

The First Three Years
of

SureStart

Wakefield West

Evaluation Report
June 2004

Sure Start Wakefield West Three-Year Evaluation Report

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Appendices are available from the Project Development, Evaluation and Monitoring Officer at Sure Start Wakefield West

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A full colour version of the report is available from Sure Start Wakefield West, as above.

Executive Summary

This report describes the way in which evaluation has been carried out and developed in the first three years of Sure Start Wakefield West.

The report describes the Programme's approach to evaluation from the beginning, how evaluation has been used to develop or change services and what impact evaluation has had on the Programme.

The report shows:

- How the Programme tried to respond to local needs, identified during consultation, by involving parents from the beginning of the Programme. This included setting up an Asian Women's Centre and using venues across the Sure Start area for activities and service delivery. The Programme also drew up a timeline in late 2002 that showed where gaps in service existed and the points at which parents might lose touch with Sure Start. This led to the introduction of another universal visit, the 'Nearly One', to all families with a child aged around 10 months.
- How the Programme has monitored 'reach' using the Smart Start database, improving information collection and carrying out a survey of how staff used the database. This survey highlighted areas where data collection and monitoring reach could be improved and resulted in an action plan for the whole staff team to follow.
- How services contribute to meeting PSA targets using a service audit that demonstrated how each activity met a target. In particular we learned that more than double the number of services were targeting the Education, Literacy and Play than all the other targets and this area of work has been prioritised for evaluation in 2005.
- The extent to which families are using services matched to particular targets. This information, based on the service audit, showed differences in the take up of services and where the demand from the community is. We found that there was:
 - a high take up of activities relating to education, literacy and play;
 - a high take up of childcare services;
 - almost equal (proportionate) take up of services relating to improving social and emotional development;
 - and a relatively low take up of services relating to strengthening families and communities and improving health.

- Examples of how the Programme has endeavoured to meet targets by looking at evaluations for each of the PSA target areas. These evaluations identify the different methods used by the Programme to learn and adapt services. They also show how evaluation has developed, using more tools and giving consideration to families' ability to give feedback and express their opinion.
- How well the Programme has engaged some families at an early stage to enable them to continue using Sure Start with their children. This is reflected in the evaluations of baby massage and the post natal depression support group.
- A high level of satisfaction with services by parents is recorded through evaluation and this is reflected in the evaluations highlighted in this report. In the recent User Satisfaction Survey, 77% of parents who had used SSWW said that they were satisfied with it.
- The strong involvement of parents in the Programme since the consultation stage. A recent evaluation of the parents' group shows how they became involved in the early stages and suggested that parents gained skills, friendships, confidence from being actively involved in running SSWW and had experience and knowledge to contribute.
- How the Programme has tried to meet the needs of diverse communities, including a significant number of asylum seeking families not identified in the delivery plan. This has been achieved through the development of a dedicated Asian Women's Centre to meet local needs (identified in consultation). In the case of asylum seeking families a lot of staff time has gone into supporting families and working in partnership with the Asylum Team.
- How evaluation and monitoring have uncovered signs of a 'progression' through targets towards 'Strengthening Families and Communities'. SSWW has found that families who have been engaged in activities relating to their child's development then become involved in activities relating to strengthening families and communities, for instance by joining the parents' group, doing courses, volunteering for SSWW or training as Home Start volunteers, carrying out the user satisfaction survey. This could suggest that some mothers have gained confidence to 'move on' and put something back into the programme once they have received support they needed, or that once their children reach a certain age, they have more time to give.

● What the Programme has learned from evaluation and practice.
Common findings from evaluations have shown that:

- Families need 'hand holding' to activities until they build up confidence or their own support network.
- Activities need to be kept open rather than limited to a few people to ensure a sustainable attendance at groups.
- Transport is an issue for some families (post natal depression group, baby massage).
- Services can be slow to develop and those involved need tenacity and patience to keep them going and achieve sustainability; for example, breastfeeding support, baby massage.
- A lot of work goes into getting one family to access a service.
- Achieving targets and milestones is a slow process.
- Outcomes have been difficult to measure with relatively low numbers of people accessing individual services.

The report provides a framework for the next two years of SSWW, highlighting how the Programme must examine the outcomes of its work and the impact it has had on children under 4.

The programme has to work with partners to identify services that can be mainstreamed and consider what it can do to make some activities and services sustainable within the community if they are unlikely to fit into mainstream plans.

● The report makes **recommendations** about improvements the Programme can make to ensure a consistent approach to project development and evaluation that will enhance the ability to demonstrate the impact Sure Start has had on its local community.

SSWW needs to look at the more complex issues within the programme, such as:

- partnership working
- the impact of whole services, for example, family support, rather than smaller scale activities which form part of that service
- which services make a contribution to reaching targets and achieve the initial aims of Sure Start outlined in the delivery plan.

Evaluation during 2004-2006 will aim to consider:

- Cost effectiveness
- Outcomes
- Impact of Sure Start on children and families and partner agencies
- Sustainability of projects

There are still improvements to be made by SSWW to ensure a consistent approach to evaluation. Over the next two years SSWW should:

- ensure all staff understand and use the evaluation strategy
- develop project management tools that ensure evaluation is built into new activities
- work with partner agencies to identify the outcomes they would like to see evidenced in evaluations
- obtain more quantitative data to support evaluation
- ensure evaluation activity is proportionate to the level of service in a 'target' area
- link evaluation more clearly to targets
- widen evaluation to include those people who do not participate
- feedback evaluations to families and partner organisations
- continue to seek qualitative feedback from families

Key questions in evaluation will be:

- Are our services good quality?
- Are we offering good value for the public's money?
- Are we helping to co-ordinate, streamline or add value to existing services?
- Are we culturally appropriate and sensitive?
- Do we ensure lasting support by linking to services for older children?
- Are we involving parents, grandparents and other carers?
- Impact of staff on partnership working in Sure Start

Amanda Machin
Project Development, Evaluation and Monitoring Officer
June 2004

1. Introduction

Sure Start in Wakefield West began to deliver services just over three years ago with the first service being the parent/toddler group set up and run by parents, 'Sunbeams'. This is still running today, though in a different way. The three years since then has seen the development of a whole new range of services for families with young children in the Lupset, Thornes, Lawefield Lane and Plumpton areas of Wakefield and changes in how those services have been developed and delivered.

The Programme had a very strong parents' group from the initial stages and staff had to learn quickly to consult with and work with parents to develop services. Staff also had to learn to work with and communicate with colleagues from different disciplines, and for many staff, working in the community was a new and less safe experience than, for example, the clinic or nursery setting they had come from. We were all on a very steep learning curve and at times felt overwhelmed by the task ahead.

As we have developed we have worked closely with other organisations operating in the community, overcoming anxieties and developing meaningful and mutually supportive partnerships.

Also, the Ashiana Women's Centre in the Lawefield Lane and Plumpton area has created a comfortable and secure base, particularly for those women who do not have English as a first language, enabling them to access support and advice.

Although difficult to capture in an evaluation, the Lupset estate that constitutes the largest part of the Sure Start area now feels like an exciting and forward looking place to live. Of course there are still problems, both within the community and for individual families but I am confident that most families with young children can now find the advice and support that they need and want so that their children will have a better start in life.

I would like to take this opportunity to thank local parents, colleagues in the statutory and voluntary sector and local community organisations without their support we could not have developed the partnership approach that has led to the success of this programme.

I would also like to thank staff – past and present. Working in new ways has not been easy and staff have given a commitment to the children and families in Sure Start Wakefield West above and beyond their job.

Ingrid Kalischer
Programme Manager
June 2004

2. Brief History of the Programme

Sure Start Wakefield West (SSWW) is a second wave local programme. It covers Lupset, Thornes, Lawefield Lane and Plumpton, mainly comprising the Wakefield Central Ward and part of Wakefield North. (Appendix 1) It is close to Wakefield city centre and reaches diverse communities, including a South Asian community (mainly in Lawefield Lane, Plumpton), a large, well established local authority housing estate (Lupset) and areas of private housing (mainly Thornes).

When Wakefield Metropolitan District Council (WMDC) put in a bid for Wakefield West to become a local programme, the following factors were highlighted:

- Wakefield Central was the third most deprived ward in the district and ranked in the top 11 of deprived wards in England
- 28.4% of pupils attending schools in the area were eligible for free school meals in January 1999, compared with 18.5 for the district.
- Lupset housing estate had a higher percentage of lone parent households than other parts of the district and national statistics¹
- Criminal damage and drug offences in the area were higher than the district average
- Literacy and numeracy skills in the over 16s were lower than district and national averages
- Unemployment in Wakefield Central was 7.2% in August 1999, compared with 4.7% in the district and 4.3% nationally
- The incidence of post natal depression in the area was 3% higher than the national average
- 1 in 3 mothers smoked during pregnancy
- Schools in the area had a higher average unauthorised attendances both locally and nationally
- Two primary schools had a higher than Wakefield average of children not achieving level 2 and above in literacy, numeracy and spelling

2.2 Initial Consultations

Consultation with the local community was carried out during March-May 2000, using questionnaires, focus groups, open meetings and face-to-face interviews with 134 local parents. Some of these parents went on to form the parents' group, influencing the development of the programme from the beginning.

¹ Census 2001 Neighbourhood Profile for Lupset Estate states there are 17.4% lone parent households compared with 9.7% for Wakefield, and 9.5% nationally. The figure for lone parent households with dependent children (0-15 or 16-18 and a full-time student) is 12.4% against 6.6% for Wakefield and 6.4% nationally. (Spatial Policy Group, Wakefield MDC)

Consultation identified gaps in relation to community health care, services for children with special needs and play and learning opportunities. Specific needs for the Asian community were identified, as was the need for safe play areas, including back gardens. It was recognised that many families were not accessing services.

The Sure Start Programme was approved in September 2000, with Wakefield Metropolitan District Council (WMDC) Social Services Department as the lead body. The Programme Manager and staff were appointed from January 2001 onwards.

2.3 The Delivery Plan

The SSWW Delivery Plan, approved in September 2000, set out the way in which the Sure Start local programme would be run. A revised delivery plan was approved in March 2002 to meet the Government's new Public Service Agreement.

SSWW set out its vision in the Delivery Plan:

SSWW aims to provide for all children under 4 and their families who live in the Sure Start area:

- local services that meet needs as identified by the community
- a choice of services to meet individual needs
- the involvement of the community in the development of quality services
- an improvement in the take up of services

The Delivery Plan outlined ways in which this vision would be achieved in line with consultations mentioned and the Government's requirements for a Sure Start local programme.

2.4 Location

Services were based as much as possible within the community using established settings such as St George's Church and Community Centre, Snapethorpe Family Centre. The administrative base was at Aysgarth Drive (from April 2002) in Lupset with the Ashiana (Asian Women's) Centre (from 2002) in the grounds of Lawefield Lane School. The Sure Start Sunshine Library, based at St George's Community Centre, opened in 2001 and was extended in 2003 providing a larger space for books and activities.

