



Annual Report

Year Three

JANUARY 2005

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Appendix One: Key Achievements

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Abbreviations

CAB	Citizens Advice Bureau
CDW	Community Development Worker
CPP	Community Parent Programme
FST.....	Family Support Team
FWA.....	Family Welfare Association
IG	Implementation Group
LETS	Local Exchange Transfer Scheme
LYPP.....	Lowestoft Young Parents Project
OCN	Open College Network
NESS.....	National Evaluation of Sure Start
NORCAS	Norfolk Counselling and Alcohol Service
PB.....	Partnership Board
PEEPS	Peers Early Education Partnership
PG	Parents' Group
PND.....	Post Natal Depression
PDW	Personal Development Worker
PSA	Public Service Agreements
S/L.....	Speech and Language
SDA.....	Service Level Agreements
SEN	Special Educational Needs
SMAD	Sport, Music, Acting and Dance
WDC	Waveney District Council

SURE START NORTH LOWESTOFT YEAR THREE REPORT

1. INTRODUCTION

1.1 This report differs from the year one and two reports in that there are specific Sure Start Unit requirements this time. The report has to look back at the Baseline Data (how things were *before* Sure Start) and show what the Programme is achieving in terms of meeting the need identified in this data. It also has to show that the Programme is successfully working towards meeting the Sure Start Objectives and the (March 2006) targets. Evidence used will be survey and interview data; visual data in the form of photographs, and also observation. In keeping with our earlier reports, Sure Start North Lowestoft will be referred to throughout as the Programme.

1.2 The Baseline Data which we are using for the basis of this report is the information collected prior to Sure Start in North Lowestoft. This data was an analysis of findings from a series of parent/community consultations, *Planning For Real*. The data from these consultations informed the Programme Delivery Plan, which, in turn, was the document on which the Sure Start funding was granted.

1.3 There are two sections to the report, the first section looks at the services and activities provided by the Programme (outputs – the ‘what’ of the Programme) and examines how these are working towards objectives and targets. The Sure Start PSA targets are demonstrable milestones towards the Programme’s longer term aims and objectives. They are the same for all Sure Start Programmes and set by the Government. The second section looks at process (the ‘how’ of the Programme) - ie the management committees and partnership working, parental involvement and mainstreaming.

1.4 Baseline Data (ie the ‘before’ data) is shown under each Objective followed by the heading Provided by Sure Start (ie the ‘after’ data). This enables the reader to see the before and after picture clearly.

The Year Three Survey

1.5 Throughout the report we refer to the findings from a three year satisfaction survey. We conducted this survey in June-July 2004; 240 families were surveyed and there was a 51% response rate. The survey was conducted via a postal questionnaire and self-administered questionnaires given out at Sure Start and non Sure Start activities. The population surveyed was past and present registered and non-registered Sure Start families.

1.6 The majority of the survey questions focused upon ‘baseline dissatisfaction’ data collected at the *Planning for Real* consultations. Additional survey questions were asked which covered issues raised during Programme development and our on-going evaluations over the past three years.

1.7 Parents were actively involved in the survey. Following in-house training they helped design and pilot the questionnaire; they gave it out at activities and assisted with the analysis. Some also presented the findings to the Partnership Board. The

satisfaction survey is labour intensive and the involvement of parents not only helped with this aspect but also met Sure Start Objective Four in that parent involvement is capacity building.

1.8 The satisfaction survey was wide-ranging and therefore not all respondents would have used all the services which they were asked about, or had a view on all issues. The percentages used throughout this report, therefore, represent the answers of those who used the service/replied to the question. We also carried out qualitative evaluations and this evidence is used throughout to supplement the findings from the survey.

1.9 One of the findings from last year was that our report was considered to be too long and consequently some people did not have time to read it. Evaluators learn lessons too so this report will be shorter. Also this time there is no executive summary drawing out key points. There is, however, a 'key achievements' summary.

The Team

1.10 Next a word about the Programme's greatest asset – its staff. In the first year the Programme had difficulties with recruitment to such an extent that the Sure Start Unit classed it as a 'high risk' programme. The second year saw improvements and the Programme was no longer deemed to be 'at risk', and by the third year it was up to full strength. Staff retention has been excellent and staff continue to show a high level of commitment to each other and the Sure Start principles. This is not to say that there are not occasional disputes. Twenty staff from differing professional backgrounds and training are likely to disagree sometimes. This can be healthy in terms of organisational growth as long as people respect other views and it does not descend into territory guarding.

1.11 The Programme has four teams loosely related to the four Sure Start Objectives. We say loosely because there is a large amount of team work within the team and staff support each other at many Programme activities, thus working across Objectives. Some services are also provided jointly.

1.12 Objective One: The Sure Start Family Support Team (FST) consists of a part time Senior Family Support Worker and two Family Support Workers, one part time. A new post has just been filled which has an additional needs remit. The FST is employed by the Family Welfare Association and line managed by an FWA member of staff, who is funded by Social Care Services.

1.13 Objective Two: The Sure Start Health Team consists of a Health Visitor, two Nursery Nurses, a Midwife and a Smoking Cessation Advisor. All posts are full time except for the latter which is 2.5 days per week.

1.14 Objective Three: The Sure Start Learning Objective Team consists of a Community Librarian, a Speech and Language Therapist, two First Steps Workers and a Portage Worker. All posts are full time.

1.15 Objective Four: The Sure Start Community Development Team consists of a Community Parent Co-ordinator, a Personal Development Worker and a part time Fathers' Worker. (Currently this is a team of three but for part of the three year period under review it was a team of four, and it will be again.)

1.16 The Team also consists of a full time Programme Manager and an Office Administrator (with temporary assistance as required). We are part time internal evaluators.

Acknowledgements

1.17 A word of thanks to everyone who has taken part in our evaluations; parents, staff and partner agencies have given generously of their time and made our task not only easier but also pleasurable. The usual conventions regarding confidentiality have been observed. Thanks are also due to Michelle for her help in producing the reports.

Reach Figures

1.18 As the bar charts below show, there has been a steady year-on-year increase in the number of parents accessing services. Data analysis by the Sure Start Unit indicates that the Programme's reach figures are one per cent higher than the Eastern Region average and one per cent lower than the national average. Given that apathy amongst parents was initially identified as a main barrier to success these figures are very healthy.

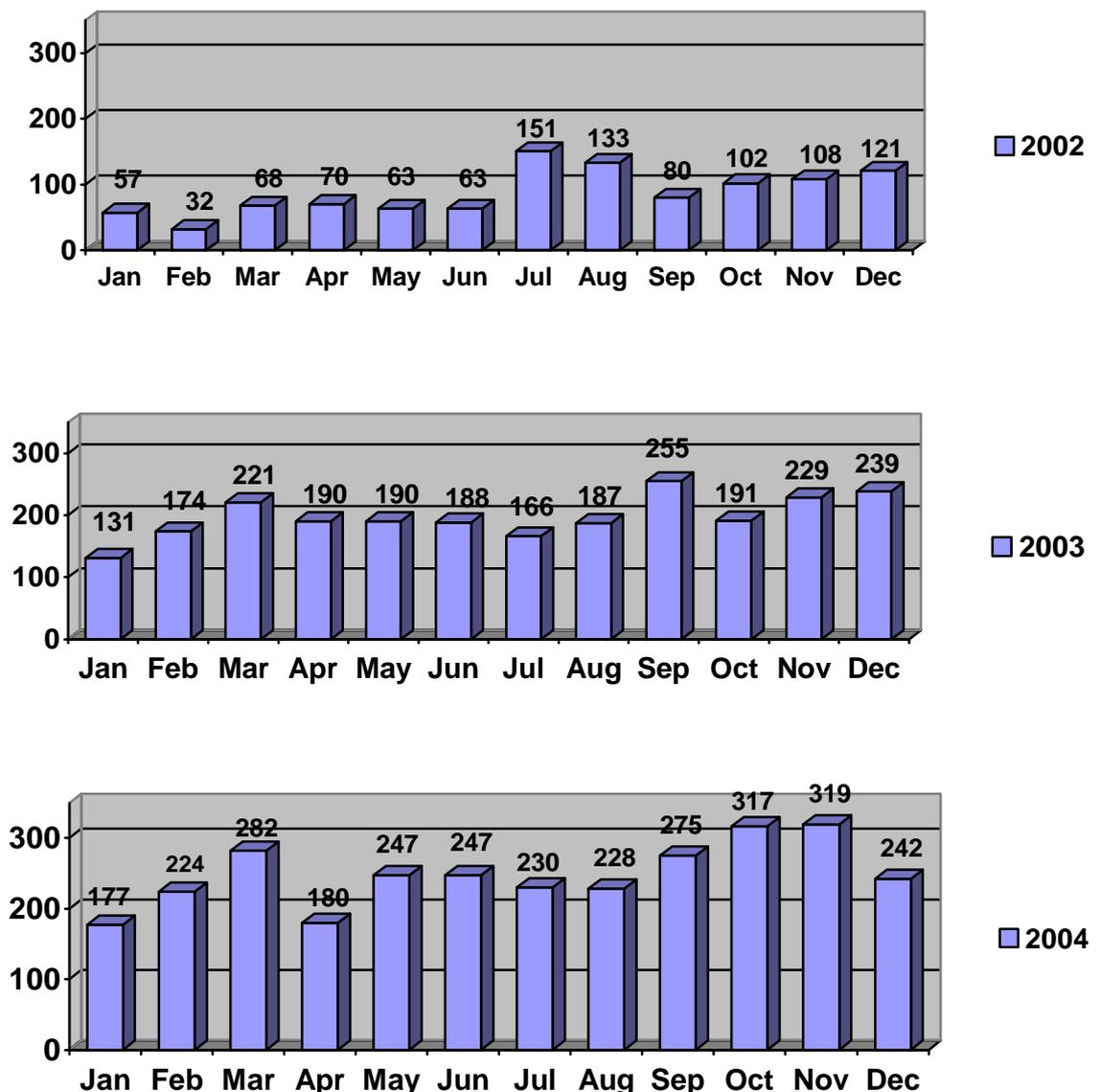


Figure 1

2. SECTION ONE: SERVICES AND ACTIVITIES

2.1 Please refer to Appendix Two for a list of regular Programme activities and their aims. There are too many activities and services to discuss in detail so the report will mainly focus on those that relate specifically to the Baseline Data and targets.

