



**North Lowestoft**

**Annual Report**

**Year One**

**JANUARY 2003**

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# **1. Executive Summary**

## **Introduction**

1. This report covers the period August 2001 – December 2002, the formative period of the Sure Start North Lowestoft Programme, a Third Wave Programme. The main report is divided into five sections. The first looks at process and the second describes services and activities to date. The families are the focus of the third section, and the following section examines Programme barriers. Finally there are recommendations.

### **Evaluation:**

2. The Government is not prescriptive with regard to evaluation models other than they must cover process and service delivery. The method used here is a multi-method evaluation. Methods include semi-structured in-depth interviews; telephone, group and opportunistic interviews; observation and document analysis. Case studies are also being undertaken to provide longitudinal data and photographs and video evidence is also being used.

## **Section One: Process**

### **Programme Management:**

3. There is commitment to the Programme from most of the partner agencies involved and parent contribution at managerial level is considerable. However, there is some concern about the bureaucratic and repetitious nature of some committee meetings.

### **Parents' Group:**

4. Evaluation findings show that parents who attend this Group feel the meetings are of real value and that their voice is being heard. However there is a need to involve more parents.

### **Partnership Working:**

5. The partners generally voice the opinion that after initial frustrations, partnership working is improving and that the Programme has reached the stage where there should now be a focus on strengthening partnership relationships. There is a feeling of optimism about future working practices.

### **Mainstreaming:**

6. The Programme is working with a wide range of local groups and organisations to disseminate knowledge and good practice. The Programme is closely involved with two major initiatives, one of which has adopted the Sure Start model of service delivery.

## **Section Two: Services and Activities**

7. The Programme has provided a substantial number of services and activities, most of which were implemented after listening to the views of parents. Some of which are described below:

8. ***Objective One: Improving Social and Emotional Support***

- CONTACT is a family advocacy service for families with a child of any age with special needs. The evaluation of this service shows, to date, that there is a great need for it and the Programme is successfully attempting to meet some of this need.
- The Community Parents Programme is a peer support scheme for new and prospective parents living within the Sure Start area. Parents' wishes were that this programme should be delayed until January to allow for building alterations to new interim premises to be completed.

9. ***Objective Two: Improving Health***

- Mums-to-be and Beyond is a weekly drop-in for expectant mothers and those with babies. Interviews with families indicate high satisfaction. Unfortunately the Midwifery Service has had to withdraw the midwife from this service owing to lack of staff for the core service.
- Swimming Lessons for under-4s is the most popular on-going activity provided by the Programme. There is a qualified Swimming Instructor who is also a parent. Examples of benefits to children are improved confidence and ability to mix. Swimming Certificates have also been obtained.

10. ***Objective Three: Play and Learning***

- The Programme supports a Portage service which enhances an existing service. Comments received show that parent satisfaction with this service was high.
- Several 'event' days have been run during the holiday periods which usually have an art and craft theme. These have proved to be very popular.

11. ***Objective Four: Strengthening Families***

- Several courses, such as for parenting skills, have been run by Community Education, a partner agency. Their evaluation data indicates a high level of parent satisfaction. However numbers attending some courses were low and parent retention was an issue.

The Programme was involved in the town's summer carnival, which was a major success. Parents had complete ownership of this involvement in that it was their idea and it was followed through by them to a successful conclusion, with staff facilitating when necessary.

## **Section Three: The Families**

12. Many parents have been involved with the Programme since its germination period, and currently there are 210 families registered with the Programme. Of these, 47 parents are single and 10 have special needs. The 210 families have 247 children under 4 and, of these, 28 are children with special needs. Of the 210 families, 201 are registered as White British, 2 families declined to say and the remaining 7 are from ethnic backgrounds.

13. In the formative year consultation with children was undertaken by the Programme Librarian who consulted parents and their children on various aspects regarding the library.

14. Parents have been consulted on all aspects of the Programme throughout the year. In June 2002 we conducted a telephone survey with families who had registered with the Programme up to April 2002. This showed considerable satisfaction with the Programme.

15. The findings from a group interview with parents in December 2002 were that the Programme was progressing well and parent satisfaction was high. The main concerns voiced related to publicity.

**‘Hard to Reach’ Groups:**

16. How to engage ‘hard to reach’ groups is still a concern but the Programme has reached some ‘hard to reach’ individual families. It is noted that the majority of the population of families with children under 4 still have not become involved with the Programme and they are therefore by definition also ‘hard to reach’.

**Section Four: Barriers**

**Staff Recruitment:**

17. For most of its formative year the Programme has been understaffed. Recruitment of key posts proved difficult. In areas, such as Lowestoft, where core service posts are unfilled the arrival of a new Programme such as Sure Start can present a moral dilemma for existing core service staff. If they leave their post to join Sure Start it can be to the detriment of a core service to which they may have given many years of service and feel guilt at leaving.

**Accommodation:**

18. At the beginning of the Programme there were no dedicated premises and the Lead Body was only able to provide limited desk access. The Lead Body was also having difficulties in finding accommodation for its own staff. In September 2002, after considerable delays, a temporary building was purchased and the staff had to move in before the building alterations were complete. To date this work is still not completed although progress is being made daily.

**Finance:**

19. The Programme has faced difficulties with the establishment of the Accountable Body. For most of the formative year the Programme has relied on the good will of the Lead Body. However, recent appointments should mean that these difficulties have now been overcome.

**Section Five: Outcomes, Conclusions and Recommendations**

**Outcomes**

20. The Programme has achieved six SDA targets to date:
- 100% of families with babies are being contacted in the first two months of birth.

- Parenting support and information is available for all parents in Sure Start area.
- Parent representation on boards.
- Links made with Employment Services.
- Programme is working with EYDCP.
- There is access to good quality play and learning opportunities.

### **Conclusion**

**21.** Sure Start is a difficult programme to deliver because the way of working is not only radical in itself but it also covers a wide range of services which requires new ways of thinking and working for staff and agencies. Given the difficult nature of the remit and the lack of staff for a significant period, Programme achievements have been considerable and parental involvement is real as opposed to rhetoric.

### **Recommendations**

**22.** *Recommendation One:*

The Programme may need to recruit Family Support Workers to work with the Family Support Co-ordinator and an assistant for the Speech and Language Therapist. Also the need to appoint an assistant (s) for the Health Visitor should be reviewed later.

**23.** *Recommendation Two:*

The Programme should recruit an assistant administrator or buy in assistance on a regular weekly basis.

**24.** *Recommendation Three:*

The Programme should recruit a male worker to run a male carers group, with the Community Development Worker taking a facilitating role here.

**25.** *Recommendation Four:*

The Programme should ensure that the already formed 'Hard to Reach' Group meets on a timetabled regular basis, starting as soon as possible.

**26.** *Recommendation Five:*

A sub group should be formed with the remit to carry forward the Personal Development Plans and training programme envisaged for parents.

**27.** *Recommendation Six:*

A parent(s) should be invited to join the staff publicity group.

### **Final Comments**

**28.** The Regional Risk Assessment in November deemed the Programme to be medium risk and identified three 'risk' factors, two of which have since been addressed. It also noted three examples of good practice, all relating to parental involvement. The quality of parental involvement is one of the Programme's strengths. Its other strengths are a skilled and committed staff and willing partnership agencies. If the Programme can recruit a few more staff, and start to engage with more families, there is no apparent reason why it cannot move to low risk in the coming year.

# **Sure Start North Lowestoft Annual Report: Year One**

## **2. INTRODUCTION**

**2.1** This report covers the period August 2001–December 2002. Although it is the first annual report it covers 15 months as only limited activity was possible between the Programme launch in August 2001 and the end of that year - in essence just core staff recruitment. Throughout the report, the period August 2001-December 2002 will be referred to as the formative year and, for brevity, Sure Start North Lowestoft will usually be referred to as the Programme. It is a Third Wave Programme.