In December 2003 the Sure Start Children's Centre was opened in Lupset, providing SSWW with a purpose built venue for children and families. The main venues for activities are now the Sunshine Library, Sure Start Children's Centre, Ashiana Centre and Aysgarth Drive (mainly administration and meetings), the community childcare team operates from Jubilee Hall in Lupset.

In addition a Playbus has been used to provide services in areas where gaps in services were identified in consultations, for example, Thornes, Lawefield Lane, Plumpton.

SSWW continues to use its own and other venues in the area to reach children and families under four.

2.5 Staff and Management Structure

SSWW is divided into four management areas:

- Healthier Families
- Education, Literacy and Play
- Community Involvement
- Services Support

Management board, sub groups and staff oversee these areas of work. Staff who fall outside these teams are the Programme Manager, Project Development, Evaluation and Monitoring Officer and Finance Officer. A copy of the staff structure detailing posts and line management for 2004 is attached. ([Appendix 2](#))

Each service area reports to at least one sub group of the management board, these are:

- Monitoring and Evaluation
- Diversity
- Healthier Families (Health)
- Healthier Families (Social and Emotional Development)
- Education, Literacy and Play
- Work, Learning and Volunteering
- Parents' Group

A Programme Plan was developed for 2003-2006 to set out SSWW's targets and milestones for that period.

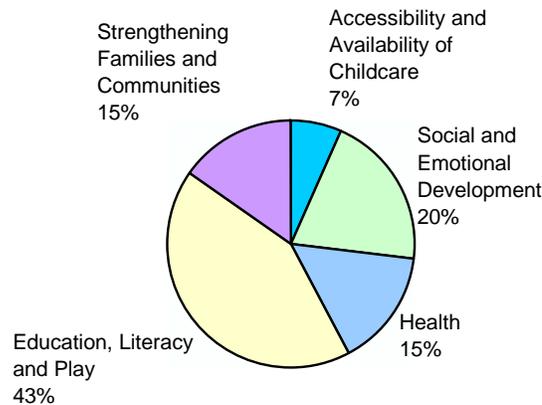
In addition, a Partnership Group meets quarterly to discuss wider issues about SSWW.

2.6 Activities and Projects

From July 2001 to December 2003 SSWW ran at least 83 services or activities in 21 venues across the area. These ranged from one-off activities, such as a holiday baking activity or story telling session in the Sunshine Library to individual services such as speech and language therapy, behaviour management advice, home visiting, or groups such as Post Natal Support Group, Home Start Family Group.

A mapping exercise at the end of 2003 identified areas of work, intensity (weekly, monthly or one-off) and how different activities contributed to meeting PSA and local targets. Some activities contributed to more than one target. Not all one-off activities were recorded or matched to a target. Further information is included in [Appendix 3](#).

Activities Meeting PSA Targets



Some services were constant, such as home visiting, Sunshine Library and community childcare. Some were small, one-off events, such as holiday activities. This graph does not indicate the amount of resources allocated to each target area, for example staff hours, financial cost or the number of people using each service. However, it shows that more than double the number of services were targeting the Education, Literacy and Play than all the other targets. It was therefore suggested by the Evaluation and Monitoring sub group that SSWW looked at this target more closely to determine issues such as duplication of work, cost effectiveness and outcomes of these services. This is one of the evaluation priorities for 2005.

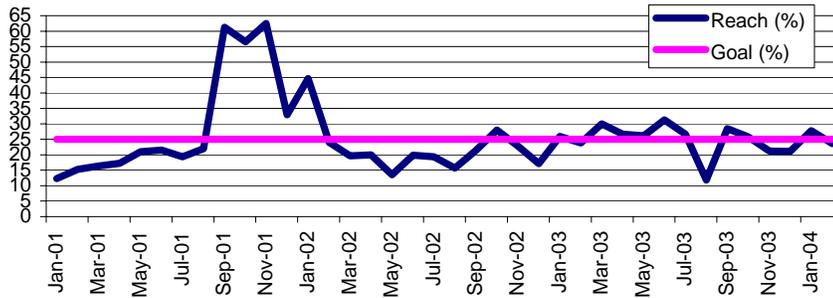
2.7 Take up of Services

Take up of individual services has been characteristically low with larger numbers of people attending events such as seaside trips and holiday events.

'Reach' seemed to increase consistently after September 2002 when many services were up and running, in particular the Ashiana Women's Centre. The reduction in service at the Sunshine Library in the first half of 2003 did not affect the number of people seen by SSWW, suggesting that people using the library used at least one more service.

The trend in take up of service highlights times when service uptake was low overall, such as August.

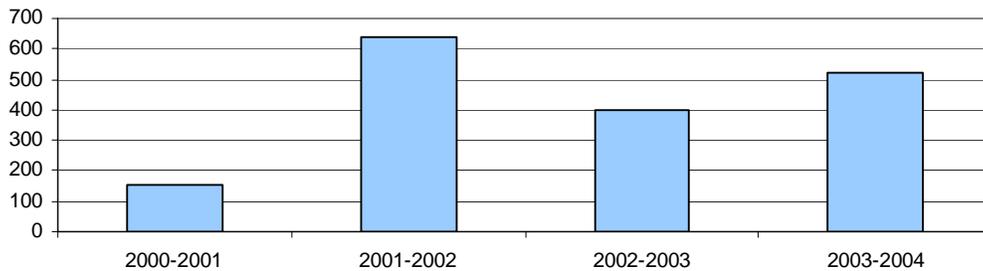
Percentage of Children Seen (Reach) January 2001-March 2004



The higher figures for Autumn 2001 probably reflect the fact that monitoring systems were not fully in place and every contact was counted. However, at that time a lot of work went into signing up families so, in the absence of accurate records, this has not been corrected.

Annual monitoring data (M5) shows how many children SSWW ‘reached’ each year:

Total Number of Children Seen 2001-2004



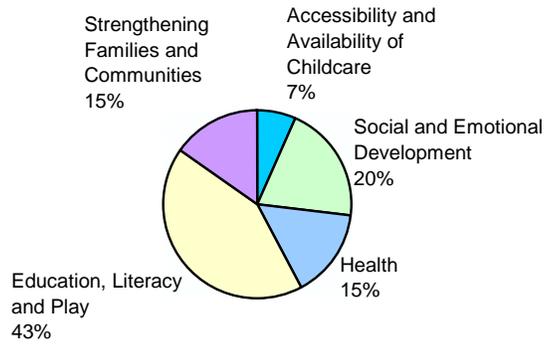
The higher number in 2001-02 is due to a lot of activity signing up families in the early stages of SSWW and likely double counting.

Use of services/activities: the service audit (September 2003) was used to demonstrate which service areas were used most by children under four and families with a child under four in SSWW.

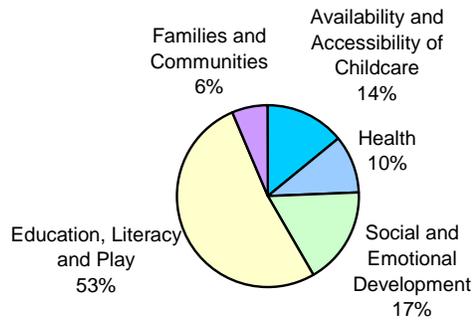
If we compare the pie chart showing how SSWW services and activities have met targets with the pie charts showing take up of services with we see that on the whole there was:

- a high take up of activities relating to education, literacy and play
- a much higher proportionate take up of childcare than services applied to that target
- almost equal (proportionate) take up of services relating to improving social and emotional development
- a relatively low take up of services relating to strengthening families and communities and improving health.

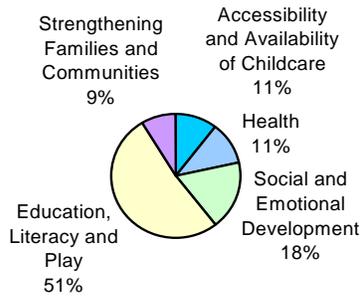
Activities Meeting PSA Targets



U4s attendance and targets



All Attendance and Targets



3. Evaluation: The First Three Years

SSWW was committed to evaluating and monitoring progress from the beginning. Evaluation and monitoring have, however, been slower to develop in line with services. The 2002 Revised Delivery Plan proposed

... a flexible and innovative approach to evaluation.

An evaluation and monitoring sub group had been formed early on in the programme. This involved Sure Start staff, parents and representatives from partner organisations providing expertise from those with experience or an interest in evaluation.

The sub group considered several options before deciding to propose the appointment of an internal evaluation officer who would also be responsible for project development and monitoring. This proposal took longer than expected to put into effect because the revised delivery plan had to be approved and an employing body found for the proposed Project Development, Evaluation and Monitoring Officer (PDEMO). WMDC Social Care and Health agreed to employ the post after setbacks with other agencies. It was not until May 2003 that an officer was in post. By this time SSWW had carried out evaluations internally, calling on staff to use their own expertise whilst developing their own (new) roles. SSWW managed to adhere to its vision of a flexible and innovative approach to evaluation, using a variety of feedback and continuously adapting services to meet the needs of local families. Staff and local families were on a steep learning curve. Some of this evaluation has not been retained during changes of staff and administrative bases.

3.1 Evaluation Strategy

The Evaluation and Monitoring sub group developed the evaluation strategy in 2002 before the PDEMO was appointed. It explained the requirements of the Sure Start Unit for local and national evaluation, provided guidance for staff in carrying out evaluation and a framework for evaluation activities. It also set out priorities for future evaluation. ([Appendix 4](#))

3.2 Evaluation Methods

A variety of evaluation methods have been used to obtain as much feedback on Sure Start services as possible.

- Questionnaires
- Group discussions
- Tick lists to provide a snapshot of user satisfaction
- Photographs
- Inviting written comments
- Listening to people
- Smart Start monitoring system
- Internal service reviews and complaints and compliments

The following analysis of evaluation of SSWW has been broadly divided to reflect services contribution to PSA targets. Of course, some services meet more than one target. It aims to portray the diversity of evaluation findings, how effective evaluation has been and SSWW's aim to involve local families and meet their needs.

3.3 Service Review and Timeline

During 2002 the Programme looked at its 'reach' figures compared with other Sure Start local programmes and felt that it ought to be reaching more families. This, combined with knowledge of how the programme was working, led to the conclusion that whilst services were well used, they were being used a lot by some families and children. The Programme had to look at ways of reaching those families that were not accessing Sure Start but would benefit.

In a joint piece of work with parents, a child's Sure Start life was plotted on a "time line" showing what services were available, both Sure Start and mainstream. It was noted that speech and language support was being delivered too late (often at 3+ in nursery) and early attachment problems were not being picked up. It was found that many parents no longer knew what Sure Start could offer them and their children, once initial contact had been made shortly after birth.

As a result it was decided that the Programme should refocus its work in order to reach more families and offer support at an earlier stage, particularly with regard to speech and language development and emotional development.

The following key stages were identified:

- 10-months when the baby was becoming mobile, there should be the beginnings of speech and parents were likely to be at a different stage than shortly after baby's birth.
- 18 months was a key stage for the child's development and a time when parents may be experiencing a whole new range of challenges.

More universal visits were introduced, starting with a visit to all families when a child reached 10 months - the "Nearly One visit". It was intended that this visit would focus both on the parents, exploring any difficulties and informing them of services available, and on the child.

