in contact with a higher than would be expected proportion of families from minority ethnic communities and those households consisting of lone parents. Both of these communities are frequently referred to as "hard to reach". The majority of referrals to the service are made by members of the two health teams operating within the Programme: Health Visiting and Midwifery. Seventy percent of all referrals were made in relation to issues around housing, parenting support and social isolation. A client will typically work with a member of the Family Support Team for eleven and a half weeks during which time they will be in contact with their worker on eleven separate occasions.

Positively, this review indicates that clients are engaged with more agencies at the end of their contact than when initially referred. The average service user moving from being in contact with 0.27 agencies to 1.75. This data indicates that the service

is attaining its initial aims of engaging service users and delivering an individualised high intensity service.

Following the recommendations detailed in the report of the preliminary findings of this evaluation several changes were made to the measures used to assess client outcomes, resulting in the introduction of a system of goal setting. This simple system whereby workers and clients in the initial stages of their contact agree specific goals towards which they will frame future work has successfully enabled this aspect of the service to be measured. As with the reasons for referral to the service the majority of goals are made in relation to housing, accessing services and parenting issues. An average client agreed to work on 3.5 goals and was successful in achieving 2.89 of these goals. Of the eighty-one goals clients agreed to pursue sixty-seven (83%) were achieved.

In summary the findings of this evaluation indicate that the Service is fully integrated into the Sure Start multi-disciplinary team and receiving referrals from families within its target client group. Referrals are made to the service for appropriate reasons and clients are effective in achieving their desired outcomes. Finally, 82% of clients felt that things would have been a lot worse than they are now had they not been in contact with the Family Support Service. Thereby validating its role as an effective preventative service.

Recommendations

The principle recommendations following the completion of this work were to disseminate the findings of this study which provides a robust analysis of both the Family Support Worker service model and the successes of the service itself. It was also proposed that the evidence provided in respect of the success of the service provides robust support for the mainstreaming of this service within Brighton and Hove.

It was also recommended that the findings of this evaluation should also be shared with colleagues in other Sure Start programmes who may be operating a similar service or more importantly are seeking to address problems within their local community similar to those addressed here.

A further proposal was made in respect to the integration of evaluation into existing practice. The system of goal setting has been further refined and developed into a “client worker contract” or agreement. This system will both aid client/worker negotiation and will also facilitate ongoing evaluation.

It was also recommended that the evaluation methodology used within this project had proven its effectiveness in achieving the successful capture of evaluation data, it was therefore proposed that the use of this methodology also be disseminated to colleagues within other Sure Starts and other across Brighton and Hove.

Full report available on request.

Evaluation of the Sure Start New Model of Post-natal Care Status – Implementing recommendations

The Model is based on the IMPaCT trial (Implementing Midwifery-led Postnatal Care Trial), a randomised controlled trial which tested a new model of midwifery-led postnatal care the main objectives of which were to improve women's physical and psychological health after birth through the systematic identification and management of their postpartum health problems.

The original new model of care as operated in Birmingham proposed that much morbidity remained unidentified because of the time-consuming focus of care on routine observations and examinations and the early discharge from maternity services, leaving insufficient opportunity to ascertain and manage women's health needs adequately. The new model of care, as operated in Birmingham, enabled midwives to plan selective visits based on the individual needs of women until the three months after delivery, rather than between 10 and 28 days. Replacing the GP 6-8 week postnatal check, this was undertaken by midwives, and took place at 10-12 weeks, allowing women time after such a major life event to consider their own health needs.

How does the model of care operate within the Sure Start area?

The development of this project within the Sure Start area was motivated by a desire to improve care for women during the post-natal period, and was given additional stimulus following a series of meetings with the Catherine McCormack a midwifery advisor to the Department of Health. Though having the same objectives as the original IMPaCT study, the Sure Start Model does differ in its implementation, staff capacity being a major limiting factor. The Sure Start model of care comprises three elements:

- Postnatal Clinic;
- Extended post-natal visiting with one additional visit at 28 days;
- GPs continued to perform the 6 week check-up;
- Evidence based guidelines integrated into the clinical record.

The Sure Start post-natal service, though based on the IMPaCT trial does differ from the original Birmingham model. In particular:

1. the Sure Start model has employed inclusion criteria for entry to the study, in order to aid work management;
2. the GP postnatal check has continued;
3. the Sure Start service in conjunction with colleagues within the local midwifery service has established a post-natal clinic for the speedy referral and treatment of women presenting with any of the concerns included within the post-natal checklist.

The objectives of this work were:

- to establish the incidence of conditions relating to those detailed in the guidelines – baseline data;
- to standardise and ensure that comprehensive post-natal assessments were made of maternal health through the use of the guidelines integrated within the existing post-natal record;
- to review activity within the post-natal clinic in respect of the number of women referred and attending the clinic, which professional groups were making referrals and the reason for referral.

