

(Last year a local father composed a song about Sure Start, this year the outreach team have written one for their fun tots sessions)

FUN TOTS SONG

*If you want to do some learning
And have plenty of fun, plenty of fun, plenty of fun.
If you want to do some learning
And have plenty of fun
There's something you can do.*

REPEAT

*Come to 'Fun Tots'
Come and join the fun.
Come to 'Fun Tots' see how the work is done.*

*Come to 'Fun Tots' come and sing the song.
Come to 'Fun Tots' come and sing a-long.*

This document has been prepared for the Sure Start Westminster, Church Street Partnership Board by,

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Acknowledgements

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Section 1: Introduction

1.1 Second Annual review 2002 / 2003

This is the second annual review for the Sure Start Church Street local programme and covers the period April 2002 – March 2003. It demonstrates how the programme has moved from a developmental stage to one of active service delivery. The success lies in the ability to bring together practitioners from a wide range of backgrounds, who can jointly address the interplay between the different 'life issues' (financial, housing, isolation etc.) faced by local families and the more specific needs of individual children and their parents / carers. A key feature of the programmes approach is building and maintaining this cohesive multi-agency team and considerable time has been invested in this process over the year; it is both a strength and an ongoing challenge for all the team!

The programme recognises that parents are the first teachers of their children and that home environments impact greatly on the provision of learning and development opportunities. By raising awareness of learning, safety, educational and employment opportunities, the programme is beginning to make an important contribution to relieving practical difficulties experienced by families, and in the creation of better life opportunities for all concerned.

Monitoring, review and evaluation are an integral part of service delivery and a Work Plan¹ was formulated for 2003 – 04 based on feedback from staff, monitoring information and evaluation. This plan will be 'fine-tuned' if any new issues arise from this review.

There is much to celebrate over the last year:

- The appointment of a Sure Start social worker, which completes both the team and the implementation of the initial Delivery Plan;
- The appointment of a new Partnership Board chair – Joe Gannon, Director of Service Provision in Westminster Primary Care Trust;

¹ Copies of the Work Plan 2003 – 04 are available from the Sure Start office.

- Increasing the programme's 'reach' to 30%, of all children seen each month;
- Good progress with the local evaluation, with the completion of 2 reports;
- An increase in the range of group activities for parents and children;
- Consistently good progress in meeting the quarterly milestones;
- Starting to put mainstreaming on the agenda, with the establishment of a mainstreaming strategy group in Westminster;
- Organisation of several community 'fun' events;
- Greater integration and joint working with mainstream providers.

1.2 Terms of Reference

The aim of this year's annual review is to:

- Provide the Partnership Board with an in-depth review of the programmes performance over the last year;
- Examine the extent to which the programme has made progress towards achieving the Sure Start targets and objectives;
- Report on any outcomes resulting from the programme;
- Make recommendations for the future direction of the programme.

1.3 Methodology

Three sources of information have been used to inform this year's annual review. These are:

- A survey of families, living in the Sure Start area with children under 4 years, to ascertain their knowledge of, usage and quality of Sure Start funded services;
- Feedback reports completed by Sure Start funded services;
- A review of the monitoring data collected by Sure Start Westminster and the central Sure Start Unit.

1.4 Feedback on recommendations 2001 – 02 Annual Review

The recommendations from last years Annual Review are listed below with progress towards meeting them in bold under each entry.

- To ensure continued monitoring of new children seen in order that the programme achieves 100% reach by September 2002.

The programme reached 789 children, our baseline figure, by mid October 2002.

- To investigate the apparent discrepancy between the number of live births and the number of children aged 2 months reported to the Sure Start team.

There are ongoing issues in obtaining accurate data to enable the outreach team to undertake the 1st Sure Start visit. We continue to work closely with Westminster Primary Care Trust and local health visitors in achieving greater accuracy.

- To ensure that once the programme is in a stable stage of operations there is equity in the up-take of services across the different age bands.

There is still a higher uptake of services within the 2 – 3 age group. Prior to Sure Start children of this age were not seen routinely by any agency and there were few recreational opportunities in the area. Sure Start group activities may have begun to close this ‘gap’ in services.

- Staff contracts should be renewed until March 2004 in order to allow the whole programme to achieve a minimum of 1 years full operation. However, we recommend that a tool be developed by March 2003 to assess each projects value for money.

All staff contracts were renewed until March 2004. The Sure Start Unit have developed a cost effectiveness tool that the programme will use to assess ‘value for money’ in the autumn of 2003.

- That the post of social worker/family support worker should be pursued to bridge the gap between social services and the programme.

A social worker commenced employment in December 2002.

- The Board should consider directing future funding into the three areas raised consistently by local parents. These are:
 - Outdoor play areas;
 - One O'clock club;
 - Social gatherings and outings.

The Board has agreed to fund the development of a one o'clock club on the site of the Lisson Green Play Project. Outdoor spaces have been financed at Little Imps Pre-school and work is underway with Fisherton Street and Parson's House Residents Associations to develop further outdoor play areas. The outreach team organised several community and social events over the year that were attended by many local families.

- The parent survey conducted as part of last years annual review be repeated in May 2003 with the addition of specific questions concerning improvements in local services.

The questionnaire was repeated this May and administered by 10 parents, who had attended a course to train as local evaluators. The questionnaire asked about improvements in services for children and families.

- To follow up contacts with parents not presently using Sure Start services but who have requested information about the programme.

Information was sent or given face-to-face to all parents participating in the 2001 – 02 survey and who requested further information about Sure Start.

- To review the concept of membership of Sure Start

The concept of membership of Sure Start that involved the issue of membership cards was discontinued following the first annual review as parent feedback showed that families were confused by this concept and it brought few benefits.

- To produce a more user-friendly version of the annual review for distribution to local parents/carers; this to include brief details of projects, reach and a full report of the parent questionnaire and recommendations. This should be made available in September 2002.

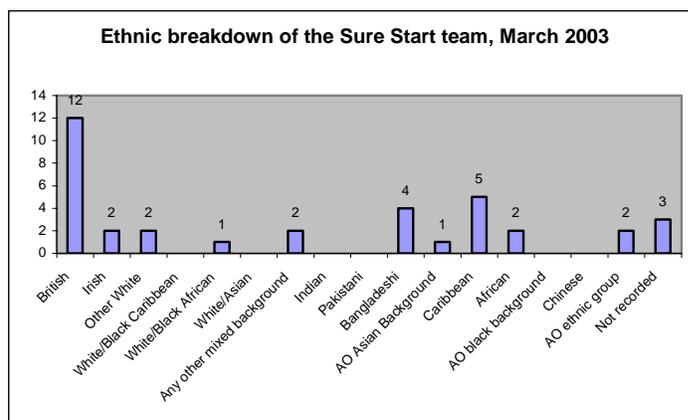
A summarised version of the annual review was printed and distributed to families and local organisations in September 2002.

Section 2: The Sure Start team

2.1 The Staff

Key features of the team are:

- In the period April 2002 – March 2003 five staff left employment that is 3.3 WTE; all were replaced on the first round of interviews. The programme has achieved a high degree of staff continuity since its inception;
- There are currently 36 staff in post, this is 22.4 WTE; there were no staff vacancies on 31 March 2003;
- Staff are based in 3 main sites – Lisson Grove Health Centre, Portman Early Childhood Centre and Church Street Library. Childcare staff funded by Sure Start are also based at Lisson Green Nursery and Church Street Children’s Centre;
- 19% of staff live in the local community, 16.6% speak a community language other than English;
- The ethnic breakdown of staff is shown below:



- There are two male workers within the team. The small proportion of men working within the programme may have a direct impact on the our ability to reach fathers. Consideration should be given to this in future recruitment drives.

2.2 Staff Supervision

Supervision is seen as an integral part of providing a quality service and all staff are offered supervision in addition to that provided by their professional discipline.

Supervision is provided by 2 external facilitators on a one to one, group or run as a 'practice development session' basis depending upon the needs of the staff member.

One staff member wrote in her annual feedback report:

“The importance of supervision and training around parenting issues has been crucial in the development of our service. We have an increased awareness and understanding of how to work with children within a broader family context and working in partnership with the parents/carers and community.”

Section 3: Sure Start Services

Details of all the Sure Start services are attached at appendix 1.

3.1 Sure Start Services

The key achievements by service area in 2002 – 03 are listed below:

Parent and carer Involvement team (outreach)

The outreach team continues to be central to the programme 'reaching' new and isolated families; they fill a known 'gap' in supporting parents / carers to access services and in strengthening family life. Over the last year the team have:

- Delivered a home visiting service to 315 children and their families;
- Organised 2 community Fun Days & a programme of summer activities in the park;
- Started the process of developing a local Parents Forum by training parents in the use of multi-media, as a means of communicating their needs to the Board;
- Involved local fathers by developing a father's calendar;
- Further developed the range of group activities, which Sure Start offers by adding the following - Mum and Baby Yoga, Fun Tots an interactive session for parents and children and more self-development courses for parents;
- Started a Benefit Drop-In at Portman Early Childhood Centre;
- The team have also supported the continuation of the existing group activities i.e. Yoga, sewing, ESOL;
- Completed a local evaluation report of their service in partnership with the local evaluation lead.

Dental

A dental service continues one day a week at Lisson Grove Health centre for children aged 0 – 4 years. It has resulted in a significant rise in the number of 0 – 2 year olds registered with a dentist. The number of known registrations for this age group prior

to Sure Start was 30; the Sure Start dentist alone has registered 64 children in this age group. There is a similar increase in registrations in those aged over 2 years.

The Sure Start dentist has almost doubled the number of children seen this year when compared with last years figures. See table 1 in this section.

Oral Health Promotion

The oral health promotion worker is well connected with all local services for young children. In the last year the following has been achieved:

- Establishment of a regular monthly session at the community drop-in at Portman Early Childhood Centre; this has led to integration with other services and received enthusiastically by parents;
- Continued liaison and support to local nursery schools, community groups, health professionals, childminders and parents;
- The distribution of free toothbrushes, feeder cups and dental mirrors within community sessions. Role-play with the mirrors aims to remove fear and promote awareness of the need to visit the dentist.

Child Care Development

The main focus of work in the last year has been recruiting parents from the local community to be childminders and supporting them through the process of registration.

- The recruitment of childminders

In September 2002 two groups of prospective childminders were recruited and offered the Introduction to Childminding Practice course. These were delivered locally in partnership with Westminster Adult Education Service. The 2 groups were very different as follows:

- An English-speaking group - 11 people began the course, 9 completed and 6 completed the assignments;
- A Bengali speaking group organised with an interpreter - 10 began course, 8 completed the course and 4 are still finishing assignments.

First Aid formed a part of both courses.

For many of the participants completing the course was a great achievement as it was their first experience of training and a possible/positive first route into further training.

- Supporting existing childminders

A 'Drop in' has been set up at Portman Early Childhood Centre for existing childminders to provide support, training and encourage their retention. 6 childminders now regularly attend with up to 14 children.

- Development of crèche provision

The childcare development worker aims to ensure that all the Sure Start crèches work to a set of agreed policies, which are based upon known best practice.

KIDs Home Learning

KIDs have provided a service to 11 children and their families over the last year, many of these children are now in a nursery setting;

The service continues to be targeted to families of children Under 4, who have significant developmental concern or a recognised disability.

Speeches and Language Therapy

The Sure Start speech and language therapists continue to offer a targeted home visiting service as well as:

- Continuing to run baby fun, a group for children aged from birth to 18 months based in the multi sensory room at the Portman Early Childhood Centre ;
- Working with the local evaluation lead, on an evaluation of the home visiting service and producing a report for presentation to the Partnership Board, wider mainstream services and the Sure Start National Evaluation team;

- Their home visiting service has seen a total of 72 children this year compared with 46 in 2001 – 2002.

Midwifery

The Sure Start midwife has addressed some of the known 'gaps', which existed in the provision of some antenatal support. These are as follows:

- Improved links with the Bangladeshi community. The Bangladeshi antenatal classes have been very successful and there are now a number of self-referrals coming from this group;
- The weekly Midwifery drop-in session provides information early in pregnancy before women have made contact with the statutory maternity services. It also provides a referral service for those with social difficulties, which may be exacerbated in pregnancy;
- The new links with the Portman Early Childhood Centre and the local library as venues for antenatal classes have significant advantages for families, in introducing them to services they can access once their child is born;
- Home visits continue to the 'harder to reach' groups;
- A mapping exercise of local services for women/families affected by ante- and postnatal depression resulted in an information card for healthcare providers. This project is intended to raise the awareness of depression among healthcare professionals, broaden knowledge and increase the number of appropriate referrals.

Health Visiting Team

The health visiting team consists of a full-time health visitor, nursery nurse and part-time family support worker. Key team achievements for this year are:

- The development of a home safety assessment, which is offered to all parents with children aged between 4 – 8 months and the installation of safety equipment. Data from St Mary's Hospital indicates that the

number of children, from the Church Street area, attending A & E at St Mary's has reduced;

- Support to women identified as being at risk of developing postnatal depression;
- Breast-feeding support to women as soon as they leave hospital. The Sure Start Nursery Nurse and Family Support Worker have now attended the UNICEF breast-feeding course and are able to offer support to more women.

