



# **Bacup and Stacksteads Sure Start**

# **Evaluations of Health Projects**

# **2004**

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# **Information Regarding Health Input into the Programme**

The following report outlines the major Health Initiatives within the programme and also looks at how these projects meet Public Health targets. This will in turn provide evidence for the mainstreaming agenda to the PCT.

## **Role of the Health Coordinator in Bacup and Stacksteads Sure Start by Judith Mace**

My post commenced in July 2004 with a remit to coordinate the health aspects of the programme by leading, negotiating and advising on the planning and delivery of health related Sure Start services.

The role has consisted of:

- Contributing to health needs assessment. This has involved liaison and consultation with families, the community, Sure Start team and multi-agency service providers including NHS staff.
- Meeting the health targets of the Sure Start initiative
- Ensuring health related activity is linked to national and local public health targets
- Developing and identifying health related resources and new approaches to delivery of health promotion
- Optimising on current resource provision through negotiation across traditional organisational boundaries
- Ensuring quality of health related input and contributing to the development of best practice including facilitating shared learning at operational and strategic levels
- Coordinating the development and practices of a multidisciplinary team of statutory and non-statutory health workers, contributing to the recruitment of the team and ensuring appropriate supervision is made available and a seamless service is provided.
- Delegating health related workload throughout the Programme according to skill levels and sourcing or providing updates and training as appropriate.

Staff contributing to delivery of health targets within the Programme consists of:

- Midwife
- Emotional Health Worker
- Drug and Alcohol/Change Management Therapist

- Shared post of a Speech Therapist
- Volunteers
- Health Link and Volunteer Coordinator
- Special Needs Nursery Nurse
- Family Workers
- Art Therapist (volunteer/student)

PCT staff who link in with activities include:

- Health Visitors
- Community Dietician
- PCT Nursery Nurse

The Sure Start Health Team meets bi-monthly to develop the Living Action Plan and to identify the team's contribution to the overarching Sure Start Targets (Whole Programme Approach), Local and National initiatives and Public Health Action Days. Copies of these plans follow.

## Summary of Health Related Activity

**Project Name:** [Burns and Scalds](#)

**Summary of Project:**

A workshop was provided to 9 staff with the aim of raising awareness in their everyday work about accidents related to burns and scalds. The course provided imaginative resources and training which enabled staff to facilitate parent workshops, to identify types of injuries that may be sustained and to give information on the prevention of accidents.

**Evaluation:**

The training has had an impact on the staff and this is reflected in their practice (identified through staff supervision) when visiting clients in the home. It has raised awareness of potential risks and hazards which were brought to parents attention and thereby reduced that risk.

**Short Term Measurable Outcomes:**

**Quantitative:**

Number of staff trained = 9

Number of parent workshops = 0 (to date there has not been any time to run the workshops)

**Qualitative evaluation**

Staff state that the course has raised their awareness regarding home safety, burns and scalds and that this has been incorporated into their day to day work including outreach and home visiting. It is too early to assess the impact of the training on accident statistics

**Cost:**

Cost of staff workshop = £695.00

This price includes the following resources:

- Teaching Pack for all attendees
- Resources for presentation
- Slides of injuries
- Activity Sheets
- 2 x burns dolls
- handouts, leaflets, safety information
- Information sharing website
- Maintenance of up to date statistics.

**Future Plans:**

To run the workshops throughout the year as one-off sessions. These will be open to professionals as well as parents and carers. A workshop will be incorporated into Child Safety Week

**Conclusion and Recommendations:**

The training was beneficial to staff and the resources were of high quality. There are no on-going costs beyond staff time to run the workshops. It is recommended that the training be provided to staff throughout the Children's Centres.

**Key Public Health Targets Addressed:**  
Prevention of Accidents

## Project Name: Art Therapist

### Summary of Project:

The project aims to offer a supportive therapy to adults and children. Adults are offered one to one therapy in order to explore issues related to either low grade depression or longstanding issues that have led to difficulties coping with life, including drug or alcohol misuse (these clients are seen alongside our Drug and Alcohol worker). Children are also seen on a one to one basis and may be presenting with behaviour issues or coping with a life changing or challenging situation e.g. bereavement or divorce (these children are also supported by our Family Workers or Emotional Health Worker). Art therapy uses painting, sculpture and other art forms to explore self perception, thoughts and feelings.

At present all our Art Therapy input is voluntary. We have one fully qualified volunteer who attends the centre one evening a week and sees a maximum of 3 clients. We also have a student Art Therapist, who attends one full day a week and is on placement from Sheffield Care Trust & Leeds University. The commitment from the Sure Start Programme is to provide one hours supervision once a week, which is supplied by our Drug and Alcohol Worker who is also a psychotherapist.

### Short Term Measurable Outcomes:

#### Quantitative:

Number clients seen = 5

Number of clients committed to long-term intervention = 1

Age range 7years – 13 years

#### Qualitative evaluation:

Source – telephone evaluations with parents of 3 children who attended for art therapy:

- *'Just knowing that ----- paints all his pictures about me in positive colours has helped me enormously – just knowing that. His problems lie elsewhere, in other areas of his life, his bad behaviour is only expressed to me it isn't about me. I think of this when he kicks off - I think 'oh I know what this is all about' and it helps.'*
- *'I didn't understand what the point of it was, how can it help? I didn't think it could so we stopped going'*
- *'The kids have a lot of other things going on at that time, tea and homework and football training. The times are not suitable for us'*
- *'My son has ADHD so he has to have a strict routine at bedtime, the time of the appointment upset his routine so we cancelled going.'*
- *'She wanted to watch Emmerdale at that time so it was no use for us.'*

**Cost:**

Resources - £140.00 materials per annum

Staff costs of 1 hour per week supervision – F grade equivalent

**Future Plans:**

- To evaluate the Bacup and Stacksteads pilot of a community based Art Therapist
- To make recommendations based on the pilot to other Children's Centres by May 2006

**Conclusion and Recommendations:**

Using student Art Therapists is a cost effective way of offering a supportive therapy to ongoing interventions where clients have low grade mental health issues or where children are displaying challenging behaviour. It is recommended that the project is fully piloted and evaluated before being considered for full integration into Children's Centres.

**Key Public Health Targets Addressed:**

Child Protection, Mental Health (adult and child)

**Project Name: [Breast Mates](#)****Summary of Project:**

The project aims to increase breastfeeding rates in the area through a peer support programme in which women, who have successfully breastfed in the past, undergo training to support other breastfeeding women. The training is accessed via the *La Leche League*, an international charity, who have had input into the design of the Baby Friendly initiative and have been established for over forty years, they are also recommended by UNICEF.

To date 12 peers supporters have been trained. The training takes place over 12 x 2 hour sessions and is facilitated by Health Visitors and Midwives who have undergone a package of training for the facilitation and administration of the project. This training consists of 5 full days over a 3 week period. The package includes all resources, a library of reference books, record keeping log books, 2 support visits a year from La Leche, an annual 'Enrichment Day' – to meet with other peer supporters in the North West and a 3 year overarching management support package. (see attached information)

The peer supporters are known as 'Breast Mates' and meet monthly for peer supervision, to discuss the running of the scheme and to address any difficulties

they are encountering. The sessions are also used for updates and are supported by a Midwife, Health Visitor or a member of staff from the Sure Start Programme. All Breast Mates have had CRB checks. The service they offer includes drop-in support sessions at seven locations (Child Health Clinics in Waterfoot, Rawtenstall and Bacup, Baby Massage at The Maden Centre, Stacksteads Activity Centre, Marl Pits Aqua-natal sessions and Parent and Toddler groups). They also cover a mobile phone on a rota basis and have input to parentcraft sessions. Sure Start has funded 2 electric breast pumps (with disposable attachments) for loan via the Health Visitors and/or Breast Mates. All breast pumps are constantly out on loan and there is a very high demand for this service.