The speech and language therapist and child psychologist developed a simple communication tool that could be used by all staff undertaking the nearly one visit. It was intended that the tool could be used to identify those children where there were signs of delayed speech development or attachment difficulties and additional services could be offered as appropriate.

All Home Visiting staff were trained in using the communication tool and in February 2003 started to carry out Nearly One visits.

It soon became apparent that the communication tool was not showing up any children with communication difficulties. It was felt that this could have been because:

- the tool was inadequate
- staff were not using the tool as it was intended
- it was an impossible task.

However, feedback from staff and parents on the Nearly One visit as a whole was very positive, and indeed seemed to encourage a wider take up of services. It was not possible to refine the communication tool further as the speech and language therapist had left her post, but the Nearly One visit continues, though is done largely by one or two members of staff who have become skilled in exploring issues and giving out information.

In 2003 and 2004 reach increased but a brief analysis of contact after a Nearly One visit was inconclusive in showing whether or not the visit had resulted in more parents accessing services.

Conclusion

- If an early communication tool were to be developed it would probably require a lot more refinement and would probably need to be administered by more skilled and experienced staff
- Families found the Nearly One visit helpful
- Staff felt it gave families a second opportunity to access services
- The impact of the Nearly One visit on increasing reach and access to Sure Start services was inconclusive.

**Timeline of Services for Children 0-3
as at Summer 2002**

Sure Start	Mainstream
	Conception – GP and Midwife
Antenatal Group for Teenage Parents Antenatal Sessions – Ashiana Centre Antenatal visit – Health Visitor	Antenatal visit Health Visitor
	Birth – Midwife, GP, Health Visitor
Breastfeeding Support	
	6-week assessment – GP, Health Visitor
New Birth Visit – Health Visitor Postnatal Support Group Baby Massage Baby and You Teenage Parents Group Weaning Party	
	7 month assessment – Health Visitor
Home Safety Equipment Scheme Safe Garden Play	1 year
Book Start Plus Contact	18 months
Selective Language Measure	2 year assessment – Health Visitor
Book Start Plus Contact	3.5 year assessment – GP, Health Visitor

This timeline identified gaps at stages where any problems with speech and language and development could be picked up and earlier interventions planned. It was therefore decided to introduce universal visits at 10 months and 18 months to identify children with speech and language or other developmental delays, difficulties within the family and provide appropriate support.

4. Improving Social and Emotional Development

PSA Target: Achieve by 2004/5 an increase in the number of children with normal levels of personal, social and emotional development.

Objective: *to improve social and emotional development. In particular, by supporting early bonding between parents and their children, helping families to function, and through early identification and support of children with emotional and behavioural difficulties.*

Services specifically developed to meet this target were child psychology, behaviour management, parenting skills, a post natal support group, baby massage and Helping Hands.

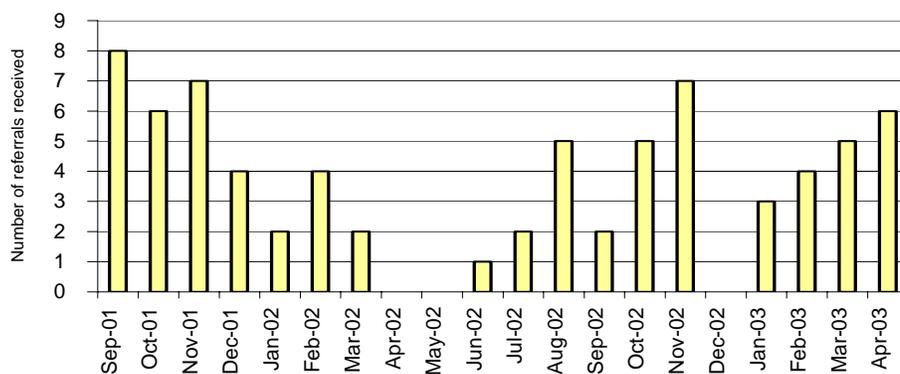
4.1 Child Psychology

A part-time (0.5 wte) clinical psychologist was employed from January 2001-January 2004. In Summer 2003 she carried out a review of her work ([Appendix 5](#)).

The psychology role was designed to provide short-term support for families. It was predicted that demand would be for behaviour management support to parents of pre-school children.

The psychologist ran parenting/behaviour management courses, drop-in sessions and one-one support to which families were referred. She also developed training sessions for colleagues in Sure Start and partner organisations.

An analysis of referrals from September 2001-April 2003 follows:

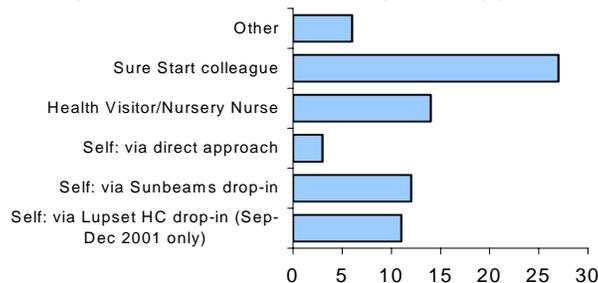


Of the 73 families referred, 18 (25%) were either not seen at all or seen once because the referral was inappropriate. This occurred mainly because workers were unsure about other more appropriate services. These families were usually “signposted” to an alternative agency.

Nature of Referrals: Of the 55 appropriate referrals, 53 children were referred for behavioural issues (eg aggression, tantrums, sleeping or eating problems). One was referred for developmental assessment, one for issues relating to parental separation.

Source of Referrals

The Lupset Health Centre Drop-in stopped after three months. It was thought



to be an unsuccessful access point for families as it only attracted on average one family per week during the two-hour window. However, with the benefit of hindsight, it was a significant source of families in need of services: the Sunbeams drop-in that continued to run weekly attracted only one more referral overall than the Health Centre Drop-in attracted in three months.

Of the 53 children referred for problematic behaviour, 12 (23%) were subsequently found to exhibit behavioural problems, secondary to an unaddressed² developmental delay or special need. This was an unexpected finding as all these children had passed their 7 and 18 months development checks with a health visitor. These children had developmental delays that were difficult to identify. Some of the families had approached health professionals with concerns about their child, whilst others thought their child was just being “naughty”. A discussion paper is attached. ([Appendix 5](#)).

As the role developed, the psychologist noted that

- only approximately one third to one half of direct work with families was short term assessment and advice regarding behaviour management;
- there was a high demand for child and adult mental health type work of a complex nature;
- there was a significant need for detailed developmental assessment, advice and liaison;
- a large proportion of the psychologist’s time was taken up with internal and external communication, meetings and administration.

The psychologist’s role and demand on the service expanded beyond the original view of the post. The psychologist felt that other members of the Home Visiting Team had the skills to work with families on behaviour management.

² “Unaddressed” means either ‘previously unidentified’ or ‘previously identified by another health professional but not acted upon for whatever reason’.

Evaluation

Although anecdotal reports suggested that most people found psychology input helpful, there was no evaluation data. This was because the main focus had to be the investment of time and resources in setting up and maintaining a new service and meeting the demands of the work. For a short time in 2003 all families who had received support from the psychologist were given or sent a feedback form and asked to return it with their comments (Appendix 6). However, none were received back so this was stopped.

What people have said about Parenting Support:

“ the sessions have been really informative and practical, teaching me so much more than any book or leaflet every could. Among other things, it has made me more aware of the choices I can make regarding how I manage my children’s behaviour, how I can nurture their feelings and emotions, how I can best give them consistent messages and how, through raising my own self-esteem and feelings of control, I am better equipped in setting a good example for them to follow”. (mother who had attended a behaviour management course).

“... the psychologist is really nice and helps when my children are doing things I don’t understand”. (parent who attended child psychology drop-in at Sunbeams Parent-Toddler Group).

The psychologist’s observation that some behaviour management work could be taken up by colleagues in the home visiting team was acted on and in January 2003 a parenting group was set up by two members of that team. An evaluation of this follows:

4.2 Jigsaw, Parenting Groups, Behaviour Management

A parenting group was set up in January 2003. The purpose of the group was to: *offer parents an opportunity to look at ‘normal behaviour’ in relation to their own children and provide strategies for parents to use when dealing with their children’s behaviour.*

The evaluation only involved those who attended and not the parents who did not attend (those who failed to attend and those who declined the invitation). Outcomes of the sessions have not been sought, for instance, to find out whether or not parents used what they had learned at home and if the sessions have met the objectives stated above. A formal evaluation was not carried out. The staff involved carried out an informal evaluation based on their observations of the sessions, what they had learned and comments made by parents at the sessions.

Parents were selected from those known to the Home Visiting Team. Four parents agreed to attend although only two attended every session.

The group was repeated in June 2003 and renamed *Jigsaw*, again it targeted parents already known to the Home Visiting Team, of six who said they were interested, only three parents attended the six sessions. A crèche was provided by the Sure Start Childcare Team. The parents who attended said they had found it useful.

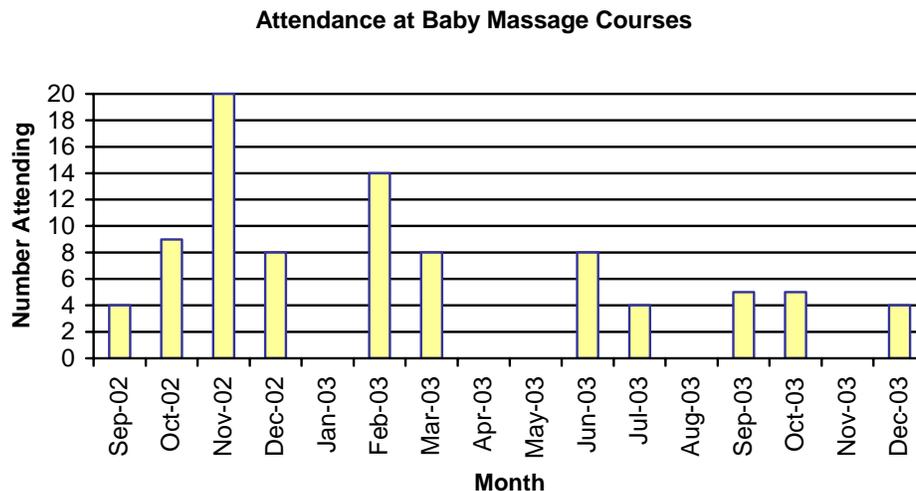
The Sure Start staff who ran the group were concerned about the low take up, particularly as it was a subject parents had requested more information on. At this point the staff decided not to run any more groups. They felt that it needed further planning and that there were implications of cost effectiveness, as crèche time had to be booked and people were failing to attend.

The main learning points in this exercise were about publicising *Jigsaw* and widening it to all parents in the Sure Start area, rather than limiting it to those known to the Home Visiting Team.

4.3 Baby Massage

Aim: to improve social and emotional development and support early bonding between parent and baby.

Two Sure Start workers were qualified to train parents in baby massage. The courses were aimed at mothers of babies aged around four months. Between September 2002-December 2003, eight courses of 5-6 sessions had been held. 120 parents in the SSWW area were invited to attend a course. 32 parents attended all or part of a course; 24 were from the Sure Start area, with 8 coming from outside.