Family Therapy and Child Psychiatry

The family therapist has provided a service to 30 families in the last year.

A key achievement has been attending the Webster Stratton training and subsequently the running of a Webster Stratton Parenting Programme. This is a researched based programme, which has been shown to reduce children's aggression, non-compliance and other complex behavioural difficulties.

The programme works with groups of parents focussing on their strengths, abilities and competencies. It monitors positive discipline and encourages parental involvement at all levels of their children's play and learning. The group emphasises the building of positive parent/child relationship before focussing on issues of discipline/boundaries etc. For parent feedback on these sessions please see appendix 2.

An evaluation of this service is currently underway to identify early lessons from this work with families / carers.

A consultant child psychiatrist is employed to provide one session a week to Sure Start and has delivered training for the team and existing providers on a variety of topics from autism to the effects of maternal mental health on young children.

Literacy Development Worker

Key achievements over the last year are:

- The Book Start plus scheme has been rolled out across the catchment area and 50% of eligible 3 year old and 30 % of 18-month-old children have received a Book Start Plus Pack;
- Parents are further encouraged and supported in using books by the establishment of a Book Start Plus Drop In, which is held each week;
- The establishment of a regular programme of activities at the library has attracted parents who would not normally visit;
- Library membership within the 0 – 4 age group rose in this period by 11.6% and the issue of picture books rose from 9,718 (in 2001 – 02) to 10,692(in 2002 – 03);
- Outreach to nurseries and playgroups and other community organisations is beginning to be established;
- Working with the Outreach Team to develop 'Fun Tots', a creative group for parents and their children, at the library;
- Story Sacks and Family Learning resources are beginning to be developed;
- A satellite children's library is in the planning stage and will open in July 2003 on the Lisson Green estate.

Toy Library

- Membership of the toy library increased by 232 children, this was a 313% increase on the previous year;
- The library continues to provide a loan scheme, giving children and parents access to a wide and varied choice of good quality multi-cultural toys, which they can take home or play with at the setting;
- A range of activities have been introduced into the library i.e. story-telling time, singing and music etc.;
- The toy library is an integral part of the other services at Portman Early Childhood Centre and parents can access a range of other services in the centre too;
- Sure Start was able to fund trips to the seaside and adventure Parks for members of the toy library. Some families had never been to any of these places before and 'it was a totally new and wonderful experience for them';
- Plans are being developed to open a satellite toy library on the Lisson Green Estate in July 2003.

Lisson Green Nursery

Lisson Green Nursery, with Sure Start funding, has developed 6 places for children aged 0 – 2 years. Part-time places were introduced in the last year to provide more flexible options for parents and a total of 13 children benefited from the service; 3 of these were under 1 year of age and 10 were between 1 – 2 years.

Church Street Children's Centre

Church Street Children's Centre provides a pre-school in the morning and a Sure Start crèche in the afternoon. In June 2002 18 new crèche places were set up at the Centre to support Sure Start classes for parents. Within the crèche the emphasis is on providing appropriate play and resources for the under 2's. More families have been able to access Sure Start courses as a result of this increased crèche provision.

Marylebone Bangladeshi Society Parent/Carer Drop In

Marylebone Bangladeshi Society Parent/Carer Drop - in had contact with 71 children and their families during 2002 - 2003.

The group continues to meet at Portman Early Childhood Centre twice a week and at Church Street Library one day.

The Wednesday session is very well attended by a group of parents from many different cultures. The Monday session has been used in a slightly different format with some crèche places for children whose mothers were attending child minding training in the adjacent room. (The training was for Bengali speaking parents with an interpreter). It remained open for regular families too.

Smoking Cessation

Smoking cessation support via one to one and group counselling has enabled a number of pregnant women / mothers and fathers of children to stop smoking.

Extensive health promotion in this area has allowed the 'seeds to be planted' in the minds of parents, being more informed about the effects of smoking may empower them to stop one day.

A total of 14 parents were seen in this period 5 have given up smoking, 2 were pregnant women;

Employability

Employment drop-ins have been established at the library and Lisson Grove Health centre. This means that employment opportunities have been made available in settings that have enabled some parents to gain employment. These places are less threatening and more easily accessible than traditional job centres.

Lone parents are supported through the New Deal for Lone Parents scheme and through having a lone parent advisor at each employment drop-in.

The establishment of ESOL (English as an additional language), IT and conversation classes within the Portman Early Childhood Centre have enabled parents to improve their English language skills and learn new skills which may be useful in gaining employment

Social worker

The Sure Start social worker started in mid December 2002 and has completed a core team, who can offer earlier intervention to families requiring a higher level of support. This team consists of the health visitor, social worker, family therapist, outreach and the midwife. The social worker is:

- Beginning to work with families, who require a lower level of support and do not meet the criteria for a Children in Need assessment by social services;

- And is working to improve the flow of information between the local programme and social services, which should lead to better support for families.

3.2 Group activities

Sure Start continues to offer the following group activities:

For parents(all classes are supported by a crèche):

- Yoga
- Personal development training, an annual programme, which includes; listening and communicating, asserting yourself, writing skills etc.
- English language classes
- Computer classes
- Sewing classes
- Support to give up smoking
- Antenatal classes, evening and daytime

Activities for parents / carers and children to enjoy together:

- Baby Fun
- Fun tots

Both of the above are interactive fun groups for parents and children. Groups are focused around music songs and rhymes, drama and movement, puppets, storytelling and art and making things.

- Activities in Church Street Library
- Book Start Plus drop-in
- Summer activities in the park

New activities in 2002 – 2003

- Tiny fun
- Employment drop-in
- Benefit drop-in
- Cv writing and interview techniques
- Mother and baby yoga
- Activities in the toy library
- Entertainment for under 5s in Church Street library

3.3 Children seen by service

Table 1 overleaf gives a breakdown of children seen by the individual services. For health visiting and outreach the contacts relate to home visiting activities only.

Table 1: - Children seen by service from April 2002 – March 2003

Service	FTE ²	Start date	Under 1	Over 1 but under 2	Over 2 but under 3	Over 3 but under 4	Total seen	Number of disabled children	Total contacts, if recorded	
Toy Library (From 11/01)	1.2	09/01	69	90	96	51	306		1689	
Outreach team	3.2	05/01	160	57	54	44	315		544	
Dentist	0.2	09/01	7	29	50	54	140		376	
Oral health	0.3	01/01	25	41	30	120	216		256	
Health Visitor	1.0	07/01	83	8	15	10	116	1	245	
Speech and language therapy	1.4	06/01	5	9	31	27	72	1	260	
Family therapist / Child Psych	1.1	11/01	11	12	12	5	40		237	
Childcare Development	1.0	11 / 01	8	10	11	9	38		128	
Literacy Development	0.8	09 / 01	5	63	9	94	171		333	
KIDs Home Learning	1.0	04 / 01	-	-	6	5	11		193	
Lisson Green Nursery	2.0	09 / 01	3	10	-	-	13		-	
Under 4s drop-in, MBS	0.8	10/10	10	27	19	15	71		252	
Creche – radicle	1.4						127		730	
Employability Co-ordinator	1.0	Total of 141 parents seen								
Smoking Cessation	0.5	Total of 14 adults seen (6 pregnant women)								
Midwife	0.6	06/01	Total of 73 pregnant women seen							191

² FTE = Full Time Equivalent

Table 2: Referrals to Sure Start services

Source	To Sure Start services.								Total
	Outreach	Smoking cessation	Employability	Health Visitor	Midwife	SLT ³	Family Therapist	KIDs	
Health visitor	167	7	7	15			25	8	229
Com Midwifery	2	3							5
Social services		-		-	-				0
G.P practice	2	1		2			1		6
Voluntary sector				-	-				0
Self-referral	19	2	133 ⁴	6	-				160
Hosp Maternity				34					34
Sure Start colleague	4	1	1	12			7	3	28
Other									21
- Bengali advocate				15					
- Primary mental health worker				1					
- Portman family support				3					
- Community health dev				2					

3.4 Referrals

In the period April 2002 – March 2003, Sure Start staff received a total of 455 referrals from outside the Sure Start team. The highest percentages of these were from the health visiting service and by self-referral. This is the same pattern as identified in the 1st Annual Review.

It is interesting to note that there are no recorded referrals from social services. It is expected that this will change given the recent appointment of the social worker.

³ SLT = speech and language therapist

⁴ This figure represents parents attending classes and many may have been informed of the classes from the Sure Start team

3.5 Key obstacles

The Sure Start team were asked to identify key obstacles / frustrations, which impacted on them achieving their targets. These can be broken down as follows:

Service delivery

- Clients missing appointments (smoking cessation and dental services);
- A lack of referrals from GPs (smoking cessation and KIDs)
- Long delays in the registering of new child minders because of OFSTED and Criminal Records Bureau, childminders can not work until they have the certificate of registration;
- A lack of crèche provision, there are not enough spaces for the groups;
- The heavy demand for 'support' home visits has meant that the work of the outreach team has become more targeted and there are concerns that families may 'fall through the net';
- Lack of support from job centre and Paddington 1st in the staffing of the employment drop-in. This is due to frequent staff changes;
- Disruptive behaviour, from members of the public, within the local library were cited by some staff as a concern in delivering services;
- Part-time working has restricted attendance at some meetings (oral health);
- Some members within the health team doing a range of activities within the programme, which makes team consolidation more difficult (health visiting).

Communication

- Slow response to need in the area from some providers, whose internal systems are perceived as overly bureaucratic;
- The continued lack of liaison with community midwives.

Practical issues / working environment

- Overcrowded office space and lack of IT systems
- Administrative time spent on collecting data concerning pregnant referrals across the area, and in mailing appropriate targeted information;
- Considerable time is spent on paperwork at each consultation and between appointments (dental);

These obstacles and frustrations were raised on a team away day in March 2003 and possible solutions written into the current team Work Plan 2003 – 04⁵. These need to be reviewed and discussed by the Board to ensure that all issues are being resolved.

3.6 Examples from the projects

Feedback from parents and examples of individual work with families is attached at appendix 2.

Section 4: Reach

4.1 Sure Start requirements

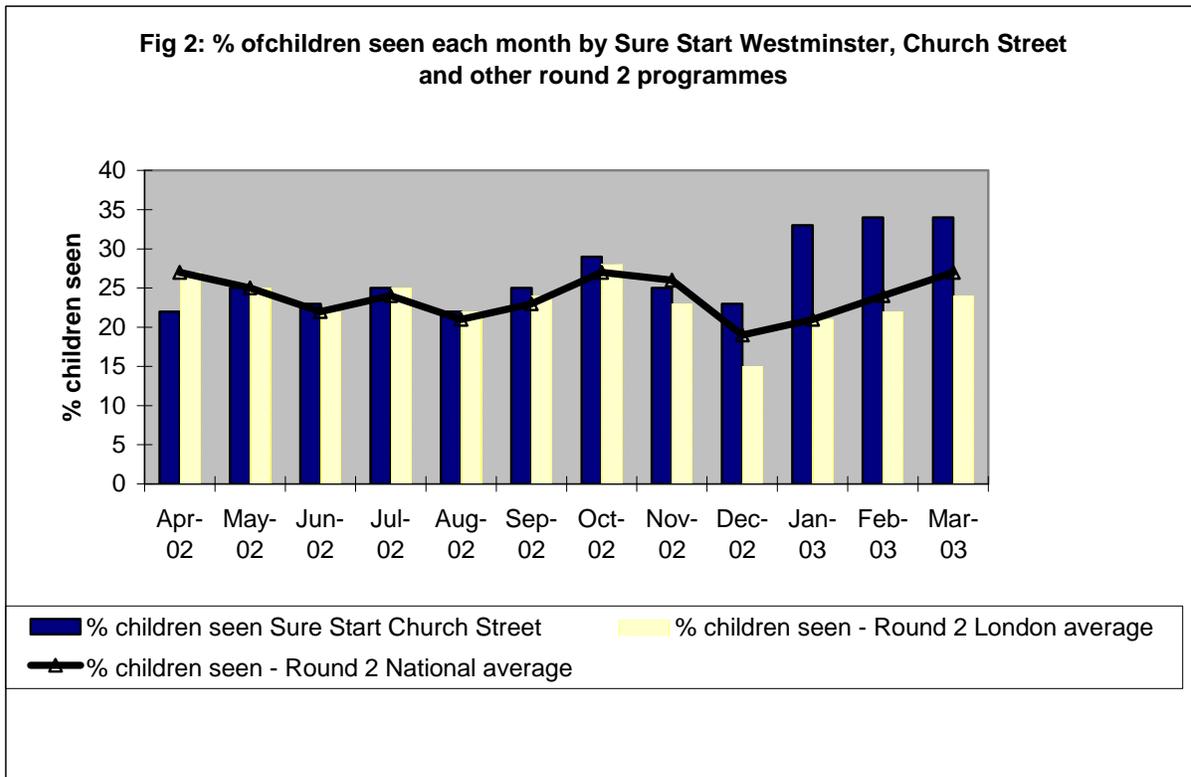
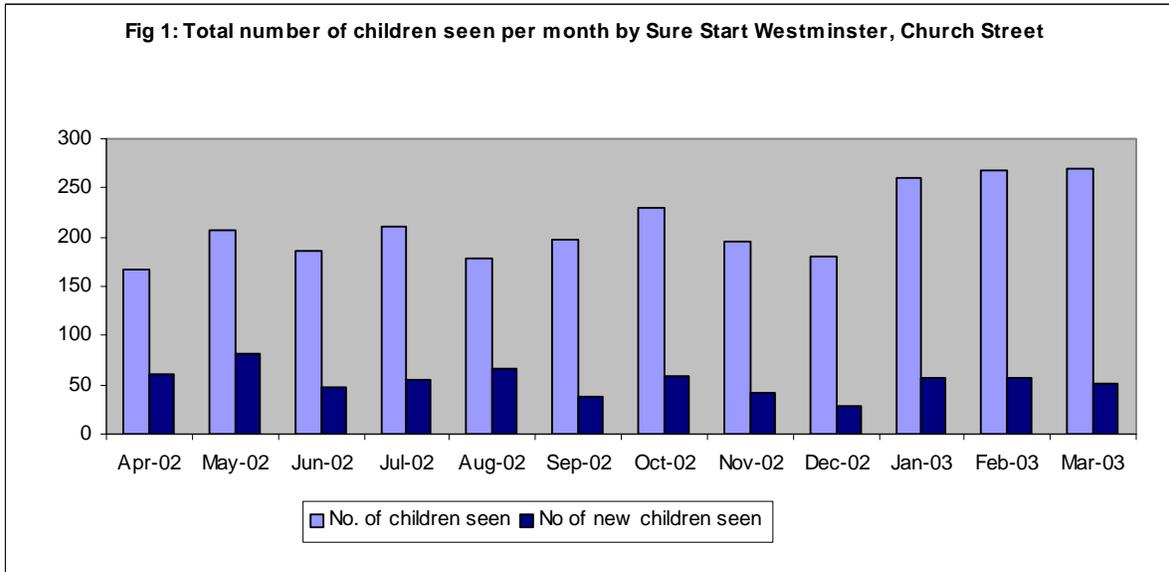
One of the main aims of Sure Start is to ensure that its services are available to all children under 4 in the catchment area. It is therefore important to monitor that the programme is reaching the intended population.