2.2 Objective One: Improving Social and Emotional Development:

Aim: *To promote greater parental understanding of and engagement in children's development; to support early years and childcare providers in early identification of difficulties.*

PSA Target: An increase in the proportion of babies and young children aged 0-5 with normal levels of personal, social and emotional development for their age.

SDA Target: All families with new born babies in Sure Start local programme and Children's Centre areas to be visited in first 2 months of their babies' life and given information about the services and support available to them.

2.3 Baseline Data: Families requested more family support in general. It was recognised that there were some voluntary sector support services but parents felt that there was limited advocacy for families, and problems with ongoing support. Counselling services were provided by GP practices but these were limited. With regard to issues which required the services of Social Care Services, it was felt that this agency was supportive but there were problems of access to the service. In terms of mental health, it was felt that services needed improving and some professionals could be insensitive to family needs. Improved services and support for children with additional needs were also called for.

NB Services pertaining to counselling, mental health support and children with additional needs cover both Objective One, Two and Three, so there will be some discussion of the Sure Start provision under all of these Objectives.

2.4 Provided by Sure Start: Although the SDA target above is under Objective One, meeting it has been in the remit of the Health Team (Objective Two) and we are pleased to be able to report that this target has been met on a monthly basis throughout the life of the Programme. Therefore the following section will focus on the Family Support Team's work to reach the PSA target.

2.5 The Family Support Team has delivered a number of activities/services.

<i>Family Support Home Visits /Contacts</i>	<i>Cook n Chat.</i>	<i>Coffee n Chat.</i>
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<i>Blue Lamp Drop-in</i>	<i>CONTACT</i>	<i>Relaxation Group</i>
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Looking first at support for families with children with additional needs, the CONTACT Family Advocacy Worker has been in post since the first year. The post is part-time and as many families as possible have been supported in the available hours. Her concerns in the last report were that there was still much unmet need in this area. Subsequently her hours were increased and she was able to offer more in-depth help to families in year three. Previously her work centred on advocacy and helping families with disability claims; now she is also able to help with the interface between the families and other agencies – housing, hospital, school and so forth. She has more

time now to provide the vital role of “listening”. In evaluations undertaken over the period under review parents often commented on how much the Family Advocacy Worker had helped them understand their child’s behaviour and how useful the support group was in terms of putting their child’s behaviour in context. Both had contributed to better engagement by the families with their children.

2.6 Unfortunately, in year three, CONTACT (the employing agency) withdrew from Lowestoft because its funding for the area ceased, apart from the Sure Start grant with which the Family Advocacy Worker was employed. CONTACT sought further funding from other sources but the bid was turned down on the basis that the service provided had become available within Lowestoft from other agencies. Families were distressed at this decision and discussed petitioning the decision makers. During the transition period the Programme did its best to continue to support these families during this difficult time, albeit with a reduced service. A full service subsequently resumed with a partnership between Sure Start, FWA and Parent Partnership.

2.7 Evaluations in years one and two showed a high level of satisfaction with this service and the year three survey shows a 100% satisfaction rating with the Programme’s additional needs services.

<u>Additional Needs Services</u>			
Very Satisfied	Satisfied	Dissatisfied	Very Dissatisfied
52%	48%	0	0

2.8 Looking now at the work of the FST, in year one there was only one staff member; now there are three. Consequently the service offered here expanded considerably with nearly 180 families receiving support over the last two years. Families are referred to the team from other members of staff and other agencies. Many of the families have complex and multiple needs covering physical, mental, emotional and cultural needs. The FST team take a holistic approach tailored towards families’ needs, for example, they do not just initially focus on counselling/supporting parents in developing their relationship with their children. If, for instance, the immediate issue was money management the FST would help with this practical matter because solving this worry may enable the parent and FST to then focus on the child/parent relationship. One of the main aims of the FST is to raise parents’ self-esteem by helping them to value themselves and their children.

2.9 The FST are also pro-active; they attend Programme activities, become known to families and thus, as one of them put it, are sometimes able to “help with small problems, before they become big ones”. The FST also run weekly groups whereby they continue this pro-active and preventive role of early identification of issues. The services offered continue to expand, most recent ones being a drop-in for families with a child under 7 years old where there is a mental health issue within the family, and a relaxation group whereby parents can learn relaxation techniques to enable them to enjoy their children more. The FST do not work in isolation and for many families the service provided by the FST is in conjunction with other staff members. Thus these families receive a level of Programme involvement commensurate with need. Recent (January 2005) qualitative evaluations show a high level of service satisfaction “it couldn’t be improved” being one comment received. This level of satisfaction echoes the findings of the year three satisfaction survey in which there was 100% level of satisfaction with this service.

Family Support Team Services			
Very Satisfied	Satisfied	Dissatisfied	Very Dissatisfied
38%	62%	0	0

2.10 As can be seen by the above, over the period under review, the FST has developed services which are meeting the needs outlined in the Baseline Data: notably, increased family support via counselling and help with practical issues if needed; more support for families where there are mental health issues and increased support for families where there is a child/ren with additional needs. The FST is clearly meeting the criteria of Objective One and working well towards the PSA target as evidenced by the extremely high level of parental satisfaction.

2.11 Objective Two: Improving Health:

Aim: *To improve awareness of healthy living amongst children and their service providers and to help parents to support their children's healthy development before and after birth.*

PSA Target: a 6 percentage point reduction in the proportion of mothers who continue to smoke during pregnancy.

SDA Target: Information and guidance on breastfeeding, nutrition, hygiene and safety available to all families with young children in Sure Start local programme and Children's Centre areas.

Reduce by 10 percent the number of children aged 0-4 living in Sure Start local programme and Children's Centre areas admitted to hospital as an emergency with gastro-enteritis, a lower respiratory infection or a severe injury.

Ante-natal advice and support available to all pregnant women and their families living in Sure Start local programme and Children's Centre areas.

2.12 Baseline Data: Parents had a number of suggestions for improvements in health services. They asked for more informal health professional drop-ins and home visits, more user friendly surgeries with, for example, toys for children. Parents requested that health visiting outreach services be expanded and asked for more clinic based activities. More breastfeeding support was also called for. A substance misuse service existed but parents felt that it needed to be better advertised and an extension of the service was needed. In terms of mental health, parents felt there was a need for more support for PND and that the service should be more proactive. They wished to see school nurses give more support to children with additional needs and for children starting school. Also parents wanted more support for teenage mothers and those who were pregnant, and those who wished to stop smoking. They also asked for a place for toddlers to enjoy water and learn to swim.

2.13 Provided by Sure Start: The Health Team has delivered a large number of activities/services which are listed below. This list shows the breadth of Sure Start provision.

<i>Aerobics</i>	<i>Aquanatal</i>	<i>Baby Massage</i>	<i>Blues Crew (PND)</i>
<i>Bumps and Beyond</i>	<i>Bundles of Fun</i>	<i>Bottle Swap</i>	<i>Breastfeeding</i>
<i>Peer Support</i>	<i>Home Visits by Health Visitor</i>	<i>Home Visits by Nursery Nurses</i>	
<i>Health Visitor Drop-in</i>	<i>Home Safety Equipment</i>	<i>Healthy Walks</i>	
<i>LYPP</i>	<i>Mucky Ducks</i>	<i>Midwifery Services</i>	<i>Safety Days</i>
<i>Smoking Cessation</i>	<i>Swimming</i>	<i>Twins' Club</i>	<i>Weaning Party</i>
	<i>Young Parents Drop-Ins</i>		

2.14 Looking first at smoking cessation, the Smoking Cessation Advisor has been in post since September 2002 and works part time. He has developed a three-pronged strategy – awareness raising; supporting specific initiatives; following up referrals of parents who wish to stop smoking. He also adopted a ‘softly softly’ approach, in his own words “*to make me a less threatening prospect*”. In terms of the first prong, he attends various Programme activities where he promotes smoking cessation in a reactive way ie parents approach him; the second prong has entailed the setting up of a Smoke Free Homes Initiative and Pregnancy Project (both based on existing models). The third prong involves the bulk of his work as he follows up referrals and advises/supports the parents in their attempt to give up smoking.