(Note: Baby Massage did not run during January, April, May, August 2003)

Evaluation Methodology: the Sure Start worker carried out her own informal reviews. A planned evaluation was carried out with five mothers and their babies who attended the course in Autumn 2003. The mothers were given a short questionnaire to complete which included closed and open questions

and the opportunity to rate aspects of the course. All five mothers returned the questionnaire. ([Appendix 7](#)).

Conclusions and Recommendations: mothers enjoyed the course and had learned something they could practise at home and pass on to other family members.

A family support worker found that the low take up was because some mothers had other children and could not get childcare for them; some parents lacked confidence and there was a fear of the unknown. It was noted that mothers who were provided with transport to the first session were more likely to complete the course. These are not unusual factors in the take up of services or activities in the area.

What people said about Baby Massage

"He sleeps better and also breathing better at night when I massage his chest".

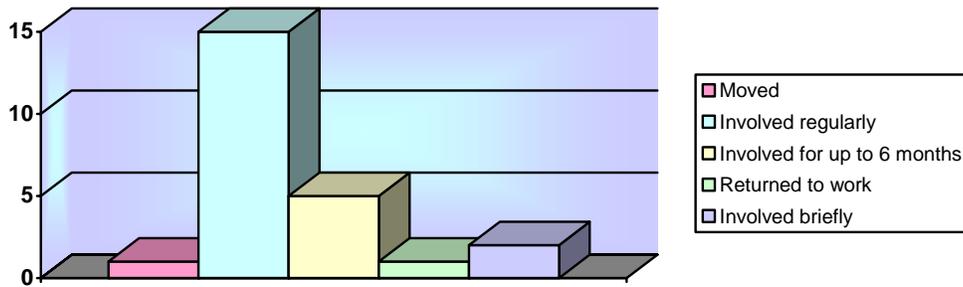
"Helped to reduce colic. Helped with bowel movements. Helps to relax baby and you. Eye contact".

"... special time with J who is my second child and gets pushed aside quite often for his older brother".

The impact of Baby Massage on the Sure Start programme: baby massage provided a way of engaging families in Sure Start whilst their baby was very young. It became evident that parents wanted to spend more time together and have some continuation of the group once their course had finished. A Baby and You group was established and runs directly after the baby massage sessions. It is continuous (there have been breaks between baby massage courses). The group is for mothers with babies under one year and aims to encourage parent-child interaction and provide activities to encourage early speech development.

A recent analysis of attendance records shows how much parents and babies have remained involved in Sure Start after attending baby massage. The programme can, at this stage, only make assumptions about the benefits of remaining involved, for example, parents being involved in activities that benefited their child's development and health. There is some evidence to suggest that parents who have remained involved have developed themselves, either by becoming active in the programme, taking part in a course or volunteering.

Involvement with Sure Start after Baby Massage Course



This evaluation included a small number of parents on one course. The evaluator suggested that a more detailed follow up study was carried out to evaluate outcomes of baby massage. It would be interesting to include health visitors to see if they have noticed a difference in queries about sleep, colic (for example) in baby clinics as well as seeking parents' observations.

4.4 Helping Hands

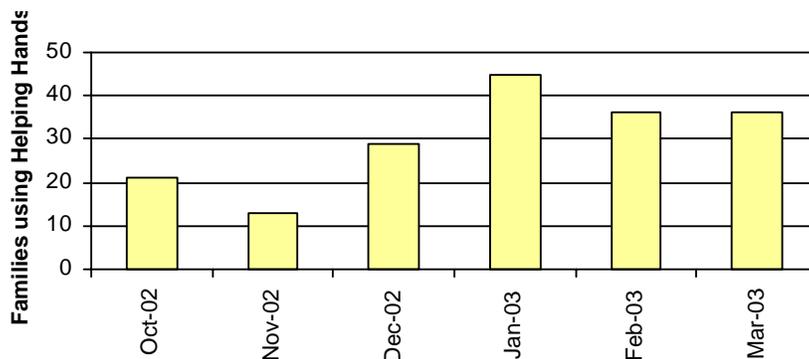
Aim: to provide task-centred, time limited, practical intervention for families.

The service was developed as a result of an identified gap in Sure Start services. It contributed to the PSA target by helping families to function. It was part of a preventative model aimed at supporting families before a crisis point was reached. Helping Hands has also contributed to milestones of supporting families where a child has special needs and other targets.

The Helping Hands Scheme started in October 2002 and employed two part-time staff. It was envisaged that the workers would provide practical support for families in their own home or help them access existing services. It was also intended that the workers would assist with transporting families to health and other important appointments on occasions where it would normally prove difficult (ie if there are other children to care for).

The evaluation of Helping Hands was carried out after six months of operation in May 2003.

Take up over the six month period (October 2002-March 2003) was:



Methodology

A sample of 20 families who had used the Helping Hands Scheme were contacted by telephone or in person to be interviewed using a questionnaire, devised by an external partner, (Appendix 8) to evaluate their experience of the service. Three families had not taken up the service and some were unavailable for interview. Ten people were interviewed. The Sure Start Home Visiting Team was invited to comment on the Helping Hands Scheme, again using a questionnaire (Appendix 8). Eight staff members took part.

How Helping Hands met expectations of families:

What did you think Helping Hands would do? "Pick me up, take me to the hospital and give me a lift home".	What has Helping Hands helped you with? Took the family to hospital, sat with children whilst mother attended an appointment. Provided someone to listen.
"Take me to a mother and toddler group".	Took to mother and toddler group and stayed with mother during group; helped look for courses; brought some safety equipment; brought tickets for Cinderella up to house.
"I didn't know but I thought it would be like a social worker thing, interfering, but it wasn't".	"Helped me get back to normal and helped with finances and debt".
"Support me, help me".	Took the child to nursery and helped with potty training.

What difference did Helping Hands make to you?

"I would have had to walk as my daughter is autistic and will not go on buses".
"I couldn't have gone to Sunbeams".
"I think I would have been really depressed, I would have been on my own".
"We would have been well stuck!"

What staff said about Helping Hands

"It really takes Sure Start out into the community in a very practical way".
"Valued members of staff who are adaptable to every given situation and they tackle them with professionalism, sensitivity and above all commitment within the Sure Start team".
"I have found it difficult to think wider than using Helping Hands as being there to help families to access appointments and groups as I feel other work is carried out by myself".

Evaluation Findings

The sample was smaller than expected but the quality of information received supported the method and effort that went into contacting families to speak to them directly. The support provided met the expectations of families referred to the scheme. The comments received from Sure Start staff supported what parents had said.

It was through Helping Hands that some parents found out about Sure Start activities and became engaged in SSWW. Some families would not have been able to cope in certain situations, so a crisis was averted.

The evaluation found that families knew that Sure Start was providing the service but did not separate out Helping Hands from other home visiting support. What was important to them was that they had received the support they needed at the time.

Impact of Helping Hands on mainstream services: Wakefield MDC Social Care and Health were interested in the progress of the scheme with a view to providing a similar mainstream service across the district. A copy of the evaluation report was sent to the Children's Services Manager. Since then two Home Support Workers in each family centre in the Wakefield district have been recruited by WMDC Social Care and Health Department. The posts are full-time, and cover evenings and weekends. In addition another Sure Start programme in the Wakefield district has implemented its own *Helping Hands* scheme, using the same name.

4.5 Post Natal Support

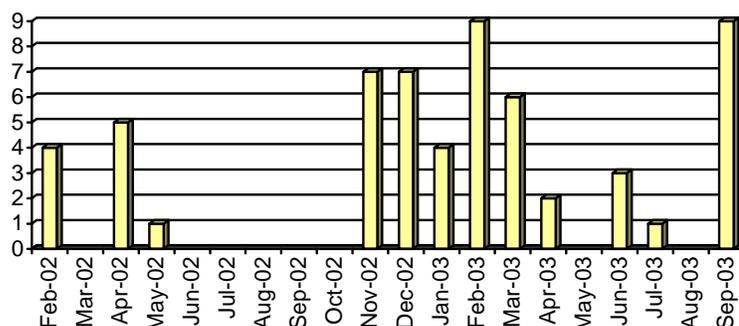
Service Development Agreement Target: All local Sure Start programmes to have agreed and implemented, in a culturally sensitive way, ways of identifying, caring for and supporting mothers with post natal depression.

Aim: to complement health visitor listening visits by providing peer support and additional 'professional' support. To give women space to discuss their feelings and their children a chance to play and have fun.

Wakefield West Primary Care Trust provided listening sessions for mothers who had been identified with PND. It was thought that some mothers would benefit from extra support because listening sessions were time limited due to health visitor commitments.

In partnership with the health visiting team, SSWW developed a post natal support group. From November 2001-September 2003 27 mothers were referred, 18 attended with their children. Attendance at the groups is shown below (data before February 2002 was not available).

Number of Women attending Post Natal Depression Support Group



The sessions covered a programme of activities, which were planned by the staff and mothers. These included pampering sessions, opportunities to discuss feelings and activities that encouraged interaction between mother and child. Play workers attended so that mothers could have time out while the children played.

Sure Start provided transport to the sessions, originally using a local minibus firm, later replaced by Helping Hands staff. Transport was an essential part of the project as many of the mothers would not have attended without it.

Evaluation

The family support worker involved in the group evaluated the group as an ongoing activity. This was due to an initial low take up and the need to rectify any problems as the group developed. At the end of each programme of activities the family support worker carried out more formal evaluation using open discussion in the group based on the following subjects (it must be noted that this only covered a small number of women):

Effectiveness of the service: the group appears to have enabled mothers to talk and build confidence to talk to family members about their feelings. Mothers attending the group had formed friendships and met outside the group.

Venue: the mothers liked the venue as this was away from home and set in pleasant grounds where the children could play outside in the better weather. There were concerns that the venue (a room in a public house) excluded some members of the community. There had been no referrals from Asian families and the family support worker would take this up with the Asian women's worker to try to make the service more culturally appropriate.

Transport: the cost of transport (local minibus service) was high. The Helping Hands project took over transporting mothers to the group.

Improvements: mothers identified needs in addition to coming to the group. They said that they were often tired and felt guilty asking family for help looking after the baby because they thought they should be able to cope. They wanted more time out, possibly a longer session to relax.

As a result of the evaluation the group facilitators looked at post natal needs of mothers in the area and identified some who were isolated or finding it difficult being a new parent. The remit of the group was widened to include these mothers but a low take up led to the group reverting to its original format.

The post natal depression group was additional to mainstream services, demonstrated the potential for partnership work and met an identified need within the community. Once mothers were able, they were encouraged and supported to access other Sure Start groups and activities.

The impact of the Post Natal Depression Group on involvement with Sure Start: only two of the mothers had no further involvement with Sure Start since they attended the post natal depression support group; one of these has moved out of the area. The rest continued to be involved in SSWW in some way, either receiving support from the Home Visiting Team, joining activities such as toddler groups, Sunshine Library or both. Three have joined the parents' group and are active in contributing to the running of SSWW.