The Sure Start Unit provide the following guidance for all programmes:

- Once a programme is fully operational, it should be aiming to deliver services to between one quarter and one third of children each month according to the level of need. This has been increased for 2003 –04 to 30% for programmes in rounds 1 - 4;
- There will be a decline in the percentage of 'new' children seen as the programme moves towards a 'steady state of operation';
- Programmes are expected to be delivering services equitably to all children under the age of four;
- Programmes are expected to see all children living in their area at least once during the year;
- Programmes are expected to visit 100% of families in the first two months of their baby's life.

The following graphs give details of progress made locally against the above requirements. Tables, which accompany the graphs, are at appendix 3.

4.2 Children aged 0 – 3 seen by Sure Start Westminster

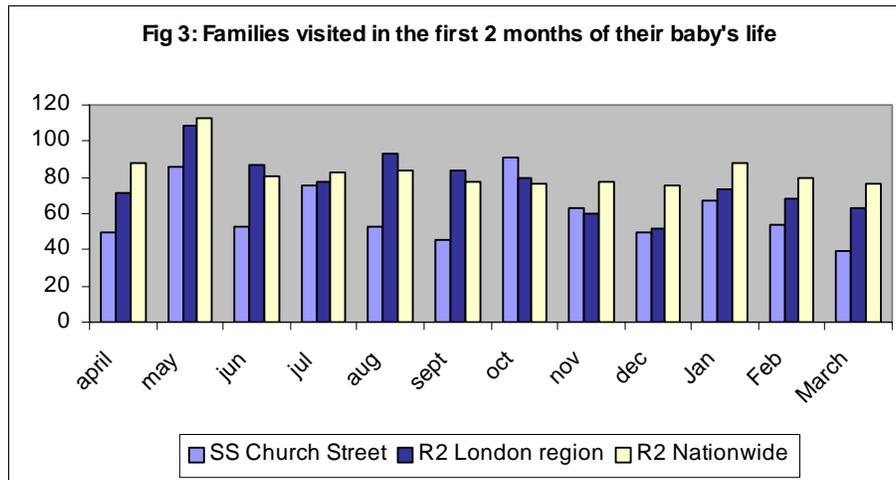


Figures 1 & 2 detail the number and percentage of children seen each month by Sure Start Westminster, Church Street. The programme has maintained consistently high levels of reach throughout the year, and from January 2003 has exceeded other round 2 programmes in London and nationwide by achieving over 30% 'reach.'

The average number of children seen per month in 2001 –02 was 68 (8.6%) and for this last year 2002 –03 it was 212 (26.6%). This demonstrates a move from the developmental stage of the programme to a more stable stage of service delivery, which meets the Sure Start requirements.

The proportion of new children seen each month has decreased to a relatively stable level consisting predominantly of new births and movements in. In the period 2001 – 02 the average number of new children seen each month was 58% and for this year it was 28%.

4.3 Families visited in the first 2 months of their baby's life



Sure Start Programmes are expected to visit 100 per cent of families in the first two months of their baby's life. Figure 3 shows that the Church Street programme is not performing well in meeting this target. This is disappointing because systems and relationships have been developed with the local health visiting team to support this process but as the average cohort is only 19 babies each month even a small margin of error in communication between health visitors and the Outreach Team⁶ will lift the percentage of families not seen.

Systems are now in place to make an early check between those notified and babies registered on the Westminster Primary Care Trust Community Information System, who have not been referred to Sure Start. The Work Plan for 2003 – 04 identifies ways of improving this target.

The local Sure Start database indicates that many children, who are not seen by 8 weeks, are 'picked up' by one of the Sure Start services at a later stage.

⁶ It is the Sure Start Outreach team who undertake this 1st Sure Start visit

4.4 Age breakdown of children seen

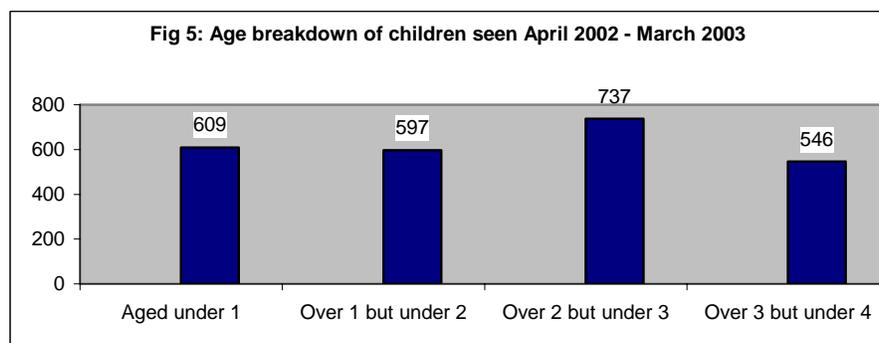
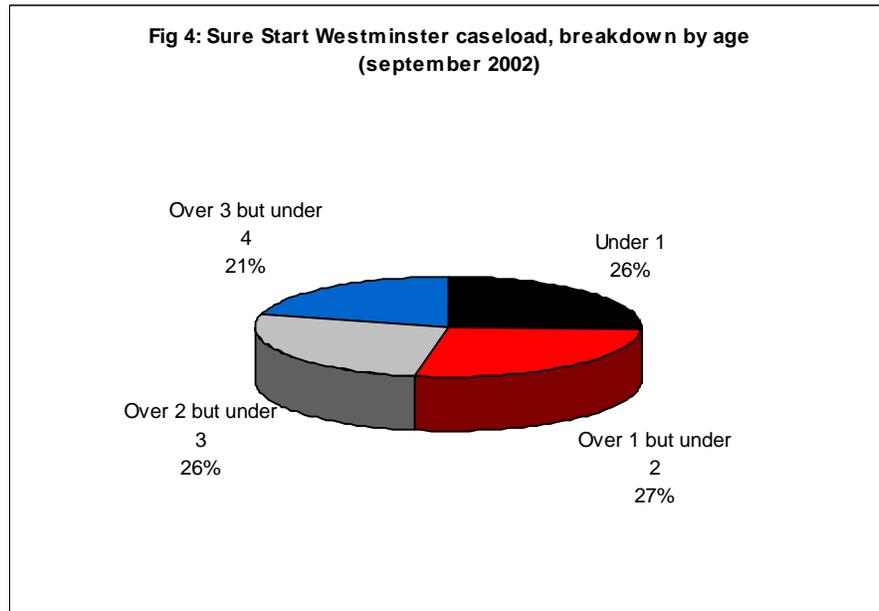
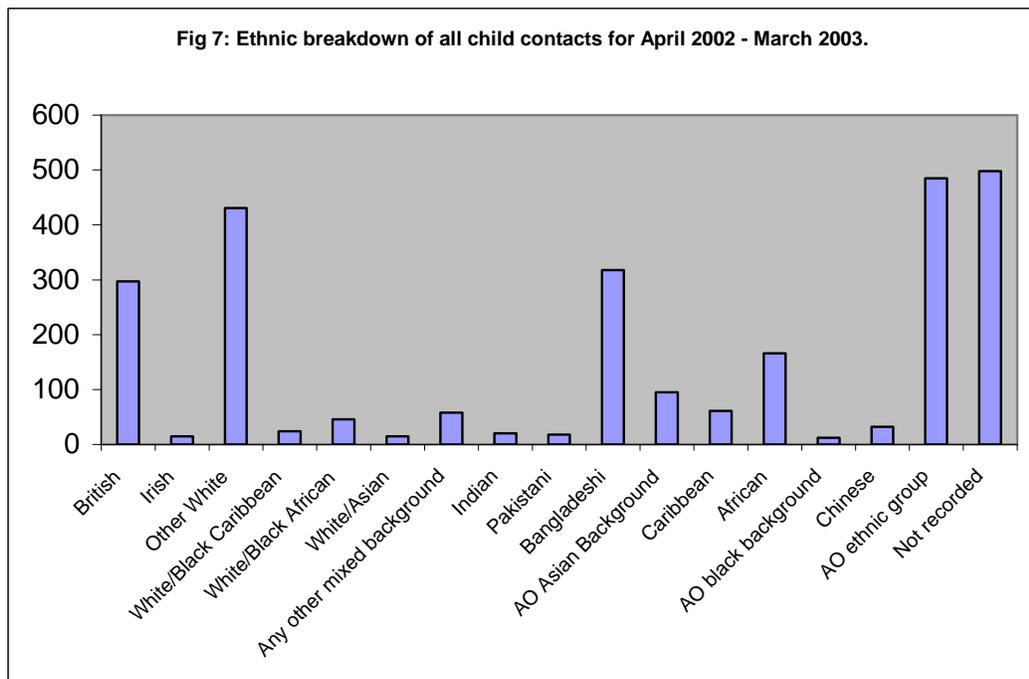
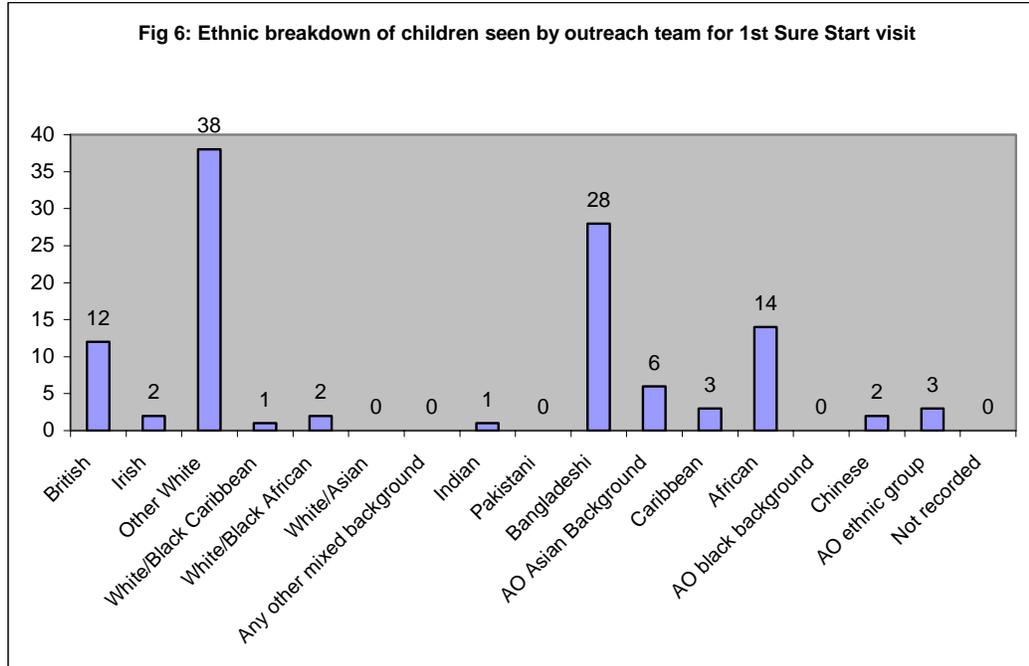


Figure 4 indicates an fairly equitable spread of children across the Sure Start age bands. Figure 5 shows that Sure Start Westminster continues to deliver services to a higher proportion of 'over 2 but under 3' year olds than to other eligible age groups. The higher incidence of children seen in this age group is in contrast to the national picture, where data from the Sure Start Unit reveals that round 1,2 and 3 programmes are delivering services to a higher proportion of under one year olds than other age groups.