**2.2** The report is divided into five sections. The first looks at process – the ‘how’ of the project; the second describes the ‘what’ of the project – services and activities to date; the focus of the third section is the families; the fourth section examines Programme barriers and in the fifth we make some recommendations to assist with taking the programme forward.

### **Evaluation:**

**2.3** The government is not prescriptive with regard to evaluation models. Sure Starts are free to choose their own method within the remit that it must cover process and service delivery. Sure Start North Lowestoft has chosen to employ internal evaluators (part time) and we are using a multi–method evaluation process. Methods include: semi-structured in-depth interviews with parents and agency representatives at regular intervals over a three year period; telephone, group and opportunistic interviews; observation and document analysis. Case studies are also being undertaken over the initial three years of the Programme involving new families each year to give a richer and longitudinal view of ‘how it is from the street’. Photographs and video evidence are also being used. In keeping with Sure Start principles, in the second year parents will be trained in how to assist in the evaluation process.

**2.4** Some of the other agencies with which the Programme is working have existing evaluation processes in place. We check these at the outset of the activity and if we are satisfied that their system is robust, we use this secondary data rather than duplicate work. Other activities are evaluated by us.

### **Programme Vision and Perceived Barriers:**

**2.5** During the formative year of the Programme interviews were carried out with parents, staff and partner agencies. One of the questions asked related to their vision for the Programme. Answers fell broadly into two categories – concrete and abstract. For some respondents the vision was for something “real”, “tangible” and “visible” such as the proposed Community Centre and satellites. For others the tangible and visible related to parents being employed by the Programme and eventually running it. Some had a more abstract vision, their answers alluding to “community spirit that spreads

out”, “community empowerment” “a strong community”. However, no-one was ‘starry eyed’ about the Programme. All respondents recognised the difficulties associated with projects such as Sure Start and the most frequent answer to the question relating to barriers was how to engage parents, particularly those termed ‘hard to reach groups’ and how to sustain the involvement of those parents who did engage with the Programme. These concerns were set in the context of a concept referred to as the ‘Lowestoft disease’. This expression was used by parents, staff and agencies to describe something, which appears to be a mixture of apathy and disillusionment brought about by previous projects that failed to deliver and the general decline in the town’s fortunes. This, in effect, probably describes the feelings of dis-ease felt by many disenfranchised groups anywhere, and is not specific to Lowestoft, but nonetheless it feels real to the population, and it is against this backdrop that the Programme is set.

## **The Team:**

**2.6** By November 2002 the Programme had 16 members of staff - 11 full time, 5 part time (see Appendix 1 for a full description of posts). There are a variety of employment practices in place; secondment, direct employment, employment through a partner agency. This results in some direct line management and some dual line management. Some staff are based in the Sure Start office, some work from their ‘home’ agency’s premises, some work from home, some do a mixture of all of these. As this is a community programme, most staff are out in the community on a daily basis. These rather complex employment and working practices have a potential danger, that of a lack of communication. Interviews with staff indicate that they are alert to this danger; indeed it was their chief concern. Whilst many commented on the enjoyment of the “freedom” and “creativity” of their posts, most felt that freedom and creativity have to be within a framework of strong management structures and a clear internal communication system. At the time of writing this report, internal communication systems were being put in place.

**2.7** The team has weekly meetings to discuss Programme matters, and once a month the Programme Manager sets time aside to see individual members of staff. Staff development interviews are also carried out. Now that the full team is in place it has become necessary to also have core group meetings to ensure a coherent approach and avoid duplication. Any member of the team can attend these weekly meetings when necessary and raise issues.

**2.8** Staff interviews show that the team are deeply committed to the principles of Sure Start, so much so that for many of them this was the main reason for applying for the job. They are also committed to parental involvement at all levels and their eventual empowerment, which they see as essential to the sustainability of the Programme, while at the same time recognising how difficult this could be. The team is fully committed to achieving the goals of the Programme through partnership working and a multi-agency approach to service provision. In general staff have been well received when involved with other agencies. However, there have been one or two incidents where they received a negative response. Where this has occurred staff have taken a positive ‘let’s build bridges’ approach.

Figure 1 shows the extent of staff partnership working to date.



**FIGURE  
ONE**

**PARTNERSHIP  
WORKING**



*Breastfeeding Network  
Breastfeeding Support  
Clinical Psychologist  
GPs  
HIMP  
Children's HIMP  
Kirkley Clinic  
Local Health Partnership  
Midwifery Service  
Occupational Therapy  
Paediatrician  
Physiotherapy  
Speech & Language Service  
Suffolk Stop Smoking Service  
Teenage Pregnancy Forum*

*Job Centre  
Lowestoft Into Work  
New deal*

*AJS Services  
Lifelong Learning  
Company*

*Childcare Training Unit  
Community Education  
Educational Psychologist  
EYDCP  
Parent Partnership  
Portage  
School Nurses*

*Suffolk County Council  
Waveney County Forum  
Waveney District Council*

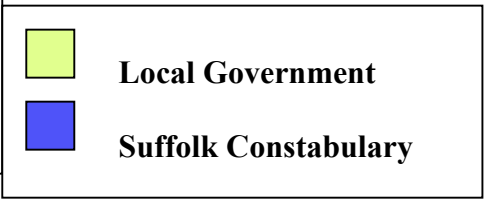
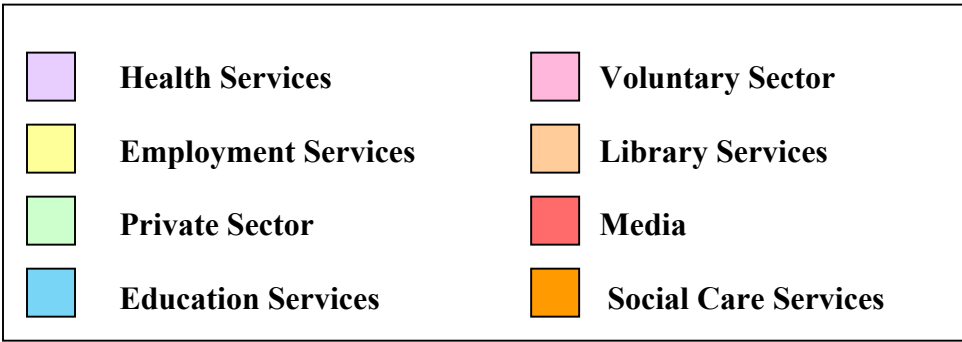
*Education Welfare Office  
Social Workers*

*Beach Radio  
Lowestoft Advertiser  
Lowestoft Journal  
Radio Suffolk*

*Beccles Toy Library  
Lowestoft Toy Library (now  
disbanded)  
Suffolk County Library Service*

*CONTACT  
Children's Society  
Domestic Violence Consortium  
Early Bird  
Family Welfare Association  
Flagship Housing  
Local Nurseries  
Local Parent & Toddler Groups  
Local Playgroups  
MENCAP  
NCT  
SAVO  
Shaw Trust  
Suffolk ACRE  
Volunteer Bureau  
Women's Aid  
WEETU  
YMCA*

*Suffolk  
Constabulary*



### **3. SECTION ONE: PROCESS**

#### **Programme Management:**

**3.1** Before the launch of the Programme in September 2002 it was led by a multi-agency Steering Group, with 5 parent members. The Group met on a regular basis. There were initial difficulties in establishing which agency should be the Lead Body, and which agency should be the Accountable Body. Key personnel also left the area at this time. Waveney Primary Care Trust (formally Lowestoft Primary Care Trust) was appointed as the Lead Body and it was agreed that Waveney District Council should be the Accountable Body.

**3.2** At the beginning of the Programme the Steering Group was discontinued and a management committee, the Partnership Board, was formed which has a strategic role and meets bi-monthly. Its key objectives are to:

- Oversee the overall direction of the Programme including resources.
- Ensure the engagement of parents and other stakeholders.
- Evaluate and monitor both individual programmes and the overall Programme.
- To be accountable for the finances of the Programme.
- Approve the delivery and the annual plans.