2.15 Clearly when any parent gives up smoking the beneficial effects on the household is considerable so all of his work promotes healthy living. In terms of the target, this relates to smoking in pregnancy and the Pregnancy Project is most relevant here. This started in the latter part of year three. This is rather a slow start and work towards the target did not really get ‘off the ground’ until the Programme employed a midwife. A lack of communication regarding the target also led to some delay. It is too early to evaluate the Pregnancy Project, but in terms of parents quitting smoking the figures for year three are 54 discussed quitting and 28 set a quit date, 22 of whom remained non-smokers by the NHS measure. Recent (January 2005) evaluations found a high level of parental satisfaction with the service.

2.16 With regard to substance mis-use, good links have been developed with NORCAS; the Programme receives referrals from them and liaises with them over specific families. Staff have received training organised by NORCAS and also WDC. The Programme through the provision of childcare has supported families with drug and alcohol problems whilst the parent accesses counselling and other related services.

2.17 Turning now to breastfeeding, the Programme has been very pro-active here. Apart from promoting breastfeeding in general, the Programme runs a well attended OCN Level Two breastfeeding peer support training programme, which is taught by a Health Visitor and the Programme’s Health Visitor and Midwife. To quote one of them, there is “*a nice army [of peer group supporters] now*”.

2.18 The Health Visitor provides an informal weekly drop-in service at a local church hall; the Midwife provides ante natal support at the local hospital and ante and

post natal support at Bumps and Beyond. The aim at this venue is to provide seamless support in the form of professional and, via the social contact, peer support from pregnancy to parenthood. The Health Visitor and Nursery Nurses also make numerous house calls to support families over a whole range of issues from PND to child behaviour. It is part of the Sure Start remit that parents are visited within the first two months of a baby's birth. The Programme has a 100% reach here and the Health Team also take this opportunity to complete a PND survey and identify any other family concerns, which they, or another appropriate staff member, follow up.

2.19 Regarding PND, apart from the identification of issues from the survey, the Programme has a raft of services to support parents which range from one to one counselling to group activities providing, for example, relaxation sessions. Group activities are well attended.

2.20 The Programme Midwife, as well as covering the myriad of midwifery issues, also promotes healthy living by working with the Smoking Cessation Advisor on the stop smoking initiative mentioned earlier and promotes a healthy lifestyle during pregnancy by ensuring that parents-to-be receive information on, for example, diet and exercise. She also runs the aquanatal classes.

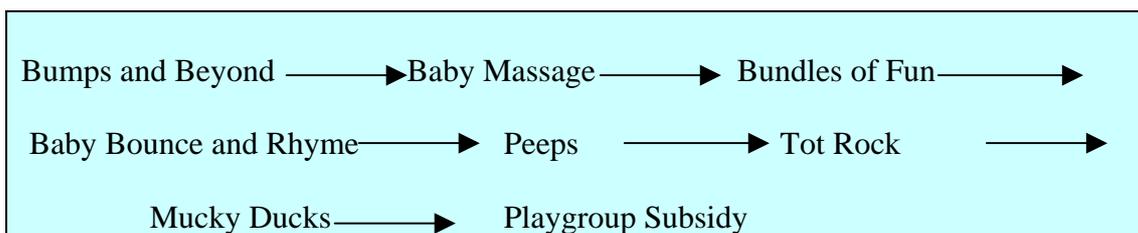
2.21 One of the difficulties faced by the Programme in the early stages was how to attract pregnant teenagers, and teenage parents to services. A drop-in was tried, but few attended and those who did were unhappy with aspects related to the venue. However, the latest activity to be offered to this group - LYPP - (a joint initiative partly funded by the Teenage Pregnancy Unit involving the FST, the Health Team and partner agencies) has had more success. This may be due to its informal start to gain trust, followed by a more structured element. The reputation of the team members may also be a contributory factor.

2.22 The swimming sessions were hugely popular in years one and two. Unfortunately, the pool used by the Programme was closed for a large part of year three and at the time of writing the Programme is not providing any swimming activities although alternative venues are being explored, and the Programme is looking into providing subsidised places at a local leisure centre.

2.23 In terms of the hygiene and safety targets, the Programme Health Visitor feels that there is still "*some way to go*". This is due to time constraints. Work on gastro-enteritis, for example, has only been at an individual level. However, plans are underway to work towards these aspects of the SDA target in 2005. Safety in the home has been improved for many children by the Programme's provision of free safety equipment such as stairgates and fireguards - since May 2004, 125 families have received home safety equipment. There are also plans to develop home safety checks to help families understand the importance of keeping children safe.

2.24 Regarding provision for babies and toddlers, the Nursery Nurses and Sure Start Librarian have developed a rolling programme which provides good quality play and learning experiences, taking a child from babyhood through to pre-school settings, where all rising three year olds are entitled to a playgroup subsidy funded by the Programme. Whilst these activities are essentially fun based they also provide the opportunity for advice and information to be given on all issues related to child rearing. Healthy eating is also promoted. Since May 2004, 64 families (118 individuals) have attended Bumps and Beyond; 15 (31) Baby Massage; 47 (98)

Bundles of Fun; 35 (71) Baby Bounce and Rhyme; 29 (55) Peeps; 48 (104) Tot Rock
87 (201) Mucky Ducks; 75 Playgroup Subsidy.



2.25 We feel that Mucky Ducks deserves a special mention. This is a long standing activity devised by the Nursery Nurses early in the first operational year. It is the Programme’s most popular regular event. Although it is delivered under Objective Two, nearly all Objectives are met at this venue – friendships are formed (Obj.4); parent/child interaction is enhanced (Obj.1); healthy eating is encouraged (Obj.2) and there are quality play experiences which encourage communication skills. It is also the place where Sure Start gains a wide audience; parents meet staff and the trust that builds up here is carried forward to other activities. The venue will be refurbished soon and we hope that this will not inhibit the ‘mucky’ part of the activity because this seems to be what initially draws parents to it. Evaluations show that the popularity of Mucky Ducks is also down to the excellent, friendly service and interpersonal skills of the staff who run it. A cost effectiveness study has shown costs to be £6.15 per family per session. This compares with £5.22 for a neighbouring Sure Start running a similar activity. However, their running costs were slightly cheaper and when adjustments were made, for example, for van hire costs for this Programme, costings were roughly the same.

2.26 The Programme has also addressed the issue of more user-friendly surgeries. Toys have been provided and issues of access have been raised with relevant partner agencies. Findings from the year three satisfaction survey show some progress regarding these issues.

<u>Are surgeries more user friendly:</u>		
Yes 35%	No 19%	D/K 40%

2.27 Finally (for this Objective) parents identified a need for a closer link with school nurses regarding transition to school. The Programme has not had much contact with school nurses, mainly because the Sure Start focus is on pre-school children. However, the Programme has recently started liaising with a nurse at one local school, discussing transition to school workshops, and school nurses have also indicated that they would like to work with the Programme on the healthy eating initiative. So, in year three the Programme started to meet this need.

2.28 As can be seen, over the three years the Programme has steadily addressed many of the Baseline issues and by year three it was meeting Objective Two criteria and successfully working towards the targets. The overall message from the Baseline Data was that parents not only wanted an increase in certain health services, but also wanted health services delivered in a more informal and user-friendly manner. The Programme has done this well as evidenced by the findings from the year three survey, which shows 98% level of satisfaction with health visiting and midwifery services.

Health Visiting Services

Very Satisfied 43%	Satisfied 55%	Dissatisfied 0	Very Dissatisfied 2%
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Midwifery Services

Very Satisfied 55%	Satisfied 43%	Dissatisfied 2%	Very Dissatisfied 0
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2.29 Objective Three: Improving Learning:

Aim: *To promote high quality care and education which supports children's development and early education, and especially through early identification of and support for children with additional needs.*

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

SDA Targets: 95 per cent of Foundation Stage provision inspected by Ofsted rated good or better by 2006.

To increase the number of children who have their needs identified in line with early years action and early years action plus of the SEN code of practice and who have either a group or individual action plan in place.

2.30 Baseline Data: Parents felt that more nurseries, playgroups and parent and toddler groups were needed. They also said that toys at the existing provision needed upgrading and needed to be of a higher standard. In addition, internal and external play areas needed extending and improving. Parents wanted a toy library located in the library and they wanted to see more activities there in general, BookStart to be expanded to other age groups and to include children with additional needs. Also with regard to additional needs, parents felt that there was a lack of information about what Portage is and which agency provides it. Another area of concern was the speech and language service; parents were worried about the long waiting list and also felt that more outreach was needed.

2.31 Provided by Sure Start: The Learning Objective team have delivered a large number of services listed below.

<i>Speech and Language Service</i>	<i>Peeps</i>	<i>Playgroup Subsidy</i>
<i>Portage</i>	<i>SMAD</i>	
<u>Library Services:</u>		
<i>Baby Rhyme Sessions</i>	<i>Bookbags</i>	<i>Bookstart Book Crawl</i>
<i>Family Play Sessions</i>	<i>Song Box Workshop</i>	<i>Sunday Sessions</i>
<i>Tot Art</i>	<i>Tot Rock</i>	<i>Toy Library</i>
	<i>Monday Moonbeams</i>	<i>Themed Days</i>

2.32 Baseline Data showed a high level of dissatisfaction with play areas. Looking at this issue first, we have two sources of evidence to show improvements (or otherwise) in outdoor play areas. First, the findings from the three year survey show a reasonable satisfaction level.

