An evaluation of improving practice in Sure Start

February 2020

ETI: Promoting Improvement in the Interest of all Learners
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1. Introduction

1.1 The findings of this third evaluation are based on evaluative visits to 11 Sure Start projects to evaluate a selection of self-nominated case studies of improving practice. Three projects nominated more than one case study.

1.2 The rationale for this approach was to provide time for leadership and management at all levels, to plan for and implement recommendations from the previous Education and Training Inspectorate (ETI) reports¹ and to align the individual projects’ own self-evaluation with external evaluation through provided by ETI. In addition, the evaluation of effective practice provides examples which can disseminated regionally and enable key features of effective practice to inform the development of quality indicators for all projects.

1.3 This report comments on and illustrates examples of highly effective provision with evidence of good outcomes for children and parents and also examples of reflective and improving practice through detailed case studies. The projects visited are at different stages on their improvement journey ranging from those with high quality practice and evidence of outcomes already embedded, to a few examples in which projects have made a good start to identifying their strengths and areas for development, but are still at an early stage of implementing and evaluating fully their actions.

1.4 All of the projects included in this report demonstrate a reflective approach to their work and are developing effective internal self-evaluative processes which are leading towards improvements in their leadership and management, provision and outcomes for children. In addition, the project managers who submitted case studies value external evaluation to inform their practice in the best interest of the families they serve.

2. Focus of the evaluation

2.1 The evaluation focused on how effectively projects use self-evaluation to bring about improvement in aspects of work that relate to key themes emerging from the recommendations in the two previous evaluations by the ETI¹. The projects submitted case studies through a self-nomination process to illustrate their journey of improvement linked to these key themes. Further details on the inspection methodology and the content of the key themes can be found in appendices A and C.

2.2 The overarching key themes based on the findings from the previous ETI evaluations of Sure Start were:

- effective engagement with and outcomes for parents;
- high quality play and learning experiences for children;

• effective links with pre-schools and schools; and

• effective working between Programme Specialist Support and Sure Start leadership and management and staff to bring about improvements.

3. Summary of key findings

Key strengths

• Almost all of the case studies nominated and evaluated were of a high quality. Two of the nominated case studies were not implementing the planned programmes at the time of the visits and as a consequence ETI were unable to verify their effectiveness. In one project, the staff were at a very early stage of implementing a new approach.

• The projects are developing a more consistent and effective culture of reflection and self-evaluation combined with external evaluation as a means to bring about continuous improvement in the best interests of the children and parents.

• A combination of qualitative and quantitative data is used to track the engagement and progress of children and parents, which along with case studies, demonstrates the positive impact of the services and programmes being provided.

• The highly effective practitioners, from varying professional disciplines, engage in continuous professional development and training which is cascaded to staff to enhance their delivery of programmes and services.

• The programme support specialists for the Developmental Programme for 2-3 Year Olds provide effective feedback to staff and disseminate best practice among the groups which promotes quality learning experiences for the children.

• There is effective inter-disciplinary team collaboration and sharing of information to identify and follow up on the needs of families and children at the earliest stage.

• Partnerships with local pre-schools are improving and developing further to promote smooth transitions and build on each stage of learning and development for the child and parent.

• The project staff interweave health and education messages in an effective and holistic manner as they implement a wide range of high quality programmes and services.

• The resources used to deliver programmes and services to the children and the parents are of a high quality and are used effectively to engage children and parents during sessions.

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Areas for improvement:

- The processes for monitoring and evaluation within projects do not consistently include sufficient emphasis on direct observation of practice to evaluate the effective implementation of programmes.

- There continues to be too much variation in the expectation and effectiveness in the involvement of parents in the Developmental Programme for 2-3 Year Olds across projects.

- Where there are service level agreements to deliver programmes the lines of accountability for monitoring and evaluating quality are not always clear enough.

- The project leaders, who are under increasing pressure to balance the need for the management of complex staff structures, monitoring and evaluation of provision and outcomes and the associated range of documentation requirements, need simplified systems of reporting.

Key findings

The following key features of effective practice were evident in most of the case studies evaluated and provide indicators of quality practice.

Leadership and management of the projects

- Leadership along with their staff teams review their vision, aims and value base and re-aligned them with the core aims of Sure Start at timely intervals.

- The leadership and staff carry out extensive work to understand well the context and needs of their local community which is then taken into account when planning to meet needs and overcome potential barriers of access and engagement.

- Staff roles and responsibilities are agreed with clear lines of accountability.

- Leadership and management have appropriately high expectations of their staff; while also prioritising their care and welfare, through effective communication, staff supervision and identifying their training needs to equip them for their roles.

- The leadership and staff are willing to take risks and be innovative in their practice. They use a systematic process to prioritise their use of resources and identify short, medium and longer term outcomes.

- The leadership, management and staff at all levels reflect on their services by asking themselves pertinent questions about what they are doing, how well they are doing it and what difference it is making. As a result, changes are being made to improve quality, effectiveness and outcomes for children and their parents.
• There are individual staff who ‘champion’ specific aspects of the work using a high level of specific professional skill, vision and motivation to staff and volunteers, resulting in high quality provision and outcomes.

• Effective practice is identified and shared within the project, across projects and with local pre-schools.

Next steps

• Project managers, are under increasing pressure to balance the need for the management of complex staff structures, monitoring and evaluation of provision and outcomes. There is a considerable range of associated documentation and reporting requirements which need to kept under review to ensure manageability and effectiveness.

Monitoring and evaluation of quality and outcomes

• There are clear roles and responsibilities for monitoring and evaluating the quality of the provision including the analysis of available data to identify areas of work that are working well and those that require review and further improvement.

• The leadership strategically review and streamline documentation to ensure it is fit for purpose and is informing their work in a meaningful way.

• Monitoring is refocused from collecting figures to monitoring the quality of the services and the impact they are having for families and their children.

• Leaders map trends to review increases in attendance and engagement and then plan actions to bring about improvements.

• There are clear roles and responsibilities for monitoring and evaluating the quality of the provision; monitoring includes first-hand observation of staff implementing their training in practice.

• A wide range of tools and systems are used effectively to capture outcomes for children and parents.

• The analysis of available data is used to identify areas of work that are working well and those that require review and further improvement.

• The use of assessment tools is reviewed and amended when not working effectively.
Next steps

- The leadership and management do not always incorporate first hand observation of practice into their scheduled monitoring and evaluation to evaluate the effective implementation of programmes. Giving this a higher priority will provide a more robust evidence of staff capacity, help to identify any further training needs and help to maintain consistency in quality.

- Where there are service level agreements in place to deliver programmes the lines of accountability can be complex and the roles and responsibilities less clear. This has the potential for less effective monitoring and evaluating of quality.

Staff skills and ongoing capacity building

- Highly effective practitioners, from varying professional disciplines, bring a wide range of skills and experience to their roles.

- Staff engage in continuous professional development both within their own professional pathways and from training opportunities cascaded to staff from within the projects.

- Staff apply their training with a consistency of approach across the range of teams, to enhance their delivery of programmes and services.

- Staff engage in action research to keep well-informed and link with other organisations to access bespoke training for particular programmes.

- The use of volunteers with particular professional experiences and skill sets enhances programme delivery.

- The Programme Support Specialists for the Developmental Programme for 2-3 Year Olds provide initial and ongoing training and promote sharing of practice across projects. Their action plans are focused with clear strengths and the areas still requiring improvement, along with identification of key personnel within the project who will monitor the ongoing progress of the staff.

Interdisciplinary working

- Health visitors, midwives, speech and language therapists, family support workers and childcare workers share information and signpost families to the relevant member of staff.

- The ‘collaborative decision making model’ used by a number of projects, promotes an approach that is led by identifying the needs of the family and matching their needs with the most relevant member of staff.

- Where there is no midwife or health visitor employed specifically as part of the project, links are made, where possible, with the core services or other staff, such as the family support worker, who have been upskilled to deliver relevant programmes and support home visiting.
Partnership working

- Leadership and management foster actively effective partnership working.
- At a strategic level community partnerships work closely with more than one Department to support a joined-up approach tailored to the local community.
- Links with local organisations and charities add value to existing services; providing volunteers to help parent's access services and additional resources for a range of programmes.
- Community buildings are used as venues and libraries and library staff contribute to enhancing programme delivery.
- Partnerships with family hubs and other organisations help staff to signpost parents to ongoing support.
- Partnerships with local pre-schools are being developed to promote smooth transitions and build on each stage of learning and development for the child and parent.

Implementation of programmes

- In the best practice, the leadership, management and staff have high expectation of parent's involvement in the Developmental Programme for 2-3 Year Olds and follow through when attendance dips.
- Staff combine both good parent facilitation skills and child led play skills which optimise the levels of engagement and learning taking place.
- Staff build trusting and caring working relationships with the parents while keeping their professional boundaries.
- Staff listen attentively, interact sensitively and observe carefully to identify needs and signpost and support families as required.
- Staff reinforce prior learning and embed the key messages of the month effectively across the different elements of the project.
- Staff interweave health and education messages in an effective and holistic manner as they implement the programmes and services. They interconnect the promotion of speech, language and communication, social and emotional development, physical development, and the mental and physical well-being of parents and children.
Next steps

- There continues to be considerable variation between projects in their expectation and effectiveness of the involvement of parents in the Developmental Programme for 2-3 Year Olds across projects. This varies from a commitment to weekly attendance to an expectation of a monthly commitment. While some flexibility of approach is required to meet local needs, the range in variation remains too wide to ensure all parents benefit fully from the programmes intentions to have parents at the core of the delivery.

Response to individual needs of families within the local community

- The leadership and staff carry out extensive work to understand well the context and needs of their local community. They take this into account when planning to meet needs and overcome potential barriers of access and engagement. This can include for example levels of obesity, disability, inter-community strife and social pressures.

- The staff are flexible in their approaches and tailor them to the needs of individual families and their circumstances. They may, for example, provide home support for a period and then accompany a parent to a group before helping them to build on this one-to-one support and transitioning independently to a group programme.

- Families with English as a second language have materials translated for them.

- Staff respond to priority needs that are impacting negatively on a family’s ability to support their child for example, signposting and supporting with housing, benefits, attending court or accessing practical equipment for a child with a disability.

Use of high quality resources

- The resources used for the children and the parents are of a high quality and are used effectively to engage children and parents during sessions.

- Parents are provided with suitable helpful advice about how to access and use resources that are cheap and readily available in the home environment to extend their child’s learning and development.

- Staff build on what parents use every day to access information to communicate messages, including effective use of technology to illustrate messages to parents, for example, through video and a QR code on a card to share the same message with family members.
Outcomes for parents and children

• The positive impact of services and programmes is demonstrated through a combination of qualitative and quantitative data which is used to track the engagement and progress of children and parents.

• Projects use a range of assessment tools and programmes which they keep under review to monitor their effective implementation and success in measuring outcomes.

• The projects have collated evidence about the positive impact for parents, such as, building their parenting skills, health, well-being, increasing social engagement and confidence.

• The projects have collated evidence about the positive impact on children including their communication skills, social, emotional, physical and cognitive development.

• Staff are helping the parents to consider “life after Sure Start”. There are examples of parents who volunteer, begin to build skills and confidence and then take part in further education pathways and employment including as a paid member of staff within Sure Start. Other parents are initiating and building supportive networks from their initial contact in Sure Start that can be continued on once their child is no longer eligible to attend.

Wider challenges that need to be overcome

The evaluation findings highlighted a number of challenges that inhibit the work of the projects and need to be kept under consideration in future planning.

• Some parents still view Sure Start as ‘social services’ which can create a barrier for some most vulnerable families. The universal nature of the projects within the catchment areas has contributed in part to alleviating this stigma.

• A number of project leaders raised the concern that funding does not always follow pockets of deprivation, leading to vulnerable families who would benefit the most, being unable to access Sure Start services as they do not live within a specific catchment area. Equally there can be pockets of affluence within some Sure Start areas as a result of demographic and housing changes, this can lead to those who may be less in need benefiting from the services. Sure Start projects are encouraged to use the ‘Progressive Universal model’ to direct support at local level.

