

Sure Start Acton Summary Evaluation Report for the period April 2002 – December 2004

Introduction

Sure Start Acton began by a group of local parents being approached by the Pre-school Learning Alliance (the Lead and Accountable Body for Sure Start Acton) and asked could they carry out a survey of levels of satisfaction on the South Acton and Acton Vale Estates and then work towards producing a delivery plan that would outline what types of services parents felt were needed in the local area. From the very start the local programme was parent driven and the delivery plan was a collaboration of parents and Pre-school Learning Alliance staff. The developments that have happened since the programme's approval in March 2002 until December 2004 are detailed in this summary and the impact of Sure Start is shown in the many evaluation projects that have taken place in this two year period.

Background to Sure Start Acton

Sure Start local programmes were set up in recognized areas of deprivation and their aim was *'to work with parents-to-be, parents and children to promote physical, intellectual and social development of babies and young children – particularly those who are disadvantaged – so that they can flourish at home and when they get to school, and thereby break the cycle of disadvantage for the current generation of children.'* In Acton those areas were the South Acton and Acton Vale Estates and Rufford and Moreton Towers. The key objectives for local Sure Start programmes are:

- 1. Improving social and emotional development**
In particular, by supporting early bonding between parents and their children, helping families to function and by enabling the early identification and support of children with emotional and behavioural difficulties.
- 2. Improving health**
In particular, by supporting parents in caring for their children to promote healthy development before and after birth.
- 3. Improving Children's ability to learn**
In particular, by encouraging high quality environments and childcare that promotes early learning, provide stimulating and enjoyable play, improve language skills and ensure early identification and support of children with special needs

4. Strengthening families and communities

In particular, by involving families in building the community capacity to sustain the programme and thereby create pathways out of poverty.

This report will take each of the objectives in turn and outline the progress made under each heading and the evaluation that has taken place in relation to these activities. To give a framework to each objective the Public Service Agreement targets will be used as headlines to give specific targets and how they were addressed.

Objective 1 – Improve Social and Emotional Development

Target one – to reduce the proportion of children aged 0-3 in the Sure Start area who are re-registered within the space of 12 months on the Child Protection Register by 20% by 2004.

In the first two years of Sure Start Acton 2002-2004, there were no children aged 0 -3 years of age re-registered within the space of 12 months on the child protection register.

Although Sure Start Acton has liaised closely with the local Social Services Department and very much promoted the services of Sure Start to a number of teams, the referral rate from Social Services has been very limited. Recruitment has been a serious issue for Ealing Social Services and this has meant there has been a lack of continuity in teams that has been problematic. Nevertheless the family support team has offered a home visiting service, especially to new births, that has included one to one support for parents. The family support team has also recently been fully trained in the Triple P parenting programme to enable targeted help around routines, self esteem and parenting guidance.

The Programme Manager is a member of the Area Child Protection Committee and maintains close contact with all child protection regulations and policies. She also carries out regular updates to the Social Services teams to ensure close working between the family support team and social workers. As the programme becomes more established and when the Children Centre opens officially, the links should be even stronger.

Another related area that the team has been involved in is domestic violence. The Programme Manager is a member of the Ealing Domestic Violence Forum and the whole team has taken part in Domestic Violence Awareness training in order to raise our awareness of support services and legal protection for families. There has been a proven link between domestic violence and the likelihood of child abuse and this is an area that Sure Start programmes have really had to tune into.

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

*In the first year of Sure Start Acton (2001-2) there were 24 mothers identified with PND and 100% of those were appropriately supported **

In year 2 (2002-3) 11 identified, 100% supported

In year 3 (2003-4) 14 identified, 100% supported

* Appropriate care is defined as the number of mother's who have had a mental health package of care opened as the health visitor identified PND.

Support for post natal depression has come through home visiting and more recently through a postnatal support group, which is run jointly by health visitors, Sure Start family workers and the Sure Start midwife. A serious obstacle for the measurement of post-natal depression symptoms is the lack of an approved indicator set by Ealing Primary Care Trust. The Sure Start Acton Public Health Co-ordinator has proactively pursued the development of a culturally sensitive scale.

A focus group and case study were carried out on the post natal and breastfeeding support group and the results of these studies can be seen in appendix one.

Target three – 100% of families with young children contacted by local programmes within the first two months of birth.

In year 2 (2002-3) 10% of children in the Sure Start Acton catchment area were visited in the first two months. (13 babies out of 135 new borns)

In year 3 (2003-4) 43% of children in the Sure Start Acton catchment area were visited in the first two months. (77 babies out of 179 new borns)

All new birth data is provided by the two hospitals serving our area – Ealing Hospital and Queen Charlotte's Hospital. After we receive new birth details we are then required to gain permission from the parents to contact them, as the Primary Care Trust data is protected and requires the health service to gain consent to share data with the local Sure Start programme. This consent has been sought through letters being sent from the local health centre and more recently through referrals from the health visitors. The first method brought a reasonable response, but the referral process has resulted in even lower returns. One of the biggest obstacles to overcome was persuading

health visitors to refer families to Sure Start as they felt strongly about the catchment area being unfair and also that the burden of work they had already did not allow time to give information on Sure Start. We tried to resolve this in a number of ways, by producing welcome packs giving details of all Sure Start services and easy to complete registration forms. We have also carried out a number of joint training programmes with health visitors and provided support services for their baby clinics. They have slowly been encouraged to make more use of Sure Start services, but it has greatly affected the family support team's access to new birth families. The employment of a midwife recently has helped with ante-natal registrations, but there is still the need for a more direct response to new birth data.

Target four: Parenting support and information available for all parents in Sure Start areas

Year II (2002-3) 266 children aged 0-3 years seen by Sure Start programme, 33% of Sure Start Acton families received parenting support and information

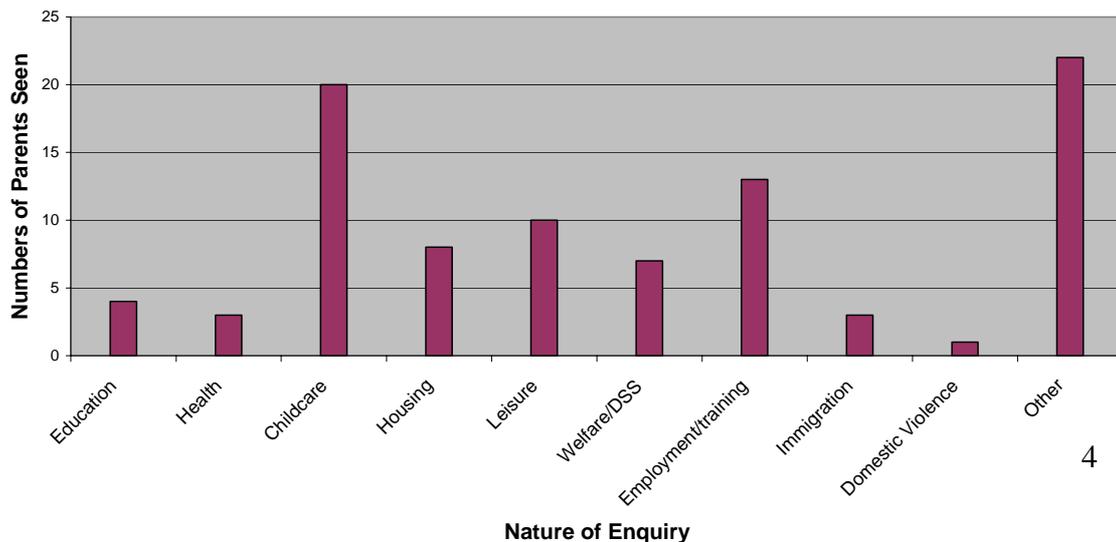
Year III (2003-4) 328 children aged 0-3 were seen, 52% of all families

The subject of information was a key area recognized in the early delivery plan stage. Many parents were unaware of services available to them in Acton and therefore there was a need for an easily identifiable information service. The Sure Start Acton Information Centre was opened to particularly target the information gap and offer advice on topics such as health, welfare benefits, employment and training, childcare, leisure activities and general family support. The following profile shows the impact of that information centre on providing information to parents in the Sure Start Acton area.

Sure Start Acton Information Centre – Progress Report – June 2003

From its opening in Jan 2003 the Sure Start Acton Information and Advice Centre has proved to be popular with locals as shown in the chart below:

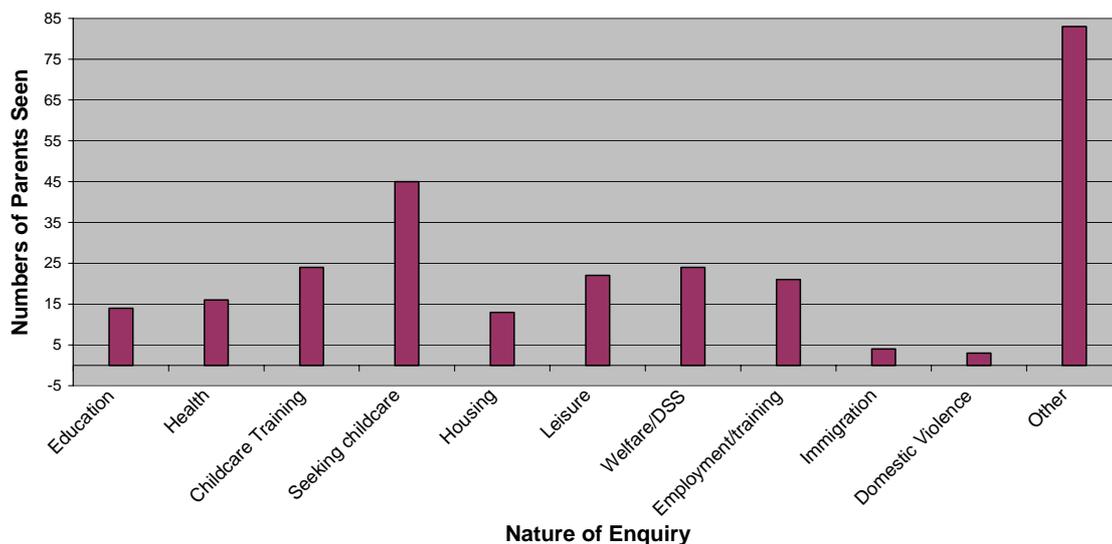
Sure Start Acton Information Centre Customer Service Jan - Jun 2003



As shown in the chart the main areas of interest have been childcare and employment/training - particularly as childminders. In response to these demands we now have regular weekly sessions provided by Sharon Grey, the Lone Parent Advisor from the Acton Job Centre, the Credit Union, Contact a Family, Homestart, Housing, Women's Aid and we are an outpost for the Children's Information Service of the London Borough of Ealing. These regular advice slots have proved to be useful for families who either do not wish to travel into Ealing for Borough wide services or who appreciate the family friendly nature of the Information Centre. At present all services using the Centre use it rent free as we see their provision as very much supporting the Sure Start aims and objectives.

Progress for Period July 2004 – Feb 2004

Sure Start Acton Information Centre Customer Service Aug 2003 - Feb 2004



The Chart above shows the nature of enquiries that we are receiving at the Sure Start Acton Information Centre. There still is a strong emphasis on queries around childcare both in terms of personal need and training in childcare. We have successfully linked up with the Children's Information Service to promote their Childcare Jobs bulletin, which includes training opportunities, and used the CIS database extensively to find childcare provision for families.

The area of housing and homelessness continues to feature highly and we now stock Locata, which is the new social housing allocations system of bidding for properties. This has proved to draw in many families as there was previously a limited supply of this publication at the library and the Town Hall.

The Housing Advice Team have also trained our team and offered support for the private tenants sector (including Housing Association tenants) to try to prevent homelessness.

Domestic Violence cases have become more apparent, often linked with housing issues, and we have linked up with Housing for Women and Women's Aid to offer a smooth referral system.