Noticed improvements to outdoor play areas:

Yes 39% No 22% D/K 35%

2.33 Second, we present a visual depiction of outdoor play areas with some self explanatory 'before' and 'after' photographs.



A 2001



2004



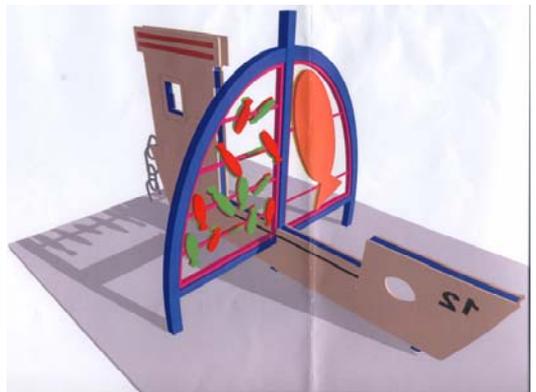
B 2002



2005



C 2001



2005 (awaiting delivery)

2.34 Parental involvement in outdoor play area improvements was considerable. Picture A shows the improvements at a local park. Parents worked with WDC in site selection, planning and choosing the equipment. They were also invited by WDC to assist in the High Street improvements depicted in picture C. Parents had to choose which sites were to have Programme involvement and picture B represents a site in which the Programme was not involved.

2.35 Indoor play has been improved by the provision of better quality toys, aided by grants from the Programme, and Ofsted inspections. The Programme’s involvement in the latter has been to offer support in achieving the required levels of service (with the guidance of the relevant partner agency) particularly when a venue has been put in ‘special measures’. Three playgroups received good Ofsted inspections, two are working towards improving practice and one has been closed. The Playbus also closed due to financial difficulties and lack of take up of places. However, over the period, two new nurseries have opened and the Programme Manager feels that the balance between supply and demand is now “*about right*”. The Playgroup Subsidy has also enabled more parents to access good quality indoor play. There was a very high satisfaction level with the quality of toys and playgroup subsidy.

<u>Playgroup Subsidy</u>			
Very Satisfied	Satisfied	Dissatisfied	Very Dissatisfied
51%	49%	0	0
<u>Quality of Toys at Playgroups</u>			
Very Satisfied	Satisfied	Dissatisfied	Very Dissatisfied
60%	38%	2%	0

2.36 One of the major areas of unmet need was speech and language support. In its first year, the Programme was unable to make an impact in this area due to recruitment problems. This improved in year two and in year three the position was transformed. There is a strong team in post which has had a considerable impact, with 73 families receiving dedicated time since April 2004. The team also put in place a strategy of early identification of language skills and additional needs through observation at group activities, and in pre-school settings they help to improve good practice by supporting staff in the introduction of play activities which develop the essential skills needed prior to good communication skills. These are identified by the S/L Therapist as “*feeling confident and comfortable, focusing attention, taking turns, being responded to and responding to others and making choices*”. The team found that initially playgroup staff were a “*little wary*” but mutual trust has developed and the feedback to the team now shows that playgroup staff have observed noticeable improvements in children’s listening and attention skills. The team have also observed continuing improvements, “*small but significant changes*” as one put it.

2.37 Early identification of children with additional needs has also enabled the team to put coping strategies in place for parents prior to more formal assessments. This has given parents time to come to terms with some of the issues the family may face.

2.38 The S/L Therapist has also delivered several training courses to daycare providers, and education and health professionals, to encourage reflection on their communication with young children and to help identify developmental delay. She

has received very positive feedback from participants. Feedback from the parents in the year three survey was also positive with 96% level of satisfaction.

<u>Speech and Language Services</u>			
Very Satisfied	Satisfied	Dissatisfied	Very Dissatisfied
48%	48%	4%	0

2.39 The needs of families with children with additional needs are further met by activities such as Monday Moonbeams, a monthly activity which has small numbers but is greatly appreciated by those attending. Holding this activity in the library is good practice in that the families are receiving a service in a venue which many families with additional needs tend not to frequent. Some are now starting to use other ‘mainstream’ library activities provided by the Programme, such as Family Play. As shown earlier, the three year survey shows 100% level of parental satisfaction with the Programme’s services for families with additional needs.

2.40 Families’ additional needs are also met by the Portage service, which the Programme has offered since the first year. Our evaluations of this service in year one and two showed a high level of parental satisfaction which remained the case in year three. Additionally, the North Suffolk Portage Service’s own evaluation found high levels of satisfaction and also noted the “pleasing” shift towards younger children receiving Portage. The Programme Portage Worker has worked with a full family caseload throughout the three years and in the past year she enhanced the service offered by running (with a co-worker) a course for parents with children on the autistic spectrum.

2.41 An increase in library based activities was also identified as need in the Baseline Data. As can be seen from the list of library based activities provided to date, the Programme has met parent need well here. Bookstart provision now starts at 2 years old and Bookstart Book Crawl is an annual event. The services developed have also met the criteria set by the Early Learning Goals identified under the Foundation Stage headings. All stock is selected by specialist librarians and continually updated. The library is also alert to additional needs and, as well as Monday Moonbeams, the toy library has a range of specialist toys donated by Mencap and there is a range of books and magazines with titles which can support families with additional needs. Additionally, Bookstart can be obtained on audiotape.

2.42 As the library is a public building access to most of the Programme activities at this venue are open to all families. Consequently the library based activities are enjoyed by a large number of children from the whole of Lowestoft, not just those in the Sure Start area. This has eased some concerns over the boundary element of Sure Start. Also, as we observed in last year’s report, families from minority ethnic groups appear to access activities at the library more than any other. This remained the case in year three.

2.43 Parents had very negative comments regarding their experiences of a previous local toy library and a library based toy library was identified as unmet need. The Programme has delivered this via the Sure Start Community Librarian who has provided a well stocked toy library with high quality, durable and stimulating toys. Parental feedback from the three year survey is an impressive 100% level of satisfaction.

Toy Library

Very Satisfied 56%	Satisfied 44%	Dissatisfied 0	Very Dissatisfied 0
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2.44 In addition, recent library data shows that at March 2004 there were 319 Sure Start families registered with the library. This represents a 182% increase for 2004 and an overall increase of nearly 400% from 81 to 319 between March 2000-2004. There is likely to have been a further considerable increase from March 2004 to the present time.

2.45 As can be seen from the above, over the three years numerous services have been developed by the Programme which meet the criteria of Objective Three. Baseline needs have also been addressed. Library services have gone from strength to strength and by year three the speech and language service was fully operational. Interviews with the representatives of the relevant partner agency show that they are confident that the Programme is on track towards meeting the SEN related target.

2.46 We must note, however, that in year three a gap in provision was identified which has yet to be filled. During the course of our evaluations it became clear that whilst some adults with additional needs were receiving services from the Programme via home visits and support, not many of this group were accessing other Programme activities. Therefore their children were not receiving core Programme services nor attending crèches whilst their parents accessed such services. At the request of the Programme Manager we identified the number of registered parents with additional needs and tracked their participation in the Programme. A significant number had little or no involvement and, consequently, an appointment has been made for an additional member for the FST employed by Social Care Services, partly funded by the Programme. This appointee will have families with additional needs as part of their remit. At the time of writing they had just taken up the post.

2.47 Objective Four: Strengthening Families and Communities:

Aim: *To encouraging all providers of children's services to take a wider view of their role in the community and to involve families in building capacity in the community and creating pathways out of poverty.*

To improving the availability, accessibility, affordability and quality of childcare to make it easier for all parents to find the childcare they need when they need it, enabling parents to work and contributing to the ending of child poverty.

PSA Target: a 12 per cent reduction in the proportion of young children (aged 0-4) living in households where no one is working.

SDA Targets: To create 250,000 new childcare places for at least 450,000 children, (approximately 280,000 children net of turnover) in addition to the new places for 1.6m children to be created between 1997 and 2004.

To create 180,000 new childcare places in the 20% most disadvantaged wards (and smaller areas of disadvantage).

To create 95,000 new high quality out of school club childcare places for children of school age by 2006.

To establish Children's Centres in areas of disadvantage extending core Sure Start services to a further 300,000 children, so that by March 2006 at least 650,000 children have access to Children's Centre services.

To increase the percentage of childcare providers inspected by Ofsted rated as good or better by 2006. Level to be set by 2004 when Ofsted system in place and initial baseline data available.

To at least double the number of users of the Childcare Link website and local Children's Information Services

Local authorities, Sure Start local programmes and Children's Centres to have effective links with Jobcentre Plus, local training providers and further/higher institutions.

As can be seen, many of these targets are national. We show them here so that the reader has the full picture. We focus only on those relevant to the Programme.

2.48 Baseline Data: Parents identified considerable unmet need. They felt that there was a need for more community buildings that could serve a number of functions: local parents and children could socialise there; they could be used to promote early years learning through play; they wanted to have easier access to toys and books by borrowing/lending and they wanted easier access to computers, community information, parental information and guidance. Parents also wanted a crèche provided for shoppers, full time workers, respite care and for community buildings to house a number of services to make access to professionals easier, for example speech and language therapy and health visiting. They also felt that there was a need for improved access to training courses for childminders and an increase in the number of childminders.

2.49 Parents wanted to develop a 'parent network' under the guidance of a community developer, who, it was hoped, would match the training of parents with community needs and liaise with statutory groups and parents to meet these needs. They also wanted a 24 hour 'care line' set up with local parents giving support, second opinions and first aid advice out of hours.