• The demand for support services from local ‘Family Hubs’ is so great in some areas that they are no longer taking referrals. This can leaves families in need without access to necessary support as they transition from Sure Start to pre-school.
• Where a key member of staff is absent over a prolonged period and there can be difficulty in recruiting temporary staff with the necessary skill set, leading at times to gaps in services and a slower pace of improvement.

• Nursery schools report children with complex special educational needs coming through Sure Start, are not moving, through the Code of Practice for Special Education Needs\(^2\) soon enough and when it is deemed appropriate to do so. Where several children with high level of need transition to a pre-school without the necessary additional support, this impacts negatively on the quality of provision the pre-school can provide and puts undue strain on the staff, parent and child.

**Recommendations**

The following recommendations emerging from this evaluation have relevance for those providing leadership and management to Sure Start at all levels.

**The leadership and management within the projects need to:**

- ensure those responsible for monitoring and evaluating quality are clearly identified within the projects, be clear on the criteria they are using to make accurate evaluations and include an element of first-hand observation of practice to evaluate more fully the effective implementation of programmes;

- develop further consistency and effectiveness in sharing the ‘message of the month’ with parents and local pre-schools through internal monitoring and sharing practice regionally;

- provide clarity on roles and responsibilities and lines of accountability when a service level agreement is in place to deliver aspects of the practice; and

- take cognisance of the features of effective practice and case studies in this evaluation to reflect and inform their own self-evaluation and improvement processes.

**The Child Care Partnership managers in conjunction with the Health and Social Care Board need to:**

- ensure that where a specific programme or approach is introduced regionally the effective implementation, outcomes and impact are monitored, evaluated and reviewed regularly in collaboration with leaders, relevant managers and project staff;

- disseminate the effective practice identified within this report to support self-evaluation and improvement across projects; and

- use the key features of effective practice to inform the development of quality indicators of effective practice.

The Department of Education and Health and Social Care Board need to continue to work together in order to:

- provide further clarity on the expectation of attendance and involvement of parents in the Developmental Programme for 2-3 Year Olds which currently varies from 80% once a week to 80% attendance once a month;
- continue to monitor and evaluate the most effective forms of governance and to analyse advantages and benefits that can be shared across projects;
- develop systems further to provide longer term tracking of parents and children into pre-schools and school in order to assess the longer term benefits for children and their families; and
- keep under review the documentation required from projects to provide a streamlined approach that is manageable and with a clear rationale and purpose that is fully understood by staff.

Conclusion

This report clearly illustrates how many children and parents are benefiting from the wide range of Sure Start services being delivered effectively at a local level. The leadership and management are continually striving to improve the impact and outcomes of their practice in the best interests of the children and parents within their communities linked to local needs.

It is clear that projects are influenced by their own community context, the particular focus of their lead body and the strategic approaches set by leadership and management at all levels. It is the skills and expertise of the staff working day to day within individual projects who translate the advice and guidance into effective practice which leads to best outcomes for children and families. It is therefore at individual project level where most meaningful evaluation, review and improvement is taking place. This report provides information that can be used to inform strategic direction at regional level and also provide effective practice examples that can be used to contribute to the work at individual project level.

In addition to identifying many examples of effective practice, this evaluation has also identified a number of areas which require further reflection and action at all levels of leadership and management to bring about continuous improvements. These, along with the recommendations from the previous evaluations, will inform the next ETI evaluation of Sure Start.

The projects that self-nominated to be a part of this evaluation are commended for participating voluntarily in this evaluation as part of their own professional development and ongoing journeys of improvement.
4. Case studies of improving practice

4.1 Ballymena and Little Steps Sure Start

Case study focus:

4.1.1 Responding to the needs of parents: Targeted home visits as part of the Parenting Support Services.

Linked to the key themes:

- effective self-evaluation leading to improvement;
- effective engagement and outcomes for parents; and
- high quality play and learning experiences for children.

Contextual information:

4.1.2 Ballymena and Little Steps Sure Start is located in an urban area with an increasingly diverse population of ethnic minority groups. Services are provided from three centre bases with the main offices for the Sure Start situated in the St Joseph’s Early Years centre in Ballymena.

Journey of improvement:

4.1.3 The leadership and management take a strategic and self-evaluative approach to their work. When the manager took up post, the existing services, home visits and programmes for families were reviewed and strengths and areas for development were identified. Home visits were reaffirmed as an essential part of their Sure Start work; particularly in supporting the most vulnerable families with a diverse range of adversities which impact parenting, family life, their health & wellbeing and their approach to their children’s learning. There was also a commitment to addressing these complex socio-economic difficulties through a range of evidence informed interventions.

4.1.4 It was noted that while targeted families were receiving valuable support through the Family Support Programme, the needs of other families requiring less intensive support were not sufficiently considered. The need for additional home visits was identified for parents not yet confident to attend a group in the centre and who were suffering from a range of anxiety, emotional distress or domestic violence.

4.1.5 The whole team was involved in restructuring the Family support staff into two new teams; a Parenting Support Services team and Family Time Services team. There is also a child development team, antenatal and postnatal team. One team was to focus on vulnerable families with specific support services and another team to focus on a more universal and holistic approach to encourage parents to use the services within the centre. The Parenting Support Services team target their support to the most vulnerable families using a wide range of evidence based interventions and the Family Time Services Team is a softer more universal approach over a shorter period of time, focusing on social development and developing play skills at home.

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3 There were no first hand observations carried out during this visit.
4.1.6 The manager, along with the staff, established a new style of home visit record to ensure that the needs of the family could be more readily identified through planned evidence based work with outcomes tracked and shared. A case file discussion record is completed collaboratively outlining actions and successes which are shared across teams and with the families. This is in the process of being developed further with the design of an inclusive closure report intended to give parents the chance to reflect on their journey, measure the distance they have travelled and identify next steps as they transition into internal or external services.

4.1.7 The continuity of the same family practitioner staff over a period of time, supported by permanent contracts, builds trust with parents and contributes to a climate for continuous improvement among the staff team.

4.1.8 Time is protected to ensure that the staff receive regular and relevant training to build further their capacity and support them in their roles.

4.1.9 The developmental work being done is helping the staff to target the needs of families experiencing stress and conflict more effectively. One example is as follows: a father who had worked as a chef, was off work as a result of significant mental health challenges. This had significantly impacted his wellbeing and consequently his approach to parenting. He completed a significant piece of home visiting work with the family support practitioner. Utilising evidence-based parenting techniques through home visiting this dad’s wellbeing, self-esteem & responsive parenting improved-to a place where he began to come onto site and even delivered a cooking demonstration to families of his daughter’s Developmental Programme for 2-3 Year Olds Stay & Play group. His wife also completed Cook It.

4.1.10 Another parent reported how attending a programme, facilitated by Sure Start practitioners, ‘Fathers Reading Every Day (FRED) in the local library had encouraged him to read more to his son, despite his own poor experience of school and reading. The Sure Start staff who delivered the 4 week programme had attended a facilitator training by the Fatherhood Institute.

4.1.11 One single parent reported feeling very anxious at home with the children and at times overwhelmed. With the support of the family practitioner staff and support and practical suggestions on how to make home life more manageable, she now attends the centre for courses and joined the parent focus group to share her journey with other parents and families.
Key features of developing effective practice:

- A commitment to promoting high quality services.
- A culture of reflection, review and continuous improvement.
- Valuing the expertise and knowledge of the staff.
- A collegial approach across all services, in collaboration with a parents’ focus group.
- Evidence that improvements made are having a positive impact on parents and children.

Next steps:

- Continue to embed the new structure and approaches.
- Continue to monitor the impact on children and their families.
4.2 Down Sure Start 1

Case study focus 1:

4.2.1 Engaging antenatal families.

Linked to the key themes:

- effective self-evaluation leading to improvement; and
- effective engagement with and outcome for parents.

Contextual information:

4.2.2 Down Sure Start project central offices are located in a spacious rented building within Downpatrick. The project covers 8 ward areas including a large urban area around Downpatrick and several outlying rural and seaside towns including Newcastle (Murlough ward), Strangford, Killough and Ardglass.

4.2.3 Northern Ireland statistics indicate that there is a higher than average occurrence of families with a child who has a disability within the Down Sure Start catchment area. Additionally 5 out of the 8 ward areas show above the NI average of children living within low income families.

Journey of improvement:

4.2.4 The DOWN Sure Start midwife is also a community midwife and promotes the Sure Start services at an early stage to ante-natal families within the local community. This is often the first point of contact for families with Sure Start and understanding what it can offer. A wide range of programmes and services are accessible to parents including Mellow Bumps, Solihull\(^4\) approach to ante-natal, Baby Brain, antenatal yoga/Pilates and home visits. There has been a significant increase in ante-natal registrations to Sure Start as a result of this work. Excellent working relationships are reported between the midwife, core maternity services, the health visitor and general practitioners.

4.2.5 There are also close working relationships among the range of Sure Start staff including the health visitor, family support worker and midwife to support first time and vulnerable mums. The New Parent Programme based within the Sure Start building has clear criteria for receiving specific targeted support: the parent must live in the area and be considered vulnerable due to drugs, alcohol, and involvement in the care system, or have poor mental health. The NPP health visitor and family support worker carry out joint home visits for approximately 20 to-24 weeks. They help the parents to register with Sure Start and follow up on attendance, providing transport if necessary.

4.2.6 Referrals for the ante-natal programmes can come from social workers, other professionals or mums can self-refer. The Sure Start project staff have developed close working links the with health improvements team due to the high rate in the areas of smoking during pregnancy.

\(^4\) The Solihull Approach has developed a range of resources, groups for parents and training for professionals working in the antenatal period through to parenthood (birth to 18 years). The approach is an integrated model and theoretical framework for thinking about your work with women and their families.
4.2.7 The leadership and management monitor outcomes through the collection and analysis of a range of data. They monitor the numbers attending and track impact through the adult well-being scale and post group evaluations. The staff running programmes, such as, Mellow Bumps use pre- and post-evaluations and focus groups for feedback.

4.2.8 Staff complete a working agreement with the parent and complete a success plan at 21 months enabling parents to celebrate their own achievements. Parents report that they are more strongly connected to their baby and more confident to ask for help, have reductions in their anxiety levels, are more aware of the social capabilities of babies and the value of early interaction with babies on their brain development. The smoke free home initiative has also had some success in reducing children’s exposure to smoke within the home.

Key features of developing effective practice:

- Early contact with families, facilitating registration and engagement in Sure Start services.
- Effective communication and interdisciplinary working to support families.
- A systematic process for tracking outcomes for parents.

Next steps:

- Continue to develop and embed the improvements made to date.
4.3 Down Sure Start 2

Case study focus 2:

4.3.1 Promoting links between Sure Start, pre-school and school.

Linked to key themes:

- effective self-evaluation leading to improvement; and
- effective links with pre-schools and schools.

Contextual information:

4.3.2 Down Sure Start covers eight wards. Of these, Murlough ward is now the most deprived within the catchment areas and ranked 89th in Northern Ireland. It shows an above NI average of mums smoking during pregnancy, children living with a disability, domestic abuse incidents, children living in low income families and below NI average of mums breastfeeding on hospital discharge - services have also extended to a large recently-built development of social housing in Newcastle. Ardglass is a rural fishing village similar to Murlough it shows an above NI average of children living with a disability and children living in low income families.

Journey of improvement:

4.3.3 The leadership and management assessed the needs in the communities within their wards at a strategic level. They commissioned Down Rural Community Network to complete a community engagement survey and also consulted directly with parents in the local community to identify the particular needs/support required within Newcastle. This consultation included leaflet drops, door to door introductions in housing developments and engagement with local community representatives to identify the key issues within this specific area.

4.3.4 The needs identified across the catchment areas included the impact of poverty on parents such as not being able to provide school uniforms for their family. There was a lack of ‘green’ spaces to enable children to have access to gardens and suitable play areas to develop their physical skills and play. In addition they identified issues with poor mental health, low aspirations, unemployment, drug abuse, addiction and a spate of suicides in one town.

4.3.5 The project staff began to contact local pre-schools and schools with the view to establishing Mothers’ and Toddler’s groups, play and development sessions, uniform recycling and signposting of services. They secured offices in Newcastle to have a “presence” in the town and to deliver small programmes. Due to the distance from the main project offices, a deputy manager was given the specific responsibility of managing the team in Murlough and monitoring and evaluating the success of the programmes being delivered within that geographical area.

