Better Start Bradford Innovation Hub

End of contract report – Home-Start

This is a report provided by the Better Start Bradford Innovation Hub (BSBIH) for the Better Start Bradford (BSB) and the Home-Start project team.

The document provides an overview of Home-Start's project performance and findings from the implementation evaluation including an interpretation of these findings by the BSBIH. 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.

Authors: Abby Dunn, Kathryn Willan, Nimarta Dharni, Sara Ahern, Tracey Bywater, Charlotte Endacott, Maria Bryant, Josie Dickerson, and the Better Start Bradford Innovation Hub

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Approved by:

Role	Name	Date
BSBIH Programme Manager	Josie Dickerson	06.08.19
BSBIH Social and Emotional Lead	Tracey Bywater	06.08.19
BSBIH Fidelity and Implementation lead	Maria Bryant	
BSB Head of Programme	Gill Thornton	
BSB Implementation Manager	Jill Duffy	

Better Start Bradford Innovation Hub

Home-Start – Executive Summary

Project overview

Home-Start is a peer support intervention which provides emotional support and practical help for families who are finding parenting challenging. There are no stringent eligibility criteria. Families are assessed by the project co-ordinator but support is delivered by trained peers. The project is deliberately flexible and non prescriptive in the families it works with, the kind of support it offers and the length of engagement with families.

Home-Start is available to support families living in the Better Start Bradford area from pregnancy, or where there is a child in the family aged under four.

This document reflects the BSBIH's evaluation of the first 2.5 years of service delivery (January 2017- June 2019) and contains data up to the 30th June 2019 shared with BSBIH in July 2019.

Project performance

Progression Criteria selected for this project were recruitment, implementation, and satisfaction.

- Annual **recruitment** targets reflected the number of families that should be matched with a volunteer and engaged with the service each year. Overall the project is in GREEN.

- To support **implementation**, it was anticipated that 15-27 volunteers would be available to match with families each year. Overall the project is in GREEN.

- Only 10 participating families returned **satisfaction** questionnaires (21%). All had median scores of 4 or more placing the project in GREEN. *However*, **such low response rates mean this should be interpreted with caution and does not demonstrate high levels of satisfaction with the project.**

Other key findings

142 families were referred, **in total 58 were matched**, and 30 had a 'planned ending' when disengaging with the project.

The wait time between referral and matching exceeded the 6-week maximum for 67% of families. On average families waited 60 days.

19 of 64 (29%) unmatched families did not want to be matched as they no longer wanted support.

Families were referred via many pathways, with the majority of referrals (n=51; 36%) being from health visiting.

Fewer than 10 referrals were received for Central Eastern European families, and fewer than 5 were matched (noted as a priority to address in SD plan).

Data quality

Home-Start have been responsive to queries and have addressed all issues raised as far as possible. Data were generally well complete and of good quality, though satisfaction data are limited and volunteer supervision information was not provided. Consistent entry of end dates for support is needed to assess duration intervention.

Comments and recommendations

1 Home-Start have met their overall targets for recruitment year on year. However, it is worth noting that the project has matched and supported **a total of 58 unique families** across three years. Existing targets should be reviewed to ensure they are appropriate.

2 Home-Start volunteers are not representative of the BSB population, and are failing to match a large number of families within the target period of 6 weeks. Home-Start should focus on expanding their volunteer pool, and address the delay in matching.
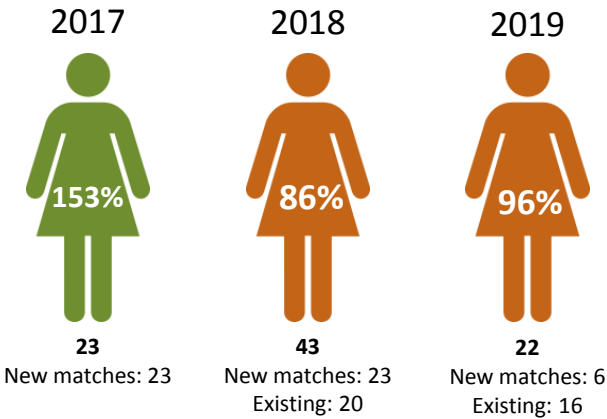
3 This project has low evaluability due to a lack of clarity around eligibility, project activities and outcomes. We are unable to measure these in a reliable way. Any future evaluation would be implementation only, and would require higher rates of completion of satisfaction questionnaires, and more detailed referral data.