As with baby massage, this evaluation showed a low, irregular take up of a service for which transport and 'hand holding' was very important.

5. Improving Health

PSA Target: achieve by 2004 in the Sure Start area a 6% reduction in the number of women who smoke during pregnancy. Reduction of emergency admissions to hospital of children aged 0-3 with gastro-enteritis, respiratory infections or severe injury.

Objective: improving health, in particular, by supporting parents in caring for their children to promote healthy development before and after birth.

Services specifically developed to meet this target were smoking cessation, breastfeeding peer support programme, ante and post natal services for Asian women, low cost home safety equipment scheme and safe garden play.

Health targets have proved hard to evaluate and engage people in, for example, smoking cessation where we have worked closely with the PCT's smoking cessation team and not kept our own figures. Establishing breastfeeding support took longer than anticipated.

5.1 Breastfeeding Support

Aim: to train 10 local breastfeeding mothers to work as peer support counsellors for breastfeeding mothers.

SSWW milestone: achieve a 2% increase in the number of mothers breastfeeding at 6 weeks and a 2% increase in number of mothers putting baby to the breast.

Three mothers from the Sure Start area, three from outside and one who lived just outside the Sure Start boundary attended a La Leché Peer Support Counsellor course ran by the Sure Start midwife and a local health visitor. The course consisted of twelve two-hour sessions in January-May 2003. The Sure Start Childcare Team provided a crèche at the same venue. All the mothers completed the course.

Evaluation

An evaluation was conducted two months after the course to help plan the next course in the autumn. The mothers were invited to discuss their comments at a support group meeting, using questions based on an evaluation of a breastfeeding peer support scheme carried out by the University of Sheffield for the Foxhill and Parsons Cross programme. ([Appendix 9](#))

The aim of the evaluation was to check satisfaction with the organisation of the course, whether or not there were any difficulties in learning or understanding the course content and how well prepared they felt to put what they had learned into practice.

Evaluation Findings

The mothers were satisfied with the delivery of the course and had all learned something. They had mixed feelings about how well the course had prepared them for the role of peer counsellor because they were just starting to provide support. Any criticisms of the course were to do with the organisation, childcare and time spent training.

The following recommendations were made:

- Provide a dedicated crèche for the trainees' babies and children
- Use a larger room, particularly if there were 10 trainees on the next course.
- Time spent training should be the full two hours, with additional time to settle children in crèche.
- Carry out an evaluation six months post training

Six months post training

The aim of this evaluation was to find out how effective the training had been in enabling the women to support other mothers; how they were coping with the work and to identify support and further training needs.

This evaluation did not consider the impact peer counsellors had on breastfeeding locally, nor the numbers of mothers using the service. This would be carried out once the supporters have been operational for a year.

Methodology: the peer counsellors were asked to complete a questionnaire ([Appendix 9](#)). This was considered the easiest method as they were operating in different places.

The questionnaire was designed to help the women reflect on their experience and encourage them to give enough qualitative feedback to achieve the aims of the evaluation. Five out of seven questionnaires were returned. One person was expecting another baby.

The evaluation found that:

- The training appeared to have been effective but the peer support counsellors had little work.
- The monthly update sessions were useful and informative
- The peer supporters wanted refresher or further training.
- The mothers felt that they had learned new skills and this was reflected in their ideas for improving support for breastfeeding mothers.
- The support group was not as successful as the mothers hoped.
- The peer support counsellors expressed some frustration about a lack of direction for the support group.
- The process of setting up this kind of service was time consuming, required tenacity and patience.
- The peer support counsellors felt isolated because they worked in different areas, one tried to set up a support group in a health centre local to her.

Recommendations

A report by the Department of Health, *Infant Feeding Initiative: a report evaluating the breastfeeding practice projects 1999-2002*, lists practice pointers for developing peer support and 'drop-in' type facilities, such as a Baby Café. Some of these 'pointers' (based on examining what worked better across 79 projects), combined with the peer supporters' ideas contribute towards recommendations for providing a breastfeeding support service, making the best use of local mothers, Sure Start workers and local health professionals.

- Set up a support group/drop-in, with clear aims, facilitated by peer supporters with health professionals available.
- Clarify funding.
- Clarify responsibilities and availability of peer supporters and staff.
- Establish guidance for peer supporters, eg working practice, referrals.
- Organise clear and consistent publicity of the service.
- Make sure that midwives, health visitors and maternity services have information for ante and post natal mothers.
- Provide a range of breastfeeding resources at the drop-in location.
- Run the 'drop-in' at least weekly.

Impact of the Evaluation on Breastfeeding Peer Support Counsellor Training

The first evaluation of the peer support course helped staff plan and develop the course. It was particularly helpful as there had been changes in staff delivering the training. A second peer support course has taken place, this time involving more Sure Start mothers.

The evaluation of this will provide us with a comparison to find out how effectively the recommendations were put into practice.

The six-month evaluation achieved its aim because it provided SSWW with good qualitative feedback. It provided more information than anticipated and was very useful when planning the future of breastfeeding support in Wakefield West.

Some of the recommendations were acted on immediately with the two workers responsible for breastfeeding initiatives within Sure Start seeking comments from peer support and trainee counsellors. Following this, the group and workers discussed the direction of breastfeeding support and obtained information from other initiatives with a view to adopting one of their models.

Impact of Breastfeeding Peer Support Counsellor Training on Sure Start: mothers have become involved in other aspects of SSWW. One has used it to gain experience to apply for midwifery training. This suggests that the project contributed to more than the target of increasing breastfeeding rates. It helped mothers use their personal experience to learn other skills that they might not have gained. At a peer support graduation one woman said:

"I am so amazed I have completed this course. I didn't think I would ever be able to finish a course with having children and all my commitments but now I want to do something else".

5.2 Low Cost Safety Equipment

Aim: provide a sustainable low cost home safety equipment scheme to families in the SSWW area and raise the profile of safety.

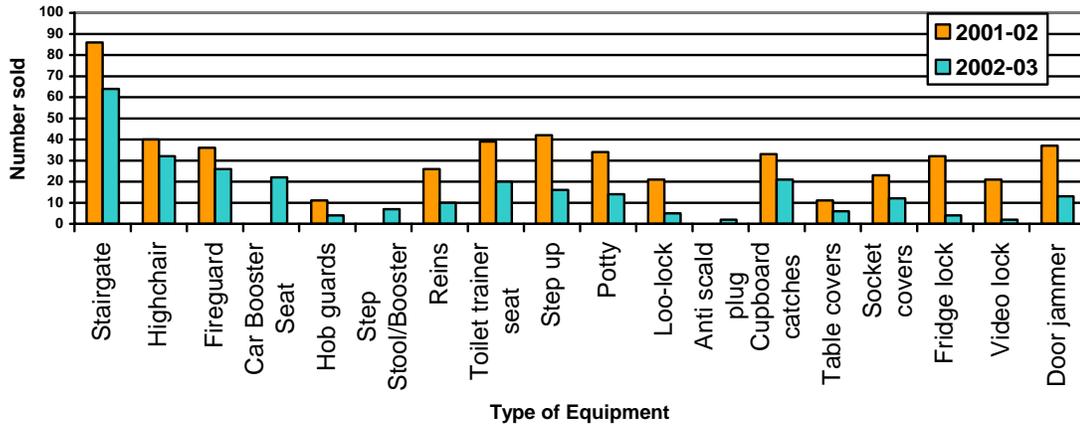
The Low Cost Home Safety Equipment Scheme was introduced in July 2002. The equipment was not free, but 50% retail price and families either paid the full amount or in instalments. All 'profits' were reinvested in the scheme. Parents were responsible for fitting equipment and were asked to sign a disclaimer.

Take up of the Home Safety Equipment Scheme

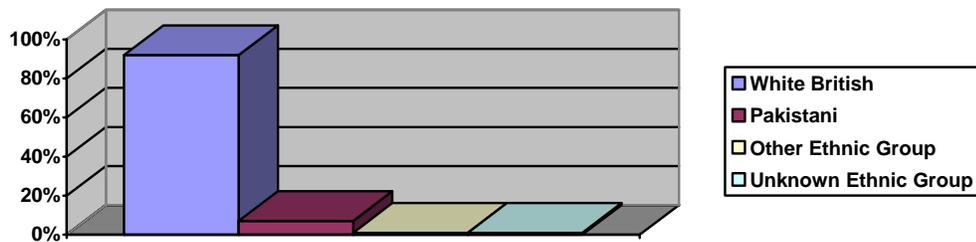
Between July 2002-August 2003 262 parents purchased home safety equipment from Sure Start. The Scheme was publicised using literature, staff, health visitors and safety events to ensure that everyone in the Sure Start area had access to the service. The breakdown according to ethnicity of take up is shown below. This correlated with the ethnic breakdown of the area. The Nursery Nurse and Asian Women's Worker worked together to identify home safety needs of people in the Asian community.

The time periods shown are different, covering 12 and 13 months respectively. This could explain a change in sales during 2002-03 as well as the fact that some equipment was probably passed on by families to others.

Home Safety Equipment Sold July 2001-June 2002 & July 2002-August 2003



Take up of Home Safety Scheme by Ethnicity



Methodology: In October/November 2003 parents were invited to fill in a questionnaire or answer the question, “Tell us what you think about the SSWW Home Safety Equipment” ([Appendix 10](#)). It was thought that this would be more inclusive as it would give people a choice in how they contributed to the evaluation, particularly if they found answering questionnaires difficult. Staff were available to help where necessary.

The evaluation targeted the 113 parents who purchased equipment from July 2002-August 2003. We reached as many people as possible through Sure Start activities and home visits. This provided us with a mix of qualitative feedback and quantitative information. 20 parents took part in the evaluation. This was a smaller sample than anticipated.

Aim of Evaluation: to assess satisfaction with the home safety equipment scheme and whether or not families had any additional concerns about safety or needed equipment not supplied by SSWW. The evaluation did not include statistics from the health authority to see whether admissions to hospital had fallen.

Evaluation Findings

Parents who filled in the questionnaire were aware of home safety issues. When asked what home safety meant to them, responses included:

"Equipment to stop accidents".
"Home safety is a safe home for our children where they can play, live and be safe".
"Peace of mind".
"Making sure my children are safe from accidents".

People who completed the questionnaire were invited to comment further on the scheme and, added to the *"Tell us what you think ..."* forms, this is what they said:

"You can pay in instalments".
"The safety equipment scheme is good because it is a cheaper and effective way of keeping our children safe".
"The safety equipment we have received has been good, without the equipment the mealtimes would be hazardous".
"I think the safety equipment is great. It's a good price, it helps out young people who find it hard to buy them".
"The equipment is safety approved. The cost is excellent and the payment method is good for single mums".

The Low Cost Home Safety Equipment Scheme was popular service for parents in the area. Parents appreciated the affordability of the scheme and they were confident in the quality of the equipment. The Scheme proved to be a sustainable means of improving safety in the home. SSWW still needs to investigate the impact of providing low cost home safety equipment and advice.

How has evaluation been used?

