

Evaluation of Sure Start Crewe Drop In Services

February 2006

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Executive Summary

Opportunity Links has been commissioned by Sure Start Crewe to conduct an independent evaluation (September 2005 – January 2006) of their Drop-in programme. The Drop-in services are a crucial part of the Sure Start Crewe local programme, based within the Family and Community delivery Strand, but closely linked to other aspects of Sure Start work, and providing cross-cutting support to all four Sure Start objectives.

The research aims to present an overview of the Drop-ins from a range of different perspectives, including strategic, service provider and parents/carers.

Research aims and objectives

The overarching aim of the evaluation 'was to undertake an in-depth assessment of specific areas in the Sure Start Crewe Local Programme, identifying the services that have made a difference to people in Crewe and giving recommendations for a smooth transition to the Children's Centre.'

The evaluation objectives were:

1. To assess the impact of services specifically the Drop Ins;
2. To examine the multi-agency partnership approach to Drop Ins;
3. To explore with Sure Start programme stakeholders issues of user involvement and participation;
4. To investigate the strategic position of Sure Start with respect to delivery of Drop-in services in the new children's centre;
5. Undertake an analysis of non-users of services;
6. Provide Community research training¹ for Sure Start staff and parents.

¹ Also known as peer research

Research methods Used:

The research was designed to be exploratory in nature with a strong focus on participative approaches to incorporate parents in the research process.

Table Showing the Six Phases of the Research

	Activity	Methods
Phase 1	Background and desk-based research of key documents. Initial meetings with Sure Start Crewe staff and manager to get an understanding of the Drop-in services	Informal qualitative meetings
Phase 2	Research with parents at the three Drop-ins	Focus groups
Phase 3	Planning and undertaking participatory research with parents and delivering training on participatory research for Sure Start staff	Workshops with parents Workshops with staff and key partners
Phase 4	Interviews with Sure Start Staff, partners and key strategic people	Semi-structured interviews
Phase 5	Non-user analysis	Semi-structured telephone interviews
Phase 6	Analysis and report writing	Analysis framework

Qualitative research methods were felt to be the most appropriate for this approach; these included focus group work with parents, face-to-face interviews with a range of stakeholders. In addition, the project also incorporated a more quantitative method with a short questionnaire facilitated by parents themselves. There were six overlapping phases of the project these are detailed in the table above.

Findings and Recommendations

The evaluation has evidenced the great impact the Drop-ins are having on the lives of children and families, especially with regards to accessing mainstream services and engaging with parents from hard to reach groups. The cluster model has helped to bring the Drop-in service to a wider range of communities.

Strategically, the evaluation has highlighted the lack of clear aims and objectives for the Drop-in services and the difficulty this creates for providers to understand and evidence how they are delivering outcomes

against specific targets. This will have increased relevance as the Every Child Matters (ECM) framework becomes embedded into practice.

The evaluation also identified several key problems in the operational management and co-ordination of the three Drop-in sites. While the role of the co-ordinator has been specified in the original contract between the NSPCC and Sure Start for Full Circle, this has been adopted and modified in its delivery for the other two Drop-ins. In addition, matrix management of the co-ordinators has led to some confusion about operational issues, such as policy implementation, monitoring/evaluation and training.

The research shows the many benefits and successes of the multi-agency approach, which happens both strategically and operationally within the Drop-in cluster model. This includes fast tracking families into mainstream services and working with particular groups of parents. However, problems with multi-agency working have arisen through a lack of clarity around the purpose of the Drop-ins and involvement of various partner agencies. Good practice would indicate some formal agreement between agencies to ensure clear roles and responsibilities for delivering services.

Communication was identified as a problem at several different points within the Drop-ins. Parents felt uninformed about service delivery, for example when talks were being held, staff felt there were some communication problems around operational issues. In addition, non-users of Sure Start identified that a major barrier to accessing services was a lack of information.

The evaluation has shown that there is some good work happening across the Drop-ins in terms of engaging with parents and carers. However, there are still some gaps in the approach, this includes improving the partnership 'vision' and understanding of participation and ensuring adequate training of staff and partners

Future Delivery

- Sure Start should ensure that the Drop-in model continues into the children's centre; however, this must take into account key developments around managing strategic development.

Co-ordination and Management of the Drop-ins

- A clear job/role description with defined working parameters should be developed and reviewed as necessary for the co-ordinator position. This description to be communicated to all staff and partners.
- Sure Start should look realistically about centralising the management of the Drop-ins to ensure consistency with operational management issues.

Strategic Development of the Drop-ins

- The Sure Start Local Programme Board develops clear aims and objectives for the Drop-ins in line with the ECM outcomes framework.
- In conjunction with the aims and objectives the Board should develop a terms of reference, indicating how these aims will be delivered practically.
- Sure Start should ensure that alongside this strategic framework, a plan for consistent monitoring and evaluation for the Drop-ins is developed.

Multi-agency Working

- The defined framework and terms of reference for the Drop-ins (see above) should be communicated with all partners and Drop-in staff to ensure understanding about the purpose of the Drop-ins.
- Formal contracts/ agreements should be drawn up between partners, detailing roles and responsibilities, code of conduct, complaints procedure, line management, requirements for monitoring and evaluation against defined framework and commitment to participation.

Communication

- Sure Start should ensure that the lines of communication are clearly understood at all levels of the Drop-in service and should develop a communications strategy.

Parental Involvement and Participation

- In the short term, Sure Start should look to introduce a simple yet formal feedback process for parents to comment on the Drop-in service.
- Sure Start should ensure strategic commitment to participation by developing a parental involvement strategy.
- Sure Start should ensure the continuation of a dedicated support officer to maintain and develop the current level of community involvement.
- Training should be provided for board members and partner agencies and staff on participation.
- Participation is not an activity or process, but rather a commitment to a particular approach. Within this, it is important that staff have time to reflect and discuss key issues and problems and gather support and feedback from peers. Sure Start should ensure that staff and partners have opportunities to discuss and develop ideas around participation, sharing techniques and creating a forum for innovation.

Issues to Consider for the Transition to a Children's Centre

The conclusions and recommendations above discuss many of the issues that are relevant for transitioning the Drop-in services into a children's centre. Much of this will depend on the strategic developments to come, such as structure and resourcing. The evaluation recognises the importance of the Drop-ins services as providing value for the parents and families in the Sure Start area; it is essential that this service is considered within the wider strategic development of the children's centre. This will need to take into account many of the recommendations, such as ensuring a suitable outcomes framework with clear aims and objectives

for the Drop-in services and supporting the services to develop more robust monitoring and evaluation methods.

When considering which structure should be developed, it is crucial to recognise the benefits of having a cluster approach in terms of outreach to more isolated communities. However, this will need to have a more co-ordinated management in order to be successful; consideration should also be given to equity of services across different sites. Policies and procedures should be developed before services are in place and clearly defined practical information for staff. This includes examining how communication works through the Sure Start Local Programme and partners, via the Drop-ins, to the parents and carers and back; there is an opportunity, before the centre comes online, to develop these pathways. Ensuring good communication is also vital to the development of multi-agency working. In addition, consideration needs to be given to more formal approaches to service delivery by ensuring that contracts or SLAs are drawn up between Sure Start and organisations delivering services.

There is also an opportunity to comprehensively develop the participation of parents and carers in the move/transition to the children's centre building on the good work that has already started.



Quotes taken from the evaluation with Parents on the impact of the Drop-in services.

1.0 Introduction

Crewe and Nantwich is one of six local government districts in the administrative county of Cheshire. The Borough of Crewe and Nantwich was created in the local government reorganisation of 1974 by the merger of the borough of Crewe (an industrial town), the urban district of Nantwich and Nantwich Rural District. Crewe was once the centre of the British railway industry and remains a major junction.

Crewe and Nantwich Borough has a resident population of 113,400 and covers around 160 square miles with excellent communication links. It is a dynamic and expanding business centre with a wide range of skills in the local workforce. Although the unemployment rate for the Borough is low at only 2.4%, there are pockets of very high levels of deprivation in Crewe (as compared to other Boroughs in Cheshire).

Within the Borough, levels of social and economic stress vary considerably with very high levels occurring in the inner wards of Crewe. Health indicators show that the overall level of health in the Borough is nearly 8% worse than the national average. The incidence of smoking among the adults is estimated to be 10% higher than the national average and teenage conception rates are high, particularly in parts of Crewe.²

1.1 The Sure Start Local Programme

Sure Start is the cornerstone of the Government's drive to tackle child poverty and social exclusion, working with parents-to-be, parents/carers and children to promote the physical, intellectual and social development of babies and young children, so that they can flourish at home and manage the transition to school.

² Sure Start Crewe (2002) *Families First Delivery Plan*

Sure Start brings together a range of service providers, statutory (including health, social services and early education) voluntary, private and community organisations and parents themselves. This integrated partnership working aims to provide integrated services for young children and their families developed on the identified needs of both children and parents.

There are 524 Sure Start Local Programmes operational across the country, helping up to 400,000 children living in disadvantaged areas - including a third of under-4s living in poverty. The local programmes are concentrated in neighbourhoods where a high proportion of children are living in poverty and work with parents and parents-to-be to improve children's life chances through better access to:

- ⇒ Family support
- ⇒ Advice on nurturing
- ⇒ Health services
- ⇒ Early learning

1.2 Map of Crewe

[Had to be removed so that report could go on web]

1.3 Opportunity Links

Opportunity Links is a not-for-profit organisation that aims to provide high-quality social information for all. This includes direct provision of information on children and families, enhancing the capability of other organisations, businesses and employers across the UK.

Opportunity Links is dedicated to the delivery of the National Childcare Strategy, which aims to improve accessibility to quality and affordable childcare, reduce child poverty and raise the profile of the Early Years sector.

1.4 The Evaluation

Opportunity Links was commissioned by Sure Start Crewe to conduct an independent evaluation of their programme. The original proposal detailed a full two-year evaluation of the whole Sure Start programme. However, from July 2005 – December 2005, this original design was subsequently refocused on to specific aspects of the programme.

This evaluation and resulting report aims to provide an in-depth assessment of the Drop-ins, a crucial part of Sure Start Crewe programme. In addition, it aims to identify the services that have made a difference to the people in Crewe and gives recommendations for a smooth transition to the children's centre. A separate aspect of the research investigated the non-use of services.

The report aims to present an overview of the Drop-ins from a range of different perspectives. Section two sets into context some of the background information essential to understanding the strategic and operational development of the service. Section three of the report outlines the methodology used in the evaluation, including the participation of parents in the process. The fourth section presents the strategic and service provider perspective, discussing the views of staff and partners on the impact of the programme and the process of partnership working. Section five discusses the Drop-ins from the perspective of the parents/carers and this is followed by a presentation of the findings of the evaluation undertaken by parents in section six. Section seven offers a strategic perspective on the overall impact of the programme and the transition to the children's centre with key conclusions and recommendations. Finally, section eight presents the findings from the non-user analysis and discusses key recommendations arising from this analysis.

2.0 Background

2.1 Sure Start Crewe

Vision for the Programme-

"An area where families live in a safe, comfortable environment in which they feel involved, and have a sense of community. An area where parenting is valued and supported, where the difficulties and challenges of the task are acknowledged, where help is available in a non-stigmatising way. Where there are opportunities for play and learning and good times."
(Sure Start Families First Delivery Plan, December 2002)

The Sure Start Local Programme in Crewe commenced in 2002. It was built on existing local provisions and good practice, to develop a co-ordinated approach to reshaping services and ensuring the best outcomes for children and families.

Sure Start Crewe has developed its programme in three 'cluster' areas. The catchment area containing the three clusters is located within the town of Crewe. The three cluster areas fall within four wards:

Area 1- Alexandra ward

Area 2- Maw Green ward

Area 3- Straddles two wards, St Barnabas and Grosvenor (see map Section 1.2)

Working in partnership has been an essential part of the Sure Start approach and the programme has been delivered by local partnerships, with strong parental and community involvement. All agencies (local authorities, NHS, voluntary sector and others) have been involved in the design and delivery of the programme. The programme has five key partners (with representation at board level)– Crewe and Nantwich Borough Council, Social Services, Education, Central Cheshire Primary

Care Trust, Mid Cheshire Hospital Trust and Home Start,. Crewe and Nantwich Play Association, the Pre-School Learning Alliance and NSPCC (voluntary organisation) – there are additional partnerships formed with other organisations.

The Public Service Agreement (PSA) targets set up by the government formed the basis for Sure Start Crewe to develop their local programme of services. A project plan was developed that outlined the overall aims and objectives of the programme for 2001-2004.

2.2 Structure and Management

Crewe and Nantwich Borough Council has the overall responsibility for the programme and serves as the accountable and lead body for Sure Start Crewe.

The Partnership Board is responsible for running the programme, making the decisions, monitoring progress and managing finances. Currently, there are 16 different members on this board representing the partners, parents and other agencies involved in the programme. There were four partnership sub-groups established at the start of the programme. These were:

- Parents , Carers and Community Involvement Sub-Group;
- Programme Development and Training Sub-Group;
- Capital Works Sub-Group;
- Finance, Management and Personnel Sub-Group.

Currently, there are three working sub-groups on the Sure Start Partnership Board.

The programme manager appointed by the Partnership Board is responsible for co-ordinating the activities of the programme, managing the Sure Start programme team, providing the link between the accountable body and the Board and the sub-groups.

2.3 Programme delivery

local programme has three discrete but connected strands of work contributing to the overall Sure Start objectives. They are:

- Family and Community (objective 4)
- Health and well being (objectives 1 and 2)
- Early years Education and Play (objectives 3)

The strand of work, 'strengthening family and community', is seen to underpin all other work of the programme. Its focus has been to ensure that parents and local community are actively engaged in Sure Start, families are supported and that the community itself benefits from the services and increased community capital.

The Sure Start Crewe 'Families First' Delivery Plan 2002 - 2004, was developed at the beginning of the programme and detailed how family support services would be delivered against the programme objectives. The plan incorporated a range of PSA and Sure Start Delivery Agreement (SDA) targets attached to a broader objective, several of which have relevance for the Drop-in services (see table below).

The Drop-in services are part of the family support services (family and community strand) but are closely linked to the other two strands, providing cross-cutting support to all four Sure Start objectives.

Table 1: Showing the relationship between the Sure Start Local Programme objectives and local PSA and SDA targets

Sure Start Programme Objective	PSA Target	SDA target
<p>Objective 1: Improving social and emotional development. In particular, by supporting early bonding between parents and their children, helping families to function through early identification, and support of children with emotional and behavioural difficulties.</p>	<p>20% reduction in the proportion of children aged 0-3 re-registered within 12 months on the child protection register.</p>	<ul style="list-style-type: none"> • Provide 'culturally sensitive' support for mothers with post-natal depression. • 100% of families contacted within two months of birth.
<p>Objective 2: Improving health by supporting parents in caring for their children to promote healthy development before and after birth.</p>	<p>10% reduction in mothers who smoke in pregnancy.</p>	<ul style="list-style-type: none"> • Parenting support and information available for all parents. • Guidance on breast feeding, hygiene and safety. • 10% reduction in emergency admissions to hospitals of 0-3s with gastro-enteritis, respiratory infection or severe injury.
<p>Objective 3: Improving children's ability to learn, by encouraging high-quality environments and childcare that promote early learning, provide stimulating and enjoyable play, improve language skills and ensure early identification and support for children with special needs.</p>	<p>5% reduction in the number of 0-3s with speech and language problems requiring intervention.</p>	<ul style="list-style-type: none"> • All children to have access to good quality play and learning opportunities. • Increased use of libraries by parents with young children.
<p>Objective 4: Strengthening families and communities, by involving families in building the communities' capacity to sustain the programme and thereby create pathways out of poverty.</p>	<p>12% reduction in the number of 0-3s living in households where no one is working.</p>	<ul style="list-style-type: none"> • 75% of families report improvement in quality of family support services. • Parent representation on Partnership Board. • Local targets to link with employment service. • Work closely with EYDCP to close gap.

Source: Sure Start Delivery Plan, 2002.

2.4 Drop-in Services

The Drop-ins are an integral part of the Sure Start Local Programme. The original project, 'Full Circle', was developed from an existing project provided by the NSPCC at the time in the St Barnabas/ Grosvenor area (cluster area 3), in the heart of the West End. The original core group of parents stemmed from a support group run at the NSPCC Rainbow House. This evolved into a multi-agency working group between NSPCC, Crewe and Nantwich Positive Parenting Partnership, The Wishing Well Project CNBC and CCPCT.

In 2002, Sure Start formed a formal partnership with NSPCC (who were active in the West End area) and agreed to extend and develop the service in all three Sure Start cluster areas. The partnership agreement³ established the NSPCC as having overall management responsibility of the three Drop-ins with the lead on developing a Drop-in service in each cluster area based on the Full Circle model.

There are currently three Drop-in projects in the Sure Start Local Programme. They are:

Full Circle

This is the longest established project and is also the largest of the three Drop-ins. Having outgrown Rainbow House, it now operates from the Leighton centre in the West End and offers a wide range of services to children and families. It is also the only Drop-in to provide on-site training and healthy lunch for its users. It runs every Friday from 9.30-1.45 pm.

The West End area has received several years of SRB funding and has benefited from many projects and community led initiatives.

³ This agreement was drawn up between Crewe and Nantwich Borough Council on behalf of the Sure Start and the NSPCC

Little Seedlings

This was developed in cluster area 2-Maw Green. This area suffers from the highest levels of multiple deprivation of all the Sure Start areas and yet has not really benefited as much from the regeneration activities in the West End.

The Drop-in is based at Coppenhall High School and is open every Tuesday for two hours. Approximately 30 parents/carers attend the session every week and it runs to its full capacity.

Tots 'n' Us

This is located in the cluster area 1, Alexandra ward. This area has very little in the way of local services for children and families and of the three cluster areas, is the most poorly provided for. The Drop-in started in St Andrews church hall and ran for one year, after which it was relocated to the Pebble Brook primary school. The service is open every Monday for two hours.

2.4.1 The Drop-ins' Objectives

The Drop-ins have no specific objectives other than the overarching objectives of the local Sure Start programme; as mentioned earlier, the Drop-in services provided cross cutting support to *all four* Sure Start objectives.

At the time of the original partnership agreement with the NSPCC, three broad outcomes were specified for the Drop-ins, they were:

- Improved access to specialist support for families in the Alexandra and Maw Green areas;
- Expansion of Drop-in support services through existing models of good practice;
- Increased support for vulnerable children and adults.

2.4.2 Partnership Working

A range of stakeholders and agencies have been involved in providing services at the Drop-ins. The key partners are:

- Crewe and Nantwich Borough council;
- NSPCC;
- Primary Care Trust;
- Central Cheshire Primary Care Trust;
- Mid Cheshire hospitals Trust
- Cheshire and Wirral Partnership Trust
- Wishing Well- Healthy living project;

Other agencies involved in the partnership are:

- Job Centre Plus;
- Crewe Library;
- Credit Union;
- South Cheshire College.

3.0 Methodology

The redeveloped brief for the focused evaluation for Sure Start Crewe specified three key elements for the research. These were:

- To conduct a focused evaluation on the Drop-ins; these services having been identified as both innovative and crucial to service delivery within the programme;
- To ensure parental involvement and participation in the evaluation process;
- To conduct a non-user analysis.

From these key elements a more detailed research design was structured, this is discussed in more detail below.

3.1 Aim and Objectives of the Evaluation

The overarching aim of the evaluation 'was to undertake an in-depth assessment of specific areas in the Sure Start Crewe Local Programme, identifying the services that have made a difference to people in Crewe and giving recommendations for a smooth transition to the Children's Centre.'

The evaluation objectives were:

- To assess the impact of services, specifically the drop ins;
- To examine the multi-agency partnership approach to drop ins;
- To explore, with Sure Start programme stakeholders, issues of user involvement and participation;
- To investigate the strategic position of Sure Start with respect to delivery of Drop-in services in the new children's centre;
- Undertake an analysis of non-users of services;
- Provide Community research training⁴ for Sure Start staff and parents.

⁴ Also known as peer research

3.2 Evaluation Approach and Design

The research framework was developed in two tranches:

1. An internal process evaluation of the Drop-in services;
2. An external impact of the Drop-ins on children, parents and families.