Project Performance & Progression Criteria

Recruitment – Did the project recruit enough families?

Proportion of target

| 2017	2018	2019
153%	86%	96%
23	**43**	**22**
New matches: 23	New matches: 23	New matches: 6
	Existing: 20	Existing: 16

The agreed indicator for project recruitment was the number of families referred, assessed and matched with a volunteer*.

Annual targets reflected the number of families that should be matched with a volunteer and engaged with the service. In Year 1 the target was 15 families, in Year 2 50 families and in Year 3 45 families (with a pro rata target of 23).

This means that for January 2017 -June 2019, the overall target of 88 families was met putting the project in **GREEN** for this progression criterion.

*Matched families did not necessarily go on to receive a visit from the service.

Implementation – Did the project recruit enough volunteers?

Volunteers appointed and available
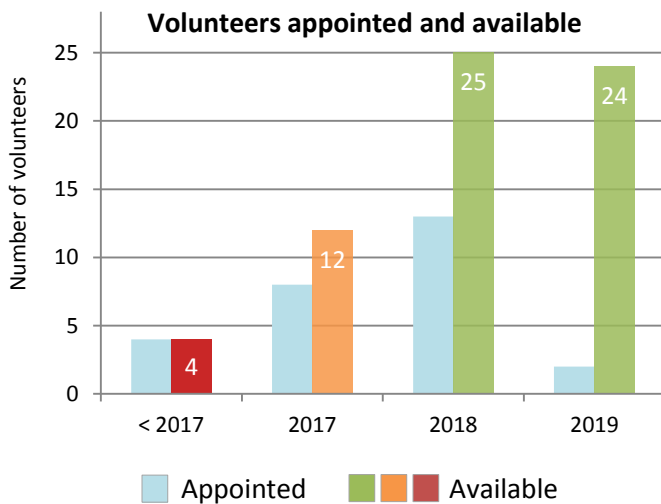
The agreed indicator for project implementation was the number of volunteers available to be matched with families. A total of 41 volunteers were appointed during the delivery period, with 35 matched to families, and 28 attending a visit with a family.

Detailed information about the volunteers, including dates they left the project, was only available for 68% of volunteers making it impossible to report on overall availability for the delivery period. However, the agreed target was to have 15-27 trained and available to match. This was not achieved in Year 1 (2017) but was achieved in Years 2 & 3 (2018 & 2019) placing them in **GREEN** for this progression criterion.

Volunteers appear to be well retained by Home-Start.

Satisfaction – How satisfied were families with the project?

The agreed indicator for project satisfaction was the proportion of parents and caregivers with a median satisfaction score of 4 out of 5.
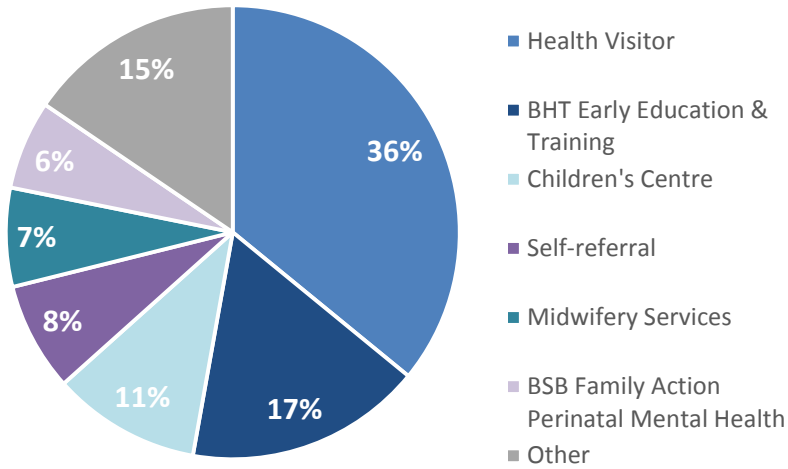
10 of the 48 (21%) matched participants who had ended their engagement with the project at the time of this report, returned satisfaction questionnaires. Of these 10, 100% had median scores of 4 or more which puts the project in **GREEN** for this progression criterion.