There may be many advantages to higher contact within this 2 – 3 age group as it is a time, when many statutory agencies have minimal ongoing contact and Sure Start group activities may be 'filling' a support gap for many families.

4.5 Ethnic break down of children seen



Figures 6 & 7 suggest that the Sure Start services are meeting a diverse population group. As yet the programme has been unable to compare these contact details with the latest census data. However, there is still anecdotal evidence that the white British population may be accessing fewer services than expected and this issue is integral to the Work Plan for 2003 – 04.

Figure 7 suggests that the programme needs to improve its collection of data on ethnicity as there are a high number of contacts with 'no recorded' ethnicity.

Section 5: Progress towards PSA targets

All Sure Start programmes are required to report to the Sure Start Unit in September on their progress in meeting the national Sure Start targets.

The information below was submitted in September 2002 and covers the period April 2001 - March 2002. Data for the last financial year, 2002 – 03, is currently being prepared for submission. However, updates on progress since April 2002 are in the comment sections.

PSA target	Target for 01 -02	Progress towards target			Measure / Progress
		Achieved	Partially achieved	Not achieved	
Objective 1: Improving children's social and emotional development					
Reduce the proportion of children aged 0-3 in the Sure Start area who are re-registered within the space of twelve months on the child protection register by 20 per cent by 2004.	4% reduction in the number of 0 – 3 year olds re registered on the child protection register (CPR)	Yes			<p>Measure recorded 2001 – 02 No children were re-registered on the CPR within a space of 12 months</p> <p>Progress 2001 – 02 A system of following up children when they come off the register is being developed with the Child Protection Unit of Westminster Council.</p> <p>Progress 2002 –03 The appointment of a Sure Start social worker as the named link is enhancing communication with social services. Joint protocols and referral systems are now established and efforts are being directed towards involving Sure Start at the core group stage, prior to de-registration</p>

<i>Objective 1: Improving children's social and emotional development</i>	<i>Achieved</i>	<i>Partially achieved</i>	<i>Not achieved</i>	<i>Measure / Progress</i>
<p>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 (PND)</p>	<p>100% of families with young children contacted by the health visitor within 15 days of the birth, and from October 2001 100% of families receiving an extra Sure Start support visit within 8 weeks of the birth.</p>	<p>Yes</p>		<p>Measure recorded 2001 – 02 Sure Start visited 49% of families in the period April 2001-March 2002, the figure is low because home visits did not commence until October 2001.</p> <p>The Health Visiting Team visit 97% of women within 15 days</p> <p>20% of women were identified with PND</p> <p>Progress 2001 – 02 The higher than national average figure for women identified with PND may be partly due to the effective early identification by the health visitors and the 2 largest GP practices in the area.</p> <p>Progress 2002 –03 An effective referral system is now established for women identified as at risk of developing postnatal depression. A multi-agency working group is currently developing a PCT wide strategy for a consistent approach to the identification and management of PND, which will be sensitive to language and culture.</p>

<i>Objective 1: Improving children's social and emotional development</i>		<i>Achieved</i>	<i>Partially achieved</i>	<i>Not achieved</i>	<i>Measure / Progress</i>
One hundred per cent of families with young children contacted within two months of birth by member of Sure Start programme	100% of families with young children contacted by the health visitor within 15 days of the birth, and from October 2001 100% of families receiving an extra Sure Start support visit within 8 weeks of the birth.		Yes		<p>Measure recorded 2001 – 02 The number of children visited was 49% by March 2002. This figure increased over the latter part of the year.</p> <p>Progress 2001 – 02 Figures and percentages were hard to verify due to the discrepancies in the data with regard to the number of newborn babies in the area.</p> <p>Progress 2002 –03 A more effective communication and referral system is now established with regular joint meetings between services. The number of first time visits can be viewed in the monitoring section of this document.</p>

Objective 2: Improving health		Achieved	Partially achieved	Not achieved	Measure / Progress
Achieve by 2004 in the Sure Start area, a 10 per cent reduction in the number of women who smoke in pregnancy.	A two percentage point reduction in the proportion of women smoking during pregnancy will have been achieved	Yes			<p>Measure recorded 2001 – 02 Full data on smoking patterns was not available. 6% of the 289 women who had a live birth continued to smoke during their pregnancies</p> <p>Progress 2001 – 02 A smoking cessation counsellor was appointed in April 2002.</p> <p>Progress 2002 –03 The smoking cessation counsellor is currently in the process of developing a database to record all relevant information and evaluate the work she is undertaking. She has made progress with both one to one and group work</p>
Parenting support and information available for all parents in Sure Start areas	100% of parents have access to parenting support and information, all offered 2 sure start visits and by the end of the year receiving a central directory of parent support services.		Yes		<p>Measure recorded 2001 – 02 53% of families received information about Sure Start.</p> <p>Progress 2001 – 02 The Sure Start visits did not begin until October 2001 and this explains the relatively low percentage of contacts. Families receive a welcome pack, a group activities leaflet and a central handbook detailing local amenities and services.</p> <p>Progress 2002 –03 The initial referral system to Sure Start is now established and this information can be viewed in the monitoring section. Several issues exist with regard to reaching all families every month..</p>

<i>Objective 2: Improving health</i>		<i>Achieved</i>	<i>Partially achieved</i>	<i>Not achieved</i>	<i>Measure / Progress</i>
To increase by 10% the number of women, who start breastfeeding and the duration of breast-feeding	To see at least a 2% increase in breastfeeding and in the duration of breast feeding to 8 weeks	Yes			<p>Measure recorded 2001 – 02 The percentage of women breastfeeding is 91% at birth and 79% at 8 weeks. Both figures are higher than the national average and are due in part to the effective systems in place to support women who breastfeed.</p> <p>Progress 2001 – 02 There are well established systems in place to support women who breastfeed including joint antenatal groups, monthly workshops and a telephone helpline</p> <p>Progress 2002 –03 Antenatal classes providing information about breast feeding are now available to women and partners where English is not their first language</p>

Objective 2: Improving health		Achieved	Partially achieved	Not achieved	Measure / Progress
A 10% reduction in children admitted to hospital as an emergency during their first year of the life with gastro-enteritis, a respiratory infection, or a severe injury.	A four per cent reduction in the number of emergency admissions for severe injury, respiratory infection and gastro-enteritis to hospital to be achieved		Yes		<p>Measure recorded 2001 – 02 Sure Start Unit collect this information for all programmes and it is not yet available.</p> <p>Progress 2001 – 02 Links are established with the local A&E dept at St Mary's Hospital who provide attendance figures at their unit. From this information, staff can target interventions around accident prevention and home safety. Workshops are being held in local nurseries and an assessment tool for home safety has been developed..</p> <p>Progress 2002 –03 The home safety assessment tool and the fitting of home safety equipment began in February 2003.</p>
A 20% increase in the number of 0-2 year olds registered with a dentist, and a 70% increase in the 3-5 year old group. 90% of children within a preventative programme by 2003.	A 15% increase in dental registrations in the 0-2year olds And a 60% increase in the 3 – 5 year group. 30% of children in a preventative programme	Yes			<p>Measure recorded 2001 – 02 There has been a 576% increase in registrations between September 2000 (when there were only 21 children in the area registered with a dentist) and March 2002.</p> <p>Progress 2001 – 02 Information pack developed.</p> <p>Progress 2002 –03 Figures of current dental registrations are being collated and there is evidence of increased registrations.</p>

Objective 3: Improving the ability to learn		Achieved	Partially achieved	Not achieved	Measure / Progress
Achieve by 2004. for children aged 0-3 a reduction of five percentage points in the number of children with speech and language problems requiring specialist intervention by age 4	A one percentage point reduction in the proportion of 4 year olds with speech & language development delay to be achieved	Yes			<p>Measure recorded 2001 – 02 There has been a reduction in the proportion of 4 year olds with speech and language delay since the introduction of the home visiting programme</p> <p>Progress 2001 – 02 We have participated in the Speech and language Measure, which was developed by the Sure Start Unit to collect data on children's language development and this information has been collated for the national evaluation. All Sure Start staff are now trained in the 'TalkingToddlers' initiative, which encourages early speech and language development.</p> <p>Progress 2002 –03 Plans to train other members of the Sure Start team to undertake home visits and to extend the home visiting programme across the trust are being examined.</p>

<i>Objective 3: Improving the ability to learn</i>		<i>Achieved</i>	<i>Partially achieved</i>	<i>Not achieved</i>	<i>Measure / Progress</i>
100% of children in Sure Start area to have access to good quality play and early learning opportunities, to help progress towards early learning goals when they get to school.	100% of children to have access to good play and learning opportunities	Yes			<p>Measure recorded 2001 – 02 74 children have utilised the facilities at the toy library over the past year and the staff are currently undertaking outreach work to further promote the service.</p> <p>Progress 2001 – 02 Sure Start has funded the renovation of 2 outdoor play areas and a community garden.</p> <p>Progress 2002 –03 Please see in monitoring data for up to date figures 307 children are now members of the toy library; A satellite toy library is due to open in 2003; A feasibility study for a one o'clock club and/or a Neighbourhood Nursery is being examined.</p>

<i>Objective 3: Improving the ability to learn</i>		<i>Achieved</i>	<i>Partially achieved</i>	<i>Not achieved</i>	<i>Measure / Progress</i>
Increase use of libraries by young families with young children in Sure Start area	<p>2% increase in the number of 0 – 4 year olds who are active members of the library</p> <p>5% increase in picture book issues</p>	Yes			<p>Measure recorded 2001 – 02 Library membership has increased during the past year and there has been a 22% increase in the number of picture books issued.</p> <p>Progress 2001 – 02 The original capital investment in library services has been successful in that it has enabled strong partnerships to develop and there now exist a range of joint activities in the library including antenatal classes and creative workshops.</p> <p>Progress 2002 – 03 Bookstart books are being distributed to 18 month and 3 year old children; A satellite children's library is due to open in July on Lisson Green estate.</p>

Objective 4: Strengthening families and communities		Achieved	Partially achieved	Not achieved	Measure / Progress
To reduce the number of 0-3 year old children in Sure Start areas living in households where no one is working by at least 12 per cent by 2004.	A one % reduction in the proportion of children aged 0-3 living in workless households		Yes		<p>Measure recorded 2001 – 02 Sure Start Unit collect this information for all programmes and it is not yet available.</p> <p>Progress 2001 – 02 A community co-ordinator employability has been in post since February 2002. Basic skills' training is offered in partnership with Westminster Adult Education Service and includes ESOL, IT and literacy. An employability drop-in service has started at the local library and the community co-ordinator has forged positive links with the local employment agencies</p> <p>Progress 2002 - 03 Job vacancies at Westminster PCT and Church St Regeneration Forum are distributed locally.</p>

Objective 4: Strengthening families and communities		Achieved	Partially achieved	Not achieved	Measure / Progress
All Sure Start programmes to work with their EYDCP to help close the gap between the availability of accessible childcare for 0-3 year olds in Sure Start areas and other areas	The EYDCP aims to open 60 new places across Westminster, Sure Start to develop at least 10	Yes			<p>Measure recorded 2001 – 02 Lisson Green Nursery is now able to accommodate 6 children aged 0-2 and the nursery workers are funded by Sure Start.</p> <p>Progress 2001 – 02 The co-ordinator of the EYDCP sits on the Sure Start Implementation Group and plans are developing to combine funding to increase the number of childcare places in the future. A Sure Start funded outreach worker has been in post since February 2001 and is actively involved in training and recruiting childminders</p> <p>Progress 2002 - 03 Training for childminders has started; 17 childminders have been trained this year and are awaiting registration.</p>

Objective 4: Strengthening families and communities		Achieved	Partially achieved	Not achieved	Measure / Progress
75% of families report personal evidence of an improvement in the quality of services providing family support.	75% of families report personal evidence of an improvement in the quality of services providing family support.	Yes			<p>Measure recorded 2001 – 02 64 % of families report being satisfied/very satisfied with the extra support and services offered. This figure is likely to be higher as 32% of families did not record their level of satisfaction on the questionnaire</p> <p>Progress 2001 – 02 Findings from the survey reveal that Sure Start has achieved a high profile in the local community. Several areas for improvement were highlighted and these include a greater provision of outdoor play areas, greater support for parents returning to work and more opportunities for social events. This information will help to shape future services.</p> <p>Progress 2002 - 03 Local parents have received training to participate in the local evaluation and administer the questionnaire; More family social events are taking place.</p>

Objective 4: Strengthening families and communities		Achieved	Partially achieved	Not achieved	Measure / Progress
All local Sure Start programmes to have parent representation on local programme boards.	Parents Forum established and formal system agreed for electing parent representatives to the Board		Yes		<p>Measure recorded 2001 – 02 The parent representatives are appointed.</p> <p>Progress 2001 – 02 The planning and publicity for the parents' forum is ongoing and regular meetings will start soon.</p> <p>Progress 2002 - 03 The final structure for the parents' forum is being developed. Plans to increase parental representation are ongoing.</p>
All Sure Start programmes to have developed local targets for ensuring links between local Sure Start partnerships and Employment Service Jobcentres	100% families receiving information on the employment service and New Deal initiatives at the 2 nd Sure Start visit. -The Sure Start Director to meet quarterly with the business development manager at the local job centre to discuss progress, and changes	Yes			<p>Measure recorded 2001 – 02 Progress 2001 – 02 All staff have been trained in 'New Deal' and providing information about the initiative is an integral part of the 2nd Sure Start visit. Director meets quarterly with the employment services manager and joint initiatives are developed</p> <p>Progress 2002 - 03 Links with job centre plus and new deal are ongoing.</p>

Section 6: Progress with local evaluation

6.1 Introduction

As a condition of funding all local Sure Start programmes are required to undertake a local evaluation that helps to assess what is working well and the short-term impact of services being provided. Programmes should seek to develop 2-3 focused in-depth studies on areas of local interest/concern and build incrementally on findings. This 'bite sized' approach aims to assist in generating helpful information within a reasonable time-scale to inform developments and guide mid course corrections to services and activities.

