

Better Start Bradford Innovation Hub

End of contract report – ESOL for Pregnancy June 2019

This is a report provided by the Better Start Bradford Innovation Hub (BSBIH) for the Better Start Bradford (BSB) and the ESOL for Pregnancy teams.

The document provides an overview of the ESOL for Pregnancy project's performance and findings from the implementation evaluation. The design of this evaluation is described in more detail in the Evaluation Plan Summary, which was approved by key stakeholders from the BSBIH and BSB.

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Approved by:

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Better Start Bradford Innovation Hub End of Contract Report for ESOL for Pregnancy – Executive Summary



Project overview

ESOL for Pregnancy is an antenatal course designed for women with low levels of English language proficiency. The project aims to support women to develop specific language skills that will facilitate their communication with midwives and the British health system more broadly, as well as informing women about pregnancy and birth practices to help them feel empowered in their decision making. The course was developed by Shipley College, and has not been the subject of previous outcome evaluation.

This document presents the findings from the BSBIH's implementation evaluation of ESOL for pregnancy, based on data provided by the service provider (Shipley College) from the beginning of the contract period in November, 2016 to May, 2019.

While the contents of this report are based on the project's Evaluation Plan, it should be noted that significant data quality issues have meant it was not possible to fully execute these plans.

Project performance summary

The progression criteria for this project were recruitment, implementation, and satisfaction.

Recruitment was measured by the number of women who enrolled and attended at least one session, with an anticipated figure of 90 annually. In Year 1, 14 women were recruited, followed by 26 in Year 2, and 12 in Year 3. This puts in the project in **RED** on this indicator across all three years of delivery.

Implementation was measured by the number courses delivered to completion (at least 3 sessions). The anticipated annual figure was 15 courses. In Year 1, 4 courses were delivered, followed by 8 in Year 2, and 3 in Year 3. This places the project in **RED** on this indicator across all three years of delivery.

Satisfaction was measured by the median overall satisfaction score reported by participants. Only 8 questionnaires were returned, meaning data should be interpreted with caution. The median score was 4.5, putting the project in **GREEN** for this indicator.

Other key findings

The majority of referrals came from midwifery teams (65%), while 17% came from other sources, and for 18% of the total referrals the source was unknown.

Poor data quality obscured the outcomes of referrals, making it difficult to identify challenges to the recruitment pathway.

38% of courses were cancelled, primarily due to low recruitment rates.

Maternity data identifies that within the Better Start Bradford area, 29% of women are recorded as having low or no English language proficiency, revealing an ongoing need for support for these women.

Recommendations

Recommendation 1 –

Consider the extent to which this project is addressing the current needs of the community. Although a meaningful number of women still require interpreters to access maternity care, recruitment to this project has been consistently low. It would be useful to consider carefully whether the project offer aligns with what the target population would like to access during their pregnancy. Alternative manualised ESOL courses are available and should be considered.

Recommendation 2 –

Clarify the theory of change, logic model, and main outcomes for this or any replacement project. Despite discussion throughout the contract period, it has not been possible to agree on the main outcomes of attending ESOL for Pregnancy (i.e. improved language skills, improved confidence, better antenatal outcomes). This would be a fundamental requirement for any future evaluation.

Recommendation 3 –

Address the significant data quality issues. The project has received feedback on these data quality issues, and have made some changes to support data capture processes. However, if this project is recommissioned, the contract should stipulate the importance of compliance with the data capture and consent procedures.

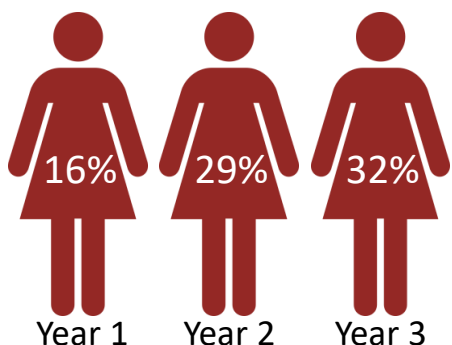
End of contract report – Progression Criteria & Project Performance

Data Quality

There were extensive issues with data quality for this project that impacted on the availability and completeness of key data required to complete the evaluation as set out in the evaluation plan. These issues have been shared with the project outside of this report. Additionally, for the majority of referrals, consent to share data with the BSBIH was either not given (36%), or not recorded (29%), which means that for 65% of women referred it is not possible to perform data linkage. Finally, the BSBIH has not received a copy of the course manual, meaning it was not possible to consider fidelity or identify any potential outcome variables.

Progression Criteria

Recruitment – Number of women enrolled

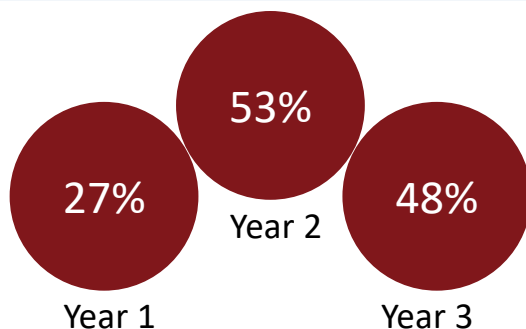


The Recruitment progression criteria for this project was the number of women who were enrolled who attended at least one session. It was anticipated this figure would be 90 women annually. In Year 1, 14 women were recruited, followed by 26 in Year 2, and 12 in Year 3. This puts in the project in **RED** on this indicator across all three years of delivery.

Implementation – Number of courses delivered

The Implementation progression criteria for this project was the number of courses delivered, counting those courses that delivered 3 or more sessions. This was to ensure that courses provided the full content and women were able to complete.