2.50 Parents asked for more opportunities for fathers and more courses with crèches. They also identified the need for more support for unemployed families; the development of literacy skills; community parents; crime and safety issues to be addressed; more Neighbourhood Watch Groups; more legal and welfare advice as provided by the CAB; help in using telephone services such as Childline and NHS Direct and more holiday and after school activities.

2.51 Provided by Sure Start: The Community Development Team has delivered a number of activities/services, which are listed below.

<i>Arts & Crafts Courses /Workshops</i>		<i>Confidence Courses</i>	
<i>Cookery/Food Hygiene Courses</i>	<i>First Aid Courses</i>	<i>Digital Photography</i>	
<i>Beginners IT</i>	<i>Intermediate IT</i>	<i>Web Design</i>	<i>Working with XP</i>

<i>Parenting Courses</i>	<i>Leader of the Pack Course</i>	<i>LETS</i>	<i>Childcare Courses</i>
<i>Natter Groups</i>	<i>Community Parent Training Programme</i>	<i>Home Visit/ Contacts</i>	
<i>by Community Development Worker</i>		<i>Home Visit/Contacts by Personal</i>	
<i>Development Worker</i>	<i>Whole Family Events (holiday periods)</i>		
<i>Fathers' Worker Services</i>			

2.52 One of the key community capacity building services provided by the Programme under Objective Four has been the Community Parents Programme. This is an ONC Level Two training course which enables the trained parent to make home visits (at the request of the parent) and offer support, give information, signpost to other services, accompany them to activities and provide a 'listening ear'. More recently, they have been given the additional task of calling on families who are new to the area, or who are accessing Programme services but who are not registered with the Programme, giving them the opportunity to register. (They have taken on this role since the Community Development Worker left). The CPP has in-built evaluation and feedback loops and the programme has been continually improved as a result of findings from these sources.

2.53 The success of this scheme is a little difficult to assess because there is a tension between two measures – on the one hand training a parent is quite expensive at £896 per parent, so the Programme needs to see a reasonable 'return' for this expenditure. However, out of the 20 trained parents only 6 are 'active' which obviously has cost implications. On the other hand it is a good investment as the main reason there are not many active parents is because some found employment or moved on to full time further education. Thus, one of the main aims of Objective Four is being met by this outcome. Further, the figure above only reflects costs, not effectiveness as such.

2.54 The progression of CPP parents also met a Baseline need in that the employment found and courses being taken are all in childcare. In addition, the Programme funded a further four places on Level Two childcare courses, and has therefore made a significant contribution to increasing the availability of good quality childcare. A further Baseline need has also been met in that the parents wanted a parents' network which is being provided by the CPP. We hope to look at effectiveness more closely next year.

2.55 In terms of improving literacy skills, the Programme has not funded any literacy courses for parents as it has taken a wider view, for example, over the three years good contacts have been developed with basic skills trainers, and several courses in, for instance, cookery and 'taster' sessions have been funded. These were planned around the needs of those with literacy difficulties. Staff have also attended awareness raising courses to enable them to identify parents who may have difficulties with literacy and numeracy. Further staff training is being provided which will enhance the ability of staff to identify basic skills and understand this topic and help them assist parents in choosing the most appropriate level of support. In addition, as mentioned previously, a new member of staff has recently been appointed to the FST with an additional needs remit.

2.56 A main unmet need identified from the Baseline Data was for community buildings to provide a range of services. The children's centre should be completed by July 2005. This is later than originally planned because the project has been subject to several delays ranging from decisions having to be made over increased costs to local politics. A major delay was related to VAT which caused very lengthy discussions between the Accountable Body and the Sure Start Unit. This delay resulted in a deadline being missed for Neighbourhood Nursery Initiative money and therefore the Programme faced a shortage of funding for future plans. Parents were left mystified and disappointed by this. Government funding (administered by the County Council) to create new childcare places has redressed the situation a little.



New Build Site 2001



New Build Site 2005

2.57 Parents had a major say in planning the Children's Centre and it will provide many of the things on their original 'wish list'. However, there is no longer enough funding available to match the original ideas for the satellite centres, so whilst parents will have a main building meeting their needs there is unlikely to be any satellite building development. This has caused considerable disappointment in the community and with partners. The Programme Manager, however, will ensure that the Programme still delivers some services at the satellites.

2.58 Courses with crèches was another Baseline need and the Programme has met this need well. As can be seen from the list above there have been numerous and wide-ranging courses, all with creche facilities or paid childcare. Parents have been given the opportunity to broaden their skills base and acquire transferable skills. Most courses have been well subscribed, many parents have acquired a 'study habit' (as shown in the year two report) and this trend continued in year three.

2.59 Thirty parents have received OCN level 2 qualifications, and a further 12 are currently taking or are enrolled on OCN level two courses. Also, as stated earlier, a further four people are nearing the completion stages of accredited childcare courses and over 50 parents have attended certificated courses such as first aid, cookery and hygiene. Whilst there is little evidence that any course has led directly to parents obtaining employment, all may have enhanced parents' skills and contributed towards 'job readiness' for those who wish to gain employment either now or in the future. Looking at less measurable outcomes, interview data suggests that attitudes towards education may also have been altered, which in turn may have a beneficial effect on parental attitudes towards children's education, leading to an increase in family aspirations. Over the period under review, in evaluations undertaken many parents also commented on the increased confidence and self-esteem attending courses had given them.

2.60 The PDW has developed good links with Jobcentre Plus and in 2005 she is planning to work in partnership with them and Norwich City College on the Extending New Deal initiative. This will enable her to refer Sure Start parents for funding which assists people seeking employment.

2.61 There was a high level of satisfaction with the courses as evidenced by the three year survey. The 6% dissatisfaction was related to venues and difficulties with creche facilities, not the quality of the courses.

<u>Courses with Qualifications</u>			
Very Satisfied 48%	Satisfied 48%	Dissatisfied 4%	Very Dissatisfied 0
<u>Leisure Courses</u>			
Very Satisfied 42%	Satisfied 56%	Dissatisfied 2%	Very Dissatisfied 0

2.62 With relation to crime, the Programme is a partner in the Waveney Home Shield initiative where families who need help with regard to home or personal safety can be helped to access the most appropriate source – this could include direct support from the Programme by supplying equipment or advice from the police on, for example, alarm systems. Other crime related work is achieved by encouraging community spirit so that families look out for each other, and the Programme Manager feels that the majority of the Programme activities help to do this. The FST offers individual support to families with crime and safety concerns and staff help families to make contact with, for example, the police or the housing department. The Programme has developed good relationships with local beat officers and with the police generally so that when families need help it can often provide a named contact.

2.63 Improved opportunities for fathers was also identified in the Baseline Data. A Fathers' Worker became part of the team at the end of the second year. He offers one-to-one support for male carers and has run activities such as bowling, and he also organised a first aid course for dads. Engaging fathers is proving to be difficult for many Sure Start Programmes. This Programme has had moderate success to date with a core group of about 20 male carers now engaging with the Programme. Plans for encouraging more males to engage with the Programme include a 'skills week' in the February half term break that will include sessions which it is hoped will appeal to males, for example, how to build a barbeque.

2.64 Holiday outings and parties have always attracted large numbers; five or six coaches have been needed for some trips. Holiday activities were identified as a Baseline need and requests for more of these have been made throughout the Programme, the holiday period is particularly stressful for some families. A recent directive from the Sure Start Unit was that such activities should no longer be included in the reach figures sent to them. Whilst we can see the logic of this we do feel that it is in some way 'downgrading' the beneficial effects of trips and parties such as networking and valuable learning experiences. For Sure Start North Lowestoft this element is particularly important because parents now have 'ownership' of this aspect of the Programme (see 3.24).

2.65 As shown earlier in the Baseline Data, parents wanted a parent-led advice system. A 24 hour 'care line' was identified as a need. During our interviews with other agencies this was also identified as a need. It was felt that although there is NHS Direct this service does not cover everything, for example, a crying baby might not be a medical problem. It was also mentioned that on the whole the Programme does not provide services outside normal office hours.

2.66 The Programme has developed an excellent relationship with CAB, a 'fast track' system for Sure Start parents has been established and CAB training is soon to be offered to staff and parents. A CAB worker will also be available in the children's centre. Whilst a parent led care line has not been established, the CPP, and parents being trained by CAB are establishing parents as peer advisors and this goes some way towards this need identified by parents.

2.67 As can be seen from the above, numerous services and activities have been provided which meet the need identified by parents and this provision is working towards meeting the targets and the Objectives. Parental satisfaction with courses was high. The only area of dissatisfaction for parents and partners relates to the delays to the new build and the lack of future development for the satellites. Whilst this is entirely understandable it was to a large extent due to external factors and thus out of the control of the Programme. Indeed, it caused considerable frustration, particularly for the Programme Manager.

3. SECTION TWO: PROCESS

Strategic Partnership Working

3.1 As noted in our first Annual Report, evaluation of partnership working is a government requirement. Successful partnership working is a key element of the Programme and it has been evaluated throughout. The Programme's structure is complicated as many agencies are involved in the management committees and staff are also employed by different agencies. No definition of partnership is ideal but Tennyson (1998) defines it as "a cross sector alliance in which individuals, groups or organisations agree to: work together to fulfil an obligation to undertake a specific task; share the risks as well as the benefits; and review the relationship regularly, revising their agreement as necessary." (Tennyson R 1998 *Managing Partnerships: Tools for Mobilising the Public Sector, Business and Civil Society as Partners in Development*: Prince of Wales Business Forum.)