Local evaluations should not seek to replicate or duplicate aspects of the National Evaluation of Sure Start. For example, long-term investigations such as longitudinal studies tracing the progress of children should not be undertaken locally as there are impact studies in place nationally that are published in due course.

6.2 Local Context

Westminster Sure Start, Church Street requires its services to routinely monitor and evaluate impact and lessons learnt. Evaluation is regarded as an ongoing *process* rather than a specific event. Systems are in place to (a) ensure that services examine how well they are performing (b) monitor progress towards agreed targets and (c) ensure that mid course corrections to practice are made on the basis of these findings. The basic framework for the Church Street Programme is set out in the Monitoring and Evaluation Framework dated October 2001 available from the Westminster Sure Start office. A programme of specific evaluation activity was agreed following the production of the first (2001/2) annual review.

Three areas were identified for in-depth study during 2002/3:

1. Access to Speech and Language Therapy: Lessons from Sure Start. Presented to the Sure Start Board on the 20th January 2003.
2. Evaluation of the Parent and Carer Involvement Team: Lessons from the first year. Presented to the Sure Start Board on the 19th May 2003.

3. Evaluation of the impact of Sure Start in relation to Primary Care Services. This work although remaining a priority was postponed to allow an evaluation of the Family Therapist role. A report of this work should be available summer 2003.

These services were selected because of a number of factors:

- They offered largely untested approaches to supporting local children and families;
- Elements of their work are regarded as integral to the functioning of the 'whole system' Sure Start approach;
- They are engaged in delivering new forms of service (often alongside local parents) that are helping the programme identify its hard to reach populations and test strategies to increase *reach*;
- They are generating important first lessons that can be used to inform future mainstreaming strategies.

Evaluations undertaken drew upon multiple sources of information including, the Sure Start database, local records and family studies. Full reports are available from the Sure Start office with summary findings placed on the National Evaluation of Sure Start web-site (www.ness.bbk.ac.uk) so that they are available to a much broader audience.

6.3 Cross Cutting Themes

- Whole System Approach

Westminster Sure Start, Church Street works as an inter-connected 'whole' approach to assisting local children and families. Information about the Sure Start programme is shared as a joint task and practitioners have a wide knowledge of what is available, or who might be in a position to help. Internal referrals help to speed up response times, joint visits are easier to facilitate and personal introductions can help to smooth the way for those people who may be fearful or cautious about getting help from professional sources unknown to them. It is interesting to note that findings from the Speech and Language evaluation found that health visitors believed that ability to make a direct referral and the speed at which people were seen were the most significant factors in increased up-take of service.

The Sure Start approach has been important in creating a web of support for children and families, bringing into play the support of the programme and mainstream services. Aspects of the approach are reminiscent of a 'brokering' service between children and families and points of help within the Sure Start community and beyond. To this end Sure Start seems to undertake an important 'backstage technician' function where connecting people and organising resources can be as important as delivering discrete services.

- Finding Local solutions

Sure Start as a local initiative is able to make an important contribution to increased partnership working, where parents themselves are part of deciding what needs to happen in the neighbourhoods where they live. A future consideration should be formalising the use of parents / carers as volunteers within the programme.

Both service evaluations found that investment in tackling local issues at the grassroots of the community had brought benefits. These gains did not just relate to issues concerning family life but also what may be perceived as intractable difficulties for services such as high non-attendance rates at clinic appointments. Both the projects investigated offered in-sight into how local community-based solutions can complement mainstream work in reaching those people who may not use traditional services and therefore be most subject to health inequalities.

- Reaching the Community

The development of a relatively simple yet effective database has been essential in assisting the programme to identify eligible families and measure up-take of services. This structured approach to making contact with target populations has enabled the programme to assess its reach and is probably unique to the area. The use of this technology along with feedback from local services has led to the identification of those groups in the Church Street area that have yet to be reached. These include, the white indigenous population who may feel that Sure Start is less relevant to their needs than other cultural groups, teenage and young lone parents, as well as fathers in general. A whole programme approach to address the issue of 'reach' has created an awareness of who is not accessing services and has resulted in some innovative strategies such as the fathers calendar (featuring pictures of local dads) produced by the outreach team.

Findings from both evaluations stress the importance of accurate reporting of data on ethnic origin. Much of this information is not available for analysis either as a result of non-collection, submission of country of origin rather than ethnicity, or lack of specific recording in accordance with census categories.

Analysis of the numbers of children born each month taken from the Community Information System (CIS) when compared the expected number of home visits at 8 weeks revealed that the actual number of contacts was significantly less than expected. These visits are important because they are often the first contact that new parents have with the programme. A new system of cross referencing and double checking information has been implemented with the aim of increasing the percentage of visits undertaken to 85% and beyond for 2003/4.

- Preventative Work

The Sure Start family therapist, social worker, health visitor, midwife and outreach team constitute an important core group of workers directing energy towards increased well being and crisis prevention. The children and families social work team report a reduction in referrals to the area and this is in part attributed to the work of Sure Start. Findings from the outreach team evaluation reveal a relatively small number of families who need high levels of support over time. With changes to the Sure Start referral process for families requiring 'support visits' it is recommended that a review be undertaken summer 2003 to assess impact on both local families and the services involved.

- Going to the Family

National research relating to speech and language therapy services suggest that home visiting can increase up-take of service, reduce non -attendance and help in targeting scarce professional skills at clinic. Benefits have been particularly apparent amongst families with English as a second language. This same beneficial trend has been noticed within the Westminster Sure Start, Church Street programme.

Going to the family helps practitioners to understand how a person/family lives and places specific requests for help in a broader context. Onward referral to other points of assistance may be forthcoming as a result of discussions about the home

environment, for example parent and child interaction and home safety. The only drawbacks reported relate to distractions in the home by other family members and up-take of hospitality that can diminish the time available for specific tasks.

- Using Natural Talents

Team members bring with them an array of personal talents and gifts that they have been able to develop and share with children and families. For example, some enjoy music and singing, others are good at creative thinking and multi-media. All of these abilities can be seen in many different aspects of the teams work. For example, in the design of activity cards at Fun Tots, the use of multi-media to capture parent/child interactions, views of local parents and images of community events. These skills may not have been central to the recruitment of staff but their presence has been an important factor in the design of some approaches to involve the community. Some excellent audio- visual materials explaining different aspects of the programmes work have been developed. The video they have made of Fun Tots featuring local parents is particularly note worthy as it explains in clear simple terms why learning through play is important.

- Reducing Professional Boundaries

Increasingly professional staff are moving beyond their traditional work boundaries and learning new skills involving community organising, creative problem solving, consultation and facilitation. This trend is being seen across health and social care disciplines and reflects the complexities of family life as well as the decentralised arrangement of many services. Sure Start practitioners not only have a mastery of their own areas of expertise but are encouraged to access multiple opportunities to meet as a team and to access joint training opportunities. For example, the Speech and Language Therapists have attended training in post-natal depression and in helping parents build strong and nurturing relationships with their children. Such training is designed to build upon the cross cutting themes of work being undertaken with children and families. The development of speech and language may involve dispelling myths about 'therapy', clinical environments and treatment replacing these with an understanding of the importance of play, social and physical environments that are part of a child's everyday experience. This kind of support involves good

clinical skills placed in the context of good parenting skills and an understanding of what social, economic or other forces support or inhibit this.

- *Parents as Partners*

The Parents Forum has been slow to gather momentum but seems to be heading back on track and there are other examples of parents becoming more involved in assisting Sure Start with its activities. Some parents have attended a personal development programme funded by Sure Start, which aims to develop their own skills and confidence. Many of these women have become parent representatives and taken other roles within the programme.

Parent representatives are part of the Sure Start board and further consideration is being given to how these meetings might be developed to maximise opportunities for their participation.

Section 7: Parent Feedback

7.1 Background

A survey of local parents with children aged 0-4 years was undertaken over a 2-week period during May 2003. Lessons learnt from the previous years exercise were incorporated into the design of the questionnaire, with an emphasis on finding out if parents considered local services had improved in the past 12 months and whether they had made a difference to children and families in the area.

7.2 Parent Involvement

The questionnaire was developed in partnership with a small group of Sure Start parents who joined a six - session course to develop local evaluation skills. Lucy Seifert, an external trainer who has worked with Sure Start previously, led the programme. Parents looked at their role as 'customers' of Sure Start, and considered different types of evaluation tools and when they might be used.

The course attracted a large number of parents who expressed an interest to join. The course commenced with 13 participants and was held at the Lisson Grove Health Centre. The outreach team, who had been instrumental in recruiting parents and facilitating practical arrangements over the lifetime of the course, provided a crèche. The 'evaluation skills' course will be written up with an intention to publish in one of the leading journals and a more detailed report will be contained within the 2003/4 annual review.

7.3 Questionnaire Design

Group members worked on a draft questionnaire based on the 2002 format, critiqued its contents and identified changes they wanted to see. A final draft was then prepared and piloted within the local community to ensure that parents were happy with practical arrangements and that any issues that had been missed were picked up.

Parents undertook the survey in pairs and were equipped with Sure Start balloons, leaflets and clipboards. Visual images such as the Sure Start logo, map of the

Church Street area and photographs of Sure Start staff and offices were used to support the questions being asked in the survey.

7.4 Personal Safety in the Community

All parents received input on personal and community safety provided by the Suzie Lamplugh Trust before undertaking the survey. A local protocol was also developed to ensure that all parents were safe whilst administering the survey at a number of Sure Start and local community sites. These included the local library, nurseries, Newpin, Portman Centre, Lisson Grove Health Centre and outdoor play areas.

7.5 Sample Size

110 completed questionnaires were returned to the Sure Start office by the closing date. This represents a sample population of 16%⁷ of families known to reside in the Sure Start area.

7.6 Population Profile

107 (97%) of respondents lived in the Sure Start area and had children aged 0-4 years. 90 (82%) were mothers of young children, 10 were carers/guardians, 4 were grandparents and 3 were fathers.

Figure 8 Ethnic Backgrounds of Respondents

White British	24
White Other	18 (16%)
White Irish	2
Mixed White Black African	2
Mixed White Asian	1
Mixed Any Other Background	3
Indian	1
Bangladeshi	5
Any Other Asian	2
Black Caribbean	4
Black African	10 (11%)
Any Other Black Background	1
Chinese	4
Any Other Ethnic	2
Not Specified	31 (28%)
Total	110 (100%)

⁷ This is calculated from baseline figures submitted with the Delivery Plan.

7.7 Key Findings

Awareness and Up-take

“My child loves the singing sessions at the library, a very enjoyable place”

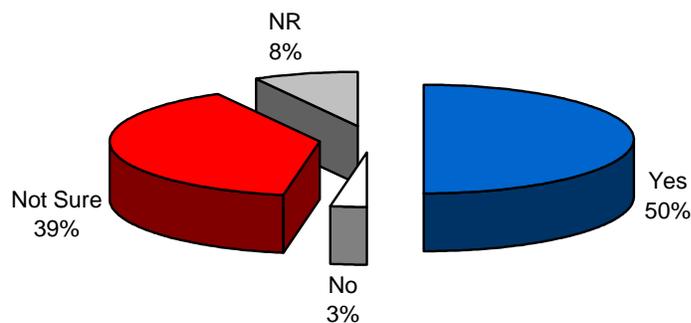
- 95 (86%) had heard of Sure Start and 89 (81%) of these parents said that they were currently using the services of the programme;
- 36 (33%) said that they had heard about Sure Start by word of mouth.
- 34 (31%) had heard through a local professional;
- 23% had heard through another source, Most frequently mentioned was the local church

Impact of Sure Start

“I see a general improvement in my child, always good at play and enjoys all the toys”

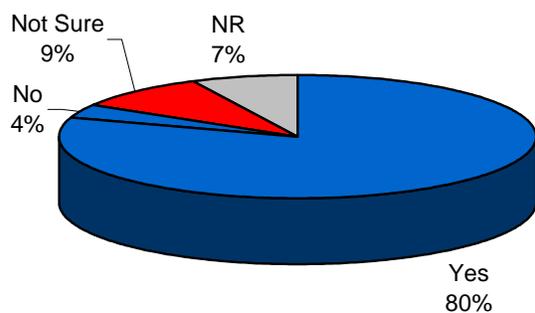
- Half (55) of all respondents believed services for children 0-4 had improved in the past year.