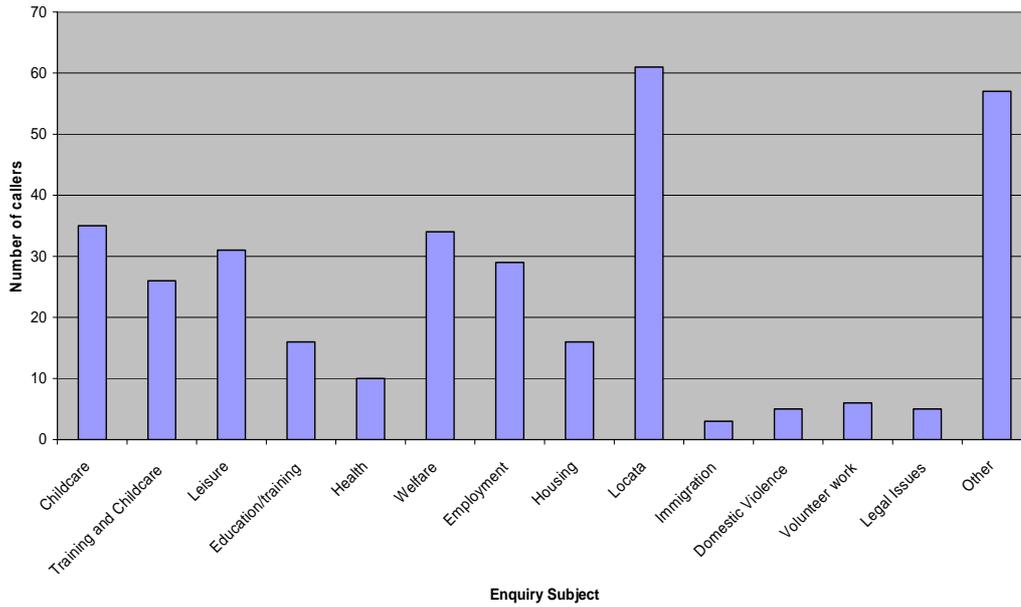
In relation to education and training we now produce a monthly awareness bulletin which summarizes any recent training opportunities that we have been notified of. This bulletin is available to any callers at the Centre and is also circulated to parents at the Parent Forum. This has proved to be a useful quick reference tool for parents to assess any training provision.

We still receive many enquiries concerning benefits, especially Sure Start maternity grant (due to the confusion in the name!), Working Tax Credits, Child Tax Credits and maternity payments. We have received training in these areas, but we also seek specialist advice from Law for All and London Advisory Service Agency helpline. The Acton Lone Parent Advisor continues to offer a regular Thursday slot for lone parent job and benefit advice.

What has become noticeable is that parents come back with different issues as they face them and are happy to use our service for a variety of needs. We have followed parents through sorting out their benefits, to their childcare needs to finding a job and this has been very rewarding. The Centre also continues to provide a very useful 'shop window' for Sure Start Acton activities and we do manage to register many new families from them noticing our displays.

Enquiries Received at the Sure Start Acton Information Centre between Feb – July 2004

Sure Start Acton Information Centre



The key areas of interest continue to be around housing and childcare. These are obviously keen areas of concern for parents to both have adequate housing and childcare to allow parents to work or carry out further training. The future development for the Information Centre is to have a satellite service in the newly built South Acton Children’s Centre and to invite more local agencies to make use of the High Street premises to deliver their services.

There were also three in depth case studies carried out on three regular clients of the Information Centre to assess the impact of signposting and advice to local families. A summary of one of these can be found in appendix one.

Objective 2 – Improving Health

Target five – Achieve by 2004 in the Sure Start area, a 10% reduction in the number of women who smoke in pregnancy.

In year 2 (2002-3) – 11 mothers smoked before pregnancy and continued to smoke after pregnancy = 0% reduction

In year 3 (2003-4) – 10 mothers smoked before pregnancy and 7 ceased before the baby was born (70% reduction in smokers)

From the beginning there has been a problem with gathering data on smoking. The health visitors and midwives did not compulsorily record smoking habits, so recording was very sporadic. Within Sure Start we have

started to keep precise records of smoking trends with each new registration and we have begun a smoking cessation group to support parents trying to give up smoking.

One of the key focuses of smoking cessation is No Smoking Day where we have held health promotion events to encourage parents to give up smoking. The following two summarized reports are evaluations that took place of No Smoking Day in 2002, 2003 and 2004.

EVALUATION REPORT ON THE NO SMOKING DAY EVENT AT ACTON HEALTH CENTRE HELD ON 13TH MARCH 2002

Introduction

The 'No Smoking Day' stall in Acton Health centre was manned by the Public Health Nurse, Health Visitors and Sure Start staff members between 9am and 12 mid day.

Activities

- Visitors to the stall could check their Co levels using the micro Co Analyser
- Drawing for children and pointing out on the Torso model the parts of the body affected by smoking
- Availability of a wide variety of leaflets some of which were available in English, Vietnamese, Turkish and Somali. This was in addition to a number of quiz and information sheets from the "No Smoking Day Office". Information regarding the nearest Smoking Cessation Clinic and Quit line was also available

What lessons are there to be learned for future health promotion events

1. Promote future Health Promotion Events event more widely outside the Health Centre. One woman who would like to stop smoking said she would have come along if she had known about the event.
2. If possible make a follow up call to people who wanted to stop smoking to find out how they are getting on.
3. Try to get leaflets earlier so that there is time to have those available only in English into other languages.
4. For Sure Start future events would need to focus specifically on smoking during pregnancy.

REPORT ON THE NO SMOKING DAY EVENTS IN ACTON HELD ON 12th MARCH 2003

1.Introduction

Two events were held to mark National No Smoking Day which were planned by a committee consisting of Acton Health Centre staff, Acton Sure Start and the Manager of Reynolds and Twyford Sports Centre. The first was a stall outside Safeway Supermarket between 10-12md and was aimed at all Acton Residents. The second event which took place at Reynolds Sports centre between 1.30-5.30 was aimed at Pregnant Smokers and their partners/family members living in the Sure Start area of Acton.

2. Stall outside Safeways

The stall was manned by Acton Health Centre staff Clare O’Riordan, Health Visitor and 1.1 Smoking Cessation Advisor, Linda Cardona, Oral Health Promoter, Dorothy Kingston, School Health Administrative Assistant, Gill Peabody, Public Health Nurse and 1.1 Smoking Cessation Advisor and Barbara Nevin Student Nurse

2.1 Activities

- Visitors to the stall could check their CO levels using the Micro Co Analyser
- There were a wide variety of leaflets available relating to smoking cessation in English, Turkish, Vietnamese and Somali including ones relating to smoking and pregnancy. Information flyers regarding the local smoking cessation services were also distributed.
- Visitors were also invited to participate in a No Smoking Day Quiz with prizes provided by Boots and Active Ealing

2.2 Common questions/comments made by people visiting the stall

- What help is available for people who want to quit smoking
- No smoking day is only for smokers !
- What help is available for the under 16’s who want to quit smoking
- Several people who weren’t smokers asked to take information about the smoking cessation services for friends/relatives who were smokers

3. Event at Reynolds Sports Centre

This event was organised by the Public Health Nurse, Gill Peabody, Health Visitor Clare O’ Riordan, Oral Health Promoter Linda Cardona, School Health Adviser Carole Gizzy, Siobhan Oktay Acton Sure Start Information Officer and Andrew Rogers, Manager of Active Ealing’s Reynolds and Twyford Sports Centres. On the day assistance was also given by Mandy and Karen from Sure Start, Acton Health Visitor Hilda Taylor, Macmillan Black and Ethnic Minority Cancer Information Worker Yvonne Okiyo, Active Ealing Staff and 2 Student Nurses on placement with Acton School Health Advisors and Health Visitors.

Beauty treatments were provided by 3 Students from Hammersmith College under the Supervision of their Tutor and Indian Head Massage by local resident Syreeta Massop who is a local resident and a trained Beautician. Basket ball and Football Tasters, Fitness tests and gym inductions were organised by Andrew Rogers from Active Ealing and his team.

3.1 The aim of the event

The aim of the event was to organise a Beauty and Fitness Event for Pregnant smokers and their partners/family members in the Acton Sure Start area as a way of promoting the local smoking cessation services. The reason being that Sure Start has a target to reduce by 2004 a 10% reduction in the number of pregnant women smoking in the Sure Start areas and the Government has a campaign also which focuses on partners.

3.2 No of people who attended the event

The event was attended by 77 people many of whom were teenagers from Acton High School. Unfortunately it did not attract any pregnant women however

42 people who visited the event and participated in the Quiz lived in the Sure Start area.

3.3 Activities

Visitors to the event following registration where given the opportunity to participate in the following:

- Have a Indian Head Massage, Makeup, Manicure or Pedicure in the City Learning Centre
- Participate in a basket ball or football taster.
- Have a fitness test or gym induction.
- Visit Acton Sure Start had a stall which provided information about the Project and the services available for parents to be or parents with children under 4 living in the Sure Start area.
- Check their Co Levels
- Obtain information about the local smoking cessation services
- Obtain advise and leaflets related to smoking in English, Turkish, Vietnamese and Somali
- Participate in the No Smoking Day Quiz
- Sandwiches, soft drinks and fruit was provided for visitors to the event

4. What if any lessons are there to be learned

- These two events were a good example of real partnership working.
- Despite specifically targeting pregnant women smokers they are a difficult group to reach as most women will not admit to smoking during pregnancy.
- Offering free Beauty treatments and sports activities was a good way of attracting people to a No Smoking Day Event

- There is an obvious need, as expressed by the graffiti wall for more no smoking/smoking cessation events/ programmes for teenagers. (*Comments from Sure Start Perspective*) Quit who can offer such programmes to be approached by the Public Health Co-ordinator.
- The location was not ideal for pregnant women, first floor of City Learning Centre, needs to be based in health centre/hospitals where Sure Start can really tap into “the source”. (*Comments from Sure Start Perspective*).
- Sports centre ideal for teenagers and indeed men, but still not a totally female domain especially not with low-income mothers/mothers to be who tend not to be able to access local sports facilities due to lack of child care/crèche provision and the fact that sports activities occur generally after 6pm (In Reynolds and Twyford due to links with schools) and this is when older siblings are at home and need support from their parents. (*Comments from Sure Start Perspective*).
- There is a huge need for crèche supported sport which would enable some move towards smoking cessation in mother’s/mother’s to be and more **daytime** sports activities generally are needed for parents at home with children under 4. (*Comments from Sure Start Perspective*).

Evaluation Report on National No Smoking Day Road Show held on 10th March 2004

1. Introduction

A road show was held to mark National No Smoking Day, which was planned by a committee consisting of Acton Health Centre staff (Health Visitors, a student Health Visitor, a student nurse and the Oral Health Promoter, Acton Sure Start, The Neighbourhood Renewal Community Health Educators and the Acton Healthy Living Centre Sports Outreach worker. At various times in the day stalls were manned at Acton Health Centre, Outside Safeways, Priors Community Centre and Acton Library. In addition some staff members with a car with No smoking day promotional materials visited Acton Vale, and Acton High School.

2. Aim of the event

The theme of the event was “for smokers who want out” .It was aimed at all Acton Residents including those who live in the Sure Start area.