However, **because of the small number of questionnaires completed this should be interpreted with caution and not taken to indicate the satisfaction of participants with the project. More work is needed to understand low response rates and levels of satisfaction with the project.**

Project Implementation - Referrals

Where did Home-Start referrals come from?

Referral source for families

- Health Visitor
- BHT Early Education & Training
- Children's Centre
- Self-referral
- Midwifery Services
- BSB Family Action Perinatal Mental Health
- Other

Home-Start referrals came from a diverse range of sources. This suggests that Home-Start is well-known to a wide variety of referrers.

The most common referral source for the project is Health Visiting. The second is Talking Together (BHT Early Education) which is a Better Start Bradford funded project.

There may be an opportunity to work with the infrequent referral sources to increase the frequency with which they refer.

Why were families referred to Home-Start?

Reason for referral	Total number
Managing child behaviour	72
Child development	84
Own physical health	65
Own mental health	87
Isolation	100
Self esteem	75
Child physical health	58
Child mental health	38
Budget	46
Day to day	67
Family conflict	50
Multiple young children	63
Use of services	75
Parents learning	10
Family needs - other	13
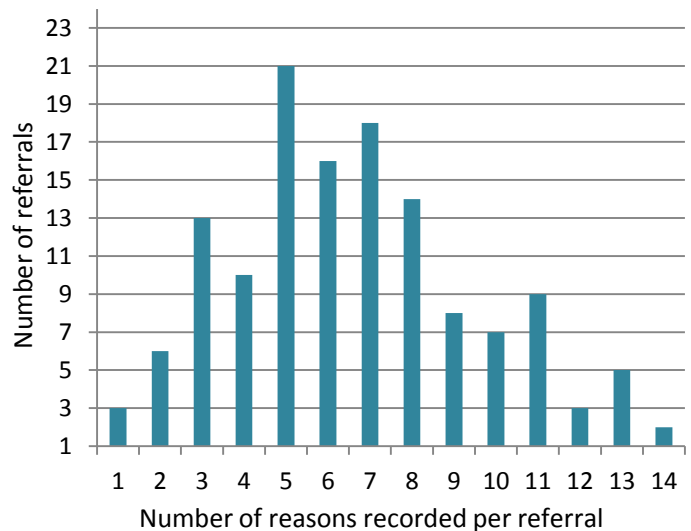
Families were referred for an average of 6.7 reasons each (out of a possible 14 specified reasons).

Depending on the purpose of the project this may indicate a strength or a weakness. It implies families either have lots of potentially complex needs, or alternatively few quantifiable needs which makes it difficult for referrers to articulate why families need the service.

903 referral reasons were recorded for 142 unique referrals

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Project Implementation - Matching

The participant flow diagram (page 7) shows families journey through the project.

## What proportion of referrals went on to be matched with a volunteer?

Home-Start had 142 unique referrals in the period January 2017-June 2019. Of these referrals 58 were matched with a volunteer (41%) and 64 (45%) were not. The remaining number were ineligible for the service or non-contactable.

The most common reason for not being matched was that the family no longer wanted support (19, 30%). 14 (22%) of the families were not matched because there was no volunteer available.

The conversion rate between referrals and subsequently being matched was consistent between year one and two.