3.2 Agency representatives were interviewed face-to-face at the beginning of the Programme, by telephone after 18 months, surveyed at the two year point and interviewed again face-to-face for this Report. Before the Programme began there had been a history of some positive interagency working, but some agencies had not worked well together. The Programme had to create its own model of partnership working and it has been set in a background of reorganisation of several of the agencies, causing uncertainty and instability for its representatives.

3.3 During year two of the Programme there was a low turnout of members - this is despite the fact that the agencies had signed up to participation in the original Delivery Plan. As mentioned in the year two report, at that stage agency members were asked to send a replacement if possible. As low attendance has continued throughout year three this issue is being focused on at the present time and the IG will be taking a different form from February 2005. The overall lack of commitment was

the main concern at the end of last year and the tendency to leave it to the staff to run the Programme. Comments were made that the management meetings had enabled networking to take place and this has continued throughout the third year. Respondents in the second year were no longer concerned about the slow start to the Programme as it was expanding well.

3.4 There was concern that the core group of parent members on the committees were not being replaced as their children either reached the age of 4 or they left the Sure Start area. However sub groups were formed with very good parental representation; views from these groups were fed back to the main management meetings. At this stage last year there was only one community representative; there are several now.

3.5 For the third year report twelve interviewees agreed to be interviewed and they were asked for their views on interagency working, community involvement in the Programme and its progress in relation to national targets and objectives. Also their views were sought on barriers to the success of the Programme and, if necessary, how these barriers could be overcome, their ideals for the future and whether they felt that Sure Start had made a difference.

Interagency working

3.6 Most respondents felt that partnership working had been successful 'on the ground' through Sure Start staff being employed by different agencies; this enables one agency to signpost families to another. However progress had been a little slow with the statutory sector partly due to their pressure of work and their priorities. In year one a comment was made that a cultural change needed to take place and it was felt that this is still needed. Often the statutory sector has not taken into consideration the high level of involvement which Sure Start has had with some families. Sure Start's way of working is similar to that of the voluntary sector and therefore these problems tend not to exist with that sector. However, it was felt that the situation is improving as a result of central government's steer on partnership working but it was noted that professionals cannot be completely interchangeable. At a strategic level, through Children's Futures, there is 'joined-up' working. Also the new additional needs post is a joint appointment between Sure Start and Social Care Service.

3.7 It was also felt that partnership working is going well within the management meetings although more progress is needed. One respondent, for example, commented that there was "*still a gap*" between rhetoric and action. The management meetings were seen to be extremely beneficial for both the voluntary and statutory sectors. However, there was some disappointment again that there has been a poor turnout for the meetings and there are no substitutes for the members. Poor turnout is not an uncommon problem in partnership working. As Harrison and others (2003 p72) state, "Partnership work demands patience and energy. As a partnership enters its middle stages, there will be times when, individually and collectively, we suffer from what can be called 'partnership fatigue'. (Harrison R, Mann G, Murphy M, Taylor A and Thompson N (2003) *Partnership Made Painless: a joined up guide to working together*: Russell House Publishing.)

3.8 Interviews revealed that some members did not know that they could send a substitute to meetings. A further reason given for low attendance was that once a project is running smoothly, members do not feel the urgency to attend the meetings.

One view was that it would be better to have more committed people even if they are not as senior as some of the present members.

Working towards national objectives

3.9 Respondents were asked about the national Objectives that were most relevant to them:

3.10 Objective One - it was felt that there have been improvements in children's social and emotional development. Mucky Ducks was mentioned as an activity where socialisation has been seen to improve. However as mentioned above, it was felt that there are still some difficulties regarding interagency working between Sure Start and Social Care Services 'on the ground'.

3.11 Objective Two - respondents felt that the Programme is on target to reach this objective.

3.12 Objective Three - respondents thought that the situation had been improved through high quality activities supporting children's development; the library based services received very positive comments here. It was noted that additional needs have been identified through Sure Start staff and these children have been supported.

3.13 Objective Four - respondents felt that community capacity has been strengthened through the positive role parents have played in the Programme. It was hoped that this would improve further when there is a children's centre and the age limit and geographical boundaries have been removed. In terms of employment opportunities, respondents commented on the positive role of the Programme in its contribution towards childcare training. However, it was felt that there is further work to be done. Increased childcare provision has improved opportunities for parents to seek employment, but achievements in the workplace are difficult if wages continue to be low for those with few qualifications.

Possible barriers

3.14 The main barrier mentioned was the geographical boundary and the age limit set for the Programme. A suggestion was made that, as children reach the age of four, families should be signposted on to other agencies if necessary. On the same theme there was concern about the small geographical area focused on for Sure Start possibly creating a stigma but, on the other hand, by concentrating the Programme it has made it very visible. It is hoped that future funding will provide consistency of provision.

3.15 It was felt that roles still need clarifying in partnership working. Communication between agencies can be good but partnership working is more than information sharing; for example, some advice has to be given by the appropriate specialist in the field. This problem has arisen in the Programme and was overcome by the agencies meeting up and discussing the issues. A comment was made that there needs to be a balance between befriending - an important role - and remaining objective, which is necessary as a professional. Also, in terms of reviews of family circumstances, Sure Start is sometimes treated as an external agency by the statutory sector. It was felt that better partnership working is needed in this context.

3.16 Ample provision for older children in the school holidays was seen as necessary to prevent this becoming a barrier to families taking part in arranged activities.

Future ideals

3.17 It is hoped that the Programme will be mainstreamed throughout the professional groups and across professional boundaries via interagency working. Sure Start has enabled families to have access to education in its widest sense. An ideal mentioned was that all families should be enabled in this way and for the community spirit to spread further. A wish is that the new children's centre will be a focus providing more opportunities for parents in the area, and be a parent-led well run venue, although concern was expressed that national future plan for the centres may not fully involve the views of the community in the way that Sure Start has done.

3.18 Other comments were that in the short term there should be "*more of the same*" and in the long term that, "*Sure Start is not needed*". One respondent expressed concern that the proposed changes in 2006 might bring about the latter too soon.

The difference Sure Start has made

3.19 Respondents had very positive views here commenting that Sure Start has made an enormous difference to "*a huge number*" of children and families, and therefore the community. As one respondent put it, it has given families "*a ladder to climb*" and helped them with the first rung. Many interviewees commented that the concept of neighbourhood had been revitalised. Families 'drop in' on each other and they no longer feel isolated. This was considered to be of particular value for mothers on their own. Those who were marginalised now have better information and they have the opportunity to voice their opinions and are listened to; young people had "*certainly been given hope*" and 'hard to reach' families had been reached. Positive comments were also made regarding health visiting and midwifery services and the improvement in the amount of outreach work. Respondents felt that the Programme is very fortunate to have staff who relate well to parents; without them the Programme would not have been so successful. This view is shared by the Programme Manager who feels that staff skills and commitment to the Programme has been one of its main strengths.

'Ground Level' Partnership Working

3.20 The Programme has delivered services with the collaboration of a number of partners. All staff were asked (via a questionnaire) about their experiences of partnership working. Close, regular collaboration is essential to the Sure Start way of working - as one staff member put it "*my job would be impossible without good working relationships with other agencies*". Staff felt that partnership working has helped build up relationships with groups and families as well as staff. The collaboration takes the form of offering and receiving support; meetings; joint home visits, clinics and activities. Referrals are made between the agencies. Other agencies also provided training for Sure Start staff and vice versa. Sure Start resources have enhanced the provision of other agencies, for example, the library.

3.21 However, although there was, in general, good collaboration, sometimes the collaboration did not work as well as it might have done. Staff identified two barriers

here. One was pressure of work and staff shortages in the statutory sector; the other professional culture. One staff member in particular was finding it difficult to cascade the 'Sure Start way' to some other professionals, finding resistance to adapt to the more informal style of Programme drop-ins and a lack of enthusiasm to take the health promotion message on board.

3.22 Other respondents have also raised the issue of a cultural change (even sea-change) being required. This is, possibly, one of the biggest challenges faced by Sure Start Programmes. It is, perhaps, expecting rather a lot for a programme rooted in child welfare to bring about such changes. If the government is truly committed to Sure Start principles as the way forward it is to be hoped that these principles now underpin the training provided by the relevant bodies.

Parental Involvement

3.23 Parental involvement (by which we mean parents actively involved in running the Programme via participation in the decision making processes, not just accessing services) has always been at the heart of the Programme. Parents were involved at a very early stage, campaigning for Sure Start to come to Lowestoft, attending the early consultation processes and forming a core group which helped write the Delivery Plan. Those parents went on to become the first parents on the management committees, the Implementation Group and the Partnership Board, and were the nucleus of the Parents' Group. In year one parental involvement in the IG and PB was strong, but as these parents left (due to their children reaching 4 years old or leaving the area) new parents were more difficult to engage at this level. Year two saw a dropping off of parental involvement here and whilst new parents eventually became involved their attendance gave cause for concern. This trend continued in year three and we were asked by the IG to ascertain what would enable parents to become more actively involved and consequently we conducted a series of interviews with them. Findings revealed that some parents on the IG and PB were finding the meetings too formal and at times found them difficult to follow, and felt that their 'voice' was not being heard. The parents had a number of suggestions on how to improve the situation and these will be implemented in 2005. It should be noted that the number of agency representatives also dropped and a new format for next year should, hopefully, assist in increasing parent and agency attendance.