Have services for children 0-4 improved?

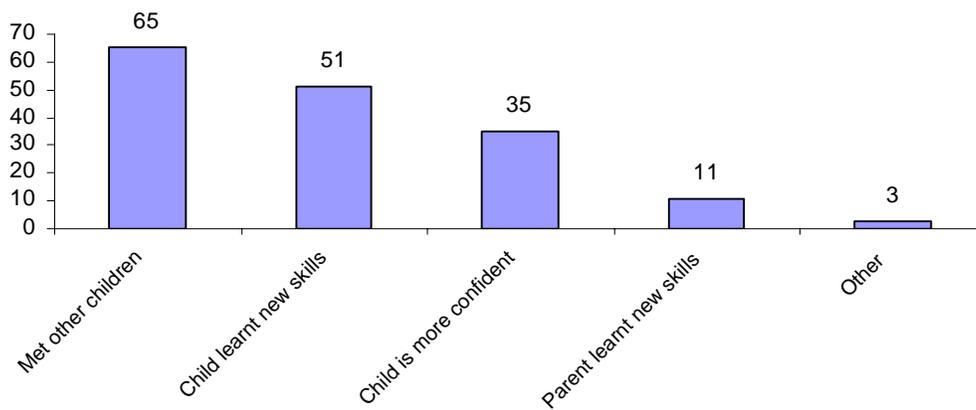


- 88 (80%) of respondents said that Sure Start had made a difference to their child. Almost 60% said that this was attributed to meeting/playing with other children, with almost half of the sample also noting that their child had learnt new skills.

Has Sure Start Made A Difference To Your Child?



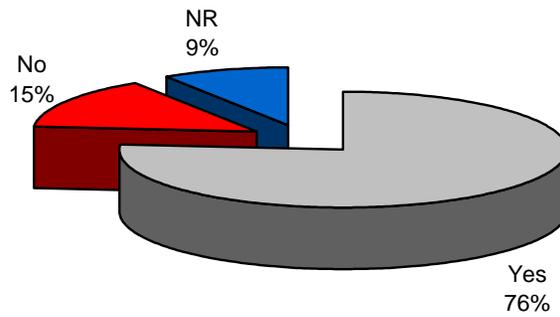
Sure Start Made a Difference because:



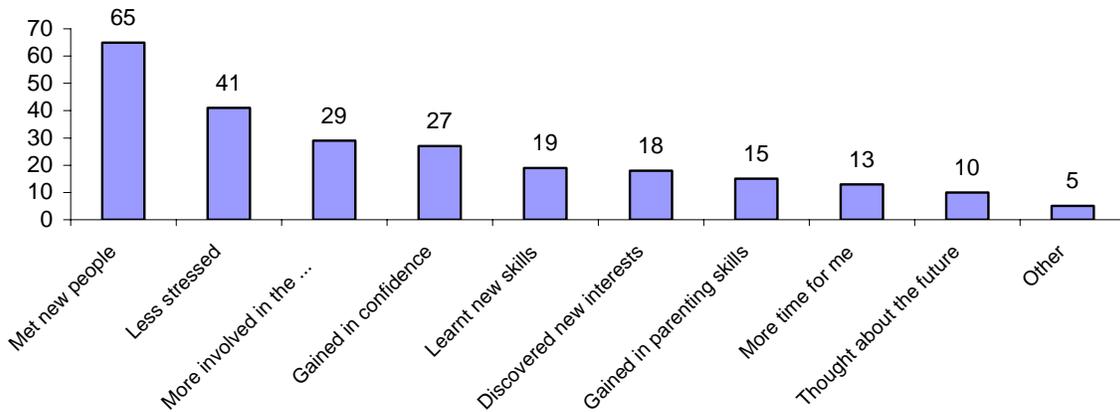
- 84 (76%) of respondents said that Sure Start had made a difference to them as a parent/carer. Almost 60% said that they had met new people and over a third of parents said that they felt less stressed.

Has Sure Start made a Difference to You as a Parent/Carer?

- 43 (39%) of respondents said they were unsure whether services had improved. Some parents seemed to find it hard to assess any improvement because they had no view of how well services were performing previously.



Sure Start Made a Difference Because:



Quality of Service/s

"I find all the Sure Start services excellent"

78% of respondents rated Sure Start as good to excellent. This is a 15% increase on finding from the 2001/2 survey.

7.8 Discussion

Knowledge of Sure Start and its services

Westminster Sure Start continues to have a high local profile with 86% of all people questioned having heard of the programme. A third of respondents said they had heard about services by word of mouth with almost the same number being informed by local professionals.

Details of services accessed by parents taken as part of the survey resulted in two specific references to the Outreach Team. With 65% of all 8-week visits achieved for Jan-Dec 02, numerous movement in and support visits, the number of specific references to this team would be expected to be higher. It may be helpful for the 2004 survey to contain a specific question on the initial visit for parents of children under one year to gauge the helpfulness of information and its delivery. However, the survey did produce information that demonstrated that parents knew about and accessed specific services by the Outreach Team. For example, 16 respondents said that their children had used Fun Tots and 81% gave it a 4 star rating of excellent.

Review of the completed questionnaires suggests that some local people are unable to distinguish between Sure Start and mainstream health and social services. For example, 7 parents gave a Sure Start rating to the local Health Centre and 11 to the Portman Centre for Early Childhood Learning. Both buildings are central to the Sure Start programme as bases from where services emanate or are delivered. Whilst it is right and desirable that Sure Start compliment and provide seamless services with mainstream colleagues, this will raise issues for evaluation, where it will be important to clarify the impact of the Sure Start services.

Analysis of data taken from completed questionnaires revealed significant under reporting of service usage by some parents. This was a trend identified in the 2002 survey. For example, a small number of parents (who left their contact details) are recognised on the Sure Start database as being multiple users of services whilst only registering use of one service when questioned.

Perceived benefits

Half of the parents questioned who considered that their child had benefited from Sure Start said that their child had learnt new skills. With such a small sample and some evidence of public uncertainty about which services are run by or in association with Sure Start it is not possible to attribute this solely to the programme. However, it is important to understand that Sure Start works upon the principle of a whole system approach to supporting children and families and the strength of the programme lies within this inter-relationship. Reported benefits should therefore be viewed as a result of the cumulative impact of Sure Start and its many partners.

Half of all the people interviewed believed that services had improved with significantly high percentages of parents recording benefits to themselves and their children. Interestingly, 60% of parents interviewed recorded that benefits had accrued to themselves and their children through increased social contact with others using the Sure Start programme. This once again highlights the importance of Sure Start as 'back stage technician' connecting children and families and providing places for them to gather and act as a mutual support network. Services and practical help are important but the informal supports that help people feel a sense of belonging and membership also play an important part in creating good health and a sense of well-being. Just over a quarter of all parents in the survey said that they considered themselves to be more involved in the community, 60% said they had met new people and a third felt less stressed.

Quality

39% of respondents were unsure whether services for children 0-4 had improved across the catchment area. Some people found the question hard to answer as it implied some previous knowledge and assessment of services or at least some kind of yardstick through which their performance might be measured.

78% of respondents rated Sure Start as good to excellent. This is a 15% increase on findings taken from the 2001/2 survey. Survey forms submitted by people new to the area have been highlighted and where contact details have been given contact by the programme will be made.

Service Development Issues

“Sure Start is doing very well but could improve”

Comments concerning future service provision suggest that:

- A significant number of parents would like to learn / develop computer and IT skills;
- A review of crèche facilities would be helpful in terms of comparing demand with availability of current places;
- Vocational training courses in learning practical work skills such as painting, decorating, tiling and other trades might be of interest to some fathers. The number of men in the survey was very small so some further assessment of demand and liaison with colleagues in adult education (including Learning and Skills Council) would need to be undertaken;
- A review of advertising and promotion of community/development classes could be helpful. Comments from parents included “ Communication to do with courses, more feedback and information needed” and “ [I am] unaware of courses that Sure Start runs;
- Provision of increased sports and leisure activities for men and women (separate) would be welcomed.

Further work to develop the skills of the local parent evaluators should also be undertaken. The programme now has a pool of local parents with an interest and some experience in this area which should be retained and built upon.

Section 8: Finances

Sure Start Westminster Actual Spend against Budget 2002/2003	Actual 2002/2003	Budget 2002/2003
Outreach & Home Visiting	<u>90,731</u>	<u>87,743</u>
Support for Parents & Families	<u>14,138</u>	<u>18,904</u>
Play, Learning & Childcare	<u>178,587</u>	<u>181,644</u>
Community Healthcare	<u>191,356</u>	<u>190,457</u>
Special Needs Support	<u>87,908</u>	<u>86,547</u>
Revenue Expenditure on Buildings	<u>0</u>	<u>0</u>
Management & Administration	<u>114,272</u>	<u>114,028</u>
Development & Evaluation	<u>41,581</u>	<u>41,677</u>
Additional Activities	<u>31,772</u>	<u>29,000</u>
Small Grants	<u>58,513</u>	<u>58,500</u>
Total Sure Start Costs 2001/2002	<u>808,858</u>	<u>808,500</u>

Sure Start Westminster Church Street is now fully utilising its budget from the Central Sure Start Unit. The revenue budget covers all local and community activities undertaken by Church Street for the benefit of the community. In addition, £58,500 of the underspend from the 2001/2002 budget was claimed to provide additional activities within the Church Street area.

SURE START CAPITAL EXPENDITURE 2002/2003	Actual 2002/2003	Project To Date
Setting Up Of Management Team for Project Operation	<u>£178</u>	<u>£14,924</u>
Equipping and Furnishing Toy Library at Portman Centre	<u>£33</u>	<u>£20,877</u>
Contribution to Children's Play Garden at Portman Centre	<u>£0</u>	<u>£60,000</u>
Equipping and Furnishing a Computer Suite at Portman Centre	<u>£12,633</u>	<u>£12,633</u>
Equipping and Furnishing Sensory Room at Portman Centre	<u>£3,002</u>	<u>£26,548</u>
Providing A Self-Contained Children's Area at Church Street Library	<u>£325</u>	<u>£23,561</u>
Development of Kitchen Area and General Care of 0-2 Year Olds	<u>£1,758</u>	<u>£46,999</u>
Providing An Outdoor Play Area for Toddlers at Lisson Gardens	<u>£4,000</u>	<u>£31,974</u>

The above is a summary of the second full year of expenditure on Capital Projects for Sure Start Westminster Church Street and a note of the full cost of projects to date. Other projects have been approved and will come on stream during 2003/2004 and beyond. They include: Fisherton Street Outdoor Play Area, Orange Park Play Area, Lisson Green Community Hall Indoor Facilities For Children and Outdoor Play Area, Lisson Grove Health Centre Baby Room. There is also a series of Small Capital Projects, which include Development of External Space at Church Street Library, a Pram Shed At The Church Of Our Lady, and Creation of a New Playground on the Hall Park Estate together with many other small community projects.

Section 9: Recommendations

The recommendations can be grouped under the following headings:

Community / Parental Involvement

- To prepare a summarised version of this review by, September 2003, for circulation to the community;
- To develop a framework for the recruitment of parents as volunteers within the programme. This will create opportunities for parents to gain new skills that may help them gain employment or entry to further education and it will also support the outreach team and other staff in their ever expanding roles;
- To repeat the community survey in May 2004, ensuring that issues raised this year will be built into its re-design and to ask a specific question about information given on the 1st Sure Start visit;
- To formalise closer links between the Parents Forum and Church Street Regeneration Forum and the user involvement group within Westminster Primary Care Trust.

Management

- To undertake a 'value for money' exercise by December 2003;
- To devise a local plan for involving more fathers within the programme;
- To improve the recording of ethnic monitoring data;
- The Board to monitor progress with overcoming the 'frustrations and obstacles' cited by Sure Start staff.

Service Delivery

- To review the impact of the social work post on working more closely with social services;
- To review the new system of referral meetings, as opposed to direct referral to the outreach team and assess whether families still have adequate support;
- To continue to work with Westminster Primary Care Trust on improving the uptake of the 1st Sure Start visit

- To review the number of crèche places and explore ways of ensuring more local provision;

Training / Group activities / information

- To improve the publicity of community adult education classes;
- To assess the need for vocational training;
- To explore ways of including some sports and recreational activities within the programme;
- To ensure that parents who requested IT classes, when completing the questionnaire, are contacted and offered classes.

Appendices

Appendices

Appendix 1 The Sure Start Services

The Sure Start Services actively delivering services

Parent and Carer Involvement team (outreach)

Employing organisation: Voluntary Action Westminster
Base: Portman Early Childhood Centre

The outreach team comprises of a parent and carer involvement co-ordinator, supported by four part-time outreach workers. Two of the workers speak a local community language. The team aims to ensure that all parents and carers of children under four participate in the design, delivery and evaluation of the Sure Start Westminster programme. The team also support and befriend isolated parents and carers, through home visiting, encouraging and enabling them to access new and existing services.