Within each tranche of the evaluation perspectives were sought from the parents, operational staff and strategic individuals.

The research was designed to be exploratory in nature, with a strong focus on participative approaches to incorporate parents in the research process. Qualitative research methods were felt to be the most appropriate for this approach; these included focus group work with parents, face-to-face interviews with a range of stakeholders. In addition, the project also incorporated a more quantitative method with a short questionnaire facilitated by parents themselves.

The evaluation ran from September 2005 to January 2006 and consisted of six overlapping phases. They were:

Phase 1 – Background and desk-based research of key documents. Initial meetings with Sure Start Crewe staff and manager to get an understanding of the Drop-in services.

Phase 2 – Research with parents at the three Drop-ins.

Phase 3 – Planning and undertaking participatory research with parents and delivering training on participatory research for Sure Start staff.

Phase 4 – Interviews with Sure Start Staff, partners and key strategic people.

Phase 5 – Non-user analysis.

Phase 6 – Analysis and report writing.

3.2.1 Phase 1 - Desk-based Research

Several key documents were examined to gain an understanding of the set up and delivery of the Drop-in services; this included the delivery plan, MORI Crewe Sure Start parents Survey (2005), service level agreements and minutes of board meetings and review meetings.

In addition, four discussion meetings were held with key programme staff to get an in-depth understanding of the different delivery methods in each of the three Drop-ins as well as the main problems and issues.

From this initial research, an outline of the key themes and issues was written to be explored both with the staff and parents. This outline formed the basis of developing the research tools. For each phase of the evaluation a topic guide was developed, this covered the issues identified earlier, questions/topics to be covered through either interview or focus group and provided a framework for subsequent analysis (see Appendix I for analysis framework).

3.2.2 Phase 2 - Research with Parents

Focus group discussions were conducted with parents at the three drop-ins. The discussions were held as mini groups and trios to ensure that parents felt relaxed and at ease to participate. Parents were informed in advance about the research and the Drop-in co-ordinators and Sure Start staff helped with the practical arrangements in setting the group up. The parents were identified randomly from the Drop-in on the day, short profiles of these parents can be seen in Table 2 below.

A topic guide (Appendix II) was used to conduct the discussion, but the approach was to be flexible to allow the parents to lead the discussion and cover areas they felt were important. The discussion covered issues, such as views on the service, how the Drop-ins have helped and the difference the Drop-ins have made, if any, views on staff and management and on

the forthcoming transition to the children's centre. The discussions were tape recorded with prior consent.

Table 2: Showing the Number of Parents attending at each Drop-in

Drop-in	Number of Parents
Full Circle	9
Little Seedlings	6
Tots n Us	6
Total number of parents	21
Gender Split	19 mothers and 2 fathers
Average family size	2-3 children per family

The parents represented a good cross section of those who had been long term users and those who had been relatively new to the service (Table 3).

Table 3: Showing the distribution of attendance across all three Drop-ins

Type of user	Length of time using the service	Total numbers of parents
Long term users	2 years and more	9
Medium term	1-2 years	6
New users	4 weeks-12 months	6

3.2.3 Phase 3 - Parental Involvement and Participation

There were two different activities in the evaluation to develop meaningful participatory practice in the programme and involve parents in the evaluation process.

a) Training for Sure Start staff and partners

A training workshop was held for staff and partners on 'Participatory approaches to promote the participation of parents in service planning and

decision making.’ The aim of the workshop was to provide information to staff on involving parents through participatory research and evaluation (see Appendix III). The workshop was designed to be interactive, combining background information and practical exercises examining the issues of participation, peer research and participatory evaluation.

b) User involvement in the evaluation

The process of engaging parents in the evaluation was facilitated and co-ordinated by the Community Involvement Co-ordinator supported by the external evaluator. The co-ordinator took responsibility for informing parents about the evaluation, through several informal chats and invited them to take part in the evaluation. Six parents, representing the three Drop-ins, volunteered to get involved and formed a parent’s evaluation group. These parents were then given training by the evaluator on how to carry out the evaluation. Through this training the parents were supported in developing a suitable research method and subsequent action plan and timetable for the evaluation.

The parents felt that a questionnaire would allow them to canvass the views of other parents quickly and easily; the evaluation group were then involved in the design of the questionnaire. Each parent made a list of questions they felt were relevant for the evaluation. These were then collated and a questionnaire devised by the evaluator (see Appendix IV).

Once the questionnaire had been agreed, the parent evaluators were supported through an interview stage, where each parent evaluator interviewed six other parents using the structured questionnaire. A total of 18 interviews were carried out in this peer led process. The analysis and findings of the questionnaires can be seen section six of the report.

3.2.4 Phase 4 - Research with Staff, Partners and Strategic Officials

From the range of agencies, staff and strategic partners, 23 individuals were sampled to ensure an accurate representation of all parties. This included nineteen interviews with health staff, frontline workers, voluntary agencies, Sure Start staff and other operational staff from additional statutory partners and four strategic interviews with representatives from Cheshire County Council, Crewe and Nantwich Borough Council and the Partnership Board.

All interviews were tape recorded and analysed against an analysis framework.

3.2.5 Phase 5 – Non-user Analysis

A main component of the research work for Sure Start Crewe was an analysis of non-users of the service; looking at both their profile (socio-demographic details) and reasons for not accessing services. To answer these questions from an adequate sample (10% of recorded non-users), telephone interviews were conducted. 'Non-users' were identified from the monitoring information recorded by the Sure Start Crewe local programme team. This included families that had registered with Sure Start through their health visitor and were either recorded as never having accessed services or having stopped accessing services at a particular date.

a) Sampling

Originally, 518 families were recorded as non-users. Therefore, to ensure a 10% sample, approximately 50 families were contacted. Controlling for key data items, necessary for conducting telephone interviews, resulted in the sample population being reduced to 442 families. The key data items included:

- Data must include a phone number;
- Data must include a postcode;
- Family must be represented by a primary member;

- Families must be recorded as not using Sure Start services for at least three months, ie before July 2005.

At the same time as this analysis, the Sure Start programme team had begun an exercise of calling families who had not accessed services in recent months and reminding them of Sure Start services. Therefore, it was necessary to remove a further 13 families who had recently been contacted to prevent them from being contacted a second time. This reduced the sample population to 429 families.

In order to obtain the 10% sample required, and taking into account a 25% positive response rate expected from telephone interviews, it was determined that 200 families should be sampled. Systematic sampling of every other record of the sample population of 429 generated a final sample list of 217 families.

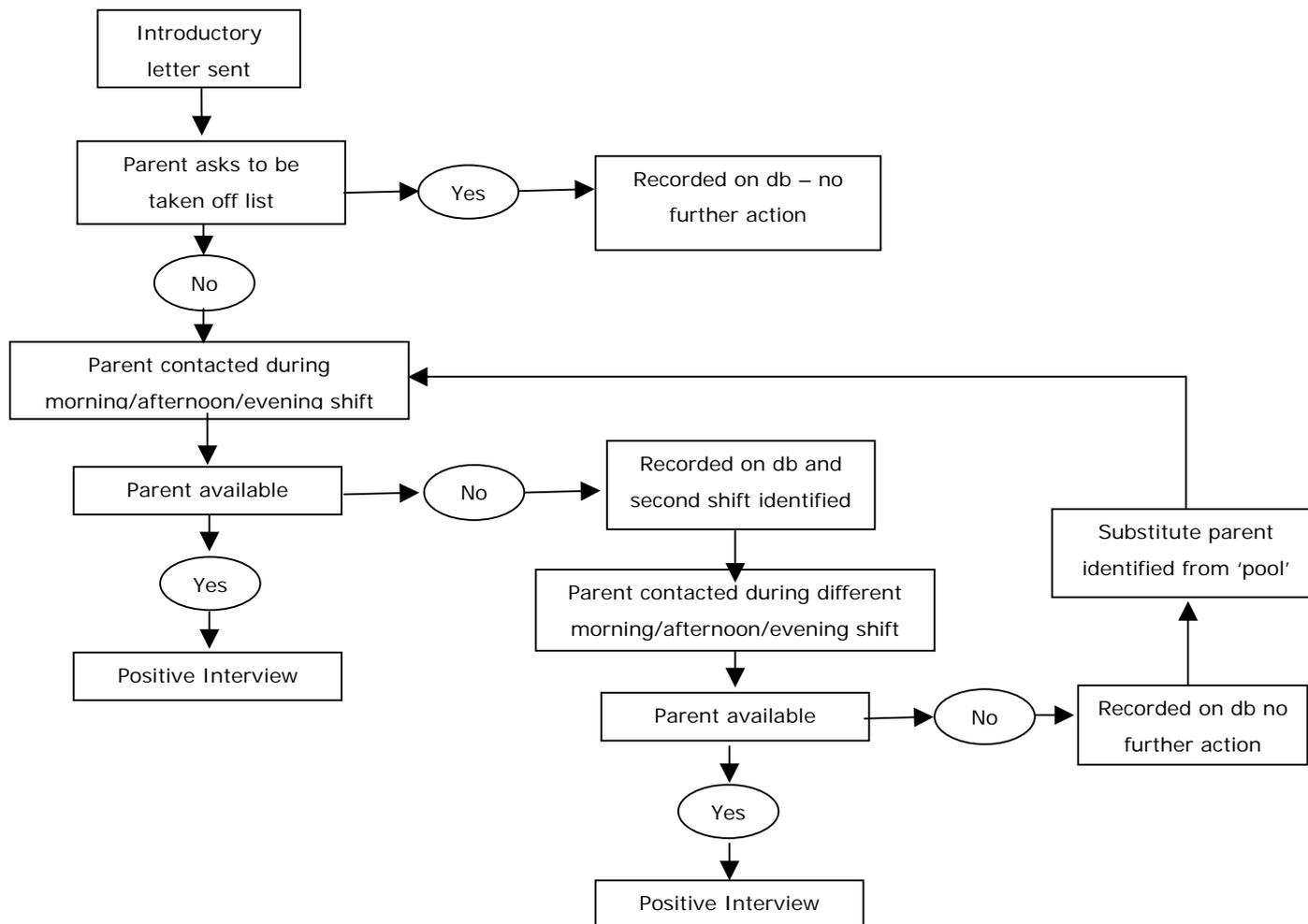
b) Research Method

Each of the 217 primary contacts of the sample families were informed about the research via a letter. The letter informed families that they would be contacted for an interview within the following two weeks. Families were informed that if they did not want to be interviewed they should contact the research team. Four families contacted the team to request that they be removed from the interview list.

In the following three weeks, telephone interviews were carried out at varying points of the day, in order to ensure data was captured from primary contacts at home. Call time was split into three main 'shifts': morning, afternoon and early evening (up to seven o'clock). Each contact was given two 'chances' for interview; figure 1 below shows the process followed.

In total, 44 positive interviews were obtained with the primary contacts of families in the Sure Start Crewe area.

Figure 1: Flow chart showing the process for selecting positive interviews



Telephone interviews were used rather than questionnaires to gain the views of non-users, for the following reasons:

- Higher response rate;
- Less risk of missing data;
- Ability to probe and prompt if a respondent has difficulty answering a question, or if their answer requires elaboration;
- Ability to ask a wider range of questions;
- Ability to ensure that the most appropriate person was interviewed;
- Ability to reach a wide number of families within a short timescale.

It is important to recognise the difficulty in reaching all non-users of Sure Start services in Crewe. Many non users will be families that have registered with Sure Start through the Health Visitor or Midwifery services however there remains a tranche of families who are unregistered with Sure Start and/or excluded from mainstream services.

Non-users were asked primarily about their awareness of services at Sure Start Crewe; why they do not use, or stopped using, Sure Start services; how satisfied they were with the services that they used to use (if appropriate); how Sure Start Crewe could improve services; other services that they use in the community; and family demographics, such as age, number of children, qualifications etc.

4.0 Strategic and Service Provider Perspectives

This section of the report presents the evaluation findings from 23 interviews, including the perspective of operational staff and partners involved in the three Drop-ins and the strategic overview. The findings outlined in this section cover the following areas:

- Service delivery and practice issues;
- Partnership working: decision-making, operational issues, team working, management support and strengths and weaknesses of this approach;
- Impact of the Drop-ins on children and families;
- User involvement and participation of parents in the programme;
- Monitoring and evaluation: reviewing current practice;
- Transition to children's centre;
- Strategic overview (findings from the four strategic interviews).

4.1 Service Delivery

This section looks at issues around setting up of the Drop-in services, uptake of services and delivery of services across the three Drop-ins.

The evaluation found that there were early difficulties in the implementation of the Drop-in programme. However, this did not affect the commitment of the staff and partners involved. Most senior staff and partners interviewed acknowledged that such delays and operational problems are inevitable in the setting up of a long-term, multi-agency programme like Sure Start and worked together to overcome the barriers.

The Drop-ins were regarded as an integral part of the family support service. The overall view was that they are being well used, the numbers have increased and that these are also being sustained. However, the majority of those interviewed were not sure about the targets set for numbers attending the Drop-ins. While staff held some monitoring data and anecdotal evidence that the Drop-ins were attended to their full

capacity, a lack of clarity about targets means there can be little understanding if these numbers are reaching the original targets set, and if or how the Drop-ins are moving to achieve their targets.

Sure Start Crewe developed a 'Hard to Reach' strategy in 2004 as a result of DfES Risk Assessment process carried out across the programme. The development of the strategy was a key objective in the Risk Assessment process, in order to ensure that the programme had a co-ordinated approach to engage with isolated members/groups in the community.

With regards to their role in the 'Hard to Reach' strategy, the Drop-ins have had varying degrees of success in implementing actions from the strategy. For example, Full Circle has been more successful in engaging families from a range of different backgrounds including fathers and parents from ethnic minority communities. One interviewee stated the following as a possible explanation for this:

"I think, possibly, because Full Circle has been a very long standing group and is very well established and dads have always been part of. The sessions are longer and perhaps because there are more dads in this catchments that don't work, which means they can attend." (partner)

Despite the success at Full Circle, it was acknowledged that more work needs to be done to engage families from newly arrived communities, such as the Polish community, and encourage more dads to attend the group. Steps were also being taken to address the issue in the two other Drop-ins. A number of initiatives were being taken in this respect, eg a group has been set up called Men Matters. A lot of promotion is being undertaken in the area to target dads, and events are being organised, such as football games etc to engage more dads. In addition, staff are considering more proactive ways to reach out to parents through parents meetings at schools and sending newsletters via schools.

The evaluation also noted that there were different levels of service provided at the three Drop-ins. Full Circle provides more services as compared to the two other Drop-ins. This is partly because it has been established for a long time and has also benefited from regeneration funds in the area, thus has more to offer to parents. The other two Drop-ins are also restricted due to the size of the venue and opening times. Some respondents felt that the Drop-ins should have been better planned and more resources should have gone to the other Drop-ins to develop it to the same level as Full Circle. Evidence from the parents' interviews and questionnaires also highlights the perception of an imbalance in resources and how this may be perceived as discrimination or bias towards any one Drop-in. Care, therefore, needs to be taken to ensure communication and transparency around funding between the three Drop-in sites.

There are regular review meetings held to review and plan activities with all relevant partners, but these are attended mainly by the key agencies. Few, if any, of the wider partners attend these meetings and there is no practice of having meetings involving all partners to look at how they are working together and assess the overall impact of their services. There were no mechanisms to review services with other partners, such as Credit Union, Job Centre Plus.

The evaluators acknowledge the difficulty in attempting to organise large partnership meetings with a range of different agencies; however, in order to ensure strong partnership working this difficulty has to balance with the need for ongoing communication. It is, therefore, important to ensure other mechanisms of communication between partners, including some avenues for all partners to meet periodically to discuss issues related to the Drop-ins.

4.2 Operational Issues

Through the 23 interviews, the evaluation identified certain issues related to operational practice in the Drop-ins. It was noted that many of the interviewees were not fully aware of the policies and procedures in the Drop-ins. For example, most partners and staff did not know about policies for handling complaints made by users. A few of those interviewed mentioned leaflets in the induction pack for parents, but the majority were not aware of the complaints policy. One person mentioned a folder available at the Drop-ins for parents to record any suggestions /complaints, but the others were not familiar with this.

There were also issues related to communicating information to parents and carers attending the Drop-ins. Some staff acknowledged that more needs to be done to improve this aspect as they felt most users were not aware of the Drop-in policies.

“The policies are there. At Full Circle there is a notice board where the policies were pinned up and the same at Seedlings, and at Tots we did have a little notice board with the policies pinned up. But they weren’t displayed in such a way that they were actively noticeable and encourage you to read them. They almost got lost in everything else that was going on.” (Staff)

4.3 Partnership Working

This section examines how the different partners and agencies worked in delivering the objectives of the Sure Start Local Programme, views of staff on what constitutes successful partnership working and lessons learnt from the process.

Partnerships and multi-agency working have played a key role in directing and supporting the Drop-in programme. A wide range of partners and agencies have been involved in the delivery of services at the Drop-ins. These include health professionals, such as midwives, health visitors,

speech and language therapist and those working in health promotion, agencies like NSPCC (lead partner), Wishing Well, Credit Union, Job Centre Plus, Cheshire library, Home Start, Crewe and Nantwich Play Association and others. The Drop-ins also have core staff employed by Sure Start like the Community Involvement Co-ordinator, family mentors, play workers etc. There is considerable diversity in terms of their work agreements, contracts and line management structures.

The key issue that emerged through interview was the lack of a strategic framework providing structure and focus for the Drop-in services.

The evaluation found that there was no clear plan stating overall intent and purpose for the Drop-ins. There were no clear aims and specific objectives for the Drop-ins, other than in relation to the overarching objectives of the Sure Start Local Programme. The Service Level Agreement (SLA) covers the working arrangements between Sure Start and NSPCC, but does not provide clear guidance and objectives for all the other agencies involved.

The absence of specific objectives and a document of purpose has left it open for interpretation by the partners and agencies involved. Those interviewed were not aware of any specific objectives for the Drop-ins and were working to their individual organisational objectives.

“I think the aims for the Drop-ins are not specifically defined as such. I don’t think any of the team was clear about what the defined objectives of the Drop-ins were. When I came on board the Drop-ins were evolving and have carried on evolving. We could look at our PSA targets if you like and look at what we are implementing into the programme through Health Services or Early Year Services and those targets are being covered, but from a specific point of view of the Drop-ins, if you like, there weren’t objectives set” (Staff)

Another issue was the lack of any clear indicators for monitoring and evaluating the impact/outcomes for the Drop-in services. The majority of those interviewed were not aware of any indicators set for measuring outputs and outcomes for the Drop-ins. Some mentioned targets set for measuring outputs, but it is evident from the evaluation that there were no specific indicators set to measure outcomes for the services provided.

The absence of clear outcome indicators has made it difficult to assess the overall impact of the Drop-ins against specific targets. It is also difficult for the partners to know what they are working towards, and evaluate the outcomes of their combined efforts on children and families.

“There were never any indicators or targets written down and set. In the original consultation, a document was written that said that Full Circle was a model of good practice and suggested that that it be extended to the other cluster areas and that's how it developed. Each individual service provider had their own targets.”(Staff)

The evaluation found that there were no partnerships or formal agreements drawn for the different agencies involved in the Drop-ins, other than the SLA between the NSPCC and Sure Start. Service level agreements have only been used where there has been a contractual element of delivering a service or staff being employed. However, there are no apparent other formal mechanisms for partnership working apart from this. For example, agencies, such as Wishing Well or the Credit Union, have no written agreements with the programme. During interview, some of these partners stated that they did not see the need for such formal contracts as they had not experienced any problems with the partnership. They generally reported positive working arrangements and that they had been operating on good will and faith.

While the positive aspects of good partnership working, with high levels of trust and few formal mechanisms, must be recognised here, it is also good practice to ensure some element of formal working agreements. Much of partnership working is built through individual commitment and personality and a formal agreement ensures clarity about the purpose, aims and objectives of the service, alignment of outcomes and, (if and when individuals move on) a continuity of the quality partnership working.

All partners interviewed reported a high level of commitment to the ethos of working in partnership and to Sure Start principles and values. They were extremely positive about the benefits of partnership working and stated a number of advantages of working together to maximise the outcomes for children and families.