3. Activities

- Visitors to the stalls at the various venues and car at Acton Vale and Acton High School were invited to check their Co levels using the Micro Co Analyser.
- A variety of leaflets related to smoking cessation in English, Turkish and Somali including ones related to smoking and pregnancy were distributed. Information flyers promoting the local smoking cessation services for adults were distributed as well as flyers on the break through programme run by the charity Quit for those under 18.
- Visitors were invited to participate in a No Smoking Day Quiz
- Children were invited to enter a poster competition related to No Smoking Day

4. Number of persons who visited each venue

The venues were visited by a grand total of 412 persons during the day. These included some Sure Start catchment area parents at the Priory, Acton Health Centre, Library and Safeways venues

5. What if any lessons are there to be learned from this event

- This event was a very good example of partnership working and team work
- By using a road show approach it was possible to target a wide age range of Acton residents however it would have helped to have had a larger team of people on the day to cover all the venues.
- Having prepared information bags of leaflets and boxes for each venue prepared ahead saved preparation time on the day itself.
- The quiz proved a good way of interacting with people and raising the issue of smoking cessation.
- It would have been better to have had a roving photographer on the day to take pictures rather than having different people taking pictures at different venues.
- To have a back up vehicle pre-arranged in case the vehicle you had planned to use is out of use on the day
- When organising a road show rather than an event in just one venue a longer planning/preparation period is required

Target six: Information and Guidance on breastfeeding, nutrition, hygiene and safety available to all families with young children in Sure Start areas.

Year I (2001-2) 92% of new mothers breastfeeding at birth, 65% at 6 weeks, 47% at 17 weeks

Year II (2002-3) 84% at birth, 83% at 6 weeks, 79% at 17 weeks

Year III (2003-4) 92% at birth, 57% at 6 weeks, 58% at 17 weeks

One small piece of evaluation that took place around this subject area was a survey of the local Afghan population. This ethnic group had been particularly difficult to engage in Sure Start activities and we were also aware from the local health services that there were several issues around Afghan's accessing health support. We approached the local Afghan Charity based in Acton to engage them in a piece of work to support some of their volunteers to carry out a survey of the local Afghan population and their health needs. The following process was carried out.

Introduction:

The Society of Afghan Residents (SAR) is a charity refugee voluntary organisation, established in 1982, which provides cultural and social services for Afghans who live in the United Kingdom. On the basis of our long running services to Afghan refugees we have developed close relation with our community and as a result SAR has obtained a good reputation. We therefore proposed this project (survey) to Sure Start Acton in order to achieve both SAR's and Sure Start Acton's objectives, which we believe more useful and helpful for Afghans' families and their children. This is because the country (Afghanistan) has been through 23 years of war and instability. As a result the country's infrastructure is almost totally destroyed and the socio-economic situation is remarkably deteriorated.

The people who fled from this country and have been accommodated in the UK need help and support to settle their lives and integrate them in this society. Children are especially more vulnerable and therefore affected seriously by war and violence. We believe both parents and children need help and support to recover from the effects of negative life events and enable them to use all the available services, particularly those provided by Sure Start Acton.

After a few meetings with Sure Start Acton we agreed to carry out a survey only among Afghan families. The survey is designed for a specific area, which is funded by Sure Start Acton. This is because this area is proven to be a more deprived area compared to other areas. The areas are South Acton, Acton Vale Estates, Rufford Tower and Moreton Tower with a total of 791 families. Finally, Sure Start Acton has funded the survey to be carried on by SAR's female staff within 2 months time (February & March 2003) and subsequently both parties signed the service level agreement.

Objectives:

The following points were the main objectives of the survey:

- To find out the exact numbers of Afghan families who have children under four years old.
- To find out the social and health needs of those children under four years old living in the area.
- To encourage Afghan families (parents) to register their children with Sure Start Acton and use their services.
- To elicit social and health problems and needs of the parents who have children under four years old.
- To enhance awareness of information sources to enable parents to bring up healthy children and help them towards early learning opportunities, particularly by increasing their use of Sure Start Acton services.
- To find out the numbers of mothers who breast-feed.
- To determine the number of parents who smoke.

Results:

From the total of 49 families surveyed only 12 families had children under four years old. These families had in total 14 children 11 out of them were male and 3 female, none of them had a disability. One family had twin children, one male and one female. Furthermore, parents of one family were Hindu who can read and write Pashtu, Dari and Hindi, while parents of the other 11 families were Muslim. The parents of all families can read and write either Pashtu or Dari language.

Only one father (8.3%) out of 12 smokes. From the rest, both fathers and mothers did not smoke. None of the parents or children were disabled. In addition, all parents in the 12 families agreed to register with Sure Start Acton, and were happy to do the survey and are expecting further information about Sure Start services.

Regarding the employment status of the families, in five of the families both parents are unemployed (41.6%), while in one family the father is doing full time job and the mother is doing a part time job. Although in two families (16.6%) the fathers are doing full time jobs, in the other two families (16.6%) the fathers are doing a part time job and the mothers are unemployed. Meanwhile in two families parents were reluctant to disclose employment information. Apart from one mother, who is working part time, the other 11 mothers (91.6%) are unemployed.

With regard to the health and development of the children three families (25%) are concerned about their children's speech and language difficulties including one family with twin children. Nine families replied that they were not concerned about their children's speech and children's development. Two families (16.6%), including a family with twin children, are also concerned about their children's physical development and progress, while the other 10 families were satisfied with their children's progress.

In two families (16.6%) the mother breastfed their children, while in 10 families (83.3%) the mother did/do not breastfeed.

Regarding play and learning, the parents of 10 families (83.3%) use the local library, while the parents of 2 families (16.6%) do not use it. 5 children (35.1%) are luckily attending nursery or playgroup and unfortunately 9 children (64.2%) still do not attend.

Recommendations:

On the basis of our experience and findings from the survey we would like to suggest the following recommendations:

1. Those families who have children under four years old should be followed up in order to make sure they are using the Sure Start services.
2. Friendly relation and trust should be established between Sure Start Acton and the Afghan families.
3. The Sure Start Acton outreach and home visiting services need to be provided in order to mobilise the parents, particularly mothers for their and their children's best interest.
4. Additional information preferably in native languages (Pashtu and Dari), particularly about child protection laws, children's rights, breastfeeding, smoking risk (active & passive) especially effects on the children's health, balance and standard food regime, hygiene, leisure and health clubs both for children and parents and Sure Start services should be provided.
5. Books in native languages (Pashtu and Dari) should be available in the local library.
6. 'Model families' should be shown to Afghan families to share their knowledge, experience and skills for bringing up and developing physically and socially healthy children.
7. Mothers should be specifically targeted to enable them to tackle their significant higher unemployment figure compared with their male counterpart in the family with the provision of education and training courses and other facilities.

Another key piece of evaluation work that was carried out around breastfeeding awareness was linking into the national Breastfeeding Awareness Week. The health team held a health promotion stall that highlighted the following points.

EVALUATION REPORT ON THE BREAST FEEDING AWARENESS DAY EVENT OUTSIDE SAFEWAYS ON 15th MAY 2002

Introduction

This event, which took place during National Breastfeeding Awareness week, was organised in conjunction with Acton Sure Start and the National Child Birth Trust (Chiswick Branch).

The theme for Breastfeeding awareness week in England was “ Mother’s milk, the perfect take –away and the key messages for the campaign were as follows:

- Breastfeeding is convenient –you can do it anytime, any place, anywhere
- Breastfeeding is normal
- Breastfeeding is the healthiest option for mother and baby

The public were very interested in the stall and visitors to the stall included a few pregnant women. All involved with the event felt that it was a very successful day.

Activities

- Visitors to the stall were invited to complete a breast-feeding quiz (see below).
- Postcards and bookmarks with national help lines related to breast-feeding were distributed. Information sheets with the key messages in Arabic and Turkish were also available for visitors to the stall. It was also intended to have the key messages translated into Farsi, Somali and Albanian however Citas translation service was not able to do the translation in time
- Only a limited supply of breast feeding leaflets were distributed on the day because West London Health Promotion and the Dept of Health were out of stock ! It was also intended to hand out NCT Breast feeding cartoon leaflets but these did not arrive from the warehouse in time.

Breast Feeding Quiz

The Acton Health Visitors devised a quiz and prizes of Boots Vouchers were awarded to the first and second prizewinners. This was developed to find out people’s beliefs about breast- feeding so that future health promotion around breast-feeding locally can focus on these misconceptions. The quiz was completed by 203 respondents however 10 sheets had some unanswered

questions. The following questions were asked to which a true or false response was required:

It was evident from the results of the quiz that future health promotion around breast feeding promotion needs to put more emphasis on the following messages:

- Breast feeding mother's will lose weight more easily
- You do not need to eat a special diet if you are breast feeding
- Breastfed babies are less likely to overfeed and become overweight
- Breast feeding will not stop you getting pregnant

Target seven: A 10% reduction in children in the Sure Start area aged 0-3 admitted to hospital as an emergency with gastro-enteritis, a lower respiratory infection or a severe injury.

Year I (2001-2) Number of admissions into hospital for the above – 19

Year II (2002-3) = 8

Year III (2003-4) = 15

Target eight: Ante-natal advice, support and information to all pregnant women and their families living in Sure Start areas

New target for 2003-4

Year III (2003-4) 12% of pregnant mothers were contacted by Sure Start Acton in 2003-4 (20 mothers out of possible 162) during pregnancy

Sure Start Acton has recently employed a midwife on secondment from Queen Charlotte's Hospital to increase the contact with pregnant mothers ante-natally. She is now running an ante-natal breastfeeding workshop and a postnatal and breastfeeding support workshop.

Objective 3: Improving the ability to Learn

Target nine: In fully operational programmes achieve by 2005-6 an increase in the proportion of young children with satisfactory speech and language development at the age of 2 years.

(target was 5% reduction in number of children requiring specialist intervention by age 4)

Year I (2001-2) 9 children in Sure Start Acton catchment area required intervention

Year II (2002-3) 8 children

Year III (2003-4) 19 children

With this particular target it is more the case that because the Sure Start Language Measure is being carried out at 2 years of age more referrals are being made to the Speech and Language Therapy Department due to early recognition of developmental difficulties and the need for intervention. This is an example of where early years support has raised the number of 4 year old receiving support that may well have gone unnoticed without the local Sure Start language tool.

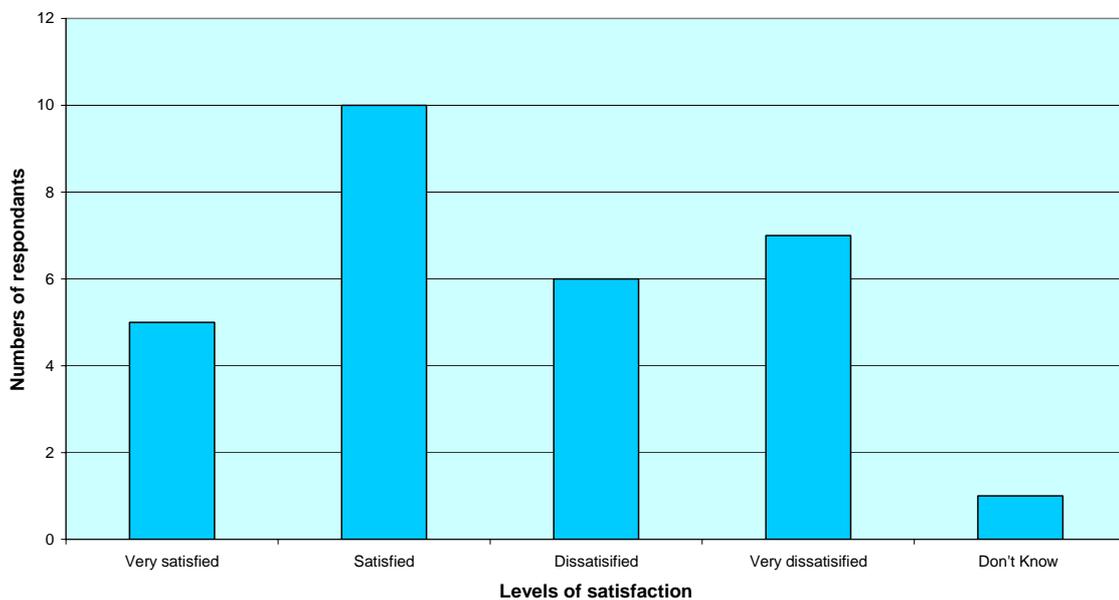
Target ten: all children aged 0-3 in Sure Start areas to have access to good quality play and learning opportunities, helping progress towards early learning goals when they get to school.