**3.3** Seven parents are currently members of the Partnership Board, one of whom is Co-Chair. In keeping with Sure Start principles, parents will eventually hold majority membership of this Board.

**3.4** The Implementation Group was also formed at the beginning of the Programme to consider process issues. Its key aim is to advise and inform the Partnership Board on development of the Programme. The members of this Group were elected by the Partnership Board. The Implementation Group meets monthly and has 5 parent members, 1 of whom is Chair (see Appendix 2 for a full list of agency representatives).

**3.5** Terms of Reference have been agreed for both the Partnership Board and the Implementation Group, and a Framework Agreement between all the key statutory agencies has been agreed by the partners. Child Protection Procedures are also in place.

**3.6** The Programme Manager attends both these committee meetings and produces a monthly progress report structured under the objectives of Sure Start. The minutes of the Implementation Group are sent to the Partnership Board members for information. One of the evaluators usually attends both these committee meetings, and they periodically provide feedback on the ongoing monitoring and evaluation.

**3.7** Inevitably there have been changes in the membership of these committees but these have been minimal. The chairing of the Partnership Board is shared alternately by an ex-leader of the District Council and the parent Co-Chair. The Chair of the Implementation Group is a parent and the Vice-Chair is the HIMP Manager for the Lead Body (Sure Start comes under the remit of HIMP). The two parents who chair the committees attended a training course before undertaking these positions.

**3.8** Our observation is that there is commitment from most of the agencies involved and parent contribution is considerable. Potentially, it could be difficult for some parents to contribute at the meetings, as this is such a new experience for most of them. Agency members are alert to this; nevertheless the reality can be different when there is a lively debate between vocal professionals. For example, parents felt that the original steering group was too health dominated and found this rather intimidating; this issue was addressed in future committee meetings. Recent interview data confirms that parents feel they do have a significant voice on the committees and that they are listened to.

**3.9** Whilst the committees are working well in terms of parent input into the decision making process, there is a feeling that there is general room for improvement. Latest interview data shows a consensus of opinion from parent and agency members that, at times, there is too much bureaucracy and repetition, for example, the Programme Manager's report and Parents' Group meetings are considered at both committees. It may be that the current structure was appropriate for the formative year, but possibly the time has now come for a shift towards the formation of more sub groups to discuss specific issues and move the Programme forward. This point is returned to under Recommendations.

**3.10** Two sub-groups do currently exist. One, the Buildings and Resources Group (formerly the Capital Group) has met on a regular basis and deals with issues relating to the new build and the satellites. This group has 4 active parent members. The group is currently considering all aspects of the Capital Plan including making decisions on who should project manage the Community Centre, negotiating with the satellite centre management groups, liaising with Waveney District Council over play areas, liaising with the public library over the toy library and overseeing the work at Milton Road (the Programme's interim premises). The second sub-group's remit is to consider the 'hard to reach' groups but has not yet met. This point is returned to under Recommendations.

### **Parents' Group:**

**3.11** The Parents' Group is the forum where parents have the opportunity to make formal decisions relating to the Programme. These decisions, for example, where to site the new build and play areas, whether to use European Funding in connection with the new build, what services to commission, are taken to the Implementation Group and Partnership Board via the parents who sit on all committees. The Parents' Group meets monthly at lunchtimes at different local venues. It started quietly with basically a core group of parents who have had long standing involvement with the project and membership has steadily grown. A free crèche is provided and free transport can also be provided if necessary.

**3.12** Evaluation findings show that parents who attend feel the group meetings are of real value. They feel their voice is heard and also enjoy the 'social' aspect of the meetings.

*We shared ideas  
I feel I have a voice here*

*You meet new families  
It is a way I can find out more about Sure Start  
The crèche is a great idea and eating together gives the children social skills*

**3.13** At the last meeting 16 parents attended, 13 female and 3 male. There is, however, a need for more parents to join. Parents and the Community Development Worker are currently planning ways to achieve this in the coming year. Ward based focus groups with members feeding into the Parents' Group is one idea under discussion.

### **Stakeholders' Forum:**

**3.14** The Sure Start remit is to involve 'parents and the wider community'. To ensure that the wider community has the opportunity to be involved with the Programme there are bi-annual evening meetings with local stakeholders (see Appendix 3 for a list of stakeholders represented). This is a discussion forum at which local stakeholders are kept informed of Programme activities and plans and they are invited to participate by taking the opportunity to inform the decision making process. Implementation Group members (at least two of whom are parent members) facilitate at these discussion groups. Useful contributions have been made to the development of the Programme by regular contact with stakeholders, for example, links with the Playbus and local nurseries.

**3.15** To summarise, at the end of its formative year the Programme has fulfilled all its obligations with regard to the formation of management groups and all necessary protocols and procedures are in place. The next section of the report moves away from the management aspect to a separate, but related, element of the Programme - partnership working.

### **Partnership Working:**

**3.16** Evaluation of partnership working is a government requirement. We will be carrying out a detailed evaluation of this aspect of the Programme starting in the third quarter of the second year, continuing until the end of the third year. However, as successful partnership working is key to many elements of the Programme, this has been a focus of our evaluation from the outset, and we shall touch on it briefly in this report. The following section is based on a summary of our interviews with agency representatives.

**3.17** Partner agencies' views were broadly positive although a few felt that there were some difficulties in the early months of the formative year, and there is still room for improvement. Several of the partner representatives have considerable experience of working with other agencies and there are a number of Service Level Agreements and protocols in place. However, there is also a history of some of the agencies not working well together in the past. There have been attempts to overcome this and an agency representative who was very sceptical at the outset of the Programme noted that a great deal of effort had been put into partnership working.

**3.18** Intra-agency as well as inter-agency difficulties were commented on. It was also pointed out that the Programme had to create its own model of working, as

flexibility is encouraged in individual programmes to respond to local need, but there is no laid down model for partnership working. In addition, it was felt that the reorganisation of several agencies, including the Lead Body, had worked against smooth partnership working to some extent.

**3.19** The view was aired, in relation to the Programme, that there needs to be a shift in thinking of the partner agencies from solving problems to facilitating. One interviewee recommended that agency representatives have training from community representatives so that they can better understand issues from the community perspective. Attention was also drawn to the fact that there is a danger of alienating the community if there is not enough action on the part of agencies and there is a danger of alienating the agencies if the community is only seen in terms of its problems.

**3.20** However - difficulties acknowledged - many positive comments were made by the partner agencies and the general view was that partnership working is beginning to work. Meetings are considered to be well attended with good input from the partners. There is a sense that people are working well together and for the community. In general it was felt that the right representatives were around the table and discussion was open, honest and business like. There was also considered to be good rapport with the parents. Many commented that the views of others are respected, in particular listening to the parents has improved, and there is good integration between parents and agencies in the more 'social' aspect of the meeting – the refreshment breaks.

**3.21** Several examples of good partnership working at strategic level were given:

- Agreement achieved between the parents and Waveney District Council on the separation of the new-build from the Sports Centre.
- Improved professional links with some of the other agencies.
- Recognition of other agency perspectives.
- Activities put on by other agencies and shared use of venues.

**3.22** To summarise, the partners generally voice the opinion that after initial frustrations, partnership working is improving and that the Programme has reached the stage where there should now be a focus on strengthening partnership relationships. There is a feeling of optimism about future working practices.

## **Mainstreaming**

**3.23** The Programme team has worked hard to involve itself with local statutory and voluntary group meetings already in existence in an effort to share knowledge of initiatives and promote good practice. Information about Programme activities is being regularly shared with a wide range of organisations.