Dental and Oral Health

Employing organisation: Westminster Primary Care Trust (PCT)
Base: Lisson Grove Health centre

The dentist provides a surgery one day a week for children 0 – 3 years, and an oral health promotion worker provides outreach health education sessions in a variety of community settings. Both are aimed at improving children's oral health.

KIDs Home Learning

Employing organisation: KIDs
Base: Portman Early Childhood Centre

KIDs offer a home learning service. This is based on the portage model, and is targeted to families of children Under 4, who have significant developmental concern or a recognised disability.

Speech and Language Therapy

Employing organisation: Westminster Primary Care Trust
Base: Lisson Grove Health Centre

The speech and language therapists aim to promote language development through much earlier intervention and through the training of other community based staff, and to provide a service, which is more accessible to parents.

Midwifery

Employing organisation: St Mary's NHS Trust
Base: Lisson Grove Health Centre

The midwife aims to offer a framework of antenatal classes for parents, and more targeted interventions into families, who do not access mainstream midwifery services.

Health Visiting Team

Employing organisation: Westminster Primary Care Trust
Base: Lisson Grove Health Centre

The team comprises a health visitor, a nursery nurse and a family support worker. They aim to provide targeted interventions into families, where a health need has been identified. The health visitor is leading on developing a home safety assessment tool, developing a more consistent approach to the identification of postnatal depression and promoting extra support to breast-feeding mothers. The nursery nurse has established a crèche within Portman Early Childhood Centre to support the English as a second language classes.

Family Therapy and Child Psychiatry

Employing organisation: Brent, Kensington, Chelsea and Westminster Mental Health trust
Base: Lisson Grove Health Centre

A family therapist is employed to provide therapy for families, who have a range of needs, and are ready to engage in a therapeutic relationship to make changes in their life.

The child psychiatrist offers regular clinical supervision to the family therapist and other members of the Sure Start team as appropriate, and runs teaching workshops on topics relevant to the Sure Start team i.e. autism.

Literacy Development Worker

Employing organisation: Westminster Library Services, Westminster City Council
Base: Church Street library

The literacy development worker promotes the use of the library amongst families / carers, and is coordinating the implementation of bookstart plus.

Toy Library

Employing organisation: Marylebone Bangladeshi Society
Base: Portman Early Childhood Centre

The toy library is open 3 days a week to offer toys to borrow and a range of play / music sessions.

Lisson Green Nursery

Employing organisation: Westminster Children's Society
Base: Lisson Green Nursery

Lisson Green Nursery, with Sure Start funding, has developed 6 places for children aged 0 – 2 years.

Under 4s Drop-in

Employing organisation: Marylebone Bangladeshi Society
Base: Portman Early Childhood Centre / Church Street Library

The drop-in provides an opportunity for children to learn through play and for parents to meet other families.

Church Street Children's Centre

Employing organisation: Radicle
Base: Church Street Children's Centre

The centre offers a pre-school, and provides a crèche every afternoon, to support a range of group activities for parents.

Outreach Worker - childminding recruitment / Childcare development

Employing organisation: Westminster City Council
Base: Lisson Grove Health Centre

The outreach worker to recruit new childminders aims to encourage people to think about childminding as a job in their homes. Training will be provided. The worker is also developing the policy framework for the Sure Start crèches.

Community Coordinator Employability

Employing organisation: Westminster Adult Education (WAES)
Base: WAES at Amberley Road

This post was established in response to the new Sure Start target regarding a 'reduction in the number of households where no one is working'. The aim is to coordinate the local opportunities for parents, and to provide support to parents / carers returning to work.

Smoking Cessation Counsellor

Employing organisation: Westminster Primary Care Trust
Base: Lisson Grove Health Centre

The smoking cessation counsellor provides information, advice and counselling to pregnant women, and to the parent / carers of very young children. The interventions are either one to one or in a group setting.

Social worker

Employing organisation: Westminster City Council
Base: Lisson Grove Health centre

The social worker aims to provide support to families at an earlier stage than is possible in mainstream services.

Appendix 2 Examples from the Projects and Parents

Each Sure Start service was asked to give examples of their work and parental feedback.

i) Parent and Carer Involvement Team

Funtots

- The positive impact of Fun Tots, our creative sessions for parents and their children, 18 months-3 years, can be clearly seen in our videos, a copy of which is given to every parent and child who participates. The aim of Fun Tots is to encourage parents and carers to understand and enjoy their child's development, thus promoting secure attachments through play. Children learn through play and music and the arts are cross-cultural so everyone regardless of age, ethnicity or ability enjoys these groups.

Parent's comments:

- 'I most enjoyed being in a familiar environment watching the kids interact, singing and playing and participating in the activities.'
- 'I most enjoyed my daughters involvement.'
- 'I like the welcome song⁸, my babies always repeat it again and again.'
- 'Everything is excellent, especially the staff, they are very kind and I like their smiley faces. I enjoy the songs and stories and I want more and more sessions.'
- 'The time, I want it to be longer and if you could twice a week. I'm very grateful to all the staff and to all what they have done.'
- 'I thought the sessions were really good and well thought out. We enjoyed the welcome song and the whole experience. I wish the sessions were longer; maybe 1 hour 30 minutes?'

2nd Sure Start Visit

- When a member of the team went to re-visit a family for the 2nd Sure Start visit, the mother was very grateful and thanked her for sorting out her tenancy problems at the first visit. Things are good for them now, the flat is under their name and they are making arrangements to purchase the flat under the council's 'right to buy' scheme. These problems had been going on for 7 years before our interventions.

⁸ This is the Fun Tots song at the front of this review.

ii) Dental

Comments from a local parent

- ‘All staff are very friendly and helpful. My oldest son D always looks forward to his visit to the dentist. D had to have some fillings but was not distressed by any of the work being done to his teeth. It’s a shame I will have to find a new dentist soon as he will turn 4yrs in July.’
- ‘The toys supplied keep the children amused while they have to wait for their brothers and sisters. The rewards afterwards (e.g. Stickers, balloons etc.) are very much appreciated and appropriate.’
- ‘The advice given on how to clean the teeth of my youngest son M, was very useful. Using a little toothpaste and soft clean flannel or cotton wool instead of a toothbrush, while he was teething.’

iii) Oral Health

- As a result of the monthly oral health sessions at the Portman drop-in, a link was forged with one of the workers there and I organised an escorted visit to the Sure Start dentist for the users of the drop-in. This was to introduce the families to the concept of visiting the dentist as a preventive measure rather than reactive one. It was also to promote the Sure Start dentist, to enable parents/carers and children to familiarise themselves with a dental surgery and to dispel fears surrounding visits to the dentist. This was very successful and the worker from the Portman now takes her clients on a regular basis herself. A photo of the first visit is available should you like it.
- As a result of parents attending an oral health promotion session, they approached me afterwards to discuss their child’s needs. Upon examining the child, I noticed two dental abscesses in his mouth and was able to refer him to the Sure Start dentist immediately for a prescription. When I followed up with the surgery and parents in relation to the visit I was told that he had already been referred for extractions under general anaesthetic 6 months previously, however the family had not received an appointment. Therefore I chased up the relevant people to find out when he would be likely to receive one and to inform them of developments. They had no record of the referral - consequently I faxed a copy of it and explained what had happened. He received an appointment within 3 weeks.

iv) KIDS

- One child has in the last few months started to talk in one and two word sentences, in Arabic and English. He will imitate many words as we speak with him in our play together giving animal sounds and labelling the animals as we play with them. He has also become far more constructive in his play and has a greater level of understanding. Through this he has become more confident and the family are looking at a nursery place for him in the near

future. The family have also started to attend occasional sessions at the library and have attended the drop in at Portman.

- It has been great to have the opportunity to work with a Japanese family; the child I have been working with has Autism and attends a Japanese nursery. We have been teaching him how to use the Pac's communication system and he has learnt very quickly, all the cards have been written in Japanese when labelling the pictures, and some have been hand drawn so that they relate to what he uses and would ask for in Japanese.

The Speech and Language therapist has never had the opportunity of working with a child who has picked up the system so quickly.

Through using this form of communication the child has started to vocalise sounds and use some familiar single words e.g. "mum mum", "Pa pa pa", "Di" for drink and "Wowo" for dog. He has always been non-verbal until using Pec's.

He also asks for things independently using his folder of picture cards and has started to use and understand other cards in the system such as: a sentence card, a wait card and an I want card.

This child very recently has started to play alongside his sister more and will tease her and his mum by hiding something like a sticker on them and running away laughing, then letting them stick the same sticker on him and following on the game. He has increased his eye contact and awareness of those around him.

v) Health Visitor

Postnatal Support – the Sure Start Health Visitor offers support to mothers with babies who have scored high on the EPDS.

I received a message on my answering machine from Mrs C who was distressed, asking me to visit her.

On receiving the message I telephoned the mother who was sobbing and very distressed. I established whether it was convenient for me to visit the said afternoon. She was very keen for me to visit.

On my visit, Mrs C apologised for the distressed message left, but felt she was not coping with the baby and her three year old. She felt guilty of not spending enough time with her older child, yet she found her to be difficult and trying at times.

The baby was breastfed and had a good routine. Her flat was clean and tidy. Several factors came to the fore as we explored how she was feeling. We discussed some coping strategies for herself and ways of managing her older child. Her EPDS was 17. She agreed I visited her for six weeks and then review our progress.

Weekly visits were done and during the time we focussed more on mother's needs. At the end of the six weeks it was clear that the mother had made a remarkable progress. I terminated my work with her and left my card for her to contact me at any time if she needed further support.

Why did Mrs C contact me rather than her health visitor? Mrs C said she had been to the clinic several times and was not asked about her feelings or how she was doing, although she felt if asked she would have broken down. She felt an early visit from the health visitor at three weeks would have helped. She felt the clinic setting was not amenable to discussing personal issues.

I first met Mrs C when she attended a postnatal support group and a baby massage project I set up several years ago. By attending the group, she made several acquaintances and friends, with whom she continued to socialise.

One of her group friends, Mrs K, was referred to me with postnatal illness. The evaluation I received from Mrs K was very encouraging and positive. Mrs C was in regular contact with Mrs K, which encouraged her to contact me when following her postnatal illness.

Progress after six weeks of intensive work Mrs C said:

'The complete and totally objective support at all times. Lots of ideas and strategies to improve things at home. How immediate the response was. Initial contact with the Sure Start health visitor asking for help was quite difficult due to my feeling awkward. It wasn't easy to make the initial phone call even though I knew that the service was there. Better, having a health visitor see all new mothers at 4-6 weeks and at 8-10 weeks after birth with the sole purpose of assessing their moods. Far easier to see problems rather than waiting for the mothers to make a difficult phone call. An extremely useful service and invaluable for anyone needing support. The weekly input gave a focus to my mood and developing strategies to feel more in control.'

— A young mother came to the UK to spend time with a family and learn to speak English. She met a fellow countryman and they decided to live together. Within a year she had a baby.

I came in contact with her by obtaining the names of all new mothers from St Mary's Hospital offering breastfeeding and postnatal support. This young mother was very keen for postnatal support and requested that I come to see her as a matter of urgency. I visited her the next day. She lived in a cramped one roomed studio flat. Their bed was a sofa that opened into a bed at night. She was very young, immature and inexperienced. She had no friends or relatives and knew no one except her partner. She was afraid to go out on her own. She went out only when her partner could accompany her.

I offered the family practical, social, emotional and psychological support from August 2002- December 2002. After which she was sent back to Lebanon as her stay in the UK had expired.

Her English was very limited she said she was unable to express herself but was very grateful and happy. This is what she said about Sure Start health visiting service. "I found a lot of help for me. I can talk about things I worried about. The most important thing that if I had any thing even something personal they can support me, even like taking an appointment. I found a lot of help for my baby like things I didn't know and I learned a lot of things. I found everything from them helpful. They were more than parents because I was alone."

vi) Speech & Language Therapists

- X and his mother moved into the area and were referred to our service by the family's previous health visitor. The reason for referral was following concerns raised by my mother, nursery and the health visitor that X was babbling and not using any language and that mother was unsure how much he understood.

X was seen for an initial assessment at home by the team, and as well as mother being concerned about his language skills, there was also the bigger issue of his behaviour which mother was finding very challenging. This presented itself in the form of tantrums, hitting, kicking and pushing his mother and other children who came too close.

X and his mother were offered three home visits to focus on strategies for mother to use to build X's communication skills. During the three home visits several things came to light. The most important was the mental health of X's mother. She had experienced a traumatic upbringing and was estranged from her parents as a result and frequently experienced nightmares relating to these traumas. These would occur as often as 2-3 times per night when she would wake screaming which would in turn wake X, as they shared a room.

Further to this, it was observed that the interaction between X and his mother was often negative. Mother would use negative language to describe X and found it difficult to think of any good things that he did. There was little affection, verbal or tactile and mother used a lot of negative language with X, which often resulted in him displaying aggressive behaviour.