In relation to this target a user satisfaction survey was carried out at both the delivery plan stage in 2001 and the three year progress stage in Nov 2003 – Feb 2004. The results that follow were satisfaction levels with child play facilities and recommendations for improvement.

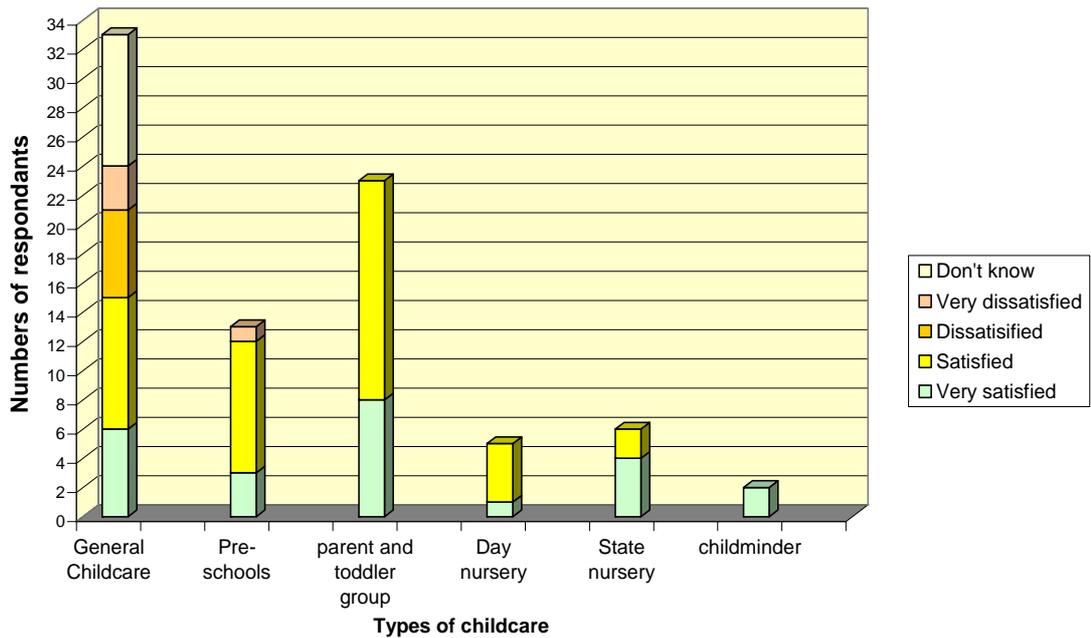
What did parents think about local childcare?

The questions in this section of the survey centred around key services that had been identified in the original consultation as being areas of concern. As well as assessing the degree of usage of local services, the questions also try to elicit the level of satisfaction parents had with the services they used.

Satisfaction Levels for Local Parks



Satisfaction with Childcare in Acton



The satisfaction levels with local parks were very split with those very satisfied/satisfied equaling those that were very dissatisfied/dissatisfied. The main reasons for parents dissatisfaction with children’s play areas in parks focused on the quality of play equipment for the under 5’s (the point being made that the playgrounds mostly support 5-11 age group, rather than under 5’s) and that there should be more equipment for under 5’s rather than just one or two play items. There was criticism of the cleanliness of the play areas, including exposure to glass, needles and food rubbish. If bins were provided they seem to be rarely emptied. Some parents commented that there need to be more seating areas for parents and more segregated play areas according to age/development levels. Soft play areas and covered play areas were also requested as being needed in the Acton area.

In relation to the childcare provision in the area, the first bar on the chart shows the general satisfaction levels of parents with childcare, whether they use it or not, and then the specific bars show the satisfaction level of those parents actually using specific childcare. The general response to childcare was mixed between satisfied and dissatisfied with comments being made about the affordability of childcare. Working parents commented that the cost of childcare still made it ‘not worth working’ as their wage was being used exclusively for childcare. This was particularly true of lone parents and parents who had several children under 5 who emphasised that there should be some concession for their family situation, ie a subsidy for second child in same nursery setting or for being a lone parent. It seems the importance of the Working Tax Credit in supporting family childcare costs for working families requires further promotion. For Sure Start Acton families wishing to use childcare for ‘respite’ purposes the cost of local childcare is seen as impossibly high and it is this group of families that Sure Start Acton really needs to focus in on. (There were several positive comments about the

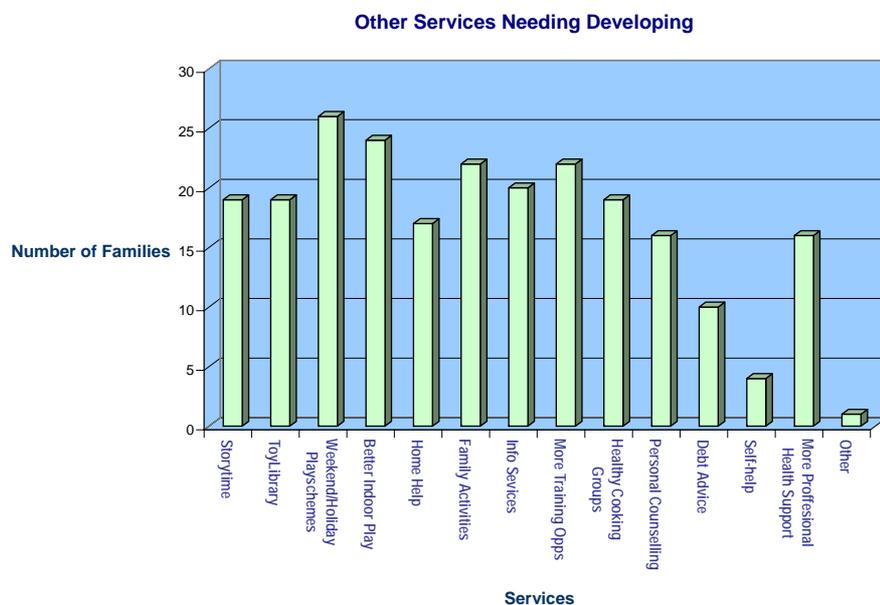
Sunlight Community Nursery on the South Acton Estate, which was seen to be more affordable and seen as a model for pricing structures in other nurseries.)

One of the more qualitative questions of the survey centred around the provision of a crèche to offer short breaks for parents and a social setting for children under 3 years of age. In particular parents commented that simple tasks like doctor’s appointments or job interviews needed just short-term childcare on an ad-hoc basis. For lone parents a crèche was seen as a vital support service to have some kind of ‘break’. The existing crèche in the Oak Tree Community Centre was not particularly familiar to parents and this is certainly something that Sure Start Acton staff can promote at the new site in Sunlight Nursery. With the encouragement of Sure Start Acton family support staff, parents should be enabled to make full use of the newly equipped Oak Tree Room crèche.

What did parents think of local learning and play opportunities for children?

In this part of the survey we tried to establish what services parents would like to see further developed to increase the quality of learning and play in the Acton area and then find out which Sure Start Acton services they were already using.

The chart below shows those services that parents would like to see developed:



The services that were put forward to parents for consideration were based on the objectives of Sure Start local programmes and therefore are realistic for the team to develop. The ‘other’ request was for pregnant woman support, which we do currently offer at our Bumps and Babies groups, but this may indicate that we need to publicise these groups more widely, especially through the Sure Start Acton midwife.

Recommendations

Section One: Recommendations by parents to improve satisfaction levels with local services:

Childcare Provision

- More affordable – especially for Lone Parents
- More places – day nurseries often full – especially for under 2's
- Greater awareness of possible subsidy available to working parents and students (ie Working Tax Credit and college support for childcare fees)

Child/Family Support Groups

- More representation (in the staff) from the many ethnic groups in Sure Start Acton area
- More communication with parents about Sure Start meetings and the role the parents can play in them

Parks/Recreational areas

- Cleaner/safer environment to play in
- More play equipment for under 4's – age appropriate, soft play surface
- More facilities for parents in parks ie benches, pram park

Target eleven: Increased use of libraries by families with young children in Sure Start areas

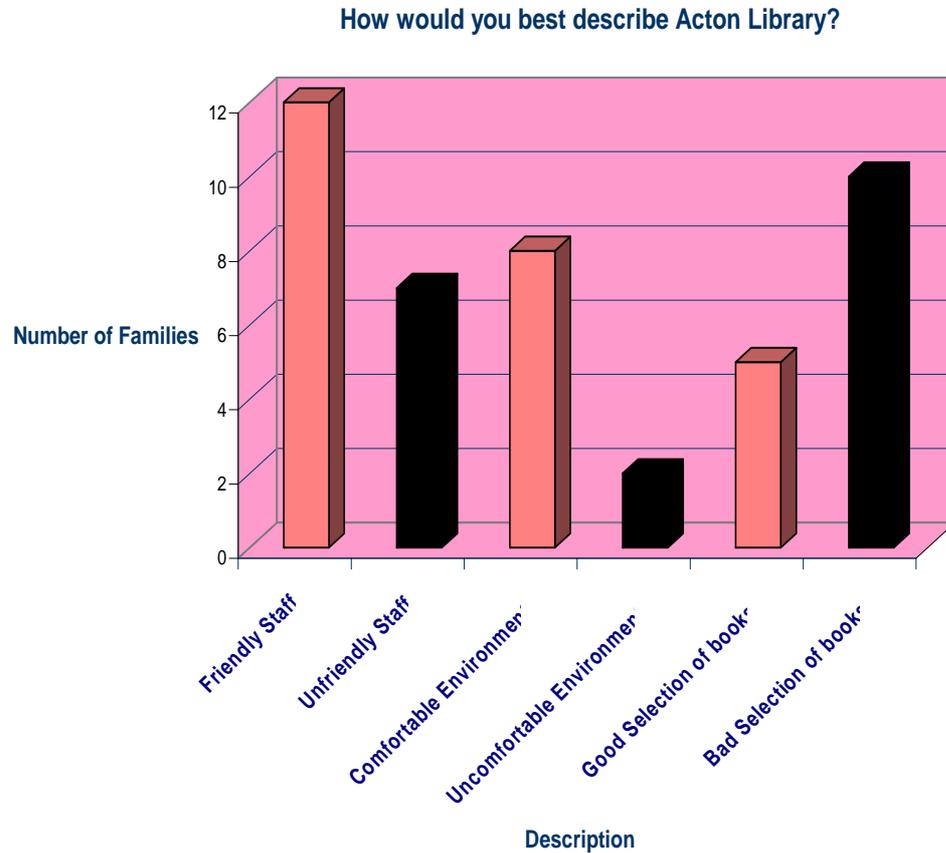
Year I (2001-2) the membership of 0-3 year olds in the Sure Start Acton area was = 50

Year II (2002-3) total membership of 0-3 year olds = 114

Year III (2003-4) target was dropped in this period

The community librarian has raised the level of library membership and usage immensely, especially with the development of the community room in the library which is furnished with children's décor and enables parent and child groups to meet for family learning groups, storytelling and craft session in a dedicated area.

Within the user satisfaction questionnaire we felt it would be useful to ask how satisfied Sure Start Acton families were with the Acton library. We asked quite closed questions around the library facility based on the friendliness of the staff, the environment and the stock for young children. The following chart shows the responses to these questions:



The most apparent criticism of the library is that the stock is insufficient and this is an area that the Sure Start Acton community librarian is already looking into along with the development of a community room in the library for more 'active' library usage. Book Start is another national programme that the librarian is investigating to develop stock further.

Objective Four: strengthening families and communities

Target twelve: achieve by 2005-06 a 12 per cent reduction in the proportion of 0-3 year old children living in households where no one is working

Year II (2002-3) 48% of families living in household where no is working

Year III (2003-4) data still to be provided by the Central Unit

By linking with the Lone Parent Advisor at the Acton Job Centre Plus, we have been able to offer weekly drop in sessions at the Sure Start Acton Information Centre for lone parents wishing to return to work. We also linked with the training provider 'Pre-set' to offer some pre-employment preparation for women returners. This target will be a significant area of development in 2004-5 when the central team moves into the Children's Centre and therefore we will be able to offer the necessary childcare to support parents returning to work.