4.3.6 An effective working partnership has been established between Ardglass Pre-school, Down Sure Start and St Nicholas Primary School to support the families in the local community. They all share premises within the grounds of the primary school and from this venue they run a pre-school in the morning, a Developmental Programme for 2-3 Year Olds in the afternoons and a weekly “Stay and Play” session with 12 to 20 parents and their children attending.
4.3.7 The parent noticeboard in Ardglass Pre-school displays information from Sure Start including the Sure Start message of the month; the parents also get this in newsletter form. The pre-school leader works very closely with the Sure Start family support workers who authorise vouchers for parents with the local food bank. This service is used regularly and the leader quoted an example of collecting food parcels for a father of five children who was in need. This year, all of the children who have attended the Developmental Programme for 2-3 Year Olds Programme will move on to the pre-school provision. The familiarity of building, staff and communication between staff aid smooth transitions to the next stage of learning for these children.

4.3.8 To support with transition from pre-school to primary, the leader of Ardglass Pre-school spends the first day in primary one with the children so there is a ‘familiar face’ and opportunity for the exchange of relevant information with parental agreement. The senior leadership within the primary school works very closely with the pre-school and Sure Start staff supporting their ongoing professional development with for example, joint training on risk-assessments and development planning for a forest school.

4.3.9 Feedback and evaluations from families indicated their appreciation of the smooth and seamless transitions for where parents and children who are supported in their journey from attending the parent and toddler group, through the Developmental Programme for 2-3 Year Olds into the pre-school year and on into year one in the primary school.

4.3.10 Further examples of engagement between a number of primary schools and Sure Start within the catchment area include:

- weekly mother and toddler group established in a local primary schools;

- links made with a nursery unit to enable Sure Start staff to attend their open day and provide information to parents who attend;

- a rhyme time session for younger children has been recently introduced within the school at a more convenient time, when parents are dropping off other children to the school, to facilitate higher engagement levels;

- an obesity prevention programme is being run in partnership with the Public Health Agency. Ten playgroups and three nursery schools within the area purchase fruit and vegetables through vouchers which are provided on a monthly basis and coordinated through Sure Start;

- a holiday hunger project for families and young people was identified through County Down rural network, Sure Start, Homestart and Action for Children. The project focused on the importance of nutrition, physical activity, mindfulness and access to allotments. Syrian families have shown interest in using the allotment and have requested a second allotment to grow vegetables;

- a uniform recycling project working in partnership with CYPSP over the last three years. The project commenced in Downpatrick and was so successful that it was rolled out into Newcastle and Castlereagh in the second year and Ballynahinch in the third year. Schools are contacted in May regarding collection of uniforms. These are then checked, cleaned and made available for families to come in and collect over the summer period; and

- support is available for parents completing pre-school application forms including a translator when required.
Key features of developing effective practice:

- Effective leadership and management who are developing a clear cycle of review and improvement.
- Effective communication between Sure Start, a local pre-school and primary school.
- Understanding the needs of families in the local communities.
- Being pro-active in making effective transitions for children from one stage of their learning to the next.

Next steps:

- Continue to build on and embed this work further with other pre-schools and schools.
4.4 Down Sure Start 3

Case study focus 3:

4.4.1 Meeting the needs of children with a disability through engaging with parents and developing bespoke early years provision.

Links with the key themes:

- effective self-evaluation leading to improvement;
- high quality play and learning experiences; and
- effective engagement with and outcomes for parents.

Contextual information:

4.4.2 Down Sure Start project central offices are located in a spacious rented building within Downpatrick. The project covers eight ward areas including a large urban area around Downpatrick and several outlying rural and seaside towns including Newcastle (Murlough ward), Strangford, Killough and Ardglass.

4.4.3 Northern Ireland statistics indicate that there is a higher than average occurrence of families with a child who has a disability within the Down Sure Start catchment area. Additionally five out of the eight ward areas are above the NI average of children living within low income families.

Journey of improvement:

4.4.4 The leadership and management identified, through the analysis of qualitative and quantitative data and by listening to parents, the need to support the families of children with a disability. The parents reported difficulties in attending local parent and toddler groups due to the specific needs and challenges their children face. These needs included sensory issues, feeding and toileting, social, emotional and cognitive delays. Many parents were struggling with their own mental health, feeling overwhelmed, alone and highly anxious.

4.4.5 A paediatric social worker with a particular vision and high level of professional skill and knowledge led a team to develop the work. Having listened to parents and assessed the needs of children they developed a bespoke parent and toddler drop-in group called Bright Stars.

4.4.6 Bright stars is a weekly drop-in group for children and parents who have been referred. It is run by a paediatric social worker seconded from the South Eastern Health and Social Care Trust) one day a week and who is also part of the children’s disability team. Prior to starting, key staff visited another group and took advice from an occupational therapist and physiotherapist for advice on resources. All the children who attend are also attending the child development clinic. They all receive a home visit and each child has a link person from Sure Start as their point of contact to aid communication. Younger siblings can also attend the group enabling family interactions in a safe, supported and environment. Referrals are also taken out of catchment area for this group.

4.4.7 The group is facilitated by two staff and a volunteer who each bring complimentary skills and experience to the group. They include a paediatric social worker, a retired principal of a special school and an early years worker. Early identification of need is assisted by contact with the health visitor in the ‘Getting ready for Baby’ programme and referrals from other staff.
4.4.8 A written plan provides clear aims and objectives for the children and parents within the group. The planned range of activities is evaluated orally among staff following each session and changes made as required. Regular review and evaluations identify what is going well and note changes to be made promoting reflective learning among the staff. The partnership between the Sure Start project and Homestart is used effectively to support one parent to attend with his two young children.

4.4.9 The room is set up with a range of relevant and interesting activities including space for physical play, sensory play, imaginary play and a cozy book area to provide a safe and stimulating environment. The numbers vary with an average of 12 children per week. A combination of adults accompany their children including parents, a childminder, a grandparent, and a Homestart volunteer. The staff and volunteers welcome each adult and child as they arrive and engage effectively with the children and caregivers at activities; modelling play skills and sharing books. The children explore the environment freely, with added support to ensure safety when necessary.

4.4.10 A minimum of six workshops and speakers are organised each year to provide additional tailored support and help for parents attending the group.

4.4.11 Links with the Child Development Clinic (CDC) professionals has been invaluable in providing advice and guidance to staff and parents. Information from the physiotherapist has provided some specific exercises for individual children and given advice on feeding difficulties. The speech and language therapist has provided training to build capacity including the use of Makaton to support non-verbal children.

4.4.12 Oral and written feedback from parents and the observations of staff indicate clear benefits for the parent, child and whole family unit. Parents are less socially isolated and benefit from the opportunity to talk to other parents facing similar challenges and difficulties associated with a child with a disability. They spend an enjoyable time with their child in a safe and welcoming environment and are encouraged to note the progress their child is making. The support and information provided by staff and through the workshop and speakers is enabling parents to make decisions, support more confident choices and giving them hope for their child’s future. Parents are more informed and confident about the statementing process and how to access specialist equipment and benefits they require and are entitled to.

4.4.13 The ready access to the multi-disciplinary work of the Sure Start team and core Trust professionals leads to earlier identification and referral of need and interventions.

4.4.14 The children who attend are increasing their confidence to participate in activities within a group setting, to socialise and play alongside other children and progress in their physical development and their communication skills.

4.4.15 Children are starting to communicate more readily using words, are developing improved self-regulation, and are communicating their needs more fluently using Makaton. Parents attending the CDC clinic are less anxious about the CDC process.
WONDER YEARS PROGRAMME

4.4.16 Many of the parents in the Bright Stars group were applying for a place within the Developmental Programme for 2-3 Year Olds. Observations of the children in Bright Stars, home visits and assessments by the staff concluded that in many cases it would be very challenging for many of these children to access the full programme due to their particular range of disabilities. These included Autistic Spectrum Disorder (ASD), delays associated with Downs Syndrome and behaviour, speech, language and communication delays. Due to waiting lists some children were not being accepted for either the early years Mencap group or the Developmental Programme for 2-3 Year Olds.

4.4.17 The staff identified a need for the children with these complex needs (not yet attending pre-school) to have the opportunity to gain some independence and transition into a group situation with supportive adults in advance of their pre-school year. This was aligned with a core Sure Start aim to provide good quality play and language support for all children.

4.4.18 The ‘Wonder Years’ group set up with 10-14 families attending weekly. The staff are developing an approach to observation and assessment tailored to the specific needs of their children. A “How best to support me” form is completed at the outset as a baseline to guide the staff planning and track the children’s progress under 4 key headings.

4.4.19 The children are increasing their confidence to leave their parents for short periods. Parents are more confident about leaving their child and know they are safe and their needs being met. The small number of children who have attended and moved on to pre-school are making a smoother transition and are reported as making good progress (2 children have transitioned to the Developmental Programme for 2 to 3 Year Olds from Wonder years due to observations made at this group). One parent reported the support from staff and other parents has improved her own mental health and well-being. She received advice on the best pre-school for her child and on a Friday she can join the other parents for an South Eastern Trust organised walking group or use the time to keep appointments. She is now planning to become a volunteer in Sure Start.

Key features of developing effective practice:

- Leadership and management who listen to parents, understand the needs in the community and are developing practice to meet local need.
- Staff taking every opportunity to be a visible presence in the community.
- An effective culture of regular planning, review and improvement.
- A “champion” for children with disabilities with vision, skill, and a sincere care for the families who is well motivated and is able to motivate others.
- A relevant blend of experience, skill and expertise among the staff.
- The inter-disciplinary approach by the Sure Start staff and their effective links with other health professionals.
- Referrals made by the health visitor and family support worker, early years team leading to early identification of need.
- Close partnership working with others including health professionals through the CDC and HomeStart providing advice, guidance and support for parents.
Next steps:

- Continue to embed and build on the developments to date.
- Continue to support and prepare parents and their children for the transition into a suitable pre-school setting.
4.5  Dry Arch Sure Start

Case study focus:

4.5.1 Developing effective partnerships with schools to meet the needs of children living in a rural locality.

Linked to the key themes:

- effective self-evaluation leading to improvement;
- effective links with pre-schools and schools; and
- high quality play and learning experiences for children.

Contextual information:

4.5.2 Dry Arch Sure Start is located in a rural area in the village of Dungiven. It provides a range of services to Dungiven, Limavady and the surrounding area. Families without their own transport can be socially isolated and find it challenging to access services.

Journey of improvement:

4.5.3 Dry Arch Sure Start offers a wide range of outreach programmes within pre-schools, schools and community groups to meet the needs of families living in a rural locality. Staff noted a high volume of applications for the Developmental Programme for 2-3 Year Olds, along with increased concerns about behavioural issues and speech and language delays among children being raised through referrals to the Family Support HUB. The project developed the programme 'Ready, Steady, Pre-school' and consultation was carried out between the project manager, staff, a number of local school principals and parents to consider how this programme could work best for each family and the community. As a result the need for additional groups targeting 2-3 year old children in rural areas was identified and two primary schools agreed to host new sessions for this age group.

4.5.4 One primary school is in the second year of the programme, while the other primary school is in the pilot stage. The programme runs for two hours a day on two days a week from September to June during term time catering for 8 children aged 2-3 years. The number was influenced by the adult to child ratio and size of the available premises. A summer transition programme provides continuity of support over the summer and is delivered over 2 days per week with one and half hours sessions for the 2-3 year old children.
4.5.5 The children who attend have been identified through home visits and information shared with the team. Some of the children identified were the eldest child in the family and had previously had limited opportunities to develop their social skills and the parents felt isolated within the rural community without the necessary transport to attend the Dry Arch hub. In addition, some of these children were identified as coming from vulnerable backgrounds. In one locality the leader of the parent and toddler stay and play sessions had been approached by parents who requested a service in their locality.

4.5.6 Action plans were written for the programme with clear aims and objectives and success criteria. The project manager, school principals, staff of the programme and Speech and Language Therapist were all involved in the early stages of developing the programme. The team meet quarterly to review the programme and the progress of the children.