**3.24** The introduction of the Sure Start programme to North Lowestoft has been particularly timely in view of the recent establishment of two local initiatives, the Waveney Family Support Initiative and the Suffolk Children's Futures project. Both of these projects are multi-agency and are seeking ways of developing and improving services for families in the area. The Programme team has been closely involved with

them to the extent that the Waveney Family Support Initiative is using a Sure Start model to develop and deliver its services.

**3.25** Having looked at the process element of the Programme, the report now turns to the second major aspect of the Programme – outputs. A look at what the Programme has achieved in terms of service provision is the focus of the following section.

## **4. SECTION TWO: SERVICES AND ACTIVITIES**

**4.1** Despite recruitment problems, which were not resolved until late in the year (discussed in more detail at **6.1-6.5**) the Programme has managed to provide a substantial number of services and activities, most of which were implemented after listening to the views of parents (see Appendix 4 for the full list of services/activities). It is not possible to describe all Programme services and activities in this report, but enough will be focused on in order to give a flavour of the work carried out so far. Services will be discussed under the Sure Start objectives, with evaluation findings.

### ***Objective One: Improving Social and Emotional Support***

**4.2** CONTACT is a family advocacy service for families with a child of any age with special needs. It is felt that having a child with special needs impacts on the whole family, therefore the criteria for receiving this service from the Programme is to have a child under 4 in the family who may or may not be the child with special needs. CONTACT is one of two special needs services provided by the Programme, the other being Portage (see **4.10**). CONTACT offers individual families help in practical terms, for example, with claims for disability benefits as well as providing general advocacy and emotional support. There is also a weekly family ‘drop in’ held at a local Community Education centre. The CONTACT Family Advocacy worker is employed by the Programme for twelve hours a week so the number of families she is able to support is limited. To date, in the Programme area she is supporting 5 individual families on a regular basis and attending the weekly ‘drop in’ to offer advice and support. The evaluation of this service is on-going and so far shows that that there is great need and the Programme is successfully attempting to meet some of this need.

**4.3** A key service for Objective One is the Community Parents Programme. This is a peer support scheme for new and prospective parents living within the Sure Start North Lowestoft area. In keeping with the Sure Start ethos, it has a community led agenda, which acknowledges the wealth of skills, wisdom and experience held by parents, all of which are developed by the programme. Following completion of the programme, the Community Parents will visit local families to offer peer support via one antenatal visit with two planned postnatal visits within three months of the birth of the new baby, with a further follow up visit at around the time that the child would be eighteen months of age.

**4.4** The focus of the home visiting is threefold:

- To provide information about local facilities.

- To facilitate an increase in the uptake of local services for families, via advocacy work.
- To identify the needs of the local community and perceived gaps in the current provision of services and to enable the community, with the support of the Community Parents and the Sure Start North Lowestoft Team, to facilitate and establish new groups to close these gaps.

**4.5** Community Parents will also have the opportunity to access a learning environment and will be positively encouraged and empowered to explore personal possibilities available to them. This Community Parents programme has been delayed by the Programme's move to interim premises. The room designated for the training required additional building work and parents made the decision to wait for this to be completed rather than have training elsewhere as they felt 'in house' training would make them feel part of the Programme team. The course now has a start date of 24<sup>th</sup> January 2003 with 6 parents, who were interviewed for the places. A further 9 parents have put their names down for the selection process for the next course.

### ***Objective Two: Improving Health***

**4.6** Mums-to-Be-and-Beyond is a weekly drop-in for expectant mothers and those with babies. It is an informal two hour session where those who are pregnant, and those who have had a baby recently, can chat to each other and to a midwife. Mothers are able to bring children up to 4 years old as well, which provides a good play opportunity for them. This was an existing service, which has been enhanced by the Programme providing toys and staff. Unfortunately, in November, the midwifery service announced that it had to withdraw the midwife from the sessions due to lack of staff in the core service. Thus, at the time of writing, the Programme is in the process of deciding how to proceed. This withdrawal has come at an unfortunate time because the sessions started off slowly with low numbers attending but it has now started to grow considerably. The service has not been formally evaluated yet, as it was felt to be too early and needed development time. However, opportunistic interviews with families indicate high satisfaction, with parents enjoying the informality of the setting, which enables them to meet other parents and receive and share information. As one mother put it:

*It's brilliant; there is so much support. I've only been here 3 months so it's great for me to meet people. I'm an older mum and I think it's particularly good for young mums. Some feel isolated and Mums to Be is really good for them.*

**4.7** Swimming Lessons for under 4s is the most popular on-going activity provided by the Programme. The sessions are regularly full (20 people in the pool) with a waiting list at times. This service started as one session a week but proved so popular that it is now twice weekly. A small, warm, shallow pool at a local school is used and parents have to be in the water with their children. A qualified Swimming Instructor, who is also a parent, is in the water and attends both sessions.

**4.8** Evaluation of the swimming sessions shows that parents found the venue particularly suitable because they felt the pool and the grounds of the school were very safe. Every parent at the evaluated session commented on their child's improved confidence in the water. One also commented on their child's improved ability to mix

and how she was now overcoming nervousness with others. Non-verbal signals from children, for example big smiles, happy faces and squeals of joy in the pool, also indicated the success of these sessions.

**4.9** There have been other benefits to this service. Some children have achieved Levels 1 and 2 Duckling Swimming Certificates and have therefore enhanced their swimming skills - no bad thing in a seaside town. Also, this service (above all others currently provided) is attracting 'hard to reach' parents and we have observed bonding between some children and their parent in families where there are known difficulties. This may be because of the eye contact being made by parent and child with both being in the water, and the 'pleasure' of the occasion.

### ***Objective Three: Play and Learning***

**4.10** As stated earlier, in the field of special needs the Programme supports a Portage service by funding a full time post, enhancing an existing service. A total of 14 Sure Start area families have so far received Portage, with 10 currently active and a waiting list of 4 families. Parents attended the annual review meeting with management, and comments received show that parent satisfaction with the service was high:

*I am really satisfied with the service  
The activities are always at the right level for him  
...a fantastic job and we will still do all the things we have learnt from Portage*

Our interview data confirms the positive views, "blinding" and "excellent" were comments received.

**4.11** Holiday times can be very fraught for some families. Holiday activities are one of the most frequently requested services, particularly something to which older children can come. Parent's views are captured in this one quote:

*The holidays are hard, that's when you want the help...three of them on your own is hard...what can you do with them...it's dear with three...you can't go to something for only under fours...where do the older ones go...I mean you can't leave them at home can you*

**4.12** In response to this need the Programme has run several family 'event' days at local venues, funded by the New Opportunities Programme. These sessions usually had an art and craft theme relating to the holiday period, for example, an Easter or autumn theme. Some of these sessions attracted over 60 parents and children. The Programme has also organised day trips, again very popular, and funded a local playgroup to stay open during the holiday period.

### ***Objective Four: Strengthening Families***

**4.13** Under this objective, several courses, for example courses in confidence building, parenting skills and IT, have been provided by Community Education (a partner agency). Their evaluation data indicates a high level of parental satisfaction with the courses provided. Their end of course evaluation forms contained many positive comments, with no negative comments regarding the courses. Also, all the



parents who completed the courses achieved a 'satisfactory learning outcome'. Telephone and opportunistic interviews, carried out by us with the parents, supported these findings.

**4.14** However, numbers on some courses were low, retaining the parents once they had started the courses was difficult, and the same group of parents attended several of the courses. The latter point is not a problem in itself because it shows that some parents have acquired the 'study habit'. This is a positive element of capacity building. The issue here is one of numbers. Community Education is aware of these problems and has raised the issues of timing, commitment to free courses and the need for additional practical support for some parents. Parents have also raised similar issues. How to resolve these matters is currently being addressed by the Programme Manager, the Training and Employment Co-ordinator, Community Education and the Parents' Group. The Training and Employment Co-ordinator has several suggestions to address the concerns, some of which are shown in Appendix 5.