Target thirteen: 75% of families reporting personal evidence of an improvement in the quality of services providing family support.

This particular target was addressed in the user satisfaction surveys carried out at the delivery plan stage in 2001-2 and at the end of the third year 2003-4. The results of those surveys are as follows:

In the initial consultation stage of the Sure Start Acton local programme we surveyed a proportion of the original Sure Start catchment parents to gain their levels of satisfaction with local services, in particular health and childcare services. The aim of the first survey was to guide the delivery of the Sure Start Acton programme and to provide a baseline from which to measure the impact of the programme. The second survey at the end of 2003-4 reviewed the levels of satisfaction three years later and any further areas of need identified at this three year progress point. (The three year review period spans from April 2001 – March 2004)

Background to the Survey

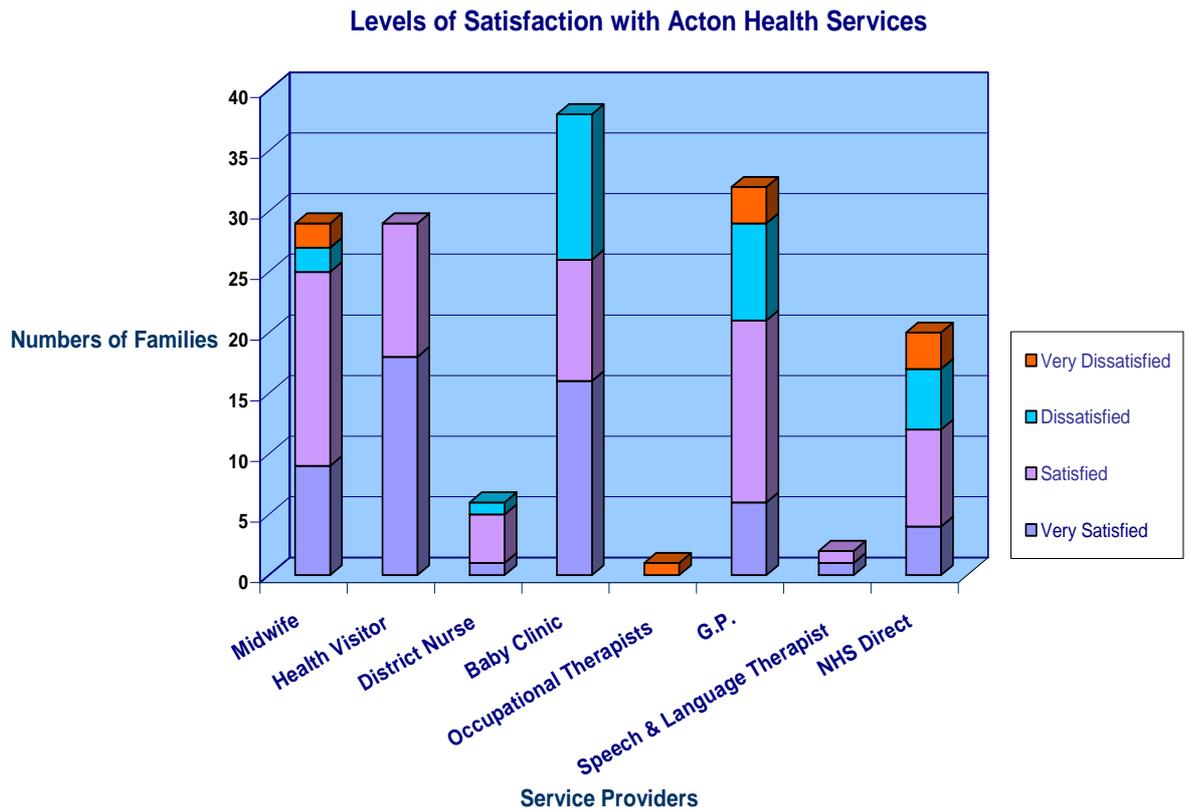
The sample groups of parents used for both surveys mentioned above were chosen on a random basis by one in every ten parents being approached. In the first survey, at the consultation stage, parents were approached at nursery pick up time and in this survey within Sure Start groups. Some stratification took place to ensure representation of ethnic groups, gender, lone parents and other isolated groups of the community. The total number of the sample for this survey was kept at a similar level to the initial survey to allow for comparisons to take place – that total figure being 38 full interviews out of a sample of 200 possible respondents. This is currently 20% of our registered families with Sure Start Acton. This is recognized to be a small representation and that any conclusions reached should be treated with caution in the light of this. Nevertheless the themes that have come out through the surveys do have a serious value in relation to our planning of services in the future and in recognizing where local service provision is still falling short for local Sure Start Acton families.

What did parents think of local health services?

The health of families is a key objective of local Sure Start programmes and is seen as a fundamental foundation for the future success of children under 4.

When we asked parents to review their experiences with local health services we concentrated on early years health support professionals and the possible services that Sure Start Acton could implement to support the early stages of child health development.

In terms of satisfaction levels with the variety of health professionals that families come in contact with, the following chart shows the result of this sample of 38 families:

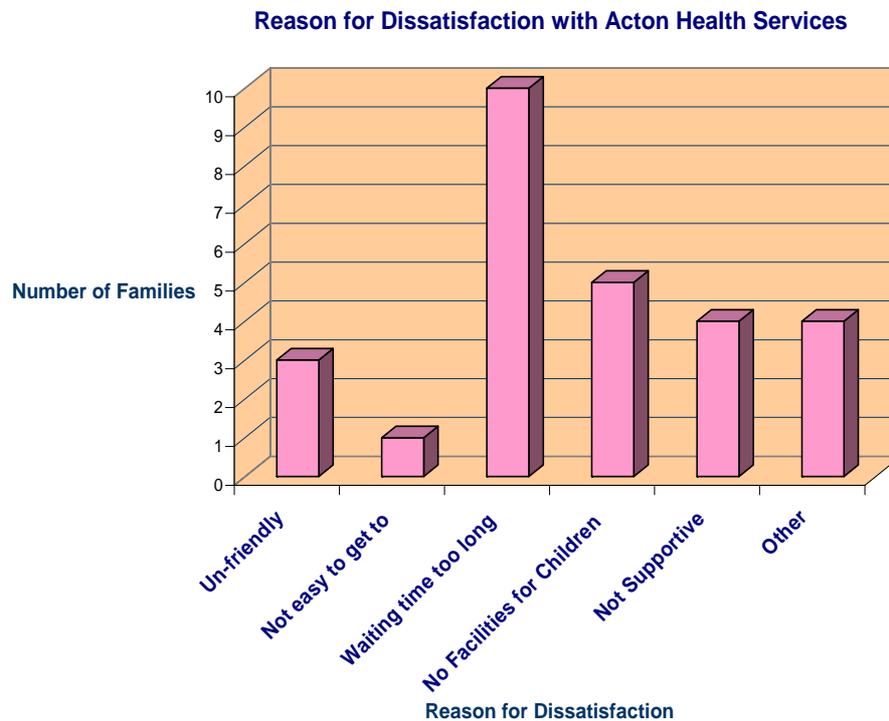


The totals in each bar reflect whether the families have actually made use of the service up to this point in time, that is why speech therapy and occupational therapy have smaller returns as only a few families surveyed had been in contact with these specialist services. Generally satisfaction levels were very high for the health visitor service and the baby clinics, also run by health visitors. There was a more mixed response to GP and Midwifery services with a number of quite pertinent comments being made about these services:

‘My concerns were dismissed regarding my daughter and I felt I needed to go elsewhere.’ (in reference to GP)

‘You have to beg and cry to get an appointment and to take your concerns seriously.’ (In reference to GP)

Where families were dissatisfied with their local health services the following reasons were given:



The comments made in the 'other' category above were as follows:

'NHS Direct has given me wrong information.'

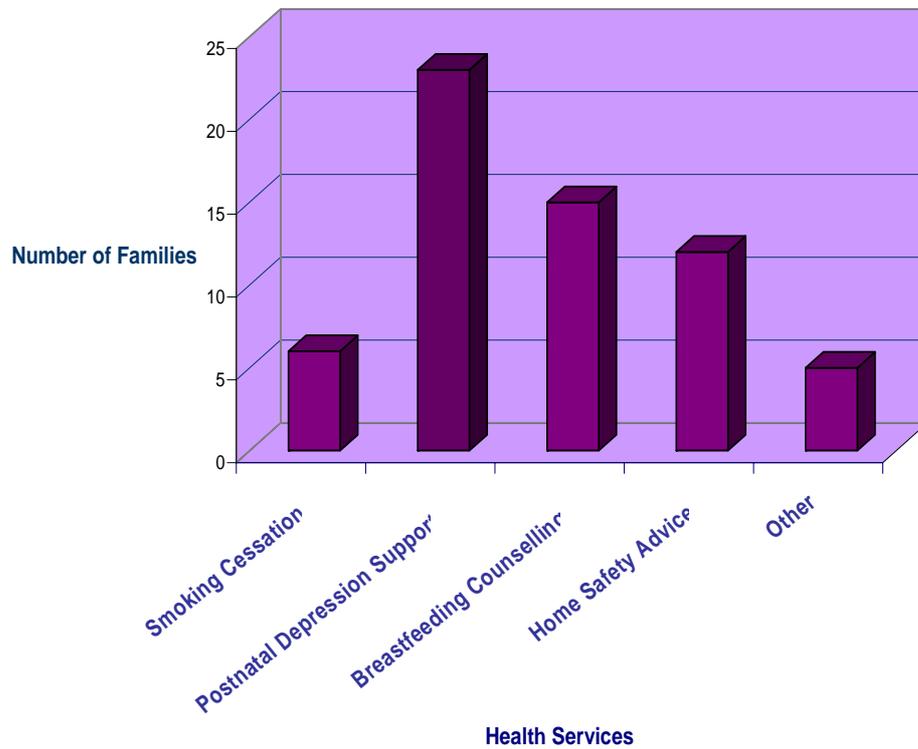
'Midwife did not stay in contact with my family at all.'

'There was a lack of information during pregnancy, birth and afterwards.'

All these criticisms are important in relation to how Sure Start Acton staff can assist families to make more use of health services and to receive a better service. The community librarian has already addressed the issue of 'no facilities for children' by offering a storytime at Acton Health Centre and Mill Hill Surgery to entertain children whilst waiting for the doctor.