Conversion rate from referrals to matched
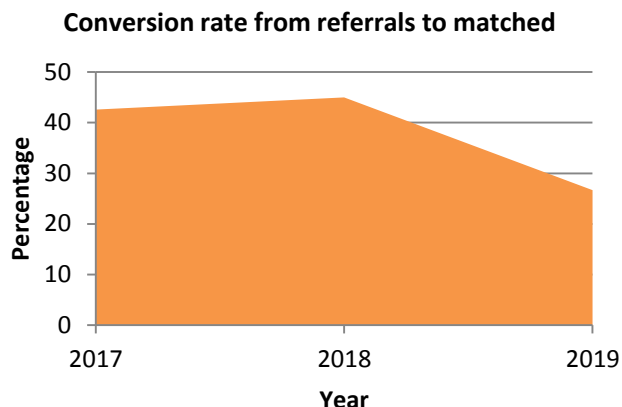
How long did families wait to be matched with a volunteer?

Number of days wait between referral and match
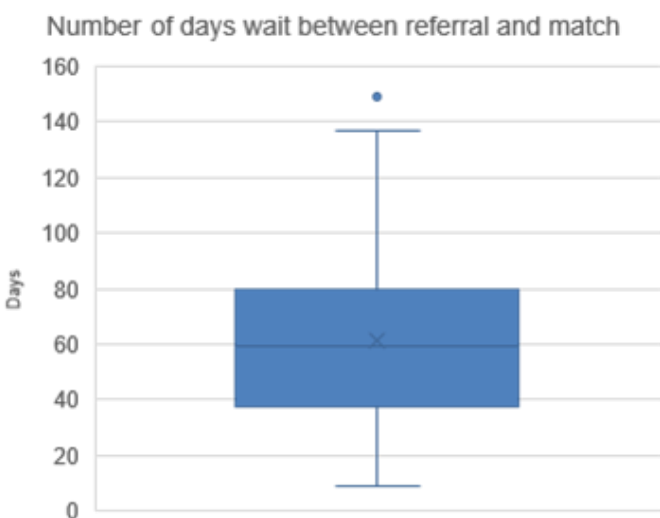
The target maximum delay between referral and matching with a volunteer was 6 weeks.

The mean wait between referral and match was 8.7 weeks, with a minimum of 1.2 weeks and a maximum of 21.2 weeks.

67% of people waited for more than 6 weeks.

This waiting time for service is potentially a significant barrier to families getting the service they need in a timely fashion. The reasons for this wait and implications for families need to be unpacked.

What were the demographic characteristics of Home-Start volunteers?

Where data were available (n=28), the majority of volunteers were of Pakistani heritage (n=20) or were White British (n=8)

Home-Start recruited both male and female volunteers, though the vast majority were female (n >20).

There was a high availability of volunteers speaking languages originating in Pakistan, North West India and Afghanistan. There were no volunteers speaking Central and Eastern European languages, African languages or languages from elsewhere in Asia (e.g. Bengali/Tamil).

The age range of volunteers varied, with ten aged between 20 and 35, and seventeen over the age of 35 (data missing for one additional volunteer).

Ethnicity

28.6

71.4
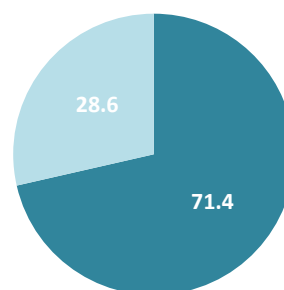
■ Pakistani　　■ White; E/W/S/N Irish/B

Project Implementation – Home-Start Families

Who was supported by Home-Start?

Around 53% of the BSB maternity population identifies as Pakistani, 15% White British, 11% White Other and 20% Other.
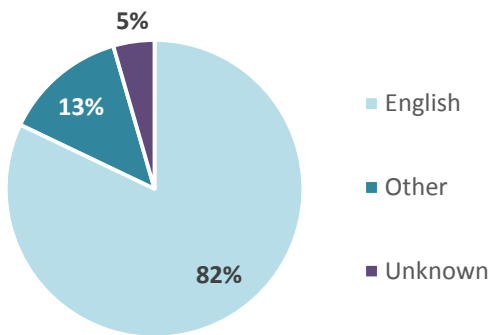
Assuming main carers were all women who had had their babies in the last three years whilst living in the Better Start Bradford area, Pakistani main carers were over represented.