3.24 The Parents' Group has not had the same difficulties. This group has met monthly throughout the three years; it is the forum where parental ideas are generated which shape the Programme. Numbers of parents have remained constant throughout the period and in year three an important milestone towards 'ownership' was reached when the group became fundholding, with a budget of £7,000. A dedicated staff member is on hand to assist as necessary and the group is now in charge of organising whole family 'social' events that run during the holiday periods, and to date they have arranged trips and parties. It has also taken the Programme forward in that some of the events have been in the evening as the group was aware of the needs of working parents. Parents are now generating ideas and following them through via discussing, planning, budgeting and organising venues, transport and publicity. Clearly capacity building is taking place; all the events have been well attended and they have generally received positive feedback.

3.25 As well as the IG, PB and PG participation, parents have worked with the Programme in a number of other ways. They formed the majority members in the Hard to Reach and Parent Development sub-groups, and they are active members of the

Buildings and Resources Group where decisions about the new build and satellites are made. They have had involvement in job descriptions and interviewee selection, sat on interview panels, assisted with monthly mailshots, undertaken evaluations and helped staff at some activities. We are pleased to report that in year three the Programme has involved parents in all the aspects identified in the parental involvement benchmarks chart (see Appendix Three).

3.26 Interviews with partner agencies indicate how notable they felt that parental involvement has been; *“hugely successful”, “fantastic”, “extremely impressed” “the increase in their self esteem is amazing” “very professional”* were some of the comments from partners.

3.27 Turning now to views of parents; over the period under review we have carried out many evaluations seeking their views and present a small representative sample below to give the essence of parental feelings about the Programme. Parents’ views have been overwhelmingly positive ranging from appreciation at learning new skills with comments such as *“I never knew I had it in me”*; improved child/parent relationships *It’s made me a better mum*”; the development of social skills *“I’m not so nervous about meeting people now”*; improved child behaviour *“He is so much better with other children now”*; sheer enjoyment *“... just loves [the activity]”*; changing self perception *“I am so much more confident now”*; progression *“Now I’ve done the basic course, I want to do the next stage”* socialising *The opportunity to meet others is just great, no more sitting at home alone*”; financial benefit *“We have done things I could never have afforded”*.

3.28 The three year satisfaction survey showed that 98% of parents felt that they had benefited from the Programme. When asked how, the top five answers were:

- Made friends/met people
- General support
- Increased confidence
- Improved child-child interaction
- Affordable activities

3.29 As we have shown, parental satisfaction with the programme is strong. However there have been some dissenting voices. Concerns here related mainly to lack of venues, the timing of some activities and the length of time some things take. The problem with finding venues should be eased once the children’s centre is completed. The timing of events is a difficult issue because what is good timing for one family can be bad timing for another - a case of not being able to please all of the people all of the time. The Programme is aware that most of its activities are in ‘office hours’ although there is a monthly Sunday event at the library and the bowling for dads was an evening activity; the Parents’ Group is also examining this issue. With regard to the amount of time things take, whilst the advantages of partnership working are well known, a disadvantage is that decisions sometimes have to go through the bureaucratic mazes of different agencies – by definition this is time consuming.

Mainstreaming

3.30 Throughout the three years staff have promoted the advantages of the 'Sure Start way' of working in the agency which employs them and to other contacts. This way of working is further promoted by the monthly mailings going to a wide range of professionals within the area. Sure Start practice has been disseminated by presentations at numerous community and agency groups. Staff have also provided training courses which have been well attended by professionals from, for example, health and education services. Many Programme activities are multi-agency. In addition, the Programme Manager and other staff sit on boards which encourage multi-agency working and community consultation. The Programme Manager feels that the Sure Start ethos is now well established in the area and the proposed national changes regarding children's centres will further enable mainstreaming.

3.31 To summarise this section: partnership working took place during year two against a background of reorganisation of many agencies and there was a low turn out of members for the management meetings. This continued into year three and it is being addressed by the imminent reorganisation of the Implementation Group. The management meetings have been successful in terms of networking.

3.32 Regarding the Objectives; the view of partners was that the Programme is on target to reach Objective Two and there have been improvements regarding Objectives One, Three and Four; thus the Programme is working steadily towards achieving the objectives. The main barriers for the Programme were identified as the age limit and the geographical boundary, and it is hoped that this situation will be improved in the future. Also clarification of roles is needed with some agencies. Concern was expressed that the community may not be consulted in the future as they have been by Sure Start. It was generally felt that Sure Start has made an enormous difference to people's lives and that the concept of neighbourhood has been revitalised.

3.33 At 'ground level' staff working with other agencies has been essential and is working well, but there are some reservations about differing professional cultures and the pressure of work for some agencies.

In terms of parental involvement, although the core group of parents left the Programme, other parents have been attending sub-group meetings which have fed back to the main committees. The Parents' Group has had a budget for 'social' events enabling them to have 'ownership' of this aspect of the Programme. Parents' views on the Programme have been very positive. Venues have been a difficulty but this issue should be alleviated by the children's centre. The length of time it takes to make decisions was also considered a problem. Whilst there are many advantages to partnership working this is one of the disadvantages. Regarding mainstreaming, the Sure Start ethos has been established in the area.

4. CONCLUSIONS

4.1 Two key strands of the Sure Start project are that it meets unmet need identified in Baseline Data, and that there is parental 'ownership' of the Programme. Has North Lowestoft Sure Start met the need identified in its Baseline Data? Yes. As can be seen from this and the earlier reports numerous activities and services have been provided that meet Baseline identified unmet need. One or two areas still require attention and the Programme is alert to this. Our findings, based on the evaluation of

services and activities over the three year period, are that, in general, the Programme has met need well, and also achieved 'quality measures' such as parent/child consultation; suitable access and times; staff availability and approachability; good quality, stimulating toys; well publicised activities; good child-child, child-parent and parent-parent interaction at activities. These findings are confirmed by the three year parental satisfaction survey in which 96% was the lowest level of satisfaction with specific services. The Sure Start Unit sets a target of 75% overall satisfaction with services by year three, and here the Programme had a 77% satisfaction level. There have been some notable achievements and these are presented in Appendix One.

Has the Programme moved forward regarding parental ownership? Here there is a mixed picture. Building on the successes of year one and two it was expected that parental ownership would take root in year three. There has been some positive movement here in that the Parents' Group is fundholding; over the three years around twenty parents have worked with the Programme on an ad hoc voluntary basis and a further twenty currently work as community parents, breastfeeding supporters and administrative helpers. In addition the Programme is hoping to appoint a parent with an OCN Level 2 qualification (or equivalent) to carry out aspects of the vacant CDW post. If this is successful a further parent appointment will be made.

4.2 However, in the sense that *ownership* of the project would mean parents running some activities – this has not yet happened. With regard to the decision making forums, disappointment was voiced by some partners who hoped that by year three they would be taking a facilitating role here and that parents would have the 'lead' role. Initially the Sure Start concept was that parents would 'lead'. However, there was a shift in focus by the Sure Start Unit towards parents and agencies working as partners in the decision making process, and this is the model adopted by the Programme.

4.3 The Programme had plans to re-energise parent (and agency) interest in the decision-making forums; these plans were under discussion for almost the whole of the last year and were one of our recommendations in last year's report. The Programme has found itself in a 'Catch 22' situation here in that the decision making forum discussing how to rekindle parent and agency interest was itself inquorate at several meetings due to the lack of attendance of parents and partners at the meetings where there were discussions on how to improve itself!

4.4 Turning now to evaluation plans for the coming year, four parents, four members of staff and a member of the PB are currently on an OCN research methods course. We plan to work with this group as they undertake service evaluations which we will supervise. We will also be completing the case study evaluations and will present a report by April 2005. More detailed evaluations of cost effectiveness will be carried out.

5. RECOMMENDATIONS

5.1 With regard to recommendations to move the Programme forward in the coming year, looking first at cost effectiveness, we have only been able to carry out two partial studies because it took much longer than anticipated to get the figures. If we are to carry out further studies we need a robust mechanism in place to enable us to access the costings.

Recommendation One: That dedicated or bought in time is allocated to providing us with the figures necessary for cost effectiveness evaluation to take place.

5.2 Turning now to service delivery, as we are internal evaluators we give on-going feedback and recommendations to the Programme Manager throughout the year. Consequently our 'end of year' recommendations here are few.

5.3 Two areas which still require attention are the smoking cessation target in relation to smoking in pregnancy, and the engagement of fathers in the Programme. We realise that these two aspects are different in kind from other service delivery in that one requires personal commitment and the other cultural change as prerequisites. They are both, therefore, challenging areas of the Programme.

5.4 The Programme needs to retain and further develop the recent focus on engaging with pregnant mothers who smoke. This is not an easy area of work and our understanding is that other Sure Starts are also struggling with the target. It would be helpful if those with an overview, that is, the Sure Start Unit and NESS, could disseminate good practice from those Programmes which are having some success in this area.

