

Welcome to the World

The following report has been produced by the Better Start Bradford Innovation Hub (BSBIH) for Better Start Bradford (BSB) and the project team, to aid BSB in decision-making regarding re-commissioning; BSBIH provide an update to the end of contract implementation evaluation dated 26th February 2018, with an overview of the project's performance and findings from the implementation evaluation including an interpretation of these findings. 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.

Version 0.1; 29/08/2018

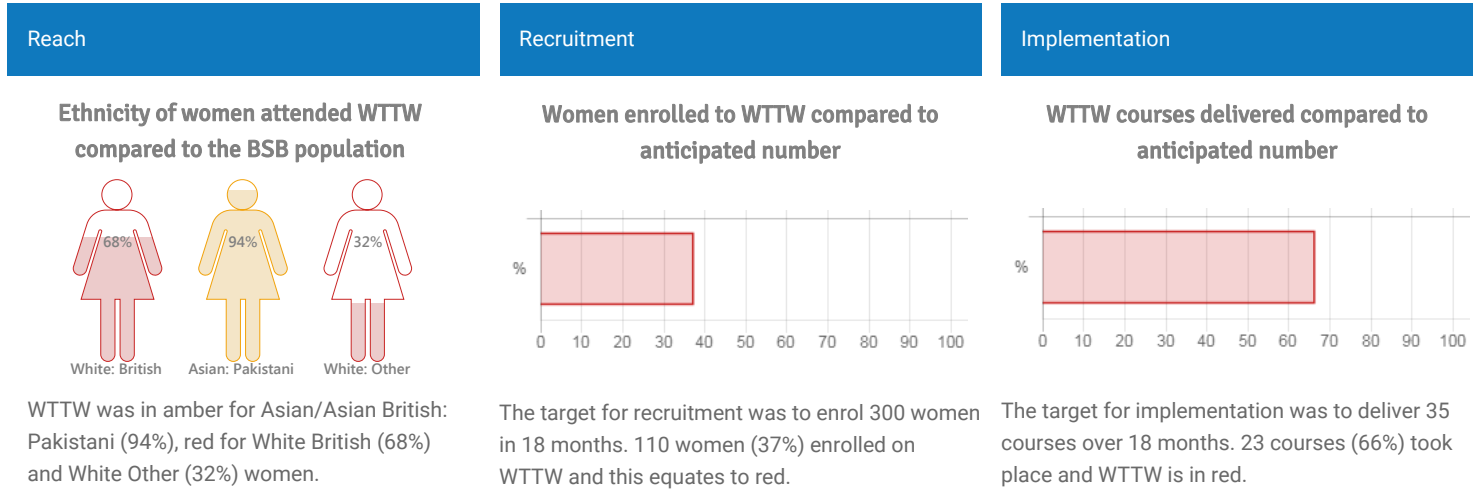
Approved by:

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Welcome to the World (WTTW) is a 9 week (8 weeks of content and an introductory week) antenatal course intended to improve parental wellbeing. WTTW was delivered by Children's Centres as part of their contractual core offer to families. BSB aimed to enhance participation by supporting the work of a coordinator, developing and distributing publicity materials and supporting additional voluntary sector provision. This report provides an update to the end of contract implementation evaluation dated 26th February 2018 and covers the delivery of WTTW in the BSB area from January 2017 to June 2018.

Performance



Key findings

Qualitative interviews

Key findings were:

- There was a lack of clarity about what the programme was about
- There is no formal pathway for recruitment and no responsible person or agency for making eligible parents aware of the course and how to communicate their interest to those who recruit to the programme
- When details of eligible parents were shared with children's centres there was a delay in sharing this information with staff who contact parents
- There were limited opportunities for building relationships with parents - something highlighted by facilitators as key to recruitment to courses

Attendance

In total 124 participants (mums and dads) enrolled in the course, of whom 110 were recruited (attended at least two weeks), and 64 (52%) attended 6 or more sessions and completed the course.

Fidelity

30% of courses ran for the expected 8 or 9 weeks in the last six months, which is lower than the previous period (48% of all courses). Attendance varied from 2 to 9 people per session.