Fewer than five Central Eastern European families were recruited (from 10 referrals).

Main Carer Ethnicity

- Asian/Asian British: Pakistani
- White: British
- Other
- Unknown

62%, 10%, 24%, 4%
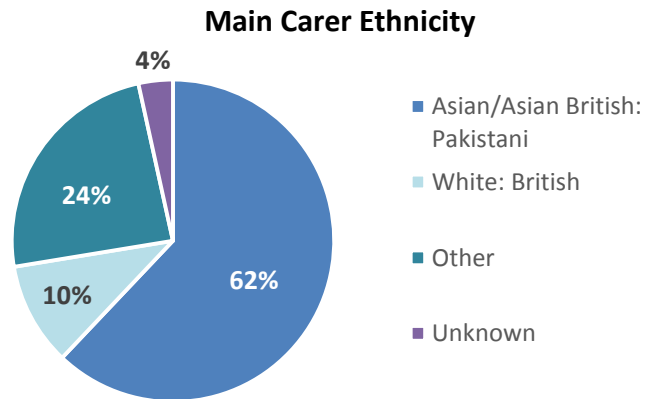
What were the language needs of families?

Main Carer Language

5%, 13%, 82%

- English
- Other
- Unknown

Language appears to be a barrier to engagement with the project as the vast majority of support is offered in English.

There is limited demand for the service in Urdu as Pakistani main carers are over-represented and there are few records of support in Urdu (see volunteers data – many volunteers can speak Urdu).

No families were supported in Central and Eastern European languages.

Who were the children of families supported by Home-Start?

The 58 matched families included 126 children, an average of 2.1 children per family.
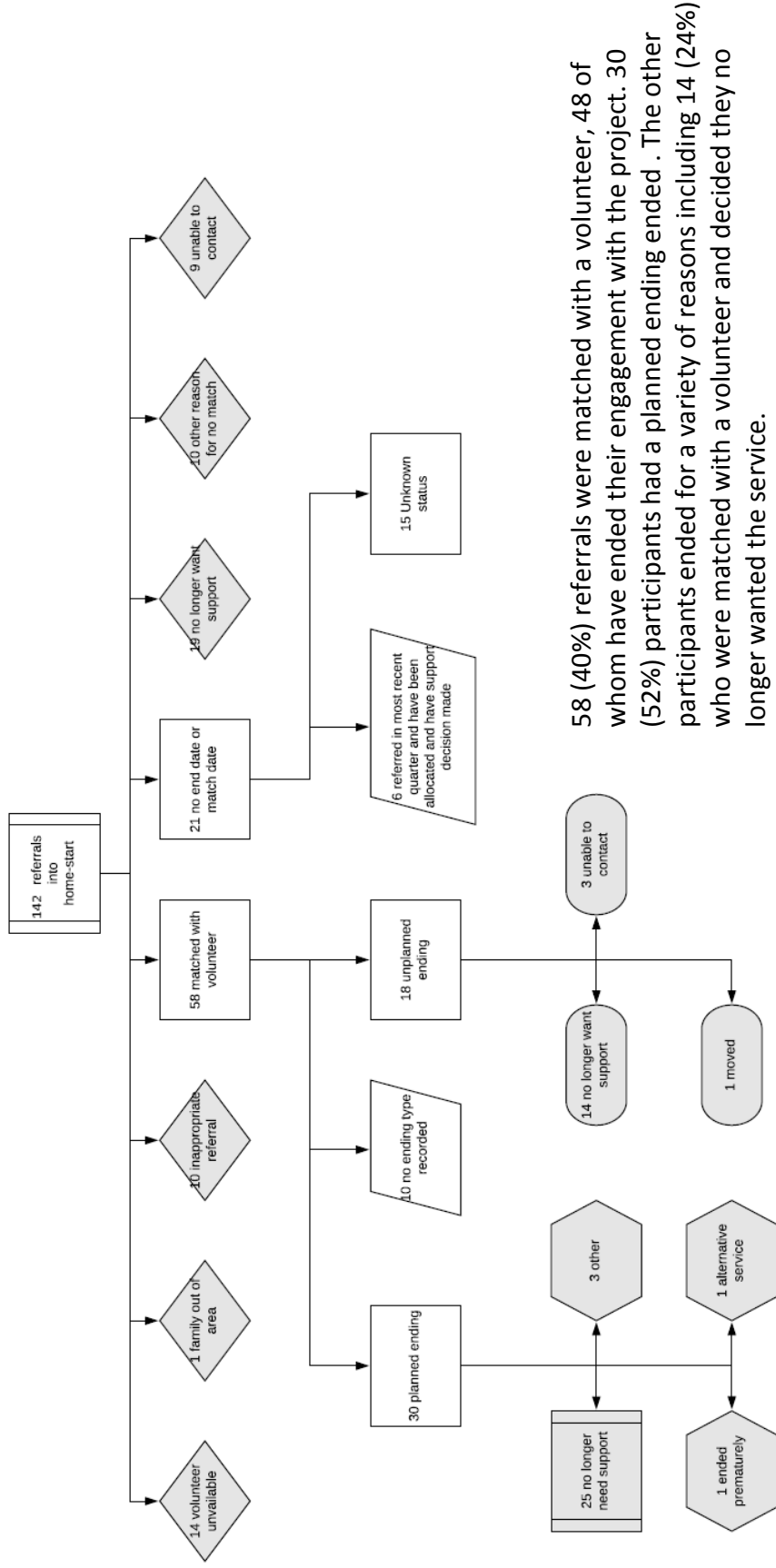
72 children were aged 0-3, and 54 (42%) of children supported were 4 or above (>3).