**4.15** The involvement of the Programme in the Lowestoft summer carnival was a major success, which also covered several objectives. Parents had complete ownership of this involvement in that it was their idea and it was followed through by them to a successful conclusion, with staff facilitating when needed. Parents held meetings to discuss a theme and decided on a float that reflected some of the services provided by the Programme to date, for example, swimming, first aid and healthy eating courses. The families threw themselves into this event with gusto. Parents and children made costumes and float decorations relating to the themes. One father collected and drove the lorry and another dressed up as Donald Duck. Parents, staff and children decorated the float, staff sat in it (insurance regulations) whilst the parents, with children of all ages, walked, ran and danced alongside the float collecting money for the local hospital. All parents, children and staff were adorned with Sure Start tee-shirts and there was a genuine community spirit.

**4.16** Apart from the actual sense of achievement parents felt that:

*It was good publicity because the carnival was in the Sure Start area*

*There was a good community spirit*

*The children got a lot out of it and recognised importance of helping others*

All the hard work was suitably rewarded when the float won 3<sup>rd</sup> prize, quite an achievement given that from idea to realisation was just 5 weeks.

## **5. SECTION THREE: THE FAMILIES**

**5.1** There are 210 families registered with the Programme as of 31 December 2002. Of these, 47 parents are single and 10 have special needs. The 210 families have 247 children under 4 and of these 28 are children with special needs. Of the 210 families, 201 are registered as White British, 2 families declined to say and the remaining 7 are from ethnic backgrounds. The figure for ethnicity is low, but this must be viewed in context. Lowestoft has a low number of families from ethnic backgrounds. Estimates produced by Suffolk Support Services based on 1991 Census-based projections give a figure of 138 people from ethnic backgrounds living in the Delivery Plan's Sure Start wards. This is 0.77% of the area population. The 3% of

ethnic families registered with the project is therefore a fair representation of ethnicity in the patch.

### **Initial Involvement**

**5.2** Many parents have been involved with the Programme since its germination period, that is, prior to Sure Start North Lowestoft receiving its funding and the August 2001 launch.

**5.3** The initial consultation process of two meetings took place in September and October 2000, which 788 people attended. A picture emerged of considerable parent concern around issues affecting children under 4 and the wider community (see The Delivery Plan, 2001, p.11 for an analysis of the *Planning for Real* report). Following this consultation the Delivery Plan was written with input from the parents. Parents also wrote the Vision Statement which outlined the following vision:

- A Community Centre to house community needs.
- Play areas that promote play.
- Pavements that can be walked on.
- Easier access to health visitor/services.

### **Continuing Involvement: Children**

**5.4** In December 2002, several Programme staff attended a workshop on how to consult young children and child consultation will form an active part of Year Two. In the formative year the main consultation with children was undertaken by the Programme Librarian who widely consulted parents about a variety of aspects regarding the proposed toy library, and parents and their children (35 in number) were consulted about soft furnishings. Interestingly, the parents' first choice for a rug was the children's least favourite - with Cat winning out over Once upon a Time. There was parent/child consensus over the floor cushion design - Giraffe beating Crocodile by a near 2 to 1 majority (see Appendix 6 for fuller details).

### **Continuing Involvement: Parents**

**5.5** Throughout the formative year parents have been consulted on all aspects of the Programme. Apart from their committee roles they are involved in writing job descriptions, and short listing and interviewing applicants. Their views are sought on a variety of matters through evaluation sheets, questionnaires, opportunistic and formal interviews. Partner agencies have also consulted parents. Apart from the library consultation they also took part in a survey carried out by the District Council to ascertain their views on play areas. In addition, we have carried out satisfaction surveys, the results of which are outlined below.

**5.6** In June 2002 we conducted a telephone survey. The intention was twofold:

- To update registration data.
- To ascertain views on how satisfied parents were with services to date, and what further services would they like the Programme to provide.

The group targeted was the 75 families who registered with the Programme from January – April 2002. The families who registered after that date were not included because it was felt to be a little too soon to seek their views. Of the 75 families, we were able to contact 47 by phone. (NB Regular Parents' Group members were not included in the survey.)

**5.7** Findings show that:

- Over 70% of respondents had received the newsletter. The rest were either not sure or said they had not received one; 99% said they were receiving information from Sure Start on a regular basis.
- 85% of families said that there had been an improvement in services for children under 4. Several specifically commented on better holiday provision and information in general. However, several also commented that improvements were only from Sure Start; they had not noticed any other improvements.
- 83% of families had attended at least one Sure Start provided service. Of those that had not attended an event, the main reasons given were that the parent was at work at the time of the activity or day/time was not suitable.
- A small number of families had attended the Parents' Group meetings. Reasons given for not attending the meetings ranged from not knowing about them, to knowing about them but being unsure what to expect and therefore reluctant to come. Only a handful of parents said they would never attend because it was 'not their thing'.
- 47% of households had at least one smoker (4 smokers in one household was the maximum).

**5.8** The services parents requested were:

- Education/Training Courses in general, to get the "study habit"
- Course with a focus on helping people to obtain employment
- Computer Courses
- Parenting Courses for parents with child/children with special needs
- More holiday activities
- More outings
- Music sessions
- Baby massage
- Free/cheap home safety equipment
- More things for fathers

**5.9** In addition, many parents voiced concerns about two issues in particular; the poor quality and lack of outdoor play areas, and dog mess – the same concerns which were voiced at the initial consultation process some two years earlier. Several also commented that publicity about the Programme was poor. A number of parents told

us that they knew of families who would not 'join' Sure Start because it is for "poor people" or those "on benefits". However, there were many positive comments about the Programme, represented by the following quotes: "fantastic" "brilliant" "lovely" "really, really good" "excellent" "it's all great" "you cover a lot" "Sure Start's the best thing ever".

**5.10** Opportunistic and case study interviews confirmed these views and for some parents the Programme is providing something more than good services. Several interviewees made comments that can be summed up in the quote:

*It's something to go out the door for*

That Sure Start is beginning to become important in families' lives is also evidenced by extracts from the following unsolicited letter:

*...in the last days of 2001 I was very upset...but I was very lucky because...I met the Sure Start Co-ordinator ... and everything was going to change for me...One year later I am very busy with Sure Start's activities...my diary is full...I have found good friends...now I feel happy...my family does not live here... Sure Start is my new family in this country...*

**5.11** In December 2002, a group interview was held with the 16 parents at the Parents' Group. There was general consensus that the Programme was 'on track' but some concerns were expressed. It was felt that information was not reaching parents in time and that publicity was still poor. The Programme Manager is aware that publicity has been an on-going problem and has formed a core group of staff to improve the situation with one member of staff appointed as publicity officer.

**5.12** Apart from the two issues above, parent satisfaction was high. Swimming sessions, holiday activities for all ages, the IT course, the arts and craft course and Mums-to-Be-and-Beyond were singled out for praise. The arts and crafts course was not only popular, but also illuminating, as several parents discovered a previously unrecognised talent for design.

**5.13** The general feeling was that, compared with the same time the previous year, the Programme had really progressed:

*Things have snowballed  
There's activities taking place at lots of different places  
This time last year it was just the Christmas party, this year there's all sorts  
It's great to have all the staff in place, more people will get to know about it  
[the Programme]  
It's nice that more bids are coming in from local people  
It helps that Sure Start now has its own office, people can come in and talk to the staff  
about things*

**5.14** Clearly the broad view from parents is positive, but this must be put in the context of the general engagement of parents. Whilst the Programme has registered 210 families, this represents 26% of families in the catchment area. How to engage 'hard to reach' families is an issue the Programme has to address, and we now turn to this subject.