The Breast mates also promote resources through an equipment catalogue for breast pumps (hand express), maternity bras, nipple shields etc.

**Evaluation:**

The project has been very successful. Breastfeeding rates have increased in the area (see below). The training was very successful and well attended throughout. The monthly peer supporter meetings are also well attended and the group is organised and motivated. The group members have gone on to be strong advocates within the local community, offering good quality advice in informal settings such as at the school gates, to friends who are pregnant, at local parent and toddler groups etc. They have also taken the lead in encouraging business to be more supportive of women breastfeeding in public through a 'Breastfeeding Friendly Business' scheme, where local businesses can sign up to be 'Breastfeeding Friendly', and adopt a breastfeeding policy that supports a woman's right to breastfeed her child discretely in public areas. They have also been involved with promoting breastfeeding on the local market and at antenatal clinics throughout Breastfeeding Awareness Week.

**Short Term Measurable Outcomes:**

Breast feeding rates = a 4.7% year on year increase in breastfeeding (16% in 3 years)

**Cost:**

Training for Health Visitors and Midwives to facilitate peer counsellor training = £3,100

Training for peer counsellors including resources = £2450  
(see attached for breakdown of costs)

**Future Plans:**

- To empower the Breast Mates to be more self-sufficient as a constituted community group with skills to run a committee and bid for independent funding.
- To continue an annual recruitment and training programme to replace Breast Mates who 'move on' to other things or return to work.
- To encourage young parents to join the training programme
- To link in with a hospital volunteer scheme to support women on the post-natal wards at the Edith Watson Unit
- To have Breast Mates representation at the ante-natal clinics within the community and at Rossendale General Hospital
- To role out La Leche programme across Rossendale via Children's centres
- To lobby local councils to become 'Breast Feeding Friendly' (all public buildings)

**Conclusion and Recommendations:**

It is recommended that the project continues and is extended throughout Rossendale, with provision being made for women who do not speak English to also join the training. That the project becomes part of the commitment made to Childrens Centres by the Health Visiting and Midwifery Teams.

**Key Public Health Targets Addressed:**

Breastfeeding, Obesity, Gastro-enteritis, Diabetes, Breast and Ovarian Cancer

*(additional benefits: reduction in glue ear. o)*

**Project Name:** Collaborative Child Development Programme

**Summary of Project:** *(This is a programme we are planning to commence in July 2005).* The programme will operate as a collaborative partnership between Health Visitors, PCT Nursery Nurses and Family Welfare Workers within Sure Start. This is an outreach, monthly home visiting, parenting programme designed by a Doctor of Psychology and Bristol University. The programme will be offered to all families giving birth to their first babies, to selected families giving birth to their second or later babies who are thought likely to find it hard to cope, and to selected families with two or more children of any age up to 6 years, where parents are experiencing problems.

The programme aims to empower parents to take sensitive control over their own situation and their children's well-being. Programme visitors will not give advice nor direct parents what to do, instead information is given in the form of user friendly cartoons or verbally. Each visit will aim to encourage the parents to come up with their own ideas concerning parenting. Topics covered include, child development, health, nutrition, speech and language, safety, education, social wellbeing and emotional health.

**Training includes:**

**Health Visitors** – The principles and strategies of the programme and addressing the changes that are needed to move away from conventional visiting towards the structured and deliberately empowering nature of the CDP. The training includes practical support, supervision, accompanied visits with a CDP trainer and 7, 2.5 hour Seminars.

**Associated Staff** – The principles of programme visiting, the major areas of child development, language, social and cognitive development, nutrition, basic health, early education, and parental self-realisation

**Joint Training** – Brief two-monthly meetings between Health Visitors and Associated Staff to explore and agree on joint responsibilities and strategies, eventually these will be able to be held at longer intervals.

**Evaluation:**

The approach of using the programme with associated Staff is new. The Child Development Programme was initially designed for Health Visitor use only and was established in the 1980's. It has a long history of success and has been well researched and evaluated (see supporting evidence).

This programme demands a more reorganising of resources than extra staff posts, however named CDP Health Visitors, concentrating on first time parents would be the ideal. The approach is particularly useful for newly qualified staff as it gives a good grounding in basic empowerment, child development and home visiting skills

**Measurable Outcomes:**

Reported increases in immunisation rates  
Improvements in the quality of children's diets  
Improvements in the home environment conducive to improvements in speech and language e.g. more books, pre-school literacy.  
Reductions in levels of physical child abuse (up to 50% improvement)

(see supporting evidence)

**Cost:** (For 8 -12 Health Visitors and 10 -15 Associated Staff)

First Year = £10,000 (includes full training, supervision, telephone support, trainers expenses, and all resources)

Second Year = £6,000 (includes training of new staff, training for trainers (1 – 2 Health Visitors), group seminars, supervision and telephone support, all resources)

Third Year = £3,000 (includes ongoing support and training for the trainers, monitoring quality, expansion activities, all resources)

Fourth and Subsequent years = £500 resources (plus £800 as needed for

ongoing training support and quality assurance.)

Staff hours to deliver the project and attend the training

**Future Plans:**

The programme has been delayed due to staff turn-over, clinical commitments and shortages within the Health Visiting team. It is hoped to commence in July 2005

**Conclusion and Recommendations:**

It is recommended that the Collaborative Child Development Programme be piloted in Bacup and evaluated after the first 12 months with consideration given to rolling out the approach across Burnley, Pendle and Rossendale.

**Key Public Health Targets Addressed**

Nutrition, Childhood Obesity, Smoking, Mental Health (adult and child), Child Protection, Accidents.

*(Associated benefits: Education re child development and parenting, speech and language dental care)*

**Project Name:** [Sure Start Drug and Alcohol Designated Worker](#)

**Summary of Project:**

We fund a Drug and Alcohol worker for 37.5 hours who is employed through the Alcohol and Drug Service based in Burnley. The post holder is also a qualified psychotherapist. She works with parents of young children who abuse drugs and/or alcohol or people whose addiction is having a negative impact on young children and their families. Intensive support is offered through the stages of detox by facilitating access to treatment and appointments and providing social support and advice. After detox individuals are helped to rebuild their social, family and economic life. The post holder offers a long-term therapeutic, one-to-one, or group rehabilitation service, which concentrates on the underlying issues which led the individual to abuse drugs and/or alcohol initially, and to support them in addressing these, including learning new life skills and preventing relapse. Education and information is also given throughout the Sure Start community about drugs and alcohol, stress/anxiety management, handling depression, coping with life's changes, self esteem and problem solving techniques, this has included working with clients who have post-natal depression.

**Evaluation:**

The approach has been phenomenally successful. Unlike mainstream services that concentrate on the short-term, medical and clinical aspects of addiction, the Sure Start emphasis has been on intensive social and psychological support over a sustained period of time that can be up to 18 months. However, prevention of relapse is considerably improved, up to 76% of clients stay off illicit drugs on the Sure Start caseload.

The psychotherapy skills of the post holder have been a valuable resource for the multi-disciplinary team and contributed to staff awareness of mental health issues. The use of these skills to also support clients with post natal depression has been particularly beneficial for the Programme and referrals have been made from across the team including Midwives and Health Visitors. The diversity of clients has also helped the post holder retain therapy skills across a broader spectrum than would be the case if she were working solely with substance misuse issues.