One of the team had attended Pippin training (Parents in Partnership Parent Infant Network), which is a programme in parent-infant education and support and it was felt that as well as focusing on building language skills which would alleviate any communicative frustration, working on the interaction between X and his mother was paramount, as well as providing mother with the services necessary to address her own mental health needs.

Time was spent with X and his mother working on specific aspects of their relationship, including

- Supporting mother to identify and verbalise positive features of his behaviour
- Facilitating her understanding/interpretation of X's verbal or non-verbal behaviour and encouraging her positive response to this
- Supporting her to reflect on her own parenting experience and how this is impacting on her parenting of X

Mother was also referred to the Sure Start Family Therapist, but was reluctant to take up this service as she had previously had input from the community health team and felt overwhelmed by talking about her experiences and had stopped the sessions.

Towards the end of our period of input, joint visits were arranged with the Sure Start Community Nursery Nurse who would continue to work with the

family to carry out a language programme and work on issues around toilet training and behaviour management.

After three sessions and the input from the Sure Start Nursery Nurse, the changes in the relationship between X and his mother were observed. X was using more eye contact, playing closer to his mother, looking at her and smiling and using less aggressive behaviour. His language skills had also improved. He was using more spontaneous single words and repeating single words and short phrases and his play and attention and listening skills had improved.

His mother was interacting with him in a much more positive way and was able to verbalise his successes and use strategies to set boundaries for his behaviour. As her anxiety regarding X was diminishing, she felt that she was able to go ahead with dealing with her own difficulties and as a result took up the service offered by the sure start family therapist.

- One of our initiatives is to produce a video showing children, parents/carers and families engaged in activities that illustrate the importance of early communication and interaction with their babies. We had produced posters expressing an interest in being contacted by families in the community who would be willing to be filmed for inclusion in the video and one of the first parents to contact us was a mother from Ecuador who had a 4-month-old baby.

We met her at home and filmed her talking, interacting and playing with her baby during a normal everyday routine, changing his nappy. We also spent some time talking to her about sure start and the facilities in the area for her and her family and she expressed an interest in coming to baby fun.

This initial contact was almost a year ago and she continues to regularly attend baby fun which she has described as *“... it is a good idea to play with children in a peaceful environment and with materials to develop the sensorial area, the language and the intelligence of the child. Thank you very much”*.

We also introduced Mrs X to the Sure Start Childminding Service as she had been looking, unsuccessfully, for a childminder who she could communicate with. The co-ordinator was able to introduce her to a Spanish-speaking childminder. It was also Mrs X's wish to return to full time study in order to be a special needs teacher and we were able to offer her training to learn Makaton, a gestural communication system widely used in nurseries and schools.

vii) Family Therapist

- Health Visitor – “I would like to interview you, as I have heard so many families say such positive things about your work”.
- Team Leader – Westminster Children's Services. “We hear your name often over here. People say very positive things about you”.

Below are the views of three Sure Start Parent's who attended the Webster Stratton Course:

- "I never understood the importance of talking and playing with my child"
- "This group has helped me to realise that I am not the only one in this situation".
- "After leaving the group yesterday, I was able to say no to my child for the first time, and she didn't die".
- "I have been working with Y since last year as I was having some problems with my daughters behaviour, and also I was having trouble building up my self confidence as a person and a mum. Since I have had help from Y I have found things much easier, the work I have done with her has been very very helpful for my daughter and myself there has been a big improvement in her behaviour and also in my confidence. I found very helpful kind and extremely east to talk to she has been very supportive through this period and has given me great ideas and advice on how to deal with the difficult behaviour of my daughter J and to improve myself and J's relationship. As I have said Y has been a great help to us and has continued to do so". DF

Work with Mrs X

Mrs X, a Palestian mother of 5 including one under five. When I began working with this family in 02.both Mr and Mrs X described themselves as depressed and physically unwell. The older children expressed concerns for their mother's mental health. They explained how she would often open the windows to the family's flat and scream, and would sometimes threaten to throw herself out of the window. Mr X was deeply concerned about his wife and she about him. When I met the family neither parent went out, other than to get the children to and from school, attendance at the Mosque and a trip to the supermarket. Mrs X cried buckets in every session whilst the children and their father looked worriedly on.

.....Later Mrs X attend Sure Start and other groups. Takes her children on regular trips to various parks. Has visited the Science museum, is learning computing and improving her English. Her children and husband reports that she no longer screams out the window or threaten to hurt herself. She now beams at the interpreter and myself each time we turn up and has gone from strength to strength. Both Mrs and Mr X has stopped complaining of various illnesses and Mr X now attends a variety of F.E. classes.

Mrs X's comments on the work.

"I found the work excellent. Y⁹ has taken me out of my depression and the situation I used to be in.

The children asked when is Y and H (the interpreter going to come again? I talk to my children about the session when they are not there. They can see how happy I am. The doctor referred me to the Refugee support group, but I did not find that helpful. I prefer the work Y has done with me and my family.

⁹ The family therapist

S. (The youngest child) used to be scared of people. Since Y has been coming S has got used to people. S has also settled in the Sure Start drop-in. She no longer cries. We now use the library, the drop-in and St. Paul's. We also use the parks and the Arabic group. Before your visit, I thought to separate from my husband, but since your visit, things are much better than before. I now know how to ignore certain behaviours and wait for my husband to calm down. Our life is much better now. All these changes are because of your work with us".

X went on to say that she wanted me to keep visiting, as I was her only visitor who does not want something from her, but just want to support her and her family.

viii) Literacy Development Worker

- The mother of 3 yr old X, felt that coming to the library has meant that X not only loves books, but is really prepared for nursery in terms of language and numeracy skills as well as being a socially confident child through activities like Fun Tots and the Bookstart drop ins. X is confident in choosing books and reading stories both on her own and with adults and family members. She uses books as a means of gaining pleasure and information. I have witnessed X learn to care for and treasure books. The mother also felt that her own language development had been helped through reading with X. When mother and child first became involved in Sure Start activities, the mother's language skills were very limited, as was her contact with other parents. Mother now feels confident to access Sure Start services and ask for help and support.

- Written by Mother of 3 yr old X:

"The free Books we have got are really fantastic gifts for my son. They are very popular children's books. Both my child and I like them very much and read them a lot. The Wednesday's storytelling and singing programme have brought us a lot of fun. We also make friends with others during the time. We hope that there may be some similar activities after school time."

ix) Community Co-ordinator, Employability

- A lone parent looking for work needed a childminder before she could begin work. The Job Centre lone parent advisor advised her on the benefits available to ease her into work. I arranged for a childminder, recommended by the Sure Start Childminding Development Officer to meet her during our employment drop-in at the library, this enabled both parents to gain employment
- The Job Centre agreed to pay for a childminder in order that a parent could join an ESOL class and improve her chances of employment. The money came from the Advisors Discretionary Fund, which is, as it says, at the discretion of the advisor up to the value of £300 per person, but is only ever available once in a person's lifetime.(Part of the fund can be used at a time for things such as new clothes for interviews).

x) Childcare Development Worker

- X is a young mother with a 2 year old attending a local P & T group I visited to talk about childminding. She told me she had applied the previous year but had not gone through with it because she didn't understand the forms and was worried about having to do a course.

She told me she was dyslexic and so she wouldn't be able to do a course and register as a childminder. Even the form was difficult for her. Her mother died when she was 16, and though married when I first met her, felt there was no one she could ask to help her. I helped her fill in the forms and reassured her that the course involved listening and participating in group work, but she didn't have to write lots of notes. It wouldn't be like being back in the classroom. She told me she always felt stupid at school and didn't get any extra help.

She became a very enthusiastic member of the group and completed the course. Her confidence grew and she began to think about doing the assignment. I visited her at home and observed a very relaxed and easy relationship with her daughter. During the course her marriage broke up and she was given considerable support from other members of the group and decided to proceed with her registration.

She completed her assignment. I typed it up with her from her bullet points she had written down and as she talked. She was pleased with the completed work and found it hard to believe that she had done it and on time. The internal moderator at WAES passed it in March and she has certificates of attendance at the course and the First Aid course proudly displayed in her kitchen.

She will in time receive a certificate from Cache for the accredited Introducing Childminding Practice and be able to pursue further training. Meanwhile she has had a successful visit from an Ofsted inspector and waits for the process to be completed. I am confident she will offer good quality childcare as a childminder.

xj) Smoking Cessation Worker

- No Smoking Day stall brought me in contact with a huge number of the community at once. All had different stories to tell. One young couple had just come from the doctor's surgery, where their pregnancy was confirmed. Fired up and highly motivated, the father noticed the stall by chance. I was able to discuss giving up smoking with him as he appeared keen to discuss this, especially as he was about to become a dad. Perhaps if he hadn't seen the stall, the moment would have been lost.
- I have been seeing a first time mother-to-be for almost 3 months now. Our first session occurred 4 weeks into pregnancy. She stopped smoking 2 weeks later. She is very happy at having stopped so early as 'this gives me one less thing to worry about.' and 'I know I am giving my baby the best possible chance'. This lady brought in her first scan to share with me. Her sense of achievement was clear to see.

Appendix 3 Reach Figures April 2002 – March 2003

Reach Figures April 2002 – March 2003

Table 1: - Children aged 0 – 3 seen by Sure Start Westminster

Month	Total Number of 0 – 3s seen	% Of total children seen¹⁰
Apr - 02	168	22
May -02	207	27
Jun - 02	187	23
Jul - 02	210	27
Aug - 02	179	23
Sep - 02	197	25
Oct - 02	230	29
Nov - 02	195	25
Dec - 02	180	23
Jan - 03	261	33
Feb - 03	267	34
Mar - 03	269	34

Table 2: - ‘New’ children seen each month by Sure Start Westminster

Month	Total number of new 0 – 3s seen	% Of new children seen
Apr - 02	60	60
May - 02	82	40
Jun - 02	48	26
Jul - 02	56	27
Aug - 02	66	37
Sep - 02	38	19
Oct - 02	59	26
Nov - 02	42	22
Dec - 02	28	16
Jan - 03	57	22
Feb - 03	57	21
Mar - 03	52	19
TOTAL	645	

¹⁰ This is calculated using the baseline data figure – 781 children

Table 3: - Families visited in the first 2 months of their baby's life in Sure Start Westminster

Month	Total number of babies aged 2 month	Total number of families visited	% visited
Apr - 02	12	6	50
May - 02	23	20	86
Jun - 02	26	14	54
Jul - 02	17	13	76
Aug - 02	28	15	54
Sep - 02	28	13	46
Oct - 02	22	18	91
Nov - 02	19	12	63
Dec - 02	16	8	50
Jan - 03	12	8	67
Feb - 03	24	13	54
Mar - 03	18	7	39
TOTAL	245	147	

Table 4: - Age breakdown of children seen

Month	Aged under 1	Over 1 but under 2	Over 2 but under 3	Over 3 but under 4
Apr - 02	39	38	61	30
May - 02	51	43	56	57
Jun - 02	47	44	54	42
Jul - 02	51	55	56	48
Aug - 02	47	45	56	31
Sep - 02	53	48	65	31
Oct - 02	54	53	77	46
Nov - 02	54	47	63	31
Dec - 02	39	36	63	42
Jan - 03	66	62	82	51
Feb - 03	55	66	87	59
Mar - 03	53	60	78	78
TOTAL	609	597	737	546

Table 5: - % Total non-white ethnic group

Month	SS Church St	London Region – R2	National – R2
Apr - 02	67	48	22
May - 02	72	42	17
Jun - 02	64	47	28
Jul - 02	56	48	22
Aug - 02	50	47	23
Sep - 02	57	54	23
Oct - 02	41	45	19
Nov - 02	38	46	19
Dec - 02	44	43	15
Jan - 03	49	42	16
Feb - 03	48	45	16
Mar - 03	51	46	15

Table 6: - Ethnic Breakdown of all children seen April 02 – March 03

	Apr 02	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan 03	Feb	Mar	Total
British	26	22	26	24	18	17	22	30	26	27	29	30	297
Irish	0	0	1	3	1	3	2	1	1	1	1	1	15
Other White	29	36	39	33	26	34	40	29	31	41	46	47	431
White/Black Caribbean	1	4	2	4	2	1	2	0	1	2	1	4	24
White/Black African	4	4	4	5	3	4	7	2	3	3	3	4	46
White/Asian	0	1	0	0	1	2	0	2	2	3	2	2	15
Any other mixed background	5	4	1	4	2	5	3	5	4	8	8	9	58
Indian	3	5	2	2	1	1	1	1	1	0	2	1	20
Pakistani	2	2	1	2	3	0	2	2	2	2	0	0	18
Bangladeshi	30	30	27	28	29	30	27	14	21	33	19	30	318
AO Asian Background	9	12	11	10	5	10	9	4	6	8	4	7	95
Caribbean	6	6	7	5	3	5	5	5	5	5	5	4	61
African	16	17	14	17	10	15	12	8	9	15	16	17	166
AO black background	1	0	1	0	2	2	1	1	1	1	1	1	12
Chinese	1	3	3	3	2	1	3	5	2	3	4	2	32
AO ethnic group	35	51	48	38	27	38	26	30	23	44	68	57	485
Not recorded	36			32	44	30	71	61	42	65	62	55	498
Total	168	207	187	210	179	197	230	196	180	261	267	269	