Age of children supported

(bar chart: Number of children vs Age of child)
- 0: 24
- 1: 15
- 2: 21
- 3: 12
- > 3: 54

n = 126 children from 58 families

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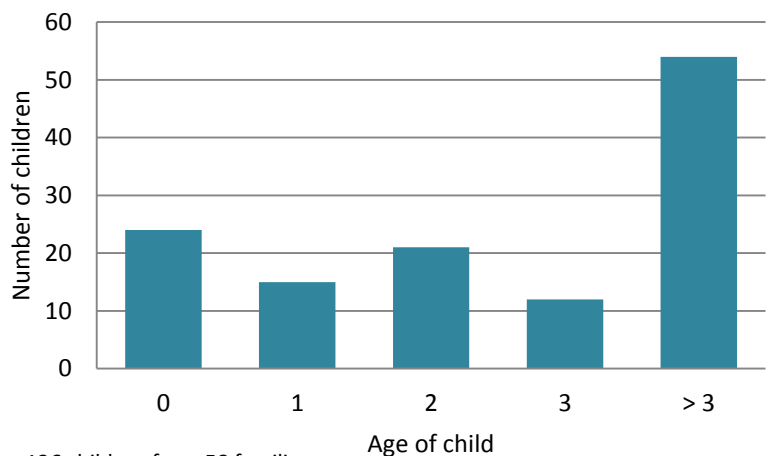
Project Implementation – Participant Flow Diagram

What service did Home-Start provide to families?