Many positive comments were made during interview, regarding working in partnership, recognising the opportunities it has provided to share expertise and knowledge, combine skills and resources, which in turn has strengthened capacity to provide quality services to children and families.

“I think this partnership has worked because people have worked together, supported each other. We have a different mix of skills and abilities from different disciplines, we've got crèche workers, play workers, right through to the community involvement co-ordinator. So there's a breadth of skills and experience that people bring along to the everyday sort of running the groups.”

(Partner)

Interviewees reported that it has enabled early detection of problems and the ability to respond more quickly because of the different professionals working closely together. It was identified that partnership working has facilitated more effective working with families, which has resulted in better outcomes for the providers and the users of the services. Examples were also given of the way in which the involvement of staff from different

disciplines has led to identifying needs that would not have been recognised.

Of the staff interviewed several commented that they had benefited from working in a multi-disciplinary team and valued the benefits gained from other member's experience, skills and abilities.

However, it was also recognised that partnership working is challenging and respondents talked about the difficulties and problems that had arisen while working with partners in the delivery of the programme.

Several problems with partnership working were also identified through interview. Poor communication between partners was identified as the biggest issue. There were examples given where the problems had escalated because it was not discussed on time or because the lines of communication were not clear.

***"I think communication is a big issue. It is sometimes difficult to understand where everybody's kind of coming from, people may be coming with different agendas. But I think there's always, always ways things can be done differently and you learn as you're going along. I think communications is probably one of the biggest issues."* (Staff)**

Also identified was a lack of a common shared vision and agreed outcomes, this has meant that people were felt to be working on their own agendas. Different partners had different approaches, attitudes and ways of working, which sometimes created problems. The following is a quote made by a partner agency:

"Maybe it's about not having a shared understanding, because like when I first came into the programme I thought it would be about action not about creating structure. I thought that it would be about partners working together rather than Sure Start"

establishing itself and then saying, "this is what we've got, do you want to come and contribute". This is my perception, that their attitude was that this is what we have got, what can you give us rather than what can we share."

There was some confusion about roles and responsibilities. For example, many respondents were not sure who was responsible for evaluating the Drop-ins. Working cultures and different working practices had led to tensions and misunderstandings.

Confusion had also occurred as a result of matrix management, where reporting to different managers for operational issues and line management was identified as a problem. This was seen as a problem, because it caused delays in making decisions that affected the services provided at the Drop-ins. This also meant that issues to do with the Drop-ins were unable to be resolved immediately. Several staff interviewed stated that in such cases the team working was good, but the delays in decision making caused by different line management structures created difficult situations. In some instances, this also had an impact on the service delivery.

"You can be pulled in different directions. If your line manager says, 'Yes, I want to insist you go on this course', then both midwives could be absent and could miss two Drop-ins, and there is no midwifery. This could also be the case with health visitors or speech and language therapists. These decisions affect the service at the Drop-ins. If one partner objects to it they can't do very much because the line manager is someone different." (Staff)

The following were noted as particular areas of good practice:

- Multi-disciplinary meetings to share information and discuss concerns about families. This forum allows for early intervention by identifying those at risk. Because certain professionals, like midwives and health

visitors, have built close relations with clients they can easily pick up any issues which can be raised at these meetings.

- Delivering training on policies and procedures for all partners and agencies on key issues, like child protection, health and safety, risk assessment. However, not all agencies were aware of the training.
- Family meetings – this is a multi agency forum where different professionals discuss any concerns/issues about parents and children attending. This allows them to share concerns and identify children or parents at risk. This includes discussing matters with crèche workers and play workers to see if they have picked something up through working with the child.

4.4 Impact of Drop-in Services

All 23 interviews highlighted the range of impacts that were felt to have resulted from the Drop-in services.

Primarily, it was felt that the Drop-ins have created opportunities for parents for training and employment. There were numerous examples given of parents who had benefited from training through the Drop-ins and had moved into paid employment in the public sector. Some of the crèche workers working at the Drop-ins have been users of the service.

“I have seen a few of the parents move on to jobs, which I think is absolutely fantastic. I’ve also seen some families actually become independent of services and not need the services and manage without us, which I think is absolutely brilliant and I think that is what should happen. The families know where we are. They know the service is there every week , they know the different agencies that are there so if they’ve not been for a few months, but a crisis comes along, they know there will be somebody there to support them. I think that is excellent.” (Partner)

Another impact stated at interview was that the Drop-ins have helped build up parenting skills resulting in parents changing their parenting styles and many becoming more confident in their parenting. It was felt that the Drop-ins have given parents a sense of security because they know that they are not alone and that there is an element of support in the community for them. Interviewees reported that many parents have made friends through the Drop-ins and created their own support systems outside the Drop-ins.

Another related benefit was seen to be that positive early year experiences were more likely to encourage parents to register their child into nurseries.

“I think what I would say with regards to play is that parents are more likely to send their children to nursery and they want a nursery, so rather than not registering at nursery it is very much encouraging parents to register their child with a nursery to get the children into school, nursery settled, so that they have a really good kind of early years experience from that very young age.

(Staff)

The Drop-ins were seen to provide help and support for mothers suffering from depression or other emotional problems. It was reported that a high proportion of parents attending the service suffered from some kind of depression, whether it be short term or long term. The Drop-ins are seen as a way of motivating mothers to leave the home environment and seek help and support in a safe and friendly environment.

A majority of those interviewed also identified direct benefits for the children; attending the Drop-in was felt to encourage social interaction, giving opportunities for children to play with each other and try different activities, such as crafts and playtime.

In conjunction with positive play experiences for children, respondents also identified that sitting alongside their children provided opportunities and encouraged parents to look at aspects of child development in an informal setting.

Several respondents also identified that parents have increased access to health services, overcoming many of the barriers to mainstream service access.

“ Parents are accessing health services, early years services and enjoying it and taking part in the children’s lives in that way; being able to approach members of the team, they don’t feel that kind of barrier between the professional and the parent that they would normally do in the clinic. ” (Partner)

Other health benefits were also identified by respondents and included: parents taking children for immunisations; accessing services, such as speech and language therapy; reduced ‘do not attend’ (DNA) rates; parents giving up smoking as a result of smoking cessation sessions.

Interviewees felt that parents had become more empowered, more able to say what they want and need, for example parents participated strongly in the consultation exercise undertaken for the new medical centre

Conversely, two interviewees expressed concern that certain parents using the Drop-ins may become dependant on services rather than using them as a stepping stone to independence. The evaluation was unable to determine if this was actually the case and no other interviews or focus group work highlighted this as a risk.

4.5 Advantages of the Drop-in Model

The overall view from all 23 respondents was that the Drop-ins are an excellent way to take services to the families in the heart of the

community. The professionals stated a number of advantages of the Drop-ins as a model of service delivery. They are:

- Successful model of delivering family support services as the Drop-ins have engaged with different groups within the communities.

"It is a successful model because of the number of families that are coming through the door. They are the families that we want to engage with. We get a lot of hard to reach groups - the teenage parents, quite a few dads, families from different ethnic backgrounds, the families that have historically been the ones that won't access services."

- Allows for more preventative work, particularly with early intervention and support, preventing the situation developing into a crisis.
- Services are accessible because the Drop-ins offer a non-threatening, informal and relaxed environment. This approach has made the mainstream services accessible to hard to reach groups.

"I think so, yes I think it has been a real success and the informality of the Drop-ins has been such a success, but again that's very qualitative, very hard to measure; it has been a pleasure to see parents approaching other professionals, members of the team and just having a chat. " (Partner)

- The model empowers parents, builds the capacity of families and strengthens the community.

"It gives parents a voice, it can change family's lives, it gives the community a voice as well, and can change the structure of the services that are to follow."(Staff)

- It offers a seamless service; making it easy to seek specialist advice and get referrals because for the multi-disciplinary approach;
- Breaks down barriers between parents and professionals, encourages and builds confidence of parents to access mainstream services.

“I think it breaks down the barriers between how parents perceive professional organisations. Parents might find these quite daunting, like the speech and language therapist, midwife and health visitor. Generally, people who have always been in the clinic situation don’t get to know them. I think the Drop-ins do break down those barriers, so parents feel more able to approach these professionals.”(Partner)

“One comment from parents was that, ‘I really like Sure Start because they are not a bit professional’, and that was great, we realised what they were trying to say then; what they were trying to say is that we don’t have that professional air where they feel they can’t communicate, can’t talk.”(Staff)

- The model brings the community together, encouraging professionals and children and families to work together and providing opportunities to work in partnership.

“I think bringing a community together, also bringing professionals and children and families together, that’s been a real positive, and partnership working is a very healthy environment to work in, we have learnt so much from each other.”

4.6 Monitoring and evaluation

Through interview and desk-based research, it appears that there is no specific evaluation strategy for the Drop-in service. As discussed in the earlier section, there are no specific indicators set for monitoring the

outcomes for children and families using the Drop-ins. As a result, each agency/partner has worked towards their own organisational targets. It has been difficult to assess the overall impact of the combined efforts of the different agencies because of this reason. Most interviewees felt that it would have been beneficial to have these discussions at the outset, so that all partners involved had a common framework for monitoring the Drop-in services.

***"I think targets are always helpful, because it gives you that guidance as to what your purpose is and what you are aiming for instead of potentially turning up to the Drop-in, seeing families, ensuring everyone is having a nice time, but what is the purpose, I think there has to be that underlying aspect."* (Staff)**

There was some reference to outcomes in the partnership agreement between Sure Start and NSPCC. The outcomes for the Drop-ins in the partnership agreement state:

- Improved access to specialist support for families in the Alexandra and Maw Green areas;
- Expansion of Drop-in support services through existing models of good practice;
- Increased support for vulnerable children and adults.

These are very broad outcomes without any specific indicators, which makes it difficult to measure and assess them. In addition, these were not communicated to all partners involved in the Drop-ins.

There were some interviewees who expressed concerns that there was no means to ascertain the progression/development of families using the services. There was a concern shared by some that the Drop-ins could create a culture of dependency for some parents. They would have liked this aspect to be monitored.

4.6.1 Existing/Current Monitoring and Evaluation Practice

The evaluation found that there was a lack of systematic and co-ordinated approach to evaluating the Drop-ins. Due to the absence of a common evaluation framework, each agency is undertaking their own individual monitoring of their respective service.

There were certain monitoring and evaluation (M&E) aspects included in the SLA. For example, the SLA had outlined targets for tracking parents. It stated that a phone call would be made to any parent, who hadn't been for three weeks, to be able track parents who had stopped attending. However, it appears that this was not being done consistently and systematically across the Drop-ins. The feedback suggests that this was undertaken initially, but the information was not been recorded or used for evaluating the service.

Of the 19 staff interviewed, three felt that this wasn't an issue since attendance was never a problem at the Drop-ins. They also stated that it wasn't always necessary to undertake formal evaluations as they knew that the Drop-ins were meeting the needs of the parents.

“But I think in our heads we know that these families keep coming back so we are obviously meeting a need; I think that's why we haven't generally evaluated the Drop-ins. But we would evaluate a particular service at the time that we are bringing it in.”

There was a lot of evidence of seeking feedback informally from the parents at the three Drop-ins. But there was nothing to suggest that this was done regularly and appeared to be done on a very adhoc basis.

A common feature that emerged was that many of those interviewed considered user feedback to be evaluation. When asked how services were evaluated, the response was that they have asked users what they like or

dislike about activities etc. There was no evidence of any training provided to Drop-in staff and partners on monitoring and evaluation.

The current practice in the Drop-ins consists of seeking feedback using questionnaires or feedback sheets for specific activities, informal chats about the services; staff also collate anecdotal evidence on clients. All of this information is used to plan new activities.

“With regards to the Drop-ins, it is much more informal. I think the only way it is done is through feedback sheets and feedback is only done if it is on a specific activity that is taking place. Then we have review meetings, but they are not always well attended by parents...but there is nothing in a formal sense.”(Staff)

Three of the staff interviewed (both Sure Start and partners) suggested that parents were suffering from consultation fatigue and were ‘fed up’ of giving feedback. This could be more to do with the standard methods that are being used to secure feedback rather than the principle. There is room for improvement here and staff should consider other, more participative and creative methods for consulting with users.

Most of those interviewed were unclear about whose responsibility it was for monitoring and evaluating the service. There was an assumption made by some, that Sure Start would undertake monitoring and evaluation for the Drop-ins, others felt it was the responsibility of the NSPCC as lead partner in the Drop-ins. The general consensus was that it would have helped to have one designated person for the job and this should have been clarified to all parties involved.

“Ideally, it would be wonderful to have a person that was completely responsible for doing the evaluation and the monitoring. I think, because everybody is just so busy, it tends to be you focus on the service delivery rather than the evaluation.

And even though we do it, informally, and we check out with parents for the three monthly reviews it's not something that's done formally. But, ideally, it would be wonderful if we'd got the resources to have someone.”(Staff)

4.7 User Involvement and Participation

Parental involvement has been a vital component of the Sure Start local programme. Most of those interviewed recognised that parental participation was an essential element of the programme. However, there was a majority of individuals interviewed who did not have a full understanding of Sure Start's vision and commitment to parental participation; this included both key agencies, wider partners and some Sure Start staff.

Furthermore, the evaluation noted that there were different perceptions and understanding amongst those interviewed of what constitutes user involvement and participation. A range of different interpretations of participation and involvement were evident throughout the interviews. For example, some defined user involvement as simply getting feedback from users on the services, others described it as having regular meetings with parents, while others felt it was about the parents being involved in the decision making of the services.

The varying working cultures and different approaches to participation between organisations means that people may hold diverse understandings of participation. Within a multi-agency model these differences become more apparent as individuals from those different cultures are drawn more closely together; therefore this disparity of understanding of staff and partners at the Drop-ins, about what is meant by participation, is not surprising. However there was little evidence to suggest that this dimension of work was discussed with partners and team members to ensure that all involved shared a common understanding and

shared vision of the issues. Participation was reported during interviews, primarily with partner agencies, as being part of the Sure Start agenda rather than as a common objective.

The evaluation uncovered varying degrees of satisfaction in the extent to which progress had been made in enabling parents and carers to have a voice in the Drop-ins and within the programme more widely.

Some of the staff and partners interviewed felt that the Drop-ins were doing a good job consulting with parents and getting their views about the activities provided. There were several others who stated that the process of seeking views needs to be taken further and more needs to be done to get more parents involved. They gave examples of how some parents were being involved in the Drop-ins. For example, parents were assisting in setting up the play area, doing various activities with children, helping with refreshments and planning outings. However, there were some interviewees who acknowledged it was important to get parents involved through activities, but didn't necessarily feel that such activities actually give parents any role in decision making. They stated that more needs to be done to ensure that parents are engaged and involved in the planning and decision making processes, such as in the review meetings and on the parents/carer sub-group.

4.7.1 Opportunities for Involvement

A number of different structures had been created by Sure Start at the outset to facilitate parental participation and involvement. These are:

Representation on the Partnership Board

There was a mixed response to how effective parent's participation had been on the board. Some felt this was working well, while others viewed parent's participation on the board meeting as being tokenistic. There were also concerns that the number of parent representatives had fallen.

“I would think that there is a feeling of tokenism, that the parents have to be there so it’s a tokenistic type of thing. I think that the small person in those board meetings can soon be swallowed up and be invisible. And I think that could happen to the parents. There are two parents that are very vocal and if it wasn’t for those two I think they would struggle. I do feel for them because it is a big meeting and there are some very influential people there and you have to be very confident to actually challenge what they’re saying. How we give them the opportunity to do that and feel safe, I don’t know.” (Partner)

A number of barriers were identified to parental participation in the Partnership Board. These are detailed in Table 4 and split into three main types of barrier, cultural, practical and developmental.

Table 4: detailing the barriers identified to parental participation on the Partnership Board.

Cultural barriers	Practical barriers	Development barriers
<ul style="list-style-type: none"> • use of jargon. • working practice, complex decision making that is not simplified. • attitudes of certain professionals to participation. 	<ul style="list-style-type: none"> • timing of meetings. • childcare issues. • training for parents. 	<ul style="list-style-type: none"> • lack of confidence and experience.

Review meetings

These are meetings held regularly to review the Drop-ins and parents are encouraged to attend these. It was reported that parent’s attendance level fluctuated at these meetings and that recently these have not been well attended by parents. The problem was recognised and staff were considering ways to address the problem. One member said:

“The reviews appear to work well. I think we do struggle with parental engagement in these reviews, but they are asked and they don’t always turn up. My feeling is that they’re finding that although they turn up at the meetings, they’re not always listened to. They have given their opinions in the past and they haven’t been listened to. It’s how we engage those parents and give them some kind of ownership.” (Staff)

Parent/carer sub-group

The parent/carer sub-group was established at the outset of the programme to ensure parents and carers participation and representation on the Partnership Board. Parents/carers from the three cluster areas are encouraged to join this group to ensure it is representative of all three Drop-ins. It is expected to maintain a minimum core membership and have at least one Board member who attends meetings and acts as a link.

This group had started very well but the numbers of parents attending the group has fallen in recent months. The mechanism for involving parents is there, but it seems that staff are struggling to sustain the involvement of parents.

“It’s not very effective at the moment, but we need to be looking at how we develop that. For example, we should have had a parent and carer sub-group last Wednesday afternoon and only one parent was going to be there so I cancelled that.” (Partner)

Some were of the view that parental involvement is not an end in itself, but should be seen as a process that needs continual input.

Within the Drop-ins

According to those interviewed parents are encouraged to get involved in the Drop-in activities. The parents help with preparing snacks, arranging

the toys, some help with craft activities, help with mail-outs and organising family trips etc.

4.8 Transition to a Children's Centre

The final section presents the views and concerns of those interviewed on the transition to a children's centre. The majority of individuals interviewed were very positive and enthusiastic about this development. However, they had key concerns about the resources, delivery of services and other issues discussed below.

The following summarises the key concerns raised through the interviews:

- Limited crèche and early years facilities at the centre; some felt that there would be a reduction in Early Years provision because of a shortage of funds;
- Issues around funds available for partnership working, including feeling unsure about how partnerships will be formed, which agencies would be involved and what the terms and conditions would be;

"I'm very enthusiastic about it, but my worry is there's no money. I am not sure how services will be there and whether they will use the existing multi-agency contacts. What happens if certain agencies pull out. So there's going to have to be an awful lot of planning and working together to get these services right."

(Partner)

- That the environment of the children's centre might intimidate some users; parents may find it too formal and be put off;

"I fear that it might become too formalised, that it will take away that informal element that so many of the parents say is so important to them." (Partner)

- A concern was raised that decisions will no longer be taken based on evidenced local needs and aspirations;
- Resources that would have come to local area would spread to the county council areas;
- A worry that the children's centre will need to retain the approachable, relaxed, informal atmosphere that the Drop-ins have provided, to ensure parents continue to attend.

"We have to be very careful how it is structured so we don't turn people off, we have sustained a lot of families within the Drop-ins and that's great. I hope it will be a real, kind of lively centre"(Staff)

4.9 Strategic Overview

This section describes the strategic views on the impact of the Drop-ins on families, partnership working and the role of the Drop-ins in the new children's centre.

Impact of the Drop-ins

Sure Start Crewe is viewed as a successful community-based programme. The strength of the programme is that it has strong, local ownership and is based on the needs of families that have been identified through consultations at the outset.

Interviews clearly show that the Drop-ins are regarded as a valuable part of the family support services by the strategic partners. They are seen as being successful in engaging parents and hard to reach groups, such as teenage parents. However, it is felt that the Drop-ins have not fared well in engaging fathers and parents from ethnic minority communities.

The Drop-ins are seen as having a positive impact on children and families. The multi-disciplinary approach is also regarded as a positive aspect of the model. However, the interviewees said that the benefits

could not be substantiated because there was no evidence to support this. They said that their comments about the impact of the service are purely on the basis of strong anecdotal evidence from individual families about the benefits to them. It was felt that having some form of evaluation, or clear evidence, would have been useful to highlight the impact of the services on children and families.