The anticipated annual figure was 15 courses, and across all three years the project remained in **RED** for this indicator. In Year 1, 4 courses were delivered, followed by 8 in Year 2, and 3 in Year 3.



Satisfaction – How satisfied were women with the project?



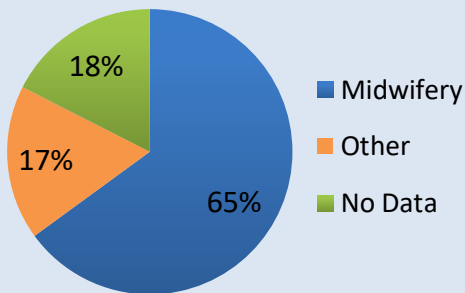
The final agreed progression criteria for ESOL for Pregnancy was satisfaction, as measured by the median overall satisfaction score reported by participants. Only 8 satisfaction questionnaires were returned, so it is very important that this data is not over-interpreted. The median overall satisfaction score for the project was 4.5 out of 5 possible points, meaning the project scored in **GREEN** for this indicator.

As participants have limited English language proficiency, collecting accurate satisfaction data was challenging. The process used to collect this data is unclear, as women would likely have needed support from the course teachers to complete the forms, calling into question whether this data is an unbiased reflection of participants' views. Furthermore, the very small sample size and fact that no participant IDs were included means it is unclear whether these women are representative of the total participant group.

End of contract report – Project Implementation

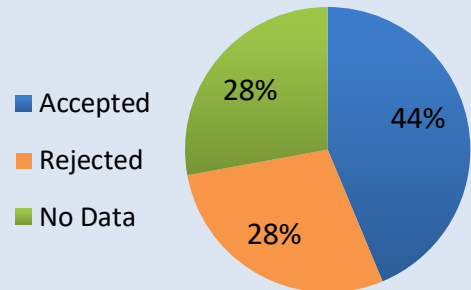
Referral outcomes

Referral source



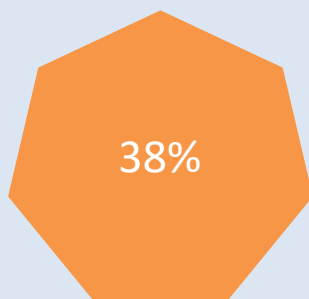
The majority of referrals into the project came from midwifery teams, who referred in 65% of the total. Referrals from other sources made up the other 17% of the total, however the number of referrals from specific sources was in all cases below 10, so data were aggregated to preserve anonymity. A further 18% of referrals had no recorded referral source.

Referral acceptance



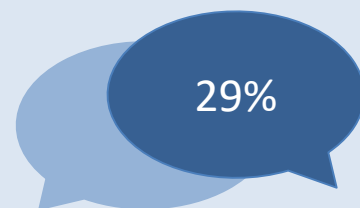
Of the 183 referrals into the project, 80 were accepted (44%), and 52 were rejected (28%). However, for a further 28% of referrals, no outcome was recorded. For 85% of the rejected referrals, the reason for rejection was either unspecified (Other) or not recorded, making it difficult to identify specific challenges to project recruitment.

Session delivery and cancellation



38% of scheduled sessions had to be cancelled. Where reason was recorded, this was primarily due to no or very low numbers of referred women.

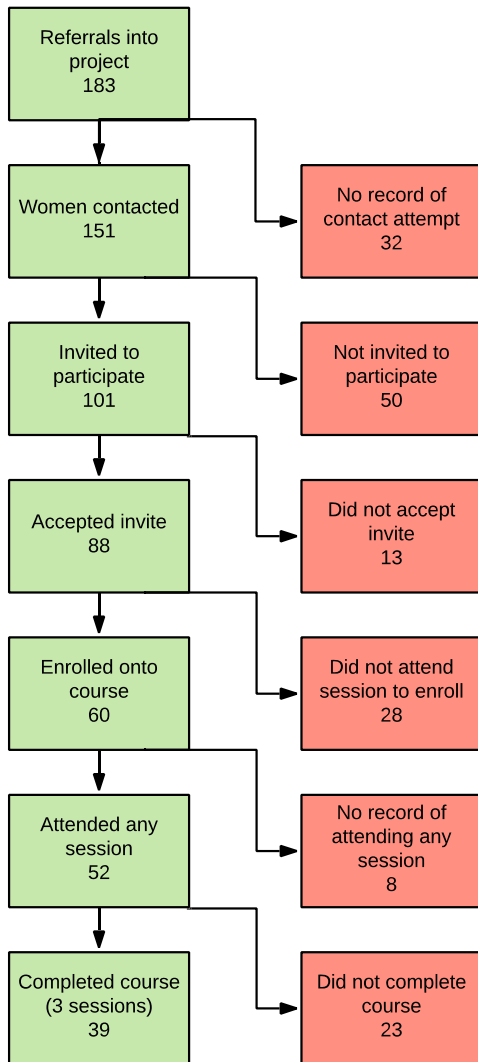
What is the need for the project?



The most recent estimates from the midwifery data suggest that 29% of women who were seen had low or no English language proficiency. Of this group, 74% are recorded as needing an interpreter in their appointments, suggesting there is still a considerable population of women who struggle to access midwifery and other antenatal provision within the Better Start Bradford reach area.

End of contract report – Additional findings

Flow diagram of project recruitment and retention



It is possible that some or all of these women were contacted, as this number could reflect poor data completion.

The referral data cannot be disentangled to reveal the reasons why the 101 were invited to participate, but 50 women were not.

No reasons for declining the invitation to participate were recorded.

No reasons for nonattendance were recorded.

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