**Measurable Outcomes:**

Caseload = 31 clients

Number of alcohol clients abstained = 11 (92%)

Number of clients off illicit drugs = 12 (76%)

Number of clients moved on to course/further education = 8

Number of clients returning to employment = 10

Number of families where social services have withdrawn = 7

Number of clients supported during pregnancy = 7

Number of clients with post natal depression = 3

(See attached for further outcomes)

**Cost:** Current Post holder 2005 = £31287 (including on-costs, mileage, mobile phone training) per annum

Acupuncture – Training £350

Insurance - £93 per person (9 months)

Registration - £20 per person

Resources - £750 per annum

**Future Plans:** Lancashire Care Trust are in the process of establishing a Drugs Team within Rossendale, which will be based in Bacup. They have shown an interest in working closely with the Sure Start post holder to run joint group therapy. They also have a Community Psychiatric Nurse seconded from the Primary Mental Health Team to work with alcohol abuse. It is planned to move the Sure Start post from ADS in Burnley to Lancashire Care Trust. At present funding will continue through Sure Start but it is hoped the post will be taken on by the Bacup based team. The concern is for the post to retain its autonomy, working with a specific client group and offering intensive, long-term support within a multi-disciplinary setting.

The post holder has recently trained in auricular acupuncture, through a course recommended by the Community Drugs Team. She will be commencing acupuncture sessions, coupled with relaxation for suitable clients, next month. The service will also be available to pregnant women wanting to stop smoking (see attached supporting evidence)

**Conclusion and Recommendation:** Qualitative evaluation from service users is very positive (see supporting evidence), ease of access and the long-term, holistic and multi-disciplinary approach used has improved outcomes for service users. The post holder has made a valuable contribution to the evaluation of the Programme, to the health action plan and to the facilitation of joint working and the public health remit. It is recommended that the post be transferred to Lancashire Care Trust and a mechanism put into place to ensure the post retains its present focus and functions, for example through joint funding.

**Key Public Health Targets Addressed**  
Alcohol, Drugs, Mental Health

**Project Name:** [Food Check](#)



**Summary of Project:**

The project's aim is to improve the nutritional content of the family diet in Bacup and Stacksteads and increase awareness about healthy eating and weight management. A weekly 'Food Check' session with a qualified PCT community dietician was set up once a week. At the Food Check parents can access tailor-made information on a one-to one basis and also join in with a group discussion about all aspects of food, including weight management, children's diets, weaning, shopping and cooking on a budget, healthy lunchboxes etc.

**Evaluation:**

This approach has been unsuccessful. It has quickly become apparent that the health promotion approach needs to be taken back to a simpler level with the focus being on fostering an interest in food and cookery amongst the population. A training need has also been identified for community dieticians in facilitating group work.

The 'Can't Cook Want to Cook' course facilitated by the 5 a day team has been particularly successful and well received by parents within the programme.

**Short Term Measurable Outcomes:****Quantitative:**

Average weekly attendance = 0-4 people (mostly non-Sure Start registered)

**Qualitative evaluation =**

*'Not much support'*

*'Boring'*

*'I didn't find it helpful'*

*'Useful information'*

**Cost:**

Resources = £300 for health promotion materials

The cost to PCT of dietician 2 hours per week plus additional one-off sessions to link with specific project work

**Future Plans:**

- To produce an art exhibition around the theme of healthy eating involving the dietician working alongside a local artist, using art as a health promotion vehicle to discuss diet and nutrition. This will take place within established Sure Start groups and within a designated once a week art drop-in session. The art exhibition itself will be on 2<sup>nd</sup> July 2005.
- To build on the 'Can't Cook Want to Cook' course run by the 5 a day scheme to offer an NVQ level 1 and 2 course in nutrition and a food hygiene course. It is anticipated that people gaining this qualification will be able to gain practical experience by working in the Community café which will contribute towards their personal CV.
- To begin a 'Cookery Buddies' peer supporters scheme, running along similar lines to 'Breast Mates' (see separate report), whereby volunteers can take a training course which will equip them to support other parents in their own home and in the training kitchen at the Sure Start Centre, sharing ideas of cooking, nutrition, shopping and food hygiene.

**Conclusion and Recommendations:**

It is recommended the 'Food Check' be discontinued in its present form and that the focus move more towards fostering an interest in food and cookery generally within the community, including looking at the feasibility of launching the 'Cookery Buddies' peer supporters scheme and fully evaluating the pilot of this.

**Key Public Health Targets Addressed:**

Coronary Heart Disease, Obesity (child and adult), Diabetes, Home Safety

## Project Name: Health Administrator

### Summary of Project:

This post has evolved through an identified need to have a dedicated person to provide admin support to the multi-disciplinary health team. The post holder facilitates good communication between the team, produces good quality health promotion resources and is responsible for the overall administrative health role, including the production of minutes, the gathering of statistical evidence and the marketing of the health related activity. Samples of the work undertaken can be found throughout this portfolio. All admin, relevant to the health activity of the Programme, is taken on by this dedicated post. Every member of the health team uses the same member of staff and work is also undertaken for community members (e.g. Breast mates) and statutory health staff where their work compliments Sure Start aims (e.g. Health Visitors).

### Evaluation:

The need for good quality dedicated health admin support cannot be too highly stressed. The reliability and skills of the current post holder and her ability to work on her own initiative has contributed greatly to the speed with which many of the projects have come to fruition. It has been invaluable to be able to draw on the knowledge of the post holder, to receive creative suggestions and to have someone who is the central lynch-pin between all members of the health team. Her overall perspective on the development of the various projects has played a crucial part in pulling ideas together and identifying areas where the activities of the health staff compliment one another. Her overall understanding of the health projects and the role of the health team, has meant that she is in an excellent position to pass on up to date information to service users, to refer queries to the relevant member of staff and to signpost people to appropriate services. All the admin team are sensitive to the needs of women attending the ante-natal clinic, confidentiality, and the importance of making service users feel welcome and comfortable during their time in the Sure Start centre.

### Short Term Measurable Outcomes:

#### Quantitative:

Approx 20-30 hours per week spent on health related admin

#### Cost:

20 hours per week @ £7.33 per hour = £7673.20 per annum, plus on- costs.

*Also resources used*

### Future Plans:

To further develop the post holder's skills in marketing and IT

### Conclusion and Recommendations:

It is recommended very strongly that a dedicated health admin person be appointed within the Children's Centre and that the post holder has good self-management skills and organisational abilities as well as being able to produce quality health resources. This would make a valuable contribution to linking statutory and non-statutory staff involved in health related work.

**Key Public Health Targets Addressed**  
*Contributes to all areas*

## Project Name: [Sure Start Designated Midwife](#)

### **Summary of Project:**

We funded an additional Community Midwife. The 37.5 hours were divided amongst the established team and one Midwife was upgraded to a G grade to take on the responsibility of linking the team into the Programme. The designated post holder was responsible for collecting statistical evidence, contributing to the planning and development of the health aspects of the Programme and facilitating the Public Health role in the antenatal and postnatal period.

Midwives are currently in the process of moving all their ante-natal clinics into the Sure Start Centre

We also funded additional resources to support parentcraft and to furnish an informal clinic room

### **Evaluation:**

The approach has been very successful. Spreading the hours amongst the team has enabled the link Midwife to retain her clinical skills by rotation on Delivery Suite and in Antenatal Clinics. All the team see themselves as part of the Sure Start workforce and ethos. The Programme has benefited by having access to the wider variety of skills and professional interests within the whole team.

Services provided include: Antenatal drop-in, Young and Pregnant Group, Healthy Lifestyle Home Visits (antenatal period), enhanced Parentcraft input, intensive follow-ups for difficult to reach clients and non-attenders, a breastfeeding Peer Support Programme (Breast Mates), and a Direct Contact Line for advice and support via Sure Start funded mobile phone

The approach has fostered integrated partnership working across several disciplines including the Family Support Team, I Quit Stop Smoking Group, Drug and Alcohol Worker, Youth and Community (Young Parents Group), the Volunteer Befriending Network, early input re Speech and Language and the Community Dietician.

The additional health promotion resources funded by Sure Start have enabled the midwives to promote parentcraft in more user friendly and interesting ways.