### ***'Hard to Reach' Groups:***

**5.15** The Regional Office has identified several groups whose needs may be less well met.

These are:

- Fathers
- Black & minority ethnic groups
- Young mothers
- Disabled parents and children
- Gay and lesbian families
- Asylum seekers/refugees/travelling families

Based on the literature, our interviews and observation we would add the following as 'hard to reach' groups:

- Families with mental health problems
- Parents with low educational attainment/low level basic skills
- Families in which there is violence
- Families in which there is drugs/alcohol misuse
- Families in which there is criminality
- Families that are disillusioned/distrustful/fearful/suspicious of authority (or its perceived representatives)
- Families where there is low self esteem/shyness/apathy/isolation

The last two categories were identified by several interviewees as a barrier to the Programme reaching successful outcomes. Interview data confirms that isolation is an issue, particularly for the more vulnerable families:

*All I want is a friend...someone to come round once a week...  
I've lived here... years and have no friends, they don't want to make friends with you  
It is hard to make friends in Lowestoft...I have lived in other places so I can tell...it's  
definitely harder here*

**5.16** As stated earlier, the Programme is not, as yet, having a great deal of success in reaching the above groups in significant numbers, although it has reached some individual families. Of course, in the formative year of a Programme this is to be expected to some extent and both the Programme team and the management groups are aware that this aspect of the Programme requires action.

**5.17** Some work has been done, for example, the Programme funded a Positive Dads initiative by a partner agency and whilst this was successful at the level of publicity and awareness raising, it went no further and to some extent was counter productive in that it raised awareness but did not deliver anything, thus possibly adding to the symptoms of 'the Lowestoft disease' mentioned earlier.

**5.18** The Community Development Worker has the remit to develop a male carers' group. However, she has such a wide remit that she needed to prioritise her workload for Year One and, other than 'sounding out' male carers periodically, she has not had

the time to take this further. Given that her workload is not likely to decrease in Year Two it is difficult to see how she will be able to take this forward. We return to the topic of a male carers' group under Recommendations.

**5.19** There has been a concentrated effort to recruit ethnic families, although it must be noted that there are no ethnic groups as such in the Programme area, just individual families from different ethnic backgrounds. Using the area NHS database, 28 families were identified as possibly being ethnic families. Further enquiries revealed that only 9 of these families were from ethnic backgrounds. All homes were visited by team members, some specific needs were identified and 7 families are currently registered with the Programme, 4 of whom are accessing services on a regular basis.

**5.20** In terms of those who are 'hard to reach', as mentioned previously, there are also the majority of families in the Programme area in that some 210 have registered with the Programme but approximately 600 have not. This is despite receiving regular information about the Programme delivered to them directly through their letterbox in the form of the Newsletter. That the majority have not registered with the Programme means that they are also 'hard to reach'. Many of these families, of course, will fall into the categories identified at **5.15**. In an attempt to address the lack of engagement of the 'hard to reach' groups a sub group of the Implementation Group was formed. As yet it has not met and this point will be returned to later under Recommendations.

**5.21** In sum, parent involvement is at the heart of the Programme. Figure Two shows benchmarks for parent involvement using a model adapted by us from the *Humberside Community Participation Model*. In some of the categories the number of parents is low but nonetheless it is encouraging that in all but two categories the answers are positive. This model will be used by us as a tool for evaluating parent involvement in extent and nature throughout the rest of the Programme. Parent evaluations of services are in the main positive and, as with partners, they are feeling generally optimistic.

## **6. SECTION FOUR: BARRIERS**

### **Staff Recruitment:**

**6.1** For most of its formative year the Programme has been chronically understaffed (and thus under spent). Recruitment of key posts proved difficult. For example, initially there were no applicants for the Health Visitor post or Speech and Language post and there was months of delay getting a job description agreed by partners for the Family Support Co-ordinator post.

**6.2** Lack of applicants raises an issue common, no doubt, to other Sure Starts. In areas where core service posts are unfilled the arrival of a new Programme such as Sure Start can present a moral dilemma for existing core service staff. If they leave their post to join Sure Start it can be to the detriment of a core service to which they may have given many years of service and feel guilt at leaving. Given that the core provider will also be expected to then be a willing Sure Start partner highlights a tension between the ideal of Sure Start and the 'on the ground' reality.

**FIGURE TWO: BENCHMARKS FOR PARENT INVOLVEMENT**

<b>PARENTS' IDEAS INFORM THE PROJECT</b>	Yes - parents' ideas informed the project prior to launch and continue to do so.
<b>PARENTS AS USERS OF SERVICES/ ACTIVITIES</b>	Yes – parents are accessing services on a regular basis.
<b>PARENTS AS MANAGERS/DECISION MAKERS</b>	Yes - parents are on the Partnership Board and Implementation Group.
<b>PARENTS AS VOLUNTARY PROJECT WORKERS</b>	Yes - parents have delivered the Newsletter and questionnaires.
<b>PARENTS WORKING ALONGSIDE TEAM MEMBERS</b>	Yes -- parents have worked with project manager on job descriptions, shortlisting applicants and sat on interview panels. Parents have worked with staff on a Family Support Working Group and Community Parents Working Group. One parent has received funding to set up music sessions and a member of staff will be working alongside her.
<b>PARENTS WORKING AS PAID EMPLOYEES OF PROJECT</b>	No.
<b>PARENTS RECEIVING TRAINING</b>	Yes - parents have received training in committee skills and two are on accredited courses in childcare.
<b>PARENTS AS POLICY FORMULATORS</b>	Yes - parents sit on the Partnership Board.
<b>PARENTS AS POLICY DESIGNERS</b>	Yes - parents were involved in the creation of the Delivery Plan. Parents' evaluation of services informs future design.
<b>PARENTS AS POLICY IMPLEMENTORS</b>	Yes - parents sit on the Implementation Group.
<b>PARENTS AS EVALUATORS</b>	Yes - parents are involved in the design of evaluation forms.
<b>PARENTS AS BUDGET HOLDERS</b>	No.

*Adapted from the Humberside Community Participation Model*

**6.3** The full team is only just complete so there has been considerable delay in working towards Programme milestones, particularly in the area of mental health services. Recruitment problems were the main reason the Programme was designated high risk at the six month Risk Assessment Review carried out by the Regional Office.

**6.4** Lack of staff also made it difficult to contact families on the NHS database. It was felt that they could not be contacted *en masse* because staff could not have coped with the response. Sure Start areas have a high percentage of very needy families and if a large proportion of them had engaged with the Programme it would not have been able to meet their needs. Expectations may have been raised only to be dashed. As this has happened in the past in Lowestoft, the Programme Manager was particularly conscious of the Programme's responsibility here.

**6.5** However, the Programme's recruitment problems were eventually overcome. In keeping with Sure Start principles new ways of finding staff were tried, for example, the short term use of a Speech and Language locum and accessing the voluntary sector for the family support post.

**6.6** It must be noted that whilst understaffed the small core of staff - Programme Manager, Office Administrator, Librarian, Portage Worker and Evaluators adopted a multi-tasked team approach. All worked way beyond their job description, for example, at times the Librarian was the Sure Start support at the Mums-to-Be-and-Beyond group, the Office Administrator the 'spotter' at the swimming sessions, the Evaluators and the Programme Manager became the 'domestic' help at the Parents' Group meetings. Staff goodwill and their commitment to the principles of Sure Start and the families kept the Programme afloat during this period. Conversely, lack of staff did bring about a benefit. The small core team, by having to be everywhere, became well known to the parents and trusting relationships developed as a result.

### **Accommodation:**

**6.7** The Programme started in September 2001. At the beginning there were no dedicated premises and the Primary Care Trust, as Lead Body, was only able to provide limited desk access. At this stage the Monitoring and Evaluation officers therefore had to be home based.

**6.8** The Primary Care Trust was itself facing difficulties with accommodating its own staff but subsequently was able to provide three desks and one filing cabinet. It was extremely difficult for Programme staff to work under these circumstances, for example, with so little filing space papers and documents had to be 'filed' in piles on the desks or the window sill. These problems increased as new staff came on board.