- 142 referrals into home-start
- 14 volunteer unavailable
- 1 family out of area
- 10 inappropriate referral
- 58 matched with volunteer
- 21 no end date or match date
- 19 no longer want support
- 10 other reason for no match
- 9 unable to contact
- 15 Unknown status
- 6 referred in most recent quarter and have been allocated and have support decision made
- 10 no ending type recorded
- 18 unplanned ending
  - 3 unable to contact
  - 14 no longer want support
  - 1 moved
- 30 planned ending
  - 3 other
  - 1 alternative service
  - 25 no longer need support
  - 1 ended prematurely

58 (40%) referrals were matched with a volunteer, 48 of whom have ended their engagement with the project. 30 (52%) participants had a planned ending ended . The other participants ended for a variety of reasons including 14 (24%) who were matched with a volunteer and decided they no longer wanted the service.
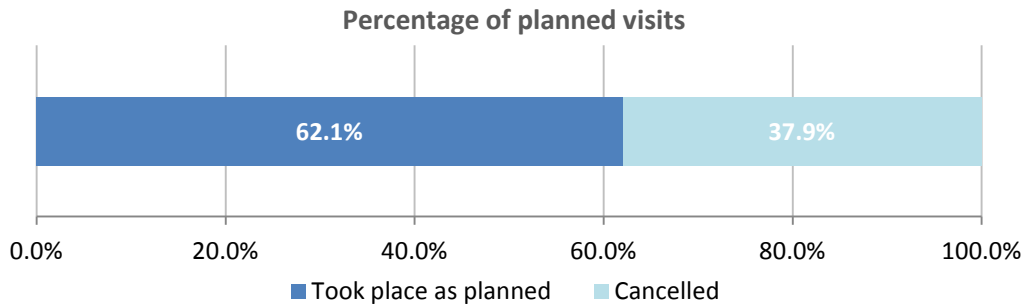
There is evidence that case management decisions about recent cases are not being consistently recorded, 9 of the 10 'matched with volunteer but no ending type' cases have no activity recorded within the last 6 months. There are also 15 recent referrals (2019) with no allocation or support decision dates or case closure date.

There is insufficient data to understand characteristics and referral source of families who successfully completed the project by no longer needing support.

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Project Implementation - Support

What proportion of visits took place as planned?

Percentage of planned visits

| 62.1% | 37.9% |

0.0%   20.0%   40.0%   60.0%   80.0%   100.0%

■ Took place as planned   ■ Cancelled

Of 593 visits planned by volunteers 368 (62%) went ahead as planned, and 225 (38%) were cancelled

What support was being offered?

Visit activities	Count
Practical support	156
Activity with children	223
Emotional support	252
Accessed education	9
Accessed appointment	11
Accessed benefits	5
Accessed CAB	2
Accessed Children Centre	19
Transport	28
Accompany	55
Discuss info	98
Looked After Children	19
Signpost	42
Other	63

Why were visits being rearranged?

225 visits were cancelled; visits were cancelled by volunteers almost as often as they were cancelled by the parent.

The 'other' category has not been broken down further in the data provided by the project.

Reason for cancellation
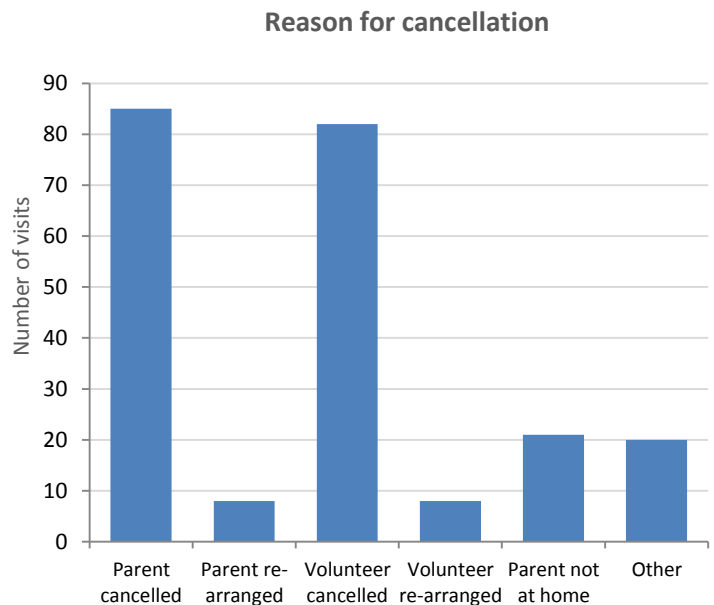
Volunteers made an average of 11 visits to a family they supported.