“We have anecdotal evidence from parents about the benefits, but we are still actually looking for evidence. That is not to say that we are questioning that, but we are still looking for evidence to support that. I think having the evidence is going to be critical in persuading our mainstream partners that there is actually a case for change. ”(Staff)

The evaluation found that the interviewees were able to comment about the overall impact of the Drop-ins, but were not in a position to offer details about specific benefits of individual services. However, certain services were identified as being particularly effective. These include the speech and language therapy, midwifery services and toy library services.

The Borough Council were particularly impressed with the speech and language services and the benefits this has had on children and families. They mentioned the training that was being provided by the speech and language therapist to other professionals and staff, such as class room assistants, to raise their awareness of the issues and help them do basic work to help the children.

With regards to their impact on parents, the Drop-ins were seen as contributing towards building parent's confidence, self esteem and providing them with an opportunity to have a voice in decision making about local services.

“Drop-ins have been successful in building parent’s confidence. They have also helped detect speech and language issues as a result of an early intervention, but I don’t know specifically how much of an impact the Drop-ins have had on children and families.”(staff)

There were other benefits stated, such as parent’s involvement in the ‘step forward employment initiatives’ and progressing to paid employment.

However, it was not possible to gain any further insights about the impact of the Drop-ins from the strategic interviews or obtain any feedback on whether the Drop-ins have made any contributions towards achieving any of the original programme objectives. The main reason stated for this was lack of suitable evidence or evaluation linked to any aspect of the programme.

“I don’t know whether I am really in a position to say. There has been no evaluation of the service, but anecdotally I would say that the Drop-ins have been successful because parent’s attendance has been consistent so they are obviously getting something from them. I have seen personal evidence of an increase in confidence.”

Model of service delivery

All four strategic interviewees felt that the Drop-ins are an effective model of service delivery. The Drop-ins are seen as being successful in engaging with families and have allowed the services to be taken out to the community. The other main advantage of the model has been its multi-disciplinary approach, which has enabled families to access mainstream services locally.

“The model of service is good, but it is important to take services out to the communities rather than expect to travel distances

because they are not going to do that for a number of reasons. So it is important that services like this are in the communities. The multi-disciplinary aspect of the service is very important as the parent can access a lot of services under one roof."

Strategic perspective on multi-agency working

The strategic view was that multi-agency partnership has worked well after initial tensions and difficulties. There have been issues around different ways of working, exchange of information between partners. However, overall it was felt that the partnerships have worked well together to provide a seamless service to children and parents.

One of the officials interviewed said that there were lessons that could be learnt from the Crewe experience. The process has highlighted key issues that need to be addressed for effective partnership working. For example, the importance of team building for the entire staff team at the outset and the need to have clear protocols and defined routes for staff to raise any issues and concerns they may have. One member said:

"One of the difficulties was that people sometimes felt that they were pulled in two directions. They had direction from the local programme, but they also had professional supervision or clinical supervision from their organisation. Whilst matrix management is OK in theory it is lot more difficult in practice."

The strengths of partnership working were acknowledged during the interviews, but there were indications that there might be changes to this in the new structure. The officials said that it was difficult for them at this stage to state the exact nature of changes as the plans are still evolving. However, they said that it is very likely that there will be changes to the scope and diverse nature of partnerships due to a reduction in the resources available.

Parental involvement and participation

The evaluation found that there was a clear commitment to parental participation and a strong desire to see this continue and build on existing practice in the Drop-ins. The strategic view is that there would be no changes in the current practice of involving parents in the decision making processes. Instead, it is hoped that the children's centre will continue to build on the work done by the Drop-ins on parental involvement and that the cluster groups and parents sub-group are part of the new structure.

"I'd like to see parents taking different roles so that they can actually move to chairing sub-groups. I'd also like to see a wider range of parents involved."

It was felt that the Drop-ins have succeeded in engaging parents, in securing their involvement in the programme. This was attributed to the work done directly with parents to build their capacity to participate by staff at the Drop-ins.

With regards to parental involvement on the Board, the interviewees acknowledged that there had been difficulties to recruit parents onto the Board. However, this was not regarded as a problem specific to Crewe and has been an issue common with other local programmes.

The original targets stated that 50% of Board members should be parents and carers, but the requirement was subsequently dropped because the local programmes couldn't achieve these targets. It was felt that, despite the initial setback, the involvement of parents on the Board has increased steadily and there are new parents and volunteers on the Board.

Future developments

The evaluation found that there is a strong commitment, strategically, to provide family support services at the children's centre and incorporate Drop-ins as part of it, though the exact nature of this remains unclear. It

was difficult to obtain a clear picture of what the children's centre model would be like, and who the partners would be, since the plans were still being developed. However, the interviews clearly indicated a commitment by strategic bodies to continue the Drop-in model of service and provide a full range of services for children and families.

A part of the strategic thinking is to contract out the family support services, where possible, to the voluntary sector. However, one interviewee stated that it maybe difficult to make definite plans, at this stage, due to lack of clarity around budgets. Also highlighted at interview was the need to ensure sustainability and to investigate the possibility of the mainstreaming of services by the key partner agencies, such as Primary Care Trusts and other health trusts; this may involve a more geographically -based approach to delivering services.

“It is our aspiration to provide the Drop-in service in the new model and continue to work in partnerships. We would hope that the mainstream services would commit to those models of delivery.”

With regards to the overall management of the children's centre, the line management of individual centres will rest with Cheshire County Council. The centres will be arranged in local networks based upon the districts. It is envisaged that, ultimately, there will be seven children's centres in Crewe and Nantwich. The county council representative stated that they were aware of the tensions that might arise due to the centralised management of the children's centre. However, it is proposed that the county council will work with the Local Strategic Partnership (LSP) in terms of strategic development and prioritisation of resources within Crewe and Nantwich. The centres will also have a consultative committee, which will be involved in local monitoring and review of services and will be shaping the delivery plans of individual children's centre and prioritising how services are delivered at individual centres.

It was difficult to get a full strategic picture of the centres and the position of the Drop-ins through the interviews, as the children's centre structure was still evolving at the time of the evaluation. The strategic development is also linked to the development of the Children's Trust in the region. Thus, a number of changes are taking place in the region that will influence the final shape and structure of children and families services.

5.0 Parents Perspective of the Drop-ins

This section presents the evaluation findings on the impact of the Drop-ins from the parent's perspective. Key issues explored in the evaluation were:

- experience of using the Drop-ins and attending for the first time;
- reasons for using the service;
- views on existing provision;
- impact of the service;
- user involvement and participation;
- views on transition to the children's centre.

This section represents the views of a total of 21 parents from the three Drop-ins.

5.1 Experience of using Drop-ins:

This section describes the reasons parents gave for using the Drop-ins and their experiences of using the service.

5.1.1 Overall Experience

Comments from parents about the Drop-ins were overwhelmingly positive, demonstrating the importance of the Drop-ins to the parents. The parents described their experiences of using the service as being very rewarding and fulfilling. The personalised nature of the service and the relaxed and informal atmosphere were key factors that contributed to their feeling of satisfaction with the service and helped them feel confident in using the service.

"I look forward to coming here every week. There is plenty of advice and help here. You don't feel you are on your own. You meet people here and make friends and then carry those friendships outside."

For some parents, the Drop-ins have played a significant role in helping them deal with crisis situations, and have helped them get on their feet again. This is clearly illustrated by a comment made by one mother:

“The Drop-ins have been fantastic. I was so depressed, nearly on the verge of committing suicide because of my problems. But then I came here and the staff helped me. I am still on anti-depressants, but now I can cope better because of all the support I got.”

Parents stated the following reasons for using the Drop-ins:

- Provide opportunities for play and social interaction for children;
- Chance for children to learn new skills and thus get ready for nursery;
- Relief from loneliness and isolation for mothers, especially for those with new born babies;
- Supervised play provides some respite for mothers;
- Easy access to information, advice and support on all aspects related to mother and child care;
- Opportunity for mothers to spend quality time with their children;
- Emotional support and help for mothers, especially those suffering from post-natal depression;
- Social reasons – meeting other mums, making friends.

5.1.2 Access and Referral Routes

With regards to accessing the service, most parents did not have any issues about getting to the Drop-ins as they lived in the vicinity.

Parents attending the Drop-ins had accessed the service via a number of different routes. Health visitors were the most prevalent method of hearing about Sure Start; other referral routes that were mentioned were: word of mouth; friends/neighbours; through the baby café at the Ludford centre; from Sure Start leaflets and newsletters. One user had heard about the service from her ‘Avon lady’.

The parents found the timings and location convenient to use. The parents using the Tots n Us Drop-ins reported feeling happier since the venue had

shifted to the school setting. This was felt to be more convenient as they were able to attend the session after dropping their older kids at school.

When asked about their views on the play facilities for children, the mothers reported that they were generally satisfied with the existing provision. The Drop-ins were felt to have a good selection of toys and provided a range of activities for children. The play provision had been designed to meet the needs of children across the age range. Parents were appreciative of play workers who designed and created special activities with the children rather than just leaving them to play on their own. Parents also liked the structured activities provided for children, for example painting, jigsaws, beads etc.

However, a few parents at the three Drop-ins identified gaps in the provision of activities. While it was felt that there were ample toys for toddlers at the Drop-ins, some parents felt that there were insufficient toys and activities for the older children (aged 2-4 years). It must be noted that this was a view of a small number of parents and is not a reflection of what the vast majority of parents interviewed felt. In addition, parents reported that they would like to see activities and games that encourage more active play as this would encourage children to do more physical exercise. One mum said, ***"It is more sit down stuff here for the older children. They should have some wild play, like slides etc, so that children can run around a bit and burn some energy. This is very much sitting down and do activities."***

Some parents suggested games and activities like running, exercises, dancing for their children.

"Even if they played a CD/DVD, like the Boogie Beebies, for the kids they could dance along, it is a bit of exercise."

Some mothers felt that, at times, the staff put out too many toys at a time, which lead to some children being overwhelmed by the choice. A number of parents felt that in some instances the play was not supervised sufficiently.

5.1.3 Views on Staff

The evaluation findings clearly indicate that parents were very content and happy with the staff at the Drop-ins. Parents described staff as being very friendly, approachable, non-judgmental, caring and supportive. One parent said, ***“You can go up to them at any time and talk about anything; they always have time for you. Staff here are more like friends; the relationship is more based on friendship rather than being professionals. You talk about your family and personal things as well.”***

This approach taken by staff and professionals in providing support to parents has been one of the main reasons for parents continuing to use the service, and has contributed significantly to their high level of satisfaction with the service. Their personalised approach in dealing with parents, providing one-to-one support on an ongoing basis, taking interest in all aspects of their lives and being accessible at all times have all contributed to making the parents feel confident, giving them a sense of security that they are not on their own.

The following comments clearly illustrate the crucial role played by staff at the Drop-ins in supporting parents, making them feel welcome, and giving them a sense of belonging.

“They (staff) make you feel that you are not on your own. It is the worst thing in the world if you are a mother and you think you are failing and then you have someone who tells you that you are doing fine and is not judging you but supporting you.”

CONCLUSIONS

- Evidence from interviews indicates that parents appreciate the service they receive from the Drop-ins.
- Staff at the Drop-ins have played a valuable part in parent's level of confidence and satisfaction with the service.
- The parents have appreciated the play workers involving the children in structured and creative play.
- There is a need identified by parents to have more active play and more suitable toys for older children (ages 2-4 years) attending the Drop-ins.

5.2 Experience of New Users/ those attending first time

5.2.1 Overall Experience

The experiences of parents attending the Drop-ins for the first time depended to a large extent on whether they attended the session on their own or were accompanied by a friend.

Parents attending the Drop-ins on their own found it more difficult and daunting than those who had someone with them.

***"It was a bit strange when I first came here but because my best mate was with me I felt I wasn't on my own and I had someone else to talk to. And then she introduced me to a few people and it was OK."* (parent)**

The fear of walking into a big room on your own and not knowing anybody were the two main reasons stated by parents for feeling anxious. However, most parents said that their nervousness and anxiety were short lived, as the Drop-in staff would come up to them and talk to them, which helped put them at ease.

“The staff come up to you when you walk in. They all spoke to me the first day I came in, they introduced themselves, they got to know who I was –that was nice...” (parent)

Another user commented, ***“It was really nice when I first came with my little baby. I was tense because I wasn’t sure how I would manage with my little baby. But they (staff) came to me and took the baby from me so that I could relax and have a brew, which was really nice. It helped me relax and get to know some other mums.”(mother)***

The practice of staff introducing new users to others in the group emerged as key in helping new users relax and feel comfortable. The findings indicate that this wasn’t always happening systematically across the three Drop-ins. Some mothers said that they found it rather difficult to settle down initially because they had no one to talk to. This was mainly because they were left alone as the staff did not introduce them to any of the other users. Furthermore, they found it difficult to approach any of the other parents as they were all sitting in their own small groups.

Some parents were so daunted by their first experience that they contemplated not going back to the Drop-ins after their first visit. This feeling is further exacerbated for mums suffering from some form of depression.

“Say I was a new mum suffering from post-natal depression and came to the Drop-in for the first time. It would be awful to see people chatting and not knowing anyone. I wouldn’t come again. I have suffered from post-natal depression and know how difficult it is to talk to people. So it would be good for staff to introduce new mums to others in an informal way.”(mother)

The male users at Full Circle, who are a very small minority in the Drop-ins, understandably felt uneasy the first time they used the service. They said that they did feel out of place at first, but were made to feel welcome by the staff.

“I did feel odd at first. I felt quite out of place when I first walked in. Obviously I was the only male so I felt awkward when I first came here. But I don’t mind now. I was made to feel welcome and no women were staring at me. I feel fine now.”(father)

This evaluation has found that parents in all the three Drop-ins were not always clear about staff roles. In addition, they lacked clear information about the different services provided. This was also true for parents who had been long-term users of the Drop-ins; whilst they were familiar with certain staff members and services, they lacked sufficient information about the range of services available at the Drop-ins.

One mum said, ***“I have been coming here for a year and I know the faces, but I still don’t their names even after a year. Sometimes I see people around and am not sure what they are there for.”***

The parents identified a number of things that had helped them feel welcome. They are:

- Being welcomed by staff on arrival;
- Being introduced to members in the staff team;
- Receiving basic information about the group and services provided;
- Introduction to other mums;
- Explanation of their roles and the kind of support they could provide;
- Numbers of staff present;
- Induction pack;
- Introduction to other mothers/users.

5.2.2 The Induction pack

The comments about the pack were generally positive. The things parents found useful were:

- Information about courses;
- Baby café;
- Other places mums could go;
- List of contact numbers.

Some parents said that the packs contained too much information, which was overwhelming. They also added that some of the information was not relevant for them. They said that the pack should include more specific information about the Drop-ins, such as names of staff members, their roles, and list of different services provided and what parents can expect from the service. They also discussed the general Sure Start leaflet (available widely not just in the pack) and added that it didn't provide enough details of the Drop-ins, at the level that they were looking for. They felt that there was too much information to start with in the pack and that this should be more focused for first time parents, but also the general leaflet could have slightly more relevant information for the Drop-ins. This highlights the difficulty in getting the right balance between too much and too little information for parents and for ensuring that they get relevant information at the point of need.

The following are suggestions made by parents to improve the induction process

- Informal introduction to other parents. Staff could introduce new users to some old users, which should be done on an informal and casual basis. They should be another round of introductions three weeks later to the wider group to make sure that they have had a chance to make friends.
- Encourage more dads to use the Drop-ins and help them feel welcome.
- The induction pack should also include information about the staff team at the Drop-ins, names and what they do.

- Information provided in the induction pack should be regularly reviewed to make it effective and relevant as follows:
 - First pack should include information about the Drop-ins, details of services provided, list of staff and what they do, and timetable of activities;
 - Second pack to include details on local services in the neighbourhood and Crewe.
- Introduction days for new parents, which could be done on a monthly basis to ensure all new users get a chance to attend. This should include an introduction to the services and all the staff /agencies should introduce themselves to parents and explain the services they provide.
- Buddy system – get some parents to make friends and support new parents through the induction, perhaps ask some of the old users to spend time with new mums during the first few visits.
- Outlining roles and responsibilities of parents so that they are clear about their role and responsibilities and what they can expect from the Drop-ins.

CONCLUSIONS

- Drop-ins demonstrate good practice with regards to welcoming new users.
- The feedback from parents highlights the need to address the anxieties and concerns of new users, some of whom feel uncomfortable and left out.
- Several suggestions have been made by parents to improve the induction process. This includes reviewing the information provided in the induction pack.
- The findings have identified the need for the Drop-ins to provide clear information to all users about the staff – their roles and responsibilities, and details of services provided.

5.3 Impact of the Drop-ins

This section highlights the impact the Drop-ins have had on parents, children and families. The findings clearly identify four key areas where the Drop-ins have made a significant difference. These are:

- Increasing access for parents to mainstream services;
- Helping to improve the health and well-being of children;
- Improving the bonding between parents and their children;
- Contributing to the mothers' emotional and social well-being.

These are discussed in further detail below.

5.3.1 Increase in Access to Mainstream Services

The evaluation has found that there has been a significant increase in parents accessing mainstream services as a result of using the Drop-in services. The findings clearly indicate that the Drop-ins have played a key role in enabling and supporting parents to access mainstream services and that this model of service delivery has helped overcome the barriers that normally prevent families from accessing these services.

The following are the barriers identified by parents at the three Drop-ins that often prevent them from accessing mainstream services:

i. Lack of awareness of certain services

Most parents said that they were not aware of certain services and only found out about after using the Drop-ins. Services mentioned in this context were speech and language therapy, dental health and smoking cessation service. The following is a comment made by one parent and is typically representative of the rest of the group.

“We wouldn't really use these services outside. I didn't know about things like speech therapy and smoking counselling. I would use other services, like health visitor, only if it was something serious but not otherwise. But, if it is serious problem then you

get referred by the GP. In the Drop-ins you can just ask the health visitor about small things that you won't normally ask your GP or your health visitor. "

ii. Lack of clear understanding about services

Some were aware of these services prior to attending the Drop-ins, but had never considered using them. This was because they were either not sure of how to access them or weren't sure if they were right service for the kind of problems they had.

iii. Not being able to recognise the problem

This issue was identified primarily in the context of child development. There were several examples stated where parents said they were unaware of their child's condition simply because they failed to recognise the problem or didn't consider it as requiring attention. The conditions were highlighted only as a result of using the Drop-ins.

One parent said, "***We are using services here that we wouldn't have done otherwise, like the speech and language therapy. We didn't realise our child had a speech problem until we came to the Drop-in. Now he sees the speech therapist every week and we can already see the difference in three weeks. It is brilliant, he has started saying so many new words and we have also been told how to help the child at home – it is brilliant.***"

iv. Fear of formal settings

The formal setting of clinics has put some parents off using certain services. Many parents said they felt very uncomfortable in the clinic setting and found it a daunting experience. They preferred the informality and relaxed atmosphere of the Drop-ins to see professionals.

"I went to see my health visitor who sits in a doctor's room. It was very big and formal and I felt uneasy. But, here they actually sit

with the child and see them while they are playing. So she doesn't sit at a table and listen, but actually comes to the children, plays with them and listen to them."

v. Lack of confidence

The vast majority of parents said they lacked confidence in accessing mainstream services. This was mainly in the context of services, such as GPs and health visitors. Many parents said that they felt reluctant contacting these professionals because the problem wasn't serious enough and the parents were afraid of being told off for wasting time. In many cases, all parents wanted was to seek advice on concerns they had about their child's health.

vi. Attitude of professionals in mainstream services

Fear of being judged by professionals prevented many parents from seeking help. Parents were often reluctant to seek advice because they felt that they would be wasting professional's time. Many parents said they often delay going to GPs and health visitors for this reason.

Parents felt that they don't always get the time and level of attention from professionals in formal settings as they do at the Drop-ins.

***"When you go to midwives at a clinic it is kind of rushed, you just about have time to weigh your baby and get her dressed and then you have to leave. But at the Drop-ins you have time to chat about the baby's development, weaning, what foods to give and things about our baby. You get more time to talk about your baby and her development."* (father)**

Parents felt they were being rushed at such appointments and thus were unable to raise other issues and concerns they might have about their children. In many cases, there is no continuity in service and the parent might be seen by a different staff member on subsequent appointments.