Data quality

Data completeness has improved over the reporting period, however quality and coding concerns remain.

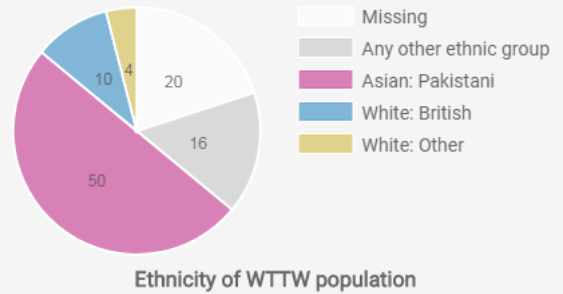
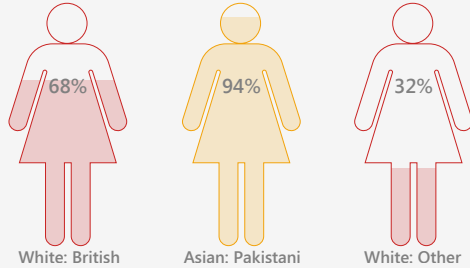
Recommendations

<p>Enhance the referral & recruitment pathways</p> <p>Recruitment to the course continues to be a challenge. Qualitative findings highlight that there is no formal referral process and current lack of oversight from an accountable organisation for referrals mean that PGLs are not receiving information about eligible parents in time. The newly appointed perinatal project coordinators may be able to support a redesigned referral pathway, though PGLs do not consistently have the capacity to convert referrals into recruits to the project.</p>	<p>Attain in-depth understanding of the barriers to taking part in antenatal classes</p> <p>The deficiencies in the recruitment process indicate there is an inefficiency in linking parents with suitable courses. There is no evidence to suggest parents do not want, cannot access, or do not know about WTTW, and these barriers are not WTTW specific. It is strongly recommended that further work with parents who are eligible but not currently engaged is undertaken to understand the lack of engagement with universal community based antenatal education to inform future developments.</p>	<p>Enhance data collection processes for outcome measures</p> <p>The monitoring system used for pre and post outcome measures is complex to administer and an increasing number of errors have been present in the data from this second period. The quality of this data and its usefulness for developing on-going packages of care for participants as well as in monitoring will be enhanced by provision of a dedicated administrator and coordinator for the programme.</p>
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Reach

Did a representative sample of three main ethnic groups engage?

Ethnicity of women attended WTTW compared to the BSB population

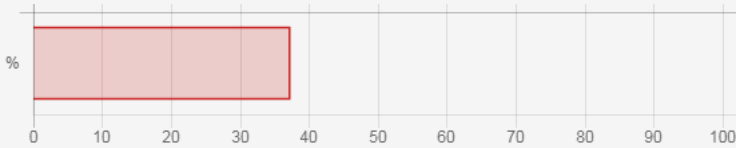


The target for reach was to engage women from a representative sample of the largest ethnic groups in the BSB community: 53% of families from Asian/Asian British: Pakistani, 15% of families from White: British and 11% of families from White: Other backgrounds. The figure indicates how the proportion of women who attended at least one session of WTTW compares to the ethnic mix of women in the BSB maternity population. The progression criteria show that WTTW was in amber for reach for Asian/Asian British: Pakistani (94%), red for White British (68%) and White Other (32%) women.

Recruitment

How many women enrolled for WTTW?

Women enrolled to WTTW compared to anticipated number



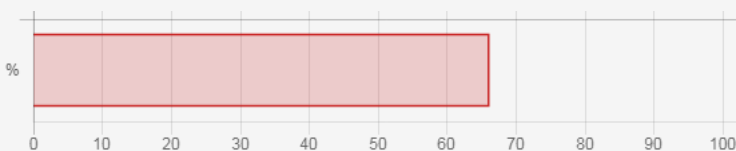
110 women enrolled

The target for recruitment was to enrol 300 women in 18 months. Enrolment is defined as having attended at least one session. The target related only to women, so whilst WTTW has a capacity of 200 parents per year, 20% of project participants were anticipated to be men. 110 women enrolled in WTTW between January 2017 and June 2018. This was 37% of the target and WTTW was in red on this progression criterion. This is further explored in the participant flow diagram.