Visits tended to offer multiple types of support with an average of 2.7 reasons recorded per visit. The most common types of support were for emotional support and hands on activities.

Project Implementation - Outcomes

## What did families report about their ability to cope?

Home-Start use a project specific tool at the beginning, review and end of engagement to enable staff and families to monitor their progress. There are 62 families with an initial coping score, 45 families with a coping score at review and 27 families with a coping score at end of their support.

There are four domains in the coping score – parenting skills; parent's well-being; children's well-being and family management. Not every family completed all of these domains at all time points.

The available data suggests that all parents for whom data is available improved in perception of how they are coping in these domains between initial completion and end completion. These parents may not be representative of those who engaged with the project.
As the tool is not validated it is not possible to infer anything about changes to the parent's or children's outcomes from this measure.

Where were families referred onto?
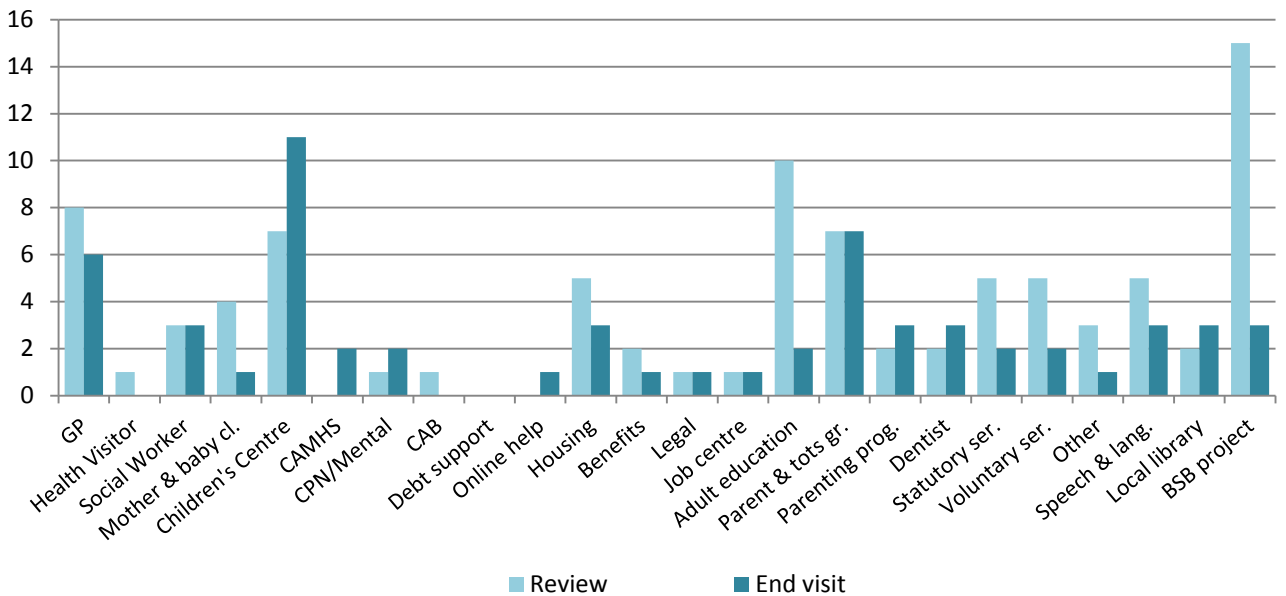
21 families were referred on to or signposted to external services with an average of 4 referrals per family.

When families were reviewed and their needs assessed part the way through their engagement with a volunteer (assuming 3-4 months as per service design plan) onward referrals were made as appropriate. The most common onward referrals at this time point were to GPs (8), other BSB projects (15), and adult education (10).

As part of the case closure process the needs of families were assessed and appropriate onward referrals made. At this point referrals were most commonly made to Children's Centres (11) and parent and toddler groups(7).