This doesn't allow for a relationship to be built between the parent and professional. In contrast, the professionals at the Drop-ins were described as being extremely friendly, it is easier to talk to them, very reassuring, non-judgmental, take an interest and check on progress regularly, which gives the parents a sense of security and confidence in the service.

***“Services at the Drop-ins are more personal. They don't just give advice and that's the end of things. They ask you every time how things are and come and see you a couple of weeks later and find out how things are going. Instead of just giving advice and letting you go off with it they come back to you to ask how things are.”
(father)***

vii. Lengthy waiting time

Long waiting times and delays in getting referrals were other reasons why parents preferred to use the Drop-ins rather than mainstream services.

“It is so difficult to get hold of my health visitor. It takes ages to make an appointment so I wouldn't bother – it would be a waste of time. I would try and deal with the problem some other way, like maybe talking to friend. Now I have no worries because I can see a health visitor at the Drop-in whenever I need to. She is always around.”

viii. Difficulties accessing help when needed

Another key barrier was the long waiting times to see a professional and consequently a delay in getting help when needed.

“I wouldn't even know the number to call my health visitor and they take ages to get back to you. But here I can just go up to them and ask little things, like I am having problems potty training, and get advice from them straightaway.”(parent)

“It is better nipping it in the bud when the children are little, rather than letting it grow into a big problem. Referrals take time and it takes so long to see a speech therapist, whereas at the Drop-ins you get seen instantly and get advice on what to do.”(parent)

A key message emerging from parents across the three Drop-ins was that without the Drop-ins they would have never sought help and advice for certain problems and accessed certain services. This demonstrates the crucial role the Drop-ins have played in helping parents overcoming these barriers.

The parents stated the following reasons for preferring the Drop-ins as an access point to mainstream services:

- Convenience of having different services under one roof, especially for mothers with two or more children;
- The atmosphere at the Drop-ins is more relaxed and informal. There is more time for parents to discuss any issues and concerns with professionals like the health visitor. Staff /professionals have more time to talk to you, unlike in clinics and formal settings;
- No time pressure, very relaxed atmosphere, which gives them the confidence to raise any concerns;
- Helped early detection of problems because staff know the children well and get a chance to see them every week. Furthermore, parents felt they were able to approach staff with any small concerns about their child;
- Drop-ins made them aware of certain services, such as speech and language therapy, smoking cessation, toy library;
- Higher level of help and support available from staff and professionals at the Drop-ins;
- Parents don't feel they are being judged;

- More confident to raise any issues and talk to staff about any aspect of child development, like weaning or having problems toilet training – they help you with anything;
- Drop-ins provide fast track route services as parents get seen quickly directly or via referrals. This was especially relevant to smoking cessation as parents felt that it is important to get immediate access to this service.

5.3.2 Improved Health and Well-being of Children

A significant finding of the evaluation is the positive impact that the Drop-ins have had on the health and well-being of the children that attend. This impact has been achieved in a number of different ways, including:

- Early detection and intervention;
- Encouragement and support provided by professionals, which has ensured that parents continue with the service/treatment;
- Increasing parents awareness of their children's health and related health issues;
- Providing information and educating parents on matters of diet and health in a non-threatening manner;
- Through initiatives and programmes, such as the dummy exchange, top-tip cards etc.

There were numerous examples and experiences shared by parents on the changes they have seen in their children as a result of using the services. One parent talked about the impact the speech and language service has had on her child's speech and language development. The following example clearly illustrates the role Drop-ins can play in improving the well-being of children through early intervention and support.

“My two-year old boy was not talking very much. We were concerned, but were not sure whether to take him to the GP. We didn't really know what to expect from a child this age. We also didn't think it was a problem and felt he would catch up. But then

we came to the Drop-in and got a chance to speak with the speech therapist. She started working with my child and this has shown positive results. He has come a long way in the three weeks he has been here. He has started singing with other children and says a few words. He even says to daddy, "I love you." He even talks on the phone now, which he would never do earlier."(mother)

Another initiative that was particularly useful was the dummy exchange programme provided by the speech and language therapist. Parents said that this initiative was very helpful as it provided practical advice and support on how to get their children off dummies.

Some parents mentioned how the different groups activities, like sing-a-long, have helped with their children's language development. They said that this has taught them new words. It has also made them more aware of the role that they can play in supporting their child's development.

Another activity that has made a remarkable difference in children's health has been the healthy snack/lunch for the children. **Parents were extremely positive about healthy snacks for children. They cited many benefits of this service.** As a result of eating healthy snacks at the Drop-ins, their children were more willing and inclined to try different foods at home. One mother gave example of how her daughter has started eating a variety of fruits because she had tried them first at the Drop-in.

"My daughter eats a lot of different fruits now. I think before she thought I was trying to poison her at home. But she tried different fruits here and thought they aren't so bad after all, and now she eats them at home."(mother)

In addition to the snacks being nutritious and healthy, parents found the communal eating beneficial because it also prepares the children for

nursery. While encouraging children to try new foods (as they see other children eating), parents also felt that it helped train children, in an informal way, to sit around the table to eat meals and develop good food habits.

Parents said that they too had benefited from this initiative as they had learnt new ideas for healthy snacks. As a result, they have introduced different foods, which they previously wouldn't have considered giving to their children. The following is a comment made by a mother, ***"You don't normally tend to just cut up tomatoes and cucumber just like that and give it to your child. But seeing it done here and seeing your child enjoy it, it just makes you do it at home. I have started giving these at home to my other children as well."***

Parents said that they were also more aware of other health issues, such as high sugar content in fruit juices. As a result of the dental sessions, many parents had reduced the quantity of fruit juice they were giving their children and substituted this with drinking water instead.

All the above changes have contributed to improving the general health and well-being of the child.

5.3.3 Improved Bonding between Parents and their Children

The findings indicate that the Drop-ins have helped to increase 'attachment' between parents and their children. This has happened in a number of different ways. Parents have said they have learnt new skills, which have helped improve their relationship with their children. They have learnt how to deal with difficult behaviour, have understood the value of play and realised the significance of engaging in play with their children.

"The Drop-in has changed me. I have become closer to my kids; it is easier to play with them. My bond with my children is better

***than ever before, the Drop-ins have brought us together.”
(mother)***

***“I understand my children more. I play with them more at home.
My relationship with my kids is better.” (mother)***

The above comments clearly demonstrate the role Drop-ins have played in developing and strengthening the bonds between parents and their children.

The Drop-ins provide an opportunity for parents to spend quality time with their child. This aspect was particularly beneficial to mothers who had large families.

“It gives me bit more time to spend with my little ones. I can get involved in activities with them and play with them – things I wouldn’t get a chance to do at home because I have three other children. When you are at home there are other things on your mind. But, over here you are relaxed, you know your kids are safe and you can play with them. This short time makes a big difference.”(mother)

Furthermore, many mothers commented that they had become aware of the value of play as a result of using the Drop-ins. This in turn had encouraged them to start playing with their children and actively engaging with them at home. Some mothers talked about how this had completely changed the way they interacted with their younger children and how they had started doing things differently with their second child as a result.

“I have learnt how to play with my child, learnt creative things and structured play. So now I do the same at home. I have bought paints and brushes and set things up for my daughter. You tend to

copy what happens here. I never took the paints out or anything like that with my first born. " (mother)

The information, guidance and support provided at the Drop-ins have helped build confidence in mothers in their ability to look after their children.

"I think I have become a better mum since I have been coming to Sure Start. I don't know how, but I feel very proud of myself now when I come to the Drop-ins. I was in such a state with my first child. I felt I was doing things wrong. But with my second child it was different. The health visitor at the Drop-in gave me a lot of confidence and reassured me that I was a good mum. They make us take pride in our children."(mother)

5.3.4 Well-being of Mothers – Emotional and Social Well-being and Personal Development

The feedback from parents clearly indicates that the Drop-ins have contributed significantly to the emotional, social, mental and physical well-being of parents using the service. They have helped in a number of different ways depending on the individual need and circumstances of the parent.

They have helped mothers dealing with loneliness and isolation by providing opportunity for mothers to meet other parents, socialise and make friends.

"I didn't really know many people around. It was frightening. Also, when I had my baby I didn't know anyone else who had babies. But I met lots of mums here and made friends and we started doing things out of the Drop-ins."(mother)

The Drop-ins have provided help to mothers with post-natal depression through counselling and referrals to other services. In addition, the staff

have provided practical help and support to help mothers in crisis situations.

“They saved me from having a nervous breakdown. My neighbour phoned them for me, she actually comes to the centre. The health visitor came and saw me at home, she was absolutely fantastic. I was so poorly that I couldn’t even get myself to the hospital. She paid and arranged for a taxi for me and looked after my children while I was at the hospital” (parent)

Many mothers who had such an experience said they could cope better with such situations only because of the advice, support and guidance they had received from the staff. This in turn had helped build their self-esteem and confidence.

Another crucial role has been the emotional support, sense of belonging and reassurance given by staff. This was particularly helpful to mothers with new born babies. The mothers also said they were less anxious as a result of being able to talk to other mums in similar situations and sharing their experiences with them. This helped reduce their anxiety and stress as it made them feel that they are not on their own.

“When you are at home on your own you get stressed thinking, “Am I the only mum that panics and gets stressed?” But when you come here you see other mums in worse condition than yourself. This makes you realise that there are other people with the same problems and that you are not on your own. You can talk to other mums and it does help.”(parent)

Besides providing emotional support, the mothers said that the Drop-ins have helped build their confidence. They said they are more confident in talking to other people and in looking after their children.

One mother at Tots n US commented, ***“I used to be nervous and timid talking to people about bills and things like that. But, now, I have no problems. I wouldn’t be here talking to you in the group had this been a year ago. But, now, I am confident and have no problems talking to anyone. That’s what Sure Start has done for me.”***

The Drop-ins have also contributed to improving the physical health and well-being of mothers. Mothers attending the Full Circle Drop-ins benefited from the healthy lunch. Some had made changes to their diets and had started eating salads and vegetables as a result of the healthy lunch. One mother said that she had actually lost two stones in weight by changing her diet as a result of the healthy lunch. From those interviewed, eight mothers had quit smoking as a direct result of the smoking cessation service at the Drop-ins.

5.3.5 The Wider Impact on the Family

There wasn’t sufficient evidence to demonstrate the wider impact that attending Drop-in services has on the wider family members. There were few examples mentioned by parents on the changes they have made in their homes as a result of learning new things at the Drop-ins. For example, changes to the diets of their family and eating more healthy foods at home. It is also likely that the improved relationship with their children and increased understanding of child development evidence will impact positively on any future children. Some mothers also reported that their partners were considering giving up smoking after seeing that they had been successful.

5.4 Parent’s Views on Individual Services

The parents ranked the different services in order of their importance to them. They identified services, such as health visitors, midwifery, speech and language therapy, toy library and smoking cessation as being most

relevant and useful. They also rated the play workers and healthy snacks very highly.

5.4.1 Individual Services

Besides talking about the impact of services, which has been discussed, the following are additional comments made by parents on individual services:

i. Health visitor

Parents rated this to be one of the useful service in the Drop-ins. Besides getting advice on their child's health and general well-being the parents said that health visitors have provided prescriptions and dealt with health concerns and minor ailments, which has helped to ease parent's minds.

***"My daughter had spots and I was worried. I wasn't sure whether to go to the GP. But then I spoke to my health visitor and she gave me advice and that eased my mind. It takes time to get an appointment with the GP and then they moan when there is nothing, so it is really helpful talking to the health visitor."**(mother)*

- Parents found health visitors easy to access and approachable.

"You can just go and ask them if you have any worry, any little thing. You don't feel you are being silly. It is all so relaxed here that you don't feel self-conscious to ask them about anything."
(mother)

ii. Midwife

Parents were very positive about the service. They said they could get advice on all aspects of pregnancy, which they found very useful. The said the midwives were approachable and provided a much personalised service.

One parent said, ***“They are there every week and advice is on hand and you can phone them at any time even outside the Drop-ins. You can ask them about anything and don’t have to phone the doctor. It is more personal here because they know you from the time you conceive and right through your pregnancy.”***

Some mums said that they felt reassured after talking to the midwives, this was especially true for mothers who had experienced complications during pregnancy. One mother felt that having someone to talk to every week was reassuring and helped her with coping with the pregnancy.

They valued the personal attention and one-to-one nature of the service. This gave them the chance to raise any concerns at any time and without feeling they are intruding. They don’t feel under pressure or rushed as there are no appointment times.

iii. Trips and outings

In general, the parents appreciated the outings organised by the Drop-ins and enjoyed the experience. They said they were very affordable and fun events for the entire family. However, some users at Tots n Us and Little Seedlings were not happy with the way the trips had been organised and complained about priority being given to users at Full Circle. In addition, some felt that priority was also given to parents not using Sure Start, which they did not like. Their perception was that parents who were not with Sure Start were allocated places before it was offered to the other Drop-ins. One user said, ***“My brother never attends the Drop-ins, and they are well off, and they went on that trip and we didn’t get a place.”***

iv. Talks/information sessions

Parents enjoyed the sessions and found them useful. They found talks on parenting particularly useful, but said these need to be provided more

often. In addition, they suggested that parenting sessions should cover issues for children of all ages. The sessions so far have focused on issues to do with toddlers and babies. They would like to see more talks on all aspects of child development and parenting issues for children 1-5 years old. They suggested topics like dealing with children, bringing up children, dealing with challenging behaviour.

Many parents attending Tots n Us and Little Seedlings were not aware of any such sessions.

One mum said, ***“Do Sure Start know in advance if these people are coming. Because if they do then it would be good if they tell us the week before. They can just shout that someone is coming next week to talk about this. So then they can get a group ready when the speakers come and we can ask questions. We can sit in small groups and the person can walk around the groups.”***

The above comments raise the issue of parents not being adequately briefed and informed about different services or speakers attending the Drop-ins. It would also help if parents were given an explanation about the service and the kind of things they can expect to receive.

v. Training for parents

Interviews with parents highlighted a gap in this area and found that the training provided varied across the Drop-ins. Many of the parents had not heard of any other training courses other than the computer courses provided. Parents at both Tots n Us and Little Seedlings reported that they have never had a chance to get on courses, such as food hygiene and first aid, as they are not offered at these particular Drop-ins. Parents seemed very keen to attend these courses and had asked staff. Some mothers attending Tots n US reported that they had requested these courses, but were still waiting for them to be run. Generally, parents were not happy, again it was felt that the other Drop-in offered this service to their users.

vi. Toy library

Parents were extremely happy with this service for the following reasons:

- Opportunity/chance for children to play with lots of different toys.
- Mums can't afford to buy new toys so this gives the children a chance to play with new toys without having to spend any money.
- Opportunity to try out different toys before you actually go and buy it.

"It gives children a chance to play with toys that we sometimes can't afford to buy. There are some toys that may cost £40 and you want to buy it for your child but can't. But, then you can get them from the toy library and use it. So you don't have to spend money."

vii. Dental health

Most parents were positive about the dental health advice and sessions. Some of the mothers mentioned the changes they had made as a result of the sessions.

One mother at Full Circle said, *"They come now and again, but I think they should come more often. My kids were drinking nine bottles of juice a day and we spoke to the dental people and they told us about the damage the sugar would do to their teeth. So after the talk I gradually reduced it down and now give them only two bottles a day."*

It was primarily parents at Full Circle who have experienced this service; most parents at the other Drop-ins were unaware of the dental health service. However, there was a demand for this service from parents, at all three Drop-ins.

viii. Smoking cessation

This service was rated very highly. Eight mothers out of those interviewed had quit smoking as a result of the sessions. The two aspects that they found particularly useful was the practical help given to quit smoking and the ongoing support and encouragement provided by the workers. It seemed to have a wider impact on the family as some of the mums said that their partners were also trying to give up smoking as a result of their success.

One mother said, *"They provide you with patches, inhalers, whatever you need. They test you and come and see you regularly. If you fail, it doesn't matter because they encourage you so you try again and you set yourself another day. My partner wants to give up smoking now, but is not ready to see her as yet. But I am confident that she will help him quit just as she helped me."*

ix. Speech and language therapy

The vast majority of parents at all the three Drop-ins were very positive about the service. They found the 'top tips cards' on how to communicate effectively with children very useful.

"She (speech therapist) is really good. She gave us cards with these tips that are brilliant. Like one of them suggested switching the TV off and doing a little bit of reading with the children. There are different tips for different age groups of children – they are great!" (parent)

x. Job centre plus

The overall awareness about this service across all three Drop-ins was low. In one Drop-in, none of the parents were even aware that this service was provided. Those who had used the service had mixed views as to how useful they had found the service. One mum at Full Circle had spoken to them and found it very helpful; whilst some other mums were not satisfied with the outcome.

“They are quite useful when you go to their office. They tell you about jobs, courses and things like that. They are also useful for your partners. But when they came here to the Drop-in nobody told us what they were about. He just came and sat in a corner. He didn’t do a speech or explain anything so nobody knew what they were all about.”(parent)

Parents at the other two Drop-ins were not so positive about the service.

“I have only seen the Jobcentre person just once. It wasn’t a good introduction though. They just said that he is from JSA and that you could go and speak to him. We didn’t know why he was there and what kind of things we could ask him. He sat in one corner and no one went and talked to him. ”(parent)

Parents at Tots n Us felt that the service wasn’t particularly relevant to their needs. They were more interested in information and advice on courses, further education and training opportunities. One parent stated:

“That Jobcentre lady came and sat there. I don’t think anyone went and spoke to her. I think you would get more interest if it was someone from the college. I know mums do want to go part-time to colleges and want to find out about courses and crèches. But job wise a lot of them have men who are working and women who want to stay at home with the kids. But college you have night courses, part-time –so many options.”(parent)

xi. Healthy lunch

This service was only being provided at Full Circle. Parents receiving the service were very positive about it, but parents at the other Drop-ins expressed disappointment at being left out. Parents from the other Drop-

ins had requested the healthy lunch service and were told that it would be provided; at the time of interview this was not in place.

xii. NSPCC/social workers

Users at Full Circle were more aware of this provision compared to parents at the other two Drop-ins. None of those interviewed had any experience of using this service and thus couldn't comment.

Some parents reported that a worker does come, but it is not frequent: ***"I have heard that they are good, but they don't come here regularly, they do pop-in now and then."***

xiii. Credit Union

Long-term users at the three Drop-ins were more aware of the Credit Union services than others. Some of them had received advice from the Union and were planning to start a saving scheme as result.

Parents suggested that there would be a better uptake of the service if the agency could initiate the schemes at the Drop-in itself, rather than having to go their office at a later date. This has put off many mums using the service. They said, ***"It would be easier if they come in and start you up there and then. They basically came in with the information and said like you have to ring here, go there and do this and this. It would have been better if they said we can start you up today instead of going to their office, ringing them and all that palaver."***

5.4.2 Service Delivery Issues

There were two main issues that emerged from the evaluation that relate to practice and service provision.

The evaluation has found that parents attending Tots-n-Us and Little Seedlings felt discriminated against because of the difference in services and resources provided across the three Drop-ins. The perception of

parents from the two smaller Drop-ins is that there is significantly more on offer in terms of services and training courses at Full Circle.

One parent at Little Seedlings said, ***“We are happy with what we get but they (West end) get a lot more than we do. They get a lot more courses and information about things than we do. They offer crèche facilities with the courses as well. They are open to us, but we would have to get to the end of town, which would take us about 45 minutes.”***

Another parents at Tots said, ***“They (Full Circle) are given a lot more than us. They have computer courses and things like that. They also do a dinner there for mums. We wanted to do it here, but it’s been two years now and nothing has happened.”***

As discussed earlier, even when it comes to trips and outings, the perception is that parents attending Full Circle are given first preference for places.

The findings indicate that there are gaps in communication between Drop-in staff and parents on practice issues. The feedback from parents at the three Drop-ins suggests that parents are not always adequately informed about services, speakers and events, and how these differ across the Drop-ins. The individual services provided at each of the Drop-ins are not communicated to parents, either verbally or through leaflets. The issue regarding not being informed about external speakers was also mentioned repeatedly during the interviews. As a result, many users either don’t know there is someone visiting their group or are unclear about their role and what services they can provide and thus don’t approach them. There were complaints about not finding out about trips and outings on time.