Early indicators are very positive for the movement of clinics into the Sure Start centre. Women are forming their own informal support groups alongside the clinics and tend to stay on after their appointment to discuss their pregnancy with other women in the cafe. They have requested a post-natal group and the midwives will be starting this soon.

**Short Term Measurable Outcomes:** *(The midwives have an average of 100 ante-natal women at any one time on their caseload and 45 post-natal women.)*

**Quantitative Evaluation:**

Contacts – On average 100% of all pregnant women are seen every month by a Midwife

Young and Pregnant Group – Average contacts = 9 per week

Mobile Phone – Receiving approx 40 calls per week

Ante-natal drop-in – Average contacts = 10 per week

Healthy Lifestyle Home Visits 154 in 2004

Parentcraft – Average attendance = 20 per session

Breastfeeding – 2002/2003 – 30% breastfed at birth

- 2003/2004 – 46% breastfed at birth (a 16% increase)

Smoking – 2003/2004 – smoking in pregnancy dropped by 20% (data gathered by midwives records and Sure Start database). *In 2002/2003 55% of mothers smoked this dropped to 35% in 2003/2004*

**Cost:**

Current Post holder 2005 = £36308 (including on-costs, mileage and training)

Mobile phone – approx £30.00 per quarter

Group work – no additional cost – apart from Breast Mates – see separate report

Admin for Ante-natal clinics approx 3 – 4 hours per week @ £7.33 per hour = £25.65 per week (£1334 approx per annum)

Health promotion resources and additional weighing scales - £633

**Future Plans:**

- A Pilates ante-natal class with supporting parentcraft input
- Linking in with Gentle Exercise class already running (no additional cost)
- To build on the success of the introduction of clinics into the centre by facilitating discussion and informal parentcraft sessions. Also to link other Sure Start workers and services into the sessions to provide further support and information to pregnant women on a wider range of issues.

**Conclusion and Recommendations:**

It is recommended that the service continue in its present form. Qualitative evaluation from service users is very positive (see supporting evidence), ease of access and frequent contact with midwifery services has been proven to improve outcomes for both mother and baby (see supporting research). The Sure Start/Midwifery approach has contributed to a reduction in smoking in pregnancy and a reduction in the number of low birth rate babies. There has been an increase in breastfeeding and ante-natal contacts (this is especially evident with difficult to reach groups e.g. teenage pregnancy). The approach has also facilitated ease of referral and partnership working across disciplines to offer pregnant women an integrated and holistic service. The designated post holder has made a valuable contribution to the evaluation of the Programme, to the health action plan and to the facilitation of joint working and the public health remit

**Key Public Health Targets**

Smoking, Low Birth Weight, Breastfeeding, Neo-natal death  
*(additional benefits – maternal health)*

## Community Midwifery within the Programme

Following the outcomes of the Initial Consultation Process in 2001, the decision was made to fund an additional community midwife who would join the existing team of community midwives. They would be paid at one higher grade than the existing team which would reflect the extra responsibilities they had for monitoring and evaluating the services they provided, coordinating the team and the implementation of new initiatives.

Following a number of very useful meetings with the Midwifery Manager at Burnley General Hospital a Job Description, Person Specification and Service Level Agreement were written and the post was duly advertised.

The successful candidate commenced in December 2002 and commenced by talking to the rest of the team and parents about what they felt were the gaps in service in the area focussing on the Sure Start targets of:

- Reducing the number of parents who smoked during pregnancy
- Increasing breastfeeding
- Support for mothers with Post Natal Depression
- Improving health

From these discussions evolved the Healthy Lifestyles Visits, an extra visit for every parent to talk about all the support available from Sure Start, Teenage and Young Parents' Support groups, breastfeeding support in the form of "Breastmates" peer group supporters, Smoking Cessation advice and support, breast pump loan scheme and additional Parentcraft sessions.

At the end of that year a Customer Satisfaction Survey was undertaken to explore how parents felt about the enhanced services and their efficacy. The outcomes were extremely positive with comments such as, "The midwife had more time to listen to me about my anxieties" "If it hadn't been for the midwives, health visitors and the Breastmates I would have given up breastfeeding long ago"

The Sure Start funded midwife left in 2004 and her successor commenced in July 2004. She was a member of the existing team and applied for the post as she was a firm advocate of the Sure Start approach to innovative ways of working. Since coming into post she has worked with the team and improved on the existing services and introduced new initiatives in partnership with other Sure Start team members and consultation with families. Some of these new initiatives are:

- Systems for collecting data required by the Sure Start Unit
- Drop In sessions for pregnant women
- Joint visits with Family Support during the ante natal period to reduce stigma of using Sure Start Services with reference to "being referred"
- Joint Smoking Cessation advice with Family Support and Health Link worker.

In preparation for this report the midwifery team were asked to consider what differences the Sure Start approach had made to their way of working and what improvements there had been in the services for pregnant women and families with new babies. The outcomes were as follows:

*“Since Sure Start commenced it has had a great impact on the services to women and their families in the following ways.*

*Funding otherwise not provided by mainstream has allowed us to set up groups such as teenage pregnant mums, midwives drop in for confidential advice, pre conceptual advice, antenatal and postnatal checks, breast and infant feeding support and provided a suitable site from which to deliver these groups.*

*The purchasing of a midwives mobile phone has allowed women a wider access to a local midwife to alleviate anxieties and pregnancy problems hence greatly reducing the need for families to travel far to the nearest local hospital which in turn puts less strain on the NHS. **( sic if less mothers are travelling to the hospital for advice and they are receiving that advice locally the funds could be easily redirected to provide that service at no extra cost to the NHS.)***

*Sure Start has allowed us to set up smaller and more parentcraft classes for families to access locally rather than having to travel to access large groups with an unfamiliar midwife. This has resulted in increased attendance and parent feedback has shown this service is seen as more personal, giving women and their families more confidence and increasing their ability to cope with pregnancy, labour and life with baby!*

*Midwives have been able to access “hard to reach” families by having more time to increase the number of home visits. Everyone now gets a visit as oppose to “the select few”. This in turn leads to more continuity of care reducing the number of unfamiliar midwives involved with the family. **( customer feedback had shown that this was one of the things which parents were dissatisfied with. They felt valuable time was wasted having to constantly re tell their story to what appeared to be a stream of different midwives. They also perceived the midwives were so busy they did not want to encroach on their time)***

*Sure Start Funds have allowed the purchase of many resources and teaching aids which benefit the client groups such as parentcraft, young mums, breastfeeding support, smoking cessation etc.*

*The multi agency approach has meant midwives are able to refer and work alongside the Sure Start Smoking Cessation Service providing on the doorstep support for clients and their partners giving better outcomes of reducing low birth weight babies, miscarriage, stillbirth etc., reducing the risk of cot death and of course reducing the risk of ill health due to the effects of second hand smoke. **( smoking has reduced by 20% since the programme commenced way above the target set by the government)***

*The access to the La Leche League Breast feeding support training has enabled us and the health visitors to train peer group supporters from the community and together set up a network of breast feeding supporters who are now empowered and confident to run the service themselves. ( for relatively little cost, in comparison to the outcomes, there is now a thriving Breastmates network and breastfeeding has increased by 16%, above the government set target. In the long term if more mothers are choosing to breastfeed it is proven there are benefits for both mother and baby reducing health risks and increasing attachment sic reducing abuse. Therefore the resources currently being used in tackling these issues could be redirected into more preventative measures.)*

*Funding has allowed midwives to access courses which in the past would have had to be self funded. This has enabled us to improve our knowledge and skills to care for and educate families which in turn improves the overall quality of life.*

*Referral into such services as Family Support, Drugs and Alcohol support and the Volunteer Network has made the task of being a midwife easier and given us a better understanding of how to help clients and confidence in knowing we can fulfil our remit and know the whole family's needs are being met by the partnership approach to supporting families. ( The setting up of a volunteer network to support families is an achievable goal. Mainstream services could replicate the service established by Sure Start and thus provide a complimentary service to the Midwifery service in their remit of supporting pregnant women. This in turn could free up the midwives time to concentrate on more skilled areas of support.)*

*Sure Start has allowed us to advertise our services widespread within the community giving us more scope to practice autonomously and to support **all** families which in turn has given us more job satisfaction.*

### ***Statistical Information***

*100% of all families are registered to Sure Start at birth of baby and given information about Sure Start*

*Breastfeeding has increased by 20% since 2002*

*Parentcraft attendances 15 -25 per session*

*Young Parents average 10 parents per session*

*Smoking reduced by 24% since 2002 at registration to Sure Start at first home visit. ( 2005 latest figures)*

# A mother's story

I am a mother of 34 with 2 children, one 2 years and one 4 weeks. During the pregnancy and birth of my first child I lived in Rossendale post code BB4.