4.5.7 One morning session of the ‘Ready, Steady, Pre-school’ programme in St Peter’s & St Paul’s Primary School was set up in a classroom which is equipped to provide stimulating play activities. The children have use of outdoor spaces including an adventure trail and also attend the Play and Stay sessions held in the school hall once a week.

4.5.8 As a result of the effective communication between the school and the Sure Start manager arrangements were made, including having to overcome some practical challenges, such as accessibility to toilets, to host the programme in the primary school.

4.5.9 A second ‘Ready, Steady, Pre-school’ programme with a morning and afternoon session was set up in Termoncanice Primary School within a mobile classroom. It provides a wide range of play activities including access to a playground, sports pitch and school hall during inclement weather.

4.5.10 The staff running the programme have completed additional training including Solihull, Peers Early Education Partnership (PEEP), language training and ASD awareness. The staff gain feedback from parents using a range of methods including family star, feedback questionnaires and home visits.

4.5.11 In most of the practice observed, the children were well settled, independent in their exploration of the resources and participated enthusiastically in music, stories and rhymes. The staff engaged well with the children, modelling and scaffolding language and giving positive reinforcement of self-regulation and behaviour. They are aware of the needs of individual children and provide sensitive support.

4.5.12 The parents, staff and school principals report a number of positive benefits for the children and parents who have attended the new groups. The children’s progress, which is tracked through their learning journal, includes improved speech and language. They have more confident social skills in other settings, are able sit for dinner at home and appear happier. Any developmental delays are identified earlier and support is progressed more quickly. The parents feel less anxious as they now meet other parents, share advice and tips and are more open to attending further services.
4.5.13 The leadership and management continue to keep the new groups under review and seek to overcome challenges that arise in collaboration with other stakeholders.

4.5.14 Dry Arch Sure Start is involved with all of the 16 pre-schools within their catchment area. A 12 month pre-school transition plan sets out clearly the contact between Sure Start and the feeder pre-schools over the year. They staff in the project use a ‘Transition Box’ with the children, which includes pictures of the new pre-school and staff, to help them make smooth transition to the next stage of their learning. They have regular contact through sharing the “message of the month” and providing leaflets outlining the services available.

4.5.15 The Staff recognised that some parents do not know about the programme so they hold an open day for the whole community and surrounding area; encouraging people, especially the first time parents and newcomer families, to come and find out about the services on offer.

Key features of developing effective practice:

- Identification of need for families in rural communities.
- Building links and working in partnership with local pre-schools and schools.
- Consultation with stakeholders and parents and sharing of action plans.

Next steps:

- Continue to develop methods to assess the impact of the programmes and services being provided.
- Develop a consistently high quality of provision across the newly established sessions.
4.6 Dungannon and Coalisland Sure Start

Case study focus:

4.6.1 Using creativity to develop effective high quality play practice and engage families, including those with English as a second language.

Links to the key themes:

- effective self-evaluation leading to improvement;
- effective engagement with and outcomes for parents; and
- high quality play and learning experiences for children.

Contextual information:

4.6.2 Dungannon and Coalisland Sure Start (DCSS) project covers a large geographical area of ten designated wards. DCSS re-located its central offices to the current building in Dungannon in 2016; various programmes are also provided in additional premises in Dungannon and Coalisland.

4.6.3 The current demographic includes a very high proportion of families with English as a second language; mostly East Timorese and also Polish, Lithuanian and Irish Travellers. There are many lone parents, high levels of multiple occupancy/housing issues and financial difficulties with an associated prevalence of poor mental health.

Journey of improvement:

4.6.4 In 2014 a new project manager brought a clear vision of finding innovative ways to connect more meaningfully with families with a variety of support needs, including those whose first language is not English and those with different cultural experiences and views.
4.6.5 They consulted widely through questionnaires, staff meetings, discussions with parents and other early years providers. They also gave careful consideration to the analysis of a range of data about the changing profile of the demographic and social needs within the DCSS wards. The project manager and staff agreed that ensuring that the play experiences provided were high quality and creative would hold the key to connecting at a deeper level with the children and parents.

4.6.6 As a result of collating this wide range of information the leadership identified clear priorities. These included actions to: develop an agreed vision; build further the understanding and capacity of the staff to deliver high quality play; and, increase the role and influence of art and creativity in the staff’s professional practice and the children’s and families’ play experiences, including those who first language was not English. In addition they considered how to establish joint working practices, develop systems for effective monitoring and evaluation, research best practice and share with other early years partners and providers.

4.6.7 The detailed written action plans provide clear aims and objectives for staff, children and parents with realistic timeframes and success criteria. Appropriate training is identified and all staff maintain detailed records and reflections about all aspects of their work and the children’s responses. There is rigorous and systematic monitoring and evaluation at all levels and across all of the programmes offered by the team.

4.6.8 DCSS places a central emphasis on the use of art and creativity to provide high quality play environments and child-led play experiences to better meet the needs of the cultural diversity of the children and families. The staff’s belief in the impact of this approach has informed and shaped the focused and progressive journey of improvement in the quality of the play experiences provided over a six year period.

4.6.9 In the first instance the indoor learning spaces were upgraded and a new vision statement was agreed in collaboration with all staff.

The DCSS pedagogy is informed by visits to Reggio Emilia, in Italy, by members of the team including leadership, management and staff. The visits formed part of the Reggio Learning Community initiative lead by the projects lead body. The Reggio Emilia approaches are key drivers of change and influence heavily the shared practice and the professional language used by staff.

4.6.10 The DCSS staff have planned and developed a bespoke set of strategies which use the creative arts and the natural and sensory environment to help deliver its outcomes. The staff create ‘Play Provocations’ setting up activities to provoke children’s interest and extend and enrich their play experience. They have ‘intentionality’ in how they intend and perceive the children will use and play with the resources offered. For example, the staff consider carefully and arrange purposefully natural and softly coloured resources and a wide variety of equipment to encourage and stimulate the children to play, investigate and experiment as they immerse their senses in different textures, colours, light and shade, sounds, tastes and feelings. The staff model the practice to the parents, including how to ask questions, develop early language and stimulate the children’s thinking, in order to develop the parents’ confidence to play ‘well’ with their children at home.
4.6.11 The staff team was re-structured to form a Play Development Team (PDT) with a PDT leader appointed. The work was further developed and embedded through the appointment of new staff roles including a play development worker, an artist in residence and a creative development worker. The creative, child-led approach being introduced was shared with local practitioners through showcase events. Parental play workshops and a parent forum led by the family support team were introduced which increased the parent’s participation and involvement in the review process.

4.6.12 The staff launched a Little Free Library book lending service for the families and Home Visiting Photo Books. They introduced Home visiting files and developed and introduced “Ideas Bubbles” sheets to guide and stimulate the parents to complete activities at home. The increased focus on developing the children’s creativity culminated in a ‘Tots Modern’ Art Exhibition in 2019, which is planned again for 2020.

4.6.13 The Sure Start staff, the local nursery school and a RISE NI speech and language therapist gathered evidence that East Timorese parents were speaking to their children in non-fluent English rather than their home language in an attempt to help the children develop their English. However, as a result the children quickly lose their potential to be proficient bi-lingual speakers with English developing less securely and their own home language simultaneously declining. This contrasts with other bi-lingual peers such as Polish and Lithuanian children who are more likely to retain good fluency in their home language at the pre-school stage which supports their secure development of English.

4.6.14 This specific context was a major catalyst for the project manager and staff to develop innovative ways of communicating and working more effectively with the children and their families and influences how the staff evaluate, shape and continuously adapt and improve their professional practice.

4.6.15 The DCSS began planning and consulting to develop a ‘Speaking Tetum’ East Timorese Language Project. The staff have used their creative approaches to play as an effective means to engage more meaningfully and practically with the parents, specifically targeting the East Timorese parents. A Tetum speaking Family Support worker, who also has a focus on play, acts as a strong advocate and provides practical support for the families; key resources and documents have been translated into Tetum and the ‘Speaking Tetum at Home’ campaign was launched following the staff’s professional development in how to support bi-lingual families.

4.6.16 The staff value and respect the families’ respective cultures and try to incorporate culturally familiar and appropriate resources within the various groups and programmes. The entire staff team, including the health professionals as well as the early years staff, have developed a shared understanding of the importance and impact of high quality play as a means to communicating effectively with the children and the adults. They have agreed, adopted and utilise a range of common practices within the programmes to engage their East Timorese families and other bi-lingual families.
4.6.17 The staff have a high level of expertise and consistency in their approaches. They have a shared vision and benefit from in-house training by a range of staff including the Artist in Residence and the Speech and Language Therapist in addition to external training and visits to other settings. For example, the staff for the Developmental Programme for 2-3 Year Olds and the Play Development Team, including créche workers, completed Hanen’ Learning Language and Loving It®. This bespoke and evidence based programme has enriched the adult-child interaction that takes place in the DP23YO for all children whether they have typically developing language; are at risk of language difficulties; have English as an additional language or have communication difficulties.

4.6.18 The ready access to the multi-disciplinary work of the Sure Start team and core health professionals means earlier identification of need and referral and the provision of interventions, where this is deemed appropriate.

4.6.19 The staff have developed their own comprehensive evaluation processes to promote continuous improvement and self-reflective practice, all tailored to the individual programmes. They are highly reflective and responsive in their respective programmes and practices and adapt the programmes and resources to meet the children’s and parents’ changing needs and interests.

4.6.20 The support and information provided by staff and through the workshops and programmes is enabling parents to make positive choices for their child’s future. The oral and written feedback from parents indicates many learning, social and well-being benefits to the children, the parents and the wider families. Parents are less socially isolated and form positive relationships with other parents facing similar challenges and difficulties. The adults spend enjoyable times with their children in a safe and welcoming environment and are informed regularly about and encouraged to observe the progress their child is making. Parents also welcome the help provided on a wide range of other matters such as citizenship, accessing benefit/housing, court visits, and accessing resources for their homes and families. The children who attend are increasing in confidence to participate in activities within a group setting, to socialise and play alongside other children and are making progress in their language, creative and play development and their communication skills.

4.6.21 The leadership and management have a long term vision and enthusiasm for continuous improvement. They have identified priorities to embed and further develop their practice such as implementing the second phase of the ‘Speaking Tetum at home’ campaign, training the Forest Schools approach and structuring the whole programme into overarching quarterly themes.

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5 Learning Language and Loving It™ - The Hanen Program® for Early Childhood Educators.
Key features of developing effective practice include:

- Effective leadership and management with a clear vision that is agreed and shared by all of the staff and understood by the parents.
- Understanding the needs within the local community.
- A Project manager who is a 'play and creativity champion' with vision, creative energy and is highly motivated and able to motivate others.
- The blend of experience, skills and expertise of the staff facilitating the groups effectively and supporting one another as professionals working together.
- The inter-disciplinary approach by the Sure Start staff in relation to training and working closely with the health professionals.
- Opportunities for continuous high quality professional development;
- The strong culture of reflection and self-evaluation in which self-evaluation is embedded as a key aspect of how the staff work, reflect and make improvements to the practice and provision for children and families;
- The staff are highly committed to sharing their learning journey and practices with the rest of the sector.
- The evidence of progress being made by both children and parents.

Next steps:

- Continue to celebrate and share the many examples of creative, play-based practice and approaches for involving families with English as a second language.
- Implement the action plans for future development.
4.7 Edenballymore Sure Start

Case study focus:

4.7.1 To increase parental involvement in the Developmental Programme for 2-3 Year Olds and help parents to recognise their role as the child’s first educator.

Linked to the key themes:
- effective self-evaluation leading to improvement.

Contextual information:

4.7.2 The Sure Start Edenballymore central offices are located in purpose-built premises within the Creggan area of Derry. The project is located in an area of high social disadvantage with very high levels of unemployment particularly for males. At the time of the evaluation visit, the manager had recently returned from a one year career break and the staff were in the early stages of piloting the PEEP parent-child session programme.

Journey of improvement:

4.7.3 Following the publication of the previous Sure Start evaluation by the ETI and the recommendation to develop further the engagement of parents in the stay and play element of the Developmental Programme for 2-3 Year Olds, the attendance rates and involvement of parents were reviewed, targeted and actioned in the business plan.