CONCLUSIONS

- Comments from parents indicate that the Drop-ins have had a positive and lasting impact on their lives.
- It is clear from the evidence that the Drop-ins have supported parents and enabled them to overcome barriers to access mainstream services.
- The parents prefer to use mainstream services, via the Drop-ins, because of the non-threatening environment, friendly and informal approach of professionals, ease of accessing services and the ongoing support provided to the families by the Drop-in staff.
- Parents ranked certain services, such as health visiting, midwifery, smoking cessation, toy library, as being most useful. They were less satisfied with services, such as Job Centre Plus and Credit Union. It seems that the issue is not the service itself but the manner in which these are presented at the Drop-ins.
- The health services and initiatives, such as healthy snack, have had a positive impact on the health and well-being of children.
- The Drop-ins have played a significant role in supporting parents' emotional and social wellbeing.
- The evaluation has highlighted concerns parents have about the differences in the services provided at the three Drop-ins. Many parents felt that more resources are given to Full Circle and were not happy with the perceived reduced level of service in the other two Drop-ins.

5.5 User involvement and participation

The evaluation looked at participation on two levels. The first level examined current practice of consulting users and getting user feedback within the Drop-ins. The second level explored parents' wider knowledge and levels of engagement within the Sure Start Local Programme. This

included seeking their views on existing mechanisms for user involvement, such as the parent/carer sub-group and review meetings.

The findings in this section are presented according to issues raised by users at each of the three Drop-ins.

5.5.1 Full Circle

The majority of the parents said they had not been consulted about their views on any aspect of the Drop-ins. Half of those interviewed were regular users and had been attending for about a year; this indicates that not consulting was not as a result of being new to the drop in. Some parents reported that they had filled in questionnaires/feedback forms, but these were related to specific activities and trips rather than general service wide feedback.

Some of the long-term users said that they didn't really need any formal systems to give their views, as they felt confident enough to approach staff about any issues.

One parent said, ***"They don't ask us but you have to approach them."***

Most parents said they would like to be consulted. This would make them feel more involved and valued. Parents were especially interested in having input on topics, especially for the talk/information sessions.

One mother said, ***"We are not really asked on what talks we would like. They just come and tell us that somebody is coming to talk about this and that. I think it would be nice if they asked us. I would like to have talks on child health, different viruses and what to look for in different conditions, and what to do with the child if they have an attack and things like that."***

Parents suggested that they should be informed in advance of any consultation events so that they are fully prepared for it.

Few parents were aware of the complaints procedures. When asked how they would deal with an issue with another parent or staff at the Drop-in, most were unsure about the formal process to address the problem. Some said that they would keep quiet about it, or stop attending the Drop-ins altogether if the problem was unmanageable. Whilst others felt that such procedures were unnecessary as they knew the staff well enough to be able to raise the issues directly with them.

None of the parents knew about the Partnership Board, the parent sub-group or the review meetings. One parent mentioned that she had attended a meeting, but was not entirely clear about its' purpose. She said it was about the overall Sure Start programme.

5.5.2 Tots N Us

At this Drop-in there was a mixed response on being consulted. Some parents said that they had completed questionnaires about 'good and bad' things at the Drop-in, whilst others could not recall being asked their views. Some of the parents who had been attending for a long time said that they have been consulted from time to time, but on an adhoc basis. These parents stated that they would like to see this being done more regularly and suggested that feedback should be sought in a less formal way.

One mother said, ***"It could be relaxed like having the mums sitting around a table with a cup of tea chatting with staff about the Drop-ins, asking us for ideas and how we feel about this place."***

Most parents were not aware of formal complaints procedures, but, like parents at Full Circle, they too felt that they would be able to approach staff directly about any such matters.

One mother said, ***“I would just tell a member of staff if I have a problem. They are friendly and I wouldn’t have a problem going to them.”***

None of the parents interviewed had heard about the Partnership Board or the parent carer sub-group. They said they would have liked information about such initiatives and were interested in getting involved in the Drop-ins.

Only one mother was aware of review meetings and had attended the meeting once. She was very positive about the experience.

Parents were keen to get involved in the Drop-in activities, but seemed unsure about the ways they could.

One parent commented, ***“I feel, if I was allowed, I would get more involved with everyone’s kids and do some activities. But I am not sure I can and I don’t want people looking at me.”***

They suggested that staff should provide information on this issue and hold regular discussions with parents on different ways they could get involved.

5.5.3 Little Seedlings

At this drop in, parents gave a mixed response on their experience of being consulted. Some of them had filled questionnaires about trips and activities, but most were not aware of any more formal systems for parents to give feedback. They would like to see systems in place that would allow them to express their views about the service – both positive and negative.

“It is important to be asked about what we want and give feedback because then it makes you feel you are welcome instead of an outsider.”(parent)

Some parents felt that such formal systems are not required because the Drop-ins are very informal and the staff are friendly and approachable, thus the parents can go to them at any time to raise any concerns. Several parents indicated that they would have liked to raise some issues about the Drop-ins, but were reluctant to do so because they didn't wish to bother staff.

Parents suggested that feedback should be sought on a regular basis on a number of different issues, such as what parents want from the Drop-ins, activities for children, topics for information sessions. This could be informal and could be just a worker having a quick chat with parents. Parents suggested that a comments box should be placed at the Drop-ins. This would encourage parents to express their views in a confidential manner.

“The comments box would be a good idea because you can write what you want to say at home and then just pop it in when you come to the Drop-in. Nobody would know and you could get a chance to say what you feel.”(parent)

In relation to parental involvement, parents at Little Seedlings felt that there was not enough information made available to parents about the opportunities that exist to get involved. They mentioned that information should be provided to parents on how they can be involved, and mechanisms and opportunities for parents to have a say. Furthermore, this should be done on a regular basis so that new parents joining the group also have access to this information. One mum said that she would be interested in getting involved in the group if she had the information:

“I would probably be interested in the parent sub-group, but I haven’t had any information about it.”(parent)

A majority of those interviewed had not heard about the parent/carer sub-group. One mother knew the parent who was a member of the sub-group, but didn’t have much information about the group itself. Another issue raised was that not everyone attending the Drop-ins knew the parent’s representatives on the board. They suggested that the parent reps should introduce themselves to the group, or the staff should do this, to ensure that all users were aware of who their representatives were. This would encourage mums to go up to them at any time and raise any issues or concerns they might have.

One of the mothers commented, ***“You should be told that you have a say in things. If you don’t know that that you can have a bit of control over what goes on how can you have your say? It shouldn’t be a minority few speaking for the rest of us. I think they should come down to the Drop-ins and talk to all parents.”***

During the interview, it was suggested that there should be a rota system for parent membership on the board. This would give a chance for more parents to be involved and minimise the risk of a few taking control. They mentioned that every parent should be given the opportunity to get involved, irrespective of whether they take it or not. Their involvement might depend on their personal circumstances. Not everyone would be interested, but at least they would be aware of the opportunities to get involved.

Most parents were not aware of the complaints procedures.

With regards to review meetings, they said that they knew about these but no one interviewed had attended any. Some were not sure about how/which parents were invited to the meetings.

CONCLUSIONS

- There is evidence that the Drop-ins are consulting parents and seeking their views on services, but this appears to be happening on an adhoc basis.
- The majority of parents would like to see this being done regularly and in an informal way. They suggested the use of comments box at Drop-ins to give parents a chance to express their views confidentially.
- With regards to parents' involvement in the Drop-ins and programme, they expressed an interest in getting more actively involved at all levels.
- It is clear from the feedback that most parents did not have information about the mechanisms created by Sure Start for parental involvement, eg parent/carer sub-group and review meetings.
- It is clear from the interviews that parents are not aware of the complaints procedure should they have a problem with staff.
- There are clear gaps in the monitoring and evaluation of the different services provided at the Drop-ins.

5.6 Views on Transition to Children's Centre

The parents gave a mixed response to their views about the move to the children's centre. Some of them had no information about it, and thus could not comment, whereas others had attended a consultation meeting at their Drop-in and were more informed.

Those who had attended the meeting, and had the information about the transition, were very positive about the move and the centre. One mother commented, ***"It's going to be fantastic. I was impressed with what they plan to do there – it looks great!"***

Some of the parents had changed their views about the centre after seeing the plans. They were positive about the new centre as it would be bigger and have more resources and facilities for the community.

"I don't have any worries about the new centre now that I have seen the plans and what is going to be in there. It is going to be bigger and have lots more in it. It will have lot of space and thus a play area, so I am positive about it..."

Parents attending the Tots n Us Drop-in had all received a letter from the school, which gave information about the centre, including the crèche facilities.

Some parents said they would like to be involved in the process.

CONCLUSIONS

- Parents were positive about the move to children's centre, though half of those interviewed were not aware of this transition.
- Some of the parents commented that they would like to be more involved in the process.

6.0 Parents Questionnaire

6.1 Introduction

In total, 17 questionnaires were completed and returned from the three Drop-ins:

- Full Circle – 6
- Tots n Us – 5
- Seedlings – 6

The numbers of returns means that significant analysis and percentage calculations are not possible or meaningful. For example, in Table 1 the length of time attended by each respondent is cross-tabulated with the individual Drop-in. No apparent pattern can be seen, as across all three Drop-ins there is a variety of attendance histories.

Table 1: Showing the number of people and how long they have been attending for each drop in.

Drop-in	Less than month	3-6 months	6-12 months	1-2 years	2+ years
Full Circle	1	3		2	
Seedlings		2	1	1	1
Tots n Us	1				5

6.2 Feelings about the Drop-ins

All respondents reported positive feelings about the services provided at the Drop-ins; 15 stated they were happy and two stated they felt OK.

When asked what they liked about the Drop-ins, respondents gave a variety of responses. From the responses, key themes were identified, these included socialising (both for parents and children), the atmosphere and attitude of staff, and comments about the activities themselves.

- Two people mentioned that staff were helpful and relaxed.
- Five people discussed the atmosphere at the Drop-ins and included descriptions, such as relaxed, informal and friendly.
- Eight people stated that they liked the opportunity to socialise with adults, chat, talk to other mums.
- Five people also stated that they liked the opportunities the Drop-ins gave for their children to socialise and meet other children.
- Four people commented on the set up of activities, with three respondents remarking on the variety of toys and resources available for children, and one person liking the convenient times of Drop-ins.
- Five people commented on the activities themselves, with three people stating that they liked the fact that professionals (including health visitors) were present. One person liked the opportunity to play with their child, and one person like the opportunity to have time for herself.

6.3 Outcomes of the Drop-ins

Parents were asked to identify outcomes of attending the Drop-ins for both themselves and their children. They were able to select as many 'helps' as they liked, from a list of 11 (adults) and 12 (children).

Table 2 shows that most parents selected, on average, three helps for themselves (average 3.24), but two people did not select any and two people selected seven. Parents were more likely to select helps for their children, with the average number of four helps per child; again, there is a range of helps with two people selecting only one help and one person selecting ten helps.

Table 2: Showing the number of 'helps' selected by respondents for themselves and their children.

No of helps selected	No of respondents parents helps	No of respondents child helps
0	2	0
1	2	2
2	1	2
3	4	3
4	5	4
5	1	4
7	2	1
10	0	1
Average	3.24	4.00

Table 3 shows the first three choices of 'helps' selected for adults; from this it is possible to see the range of helps that respondents identified as a result of attending the Drop-ins. The most popular outcomes for parents was making new friends, playing more with their children and feeling more confident.

Only one parent reported that attending the Drop-in did not help them and two parents did not respond to this question. The person who identified 'other' help, commented on the good advice provided by staff.

Table 3: Showing the first three 'helps' selected for parents (number of parents).

Q4 Do drop ins help	Help 1	Help 2	Help 3	Total
More Confident	7			7
Eat more healthily	1	2		3
More secure		1	1	2
Better relationship with child	3	1	1	5
Play more with child		5	2	7
Made new friends	3	2	5	10
Quit smoking		1	1	2
Better prepared for school		1	1	2
More skills			1	1
Doesn't Help	1			1
Other	1			1
Blank	2			2

Table 4 shows the distribution of 'helps' selected by parents for their children. From this it can be seen that the most positive 'helps' from the Drop-ins, identified by parents for their children, are around socialising and include making new friends (14 respondents), and being more sociable (14 respondents). Nine parents identified that their child has more time to play and eight parents reported that attending the Drop-in had helped their child to feel more confident.

The respondent who selected 'doesn't help' stated that her child was too young. Of the two parents who report 'other' help, one stated that her child was too young at three months, but that they enjoyed looking around the Drop-in. The other parent identified that her child had increased socialising skills and now played better with other children.

Table 4: Showing the first seven 'helps' of the Drop-ins for children (number of parents).

Helps	Help 1	Help 2	Help 3	Help 4	Help 5	Help 6	Help 7	Total
Health has improved	1							1
Made new friends	13	1						14
Eat more Healthily		3	1					4
More protected		1		1				2
More Safe			1		1			2
More sociable	1	9	2	1		1		14
Reading has improved							1	1
More time to play		1	7		1			9
More confident			1	6		1		8
Behaviour has improved			1		4		1	6
Doesn't Help	1							1
Other	1			1				2
Blank								

6.4 Likes, Dislikes and Improvements

Question 6 asked parents/carers which services they found most useful at the Drop-ins; fifteen people responded to this question. Table 5 shows the results of this question; it can be seen that the most useful service was the health visitor. If the baby weighing is included in this category (as it is part of a health visitor service), nine parents/carers have identified health visitors as the most useful service. As one respondent stated, ***"What I like about the Drop-ins is having a health visitor on site for any questions as it's sometimes hard to get hold of my own health visitor."***

Parents/carers also found midwives, the speech and language therapy and non-smoking team useful. One person identified all the services as useful.

Table 5: Showing the most useful services at the Drop-ins (number of parents/carers).

Service	No of Respondents
Speech and Language	3
Non smoking team	2
Midwives	3
Health visitors	8
Baby Weighing	1
Drop-in activities (painting, drawing, singing)	1
All services	1

Twelve people responded to the question 'what do you dislike about the Drop-ins?' Of these, five people wrote 'nothing'. The seven remaining respondents identified a range of problems with the Drop-ins, these included:

- Sometimes activities same each week;
- Lack of communications, with some people giving short notices;
- Cold food at snack time;
- Toilet too far;
- This group does not seem to get the same opportunities as other local groups;
- Drop-ins don't run through the holidays;
- Lack of health promotion.

Improvements to the service reflected these dislikes and problems and 11 people responded to the question asking about improvements to the service. Of these eleven, three people stated that there were no improvements to be made. The eight remaining responses included:

- Free dinners;
- Drop-ins held more often;
- When new people come in get in a circle and tell them about all of us, like our names and how many kids we have etc;
- Warm food and drinks;

- Better building – all under one roof;
- Security – far too open, some parent activities;
- More opportunities for outings and parent activities;
- A comments box so mums can make suggestions week by week or any other questions they may have;
- More health promotion and child safety.

6.4 Feedback and Views

All parents responded to the question about how often they felt they had a chance to give their view/feedback on the Drop-ins. Table 6 shows the results of this question. It can be seen that most parents/carers responded positively with 13 respondents reporting either 'often' or 'sometimes' as a chance to give feedback. Three people felt that they did not have any chance to feedback.

Table 6: Showing the level of feedback opportunities felt by parents/carers (number of respondents).

Q9 Views and feedback	Number of Respondents
Often chance to feedback	7
Sometimes chance to feedback	6
Do not often have chance	1
Do not have a chance	3

The final question was completed by 10 respondents and asked how parents would like to be more involved in the group. Few parents responded to this question, and those that did gave very little detail of the nature of their involvement. This is due to the question not being framed correctly and being unclear as to the level of detail required in the response. Four people indicated that they were already involved in the Drop-ins, but did not give specific examples of the nature of this involvement, responses included: 'involved', 'already involved', 'already

am' and 'voluntary helper'. One parent responded that they would not like to be involved.

Of the remaining five respondents, three made comments as to how they would like to be more involved:

- There should be more informative talks for mothers/fathers/carers;
- I would like to help them and be involved;
- To be asked about courses, trips or any talks that they want held.

The remaining two responses highlighted the positive aspects of the Drop-ins:

- Like coming to drop ins, I have met more mums and I'm able to talk to them about our children;
- Can approach staff at anytime.

6.5 Conclusions

The response to the parents' questionnaire has not been significant enough to draw any statistically significant conclusions about the Drop-ins. However, response can be seen to support findings from elsewhere in the evaluation.

All parents report feeling positive about the Drop-ins and like the variety of services. Many of the parents/carers commented on the informal, relaxed, yet professional, atmosphere of the Drop-ins. Key services for parents include the health visitor, midwives and speech and language therapy.

In terms of outcomes from attending the Drop-ins, many respondents identified the socialising aspects for both themselves and their children, including the opportunity to chat, share experiences and make new friends. The outcomes for their children, as a result of socialising more, include more friends for their children, increased confidence, better interaction/socialisation with other children and improved behaviour.

Interestingly, several respondents identified key aspects of improving communications and involvement/participation of parents/carers in the Drop-ins. This includes some form of introductory exercise for new parents and a suggestions box for more formal feedback/comment. Improvements to the service itself include better, more timely notices and a wider variety of parents' activities chosen by parents themselves.

Despite gaps in the participation of parents/carers, identified here and in other parts of the evaluation, most of the respondents felt that they have an opportunity to comment/feedback. This feedback appears to occur in the more informal way, by approaching staff directly: "***(I) can approach staff at anytime***" and substantiates the findings from the interviews.

7.0 Non-user Analysis

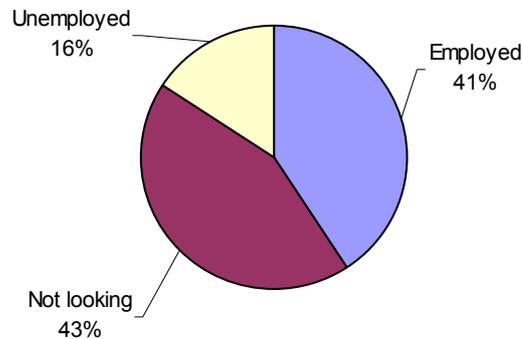
Telephone questionnaires were completed with a total of 44 individuals who were registered with Sure Start but had not access services in over three months.⁵ The results from the questionnaire were inputted into an Access database and interrogated to determine a demographic profile of non-users, and to investigate perceptions of Sure Start and reasons for non use. This section describes these findings.

7.1 Demographics of Respondents

- 41 respondents (93.1% of those interviewed) identified themselves as being the mother of the child eligible to access services at Sure Start Crewe. One father and two grandmothers made up the remainder of the sample.
- Just over half of respondents (54.5%) were between the ages of 30 and 45, and over a third (36.4%) identified themselves as between 20 and 29 years of age. Those in the higher age group were more likely to be employed (nearly sixty percent of those in the 30-45 years age group were employed) than those in the lower age group (only a quarter of 20-29 year olds who responded were employed). This is despite similar qualification levels between the two groups.
- Over a third of those interviewed were single parents (36.4%), and slightly more, at 38.6%, were married or remarried.
- Nearly half of respondents had one child (47.7%) and nearly a third had two children (29.5%).
- 20% of those interviewed had more than one child under the age of 5.
- 40% of respondents were employed, 43.2% identified as 'not looking' for work and 15.9% were unemployed. Consequently, nearly sixty percent of respondents (59.1%) were not working at the time of interview. In theory, employment is a significant obstacle to accessing Sure Start services, yet for at least 60% of those interviewed there are other reasons for not accessing services.

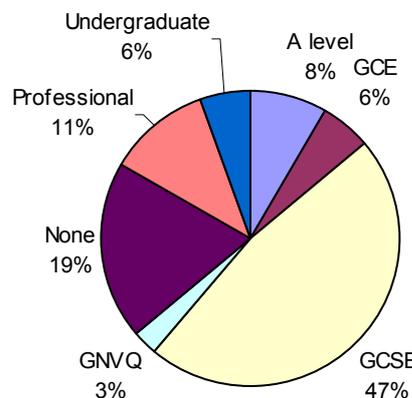
⁵ Section 2 gives a more detailed description of the methodology

Figure 1: Pie Chart Showing Employment Status of Respondents



- Only just over 60% of those employed used childcare, compared with a similar percentage (57.1%) of those who identified as unemployed and using childcare (although this figure is unreliable as the sample of those who were unemployed is so small). A third of those who identified as 'not looking' used childcare.
- Nearly half of respondents questioned about their qualifications (47.2%) identified GCSEs as their highest level of qualification. 20% of respondents had no qualifications whatsoever, whereas at the other end of the scale, 17% had a degree or higher professional qualification.