Recommendation Two: That steps are taken to ensure that the momentum the Programme started in year three regarding the smoking in pregnancy target and the engagement of fathers with the Programme is continued.

5.5 Turning now to process, our remaining recommendations relate to re-energising the decision making forums.

Recommendation Three: It is hoped that the Programme will act as soon as possible to rekindle parent and agency interest at this level. Agency representatives need to take a pro-active role in moving the Programme forward here.

Recommendation Four: The decision making forums – PB, IG and PG - should more accurately reflect the profile of the area served. These bodies should try to recruit membership from more diverse groups and families. This could bring a new dimension which may in itself be re-energising.

6. FINAL COMMENT

6.1 Evaluation is research based inquiries which inform judgements on the value or worth of (in this case) social projects or programmes. From our evaluations over the past three years it is clear that the Programme has been worthwhile and of value to parents, partners and the community. There are one or two areas of unmet need that still need attention - the Programme is alert to this, and parental 'ownership' is still to be achieved. In general, however, the Programme has done well in terms of working towards objectives and targets. The Programme Manager is particularly pleased with how "vibrant" the Programme is and it has exceeded her expectations. She would also recommend the model of internal evaluators to future projects.

6.2 At the time of writing this report there is a degree of uncertainty about the future. From March 2006, Sure Start Programmes will be under the auspices of local authorities, but it is not known which department. There is no clear understanding of what the role of parental involvement, community development or evaluation will be

and funding will not be ring fenced. Uncertainty is not good in terms of organisational health or community involvement and it is to be hoped that this does not impact negatively on Sure Start Programmes in the coming year.

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APPENDICES

Appendix One

Key Achievements

- ☀ The Programme has developed good working relationships with statutory and voluntary organisations.
- ☀ Staff have built up excellent and trusting relationships with parents.
- ☀ 782 families have registered with the Programme on a voluntary basis.
- ☀ All Sure Start families receive information about Programme activities on a monthly basis, plus a termly newsletter.
- ☀ Monthly reach figures reached over 300 in 2004.
- ☀ 100% of children are contacted within the first two months of birth.
- ☀ The number of Sure Start families registering with the library increased by nearly 400% from March 2000-2004.
- ☀ 613 families have received services since May 2004, 20% of whom have accessed 3 different services.
- ☀ There is a fundholding Parents' Group and parents have been meaningfully involved at all levels of decision making throughout the Programme.
- ☀ 30 parents have received OCN qualifications and approximately 50 parents have attended certificated courses.
- ☀ 180 families received support from the Family Support Team in 2003/4.
- ☀ Four services received a 100% parental satisfaction rating, and 96% was the lowest satisfaction rating for the rest.
- ☀ 98% of families surveyed said they had benefited from Sure Start.
- ☀ There is a rolling programme, which takes children from babyhood to pre-school.
- ☀ Services for children with additional needs have been established.
- ☀ A Community Parent Programme has been established.
- ☀ A successful young parent project has been established.
- ☀ A Breastfeeding Support Group has been established.

Appendix Two

SURE START NORTH LOWESTOFT REGULAR EVENTS GRID

Name of Activity and Frequency	Purpose	Age Group	Max Capacity	Average Attendance	Bookable Drop-In Invite	Organiser	Min Staff Numbers	Routine Staff Numbers	Linked Activity (e.g. crèche)
Baby Bounce Weekly - Friday Library	To encourage interaction with babies through music and rhyme thereby improving relationships	Babies 8 weeks to 1 year	20 with carers	15	Drop-In	Community Librarian	1	1	
Baby Massage Rolling 5 Week Programme Milton Road/Home	To promote attachment and bonding and to help parents socialize	Babies less than 8 months	7 with carers	5	Bookable or Invite	Nursery Nurses	1 Trained	1	
Bundles of Fun Weekly - Friday Library	To promote play and development To give health and parenting advice To offer socialization and support	Babies under 1	25 with carers	15-20	Drop-In	Nursery Nurses	2	2	
Family Play Weekly - Friday Term Time - Library	To encourage learning through play	0-4s	30 with carers	25	Drop-In	Community Librarian	3	3	Totally Staffed by Library
Monday Moonbeams Monthly Library	To encourage integration of families with children with additional needs	0-4s with additional needs	8 with carers	3-4	Invite	Community Librarian Portage Worker FST member	2 (1 with additional needs experience)	4	Includes 1 Library Staff
Mucky Ducks Weekly - Thursday Crown Street + Outdoor Venues	To encourage socialization of parents and children under 4 To model a variety of play and to stimulate language	0-4s	25 families	20	Drop-In	Nursery Nurses	3	3	
Peeps Weekly - Monday Term Time Crown Street	To develop early education skills To prepare children for playgroup	1-2 & 2-3	10 with carers	3 & 5	Bookable	Community Librarian Nursery Nurses	2 + Community Parent	2	Needs an additional adult to be with children
Tot Rock Weekly - Wednesday Term Time Library	To introduce children to music, rhyme and rhythm To encourage socialization and learning	10 months to 4	20 with carers	20	Drop-In	Community Librarian	3	3	
Surf Sundays Monthly (am and pm) Library	To introduce early computer skills for parents and children	Carers and children 2-8	8 families per session	4	Bookable	Community Librarian	3	3	Totally Staffed by Library

Parents and Tots Swimming Weekly	UNDER REVIEW								
Blues Crew Blocks of 8 sessions weekly Seashore Nursery	To offer strategies for relaxation and support for parents who are depressed or stressed	Adults with under 4s	12	6	Invite	Health Visitor	2	2-3	Childcare
Blue Lamp Drop-In Weekly - Thursdays Blue Lamp Café	To offer support to families experiencing depression, stress or who have other mental health issues	Adults with under 4s			Drop-In	Health Visitor FST member	3	3	Partnership with other agencies – open to families outside area
Bumps and Beyond Weekly - Tuesdays Low Hospital	To offer support and information to pregnant women and families with children up to 1 year To offer opportunities for families to socialize	Pregnant mums with children up to 1 year	15	7	Invite and Drop-In	Midwife Nursery Nurses	1 + 2 volunteers	2+2	Over 1s welcome if parent pregnant or has child under 1
Community Parents Support Group Blue Lamp Café	STARTING SHORTLY To encourage families supported by Community Parents to socialize and build up new friendships	Families supported by Community Parents				CPP Co-ordinator			
Gunton Drop-In Weekly - Wednesdays Term-Time Gunton Baptist	To provide an alternative and accessible health visiting service	Carers with under 4s	10	4-6	Drop-In	Health Visitor	1	1	Other staff may attend to offer specific service
Parents Group Monthly - Fridays Term Time Various Venues	To contribute to the content and direction of the local programme	Carers with under 4s	30 (crèche limit)	12-15	Drop-In	Personal Development Worker	1 + crèche workers	2	Crèche & Taxi bookable
Coffee and Chat Fortnightly - Term Time Roman Hill School	To offer support and advice to parents with children under 4 and older	Carers of 0-9s	15	2	Drop-In	FST member	2	2	Under 4s can attend with carer
D4D Dads' Group Monthly - 46 Alexandra Road	To help dads integrate into Sure Start To improve parenting skills of dads	Male Carers	25	3	Drop-In	Fathers' Worker with Action for Families Team	2	3	Under 4s can attend Partnership with Social Care Services
Additional needs Support Group Monthly - 46 Alexandra Road	To offer peer support and signposting for families with children with additional needs	Carers of children with additional needs	10 adults & 12 children	10	Drop-In	Family Advocacy Worker	2 (1 with s. needs experience)	1	Partnership with FWA, Social Care and Parent Partnership

Stop Smoking Group - Weekly Fridays Seashore	To offer peer support to adults wanting to quit smoking	All carers	12 + children	4	Bookable	Smoking Cessation Advisor	1 + 1 Community Parent	2	
Baby Café	NOT YET UNDERWAY					Midwife			
LYPP Weekly-Wednesday Salvation Army Hall	To offer a range of support to young parents and parents-to-be Whole Lowestoft Area	13-20 year olds + children	14	15	Drop-In	Midwife	3	3-4	Partnership with Connexions, Community Education
Aquanatal Weekly - Monday Waveney Leisure Centre	To offer aquanatal exercise to pregnant and postnatal mums	Pregnant and Post-natal women	6	15	Bookable	Midwife	1	1	Open to those outside area
Bookstart Plus Bookbags	To encourage the development of children's language and book skills	2 year olds	All 2 year olds	—	Personal Invite to Collect	Community Librarian	N/A	N/A	

Appendix Three

BENCHMARKS FOR PARENT INVOLVEMENT

PARENTS' IDEAS INFORM THE PROJECT	✓
PARENTS AS USERS OF SERVICES/ ACTIVITIES	✓
PARENTS AS MANAGERS/DECISION MAKERS	✓
PARENTS AS VOLUNTARY PROJECT WORKERS	✓
PARENTS WORKING ALONGSIDE TEAM MEMBERS	✓
PARENTS WORKING AS PAID EMPLOYEES OF PROJECT	✓
PARENTS RECEIVING TRAINING	✓
PARENTS AS POLICY FORMULATORS	✓
PARENTS AS POLICY DESIGNERS	✓
PARENTS AS POLICY IMPLEMENTORS	✓
PARENTS AS EVALUATORS	✓
PARENTS AS BUDGET HOLDERS	✓

Adapted from the Humberside Community Participation Model