4.7.4 The priority was to address the low expectation of parental involvement with their children, promote the development of the home environment and raise the profile of the parental role as the first educator. The staff identified that the existing stay and play element of the Developmental Programme for 2-3 Year Olds was not always popular with parents due in part to a culture where parents prioritised childcare over parental participation in care and education.

4.7.5 The Western Childcare Partnership took a regional approach to an evidence based programme pilot across a number of projects within the Western region. Edenballymore was one of nine projects identified for the pilot PEEP programme. The Childcare Partnership Manager consulted with the project managers and two initial training days for the leaders of the Developmental programme for 2-3 Year Olds were provided by accredited trainers from Oxford.

4.7.6 An action plan set out the staff expectation that parents with children attending the Developmental programme for 2-3 Year Olds would attend with their child, nine sessions of 90 minutes on a monthly basis over the year. Attendance would be carefully monitored and non-attendance sensitively followed up through phone calls and, where appropriate, home visits with the programme being delivered in the homes.

4.7.7 The staff identified the children’s language skills as a target for improvement along with encouraging and upskilling the parents to improve their children’s ability to learn through play and develop better language skills. A health promotion priority was also set up to support parents in caring for the children and in promoting their children’s health and development. Social development skills were also targeted with the staff aiming to develop parental understanding of the importance of early relationships with their children.
4.7.8 The programme staff report that they welcome the structure the PEEP programme manual provided to guide their parents/child sessions. While the PEEP programme ORIM aims are appropriately identified as: Opportunities, Recognition, Interaction, Modelling, in three of the five programmes observed during the visit, the staff were still at a very early stage of delivering fully the programme aims.

4.7.9 The project manager and staff welcomed the external feedback to inform their evaluation of this approach and the improvements needed. They have already identified some areas for review and improvement including the need for first hand observation of the practice being implemented and a regional review to evaluate the strengths and challenges of this approach. The managers have also appropriately identified the need to build further staff capacity for effective parental facilitation.

4.7.10 Where practice was most effective, there was evidence of parental peer support on healthy eating and displays of photos from home stimulated meaningful conversations among parents and their children. There were examples of effective storytelling, staff modelling of language including through the medium of Irish, sustained interaction between staff and small groups of children and parents socialising with their children during snack time.

4.7.11 A number of additional actions were taken to improve attendance and participation of parents; including a change to the starting time from 9.00 to 9.30 am to support parents who had a school drop off and setting up a closed Facebook page to facilitate the sharing of home learning activities by the parents.

4.7.12 This is the first time that the Family Support worker has linked to the Developmental Programme for 2-3 Year Olds. The broadening of the team has enhanced the quality of the staff self-reflection about why they are doing what they do. The need to develop further the staff parental facilitation skills is endorsed by ETI as a relevant area for improvement.

4.7.13 The oral feedback from parents who attend the PEEP programme indicate emerging benefits to both the children, the parents and the whole family unit. Parents have been influenced positively by key messages such as, ‘sitting down to eat with your child and eat as a family’ and ‘listening to rather than questioning the child about their day’. One parent said that the child was interested in ‘using the brown bin for food scraps’ and that she was now more conscious of doing this to recycle and reuse. Another parent noted learning from being in the playroom that the children have real crockery and she has stopped using plastic cups and plates for her child. The parents like seeing pictures and videos of their children learning and also see the value in sharing information through the See-Saw app about activities done at home or in the local area. Many parents reported that they have formed friendships and do not feel as isolated and they support each other in childcare matters.
4.7.14 Five leaders from pre-school settings reported that parents who attend Sure Start are more ready to engage at the pre-school stage. They report that children who attend the Developmental Programme for 2-3 Year Olds are more settled and have better play skills. They build on the Sure Start work with parents through the Getting Ready to learn programme, communicating the monthly message and by building on key messages such as the importance of outdoor play. The pre-schools have adopted some of the Sure Start approaches by making their advice to parents more practical and accessible. Pre-schools and schools have signposted families to Sure Start services and the children and parents who attend the programmes delivered in the Irish language report they are better prepared for Irish using phrases.

4.7.15 The manager has a clear vision of what is going well and asks relevant questions to inform the ongoing monitoring and evaluation of provision and outcomes. Effective processes are in place to consult with parents and staff and there is a consistent drive and commitment of the whole team to engage parents more fully in their children’s learning and development. Leadership and management are understanding of the complex needs of families and division in the community and despite the challenges have managed to keep the families engaged in the programmes.

Key features of developing effective practice:

- The leadership welcomes and uses both internal and external evaluation to inform their practice and bring about further improvements in the provision.

- The higher expectation of parental involvement in the Developmental Programme for 2-3 Year Olds and valuing the parents role as a child’s first educator.

- The staff willingness to pilot new approaches in the interests of developing their practice for parents.

- The parent’s responsiveness to the information and messages being shared to support their role.

Next steps:

- Continue to develop the staff skills and understanding of how to tailor and implement stay and play sessions to meet the needs of their families.

- Contribute to a regional review on the implementation, monitoring and quality assurance of the PEEP programme.

- Include first hand observation of practice as a key element of the monitoring and evaluation processes.
4.8  Horizon Sure Start

Case study focus:

4.8.1 Promoting healthy eating through the ‘Cook it’ programme.

Linked to the key themes:

- effective self-evaluation leading to improvement; and
- effective engagement with and outcomes for parents.

Contextual information:

4.8.2 Horizon Sure Start is based in Sunnylands Primary School, located in an urban area of Carrickfergus. The Sure Start project for Carrickfergus and Larne is undergoing a period of significant change with the merging together of two teams under one lead body. In Larne the services are delivered from St Anthony’s Parish Hall and All Saints Parish Hall in Larne. Work is currently being carried out to renovate St Anthony’s Primary school which will be the base for delivering the services in Larne.

The journey of improvement:

4.8.3 As a consequence of the restructuring of services being delivered, the leadership and management of Horizon Sure Start identified that it was timely to revisit and review the vision and mission statement for the project, review the aims and objectives of each of the programmes and ensure they align with the three core aims of Sure Start; social development, health and education.

4.8.4 Horizon Sure Start had been delivering the ‘Cook It’ programme for a number of years but there was no careful monitoring of the programme to ascertain the level of impact of the programme.

4.8.5 The leadership and management chose the ‘Cook It’ programme to be the first programme to be reviewed. This decision was informed by the analysis of data from PHA reports, meaningful consultation with parents and local charities and discussions with staff, drawing on their knowledge of families within the local community.

4.8.6 A report published in 2019 indicated high numbers (24-27%) of children entering year one of primary school in Carrickfergus were overweight or obese. Poverty is a major issue in the locality; evident through the significant increase in the number of parents relying on foodbanks to ensure their family is fed. Budgeting was also being reported by parents as an area of concern due to the need to manage often limited funds. For example, one parent did not send their child to school in September as she could not afford to buy a pair of school shoes for her child. Social isolation was also identified as a major issue for parents and single parents.

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6 As there was no first hand observation of the delivery of the ‘Cook It’ programme the delivery of the session was not evaluated during this evaluation visit.
4.8.7 There has been effective working between the Sure Start leadership, management and staff team to bring about a consistent approach to the delivery of the ‘Cook It’ programme. A programme folder has been developed by staff to ensure consistency, develop self-evaluation and reflection and monitor the impact on families as a result of the programme.

4.8.8 The leadership and management, together with the staff, used the ‘logic model’ to carry out a situation analysis of the ‘Cook It’ programme which included identifying strategies to be employed such as: targeting parents who may benefit from this programme; encouraging parents to engage fully, try recipes at home and provide feedback; and, follow-up home visits at the conclusion of the programme to evaluate the impact.

4.8.9 The leadership and management, together with the staff, identified inputs or resources required, the outputs or activities and the short-, medium-, and long-term outcomes of the programme.

4.8.10 There was close monitoring and evaluation of the impact of the programme and the success of the actions being undertaken. At the outset of the programme all participants were invited to complete a baseline evaluation of their current feelings in response to a number of questions such as “I am anxious about cooking”- strongly agree, agree, disagree, strongly disagree or don’t know. At the conclusion of each of the six-weekly sessions, the facilitator (Family Support Worker) completed a ‘Facilitators Snap Shot Self Reflection Form’. This included careful monitoring of attendance and any concerns or issues noted.

4.8.11 If any parents were absent from the session, this was followed up with a phone call to the parent by the facilitator to ascertain sensitively, why the person was absent and, on occasions, followed up by a home visit. The reflection forms were also reviewed weekly by the Sure Start Programme Manager. At the conclusion of the programme, evaluation forms were completed with responses such as “I am more confident and have learnt new things”, “I am more aware of healthy choices and intend to focus on this for my family”, “I am able to budget, cook and organise so much better”. Parents also had the opportunity to provide written comments. Evaluation reports were completed by the facilitator to highlight interest levels, engagement levels, overall attendance and overall impact. In addition, the parents are asked to complete evaluation forms regarding the crèche (if applicable) and their levels of anxiety leaving their children are monitored closely.

4.8.12 The ‘Cook It’ programme runs weekly over a period of six weeks and a crèche is also available during this time to facilitate the parents’ attendance at the sessions.

4.8.13 The programme is carefully planned with a clear focus each week including knowledge about food groups, hygiene, and healthy eating. The key message of the month is introduced during the course.

4.8.14 Parents are provided with a range of resources during the programme such as information on the ‘10 benefits of cooking with children’. Parents also have a voice in planning for the following week’s session. They are given a range of recipes and asked to choose three that they would like to make. The parents receive a certificate of completion at the conclusion of the course. The parents also get to sample the food that they have made and take portions home for their families to try. Parents are encouraged to take and share photographs of cooking with their children at home.
4.8.15 The facilitator has received ‘Cook It’ training from the PHA as well as training on food values and on basic food hygiene.

4.8.16 The oral and written feedback from parents indicate many benefits to themselves and the family unit. Parents are developing their confidence and beginning to engage with other parents in the programme. They have improved awareness of healthy foods, hygiene, budgeting and development of basic cooking skills. They also report improved engagement with the children as they cook together and document this using photographs.

4.8.17 The facilitator, who is also the Family Support Worker, can identify more clearly the difficulties that the parent/family as a whole may be experiencing. Staff in the crèche are also able to gather information about the children and pick up on any concerns they may have about the social, emotional and physical development of the children. This is then followed up by support from other services and other team members.

4.8.18 The staff are reviewing ways to increase attendance levels and raise awareness of the course. The staff report many of the parents have closed their Facebook accounts due to poor mental health and anxiety so staff are considering developing a Sure Start App to engage with parents and inform them of availability of places on the course.

**Key features of developing effective practice:**

- The strategic leadership of the Sure Start Programme Manager in creating a shared vision and mission statement with a reconfigured team based on the core aims and objectives of Sure Start.
- Understanding and acting on the needs of the local community.
- A thorough review of the ‘Cook It’ programme to provide clarity to the objectives of the programme and focusing all staff on improving the education, health and social development of families in the community.
- Caring, supportive and knowledgeable staff who have a heart for the community and work collegially to share information to support families in need.
- Clear cycles of planning, evaluation and review of the ‘Cook It’ programme which has been adapted and improved upon after careful and considered self-evaluation.
- Clear evidence of the positive impact of the ‘Cook It’ programme on families, in particular, improved levels of confidence, engagement and understanding of the importance of healthy eating and a healthy lifestyle.
- Partnership working across programmes within the Sure Start and with external agencies such as Foodbank and Storehouse.

**Next steps:**

- Continue to promote more consistent attendance levels.
- Continue with the systematic review of other programmes on offer to revisit the objectives of the programmes and ensure they align with improving the education, health and social development of families in the community.
4.9 Kilkeel Sure Start

Case study:

4.9.1 Promotion of healthy families.

Links to the key themes:

- effective self-evaluation leading to improvement; and
- effective engagement with and outcomes for children.

Contextual information:

4.9.2 Kilkeel Sure Start is located in The Sea Shell Centre, a building owned by a local church. The catchment area for the project covers half each of two electoral wards, Kilkeel Central 2 and Kilkeel South 2 which are not adjacent to the main building. Many families in the catchment areas experience financial strains within families, social disadvantage and social isolation. The decline in the fishing trade within the area has resulted in an increasingly transient population with fathers often seeking work outside the area.