In respect to additional services that families would like to see implemented in the Acton area, respondents were given a 'closed' list of services that are feasible for Sure Start Acton to deliver and then an 'other' option for specific requests. The results of this question were:

Suggested Health Service Needing Developing



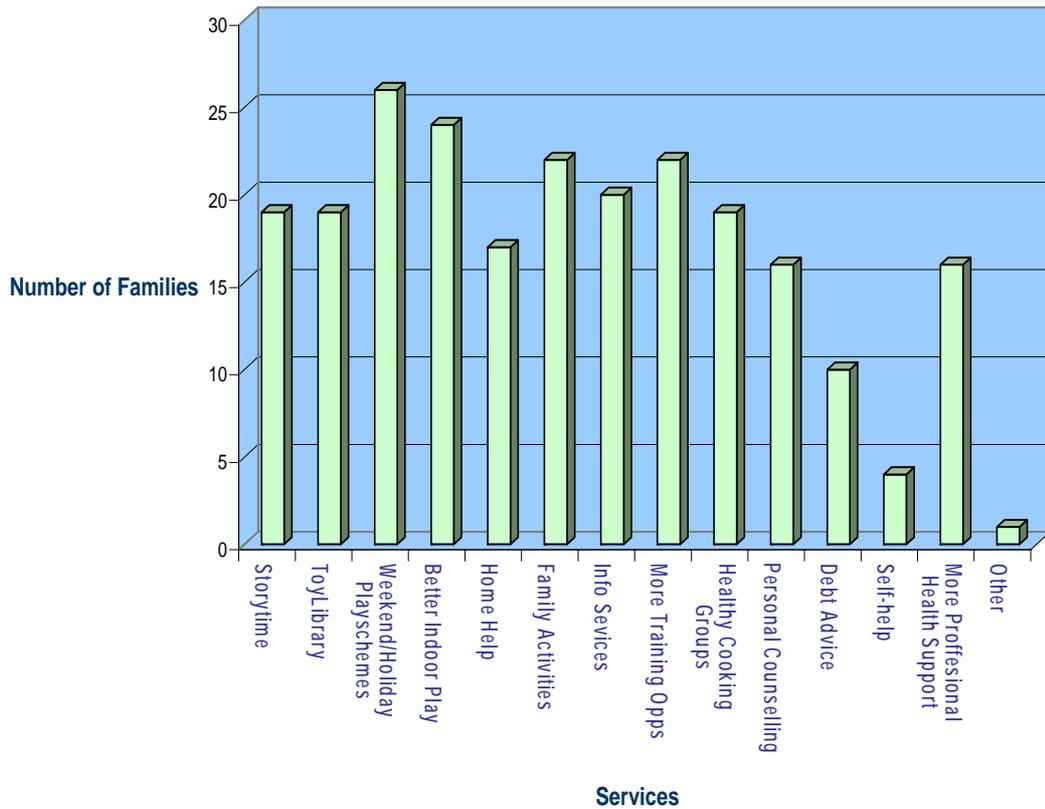
Smoking Cessation support is already being offered but we may need to look at the timing of the sessions and the venue. Post-natal depression has been approached indirectly through baby massage, but with the recent appointment of a Sure Start Acton midwife there can now be a more focused approach to PND. Breastfeeding counselling will require both NCT (National Childbirth Trust) and the Sure Start Acton midwife’s intervention. Home Safety should become part of the Family Support Team’s home visit remit, but there is also potential for specific group work around this subject. In the ‘other’ option requests were made for infant first aid, domestic violence support, healthy eating and ante-natal care/information. These are all useful and possible health subjects for the family support team to deliver in conjunction with the Sure Start Acton health team.

What did parents think of local learning and play opportunities for children?

In this part of the survey we tried to establish what services parents would like to see further developed to increase the quality of learning and play in the Acton area and then find out which Sure Start Acton services they were already using.

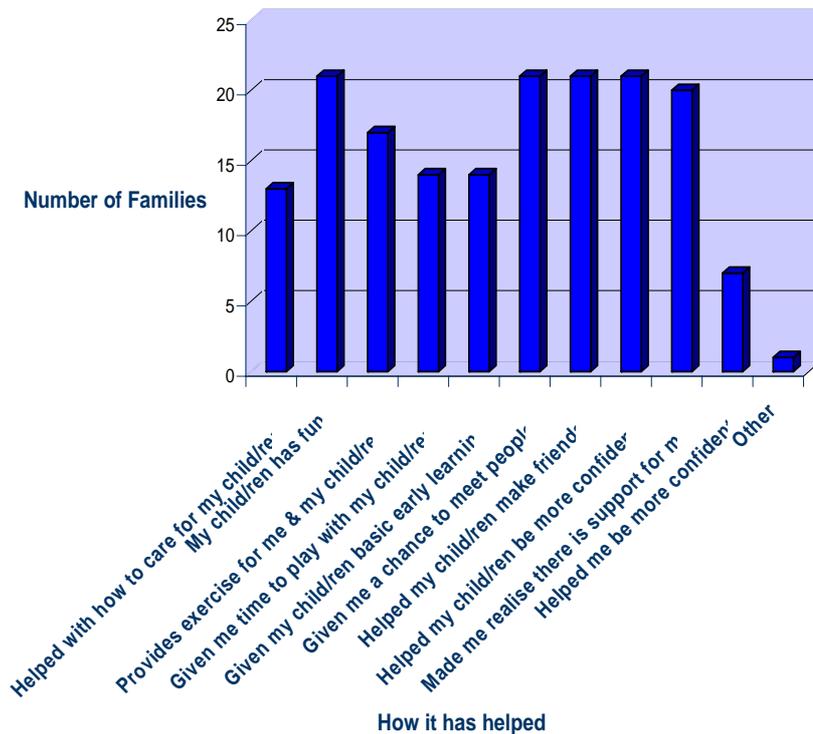
The chart below shows those services that parents would like to see developed:

Other Services Needing Developing



Again, as with the proposed additional health services, the services that were put forward to parents for consideration were based on the objectives of Sure Start local programmes and therefore are realistic for the team to develop. The 'other' request was for pregnant woman support, which we do currently offer at our Bumps and Babies groups, but this may indicate that we need to publicise these groups more widely, especially through the Sure Start Acton midwife. The specific services highlighted above all need to be considered by the Sure Start Acton team when planning their delivery for the forthcoming year.

How have using the SSA services helped you & your family?



The positive impact of Sure Start groups on families is very evident from this table and the Government objectives around ‘strengthening families’, ‘improving quality play and learning opportunities’, ‘improving health’ and ‘improving social development’ of children are all encompassed by the responses to the statements above. The ‘other’ comments were as follows:

‘It made me want to do more for my community and help other families. I wish that in the future we could (as parents) create self help programmes that will benefit us and families in our community.’

‘I believe there are still some families who do not reach out because they are afraid or do not know where to turn. It’s important to have a representative of each community (More Somalians, Africans, Arabs represented) who could reach these families.’

‘Continue with the current groups, very friendly and supportive staff.’

‘It helped me to be more involved within the group and more confident in my search for work.’

‘Sure Start is doing a fantastic job with perfectly chosen staff. It is what every community needs.’

‘Some more fun activities inside and outdoors.’

‘Organise family trips, have opportunity enjoy together.’

'I can say that this is the only group I have attended very supportive, helpful, helping me a lot from my kids everytime attend to the group, talk to the others, knowledge, more confident.'

'More support with regard to childcare as to allow parents a certain amount of free time for personal work.'

'By informing parents regularly about you meetings and inviting them to attend. To acknowledge our say and let us know the outcome. Without us, parents Sure Start will not perform as they are now.'

'You are doing very well. Thank you-keep up'

'I thank you for you wonderful effort and God help you to succeed to create fantastic individuals for the community.' (*translated from Arabic*)

The final word has to be from the parents and it is apparent that we have a strong community who are prepared to take an active role in the progress of Sure Start Acton. The target for 2004-5 must be to harness this interest and encourage maximum participation.

Target Fourteen: All Sure Start programmes to have parent representation on the local programme board.

The involvement of parents has gone through a number of peaks and troughs. Initially there was a strong group of parents who very much led the early discussions of forming the delivery plan and strove to involve parents in getting the most out of Sure Start. During the period of forming the team, parent involvement lessened, though they were still part of the recruitment process. As the focus at this stage was on recruiting staff and there were only limited services for parents, parents felt there was little to gain from Sure Start and this was our lowest period for parent involvement (2002-3).

In the academic year 2003-4, the programme really took off and as more parents were registered, so more parents came forward for the management board, the Partnership and their own Parent Team. We now have a fully constituted parent team who feedback regular recommendations for service improvement and send representatives to all the boards. Parents are also becoming more involved in supporting the groups by taking on certain tasks and being supported with training in these tasks.

Parents will continue to play a significant role in the future, especially in the development of Children's Centre and it is vital that their views continue to steer developments in family support.

Target Fifteen: All Sure Start programmes to have established effective links with Jobcentre Plus, local training providers and further education institutions.

The Sure Start Acton Information Centre makes the main links with the above bodies through membership of the Ealing Advice Forum, West London Information, Advice and Guidance Partnership and the Acton Community Forum. The Information library contains detailed files on local training providers and the Information Team produce a regular monthly opportunities bulletin to raise awareness of local training opportunities.

Target Sixteen: All Sure Start programmes to work with their EYDCP to help close the gap between the availability of accessible childcare for 0-3 year olds in Sure Start area and other areas.

Our capital programme targets the need for increased affordable childcare. We are currently involved in building the South Acton Early Excellence Centre which will offer 44 additional full time day care places as well as over 100 part time places and new baby places. The Centre will provide a truly holistic family support provision, bringing together health, education and social care in one setting. This build has involved a direct partnership with the local authority Education Department and the EYDCP as we are joint funders in the project. There will also be a childminders network based at the Centre which will encourage recruitment as a childminder and offer further training and support to childminders.

Additional Evaluation Areas

In addition to the key targets set above we also felt that the way the Sure Start local programme was managed was particularly interesting to evaluate as the whole basis of the success of the programme was to engage local service providers with parents so that services could be reshaped and be more parent focused. The strength of partnership working is significant to allow reshaping and eventually mainstreaming of services to take place. For this piece of evaluation, it seemed more appropriate to have an external evaluator who could come with a fresh perspective to how we were delivering as a Partnership.

Summary of key findings

- Developing the Ealing Acton Sure Start Partnership remains highly sensitive to complex local conditions (for example, extensive regeneration initiatives competing for funds and attention)
- Hard pressed communities and hard pressed professionals have genuine concerns about new 'partnerships' that require respect and attention
- Relations of trust and understanding between the local Sure Start field team and health visitors are emerging and joint protocols are in place in relation to recruiting for Sure Start
- Future and further issues of raising Sure Start's presence in the community need to be addressed

- Early feedback from parents, though impressionistic in nature, points to SS high appreciation rating in terms of current participants' quality of life and also of their children
- More systematic monitoring of SS take up and its effects against key SS targets needs to be introduced
- The awareness of the centrality of the core values of SS providing a holistic model of social, health, welfare support are unevenly understood in the partnership
- Senior health and local authority staff need to appreciate the philosophical base of Sure Start's work: it is not just 'another' project
- Possibilities for mainstreaming need to be clarified at the level of definition, practice and practicalities
- Forward planning for current projects needs to be put in the context of evaluations of their respective take up and impact
- Issues of unmet need require evidence and scrutiny before priorities are identified in view of Sure Start targets and local realities

Data Sources

The data used for this evaluation was collected between August 2003 and January 2004.

The main research method used was interviewing both individuals and one group. A range of people was interviewed who included:

- Sure Start Programme Manager (1)
- Sure Start Managers (2)
- Local Authority Managers (3)
- Sure Start Public Health Coordinator (1).
- Health Visitor Manager (1)
- Health Visitors (3)
- Health Visitor's Assistants (2).
- Single Regeneration Budget Managers. (2)
- Sure Start Project Personnel (2)
- Parents

This piece of research was interesting in terms of partner's comprehension of mainstreaming of Sure Start services. Some key recommendations that came out in relation to perceptions of mainstreaming were as follows:

Indicative Issues for the Future around mainstreaming

For the Sure Start field team

- Value for money or 'cost effectiveness' evaluations towards the end of the programme may be useful in demonstrate the *effectiveness* of projects to senior managers and make mainstreaming more likely.
- Tapering funding about three years from the end of programme

- Embedding projects as much as possible in current service provision is seen as an ideal situation

For senior managers

- More work needs to be done emphasising that mainstreaming is not simply about funding, but about a Sure Start Model of working – a philosophy of a new practice.
- It might be realistic to accept from the outset that some projects will not get core budget funding, and work to make sure they are equipped with information about how to apply for replacement funding.

For all partners

- Professionals appreciated and esteemed the flexibility and willingness to negotiate demonstrated by the Sure Start team.
- The growing awareness about projects having multiple viewpoints and concerns has stood the project in good stead. Issues of building on this incipient understanding include, developing a willingness to work through new challenges via a problem solving approach.