**6.9** In September 2002 after considerable delays, a temporary building was purchased. The move to the interim premises had to take place before the building was fully complete. Telephones, computers and internet connections, and conversion work had still to be carried out, and to date this work has not been completed although progress is being made daily. That the staff managed to continue with the Programme despite all these difficulties is indicative of their dedication.



**6.10** The Programme has relied rather heavily, perhaps at times too heavily, on the goodwill of the staff. Long periods with no space, no computers or typewriters, no email, building work taking place around them, limited access to office equipment and so forth has not been conducive to Programme delivery or acceptable working conditions. Despite this staff continued to provide services, develop good working relationships and remain cheerful.

### **Finance:**

**6.11** Delays to the establishment of Waveney District Council as Accountable Body have caused difficulties for the Programme. For almost a year the Programme relied on the good will of the Lead Body (Waveney PCT) to process invoices. Limited budget monitoring was possible because no systems were set up for this apart from those set up personally by the Programme Manager. Advice and support on budget matters and planning were consequently not available for much of the early stages of the Programme. Following the recent appointment of a finance assistant to process invoices and, more recently, the appointment of a Finance Officer for the Programme, we are hopeful that the Accountable Body will shortly be able to fulfil the role for which it was appointed.

## **7. SECTION FIVE: OUTCOMES CONCLUSIONS AND RECOMMENDATIONS**

**7.1** The end of the formative year of the Programme is a little early to be examining outcomes, especially as key staff posts were only filled in the latter months of the year. Outcomes will be examined more fully in the Year Two report. However, Annex Two of the Sure Start planning guide provides some short term outcomes in the form of targets and the programme has achieved six SDA targets to date. These are:

- 100% of families with babies are being contacted in the first two months of birth.
- Parenting support and information is available for all parents in Sure Start areas.
- Parent representation on boards.
- Links made with Employment Services.
- Programme is working with EYDCP.
- There is access to good quality play and learning opportunities.

**7.2** In addition, in terms of one of the long term outcomes, perhaps *the* long term outcome - community capacity building - the Programme is also making clear progress. Two key elements of capacity building are parents gaining skills and confidence. In terms of skills, parents have accessed, and are continuing to access, education and training courses; there is a waiting list for the Community Parents Scheme; parents are regularly attending all management groups. In terms of confidence, the growing confidence of parents in meetings is visible.

**7.3** Sure Start is a difficult programme to deliver because the way of working is not only radical in itself but it also covers a wide range of services which requires new

ways of thinking and working for staff and agencies. The learning curve for all concerned can be steep, no more so than for Programme Managers who have responsibility for the whole remit. Given the difficult nature of the remit and the lack of staff for a significant period, Programme achievements have been considerable and parental involvement is real as opposed to rhetoric. These achievements were recognised by the Regional Office at the 12 month Risk Assessment when the Programme moved from high risk to medium risk.

**7.4** In Year Two the Programme needs to build on its Year One achievements and focus on areas which require action. In this spirit we make six recommendations.

**7.5** The main barrier to the prevention of service delivery to date - staff recruitment – appears to be solved. However, we have reservations as to whether 11 full time and 5 part time staff is enough to meet the Delivery Plan targets in the coming year. Latest interview data shows that the majority of staff are already working to maximum capacity in delivering services. As the number of parents ‘joining’ the Programme increases it is hard to see how staff will cope with the increased workload.

**7.6** Of particular concern are the areas of family support, speech and language and mental health. Interview data shows that the incidence of post natal depression is very high amongst the Programme families and the Programme database indicates that over 20% of families registering are requesting help with stress. It is therefore probable that before long the Family Support Co-ordinator will need Family Support Workers working with her. With regard to Speech and Language, the original post was advertised as a full time appointment, but it was only possible to fill it on a part time basis. The work load of the Health Visitor also needs to be kept under review.

**7.7** It is doubtful that the Programme can reach the Year Two targets for mental health and speech and language given the current staffing levels. Our first recommendation therefore relates to these issues.

***Recommendation One:***

*The Programme needs to recruit Family Support Workers to work with the Family Support Co-ordinator and an assistant for the Speech and Language Therapist. The possibility of the need for an assistant for the Health Visitor post should be reviewed at the end of the first quarter of Year Two.*

**7.8** In addition, the work load of the Office Administrator has increased beyond capacity. Increasingly staff require more administrative support than she can give and several members of staff are attending to their own administration needs. This is not a productive or efficient use of professional staff time. Recommendation Two therefore relates to administration.

***Recommendation Two:***

*The Programme should recruit an assistant administrator or buy in assistance on a regular weekly basis.*

7.9 Positive Dads needs urgent action as it has drifted. We would question whether the Community Development Worker is the best person to run such a group simply because of her gender. Recommendation Three therefore also relates to staffing.

***Recommendation Three:***

*The Programme should recruit (with equal opportunities consent) a male worker to run a male carers group, with the Community Development Worker taking a facilitating role here.*

7.10 The Delivery Plan (p.25) identifies Year Two as time to ‘consider management arrangements’ so now is an opportune moment to recommend a change in management structure. Some issues may be more manageable and dealt with more appropriately in smaller sub groups. It will remain necessary for the Implementation Group to continue to meet monthly as any bigger gap between meetings could cause a delay in making important consultative decisions but the Partnership Board could meet less often. Recommendations Four and Five relate to two sub-groups each of which should comprise of parents, staff, partner member(s) and one of the evaluators.

***Recommendation Four:***

*The Programme should ensure that the already formed ‘Hard to Reach’ Group meets on a timetabled regular basis, starting as soon as possible. Its remit should be how to reach all those who are ‘hard to reach’ as defined in this report. Its immediate focus should be how to engage the families on the NHS database, which is brought up to date monthly.*

7.11 Capacity building is a key element to the success and sustainability of the Programme. Central to this is the enhancement of parents’ skills and confidence which is recognised as important in the Delivery Plan (p.34 and p.37). The points there link well with some of the suggestions from the Training and Employment Co-ordinator (outlined in Appendix 5 of this report). Recommendation Five is for a Parent Capacity Building sub-group.

***Recommendation Five:***

*A sub-group should be formed with the remit to carry forward the Personal Development Plans and training programme envisaged for parents. This sub-group could be the forum whereby parental and Community Education’s concerns outlined earlier in the report could be addressed. It could also monitor the extent and nature of parental involvement in the Programme.*

7.12 A common theme from interviews across the board is a concern over publicity. A small group of staff has recently been given the task of improving publicity/information. This is in addition to their professional tasks. Given that publicity appears to be such a concern, Recommendation Six relates to this issue.

## ***Recommendation Six:***

*A parent (s) should be invited to join the staff publicity group. The Programme should have a quarterly review of publicity in Year Two.*

## **8. Final Comments**

**8.1** Following the Regional Risk Assessment the Programme was deemed to be medium risk, with three factors preventing it from becoming low risk at this stage. These are:

- The problems over the appointment of a Finance Officer.
- Lack of a robust electronic data collection system in place.
- A lack of a Capital Strategy for Capital money.

**8.2** The risk assessment was in the first week of November and we feel that it is pertinent to point out that two of these issues had been dealt with by the time of writing this report. A Finance Officer has been appointed and the electronic data collection system (which had been returned to the manufacturer for amendments when the risk assessment was undertaken) was in the process of being re-installed.

**8.3** The risk assessment also brought out issues of good practice, of which there were also three, all relate to parental involvement:

- Parents were Chairs of management groups from an early stage in the Programme.
- The Parents' Group input into decisions about European funding.
- The Parents' Group successful negotiation with the District Council over an aspect of the Community Centre.

**8.4** Clearly at the onset of the second year the Programme has a great strength in the quality of the work being put in by parents. It also has two other great strengths:

- Skilled and committed staff in post.
- Willing partnership agencies.

**8.5** The Programme is in good health. If it can recruit a few more staff and start to engage with more families it will be on course to successfully deliver the aims and objectives in the Delivery Plan, following the principles that underpin Sure Start. Moreover, there is no apparent reason why it cannot move to low risk in the coming year.