The evaluation suggested that the scheme was satisfactory and met the needs of parents. Feedback from Sure Start workers raised concerns about fire safety and referrals were made to the local fire service for fire safety checks and smoke alarms. The evaluation did not obtain enough qualitative or quantitative information to examine outcomes of the scheme.

6. Education, Literacy and Play

SDA Target: *increase use of libraries by families with young children in the Sure Start area.*

All children in the Sure Start area to have good quality play and learning opportunities, helping progress towards early learning goals when they get to school.

Objective: Improving the ability to learn, in particular by encouraging high quality environments and childcare that promotes early learning, provide stimulating and enjoyable, improve language skills and ensure early identification and support of children with special needs.

Services developed to meet this target were the Sunshine Library, Bookstart Plus, Literacy Development at the Ashiana Centre, Language through Play, Community Childcare Team, Safe Garden Play and support to local parent-toddler groups, nurseries and pre-schools.

6.1 Safe Garden Play

Aim: to provide safe outdoor spaces for children to play.

This project contributed to the target of reducing accidents and targets for increasing play and learning opportunities for children aged 0-3. Early consultations identified a need for garden fencing to improve outdoor safety. SSWW could only provide fencing to back gardens, the local council provided some fencing on front gardens for houses on bus routes. The project involved local parents, the British Trust for Conservation Volunteers (BTCV) and partner organisations such as Lupset Play Areas Association.

Cost effectiveness: BTCV were contracted to manage and co-ordinate the project as it could provide labour through the Intermediate Labour Market (ILM). This meant added value as the cost of the labour was provided by the ILM so the cost of materials would be the main expense of the project. Parent volunteers were involved on a voluntary basis, designing an application form and measuring gardens.

Between October 2001-April 2002 71 back gardens were fenced. These were mainly on Lupset estate. Another 40 gardens were fenced in 2003-04. There has been a constant waiting list for the scheme.

Methodology

The evaluation of the project was carried out by BTCV using a questionnaire ([Appendix 11](#)) that was filled in with the family once fencing had been completed. The questionnaire included a satisfaction scale and the opportunity to give qualitative feedback.

Aim: to establish satisfaction with the way the project was run, how well families had been kept informed, how satisfied they were with the work carried out and whether or not they thought their garden was safer once fencing was in place.

Due to time constraints it was not possible to cover every family who had benefited from the project. Twenty questionnaires were completed, face-to-face with the families involved.

Evaluation Findings

On the whole people were satisfied with the way the fencing had been done, how much they had been involved and kept informed during the process.

Some families said their gardens were still unsafe due to problems such as large items or rubbish left in the garden by previous tenants or the garden being uneven. These issues were beyond the scope of the project.

The evaluation suggested a high level of satisfaction with the scheme. However, it was carried out almost at the time of delivery and did not allow time for reflection or ask how much more children had played in the garden since fencing was installed. It obtained some qualitative information about improved safety, via comments from parents.

Impact of Safe Garden Play on Sure Start activities: the evaluation used the opportunity to look at future needs of families to improve their gardens for play and learning. As a result of interest in gardening classes, a gardening club was set up for parents and other adults in the Sure Start area. Holiday activities for children have included some aspect of gardening.

What people have said about Safe Garden Play outside the evaluation:

"To all the Sure Start team behind the Safe Garden Play. Thank you for all your hard work, the fencing makes a big difference and looks well".

"Just to say a big 'Thank you' to all those who helped build our fence and to Sure Start for making it possible".

"Had new fencing and gates put up around back garden through Sure Start. This means that my daughter can now play out safely".

6.2 Sunshine Library

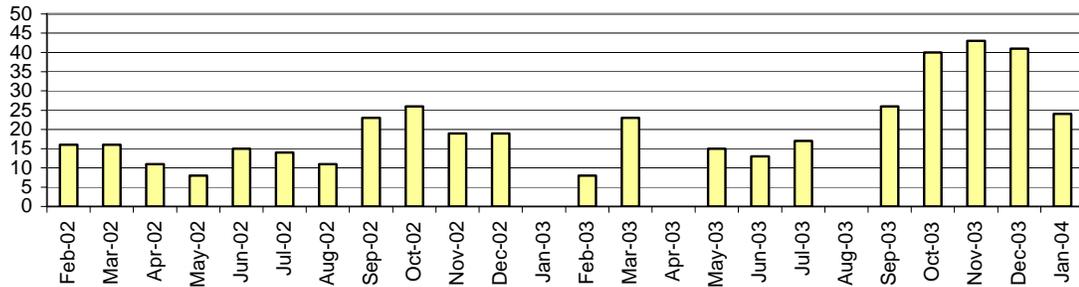
Aim: To provide, promote and develop a flexible, innovative and quality library and information service, which is specifically targeted at pre school parents and carers within the designated Sure Start area.

The Sunshine Library is one of Sure Start's most well used services (from monitoring information and the User Satisfaction Survey 2004). The Library has provided a base for activities such as Messy Monkeys, Tea and Toast, Rabbit Book Club and Story Sessions. Library staff provided outreach to local parent-toddler groups and developed a library session at the Ashiana Centre. The librarian runs story sessions for local school nurseries, one of which attends twice a week in term time (these children are not included in monitoring data). The neighbourhood nurseries also use the library.

In September 2003 work was completed on an extension to the library. The Library is open to people from outside the Sure Start area.

Use of the Sunshine Library

Children 0-3 attending Sunshine Library



The chart above shows the number of children in the Sure Start area attending the library. The library building was closed for extension during January-September 2003 and library services were provided from a mobile unit parked nearby, this could explain a drop in use.

The Sure Start Librarian carried out a review of the service in January 2004, this covered the library overall. The Library staff used a comments/compliments/complaints ([Appendix 12](#)) approach to evaluation. Here are some of the things people have said:

"My little boy enjoys coming to Sunshine Library. C. makes it very welcoming for us and we enjoy just sitting and reading the books".

"I think the Library is excellent and C makes everyone welcome, parents and children. It is very bright, stimulating, lots of things to do and look at. My daughter asks every day after school to come to the library".

"...asked my son this morning if he would like to go somewhere nice – I was thinking of Cheeky Monkeys. He replied "Can we go to Sunshine Library?" He was desperate to come today, he absolutely loves it here".

"I have a 2-year-old daughter and have been coming here for a year. I live outside the area but it's worth travelling to, there are lots of books for every occasion. The Sunshine Library and everyone there are really friendly".

From the comments made by parents and its popularity, the Sunshine Library is a good destination for families. It is often used by staff as a starting point to enable families to access SSWW.

There had been no formal evaluation but the work stemming from the resource, such as Messy Monkeys, Bookstart Plus, outreach and the number of families who access Sure Start via the library forms a large proportion of SSWW's focus on Education, Literacy and Play.

Impact of the Sunshine Library

The Sunshine Library has been the subject of a lot of interest nationally and other Sure Start programmes and library services have started to use this model to develop libraries for young children in other areas.

Book Start Plus

Bookstart Plus was delivered in SSWW by two Bookstart Plus workers. The workers gave Bookstart Plus bags to children at 18 months and 3 years old, either at home, the Sunshine Library or another venue.

Evaluation Aim: to measure the impact receiving a Bookstart Plus bag had on parent and child interaction in the form of play and reading. The evaluation attempted to look at the effect on speech and language development, library membership, general views on the bag and its contents.

Methodology: a semi-structured questionnaire, which had a colourful design, was used ([Appendix 13](#)) 2-3 months after children had been given a bag. The aim was to obtain completed questionnaires from 15 families each who had received bags at 18 months and 3 years. The following factors were taken into consideration when identifying families to follow up: social, geographical, finance, 'hard to reach' families, single parents and whether or not families had received one or two bags.

Evaluation Findings

The Bookstart Plus bag was well used by children who receive one. Whilst we cannot say what long term effect it has had on their development, comments from parents suggested that it helped their speech and language and gave parents ideas of activities and play to encourage children to read. Nearly all those who took part in the evaluation were members of a library and some took their children to the monthly Rabbit Book Club.

Limitations of the Evaluation

The sample was small with 10 completed evaluation forms being collected from each age group. It did not cover as broad a range of circumstances as originally hoped and perhaps was not a true reflection of the whole of the Wakefield West area. There was a feeling that people would be more inclined to give positive answers because the Bookstart Plus workers carried out the evaluation.

7. Strengthening Families and Communities

PSA Target: To reduce the number of children aged 0-3 in the Sure Start area living in households where no-one is working by 12%.

Objective: *Strengthening families and communities, in particular, by involving families in building the community's capacity to sustain the programme and thereby create pathways out of poverty.*

Services designed to meet this target were training for parents, volunteer training, the parents' group, supporting people access adult education by providing a community crèche.

7.1 Adult Education

Local Target: *to develop adult education in the community.*

Increase the number of people who complete courses or do voluntary work by 12%.

Sure Start staff worked in partnership the adult education department to support families who wanted to attend local courses.

Evaluation

A service review of the adult education scheme was carried out in September 2003. The aim of this review was to take a critical look at the Sure Start adult learning programme from September 2001 to March 2003, with a view to making recommendations for the future of the service, so that SSWW could continue to meet local targets and government objectives.

Process: a community involvement worker was asked to provide a detailed report on the following:

- Who has used which part of the service? Numbers and client group characteristics - eg gender, workless household etc.
- Who has been involved in delivering the service?
- Outcomes - both anecdotal and any statistical data for each part of service.
- Problems with information
- How do parents find out about the courses available?
- Are there any difficulties with access routes
- How do parents progress? record systems? Can people get lost in their progression route?
- Links with Community Settings./ Education Forum
- Positives/Any problems

The following points were raised from the review at a meeting with the programme management team and a representative from WMDC Adult Education:

- Problems matching childcare to courses
- Late information about courses, inadequately distributed
- Breakdown in enabling childcare requests at enrolment
- Not enough use by Sure Start Parents (only 5 enrolled on the day)
- Confusion for Sure Start staff about what is provided, childcare availability. It was thought that some of the problems are due to the complexity of provision in the area (three providers) and also to a lack of co-ordination.
- SSWW needed data on course attendance by Sure Start parents from the Learning Partnership.

From attendance and anecdotal evidence, it was felt that useful courses for Sure Start parents were cooking on a budget, DIY, beauty therapy, and family learning type courses. One possible way of taking this forward was to set these up specifically for Sure Start parents in the new Children's Centre.

This evaluation only involved service providers but demonstrates the complexities of partnership working, even in a small area.

Examples of how parents have used adult education

A mother of four children under 6 had moved to Wakefield from Pakistan and knew nobody in the area. After signing up with SSWW at the beginning of 2002 she received a lot of support in home visits before attending an ESOL course at the Ashiana Centre. She then joined the Sunshine Library and took her children to the Literacy Development activities at the Ashiana Centre. This mum has used the antenatal and postnatal support services at the Ashiana Centre, Busy Babies, Helping Hands and Library Sessions. Her children have attended the local preschool and nursery. This mum is now a member of the Ashiana Users' Group, putting something back into the programme. This mother has been able to use adult education to join other Sure Start activities and ensure that her children have benefited from SSWW. She also uses her cooking talents to provide food at Ashiana events.