Appendix One

Evaluation of Sure Start Acton Services

In the period November 2004 – January 2005 a number of focus groups and case studies were carried out to track the levels of satisfaction with current services and to advise our planning for service delivery for the financial year 2005-6. The focus groups were based on:

- a highly successful and popular service
- the most innovative service
- a less successful/popular service
- an 'invitation only' service

All the focus groups were led by parents and supported in note taking by Sure Start staff. The key questions being asked about each service were

1. What is your opinion of this Sure Start service?
2. Is the service run at times and places convenient to you?
3. How do you find the staff who run the group?
4. What could be done to improve the service?
5. What could be done to improve the service?

The responses to these questions have been reported below and the recommendations made from each focus group are highlighted at the end of each focus group section.

1. A Highly Successful and Popular Group

Three groups were identified for this heading, the Breastfeeding and Postnatal Support Group, which is a multi-agency group bringing together midwives and health visitors to support parents in the postnatal stage, the Infant Massage Group, which again is a multi-agency programme combining health visitors and Sure Start family support staff and the Bumps and Babies Group. All these groups are targeted at new parents which is an important focus of Sure Start in that we are required to have 100% contact with all new babies in the area in the first two months of their lives.

i) Post-natal and breastfeeding Support Group

Date of Focus Group: 15th Dec 2004

Number in focus group: 8 + chair

Length of Focus group: 2.15 – 2.45 pm

In response to the question of the parent's opinion of this Sure Start service the following answers were given:

'Been good to see what other mums have gone through.' *'Health visitors very friendly'*, *'Ask lots of questions, everyone very helpful'* *'Offers of help and encouragement'*.

Is the service run at times and places convenient to you?

There was generally a positive response to the timing and location of the group, with no recommendations to change the current arrangements.

'Time is good 2-4 is a perfect time', *'Room is bright'*, *'If other children at nursery still gives time to collect them'*, *'Places are fine not too far.'*

How do you find the staff that runs the groups?

Staff was perceived as friendly and approachable and parents particularly commented on the help they received from other parents' experiences.

'Friendly', *'Helpful'*, *'Positive feedback'*, *'Learn lots from other mothers Things they didn't know they learned from other mums'*, *'Good to meet mums with other children in this area'*, *'Found it friendly and helpful' (only my 2nd time)* *'On clinics on Tuesday always forget to ask questions but can ask at this group.'* *'Hear other mums talking knowing they are not the only ones going through things'*, *'Some things I didn't know about childcare I picked up,'* *'Exchange tips with other mums'*, *'Good to meet mums with similar age children'*, *'Full of information'*, *'Nice and friendly'*, *'Nice bunch of staff'*, *'Sincere'*, *'Not looking at you bad if you can't do things'*, *'Supportive of people not breastfeeding'*

A recommendation that was made in relation to staff was that it would be *'Good for someone to speak another language'*.

What could be done to improve the service? What additional activities would you like to see provided at the group?

A number of additional activities were recommended to add to the quality of the post –natal and breastfeeding group.

- Nice to have a programme of subjects to give structure but also nice to have a drop in
- Guest speaker in to talk about companies who make baby food + give samples
- First Aid training and resuscitation
- More people who speak different languages employed by Sure Start
- Music in the background would be nice
- Another pampering session
- Exercise classes for mums for those of us who aren't Sure Start (low impact or aerobics or yoga) willing to pay(from a non sure start mum)
- Weaning is a good idea
- Speakers on child development and language

- Pre warning of activities
- Someone to come in from Toy Library to show parents how to play with his or her child.
- What stimulates children what toys to play with.

Summary of Recommendations from post-natal and breastfeeding support group.

At several points during the focus group there was the recommendation to have staff that could speak other languages. Every effort has been made to recruit staff with other languages and it also planned for other parents to take on a language mentor role for particular community languages.

There were a number of additional activities that parents would like to see incorporated within the group which would add to the quality of the service, these included: music in the background, guest speakers on subjects such as weaning, baby food, child development and language – including links with the toy library – exercise and pampering sessions for the parents. Many of these requests could be addressed by the Sure Start health team involving the speech and language therapist, occupational therapist and the dietitian.

ii) Infant Massage

Within the infant massage group we carried out individual evaluation feedback forms and a case study of how one particular family benefited from Infant Massage.

The key questions asked on the parent evaluation forms were:

1. Did the course meet your expectations? Explain
2. Which changes would you suggest for future classes?
3. What has been the most important experience with your baby since the class?
4. What is your impression of the class?
5. Did your instructor help you to feel comfortable in the group?
6. Other suggestions for the class?
7. Where did you hear about the Infant Massage class?

1. Meeting Expectations

Of the thirteen parents interviewed who had completed the six week course of infant massage, all of them agreed that the course had met their expectations and gave details of how their expectations were met as listed below:

'Learned about massage and how it helps my baby.' *'All the massage parts helped in different ways – ie digestion, relaxation.'* *'It was much more useful*

than I expected. I shall certainly use it in future.’ ‘Introduced to philosophy and techniques of infant massage.’

2. Changes for future classes

Parents had a number of recommendations that they would like in future courses including:

‘Would like to see video of baby yoga’

‘Maybe work through the whole routine a little faster so we could complete the whole routine sooner.’

‘It was nice to exercise a little first like we did in the last session.’

‘Keep classes small and perhaps an afternoon session.’

3. Important experience for your baby since the class

By asking this question we had wanted to see how parents had applied baby massage and what other related benefits it had given parents. There was a variety of responses which highlight the real impact of baby massage:

‘Making friends with another mum and baby – we talk our problems together.’

‘My baby is happy, he sleeps better.’ ‘The tummy massage helped a lot with the colic.’ ‘Meeting other mums and babies.’ ‘Feeling more comfortable handling him.’

‘Being able to relax him when he is very upset.’ ‘Most bath times Sara has a leg and arm massage. I think it is calming and it’s a time when I can give her my full attention.’

‘Baby has enjoyed interacting with others and so has mum!.’ ‘She sleep well after the massage and feel relax and if has any problem like a colic its gone.’ ‘The most important experience with the classes it helped my baby to be active.’

Parents have regularly commented that their child is more relaxed and therefore sleeping and digestion have been greatly helped by the massage.

4. Impression of the class?

The dynamics of the class were very important to enable parents to feel relaxed and confident to apply the massage techniques. Parents fed back positively on the closeness and friendliness of the class.

‘Very friendly’, ‘Very good, I learned lots.’ ‘Very well run class. Explanations of why to do massage very good.’ ‘Very friendly and relaxing.’ ‘Happy and relaxed.’ ‘It’s wonderful and I know lots of things about massage and how I make my baby feel good.’ ‘I think it’s very important for babies to have this opportunity.’

Recommendations from the Infant Massage Class for future classes

Some parents specified that they would like a drop in in the future to apply the techniques they had learnt on the course.

One of the parents who particularly enjoyed the contact with other mothers would like a list of group members and contact details to stay in contact in the future. This is something we could implement with the parent's consent.

Another recommendation was that there are some refreshments at the end for parents to socialise.

iii) Bumps and Babies, Tuesday morning group

Date of Focus Group: 30th Nov 2004

Number in focus group: 5 + chair

Length of Focus group: 9.30 – 11.15 am

This group is targeted at mothers to be and mothers with babies up to 18 months old. The group sometimes has guest speakers on particularly subjects requested by the parents, but primarily is a chance for parents to socialise and mix with other parents.

Parent's opinion of the service was as follows:

'open and friendly', 'great activities for children', 'the repetition of singing each week improves their language and vocabulary', 'singing also calms the children down, helps their memory.' 'Good support for parents', 'brings parents together'.

In relation to timing and convenience of the venue at the South Acton Early Excellence Centre parents found both to fit in well with their schedule as many parents drop off at the local school or nursery and then can simply walk next door to the group.

Parents were particularly complimentary about the staff:

'The staff are very helpful, pleasant, understanding and accomodating'. 'staff are good listeners', 'flexible', 'very creative, which children look forward to taking their art work home.' 'Supports not just the children but also the parents'

Recommendations for the Bumps and Babies Group in the Future

Many parents felt the current room is not entirely suitable and could do with some improvements. The following changes were recommended:

- The room is too small, especially when at times it is too busy
- There is too much unnecessary furniture, which can cause health and safety hazards
- The heaters are not sufficient
- Need a shelter for the pushchairs – at present pushchairs are parked outside and sometimes it's raining
- Need more books
- To run the group on another morning s well as Tuesday

- To have talks on specific subjects ie dietition, health and safety, and other health professionals do talks

2. The Most Innovative Group

The most innovative group which has combined the specialism of occupational therapy and learning through play has been the movestart group. Children from 18 months to 4 years participate in a range of fun activities to music which focus on physical development and co-ordination. Parents have particularly enjoyed this group and it has been an opportunity for the occupational therapist to observe and support any particular issues around physical development.

Date of Focus Group: 10th Dec 2004

Number in focus group: 5 + chair

Length of Focus group: 10.30 – 10.55 am

In response to the question relating to parents opinion of the service, parents answered as follows:

‘excellent’, ‘well structured session’, ‘good use of toys and instruments’, ‘variety of singing and action maintains children’s interest’, ‘helps child’s development’.

In terms of the timing of the session and the convenience of the venue, parents found the session was well timed to fit in with the dropping off to school of their older children and that the Church Hall had very family friendly facilities – with baby change and children’s toilets.

Parents have been really impressed with the staff and found them friendly, supportive, and very committed to the children.

Recommendations for Future Groups

‘Maybe a bit of free play with toys at the end of the session.’

‘A few more toys – more ball games.’

Generally parents were particularly happy with the way the group was run and did not recommend any changes. The Movestart model will be implemented in other venues in the catchment area as it has proved to be so popular

3. A less successful/popular group

i) Bumps and Babies, Friday afternoon group

An interesting contrast that we found is that the same group run in the afternoons, rather than mornings, has proved to be much less popular and we have had to think of innovative ways in which to sustain this group. The Bumps and Babies group on a Friday afternoon has proved less popular and the focus group brought out the following points:

Date of Focus Group: 10th Dec 2004

Number in focus group: 5 + chair

Length of Focus group: 1.15pm – 2.00 pm

Though there are fewer parents attending this afternoon group their opinion of the Bumps and Babies Group was still very positive:

'good for children', 'good interaction', 'room is warm', 'lots of toys' 'lots of activities', 'nice small group'.

The timing of the group has proved to be a significant problem and the following comments were made.

'Time not good as children usually eat and sleep from 2 pm onwards' 'Group could start a bit later.' 'Fit into times when nursery finishes.'

Recommendations for improvements to the group

- In summer go outside to play
- Would like different topics over a few weeks
- Would like more things for mums
- Be able to return toys to the toy library through this group
- A programme of activities
- Area for children to have lunch so that do not have to home after nursery and come out again.

ii) Stay and Play Group, Acton Vale Community Centre

This is one of our newest groups which is just building up a following in the Acton Vale Estate. The Vale Estate is a particularly isolated estate where we have found parents unwilling to come out and get involved in community activities. The building of the extension on the children's area and youth wing has given a new lease of life to the community centre and a much more attractive area to run groups from. This focus group was aimed at gathering the opinions of the few parents that do attend and trying to get a clear idea of how existing parents would like to improve and expand the group.

Date of Focus Group: 6th Dec 2004
Number in focus group: 5 + chair
Length of Focus group: 10.30 am – 11.00 am

The parents who attend the Stay and Play Group found the service to be excellent and were happy with the times and location of the group. The staff they found to be *'friendly and very approachable', 'very helpful and kind', 'very friendly – open-minded, understanding.'* *'They make the children feel comfortable in the playgroup surroundings', 'Ensure children's needs are met'.*

Recommendations for the Stay and Play Group

- more sessions
- in summer months maybe outdoor activities eg swimming pool
- leaflet more parents, encourage more parents to attend
- music group
- Better home corner units

For those that attend the group the sessions are definitely fulfilling their needs, but the main emphasis for this group is to spread the word further and perhaps offer more sessions once the two existing groups build up more.