Figure 2: Pie Chart Showing Highest Qualification Level of Respondents



- There was no correlation between qualification levels and employment: four of the seven respondents who had no qualifications were

employed, whereas just 41.1% of those qualified to GCSE level were identified as employed.

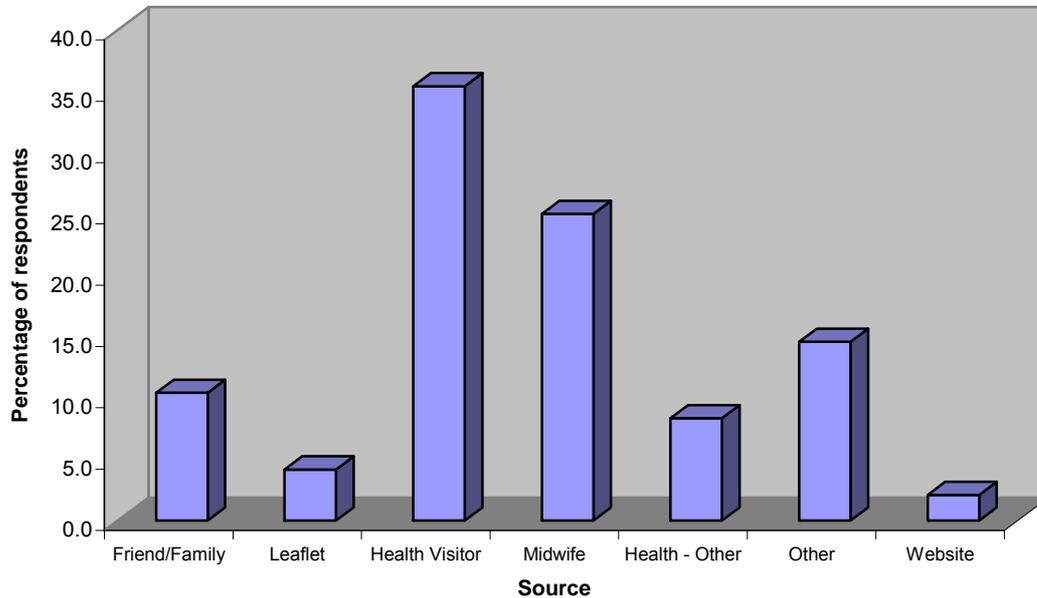
- 22.7% of those interviewed did not know their joint household income. Out of those who did, the majority of respondents had an income of under £15,000 per annum (43.2%). Nearly 20% had an annual income of below £5,000, with the majority of this group being single parents (six out of the eight parents interviewed). At the other end of the spectrum, 9.1% had a joint income of over £30,000 per annum, and all respondents in this group were married. This reaffirms the understanding that the majority of single parents are on a significantly lower income than other parents of different marital status.
- Only three respondents reported a disability, including epilepsy, arthritis and a child with cystic fibrosis.
- A vast majority of respondents (93.2%) identified as White British, with the remainder being one Black British and two mixed (White and Black Caribbean). This reflects the demographics of the Crewe area as a whole, with 96.2% of the population of the Crewe and Nantwich local authority area recorded as White British.⁶

7.2 Awareness of services at Sure Start Crewe

- Only two out of the 44 respondents interviewed had not heard of Sure Start Crewe.
- Of those who had heard about Sure Start Crewe, a majority (68.8%) had been made aware of Sure Start via health-related services, with health visitors being the most cited source of information.

⁶See: <http://neighbourhood.statistics.gov.uk/dissemination>

Figure 3: Bar chart showing how respondents were made aware of Sure Start Crewe

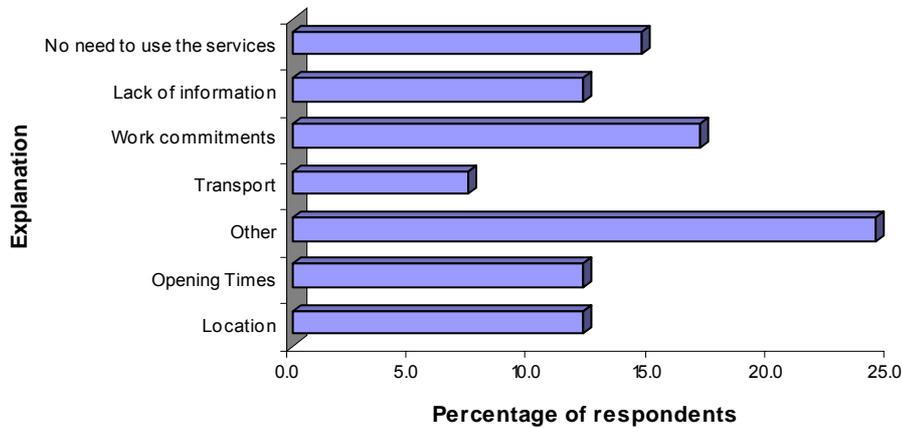


- Other ways of hearing about Sure Start Crewe included finding out through a survey (two respondents), and accessing Sure Start in another local authority area.
- Parents who said that they did not receive enough information on services at Sure Start Crewe were asked how they would like this information. Four out of the five parents asked would like information via a letter.

7.2.1 Respondents who had never used services

- Just over half of respondents (54.5%) had never used services at Sure Start Crewe in the past.
- Of these respondents, many had more than one explanation as to why they hadn't accessed services at Sure Start Crewe so far. Main reasons surrounded work commitments (17.1%), not feeling the need to use services (14.6%) and opening times conflicting with other activities or nap times (12%). Of those who cited 'location' as a barrier to using services (12.2%), most commented on the fact that the centre was too far away for them to use services.

Figure 4: Graph showing why respondents had not accessed services at Sure Start Crewe



- Of those respondents who said that a 'lack of information' was stopping them, two commented that they just 'didn't know enough' and another thought that Sure Start Crewe was 'for childcare only.'
- Of those who mentioned 'other' explanations, two respondents didn't know why they didn't access services, another two were just 'too busy'. Two more respondents commented that they 'didn't like the people' at Sure Start: "I was told from a few people that it was very cliquy with rough girls there," a grandmother commented. "I just don't have anything in common with the young mothers there."
- One respondent explained that she hadn't accessed services because of the following: "I couldn't breastfeed my daughter because I became ill, and I felt like I was dropped because I wasn't breastfeeding. I felt abandoned by the midwife who stopped calling as soon as I stopped, and that I couldn't go to the Drop-ins because of it."

7.2.2 Respondents who had stopped using services

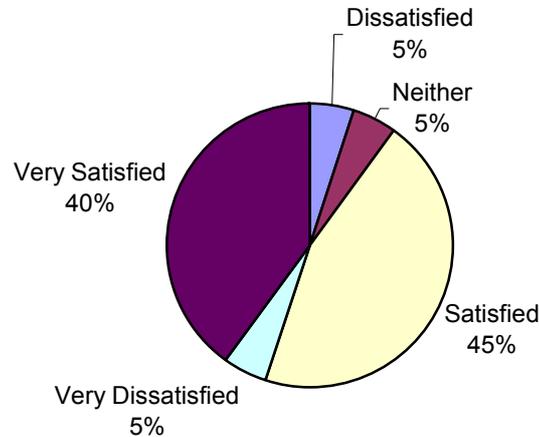
- Just under half of respondents (45.5%) had used services at Sure Start Crewe.
- The table below shows the services that respondents used to attend:

Table 1: Services attended by respondents

No. respondents	Service(s) used
6	Baby breastfeeding café
5	Mums and toddlers group
4	Drop-in
2	Baby Weighing
2	Midwifery Services
2	Playgroup
1	Parenting group
1	Trips

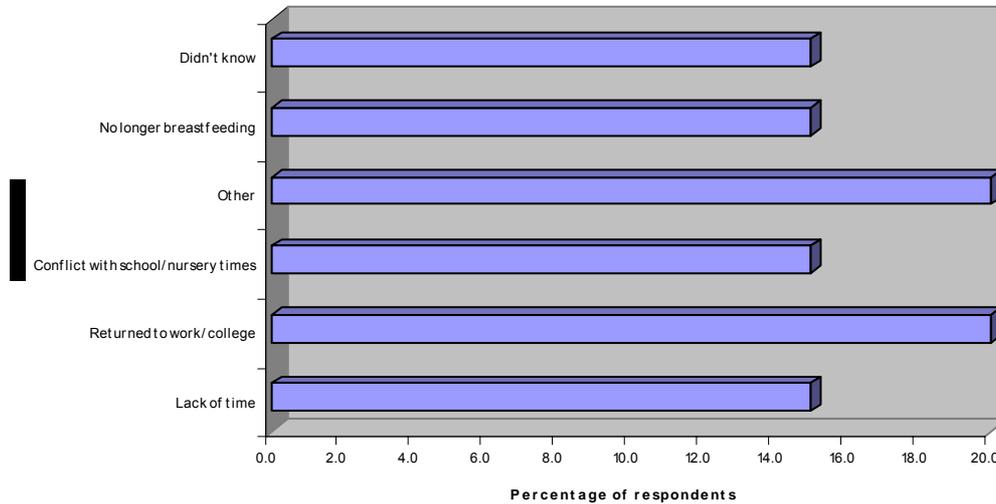
- The table shows that many respondents had attended health services designed for babies at the beginning of their lives, such as the breastfeeding café, baby weighing and midwifery services (43.5% of respondents). This suggests that many parents who no longer use Sure Start services dropped out early when babies were small and they felt that support was no longer needed; three parents who used the breastfeeding service stopped using all Sure Start services simply because they stopped breastfeeding.
- The majority of respondents (44.4%) used services for one to three months before stopping. 22.2% of those who had used services stopped using services after less than a month.
- Respondents generally used services once a week (44.4%) or once a fortnight (38.8% of respondents).
- When asked about how satisfied they were with the service they attended, 85% of respondents said that they were satisfied or very satisfied with the service. When asked if they had received a personal service, 75% of parents responded that they had. One parent said that it was, "fantastic – I'd really recommend it", and another commented that, "the activities were at just the right level for my boy's age."

Figure 5: Pie chart showing the satisfaction level of respondents who used Sure Start services



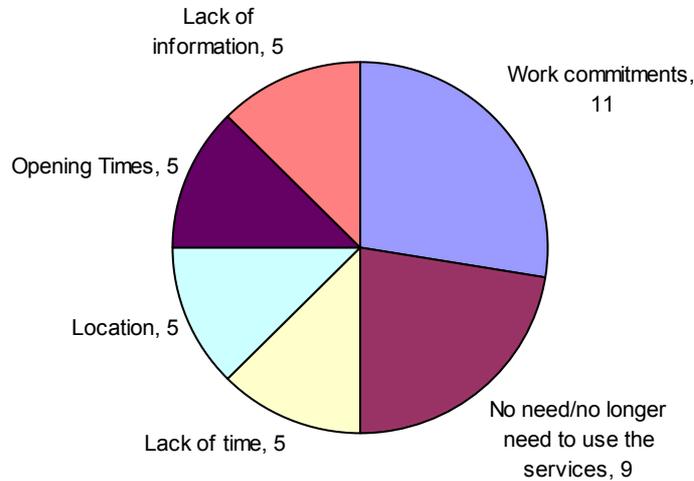
- Of the remaining three respondents who said that they were 'dissatisfied', 'very dissatisfied' or 'neither satisfied or dissatisfied' with services, a grandparent mentioned that the other parents were unwelcoming at the toddler group that she attended. The respondent also said that the stairs to the school where it was held were dangerous and nearly impossible to master as the grandparent had a disability. Another responded that, "there was no control over the children", and that other parents were disengaged from what was going on.
- Parents who had used services at Sure Start Crewe were asked why they stopped attending the service. The most common reasons were to do with other activities in the family's lives that prevented them from continuing with Sure Start services. For example: the parent had returned to work or college; the child had gone to nursery; the parents were simply too busy and no longer had the time to access services. Exactly 50% of respondents in this section (respondents who had stopped using services) cited these reasons as to why they stopped using services. This compares to 34.2% of respondents in section 7.2.1 (respondents who had never used services) who responded with those reasons.

Figure 6: Graph showing why respondents who had accessed services at Sure Start Crewe stopped attending



- Obstacles surrounding location, transport and lack of information were problems for respondents who had never used services (section 7.2.1), but were not identified by those people who had used services and then had stopped. This is because transport etc, are barriers that have been overcome by parents at some stage, as they have already been able to attend a service on at least one occasion.
- 'Other' reasons for stopping attending services at Sure Start Crewe included:
 - The service stopped running (1 respondent)
 - The parent felt unwelcome at the service (1 respondent)
 - Children at the service were uncontrolled (1 respondent)
- Combining the findings for why parents had never used Sure Start services (section C) with the findings for why parents stopped using Sure Start services (section D), allows the most common reasons for not attending services to emerge.
- The pie chart below shows the most common reasons why parents did not access services, including the number of respondents who cited each reason.

Figure 7: Pie Chart showing the most commonly cited reasons for not attending services at Sure Start Crewe



7.2.3 Improving Sure Start services

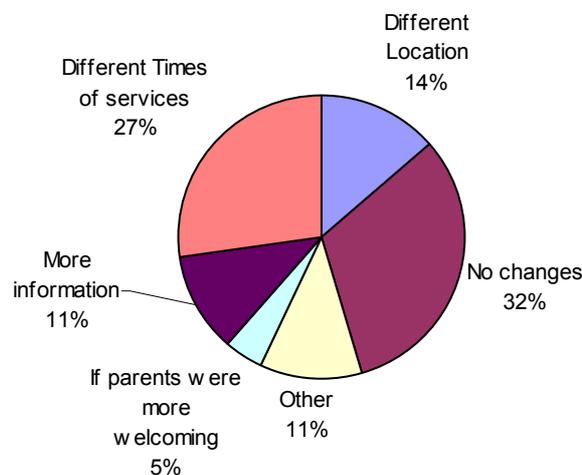
- Parents were asked if there were any services they did not use but would like to use, to which 43.2% responded that there were services that they would like to use.
- Reasons why respondents did not use the services, although they would like to, included the following:

Table 2: Reasons why respondents have not accessed services

No. Respondents	Reason why respondents have not accessed services they would like to use
7	Can't find the time
3	Times of the services inconvenient
2	Work commitments
2	Use other childcare
2	Parents are unwelcoming/don't like them
1	Didn't like the staff
1	Didn't know about service before
1	Cannot get out of the house
1	Location

- Thus, the findings here – being too busy/not finding the time, using other childcare and work commitments – support findings in sections C and D around why parents have not used services or have stopped using services at Sure Start Crewe. These reasons are, furthermore, **beyond the control** of Sure Start Crewe.
- In support of this, parents were also asked if Sure Start Crewe could make any changes to make it easier for parents to access services; 35% of respondents could not think of any changes that Sure Start Crewe could make to help them.
- Reasons for not attending services also included problems of location, the times of services, an unwelcoming atmosphere and lack of information about services at Sure Start Crewe. These reasons have also been cited in earlier sections and are **within the control** of Sure Start Crewe (for example, service provision could be provided as outreach in other areas; ‘buddy schemes’ could be set-up; an advertisement campaign could be initiated).
- Changes to the times of services, having more information about services and having services closer to home were also mentioned by respondents when asked if any changes would make it easier for them to access services:

Figure 8: Pie chart showing what changes could help respondents to access services to Sure Start Crewe

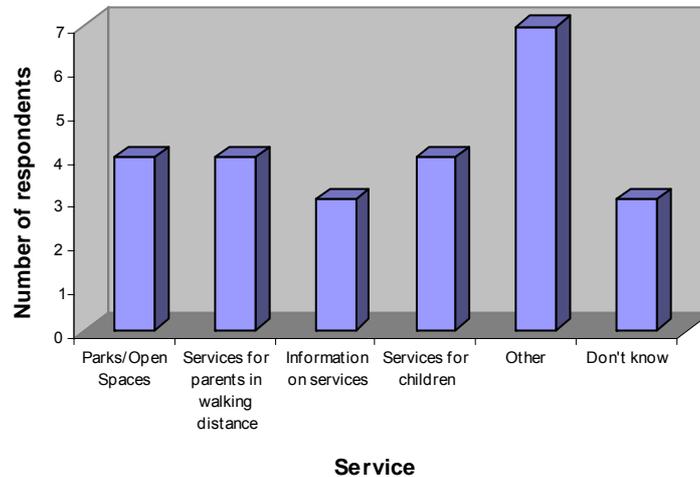


- Changes in the 'times of services' included appeals for services on weekends (three respondents), services in the evenings (three respondents), and more services in the afternoon (three respondents).
- 'Other' changes that would help parents to access services included:
 - More activities for children and parents to do together (one respondent)
 - Help with transport (one respondent)
 - Clearer rules and boundaries for parents (one respondent).

7.3 Community Involvement

- When asked if they were involved in the community in any other ways than Sure Start Crewe, 85.6% of parents responded that they were not. Of those who were involved in the community, five out of the six respondents mentioned that they were involved in the school.
- 31.8% of parents interviewed thought that there was a lack of services in the Sure Start Crewe area; just over half of respondents did not think that there was a lack of services (56.8%) and the remainder (11.4% of respondents) did not know.
- Respondents who thought that there was a lack of services in their community were asked which services in particular were lacking. More parks and open spaces, services for children and services for parents more close to home were the most popular reason cited.

Figure 9: Bar chart showing respondents' views on what services are lacking in their local community



- 'Other' services believed to be lacking included:
 - Free services to attend with children (one respondent)
 - More childcare (one respondent)
 - Facilities for children available all day (one respondent).

7.4 Conclusions

7.4.1 Non-user Profile

Non-users tend to be from the age group 30-45 years, and the majority of primary contacts for families are female (generally the mother, although sometimes the grandmother). Most non-users have one or two children with the maximum number of children being five; nearly one fifth of parents had more than one child under five. This indicates that non-users have generally small but young families.

A majority of respondents reported as being unemployed or not looking for work. A majority of respondents also reported a small annual household income. Conversely, there were a small proportion of non-users with household incomes above £30,000. Therefore, while it is possible to

say that a majority of non-users are from a lower-socio-economic bracket (SEB) there are also some non-users from high SEB. There was no correlation between educational attainment and employment, but the overall educational attainment of the sample was low with three quarters of the sample having GCSE qualifications level or below.

Non-users were also unlikely to be involved in the wider community, as well as with Sure Start services, with few engaging with community activities, such as Neighbourhood Watch, Community groups and volunteering.

This evidence suggests a range of barriers that non-users may face in accessing services. The research highlights barriers, such as lack of appropriate information and some work barriers, but also indicates a possible disengagement from the community as a whole.

7.4.2 Non Access to Services

Non-users are most likely aware of the Sure Start Local Programme, generally through their health visitor and/or midwife, although many reported that they do not always have all the information on services that they need.

Where current non-users have attended services previously, the majority are satisfied with the services that they attended, and felt that they received a personal service. Reasons why parents no longer attend services were generally beyond the control of Sure Start: explanations mainly surrounded work commitments, lack of time, and not feeling the need to use services (see Figure 7).

While parents, who never used services, also reported not attending for similar reasons, these were in a smaller proportion. They were more likely than parents who had attended, to report that they did not access

services because of lack of information, problems with location and inconvenient times and feelings of being unwelcome at services.

These are obstacles that the programme could look at addressing, for example:

- Looking at information provision about services;
- Providing outreach services; accessing parents both at home and at satellite points of contact, such as local centres;
- Repeating service activities at different times;
- Organising 'Buddy' Schemes for new parents.

8.0 Summary and Conclusions

The findings of the evaluation clearly demonstrate that the Drop-ins have had a positive impact on children and families and that this service is well used and valued by children and families. The positive impact can be seen for a number of different areas, including building the confidence of parents to access mainstream services, the provision of quality services, and an overall increase in the emotional and physical well-being of parents using the service. Drop-ins have been able to offer a holistic approach to issues that families may face.