The facilities I used then were the regular check – ups with the midwives and every Friday evening I went to Aqua-natal classes. My midwives were great, very helpful and supportive and I loved going to aqua-natal as I was getting proper exercise but also meeting other pregnant women. Unfortunately I had a traumatic labour and birth but received excellent care at Burnley General Hospital and at home afterwards. Despite this I did not get off to a good start with my baby. I did go to Baby Massage every week and saw my health visitor on a regular basis but as time went by I found it harder and harder to bond with my baby although I did meet her physical needs and breastfed her.

I was struggling more and more every day with my emotional and mental state and eventually when my daughter was 15 months old I sought help from my G.P. and was diagnosed with Post Natal Depression. I was given medication and within a few months was back to my normal self. During this time I moved to a new house in the OL13 area and I also became pregnant with my second child.

This time my whole experience couldn't have been more different! I was now living in the "SURE START" area. Immediately I feared that I would go through the same experiences as I did with my first child. I had the most amazing support from the Bacup Midwives who knew my past experiences. They all took the time to give me all the help I needed. Again I went to Aqua-natal and once I finished work I would go to the Sure Start Centre to the midwives' Drop-in. It was great to chat to other pregnant women and share experiences and fears!

I was given tremendous support from the Bacup Midwives as I'd booked a home birth with my first baby and was unable to have one – this time the midwives were as determined as I was for me to give birth at home.

I went to the Parentcraft Classes again run at the Sure Start Centre by the midwives which helped me with the fears about the birth. Although I had all this advice and support the midwives thought it would be a good idea for me to see the Sure Start Counsellor, Laura. She helped me so much and helped me realise I had come a long way from the trauma of my first pregnancy and was ready to do it for the second time and look forward to it!

As my due date came and went my old fears returned, I had been late the first time and the birth had been induced. The midwives went beyond the call of duty to help and support me and 12 days after my due date I went into labour. The

midwife arrived, one of the Bacup Midwives who was on call, and I had the most wonderful home birth which finally laid to rest the trauma of my first birth.

4 weeks on I feel fantastic. I have continued to go to the midwives' Drop-in and have again received great support. I am successfully Breastfeeding and looking forward to Baby Massage at the Sure Start Centre. I am able to attend things like this due to my older child being cared for in the Sure Start Crèche. I have been asked to organise and set up a "Post Natal Group" which I am looking forward to doing.

I don't believe I would have had such a good pregnancy and birth if I had still been living in my old house. I am very fortunate to be able to access all the groups etc. at the Sure Start Centre and will use it as much as I can. I also feel privileged to have had the care and support of such amazing midwives. I am even thinking of having another baby!!

*Helen Hollis*

## **Project Name:** [Shape up with Sure Start](#)

### **Summary of Project:**

The project was set up in partnership with a local business 'The Pioneer Gym' which was conveniently located across the car park from the Sure Start building. The gym was having problems filling its daytime exercise classes and the workout area was also underutilised in the daytime. The gym did not provide crèche facilities and the prices charged were prohibitive to our client group. After careful negotiation a scheme was set up whereby Sure Start registered parents could purchase a gym card for £3.00 which entitled them to 12 sessions in the gym, either to attend a class or use the workout area. The card has an expiry date to encourage regular use and a new card can be purchased when the 12 sessions have been completed or expired. The crèche facilities in the Sure Start building are made available at designated times to coincide with the exercise classes (cost 50p per family for 2 hours). People may opt to use the workout area instead of the classes during these designated periods. The classes available include: aerobics x 2, gentle exercise, yoga, tai chi and line dancing. The workout area includes aerobic exercise equipment and weight training.

### **Evaluation:**

The project has been very successful and popular with the Sure Start parents. Using the gym has meant that we have been able to offer a wider choice of regular physical exercise sessions than we could have provided at the Sure Start Centre. The project has increased access to physical exercise by making this affordable and accessible. Parents have had access to trained professionals and high quality equipment. An additional benefit has been that other members of

the community have also started using the gym as they have accompanied Sure Start parents. We have capitalised on this by the gym offering reduced rates to anyone attending with a Sure Start parent. Building a positive relationship with the gym has had an additional benefit for the Sure Start Programme in that we have been able to negotiate reduced rates for use of the premises to run other activities (e.g. Kids Circuit Training). The gym has also donated an area for us to use as a 'Snuzzle Room' (light and sound area) for children with special needs and for stress management sessions. Beyond the initial negotiation the scheme has needed little input from the Programme, management input has been minimal and the operational side of the scheme has run smoothly.

The children accessing the crèche have had quality play experience and the parents have valued the respite, stating that the project has enabled them to feel more relaxed around their children having 'vented frustrations' in the gym and had some 'time out' for themselves.

The gym itself is within an SRB area and is hoping to expand its premises. Our support of the gym has improved the chances of the business receiving an improvement grant and enabled the manager to retain staff who may have otherwise been made redundant. The project has therefore contributed to the local environment and economy.

In many ways the project has been the victim of its own success. The allocated crèche places for the gym sessions now have long waiting lists and this has restricted the number of people who can access the scheme. We have countered this to some extent by the gym agreeing to extend the Sure Start allocated hours to include specific periods during the weekends, when parents have more childcare support available. We are also planning to support the gym in designing a crèche area which our staff can then use for the Sure Start sessions; this will alleviate the problem of insufficient crèche spaces in the Sure Start building.

**Short Term Measurable Outcomes:** *(project commenced 1st December 2004)*

Number of gym cards sold = 60

Number of individuals currently accessing the gym = 46

Average number of gym attendance per week = 54

(includes 4 weekend attendances by Sure Start fathers)

**Cost:**

At present the cost is set at £24.00 per 12 session card, with parents paying £3.00 towards this. (cost to Sure Start £21.00 per person or £1.75 per session)

First 6 months, total cost of project = £1,260

**Future Plans:**

- Midwives will be using the facilities to run a Pilates ante-natal class.
- Midwives will be linking in with the Gentle Exercise class for post-natal women
- 'Shape up with Sure Start Kids' session x 2 a week concentrating on physical activity and 'Music and Dance' sessions for parents and children together at the gym.
- Providing crèche facilities on site run by Sure Start crèche workers during specific times
- To negotiate a Service Level Agreement to cover all gym sessions and use of the facilities.
- To gradually increase the price paid by parents for a 12 session card to £4.50

**Conclusion and Recommendations:**

It is recommended that the project continues and that crèche provision is improved as outlined above. The costings need to be streamlined so that they are more manageable and all inclusive.

**Key Public Health Targets Addressed:**  
Obesity, heart disease and mental health

**Project Name: [Weaning Sessions](#)****Summary of Project:**

Weaning advice and information sessions are offered by the PCT Nursery Nurse attached to the Health Visiting Team in Bacup. Parents are invited at 3 months and again at 6 months. The aim of the project is to promote safe weaning practice following WHO and UNICEF guidelines and to encourage the postponement of weaning until 6 months. Demonstrations are given about preparing weaning foods and the use of cups rather than bottles is promoted. Basic dental hygiene is also discussed. Parents are invited to the sessions by post and none attendees are offered a home visit at a later mutually convenient time. The 6 month session also incorporates the Safe and Sure home safety advice and pack (see separate report).