4. An 'invitation only' group

This structured group has a series of activities to help parents to help their children's speech and language development. All parents attend eight sessions. Staffed by a specialist speech and language therapist the group has been target at children who have been identified as having some speech and language development problems either by members of the team of through the Sure Start speech and language measure. It is a small, 'invitation only' group and families are requested to attend all the sessions to gain maximum benefit from the course.

Evaluation of Talk Start – December 04

The Talk Start group is in its 3rd cycle of running. During this group the attendance rate was variable. At the start of the group there were 6 participants. One dropped out due to personal circumstances and reasons, and the rest were more consistent but did not always attend each week. The group ran for duration of 7 weeks in total.

At the end of the 7-week block of intervention, the group was evaluated. Unfortunately only 2 parents attended and participated in the evaluation and 1 parent gave a verbal evaluation the previous week due to being away on holiday.

The evaluation was done via a questionnaire.
Here are the findings:

Questions:

1) What is your opinion of this Sure Start Service?

Answers: I thought the service was good. Her child has learnt some new words.

No comment, I am happy with sure start service.

2) How well was the group structured? Scored 5 (very happy) & 4 (happy)

3) How did you find the staff in the group? Scored 5 & 4

4) What did you find most useful in the group?

- Small table activities
- Adult to child ratio
- Feedback sessions
- Structured routines
- Repetitions
- Time allocated to each activity

5) Is the group run at times and places, which are convenient to you?

Answer: yes

6) What did you find least useful in the group? No comments given.

7) Is there anything that you would like to see done differently in this group?
No comments given.

Verbal feedback from another parent: She reported that the structure of the group was good and it helped her son to be more calmer and to be less frustrated. She has noticed that he has begun to say more words and knows when to wait for his turn. She also felt that the length of the group is better than the previous ones, because they were too long and the children got too tired towards the end. She would like to see activities that will be able to check back if the child had learnt the concept or knowledge of it (mini review).

From previous groups the feedback received was similar to this one. The feedback took the form of a SWOT analysis. These are the parents' comments.

Strengths:

My child has learned to be patient.

They work in twos, and learn to take turns.

They learn the routine.

They are saying more.

They are more confident.

They enjoyed the topics and activities.

The parents like it, and the child has changed.

Parents and children are using more language at home.

Parents are using new activities at home.

They liked the handout, '12 tips to help your child talk'.

Weaknesses

Not near enough to the Toy Library so borrowing toys is not easy.

The room can be noisy with three different activities going on.

Children were sometimes distracted by several activities going on at once. (Parents did comment that by the last few weeks of the group the children were much less distracted by other activities).

At first the children found the group very tiring. (we did shorten the activity times and the children did get used to the format as the weeks went on).

Opportunities

Parents would like the group to carry on during the summer holiday.

Parents would like a stronger link with the Toy Library.

Parents would like more puzzles.

Parents would like more 1:1 time as well as group time.

Parents would like more opportunity to talk to team members about their child.

Parents would like to points for each child written down for them to take away.

Parents would like some kind of 'report' at the end.

Action

To incorporate some 1:1 time and individual feedback to parents into the group. (This has now happened in the last group and parents felt it was valuable time spent).

A final piece of evaluation work that was carried out to measure the impact of our services was several case studies on families that had used a range of services and were good examples of the deeper impact of Sure Start. The examples were taken from a family support perspective, an information and guidance viewpoint and a health professional view.

Family Support Case Study

My individual case study is with Jean-Roui, an 8 months baby boy. A full term baby, weighting eight pounds at birth. I meet Misako his mother. When Jean-Roui was 2 weeks old, as a request by her Midwife, as she was worried that baby's mum has difficulties breastfeeding, and also for being on her own for most of the time, as she doesn't have relatives here her family lives in Japan, and also her husband's family are in France. Jean-Roui's father works abroad during the week and stay with mum and baby during the weekend.

I gave advice on a one to one bases, regarding breastfeeding techniques. Infant massage (to relieve baby colic and help baby and mother relax and enjoy each other), and more than that to talk with mum, introduce her to others Sure Start groups and being there for her when she needs someone to talk. Misako and Jean-Roui join the Infant Massage Sessions on Friday's mornings at St. Marys' Church Hall -July 2004. enjoyed the sessions and also they enjoy meeting others babies and mothers .,as she attends regular sessions on Wednesday Breastfeeding and Postnatal Support Group at Acton Health Centre.

Information/advice Case Study

When Mrs Smith entered the Sure Start Information Centre with her friend, she was obviously highly distressed and upset. I immediately calmly sat her down in our reception area and sat directly opposite her giving full eye contact and complete attention. I explained to her that I was happy to talk through her situation and seek appropriate support, even if we could not answer her needs directly. She stopped and questioned if this was the Citizens Advice Bureau, and I explained that this was in fact the Sure Start Acton Information Centre which supports families with children under 4 and gave her a leaflet introducing our service. Her friend, who I then learnt was her sister-in-law, said that she had heard of Sure Start in Hammersmith and knew they could support her sister, who was a mother of three. After establishing that Sure Start was the most appropriate service for Mrs Smith, I stressed that this was an open office and though we would not share information with any agencies, unless there were any concerns over child protection, there was a chance of being overheard by members of the public. Mrs Smith understood this, but stated that Social Services were already involved in her case and that they had been very supportive.

Once we had agreed on exactly what Sure Start could offer Mrs Smith, I then prompted her to explain what information she needed. Her situation was that she was socially overcrowded in a two bedroom flat with two children under 5, her stepdaughter and she had just given birth to a pre-mature baby in Hammersmith Hospital. The hospital was refusing to send the baby home unless she was re-housed in a larger dwelling. The new baby had also been diagnosed with asthma so there was a need for a damp-free property.

Mrs Smith and her sister-in-law openly described their distressed situation and I kept my prompting to a minimum as they poured out their story. I understood that the key issue was around housing and her need to be re-housed suitably, so I then went on to question what action she had already taken in trying to be re-housed. At this point I asked Mrs Smith if she would be happy to allow me to take notes on her actions so far, so that I could establish the next steps to take. She agreed readily and we then went calmly through the options.

Mrs Smith's sister in law had an obviously strong influence over Mrs Smith and she spoke of her involvement in the local residents association and that she had approached the local councillor to try and speed up the housing reallocation process. (It was in fact the Councillor who had referred her to Sure Start) Point by point I went through the possible routes to rehousing, including the membership of the Locata system, joining the Homes transfer/mutual exchange list, getting medical support from the hospital/midwife and finally lobbying the local councillor – for which I gave her a list of Councillors and their surgery times.

What was immediately apparent to me was that Mrs Smith did not live in the Sure Start Acton catchment area, so as a local programme we could not directly support her and I explained this to her. She was greatly disappointed by this and questioned the logic of the catchment area. I emphasised that our information service was an Acton-wide service, but the Government could only fund a very specific number of the population in economically deprived areas. Unfortunately this results in a cut off boundary line. Mrs Smith was reasonably understanding and was glad that at least she knew where she stood, but then queried how could we help. I stressed that if we could verify together that she had taken all the possible steps she could, I could then advocate on her behalf to ascertain if there was any more information she could provide to speed up the process of re-housing. At this point we went back over the actions she had taken so far.

Firstly Locata- she was registered on Locata, but had had no offers yet, though she had been actively bidding. I reassured her that we receive Locata in the Sure Start Acton Information Centre and she was welcome to either drop in to get copies or she could subscribe and get copies sent to her home. She was unaware of the subscription service and said this would certainly speed up her bidding timing.

Then I felt it would be helpful to clarify her position of 'social overcrowding'. She then admitted her step-daughter was not declared as living with her and

the new baby's father was living with his mother as there was too much pressure on their relationship in the small flat. So officially she had three children under 5 declared as living with her in a 2 bedroom flat, which was as allocations had stated only 'socially overcrowded'. I explained therefore she would have to look at relocation on medical grounds to try to raise the priority of her eligibility. (She was currently only band c- medium priority)

In terms of legal/advocacy support for her situation – I talked through with Mrs Smith an agency that could be useful to her. I recommended Law for All (as a free, generalist service that has replaced C.A.B in Ealing, but generally would only get involved if her situation became a legal matter. Mrs Smith said she really just needed someone to put pressure on housing allocations. She had presented medical evidence of her situation, but still it had not raised her priority level. I asked if she had got a reference from the social worker in terms of the welfare of the new baby. The social worker had been involved, but their relationship wasn't very good and she admitted that her baby's father was skeptical of social services' involvement. I appreciated that this was a difficult conflict, but I stated that she needed as much support for her case as possible, and that she should make the most of Social Services support. Mrs Smith assured me she would pursue this with her social worker.

Finally we talked about the Housing Advice service and I asked her if she lived in a Housing Association or private temporary accommodation, as then the Housing Advice Service could support her in terms of advocacy. Mrs Smith was unsure of the status of her current accommodation. She was housed there by Hounslow Council, but was unsure of who was the landlord. I stressed that she needed to find this out from her rent book or housing officer and then she may be able to seek help from the Housing Advice Service. Mrs Smith questioned exactly how they could help and I discussed in detail the exact services they offer and in particular my own experiences of being rehoused with their assistance. I also emphasised how pressurized the housing market was in Ealing and the way housing criteria works – including the number of people looking for housing. She appreciated this, but still wanted to pursue any support she could get.

At the end of a thirty minute discussion, I could see that Mrs Smith had taken in enough and needed some clear action points as to what to do next. I completed the Sure Start Enquiry Form to enable her to take the next steps. (In this case I could not register the client as she was out of catchment, so I did not have a database form completed to put on to our confidential E Start database. But I did emphasise that if she was moved into our catchment area, we would be happy to support her with her children and I gave her a registration pack for the future.)

Mrs Smith left the office with a strong assurance from me that she was very welcome to come back at any point when she hit any obstacles and I would try to assist her further. She was also very determined to see the councillor in charge of regeneration to press her case and her sister in law was keen to do this too. I tried to reassure her that though the housing situation was very tight, she must press for the welfare of her baby and seek as much help as

possible from Social Services and the health Service. She left relieved and strengthened to fight her case.

Health Case Study

As the Sure Start Midwife I run a weekly antenatal clinic for Queen Charlotte's hospital and local Acton residents. I first met Elena in April of this year. She was 30 weeks pregnant at the time with her second child. She is a teacher of Economics and has a six year old son. She is originally from Bulgaria and, although has been living in this country for five years, her family and many of her friends are in Bulgaria. During our first meeting she divulged to me that she had suffered with postnatal depression with her first child. She was extremely worried that she might get it again. She also struggled with breastfeeding last time and felt that she had very little support from her husband who assumed that such things were 'natural and easy'.

She continued to have clinic appointments with me over the next ten weeks including one home visit when she thought that she might be in early labour. After her baby son was born I visited her three times post-natally at home in the first three weeks. I spoke to her health visitor to highlight the possibility of her having postnatal depression again (as she falls into a high risk category having had it once before). I was also able to refer her to see a psychiatrist at the hospital, and look forward to, in the future, being able to refer women to the new Sure Start counsellor .

I invited Elena to attend the Postnatal and Breastfeeding Support Group, which she attended almost every week for four months until she returned to work.

Elena has said several times that the support group was invaluable during those first four months and thankfully she never felt she had postnatal depression. Her struggles with breastfeeding were overcome with advice from myself and the Health Visitor who runs the group with me. Often with small groups of mothers we cover issues such as weaning, child safety and accident prevention, birth stories, contraception etc. It is also an opportunity to meet other mums. In fact I spoke to another mother who used to come to the support group at the same time as Elena. She said that they are still good friends and hang out on Fridays when neither of them are working, along with another mother who they became friends with at the support group. This is what it's all about!

Elena also got to meet the Sure Start nursery nurse who runs the group with myself and the Health Visitor. Alda runs the Baby Massage group as well that Elena also attended with baby Dominic. She also agreed to participate in a peer support idea involving getting mothers with previous postnatal depression to visit mothers with current postnatal depression. However we are in the preliminary stages of setting up a scheme of this kind.