Journey of improvement:

4.9.3 Kilkeel Sure Start seeks to improve health by supporting parents in caring for their children and promoting children's health and development. A health promotion service project offers a wide range of programmes and services throughout the year to help improve the physical and mental health of children and their families.

4.9.4 The multi-disciplinary team identified priority development areas through ongoing evaluation of the programmes delivered and from the regular parental evaluations and feedback obtained through questionnaires and focus groups. During the 'Cook It' programme, for example, the Health Promotion Worker (HPW) identified that inappropriate portion sizes were being provided by the parents and recognised the need for appropriate nutritional education for mums and families. In addition the parents, through their feedback, highlighted a need for afternoon sessions, a slimming club, first aid course and the possibility of a programme aimed at the 1-2 year olds.

4.9.5 The Sure Start team endeavour to ensure that they support all the ages and stages of the child's Sure Start journey from the antenatal stage to when the child turns four, as well as support for parents in choosing healthy options for their families and looking after their own physical and mental health.

4.9.6 A HPW is part of the multi-disciplinary team and she brings a wealth of experience, training and knowledge to the role. Over the last number of years, she has developed and successfully delivered workshops and programmes in response to the needs of the families and the issues raised. Additional members of the Kilkeel Sure Start team, such as the Health Visitor, Family Support Worker and Midwife are also trained and experienced in delivering a range of health improvement programmes and services leading to a cohesive and collaborative approach to this work.
4.9.7 The play and learning programmes, such as ‘Lots for Tots’, ‘Home Start Family Group’ and the Kilkeel Sure Start Developmental Programme for 2-3 Year Olds also incorporate physical activity (indoors and outdoors). Healthy eating experiences and workshops are delivered within these programmes to promote key messages around child safety, healthy lifestyle choices and oral health. In addition to the programmes and services offered, Kilkeel Sure Start signpost families to other agencies and services such as smoking cessation, alcohol liaison, midwife and local dentists. The staff provided a summer scheme, written information for parents and a bedtime routine resource. Health is promoted throughout the programmes and there is a clear structured overview and description of the weekly programmes on offer.

4.9.8 A strength in the delivery of the health promotion work is the connected approach by the multi-disciplinary team. All team members are trained to deliver a range of health improvement services and programmes, which include; physical activity with ‘Gym Buggies’, ‘Family Swim’ and ‘Tumble Tots’; healthy eating from the ‘Weaning Programme’ through to the ‘Little Eaters’; child safety at Halloween, dangers of water, road and general home safety. Support materials are provided for parents so that they can continue to implement the activities at home which include; welcome pack story books, home safety equipment and dental health care packs.

4.9.10 Staff are given the opportunity to attend training and work towards accredited awards to maintain quality and endorse high standards. Training has included baby massage, Incredible Years Baby, designated officer training, Safe Talk, First Aid and Signs of Safety training. The HPW received training as a Level 2 fitness instructor to support the ‘Gym Buggies’ programme. The project have also gained the UNICEF Baby Friendly Awards 1 and 2 and are working towards a level 3 award.

4.9.11 There is a high level of retention of parents in the programmes and of parents committing to further schemes, for example, mums attending the ‘Gym Buggies’ also signed up for and attended other programmes. Those accessing the services highlighted the benefits of their involvement. Parents report they feel less socially isolated, have developed confidence and enjoy the increased opportunity to mix and interact with families in the area. In addition parents feel their attendance at, for example the ‘Little Eaters’ group, has enhanced their knowledge of healthy eating and establishing healthy environments for their child.

**Key features of developing effective practice:**

- The flexibility of the staff such as the Health Visitor facilitating the Breastfeeding Support group in the absence of the midwife and the good opportunity for continued professional development and sharing of practice.
- The connected approach by staff through the interaction and engagement across the Sure Start with all staff to promote the health messages; linked clearly to physical health, healthy eating and safety.
• The strategic planning of relevant staff development opportunities to meet the identified needs of the families.

• The good to very good engagement of staff and positive feedback from parents in the groups observed during the evaluation visit.

• Sharing practice with other projects.

Next steps:

• Follow up and act on information received from parents; and develop further the parent focus group.
4.10 LAST Sure Start 1

Case study focus 1:

4.10.1 Partnership working to deliver a bespoke programme to meet the needs of parents experiencing post-natal depression.

Links to key themes:

- effective self-evaluation leading to improvement; and
- effective engagement with and outcomes for parents.

Contextual information:

4.10.2 LAST Sure Start is based in its own building located on the Gortin Road on the outskirts of Omagh. They also operate and deliver services from a range of community facilities. The leadership and management are well established in their roles. Specific challenges families face within the catchment area include issues around mental health, suicide rates and domestic violence, coupled with legacy issues around the Omagh bombing. These are well above the Northern Ireland average.

Journey of improvement:

4.10.3 LAST Sure Start began to identify specific needs of young mothers and their children through information fed back by the health visitor, the family support worker and parents attending a number of programmes. Parents, who attended a ‘Young Mums’ group and the ‘Parenting Puzzle’ programme started to share their experiences in relation to post-natal depression and the trauma they were experiencing. The Sure Start received training in post-natal depression several years previously, which had contributed to their skills in recognising the symptoms of PND and being able to help more effectively parents to get one to one support for the Sure Start team. In addition, the Omagh based charity ‘Support 2gether’ were receiving phone calls from parents who were requesting support.

4.10.4 The mothers were struggling with very poor mental health, suicidal thoughts, feeling isolated, overwhelmed and anxious. In addition, a number of mothers were having trouble bonding with their child and isolating themselves socially. As a result many of their children were developing social, emotional and cognitive delays.

4.10.5 A partnership was forged between LAST Sure Start and the ‘Support 2gether’ charity to create a bespoke programme called ‘Understanding it’s normal’ and establish support groups in three of the Sure Start catchment areas.

4.10.6 The support groups follow the ‘Understanding it’s normal’ programme which has been adapted from an eight-week programme developed in England by a specialist counsellor. It is a six-week programme adapted and developed by the charity ‘Support 2gether’ to meet the needs of the local community. The founder of ‘Support 2gether’ has an early years’ background and originally worked in Clogher Valley Sure Start. Having first-hand experience of post-natal depression, she recognised that almost all of her early years training focused on identifying and meeting the needs of the child with insufficient focus on the needs of the parent. Consequently, she set up the charity ‘Support 2gether’ with the aim of helping parents who were experiencing post-natal depression through a combination of education and support.
4.10.7 The programme runs weekly meetings over a six-week period and is facilitated by ‘Support 2gether’ with crèche facilities available, to parents who participate, while the programme is being delivered. The programme comprises of a mixture of small group discussions and external speakers who the parents described as ‘inspirational’. Initially, some parents found it difficult to ‘open up’, but through ‘bonding very quickly with the facilitator’ the parents were able to share their feelings with increasing confidence. At the conclusion of the six-week programme, the parents are presented with a key ring with a symbolic key to remind them that they were not ‘locked in’ and ‘isolated’ any more.

4.10.8 Since the conclusion of the programme, parents from each of the groups have independently arranged to meet up once a month at different venues to continue their engagement with, for example, art/craft activities or have a coffee. They also have set up their own ‘WhatsApp’ group to stay connected and support each other. This is in line with the aims of the programme to move parents forward from a dependency on Sure Start services to becoming more independent yet surrounded and supported by a community. “Support people to let them go.” “Not a culture of dependency.”

4.10.9 A key strength of the facilitation is the rapport with the mothers experiencing post-natal depression, heightened by the fact that the facilitator had experienced post-natal depression and can empathise, not sympathise with the mothers. The staff are all receiving specific training to guide their work with the parents and build their capacity to facilitate effectively this ongoing work. In addition the Sure Start family support team were imperative in engaging families in the PND work and in developing ongoing support groups. They were key in linking the families to the ‘Support2gether’ and continue to support new parents who need the course or join support groups.

4.10.10 Staff monitor the progress parents are making and evaluate the effectiveness of the programme using a range of methods. Regular family reviews are attended by a wide range of stakeholders who identify and are responsive to the needs of the community. Feedback from the parents is sought and acted upon. The staff are using the ‘Family Star’ tool as one approach to monitoring and recording the impact of the programme, but they are also cognisant that the mood of the parents can change from day to day. Therefore the staff’s skill and sensitivity in monitoring the mood of parents when they are, for example, dropping children off at crèche or the Developmental programme for 2-3 Year Olds is a critical part of the process.
4.10.11 The oral and written feedback from the mothers indicates significant benefits to the mothers themselves and their relationships with their child or children, and partners.

4.10.12 Mothers report many benefits including being less socially isolated and have improved levels of confidence and increased peer support. They have regular opportunities through the programme to talk to others facing similar challenges and this is then continued in the support groups set up by the mothers at the conclusion of the programme. They are better informed about post-natal depression, have a greater self-awareness and are better equipped with coping strategies. This has had a significant impact in some instances on not only the improved relationships with their children but also their partners.

4.10.13 A number of the mothers have gone back to study part-time and others have gained enough confidence to access other Sure Start services which have benefited greatly their children. One parent stated, "I have the confidence to make decisions for my child which are possibly better than those of my parents/grandparents."

4.10.14 One mother who had suicidal thoughts stated, “I wouldn’t be here without ‘Support 2gether’.” At the conclusion of the programme, she went back to study part-time, completed an Access course, acquired three A-levels and completed a volunteer course in counselling. She is currently completing a certificate in counselling through South-west College and a coaching course in mental health through Mindways, Belfast. She now volunteers for ‘Support 2gether’.

4.10.15 The leadership and management continue to develop this work through a recently founded ‘S2 super dads group’ comprising of 8 men whose partners/spouses have accessed the programme. There are also preliminary plans to extend the programme into Strabane Sure Start due to the high level of need in that area.

Key features of developing effective practice:

- Effective partnership working between Sure Start and a local charity to combine skills and resources and meet local needs.

- Very effective leadership and management that has a very good understanding of the needs of the community.

- Skilled facilitators who empathise, are sensitive to the needs of parents and who adopt a proactive approach in supporting parents.

- The significant and positive benefit for parents in their confidence levels, personal relationships within the home, mental health and, opportunities to access further educational opportunities.

- The establishment of a progression pathway for parents and children, each stage of which is designed to educate and empower parents and reduce reliance on Sure Start services.

Next steps:

- Continue to embed the effective practice and continue to monitor and review the impact to meet the needs of the communities within the wide geographical catchment area.
4.11 LAST Sure Start 2

Case study focus 2:

4.11.1 Meeting the needs of children who have experienced very poor play opportunities within the home and support their transition into the Sure Start Developmental Programme for 2-3 Year Olds.

Links to the key themes:

- effective self-evaluation leading to improvement;
- effective engagement with and outcomes for parents; and
- high quality play and learning experiences for children.

Journey of improvement:

4.11.2 The project identified a need emerging for additional targeted support to develop language and play skills for specific children based on feedback from their team. Through information gained during home visits, the Family Support Worker and the Speech and Language Assistants identified a group of vulnerable children who were experiencing poor play opportunities at home and consequently had delays in their speech and language and communication skills.

4.11.3 The identified children already had access to the ‘Book Corner’ programme delivered in the home by the Speech and Language Assistant and/or ‘Talk Link’ and ‘Tiny Talkers’ programmes led by the Speech and Language Therapist either in the home or in the centre. Despite these interventions, the children were still presenting with significant cognitive delays.

4.11.4 The team set up a pilot ‘Waddlers’ programme, to provide targeted support for identified children. This support operates for 4 hours over two consecutive days a week throughout the year and is delivered in the Sure Start centre. The programme promotes play, language and literacy and supports the children’s transition into the Sure Start Developmental Programme for 2-3 Year Olds. All of the children identified to participate in the programme have significant social, emotional and cognitive delays.

4.11.5 The ‘Waddlers’ group consists of 10 children supported by three Sure Start early years staff along with a speech and language assistant. There is a clear planned programme designed to suit the needs of the cohort of children.

4.11.6 The ‘Waddlers’ programme has Play and Stay sessions once per term to support the parents with, for example, potty training, behaviour management and understanding the developmental progression of speech and language. During the session three play ‘stations’ are set up, including a snack table, and parents are upskilled in strategies to support their child’s language and learning in the home through the careful modelling and interactions of the staff. The staff report the success of the sessions lies in the building of a positive relationships with parents and building capacity through modelling and praise.