I got involved with Sure Start when my children were approximately 18 months old. I went to my local mother and toddler group that was run by local mums who were already involved in Sure Start on the parents' group. They helped me so much as at that time my confidence was very low and it was so nice to talk to local mums in the area. After going to the mother and toddler group for a few weeks they asked if I would like to join the parents' group who worked alongside Sure Start Wakefield West, setting up services in the area for other local families. After a while on the parents' group I eventually got a seat on the management board.

While being involved with Sure Start I enrolled on a basic computer course and passed that one and gained a CLAIT certificate. All the time I was involved with the other mums on the parents' group my confidence grew every day and I made lots of friends. From November 2001-June 2003 I worked as a relief library assistant at the Sunshine Library. In June 2003 I gained employment at Home Start Wakefield on a one-year placement. I am leaving that job now but I am leaving with skills I have learned to go and work for Sure Start Wakefield West at the new Children's Centre. If it wasn't for Sure Start in the beginning I don't know what I would be doing. They have helped me so much in the past three years. I am currently coming to the end of another computer course. Single mother of 5-year-old twins.

This asylum seeking family moved to Wakefield with a 3-year-old son. The father was in hospital for some months and the mother was stressed, lacked confidence and was unable to speak English very well. Looking after the father when he was at home meant the family were isolated and housebound. Sure Start supported mother and child by offering the boy a nursery place until he could attend a school nursery. The mother started English classes at Wakefield College and a volunteer course at SSWW. The mother's confidence grew in this period and she decided to extend her studies, learning computing and joining the Jump Start course in January 2004. The family moved to London in May and the mother has decided to continue her studies so that she can "be part of the workforce of England". The father has recovered from his illness and has a job.

7.2 Volunteering

SSWW has run its own volunteer training course for parents which has been well attended and volunteers have gone on to work in the Children's Centre, Sunshine Library, help at events.

Home Start (funded by Sure Start) has trained 14 local mothers who now volunteer for them, supporting 19 families (figures from Home Start for 2003-2004). All have received accreditation at level 2 through the Open College. Five of the volunteers have gone on to study for CLAIT/ECDL, certificates in counselling, youth work, two have applied for university. In addition families who have been supported by Home Start have attended computer courses.

Two Home Start volunteers now work for Sure Start Wakefield West, using the volunteering experience they gained.

Here is what two Home Start volunteers have to say:

I was part of the Sure Start Wakefield West Parents' Group when the Programme was being established as I am a local resident and interested in my community. I helped set up Sunbeams with other parents and was part of a special needs group as I have a child who has cerebral palsy. I trained as Home Start volunteer initially in April 2001 and then trained again to achieve accreditation at level 2 in May 2002. I have supported 2-3 families per week with a variety of difficulties and have found the experience very rewarding. It is nice to know that your help has made a difference. After achieving my Home Start training certificate I went on to do CLAIT training at St George's Community Centre and then progressed to ECDL. In September I have enrolled on the E-business course after which I will have all the qualifications I need to pursue a career in the future.

I live on Lupset estate and have been a Home Start volunteer for over four years. I have supported families in the Sure Start area and helped in the Home Start/Sure Start family group at Denhale. As my children grew older, I began looking for employment opportunities and found a job as a non-teaching assistant, which I really enjoy. The confidence and experience I gained with parents and children helped me to achieve this.

The Sunshine Library in particular has found that mothers who come to work as volunteers have quickly found paid employment. Here are some examples:

One local mum (a library user) was appointed as a relief assistant at the Sunshine. She then went on to become a permanent library assistant at the Sunshine, attended a Messy Monkey course with her children, and is now a Messy Monkey Tutor for the WEA. She will soon train for a Certificate in Adult Teaching.

One mum was a volunteer at the Sunshine, realised she wanted to work with children, and is currently employed on an ILM post a playgroup. She hopes to gain a qualification in Child Care so that she can become a Nursery Nurse.

One mum, who was involved in Sure Start in the early stages, has gone on to a degree course in Child Welfare. She hopes to complete a PGCE to qualify as a teacher. She is also employed at Wakefield Prison as a part-time crèche worker.

7.3 Parents' Group

Aim: to actively support the Sure Start programme, provide parent representation on the management board.

Parental involvement in SSWW started when the bid for SSWW was being developed. Parents were invited to consultation events and a group was derived from this to form the Parents' Group. This group was very influential at the beginning of the programme before staff were employed. Parents have been represented on the management board, meeting the target of 50%, via the Parents' Group.

Attendance at parents' group meetings has fluctuated and, at times, fallen to a core of four or five regular attenders. Crèche facilities were provided to help parents attend meetings

There is also an increasing number of parents not involved in this group who are actively involved in the running of SSWW through volunteering in different activities.

Evaluation

Aim: to obtain parents' perspective of involvement in SSWW

Methodology

Originally, the evaluation officer wanted to interview parents but after a discussion some parents said that they would prefer to fill in a questionnaire ([Appendix 14](#)) in their own time and anonymously.

Questionnaires were sent out to members of the parents' group who had been involved since the start of the programme – this included parents who were no longer involved. Four questionnaires were returned. Two of the respondents had been new to the area, the others had been involved from the beginning.

The parents thought that the main achievement of the parents' group had been their early work establishing SSWW:

"The whole project was overseen by the parents' group until staff were in place. I feel we have given it balance."

It had also provided people with friendship and developed a voice for parents in SSWW.

Parents had been fulfilled by being involved. They reported developing skills, having a say in things that affected their family, personal fulfilment:

"...being a person in my own right..."

and

"...feeling that I could make a difference..."

However, they felt that they had been taken for granted, left out at times and found the relationship with staff difficult. They were disappointed that some things, for instance, a new building would take so long. Childcare and support for the group were barriers to involvement.

The respondents recognised the need to expand the group and make it more representative of parents in the whole of SSWW and suggested ways of involving parents:

- More fun activities for children.
- Open, jargon free.
- Pay some parents to work in the Sure Start Centre.
- Open mornings, coffee mornings, more publicity.
- Staff need to build trust in and encourage parents.

The evaluation suggested that parents gained skills, friendships, confidence from being actively involved in running SSWW and had experience and knowledge to contribute. There were recognised tensions between parent and staff. A community involvement manager has been employed to develop and support the parents' group, this support was acknowledged in the evaluation.

Recently parents took part in delivering the User Satisfaction Survey with external researchers who trained them to produce and help families fill in the questionnaires. The results were the best the external researchers had encountered. This suggests a strong commitment on the part of those parents who are actively involved and the potential to develop their skills and involvement.

In addition to evaluation, comments recorded in the *Compliments, Comments and Complaints* book stated:

"Sure Start has made a big difference... I am now a joiner-inner, went to mums and tots and now take a role in running it".

"I got to know X through being involved with the Parents' Group so that's another reason for being glad that I got involved with Sure Start".

"What I like about Sure Start is parents are involved, but I also think those involved in the parents' group should be rewarded for all their hard work, maybe with vouchers or even a certificate ..."³

"Sure Start gets you involved in things that are going on in the community and other places around".

8. Cross Cutting Themes

This section considers aspects of SSWW that cover the whole programme.

8.1 Diversity

A Diversity Sub Group was set up with the following targets:

PSA Target: achieve by 2005 an increase in the proportion of children having normal levels of communication, language and literacy at the end of the foundation stage and an increase in the proportion of young children with satisfactory speech and language development at age 2 years.

³ An annual awards ceremony is now held with certificates being presented to parents who have been actively involved in the programme.

Local Targets:

- ensure that those children who have a disability, special need or additional needs are identified and they are supported
- enable women from the community, local to the Ashiana Centre, to access Sure Start and other services that benefit their children
- ensure that refugees and asylum seekers are involved appropriately
- involve grandparents/carers in the programme.
- increase and promote awareness of literacy where English is a second language.

Services designed to meet these targets were the Ashiana Centre, speech and language therapy, identifying support needs of asylum seekers/refugees, special needs support worker. SSWW endeavoured to provide universal services to all of these groups and direct children and families to all services, providing additional support where appropriate.

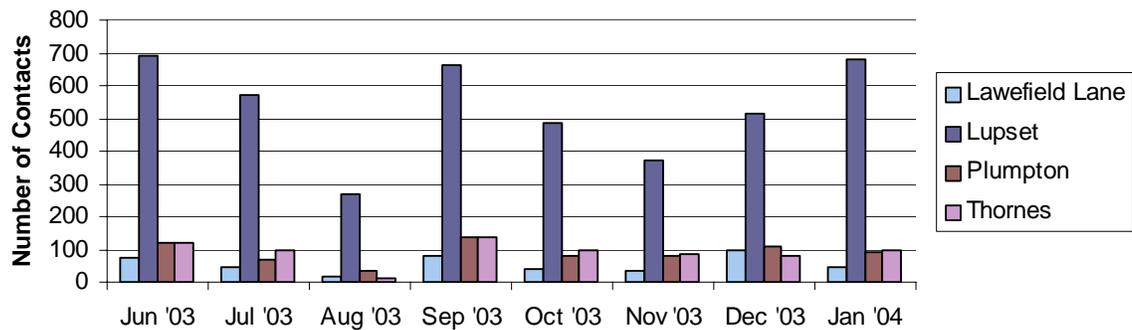
Sign up by Ethnic Group and Area (since January 2002)

Ethnicity	Outside	Lawefield	Lupset	Plumpton	Thornes
African			20	7	3
Indian					4
Other Asian	1		2		3
Other Black	3		1	2	
Other ethnic Group	6		15		3
Other Mixed			9	2	
Pakistani	3	72	20	100	13
Unknown	3		26	1	2
White/Asian			5	3	
White/Black African	2		11		
White/Black Caribbean			1		
White-British	52	14	1198	46	174
White-Irish			2		
White-Other		3	3		
Total	60	89	1313	161	202

This table represents the number of people who have signed-up to SSWW.

The chart below gives a picture of actual contacts with people over a seven-month period.

Attendance by Area (June 2003-January 2004)



8.2 Ashiana Centre

Aim: to provide services to meet identified needs of women with young children in the Asian community, particularly those who live in Lawefield Lane and Plumpton.

A service review was carried out in June 2003 by the Asian Women's Worker, Literacy Development Worker and Programme Manager.

Sign Up: Sure Start had signed up 100% eligible Asian families (64 families) in the Lawefield Lane/Plumpton area. All families were aware of services and holiday activities at the centre.