In summary the findings of the work completed to date indicate:

- When compared to the statistics gleaned from the hospital management information system the data resulting from the screening of the notes containing the Sure Start Midwifery record indicates a much higher incidence of post-natal problems. With ten of the thirteen women presenting with a post-partum problem.
- Referrals to the Post-natal Clinic reflected the pattern of diagnoses indicated through the use of the post-natal record.
- During it's period of operation the clinic was consistently full with a third of all referrals being made by GPs.

Proposed Recommendations

Recommendations based on the findings of this work include:

The 10 day check list should be included in the “discharge from midwife to health visitor and GP” section of the existing post-natal midwifery record. It is felt that this recommendation will promote comprehensive assessment, identification and treatment, of what, from the evidence presented here appear to very common post-natal problems. The inclusion of the checklist at this stage in their post-natal care may also have the added benefit of raising awareness amongst women of these issues, which may present at a later date and aid discussion with their General Practitioner at their 6 week check – see below.

Ideally the 28 day check should continue in it's current form. However, it was acknowledged that given existing resource constraints this is not currently feasible. A check at 6 weeks is carried out by General Practitioners, and it is therefore proposed that a dialogue is opened with General Practitioners around their role in undertaking the 6 week check and the possibility of GPs using the post-natal checklist as a guideline at this post-natal appointment. GPs within the Brighton and Hove area have already received copies of the guideline. GPs where also the most numerous professional group to refer to the post-natal clinic.

The post-natal clinic will continue in it's current multi-disciplinary form. The existing referral criteria for the clinic should be expanded to include issues around emotional well-being (post-natal depression). Within the Sure Start area this will take the form of co-ordinating the work undertaken in respect of this issue with that being pursued by the Sure Start Emotional Well-being Project team.

Full report available on request.

Central Sure Start Playlink Service Evaluation – Status - active

Central Sure Start Playlink has been involved in developing an evaluation system in partnership with Brighton and Hove City Playlinks. The objective in establishing this evaluation system has been to establish a mechanism which effectively captures the effect of Playlink's homevisiting service on child development in addition to providing effective feedback for recipients in order to aid service development. Both these

objectives needed to operate within Playlink's ethos of engaging with families in a play focused, non-didactic manner.

The first evaluation system to be developed consisted of an exist questionnaire, designed to be easy to use both by visitors and parents. The second questionnaire system to be developed consisted of two questionnaires – the part one form to be completed at the beginning of visits, followed by part two at the finish of visiting with a particular family. This system was developed in consultation with the child development consultant and published author, Jennie Lindon. However, the second version of the questionnaire proved less successful than the first and it was decided that a third draft incorporating the benefits of the simplicity of the first evaluation system but also including the “before” and “after” elements of the second evaluation should be developed. This third and final evaluation method is currently in the early stages of implementation.

Community Parents Evaluation – status - finished

The Community Parents Programme came out of the work of the mental health team within Brighton and Hove Health Promotion Department. The service comprises a co-ordinator based within the Sure Start team and a team of trained volunteers who offer monthly semi-structured home visits. The service aims to visit from an early stage and to aid families to cope well from the start and to ensure that problems are “nipped in the bud” before they become entrenched and difficult to resolve later on. The overall principle of the programme is empowerment; parents are not instructed but encouraged to use their own ideas, skills and abilities in their parenting role.

The findings of this evaluation indicated that few difficulties have been encountered in finding, recruiting and retaining enough suitable volunteers. A great success of the programme is that a significant proportion of volunteers have progressed from the programme to gain employment or moved on to further education. The programme has proved its worth on many counts, not least the evident expression of needs and satisfaction amongst Parents and Community Parents alike. Participating families in particular valued the fact that the volunteers had “been there” themselves and were prepared to talk about it.

The impression was gained that when feeling isolated parents cannot have enough support. Interviews with Community Parents and families visited give pointers as to the uniqueness and benefits of the role of Community Parent within the “family support framework” being somewhere in the middle of what might be called the continuum of support – between on the one hand the formal (e.g. Health Visitor) and on the other the informal (family). Another finding of the evaluation has stressed the part played by efficient training, group support and project leadership. Time was taken in the early development phase in recognition of the importance of setting up a programme that was rooted in sound professional practice. Problems were however experienced in respect of the programme’s ability to access families and to become integral to the Sure Start team. This manifested itself in the form of low levels of referral.

Recommendations

The findings of this evaluation aided the realignment of this service which will over the following months develop into a broader Volunteering Programme. The new service will incorporate many of the elements of the original Community Parents Programme but will however, primarily focus on developing the role of volunteer parents within the wider Sure Start Programme.

Active, Ongoing and Planned Evaluations

Fathers' Information Needs Status - active

This is a small evaluation looking at the information needs of prospective fathers during the ante-natal period. The Sure Start ante-natal clinic is one of the services most frequently accessed by male carers/fathers. The Brighton and Hove programme does not at present provide any designated services for fathers or male carers. However, the programme does acknowledge that this community does have specialist needs which might in the interim, prior to the establishment of designated service be provided through the use of written, audio visual or web based media. Information is gleaned through the use of a questionnaire distributed with the booklet "Preparing for birth: Fathers". This study aims to illicit the views of fathers in respect of the existing written material used within this group, and establish other sources of information used by fathers in respect of pregnancy and parenting. The findings of this work will aid the development of further resources specifically designed for the needs of fathers.