It has been difficult to assess the overall impact of the Drop-ins against aims and objectives of the service due to the absence of specific objectives and indicators set for the service. However, it is clear from the findings that the Drop-ins have contributed significantly towards the overall objectives of the Sure Start Local Programme.

The Drop-ins also contribute to the Every Child Matters outcomes, which have been specified by the government in their new approach to the well-being of children and young people. The outcomes state that every child needs to:

1. Be healthy.
2. Stay safe.
3. Enjoy and achieve through learning.
4. Make a positive contribution to society.
5. Achieve economic well-being.

The evaluation has found that the Drop-in services clearly contribute to outcomes one, two and three and to a lesser extent to outcomes four and five. The Drop-ins have shown to improve the emotional and physical well-being of children through early intervention and support. They have

provided a safe environment for children and have addressed child protection issues. The early year's provision and the parenting classes have improved parenting skills, and have provided children the opportunities to learn and develop through play.

It is also clear that a multi-agency approach has contributed towards meeting the diverse needs of parents and providing fast referrals and accessible services. Working in partnership has meant that services are able to identify problems/difficulties with families at an early stage and ensure they are referred to appropriate services as quickly as possible. Although, there are benefits from having a wide-ranging and diverse workforce, it has raised issues that need to be considered in the future delivery of a multi-agency approach.

The evaluation has highlighted the tensions that arise due to different professional perspectives and organisational cultures; these tensions have been exacerbated by different line management structures and matrix-management. While some of these issues were eventually resolved and the evaluation found a commitment to resolve problems, a more structured, planned approach from management level would have helped in dealing with key issues more effectively.

The evaluation has also discussed the lack of a clear plan, with aims, objectives and targets, to ensure partners are clear about their role, accountability for delivery and all are working towards a defined set of outcomes. Partnership arrangements have been agreed verbally, but not consolidated in any formal way; this has also impacted on the services' ability to undertake any monitoring and evaluation, in turn making it difficult to assess impact. As the Drop-ins move towards delivery in the children's centre, these issues will have to be addressed in order that partners can position themselves positively for mainstream funding and sustainability.

Another key issue highlighted through both the staff and parent interviews, was the issue around apparent disparity in resourcing and how this affects the perception of the three Drop-in services. While it is recognised that there is a rationale for different resourcing, the evaluation shows that a lack of understanding about this rationale by parents can lead to feelings of discrimination or bias towards a Drop-in. Staff felt that while they understood the reasons behind resourcing the Drop-ins, that this could have been better planned at an early stage. This highlights the need for transparent communication and the need to ensure that parents are supported fully to be involved in the planning and decision-making stages with a good understanding of the issues.

While the model for future delivery of the Drop-ins has yet to be decided, it is likely that there will be some delivery away from the main children's centre, in various community settings. If this 'hub and spoke' model is developed, care will need to be taken to ensure a clear understanding by parents of why particular services are resourced and the different nature of delivery at each of the sites.

It is acknowledged that not all parents who use Sure Start will be able to be supported in understanding how services are resourced; those that will have this understanding are more likely to be those involved on the board or parents sub-group. Thus an interesting issue remains of how this understanding is communicated to the wider parents and carers who use the Drop-in service in an effective way.

Communication and understanding of services was a key point also highlighted by the non-user analysis. Parents who had never used services identified barriers to access, including lack of information about services and difficulty getting to and accessing more centralised services. This highlights the need to continue the outreach model, with services delivered out in the community, as well as at children's centres, and to investigate further how services can be explained to parents in the

community. Points, such as feeling isolated when starting to attend and the benefits of having a buddy scheme, have been identified not only with non-users but also with families currently using services (see Section 5.2).

Communication and involvement of parents forms a key part of participation in the Sure Start Local Programme. The evaluation aimed to look at participation of parents and carers in the Drop-in services from both partners and service provider perspective. The findings from this analysis have shown a commitment to participation by the Sure Start Local Programme, which was supported by the Strategic Board. However, the interviews have shown that in general there is a lack of understanding of what this has meant in reality, what the process involves and the resources necessary to ensure that participation is effective.

Through the interviews it was evident that different partners have a varying understanding of participation and user involvement. This highlights the need for training for all partners, including the Strategic Board and the development of a shared vision and understanding of a more comprehensive approach to participation across the Drop-in service. This would also help to generate ideas on how operational staff could be more innovative in their approaches to involvement.

The development of the community–involvement co-ordinator post has supported and encouraged parental involvement in Sure Start and evidenced some resource commitment to participation. Having a dedicated worker is widely recognised as good practice for ensuring effective participation. Indeed, while it was difficult to pinpoint, the start of the co-ordinator role corresponds to an increase of involvement by parents on the board.

Recommendations:

Future Delivery

The evaluation has evidenced the great impact the Drop-ins are having on the lives of children and families, especially with regards to accessing mainstream services and engaging with parents from hard to reach groups. The cluster model has helped to bring the Drop-in service to a wider range of communities.

- Sure Start should ensure that the Drop-in model continues into the children's centre; however, this must take into account key developments around the management of strategic development.

Co ordination and Management of the Drop-ins

The evaluation has highlighted several key problems in the operational management and co-ordination of the three Drop-in sites. While the role of the co-ordinator has been specified in the original contract between the NSPCC and Sure Start for Full Circle, this has been adopted and modified in its delivery for the other two Drop-ins. In addition, matrix management of the co-ordinators has led to some confusion about operational issues, such as policy implementation, monitoring/evaluation and training.

- A clear job/role description, with defined working parameters, should be developed and reviewed, as necessary, for the co-ordinator position. This description to be communicated to all staff and partners.
- Sure Start should look realistically about centralising the management of the Drop-ins to ensure consistency with operational management issues. This may involve having one manager for all three Drop-ins, or a supporting manager to manage the three local co-ordinators. This recommendation is also important in the transition to children's centre, if it is decided that several community-based Drop-ins are to occur.

This will ensure that Drop-ins delivered remotely from one base are co-ordinated and work together more strategically.

Strategic Development of the Drop-ins

Currently, the Drop-ins have no clear aims and objectives, nor any understanding about how they are delivering or achieving against specific outcomes.

- The Sure Start Board develops clear aims and objectives for the Drop-ins in line with the ECM outcomes framework. These may reflect the findings in the evaluation; the Drop-ins are delivering primarily against ECM 1, 2 and 3 and to a lesser extent ECM 4 and 5. Clear targets with indicators (or measures) should be developed that link to these outcomes. This is a vital development in terms of transitioning to children's centre.
- In conjunction with the aims and objectives the Board should develop a terms of reference, indicating how these aims will be delivered practically. An example of the contents for terms of reference can be found in Appendix V.
- Sure Start should ensure, alongside this strategic framework, a plan for consistent monitoring and evaluation for the Drop-ins is developed. All partners should understand their role in achieving this. In addition, Sure Start should look at developing a dedicated member of staff to support this process.

Multi-agency Working

Multi-agency working happens both strategically and operationally within the Drop-in cluster model. Problems have arisen through a lack of clarity around the purpose of the Drop-ins and involvement of various partner agencies. Good practice would indicate some formal agreement between agencies to ensure clear roles and responsibilities for delivering services.

- The defined framework and terms of reference for the Drop-ins (see above) should be communicated with all partners and Drop-in staff to ensure understanding about the purpose of the Drop-ins.
- Formal contracts/ agreements should be drawn up between partners, detailing roles and responsibilities, code of conduct, complaints procedure, line management, requirements for monitoring and evaluation against defined framework and commitment to participation.

In the transition to children's centre, the resources available for partnership working may change (see section 4.9 page 52). In turn, this will have implications for the effective delivery of partnership working with the resources available. Partnership working will need to be more robust, formalising the process will ensure all parties are aware of their responsibilities for delivering effective services.

Communication

Communication was identified as a problem at several different points within the Drop-ins. Parents felt uninformed about service delivery, for example when talks were being held, staff felt there were some communication problems around operational issues.

- Sure Start should ensure that the lines of communication are clearly understood at all levels of the Drop-in service and should develop a communications strategy. This in itself does not need to be complex; a strategy will help to establish what these lines are, where gaps in communication exist and the development of additional communication pathways. At a minimum, this could cover communication between board and Drop-in co-ordinators, the co-ordinators and the parents and from the parents back into the sub-group.

Parental Involvement and Participation

The evaluation has shown that there is some good work happening across the Drop-ins in terms of engaging with parents and carers. However, there are still some gaps in the approach.

- In the short term, Sure Start should look to introduce a simple, yet formal, feedback process for parents to comment on the Drop-in service. This process should include clarity about how comments will be dealt with and clear mechanisms for the Drop-ins to report back on comments made.
- Sure Start should ensure strategic commitment to participation by developing a parental involvement strategy. This will include work with all partners to clearly define what user involvement means, ensuring that everyone has shared understanding of the concepts and is clear about the process of achieving this. Furthermore, roles and responsibilities need to be clarified so that all agencies and staff are clear about their individual roles in the process.
- Sure Start should ensure the continuation of a dedicated support officer to maintain and develop the current level of community involvement. Having a dedicated worker to support participation is widely acknowledged as a key element for successful ongoing involvement.
- Training should be provided for board members and partner agencies and staff on participation.
- Participation is not an activity or process, but rather a commitment to a particular approach. Within this, it is important that staff have time to reflect and discuss key issues and problems and gather support and feedback from peers. Sure Start should ensure that staff and partners have opportunities to discuss and develop ideas around participation, sharing techniques and creating a forum for innovation.

Issues to Consider for the Transition to Children's Centre

The conclusions and recommendations above discuss many of the issues, which are relevant for transitioning the Drop-in services into a children's centre. Much of this will depend on the strategic developments to come, such as structure and resourcing. However, some key points to consider are:

- Recognition of the value of the Drop-ins and linking this service with the wider strategic development of the children's centre.
- The cluster model has worked well to deliver Drop-in services in a variety of communities; as far as it is possible this model should be implemented within the children's centre. However, it is important to ensure co-ordinated management.
- Services should be developed and delivered to ensure there is equity of services across the board. Children's centres need to be aware of this and ensure that there is equity of services.
- Service delivery issues – the children's centre management should ensure that policies are ready before start of operations eg complaints policy. All agencies and staff involved should have training on the policies and how these should be implemented; this should be reviewed regularly. Policies should be developed in advance, especially for crèche and early years provision.
- Include practical information, such as where is the first aid box located, health and safety, names of staff responsible for areas like health and safety, named first-aider, how to report incidents, child protection, framework of how the Drop-ins are run, etc.
- There is an opportunity to engage parents and carers early in participating in the delivery of Drop-in services in the children's centre. Sure Start should look at building on the current work done with parents, both within the Drop-ins and other services, to ensure that they are involved early on.

Appendices

Appendix I: Framework for analysis of Sure Start Crewe

PARENTS RESEARCH

1. Uptake of service

- 1.1 Parents perception of the purpose of Drop-ins
- 1.2 Reasons for using the service
- 1.3 Access issue- how they found about service/suitability of timings and getting to the venue
- 1.4 Experience of new users/when first started attending the service, views on information pack
- 1.5 Suggestions for improving the induction process

2. Views on existing provision

- 2.1 Physical layout of Drop-in
- 2.2 Facilities (range of activities?) for children
- 2.3 Quality of equipment

3. Views on Drop-ins as a model of service delivery/approach

- 3.1 Barriers to using mainstream services
- 3.2 Advantages of this model - how it helps overcoming these barriers
- 3.3 Specific aspects of the Drop-ins that help parents access mainstream services

4. Views and experiences of Drop-in services

- 4.1 Information/knowledge of the different services provided at the Drop-ins- how they find out about these.
- 4.2 Views on individual services
- 4.3 Services identified as most useful and reasons for this
- 4.4 Gaps in service provisions (consistency across the three Drop-ins)

5. Impact of services

- 5.1 Impact of using the service on parent, children and families-how the service helped
- 5.2 Changes and benefits gained as a result of using the services-examples, short term and long-term changes.

6. Views on staff and management

- 6.1 Positive attributes of staff, eg helpful, fun, approachable
- 6.2 Negative aspects of staff, eg difficulties, clash of personalities, complaints
- 6.3 How difficulties are dealt with
- 6.4 How praise is fed back to staff/ how do parents tell staff they are happy

7. Consultation and user involvement

- 7.1 Views on current practice of consultation and user feedback, gaps in the practice
- 7.2 Awareness of structures and mechanisms for involvement, eg parents sub-group, review meetings etc
- 7.3 Views on parental involvement
- 7.4 Key issues to be addressed
- 7.5 Suggestions/recommendations to improve practice

8. Transition to Children's Centre

- 8.1 Knowledge/understanding of the transition
- 8.2 Views on the new structure
- 8.3 Issues and concerns

Recommendations under each section

Appendix II: Topic Guide – Research with Parents

SURE START – PARENTS

September 05

1 Introductions

Name, family, where they live

2 Accessing the service

When did you start using the Drop-in?

How did you hear about the service?

How did you hear/find out about it?

How often do you use the service? (Regularly/once a month)

Views on venue/opening times

How easy is it to get to the service? Transport issues?

Timings- sessions at convenient times/ should these be increased /more demand?

3 Induction/Introduction of new users

Welcome pack

Any leaflets/booklets about the Drop-ins?

Views on welcome pack: does it provide sufficient information about the Drop-ins? Gives a good overview of the service? Enough details about service offered? Is the language /format accessible? How can it be made better/friendlier?

What other information should be included in the pack?

Draw a picture about your life/family situation before you started coming to the Drop-ins? 5 min

What were your feelings when you first joined? Did you feel comfortable using the service? Why/why not?

What made you feel comfortable? What can be done to welcome new users?

How do you feel using the service now?

What are the things that can make people feel unwelcome?

4 Awareness and understanding of the service

What in your opinion is the main purpose of having the Drop-in service?

Why do you use the service?

Views on having different services under one roof? What do you think of this?

Easy to access/ too overwhelming?

5 Views on Services

Layout – what do you think of the layout?

Childcare facilities /play activities for children?

Show cards:

Sort cards-list all services and get views on individual service.

What are the different services /activities in the Drop-ins?

Which services have you used? How did it help?

Which services haven't you used? Why?

Which services do you find least useful? Why?

Ranking exercise –rank the services according to how useful they are?

Were you aware of the range of services/support before joining the Drop-ins?

How satisfied are you with what goes on in the sessions? What do you like and what would you like to change?

Have you started using any mainstream services as a result of attending the Drop-in sessions?

Do you prefer to use these services via the Drop-in rather than going directly? Reasons?

What barriers do you face any using mainstream services? Which model do you prefer and why?

Value

What benefits has this had for you and your children? Probe both.

Impact

What difference has the Drop-ins made to your lives? Which services have made a difference? Specify the difference?

What happened as a result of using the specific service? What changed as a result? Eg, took the child to the dentist, brushing the teeth, better parenting, went to the GP, started training for a job, got a job, started reading books to the children.

Probe- isolation, helped access other services, information about support available, accessing health service, financial help, coping better with children, parenting, making friends, change in eating habits-as specific as possible.

Which specific services have had the most impact? How?

How have these services helped you in dealings with your children?

Can you give an example of any positive change in your dealings with your children as a result of using the service?

Draw a picture about how you feel now- after using the Drop-in?

How do you feel now? What has changed and why?

6 Views on staff and management

Is the Drop-in well run? How can the running be improved?

Is the staff friendly and polite?

How confident do you feel about discussing your personal matters with staff?

How does staff deal with difficult issues or situations where there may be tensions with other parents?

Are you aware of the complaints procedures?

How does staff handle complaints? Are you satisfied? How can this be improved?

7 Consultation and level of involvement in decision-making

What opportunities are there to give your views/feelings about the services?

How do you give feedback about services? Are there any systems/methods there in place for you to express your views?

What can be done to make this better? How can this be improved?

Parents/carers subgroup- views on this. How do you feel about this?

Review meetings- how effective are these? Do you attend? Heard about this?

How involved have you been in the Drop-ins? Examples- positive and negative.

What can be done to encourage you to be more actively involved? What are things you would like to get involved in? Want to be involved at all?

8 Views on transition and forthcoming changes

How much do you know about the changes to the service?

What are your main concerns about these changes?

How do you feel about the children's centre?

How easy would it be for you to use the service at the centre?

What are the services that should be continued in the new centre?

9 Final

What are three good things about the Drop-ins?

What is it you like about the service?

What is that you dislike?

What would you like to change in the Drop-ins to make it better?

Has Sure Start been able to meet their aims about supporting parents through the Drop-ins?

Appendix III : Participation Workshop Outline

PARTICIPATORY RESEARCH AND EVALUATION

WORKSHOP ON PARTICIPATORY APPROACHES TO PROMOTE THE PARTICIPATION OF PARENTS IN SERVICE PLANNING AND DECISION MAKING.

The aim of the workshop is to provide information to Sure Start staff for involving parents/service users in participatory research and evaluation.

The half-day workshop would examine issues that should be considered before undertaking either research or evaluation with parents/service users and the kind of support and resources that are often required to make the process successful.

The workshop will be participatory. It will be a combination of presentations and group exercises. It would provide an overview of the different areas involved in peer evaluation and the practical training required to develop parents' competence in planning and conducting the evaluation.

The following issues will be discussed:

- Introduction to participatory approaches – participation, peer research, peer evaluation.
- Levels and degrees of participation.
- Process and stages involved in peer research and evaluation.
- Barriers and solutions to undertaking peer research and evaluation in Sure Start programmes.
- Training and support needs for staff and parents.
- Action planning.

Appendix IV: Questionnaire used by Parents

**PARENT/CARER QUESTIONNAIRE
 SURE START EVALUATION**

This questionnaire is to find out what you think about the Drop-ins provided by Sure Start. Your views are very important to us and will be part of a report to review how the Drop-ins have been working.

1. How long have you been coming to the Sure Start Drop-in?

Less than a month ↓	3-6 months ↓	6months- 1-year ↓
1-2 years ↓	2+ years ↓	

2. How do you feel about the services provided at the Drop-ins?



Happy



Sad



OK

3. What do you like about the Drop-ins?

**4. Do the Drop-ins help you in any of the following ways?
 (Please underline, you can underline more than one reply)**

- I am more confident
 - I eat more healthily
 - I feel more secure
 - I have a better relationship with my child
 - I play more with my child
 - I have made new friends
 - I have quit smoking
 - I feel better prepared for when my child goes to school
 - I have more skills
 - This service doesn't help me
 - Other-----

5. Have the Drop-ins helped your child or children in any of the following ways? (Please underline, you can underline more than one reply)

- Their health has improved
- They have made new friends
- They eat more healthily
- They are more protected
- They are more safe
- They are more sociable
- Their reading has improved
- They have more time to play
- They are more confident
- Their behaviour has improved
- This service doesn't help them
- Other -----

6. Which services do you find most useful at the Drop-ins? List all services that you find useful.

7. What don't you like about the Drop-ins?

8. What improvements/changes would you like to see in the Drop-ins? How could it be made better?

9. How often do you have the chance to give your views and feedback about the Drop-ins?

I very often have the chance to give my thoughts about the Drop-ins.

I sometimes have the chance to give my thoughts about the Drop-ins

I don't often have a chance to give my thoughts about the Drop-ins

I do not have a chance to give my thoughts about the Drop-ins

10. How would you like to be involved in the group?

Appendix V: Example Terms of Reference

Terms of Reference for the Drop-ins stating clearly purpose of the Drop-ins, state criteria for agencies to be involved and the reasons for their involvement, specify roles and contributions to the overall objectives, state how the services will be delivered at the centre.

At a minimum a terms of reference should contain the following sections (or sections that explain these issues):

- The purpose of Drop-ins.
- The approach or how services will be delivered, including the roles and responsibilities for each partner.
- Outline of structures and mechanism for sharing information.
- Clear lines of communication.
- Commitment to user involvement and participation with a definition of what this means. There should be a strategy/plan to this and there should be a designated person responsible for implementing.
- Complaints procedure.
- Mechanism for reviewing the terms (ie every six months).