*Di Gilbert*

*Dr Lorraine Maitland*

*Sure Start North Lowestoft Evaluation and Monitoring Officers*

*January 2003*

# ***APPENDICES***

## APPENDIX 1

### *Sure Start North Lowestoft Staff*

Programme Manager: in post since September 2001, full time, employed directly by Sure Start North Lowestoft Lead Body (Waveney PCT).

Office Administrator: in post since October 2001, full time, employed directly by Sure Start North Lowestoft Lead Body (Waveney PCT).

Evaluation and Monitoring Officers: in post since October 2001, job share, part time (3 days per week each), employed directly by Sure Start North Lowestoft Lead Body (Waveney PCT).

Portage Worker: In post since December 2001, full time, employed by Sure Start North Lowestoft through Education Department, Suffolk County Council.

Librarian: in post since April 2002, full time, seconded for 3 years from Libraries and Heritage, Schools Library Service, Suffolk County Council.

Community Development Worker, in post since June 2002, full time, employed directly by Sure Start North Lowestoft Lead Body (Waveney PCT). (NB this is a second appointment – the original postholder left after 5 months.)

Community Parents Co-ordinator: in post since July 2002, full time, employed directly by Sure Start North Lowestoft Lead Body (Waveney PCT).

Family Advocacy Worker in post since June 2002, part time (12 hours per week), 1 year appointment with Sure Start North Lowestoft funded by successful bid from Gt Yarmouth and Waveney CONTACT

Training and Employment Co-ordinator; in post since July 2002, full time, employed by Sure Start North Lowestoft through YMCA.

Nursery Nurses: 2 posts since August and September, full time, employed directly by Sure Start North Lowestoft Lead Body (Waveney PCT).

Smoking Cessation Advisor: in post since September 2002, part time (2 days per week), appointed by Sure Start North Lowestoft through successful bid from Suffolk Stop Smoking Service.

Health Visitor: in post since October 2002, full time, employed directly by Sure Start North Lowestoft Lead Body (Waveney PCT).

Family Support Co-ordinator; in post since November 2002, full time post, employed by Sure Start North Lowestoft through Family Welfare Association.

Speech & Language Locum, 3 month full time appointment (July-September 2001), commissioned service from James Paget Healthcare Trust. Speech & Language Therapist: in post since November 2002, part time (3 days per week) employed by Sure Start North Lowestoft through Great Yarmouth PCT.

## **APPENDIX 2**

### ***Agencies on the Committees of Sure Start North Lowestoft***

#### **Statutory Agencies**

Waveney PCT  
Waveney District Council  
Area Education  
Community Education  
EYDCE  
Suffolk Social Care Services  
Midwifery Service  
Child Protection Nurse  
Integrated Services Manager

#### **Statutory Agencies (vacancies)**

GP  
James Paget Hospital  
Local Health Partnerships

#### **Voluntary Agencies**

Suffolk ACRE  
The Children's Society  
Pre-School Learning Alliance  
YMCA  
Family Welfare Association  
CONTACT

## APPENDIX 3

### *Stakeholders' Forum Membership*

Christ Church  
Gunton Baptist Church  
James Paget Hospital  
Local Councillors  
Lowestoft Central Library  
Lowestoft College Nursery  
Lowestoft PCT  
NORCAS  
Parents  
Poplars C.P. School  
Poplars Parent & Toddler Group  
Programme Staff  
Seashore Day Nursery  
St. Andrew's Church  
St. Benedict's Church  
St. John's Housing Trust  
Suffolk Constabulary  
Suffolk County Council Education Department  
Suffolk Social Care Services  
The Children's Society  
Trinity Parent & Toddler Group  
Waveney Women's Health  
Waveney District Council  
Waveney Playbus  
Waveney Women's Aid  
YMCA



## APPENDIX 4

### *Services/Activities funded wholly or partly by Sure Start North Lowestoft*

#### **Objective 1: Improving Social and Emotional Development**

##### CONTACT

Community Parents Course  
Arts and Craft Course  
Home Visits by Family Support Worker

#### **Objective 2: Improving Health**

Mums to Be  
Swimming Lessons for under 4s  
First Aid Course (2)  
Health Eating Course  
Smoking Cessation  
Home Visits by Health Visitor

#### **Objective 3: Improving Play**

Portage  
Crown St Playgroup Summer Scheme  
Boston Lodge Playscheme (4)  
Treasure Hunt with Arts and Crafts Session  
Storytelling Sessions

#### **Objective 4: Strengthening Families and Communities**

Parenting Course (2)  
Positive Dads  
Confidence Courses (2)  
Making Choices Course  
IT Course

#### **Social events: cross cutting objectives 1 3 4**

Christmas Party  
New Year Party  
Christmas Grotto  
Summer Day Trips  
Teddy Bears Picnic

*NB all courses had crèche facilities thus Objective 3 was also met here.*

In addition to the above, grants have been awarded to a number of local organisations for toys and equipment, outings, workshops, courses; a small number of individual 'families in need' received help; a local school received funding towards a nurture room.

## **APPENDIX 5**

### ***Training and Employment***

#### **Crèche provision**

The biggest barrier for parents, particularly mothers and lone parents returning to work, or accessing training courses is the lack of childcare provision. Sure Start has already recognised the need for crèche provision at its activities and events, and has made provision for this, however, in future years as activities increase so will the number and size of crèches. Crèches can cost around £1000 for a 12-week course, even if only one child attends.

#### **Suggestions:**

- ☺ That the budget for crèche provision be increased 2 or 3 fold in the first year, and incrementally thereafter to accommodate the increase in provision, and the greater cost.
  
- ☺ That Sure Start considers the employment of crèche workers and childminders who could look after children in their own home, or at the parent's home. Sure Start parents who gain childcare qualifications could then be employed as childcare workers for the Programme, possibly suiting, as well as providing employment for, parents whose children have started school.
  
- ☺ That Sure Start pays for Childminders or nursery places so that parents can receive free or heavily subsidised childcare whilst they attend Sure Start courses. If one child requires childcare whilst a parent attends a Sure Start course, it will cost considerably less for that child to be with a childminder than in a crèche at the training venue.

#### **Training Courses**

##### **Suggestion:**

That Sure Start allocates a budget for subsidising course fees other than for childcare qualifications. Limitations would need to be set, for example, up to a certain amount if no other funding route can be found, for a set period of time with written agreement to complete the course or Sure Start can ask for a refund. (These are not recommendations, but ideas!) This funding may not be great in the first year, but would need to be increased as the programme moves forwards. Some parents are being identified for whom subsidised training courses are not available, and many are missing out on valuable re-training or new skills learning because they cannot afford the course fees.

#### **Other identified needs**

##### **Suggestion:**

Rewards scheme: to encourage parents to attend courses, it is anticipated that some kind of rewards scheme could be set up, so that parents receive a reward for attending Sure Start or (possibly also other) courses. These rewards could be free childcare for "time out" or even tangible rewards. If the training programme is a great success, payment of rewards could be costly, so it may be wise to allocate funds for this scheme.

***Sure Start North Lowestoft Training and Employment Co-ordinator  
December 2002***

## APPENDIX 6

### *Toy Library Consultation*

#### ***FURNISHINGS***

Parents and toddlers were shown 4 designs of a rug and asked to choose one:

PARENTS	TODDLERS
Cat 8	Cat 12
Elephant 7	Elephant 7
Once Upon A Time 11	Once Upon A Time 1
Space Rocket 5	Space Rocket 7

Parents and toddlers were shown 4 designs of floor cushions and asked to choose two:

PARENTS	TODDLERS
Crocodile 13	Crocodile 11
Giraffe 20	Giraffe 15
Hippo 10	Hippo 8
Turtle 19	Turtle 7

*Sure Start North Lowestoft Community Librarian  
December 2002*