**Evaluation:**

The sessions have been attended by parents, grandparents and carers. Attendance has been low over the previous year, however more recently numbers have increased. The sessions became too large for the training kitchen at the Sure Start centre and have now been transferred to the Health Centre.

**Short Term Measurable Outcomes:**

**Quantitative:**

301 families were invited to the sessions

36 attended the sessions

42 were seen at home visits

*(35% of families seen)*

**Qualitative:**

*'Very helpful knowing when to start weaning and what foods to give'*

*'I didn't have a clue what to do'*

*'Very good for ideas'*

*'The information was important'*

*'I found this very useful and would recommend everyone to come'*

**Cost:**

PCT Nursery Nurse costs to deliver

Resources (food) - £160

**Future Plans:**

To undertake a fuller evaluation to assess the influence of the project on weaning diets

**Conclusion and Recommendations:**

The project has been successful but needs to be supported by other professionals promoting the groups and good marketing. It is simple to deliver and not particularly time consuming. It is recommended as a possible project for delivery throughout the Children's Centres

**Key Public Health Targets Addressed:**  
Obesity, diabetes, coronary heart disease  
*(additional benefits; dental health)*

**Project Name:** [Sure Start Ante-Natal Contacts](#)

**Summary of Project:**

As the number of projects, groups and services on offer through the Sure Start Programme has grown, it has been difficult to supply detailed information to new parents. A solution to this has been to commence ante-natal home visits during which parents could receive information about Sure Start and ask questions about services that interested them. The visits also give an opportunity to

promote the stop smoking I Quit group and Smoke Free Homes initiative, at the time when these interventions are likely to be most beneficial. All parents were initially offered a home visit by a Sure Start worker between 24 -32 weeks of pregnancy, with priority given to those parents who smoke.

**Evaluation:**

It quickly became apparent that the visits were too time consuming, taking up to an hour to complete, depending on the level of interest shown by the parents. A solution to this has come with the Midwives now running their ante-natal clinics from the Sure Start building. This means that at 24-32 weeks parents are seen by a Sure Start worker during their routine clinic appointment. The advantage of this has been that there is then quick access to any referral process e.g. introduction to the Family Worker team if there are social issues identified or the I Quit group if necessary. Parents also have the option of a tour of the centre and this has reduced the 'stigma' that can sometimes be attached to Sure Start centres as being for 'deprived' children. Families can also be registered with Sure Start at this session and this will hopefully increase the numbers.

**Short Term Measurable Outcomes:**

**Quantitative:**

*(The service has only been running since Feb 2005)*

Number of parents seen = 13

**Cost:**

Sure Start Worker time approx 3.5 hours per week @ £8.50 per hour = £30 per week (£1,504.50 per annum)

Resources approx £1.00 per information pack = £170 per annum

**Future Plans:**

At present the plans are to pilot the ante-natal clinic contacts

**Conclusion and Recommendations:**

As services within Sure Starts and Children's Centres develop it is important to ensure that parents are given adequate information about what is available. The ante-natal contacts appear to be a good route to deliver this information and target some of the key areas related to health. Early contact also means early intervention where there are potential social or health problems.

**Key Public Health Targets Addressed**

Smoking, Child Protection, Breastfeeding, Nutrition,  
Mental Health

## Project Name: Emotional Health Worker

### **Summary of Project:**

The project's aim is to improve the emotional health of children within the Programme catchment area. The focus is very much on prevention of emotional abuse through; raising awareness of the emotional needs and vulnerability of children, promoting positive parenting and language, and addressing issues of attachment in the pre and post natal period and throughout the pre-school years. Work includes raising awareness amongst parents and child carers as well as working with children directly in pre-school settings about self assertiveness, personal boundaries and relationship building.

### **Evaluation:**

Originally this post was held by a Child Psychologist; unfortunately after the post-holder left it became evident that retention of a psychologist was too problematic, given the cost and the difficulty in recruiting. It was decided to employ a CAMHS worker into the post. However the calibre of applicants was disappointing. It was decided to bring someone into post who had considerable experience of working within a multi-disciplinary community setting and with children presenting with challenging behaviour. The plan is to develop this person in role, with intensive supervision and an identified training pathway designed to meet the core messages of emotional health. Supervision and development is provided weekly by CAMHS who do not charge for this service

The post-holder only took up her position from 1<sup>st</sup> May 2005 and it is therefore not possible to give a full evaluation. However other Sure Start programmes have used this model for several years and early indicators are that this has been very successful.

The title of Emotional Health Worker has been found to be more acceptable to parents than 'Mental Health Worker' or even 'Psychologist'. One parent stated 'I would worry if my child were referred to a psychologist but an Emotional Health Worker seems much more normal and friendly.'

Integration of CAMHS into Sure Start has been a rewarding and positive process and the relationships, workplace cultures and shared values of the organisations have been very much in harmony. CAMHS have offered the programme extensive access to their knowledge base and have given valuable advice and guidance on the implementation of the post into the programme and support of the post thereafter.

**Cost:**

Current Post Holder (Grade G 25hrs per week) = £23196 inclusive of oncosts and travel

Training = £300 per annum

Resources = £200 per annum

**Future Plans:**

- To evaluate the Bacup and Stacksteads model of a CAMHS Emotional Health Worker.
- To make recommendations based on the pilot to other Children's Centres by May 2006
- To advocate for the mainstreaming of the post through CAMHS who now have a remit under the NSF framework to provide preventative approaches

**Conclusion and Recommendations:**

It is recommended that the project be fully integrated into Children's Centres and that the positive attitude towards multi-disciplinary working shown by CAMHS be fully capitalised on.

**Key Public Health Targets Addressed:**

Child Protection, Mental Health (children and young people)

**Project Name: [Our Sure Start Giant Art Project](#)****Summary of Project:**

This project aims to use the vehicle of art to promote and foster an interest in healthy eating, positive parenting and the importance of family life. 6x 2 hour sessions have been purchased from a local artist plus 2 x2 hour planning sessions. The end product is to be Our Sure Start Giant Art Exhibition which will take place on 2<sup>nd</sup> July 2005 at the sure Start centre. The exhibition will include:

- A giant floor game with giant dice where a player moves through the game by a combination of luck and answering questions related to their healthy or unhealthy diet. The game promotes the use of fruit and vegetables.

- A giant tent displaying art work depicting positive and negative emotions related to parenting, healthy recipes and poetry based on the theme of the exhibition (created by the literacy group)
- A giant mural depicting the children's story book 'Handa's Surprise' which promotes healthy eating
- A giant fruit bowl
- Healthy hats display (similar to Easter bonnets) made by the nursery children
- Audio tapes on which Sure Start parents role play the differences between positive and negative parenting language
- A giant sunflower. The petals of the flower will be added by people attending the exhibition who will be able to add their own family petal along with an example of something their family likes to do together
- A giant book with photographs of the exhibition will be displayed on a screen as part of the exhibition itself
- There will also be live music and a healthy buffet with tasters of healthy food

The idea is that there will be two art drop-in sessions per week to which any Sure Start registered family can attend and spend time painting and making some of the artefacts. All members of staff and all groups and classes running at the centre have a designated artefact to complete or contribute to. The artwork involves parents, children and babies. The PCT dietician and the Emotional Health Worker, the Midwives, Crèche staff, Family Workers, Nursery Nurses and the youth Worker will use the making of the exhibition to discuss the themes being addressed.