Comment cards Status - active

Given that the Brighton and Hove Programme does not operate out of a community base, one of the principle mechanisms used to share information with our local community has been through the distribution of regular quarterly mail-outs in the form of a Directory of Services. The Directory also includes a tear-off "comment card" at the end of this booklet which prompts parents/carers to comment on our services. Since the introduction of this system in Spring 2003 a total of six comment cards have been returned completed. All but one response was positive. The one negative respondent indicated that they felt that a bias existed towards younger children aged under 2, and that services needed to be provided for children above this age.

Community Evaluation Questionnaire Status - active

An acknowledged weakness within the Brighton and Hove Sure Start programme has been the lack of user participation/consultation evaluation. Guidance at the time of the Programme's inception in 1999 did not include as systematic process of baseline community evaluation. The Community Evaluation Questionnaire hopes to act as a catalyst to the development of greater user consultation. The

questionnaire addresses issues around parents experiences of living in the Sure Start area and also the services our local community would like to see provided from the Programme's new base at Morley Street.

It is also hoped that the information gleaned from this paper based exercise will provide thematic material with which the soon to be appointed Parent Participation worker will be able to pursue in more detail through the use of one-to-one and focus group led activities.

The Community Evaluation Questionnaire will be distributed in mid-October to all families living within the Sure Start area. This has been made possible through negotiation with evaluation colleagues within the local community health trust. Though this methodology is not without problems namely the number of non-English as a first language speakers within the area; it is hoped that the use of incentives: namely that all households completing the questionnaire will receive a free children's book, will aid the response rate. Another strength of this process is its universality with all households within our catchment area being offered the opportunity to participate.

Census 2001 - Status - active

Data gleaned through the Census provides the most accurate picture for many significant factors affecting Sure Start's service delivery. For example Census data provides the most comprehensive information about the ethnic breakdown of our community. To date this project has involved information specifically for the Sure Start area being compiled through the amalgamation of Output Area data. Census data provides useful supporting information in respect of employment, household structure and housing issues. Information such as this has aided the development of a complete picture of the needs of our local community. Given the comprehensive nature of the Census data it is also possible to use these data sets as a measure of comparison between the Sure Start community and that of Brighton and Hove and the wider backdrop of England and Wales.

Early Years Evaluation - Status – active

The Brighton and Hove programme provides a comprehensive range of services for children using early years services and in particular the provision of 30 places within 4 pre-school settings. The core Sure Start team also includes a speech and language therapist and a play service. In addition to the provision of designated pre-school places a wide range of additional services are also provided by our commissioned services. These include a Portage service, a service for children attending pre-school who are speakers of a language other than English and a play service. The objective of all these services is to aid child development and thereby aid school readiness, by providing appropriate services as early as possible in order to have a strong preventative effect. The Early Years evaluation seeks to measure the effect of these interventions on child development, and establish a model of intervention that has the potential to be "mainstreamed" to the wider Brighton and Hove Community.

Planned evaluation work for the forth coming year.

Profile of service use - Status - *planned*

The Brighton and Hove Programme uses an Access Database to record all contacts clients have with our core and commissioned services. This system is known as the Sure Start Registration Database. Though primarily used as a mechanism for fulfilling the monitoring requirements of the national Sure Start Unit, this system has the potential to provide a comprehensive profile of service use. Potential exists to group service users by for example the age of their child, household structure and geographic location in order to develop profiles of how our local community is using our services. Elements of these principles were applied to the work undertaken by the health visiting service, who profiled the needs of the clients on their targeted caseload, this information was then amalgamated with that collected on the Registration Database in order to establish how this community of service users were engaging with existing service provision (see *above - Health Visiting profile of targeted children from the Health Visiting record & their use of Sure Start Services*).

It is hoped to build on this work particularly in the light of the forthcoming re-commissioning of contracts. The planning process of which commenced in September 2003.

User Consultation: Focused Outreach and Engagement Work and Participatory Appraisal Status – *planned*

As detailed earlier the lack of robust user consultation is recognised as a weakness within the programme. Over the forthcoming months it is hoped that this issue will be addressed in two ways: through the recruitment of a Parent Participation worker and secondly through the funding jointly with our Partners in the Neighbourhood Renewal Programme of training for volunteers in Participatory Appraisal techniques. Interviews for the post of Parent Participation worker are due to take place at the beginning of October and Participatory Appraisal Training commenced in mid-September.

Both resources will be used to review programme performance and parent/carer and child experience of living in the Sure Start area and using Sure Start services. It is hoped that these methods will provide greater information about personal experiences of service use and also potential areas of unmet need.

Evaluation projects undertaken within the programme by teams on an autonomous basis by individual core and commissioned services.

The Sure Start Programme maintains a record of all evaluation and associated activity on a computer based database. The information recorded on this system provides a comprehensive overview of both work undertaken within the core Sure Start team and our commissioned services. A complete report of all the activity recorded on this system is produced here.