4.11.7 The centre’s own Early Years Co-ordinator visits the ‘Waddler’ group once per term to observe and monitor the practice and feedback to the staff.

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7 As there was no first hand observation of the delivery of the ‘Waddlers’ programme it was not evaluated during this evaluation visit
4.11.8 The staff have all had training in Hanen ‘Learning Language and Loving It’ and ‘Teacher Talk’. The speech and language therapist and speech and language assistants have assessed the positive impact of the training as seen through the engagement of the staff with the children and the parents. The staff now employ more consistently the ‘OWL’ observe, wait, listen, approach, model language and comment on the children’s play rather than question. The staff also report that there is evidence of parents modelling the strategies used by the staff e.g. encouraging children to be independent in, for example, hang up their own coats.

4.11.9 The impact of the programme to date has been evaluated through feedback from parent and staff observations. They have noted improvement in the development of children’s play skills, confidence and language skills. There is improving confidence and skills of parents to engage in meaningful interactions and play experiences with their children and signposting of parents to other programmes and services within Sure Start.

Key features of developing effective practice:

- Leadership and management understand the needs of the community and prioritise early intervention, particularly with high risk families.
- Well trained staff with an emphasis on ongoing professional development through regular and relevant training.
- Building trusting relationships with parents to tackle intergenerational fear of social services.
- Effective partnership working between health, speech and language and education to support children and their parents.

Next steps:

- Continue to monitor the quality of the provision and the impact on children and parents.
- Complete the planned review of induction and settling in to engage the parents more fully.
4.12 Little Hands Sure Start

Case study:

4.12.1 Promoting language and literacy for babies aged 0-12 months.

Links to the key themes:

- effective self-evaluation leading to improvement;
- high quality play and learning experiences for children; and
- effective engagement with and outcomes for parents.

Contextual information:

4.12.2 Little Hands Sure Start services are located in the Crevagh, Springtown, Foylespring 2 and Rosemount area of Derry. They operate from a prefabricated building which is shared by a small community library. Prior to the opening of the library and Sure Start there were no community facilities within the area. The partnership between Sure Start, a community partnership and the Department for Communities have contributed to providing the resources and enabling the group to operate. The internal use of the space is well developed to create a welcoming and stimulating environment for the parents and the children. Little Hands Sure Start is the first Sure Start to have the Western Health and Social Care Trust as their lead body.

Journey of improvement:

4.12.3 The Sure Start speech and language team and the library administrator worked in partnership to develop a programme to address an identified deficit in early language development among young children in the area. It originated as a four week pilot and at the time of the ETI visit, it had been extended to a twelve-week pilot. The staff recognised the potential for very early intervention in the cases of children identified with developmental delays for signposting to family support to address emerging social and mental health needs within the family.

4.12.4 The project developed a weekly ‘Baby and Rhyme Time’ session. This universal programme was initially developed as a pilot programme as a result of a needs analysis carried out with parents of children age 0-12 months. It was also informed by feedback from the in-house speech and language team who identified the need for earlier intervention to support the development of speech, language and communication skills in young children. The core principles of early bonding and building attachment between the parent/caregiver and the child were identified as priorities to promote a good start to early language development skills.

4.12.5 The session programme was designed by the staff, with the overall aim and purpose of promoting early interaction between the parents and children. The planning process had clear outcomes to be achieved, for example; parents are aware of the importance of face-to-face interaction and increasing parental engagement with their child by reading and singing with the child at Sure Start and at home.
4.12.6 One of the two staff members who deliver the programme are trained in language promotion through the Hanen 'Learning Language and Loving it' and Elklan programmes. One staff member is also accredited as a trainer of trainers to deliver the 'Learning Language and Loving It' Hanen programme. As a result of the training, there is skilful implementation of the programmes and a very evident in-depth knowledge and understanding of child development. The staff have excellent parent facilitation skills and model good language development practice through intentional and incidental opportunities, stimulating high level of engagement from parents and babies.

4.12.7 All of the parents and children are highly engaged during the whole session as they copy the staff and respond with their own child to sing, listen to an age appropriate story, watch bubbles and use actions during rhymes. The parents understand the importance of face-to-face interactions pausing for a response, using a gentle voice, and using visual or verbal cues from the baby. The babies and infants are highly attentive throughout the whole session, responding to the staff, activities and their parents with eye contact, gurgling, laughing and early repetition of sounds such as “bu, bu, bu” for bubbles.

4.12.8 The staff very skilfully model actions and approaches using baby dolls as a prop and integrate key messages and reminders to parents in a fun, relaxed and integrated manner. They explained, for example, the purpose of waving with a chiffon scarf for tracking and hand eye co-ordination, modelled how to say STOP and pause before slowly saying “ready, steady…… go” to start an action again. All the babies waited and one child was already articulating “go”.

4.12.9 The staff have built trusting relationships with the mothers and signposted them to other services if there is early identification of need for either the child or the parent.
4.12.10 Paperwork is efficient and not overly bureaucratic. There is a holistic self-reflective team approach and effective collaboration among the team leads and senior management. Communication at all levels is valued and feedback is taken through oral and written formats and acted upon to address any barriers identified.

4.12.11 There are purposeful opportunities for feedback using a range of qualitative and quantitative data which is very well-informed by the assessment of the needs of individual parents/carers and the children. Appropriate value is placed on ‘joined up conversations with teams’ by senior management to illustrate the written evaluations and data gathered for speech and language. The senior management know the families well and connect the relevant pieces of data and as a result they are responsive to the needs of the children and the parents.

4.12.12 Robust monitoring and evaluation focuses on both short- and longer-term outcomes, such as, attendance and the longer-term outcomes of sustainable practices being used in the home learning environment.

4.12.13 The speech and language professionals gather data to chart the children’s language development and this is well-informed by the playroom practitioners who monitor the responses of the parents and the children in each session. Staff used ‘listening ears’ during observation of the parents engaging during the sessions with their children to identify parents in need of support and all opportunities to support sensitively were provided. Staff are readily available to talk to parents and build on their needs and interests to extend their capacity for good parenting and language development strategies. The staff have built trusting relationships with the mothers and have signposted them to other services if there is early identification of need for either the child or the parent.

4.12.14 There are observed and well documented benefits for the parents and the children. Parents spoke to the Inspectors about real examples of how they had used ideas at home. They understand key messages such as limiting screen time and they borrow books for their children and themselves from the library. Parents also value the friendships and peer support for teething, sleepless nights and feeding difficulties; they feel valued, see their baby progressing and understand how to help that progress. The parents and children can move seamlessly and progressively from Baby Rhyme time to other Rhyme Time sessions with an increased level of literacy messages.

4.12.15 The staff provide take home learning packs, have developed a book lending library within the setting and model best practice in age and stage appropriate book handling skills, telling stories and building up a repertoire of songs and action rhymes.

4.12.16 The staff are signposting to Rhyme time through home visits and the Rhyme time staff are skilfully picking up on the children’s milestones and identifying needs which include social and physical development, as well as language development. The staff are also signposting families where necessary to external support for a range of mental health issues.
The lead speech and language therapist linked to the project has carried out a strategic mapping of the speech and language programmes across the Western Trust to align features and titles of a very wide range of programmes offering similar provision. This is to promote a more manageable and consistent approach to monitoring the effectiveness of programmes.

The staff have successfully replicated the Rhymes and language programme in the ‘Welcome to the World’ Parent and baby breastfeeding programme. The knowledge of the programme’s staff of language development and age and stage appropriate skills, coupled with their highly effective parent support skills, are going to be disseminated and shared within other programmes. This will build further capacity across teams to deliver and embed high quality language strategies across the project.

**Key features of developing effective practice:**

- Effective leadership and management and collaborative working among the staff.
- The implementation of a very high quality and effective programme for babies aged 0-12 months.
- The high level of staff expertise, knowledge of child development and parental facilitation skills alongside an openness to continuous professional development opportunities.
- An open and honest culture of self-evaluation built on trusting relationships and a cycle of review of practice, leading to adapting to needs and change to deliver high quality outcomes.
- A shared understanding of the aims of Sure Start and the role individuals play to deliver outcomes for children and families.
- Effective community partnership working to combine resources and skills for the benefit of the local community.

**Next steps:**

- Share the effective practice across the project.
- Sustain the high quality practice.
4.13 Outer West Sure Start 1

Case study focus 1:

4.13.1 Improving links between Sure Start and local pre-school providers

Links to the key themes:

- effective self-evaluation leading to improvement; and
- effective links with pre-schools and schools.

4.13.2 Outer West Sure Start has been in operation for approximately 10 years. It is located within an inner city area of Belfast with pockets of both affluence and deprivation within the catchment area. The manager reports an increasing trend in domestic violence and numbers of children on the child protection register. The project is situated at an interface of the two main communities which continue to experience periods of community tension.

4.13.3 Ongoing community tensions lead, at times, to a reluctance of some parents to engage in activities in a location perceived to be within the area of the other community. The extended absences of key staff combined with newly appointed staff learning their role have hindered the pace of improvement in some aspects of work within the project.

The journey of improvement:

4.13.4 The leadership and management, in conjunction with their staff and a sample of the local pre-school leaders, reviewed the links between their Sure Start project and local pre-schools. Through this collaborative work they identified strengths in aspects of their work, such as, the ongoing sharing of speech and language expertise and the effective continuity of screening tools within the Developmental Programme for 2-3 Year Olds. In addition, they prioritised a number of areas that required further improvement. These were prioritised as the need to improve the quality of the transition reports, build further staff confidence and skills to convey difficult messages about children not reaching their appropriate developmental stages, and parental difficulties in completing the applications for pre-schools.

4.13.5 Planned steps were taken to make changes and bring about improvements. As a result, the message of the month is now shared with and reinforced by the pre-schools and the parents are provided with one-to-one support to complete applications on time and are helped to understand the process more fully. The format of the transition reports was also reviewed and improved to provide more detailed information about the child and in addition face-to-face meetings were set up with the parents, child, Sure Start staff member and pre-school teacher. The timing of completing the transition forms was moved back to May to provide a better timeline for the pre-schools to use the information.

4.13.6 Feedback from the nursery schools indicates that they are more informed and prepared for the incoming children and families as a result of the changes to the transition arrangements. In particular there is an earlier identification of need as a direct result of the more detailed information and the face-to-face meetings. Through the training and support provided, the Sure Start staff are gaining more confidence in the skills of writing reports and talking to parents about concerns.
Key features of developing effective practice:

- The reflective culture being planned for and developed by the leadership and management which encourages staff at all levels to consider what, they are doing, why and how well.

- The communication and collaborative work being developed between the project and local pre-schools.

- Action planning to guide the process of improvement, including review of the impact of the actions taken.

Next steps:

- Embed and build on the improvements to date.

- Continue to develop effective links with the full range of pre-school providers.
4.14 Outer West Sure Start 2

Case study focus 2:

4.14.1 Increasing the awareness of parents as their child’s first educator and improving the participation rates of parents in the Developmental Programme for 2-3 Year Olds.

Links to the key themes:

- effective self-evaluation leading to improvement;
- effective engagement with and outcomes for parents; and
- effective working between Programme Support Specialists (PSS) and Sure Start leadership and management to bring about improvement.

The journey of improvement:

4.14.2 Following publication of two previous evaluations of Sure Start by the Education and Training Inspectorate, the managers, staff and PSS ring-fenced time to reflect and ask pertinent questions about what they are providing and why. In particular, they reviewed the involvement of parents in the play and stay sessions and identified strengths and areas for further development in their provision, including the training needs of staff. As a result of their self-evaluation they prioritised the need to build staff capacity to write transition reports and to have the confidence and skills to hold difficult conversations with parents.

4.14.3 Parents applying for a place in the Developmental Programme for 2-3 Year Olds receive a home visit. During the visit the programme is explained alongside the expectation of a minimum of 80% attendance by parents to the weekly play and stay sessions. Where a parent does not attend the staff follow up with a supportive phone call to discuss any concerns. Some parents may also receive a home visit using story sacks or other relevant approaches to support a family during a difficult period. They also reduced the maximum number of parents attending each play and stay session with their child to six at a time and report a higher level of engagement as a result.