**Evaluation:**

The project is only in its early days but there have already been positive outcomes of this approach to health promotion. The use of fresh fruits and vegetables to draw from has raised many questions from parents about how to use and cook them and the wide variety of fruits used have been tasted at the end of the art session. The nursery have discussed healthy eating as an ongoing project with the children. There has been a breaking down of social boundaries that had started to exist between the different Sure Start groups as individuals began joining in the drop-in sessions and to take an interest in what other groups were doing towards the exhibition. The project has given the staff a joint focus and contributed to team building and morale. The Young Parents Group and the Young and Pregnant Group, in particular, have totally embraced the idea of the exhibition and there has been a noticeable increase in confidence e.g. initially they opted out of the role play for the positive and negative parenting tapes and then later agreed to take this on.

**Short Term Measurable Outcomes:**

Quantitative:

Qualitative

*Too early to assess*

**Cost:**

Planning £90

7 art sessions £450

setting up exhibition £120

materials £140

Exhibition costs, printing and photography £80

Total = £850

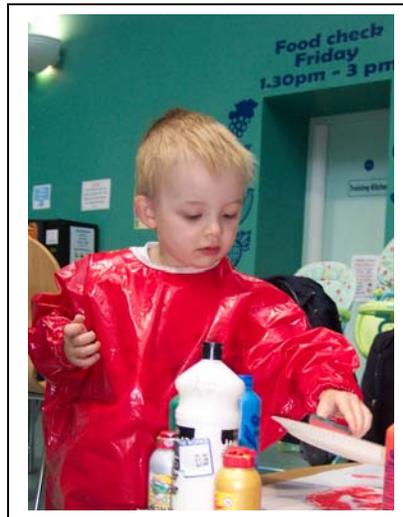
**Future Plans:**

To fully evaluate the project on completion

**Conclusion and Recommendations:**

Initial indicators suggest the project is likely to meet its aim of promoting the main themes of healthy eating, positive parenting and family life. It is recommended that the project be fully evaluated before similar approaches are used across the Children's Centres. It would be useful if pockets of funding could be made available for one-off project work of this nature, where the focus is short, and sharply focussed on, one or two health messages

**Key Public Health Targets Addressed**  
Smoking, Child Protection, Breastfeeding,  
Nutrition, Mental Health



# Activities to Support Language Development

DENISE STOTAN – LANGUAGE AND LITERACY  
COORDINATOR



These are the major groups and sessions that have been facilitated through the role of Literacy Development Worker and later as the role developed to meet the changing needs of the project as Language and Literacy Coordinator.

The groups/sessions are aimed at language and literacy targets but it is felt they also hit other targets such as improving social and emotional development and improving children's health.

## Increasing Library Membership

The target was to increase the Library membership and in turn encourage parents to take their pre-school children to the Library and become actively involved in reading books to their children.

My initiative was to involve the Community Midwifery Team in encouraging parents to register their child to the library at birth. To become a member of the library you needed to prove your identity as well as your address and this appeared to be the main hurdle in obtaining membership. This was due to the fact that parents came to the library to register their child but had not any form of I.D. on them. They then had to return home and very often did not come back to register at a later date.

As Midwives have access to all parents with newborns in the Sure Start area, and are recognised as being able to verify a person living at an address, it made sense for them to carry the Registration Membership Cards with them along with the Sure Start Registration Cards. After negotiation with the Midwives and their manager it was agreed they would complete both Registration Membership Cards and return them to Sure Start. We would then pass on the completed cards to the library.

Every child born in the Sure Start Local Programme area now has the opportunity to register with the library and over the past three years library membership has gone through the roof.

**8% active membership in '02**

**20% active membership in '03**

**41% active membership in '04**

## Literacy party

This was held at Bacup Nursery School and was an interest group looking at story telling and ideas for interactive storytelling using props and puppets etc. During the sessions parents made an interactive book they could use with their child. The Nursery was very supportive with the group being promoted within their setting, a good example of partnership working.

Parents and carers reported they enjoyed making the book, the idea being that if both child and parent/care enjoyed making the book they would want to use it. The book cost around £2.50 to produce as it was laminated and bound for a longer life.

**15 families took part with many parents saying they found the experience rewarding for both themselves and their child due to having an activity to focus on.**

## Sure Start Language Measure (SSLM)

The SSLM is conducted through Home Visits or over the telephone. This year (2005) there was an increase in parents taking part via the telephone where as in 2003 and 2004 more parents requested a Home Visit. Parents reported they felt they had good relationships with the programme due to the promotion of services since the conception of the programme.

The Home Visits, however, are an excellent opportunity to make contact with families that do not use our services and ascertain the reasons why, those being that they worked or went to the gym.

I do have some reservation regarding this method of evaluating a child's language development as it is done from the parents' perspective. During some home visits I have heard a child say the prescribed word, for the parent to say they cannot. Despite this there has been a steady rise in 2 year old children's vocabulary over the past 3 years.

<b>Year</b>	<b>"P" Score</b>	<b>"Q" Score</b>	<b>"R" Score</b>	<b>"S" Score</b>
<b>2002/03</b>	6.67%	0%	53.33%	40%
<b>2003/04</b>	0%	6.67%	0%	93.33%
<b>2004/05</b>	0%	6.67%	6.67%	86.66%

## Starting Out with the Children

This was a Lancashire County council course exploring the six areas of the Foundation Stage over a 6 week period. The course was held at Bacup Nursery School and to be eligible to attend a parent/carer had to have a child in attendance at the school as there was a £250 payment from LCC to the nursery for them to spend on resources. 10 parents commenced on the course with 7 completing the course. As before the Nursery School were very proactive in promoting the course.

The parent received a certificate on completion and they reported that they had a better understanding of what their children were learning at nursery and how they could in turn support that learning at home and in the nursery.

# Theatre Experience



These sessions were run by the M6 Theatre Company the first being *The King Who Wanted the Moon*. This was held at Bacup Leisure Hall at a cost of £20 for the hire of the hall and £235 for three performances.

The attendances were as follows:-

- St. Mary's Nursery School – Morning 24 children and afternoon 10 children plus 10 year6 supporting the younger children plus parents and staff
- Bacup Nursery School – Morning 36 children and afternoon 21 children plus parents/carers and staff.
- Parent/Carer session - 12 parents and 15 children attended.

The next performance was *WONDER*. This was held at Tunstead School at no cost to Sure Start and the performance was obtained free of charge.

- 36 children attended from Tunstead pre school
- 30 children attended from the nursery

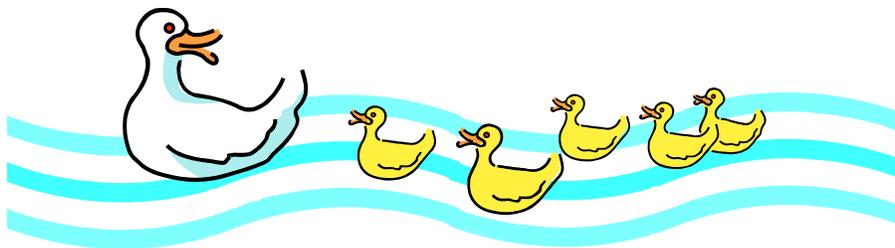
- Nursery staff also attended

This was an excellent opportunity for children and parents/carers to experience live theatre. The children and parent/carers shared the story giving them a chance to observe the following language and literacy skills.

- Listening, non-verbal communication including body language, facial expression and eye contact as well as exploring sound and building self confidence.
- The sessions were interactive and multi-sensory giving the children in-depth learning in a fun friendly way.

St. Mary's Nursery attended with 10 year6 pupils who are part of a reading support group, these children read to a nursery child once a week. With the support of their staff the year 6 children used this session to extend their own practice in school by making interactive books for the nursery children.

For months after the performance the children were still talking about what they had seen and loved the feather that they were given at the end of the performance.