Services

- ESOL class (English for speakers of other languages). In partnership with adult education
- Antenatal session in partnership with a community midwife
- Library session. Dual language books and videos for the children
- Busy Babies. Mums and tots session through adult education
- Drop in. This session is focused on healthy eating and information on health and well being
- Baby Clinic in partnership with the local health visiting team

Literacy Development

- Parents Stay & Play
- Story time for one-year-olds
- 1-1 computer sessions for children in the term before they start nursery

Home Visiting

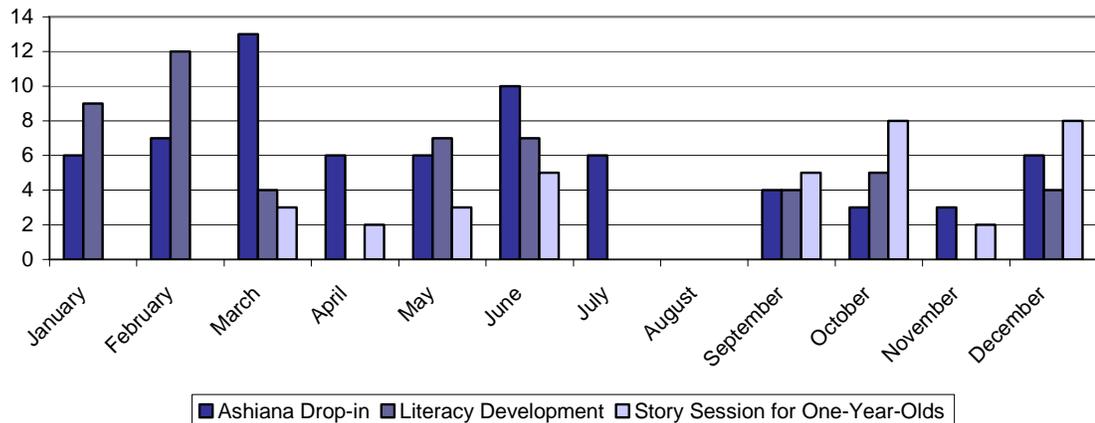
Home visits were made on request and usually due to the following reasons.

- Family facing problems.
- Suddenly stopped attending sessions.
- New Baby.
- Moved into the Sure Start area from elsewhere.
- To help other Sure Start staff access a family where English is not spoken
- For hospital/GP appointment.

The Asian Women's Worker and Literacy Development Worker reported that centre was working well. Courses, sessions and services had been organised according to the needs of the community. They targeted different families for each session and on average each family attended two sessions per week.

Staff were aware of families who were not attending the Centre. But space was limited and at the time attendance was to capacity. Here are some examples of attendance:

Number of Families Accessing Services at the Ashiana Centre in 2003



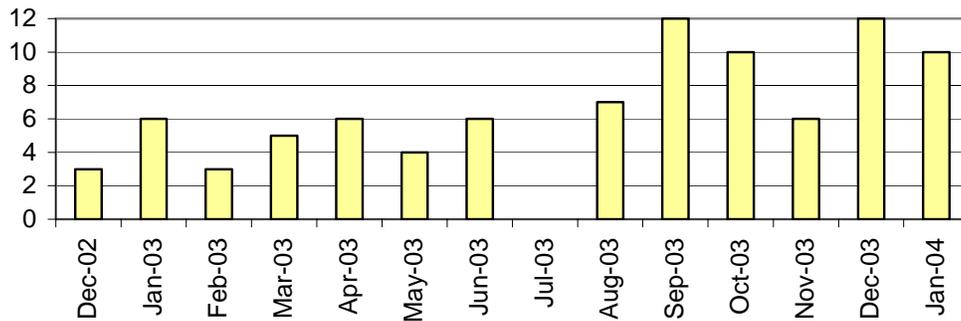
How the Ashiana Centre was integrated into the Sure Start programme:

The services at the Ashiana Centre mirror those in the rest of the programme and provide additional, separate services that are appropriate to the Asian Community.

The workers were trying to achieve an increase in breastfeeding in the ante natal sessions.

The Ashiana was also a venue for the Rabbit Book Club and the Sunshine Library had been brought out to the Ashiana Centre via weekly library sessions attendance is shown below:

Children 0-3 using Ashiana Centre Library Session



A users' group was established consisting of Asian mothers, contributing to the running of the centre and feeding back suggestions to staff. There were plans to get two of the mothers onto the management board.

In 2004 evaluations will be carried out on the Literacy Development Scheme and ante and post natal services at the Ashiana Centre. This has taken longer to plan to balance the small numbers of families involved with the need to demonstrate outcomes and the impact of the Ashiana Centre on the local community.

8.3 Services for Asylum-Seeking Families

Services have developed in partnership with other agencies, particularly the Asylum Team. When the Delivery Plan was written there were few known asylum-seeking families with young children. The number has risen bringing with it added challenges for Sure Start services, in particular the home visiting team. In September 2003 SSWW identified 20 families with a young child, these were mainly single mothers from the African nations.

In January 2003 SSWW recognised that it was offering ad-hoc services to asylum-seeking families. Language barriers meant that we were not always making a full assessment of a family's needs or directing them to appropriate Sure Start services. A lot of staff time has been put into supporting families as they settled into the area.

The home visiting team worked with the Asylum Team to look at ways of improving the services including joint visits and crèche support.

These services have not been evaluated. A group for asylum seekers was set up at the Ashiana Centre but was poorly attended (1 family). The families have received a lot of services and support from workers, particularly in accessing services, childcare whilst parents attended ESOL courses, support for the children. Because of the temporary nature of residence in the area (those who achieve refugee status tend to move away; some have failed in their application for refugee status) it would be difficult to evaluate the impact Sure Start has had on these families and how the work contributes towards

targets. However, this will be considered in the coming year. Comments made by two mothers suggest the value SSWW has added to their life here:

I have been living in Wakefield for six months. When I came to Wakefield my son and I were feeling very lonely. I thought the sun didn't shine. When we went to the park my son played alone as he hadn't any friends. He was crying 'where are my friends?' I didn't know what to tell him. The health visitor signed me up to Sure Start someone came to visit and the sun shone. My son and I went to Bridlington on the Sure Start summer trip it was wonderful. I saw the sea for the first time in my life and I enjoyed paddling. Next a play and language worker came to my house. She played with my son and helped him to understand English. He can now count, knows colour and sings nursery rhymes. He also speaks some English. Sure Start helped my son to go to nursery to learn to play with other children. I went to college to learn computing and English. Thank you very much Sure Start. (speech given by a mother at the opening of the Sure Start Centre).

At the end I would like to thank you for all what you've done to me and to my family, even if it was your job but you did it with care, love and sincerity. Of course I would like to thank all Sure Start for everything, it was the best thing that happened to me in Lupset, I won't forget your kindness or those beautiful days in my whole life. (e-mail from a mother who had moved to France)

8.4 Monitoring Systems

Aim: to check that monitoring was meeting the requirements of SSWW as well as those of the Sure Start Unit.

In January 2002 SSWW began to use the Smart Start database to collect monitoring data and provide reports for the Sure Start Unit. Staff were asking more questions about Smart Start and the use of information stored on the database, other than meeting the Sure Start Unit's monitoring requirements. It became apparent that there were gaps between what SSWW wanted from the database and what it was used for. In January 2004 a questionnaire ([Appendix 15](#)) was used to assess how Smart Start could be used more effectively and identify additional information needs of the Sure Start programme.

Sixteen questionnaires were returned by individuals or teams. Most people used Smart Start, some with help from colleagues who had access.

In addition a case file audit was carried out by the Programme Manager and Project Development, Evaluation and Monitoring Officer. The audit looked at 68 files (about 10% of the total) to check on the accuracy and quality of information held in them. Details of families were checked with the Sure Start database to ensure that the two records were consistent.

Conclusion

The case file audit and database highlighted where SSWW could improve recording and monitoring. Staff needed to make decisions about what was recorded, how and where, and build in systems and checks to ensure that they were getting appropriate information needed from families and that it was accurately recorded and maintained.

As a result of these evaluations, SSWW achieved a greater understanding of its information needs and recommendations for using the database and written records to a more effective information resource.

9. What has Sure Start Wakefield West learned from evaluation?

The last three years have been a time of development, innovation and applying new ways of working. Staff had to adapt their working practice, work in partnership with colleagues in different teams and with other agencies. SSWW sought to learn from experience and remain flexible and adaptable to meet the challenges that change brings.

Some projects have worked, whilst others have been less successful. SSWW continues to work hard at engaging children and families from the whole Sure Start area and provide universal services. There are still groups of people who are hard to engage.

Improvements in monitoring systems meant that SSWW could identify areas where families were not becoming involved in Sure Start and identify gaps in services, for example, for children who are aged 1-2. Common findings from evaluations have shown that:

- Families need 'hand holding' to activities until they build up confidence or their own support network.
- Activities need to be kept open rather than limited to a few people to ensure a sustainable attendance at groups.
- Transport is an issue for some families (post natal depression group, baby massage).
- Services can be slow to develop and those involved need tenacity and patience to keep them going and achieve sustainability; for example, breastfeeding support, baby massage.
- A lot of work goes into getting one family to access a service.
- Achieving targets and milestones is a slow process.
- Outcomes have been difficult to measure with relatively low numbers of people accessing individual services.

Evaluation has supported learning and change in the programme. However, the capacity of families in the Sure Start area to actively become involved in evaluation had to be developed. Efforts have been made to avoid 'evaluation fatigue' and over-consulting parents. Once the Project Development, Evaluation and Monitoring Officer was in post more attention was paid to developing appropriate methods of obtaining feedback that were viable but also non-stigmatising, making sure that families could express their opinions

and feedback confidently, without fear of reproach and in ways they felt more comfortable.

Evaluation and monitoring have discovered signs of a 'progression' through targets towards 'Strengthening Families and Communities'. SSWW has found that families who have been engaged in activities relating to their child's development then become involved in activities relating to strengthening families and communities, for instance by joining the parents' group, doing courses, volunteering for SSWW or training as Home Start volunteers, carrying out the user satisfaction survey.

This could suggest that some mothers have gained confidence to 'move on' and put something back into the programme once they have received support they needed, or that once their children a certain age, they have more time to give.

Evaluation has provided a way for some parents to become more involved in SSWW. The recent user satisfaction survey was designed and carried out by a group of mothers, facilitated by external evaluators.

10. Evaluation in the Future: Recommendations

Evaluation has not yet given the SSWW programme information on outcomes and the impact SSWW has had on the local community. It has tended to record satisfaction levels with some reflection on services. It has been used as a development tool to help provide services appropriate to those who were using them. SSWW needs to look at the more complex issues within the programme, such as:

- partnership working
- the impact of whole services, for example, family support, rather than smaller scale activities which form part of that service
- which services make a contribution to reaching targets and achieve the initial aims of Sure Start outlined in the delivery plan.

Evaluation during 2004-2006 will aim to consider:

- Cost effectiveness
- Outcomes
- Impact of Sure Start on children and families and partner agencies
- Sustainability of projects

There are still improvements to be made by SSWW to ensure a consistent approach to evaluation. Over the next two years SSWW should:

- ensure all staff understand and use the evaluation strategy
- develop project management tools that ensure evaluation is built into new activities

- work with partner agencies to identify the outcomes they would like to see evidenced in evaluations
- obtain more quantitative data to support evaluation
- ensure evaluation activity is proportionate to the level of service in a 'target' area
- link evaluation more clearly to targets
- widen evaluation to include those people who do not participate
- feedback evaluations to families and partner organisations
- continue to seek as much qualitative feedback from families

Key questions in evaluation will be:

- Are our services good quality?
- Are we offering good value for the public's money?
- Are we helping to co-ordinate, streamline or add value to existing services?
- Are we culturally appropriate and sensitive?
- Do we ensure lasting support by linking to services for older children?
- Are we involving parents, grandparents and other carers?