4.14.4 During the play and stay session observed, the children and parents were relaxed and all engaged in a range of activities and conversations with staff and one another. Staff play alongside the families modelling language, for example, at the scented dough describing the soft and sticky texture of the materials, or on the floor extending the conversations about toy cars and where the child might go in the car. The parents provide peer support for one another as they discuss a wide range of topics ranging from how to help their child give up the dummy, healthy eating and songs they sing at home. Parents and children enjoy looking at and discussing together the photographic display of activities they have done either in the programme or at home.

4.14.5 Towards the end of the session the parents are encouraged to reflect and note down what their child has enjoyed during the session and the message of the month is shared with them through a flier to take home. The staff refer to parents comments when reviewing the session and are starting to use them to plan for further sessions. Parents’ skills are valued and used to help contribute to the sessions such as a parent who led a session with a gardening focus, using their interest, skills and knowledge.
Key features of developing effective practice:

- The interest and engagement of most parents with their children and the staff during the play and stay sessions and the age and stage appropriate activities provided.

- The very good training and guidance provided by the PSS to support improvement including clear identification of who is responsible for monitoring and evaluating in the period between PSS visits.

- The increasing confidence of the staff to engage meaningfully with the parents during the session.

- The joined up working between the staff, early learning co-ordinator and family support worker to signpost and follow up with parents.

Next steps:

- Convey the message of the month more meaningfully with parents throughout the session.

- Review the end of the session to make a more effective transition to home time.

- Analyse the available data and use the information to track trends and monitor effectiveness.
4.15 Shankill Sure Start

Case study focus:

4.15.1 From Bumps to Baby: early engagement of parents.

Links to the key themes:

- effective self-evaluation leading to improvement; and
- effective engagement with and outcomes for parents.

Contextual information:

4.15.2 Shankill Sure Start main offices are based in the Alessie Centre on the Shankhill Road with two satellite centres; the Martin Centre on the Ballygomartin Road and the Hannah Centre on the Crumlin Road. Their core aim is to help ensure that every child in the greater Shankill area has the best possible start in life, aiming to improve outcomes for the youngest children in terms of their physical, social, emotional and intellectual well-being.

Journey of improvement:

4.15.3 The leadership and management identified the need to engage parents early and to meet the needs of the young mothers who were presenting with a range of needs including social isolation, anxiety and uncertainty. They have a clear view that pregnancy offers a critical opportunity to convey important messages about diet, nutrition and lifestyle choices that impact on the growing foetus. They have found that it is a time when women are more open to receiving these messages and making changes that will help to improve outcomes for their babies.

4.15.4 The needs were identified through a combination of the referrals being made from the Northern Ireland Maternity System (NIMATS), information from the health visitor and midwife, detailed analysis of information provided by a range of daily, weekly and quarterly evaluations and reports and information from parents and case studies. This information was analysed and used to plan future actions for improvement.

4.15.5 Very clear plans were put in place to guide the perinatal support programmes with topics ranging from enjoying a health pregnancy, diet, lifestyle and nutrition to care of the new-born and baby brain development. Extensive support material, guidance and leaflets are provided at each session and staff signpost families to other agencies and services such as smoking cessation, alcohol liaison, midwife and local dentists. The ‘Bump to Baby’ programme seeks to maximise the parents understanding of the role they have to play in their child’s development.
4.15.6 The staff skilfully tap into the lifestyle of the mums to be and provide up to date and easily accessible support material, shared for example, via QR codes, and highlight topical and recent newspaper articles and reports such as 'Too much brexting\(^8\) undermines bonding during breastfeeding' Elizabeth Aguilera, 2015

4.15.7 All staff contribute to and review the plans both in oral weekly joint meetings and through written reviews of the programmes which ensure a connected approach and the sharing of information and data relevant to the families.

4.15.8 Due to the high number of antenatal referrals the Sure Start leadership made the decision in 2016 to employ an additional Antenatal Family Support Worker (ANFSW) and additional midwife to support as many families as possible. A ‘floater’ was also employed to cover sickness and provide additional support such as a crèche facility for mums attending programmes.

4.15.9 The staff have the opportunity for continued professional development through, for example, Solihull training for all staff and Hanen training delivered by the Speech and Language Therapist. All staff are trained and updated annually in the principles of the UNICEF Baby Friendly Breastfeeding initiative and in addition staff are afforded time to complete their necessary mandatory training linked to their profession.

4.15.10 The project team have captured a range of qualitative and quantitative data and case studies to track the outcomes and positive impact of their work. Parents who attended the programmes are more aware of the health, economic and emotional benefits of breast feeding. Parents also indicated a reduction in anxiety and social isolation and an increase in confidence and knowledge of child development. In addition, those who attended the Infant Massage programme had the opportunity to develop massage skills and techniques which when replicated at home helped with bonding and attachment, wind, teething, digestion and babies bowel movements. Mums reported that massage also helped improve their baby’s sleep, bedtime routine and they felt they were closer and better connected to their baby.

4.15.11 The data indicates that Breastfeeding rates at 12 months have risen from 4.4% to 10.1% in the Belfast Health and Social Care Trust in 2017/18. The Sure Start Centre have achieved their level 2 UNICEF Baby Friendly Breastfeeding award and are now aiming for their Gold Award, which is a commitment to ensuring sustainability in the long-term. They adhere to the principles in the UNICEF Baby Friendly Breastfeeding Code of Practice; with a focus on a firm foundation; educating the workforce; educating parents; code of marketing; highlighting benefits and relationship building and connections.

4.15.12 The team tailor the support to meet individual needs and circumstances. One mum who gave birth at 37 weeks, had to travel to Craigavon Hospital as no intensive care cot was available in Belfast. This mum was determined to breastfeed despite being told by many medical professionals that this would not be possible. Mum used a breast pump hired from Shankill Sure Start breast-feeding support group (SSS BFSG) to ensure a continued supply

\(^8\) Word for texting while breastfeeding: "brexting."
of milk and this was used to feed her baby via bottle in hospital. She successfully commenced breast feeding on the day of the child’s due date. She commended the support provided by the SSS BFSG and acknowledged the input, support and advice provided undoubtedly was contributory to the success of her journey.

4.15.13 The leadership have identified a pathway for ongoing future improvement focusing on further integration of language and communication with a particular focus on baby brain development, education for both staff and the parents and addressing additional needs.

4.15.14 There is clear continuity and effective links through and across the programmes being delivered.

Key features leading to effective practice include:

- Effective leadership and management.
- A very clearly-focused team work approach in which staff appreciate the benefits of the connected approach yet are very cognisant and respectful of their individual contributions and roles.
- Evidence of the positive impact and outcomes for the families.
- Regular engagement between the staff and sharing of information to ensure parents, families and baby needs are met.
- Professional interaction of staff with mums/families in a supportive and pastoral manner.
- A strategic approach, influenced by Solihull, to planning and incorporation of consistent messages.
- Opportunities for continued professional development, including the sharing of good practice.
- A reflective culture supported by oral and written evaluations, collective review and regular reports which are used effectively to inform future priorities.

Next steps:

- Continue to review, develop and embed the effective practice to bring about continuous improvement.
Appendix A: Inspection methodology

A sample of projects were selected based on self-nomination forms of effective practice case studies, submitted by Sure Start projects to represent a cross section of geographical areas, size and range of lead and accountable bodies and Child Care Partnerships.

The projects which were selected to be part of this evaluation received two weeks advance notification of the visit as part of the evaluation, followed up by a phone call from the Reporting Inspector to discuss and confirm arrangements.

The visits took place over one or two days day with a small inspection team of two or three, led by a member of the ETI early years team.

In response to the feedback from previous evaluations and to reduce any additional workload and bureaucracy, the safeguarding form and self-evaluation form were not issued during this evaluation.

Documents providing guidance on the evaluation model were prepared and made available on the ETI website at: https://tinyurl.com/Eval-Sure-Start

During the visit, the team gathered evidence to evaluate the nominated case study based on a range of first-hand evidence including:

- observation of a sample of practice with the children and the parents;
- reading relevant documentation;
- meetings with key staff; and
- discussions with a sample of parents.

At the end of the evaluation visit, each Sure Start project visited received a brief oral feedback to inform the projects own self-evaluation processes and inform further improvement.
## Appendix B: List of projects visited

<table>
<thead>
<tr>
<th>Project Name</th>
<th>CCP:</th>
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<tbody>
<tr>
<td>Outer West Belfast Sure Start</td>
<td>Belfast Childcare Partnership</td>
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<tr>
<td>Shankill Sure Start</td>
<td>Belfast Childcare Partnership</td>
</tr>
<tr>
<td>Ballymena &amp; Little Steps Sure Start</td>
<td>Northern Childcare Partnership</td>
</tr>
<tr>
<td>Horizon Sure Start</td>
<td>Northern Childcare Partnership</td>
</tr>
<tr>
<td>ABBEY Sure Start</td>
<td>Northern Childcare Partnership</td>
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<tr>
<td>Down Sure Start</td>
<td>South Eastern Childcare Partnership</td>
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<tr>
<td>Dungannon &amp; Coalisland Sure Start</td>
<td>Southern Area Childcare Partnership</td>
</tr>
<tr>
<td>Kilkeel Sure Start</td>
<td>Southern Area Childcare Partnership</td>
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<tr>
<td>Dry Arch Sure Start</td>
<td>Western Childcare Partnership</td>
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<tr>
<td>Sure Start Edenballymore</td>
<td>Western Childcare Partnership</td>
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<tr>
<td>LAST Sure Start</td>
<td>Western Childcare Partnership</td>
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<tr>
<td>Little Hands Sure Start</td>
<td>Western Childcare Partnership</td>
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Appendix C: Key themes and additional criteria for self-nomination

Key focus areas

All case studies will demonstrate some aspect of effective self-evaluation leading to improvement which may include some of the following:

- Improvement in an aspect of outcomes, provision or leadership and management. Examples of effective consultation with staff/parents/relevant stakeholders.
- Effective analysis of qualitative and quantitative data to identify strengths and areas for improvement to inform action planning process.
- Effective monitoring of the quality of provision and outcomes for children or parents and using this information to evaluate practice and inform future planning.
- Effective use of the Outcomes Based Accountability (OBA) model or other model to track outcomes and impact.
- Improvement made following feedback from previous ETI Evaluations of Sure Start.
- Effective leadership and management at any level to bring about continuous improvement.

1. Effective engagement with and outcomes for parents

This may include:

- Developing a culture of high expectation of parental involvement with their children.
- Improvement in the effective participation of parents in the Developmental Programme for 2/3 year olds.
- Increased participation of fathers or other under-represented group of parents.
- Effective processes for the selection, participation and retention of parents in the Developmental Programme for 2-3 Year Olds.
- Evidence of improvement in the home learning environment.
- Evidence of increased skill and confidence of parents as their child’s first educator.
- Effective support as parent’s transition with their children from Sure Start to preschool.
- Tracking a parent’s journey through Sure Start with outcomes.
2. High quality play and learning experiences

This may include:

- Examples of consistently high/or increasingly high quality play experiences: programmes/crèches/home visiting.
- Role of joint working between staff to ensure high quality.
- High quality outdoor learning.
- High level or increasingly high level of staff capacity to implement and embed their training in speech, language and communication and impact on their day-to-day practice with the children across all programmes.
- Positive impact of support from PSS or SLT or other.

3. Links with pre-schools and primary schools

This may include:

- Effective/increasingly effective communication and partnership working between Sure Start, pre-schools and schools.
- Effective use of resources through joint training and sharing of resources.
- Evidence of the positive impact of strategic planning between early years providers within a geographical area.
- Effective transition arrangements for children and parents from Sure Start to next stage of learning.
- How a key person has had their role defined and has developed/co-ordinated links.

4. Effective working between Programme Specialist Support and Sure Start leadership and management and staff to bring about improvements.

This may include:

- Examples of improvement as a result of the support provided in the quality of provision for children in a project’s 2-3 year old programmes or/and engagement of parents.
- Effective communication between PSS and leadership and management to monitor and evaluate improvements.
- Promotion of a regional sharing of practice/consistency of approach.

Please note: This list is not exhaustive. Any other examples of effective and improving or innovative work will be welcomed.