## DUCKLINGS LANGUAGE SESSIONS

Sessions were held at Marl pits sports Centre on Monday mornings with three groups that were split by age. Parents/Carers were in the water with their children and the children worked towards the Duckling Award badges and certificate. The training for the instructors was funded by Sure Start as were the awards.

55 sessions were held with 574 attendances by 84 children between 01/11/02 and 05/07/04.

This was an excellent and novel way of encouraging parents/carers to use rhymes and songs. It also promoted language, literacy and communication skills such as blowing bubbles, eye contact, listening, following instructions and general conversation. There was also a big social aspect for both parent/carer and children and the safety aspect around water.

There was also an opportunity to support families before and after the sessions as well as promoting other events and groups that Sure Start and other agencies had planned.

Sure Start also provided a quality crèche service which enabled parents/carers to access information on key childcare issues via the crèche staff and also to observe how staff play and respond to children which acted as a role model to enhance their parenting skills. Spending time in a crèche also afforded the children in gaining confidence in a new situation as many had never spent time away from their parents. Some parents said their children had never spent time away from them as their extended family lived too far away. This confidence booster proved to be a good pre cursor for attendance at nursery.

The Duckling language sessions have been an excellent opportunity to build relationships with families and promote services.

## Parents' and Children's Feedback

A huge thank you from everyone at Tunstead Pre-school. We really enjoyed " WONDER "

Ben DANIEL Rhys William Sophie Georgia

Bethany Tegan Kirra Thomas Ciara Henry

Anna Jean Charlotte Megan Lexie Josh

A Big Thank you to Sure Start

"..... The Sure Start team have been fantastic. Without their help and support Adam and Emily wouldn't be the little "fish" they are today. I can recommend the Ducklings Sessions to anybody with children. You receive all the help and support you need while you are there and everyone is really friendly.

I was a little sceptical about Sure Start when they first arrived in Bacup thinking it would be all words and no action, but by attending the sessions and attending some of the Family Forums, I have now come to understand that they really are here to help families and offer their help and support..... " Kindest regards, Susan, Adam and Emily.

*“ The taxi was really useful as I don't drive. It is good support and help for me as a single mum. I wouldn't have been able to attend the course if the taxi had not been supplied. I would recommend it to other families and would definitely attend again”*

**“ This course has been extremely beneficial to Emma and she has really grown in confidence in the water from sitting on the steps at the first session to swimming off on her own with armbands . a major achievement. We really thank Sure Start for the use of the taxi service to the pool as without it we would have struggled and missed quite a few sessions”**

“ I would like to thank Sure start and particular Denise for their help in providing a service from which my family and in particular my daughter Amy has benefited greatly from. I hope you are able to continue this for other people as well in the future” regards Dave, Sue and Amy Gordon.

“ Joshua Goggins completed the Sure Start Ducklings and gained a level3. He has since carried on lessons at Whitworth baths and has now gained a Level1 national Swim and his 10m with no water aids. He doesn't start school until September so is doing really well. I feel Sure Start helped him to gain his confidence to further his ability and raise his self esteem” Sarah Goggins.

“ Quality time with your child and quality time when you get home as they are TIRED OUT!”

## **Project Name: [Speech Therapist](#)**

### **Summary of Project:**

One Speech Therapist is employed full-time to provide a speech and language service to four Sure Start areas: Waterbridge, Bradley and Whitefield, Daneshouse and Stoneyholme and Bacup and Stacksteads. The focus has been on passing on skills to Sure Start workers to enable them to give accurate information to parents on speech and language development. This project relates to Sure Start targets to improve language development of children at 2 years and at the foundation stage, and to improve social and emotional development.

A training programme 'Communication for Life' was devised to enable staff to support language learning in the home and group settings. This included group skills, demonstrating play activities to promote language development with parents of 8 month olds using Play-Talk bags and facilitating ante-natal/post-natal talks. The trained staff then set up 'Chatterbox' groups for parents

### **Evaluation:**

Training for 'Communication for Life' was completed in December 2004. It has been possible to adapt the groups to meet the needs of local populations, and the abilities of the parents attending the group to grasp the contents of the sessions. The Chatterbox sessions have been extremely popular with parents and there is a high demand for this service.

There have been one or two issues for the Sure Start staff as there is much complex information to deliver for workers who do not have previous training or experience in this area. For this reason reflexive practices need to be in place and ongoing supervision. However the Sure Start staff have had much to offer through their extensive experience of working with disadvantaged families in a group situation, and their background in nursery nursing has been very useful in helping the information to be delivered in a user friendly/child friendly manner. There has therefore been a compliment between the Speech Therapist's knowledge and the Sure Start worker's creativity of delivery. These two areas need to be acknowledged and recognised by both parties for the service to run smoothly and is an area where multi-disciplinary joint working has proved invaluable.

### **Short Term Measurable Outcomes:**

#### **Quantitative:**

Number of Sure Start Workers completing training = 11 (across all 4 areas)

Number of parents accessing groups = 45 at any one time across all four areas

Number of families attending Bacup and Stacksteads Chatterbox = average 7 adults and 8-11 children per session x 2 per week (14 adults and 22 children)

**Cost:**

Speech Therapist 0.25 WTE £10,857 (2004/05) per annum

Sure Start staff £8.50 per hour

Sure Start staff training time = 10 sessions of 2 ½ hours per session (2 staff) = £424

Sure Start staff delivery of Chatterbox plus planning time = £68 per week

Resources £780 set up costs

**Future Plans:**

To introduce in-depth training for Nursery Nurses in childcare settings 'Learning Language and Loving It', with an aim to increase carer/child interactions, 'talkativeness' and developing communication skills.

To explore methods of giving information to parents who do not access groups

To link with the Emotional Health Worker to devise sessions related to communication and attachment in the ante-natal period and early years, and to look at the development of emotional language within parenting sessions.

**Conclusion and Recommendations:**

The learning packages have been very successful and it is recommended that the training be integrated into Children's Centres. There may be a need to employ a designated Speech Therapist to foster the development of this new approach across Burnley, Pendle and Rossendale in order for the preventative model to remain high on the agenda and to avoid the needs of the clinic based therapeutic service taking priority. It is also important that adequate regular supervision continues to be made available for those Sure Start staff who have been trained, alongside updates and training of new staff.

**Key Public Health Targets Addressed:**

Speech and Language, Mental Health (children), Child Protection  
*(improving awareness of children's communication needs)*

## **Summary and Conclusions**

**This report has been submitted to Burnley, Pendle and Rossendale Primary Care Trust as evidence towards mainstreaming some, if not all of the successful health related work undertaken by Bacup and Stacksteads Sure Start and its Partner Agencies.**

**It is too early to gain any evidence of improved Health and Wellbeing of parents and children in the local programme area except that of anecdotal evidence of parents and children saying they feel better.**

**What has been found is evidence that parents feel they have a voice, are listened to and responded to with regard to their health issues. There is also evidence of likeminded people coming together to share their experiences and support each other.**

**We have not been afraid to acknowledge when things have not gone according to plan or not well received and we have quickly consulted with the community to change activities and services to better meet need.**

**Bacup and Stacksteads Sure Start are committed to supporting families in improving their health as they believe that other Sure Start targets cannot be met if people do not feel physically and emotionally well.**

**It is therefore recommended health activities continue as a key area of service provision and continued negotiations take place between the programme and the PCT as part of the mainstreaming agenda.**

**With this in mind the programme has decided to focus on Health Issues as part of Sure Start Week with The Giant Art Project.**

**As part of the Cost Effectiveness exercise staff have been asked to do a Time Line of their activities to ensure all services are equitably proportionate to the targets they are designed to achieve and we suspect some of the health initiatives may have to be amalgamated or passed over to mainstream services in the near future.**

**However there is no doubt, in the short term, the initiatives have proved to be successful in raising people's awareness of their and their child's health.**