Implementation

Was WTTW implemented as planned?

WTTW courses delivered compared to anticipated number

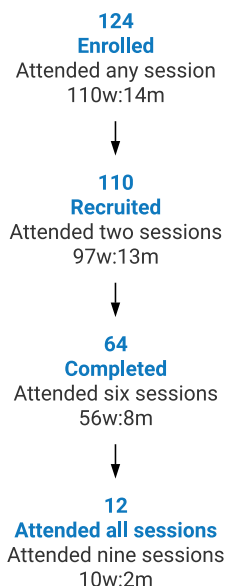


The target for implementation was to deliver 35 courses across a range of providers in the BSB area over 18 months. 23 courses took place between January 2017 and June 2018. This was 66% of the target and puts WTTW in red for this progression criterion. Four 1:1 courses were started, though none completed nine sessions.

Context

In 2018 children's centres in Bradford were preparing to be restructured to family centres and universal services are to be significantly reduced. The restructure has had two main effects on the delivery of WTTW; firstly, recruitment to WTTW was not seen as a priority towards the end of the reporting period and was often displaced by more immediately pressing operational requirements; secondly, in future the capacity of trained staff to deliver WTTW in restructured roles may be limited and not replaced.

Participant engagement - group courses



In total 124 participants (mums and dads) enrolled in the course, of whom 110 were recruited (attended at least two weeks), and 64 (52%) attended 6 or more sessions and completed the course. In service design it was anticipated that 20% of participants would be men; 11% of enrollees were men.

30% of courses ran for the expected 8 or 9 weeks in the last six months, which is lower than the previous period (48% of all courses). Attendance varied from 2 to 9 people per session. It has not been possible to report on implementation using information obtained from eStart.

Pre and post evaluation

Due to concerns in asking participants to complete self-reported mood questions in a group based setting, the collation of pre and post measures was coordinated by the IH. Questionnaires were completed by parents using an ID number and returned in sealed envelopes to the IH for data entry. An ID sheet was completed by group leaders to ensure that participants could be matched pre and post course. The ID sheet should have enabled IH to link outcome measures to particular participants.

Between January and June 2018 34 participants enrolled in a WTTW course and were eligible to complete the pre and post outcome measure questionnaires (eStart data). However, 41 individual questionnaires were returned in the period. It was possible to match pre and post for 16 participants, and the proportion of parents for whom it was possible to match pre and post questionnaires was lower than in the 2017 period (39% vs 59%) and there were errors in the matching process not seen before e.g. duplicate IDs, post questionnaires only available for participants.

It was not possible for the data team to match individuals to their scores on their outcome measures as ID sheets were not returned to the IH consistently.

This sample size is too small to be confident in any findings of change in the main outcome (low mood) between the start and end of the course. However, initial indications do suggest that the majority (61%) of expectant mothers who enrolled on WTTW and completed the pre course paperwork in period of the evaluation (April 2017 – June 2018) reported some level of low mood i.e. scores of 5 or above on the PHQ-8 at the start of the course. This indicates that there is potential for the course to make some difference to the primary outcome of maternal mood when offered in a universal setting.

Qualitative interviews

Interviews were undertaken with eight PGLs in May and June 2018 to understand what the current process for recruitment was and what challenges they identified in recruitment. There were three areas highlighted as particularly challenging.

Promotional information

The programme is widely advertised but there is little word of mouth recommendation from trusted professionals already in contact with families. Promotional contacts do not emphasise what the course is about leaving potential participants confused.

Referral pathway

Eligible parents were also identified through the GTT clinic (26 weeks of pregnancy) by completion of the Part A form (children's registration form), however this data was not being input by administration staff in good time so PGLs did not know about families who were potentially eligible. This led to women being approached very close to the programme start date (sometimes days before) which didn't leave time for the usual recruitment strategies. This delay was particularly detrimental because of the small window of opportunity when parents are eligible for WTTW. The completion of the Part A form at GTT is a goodwill gesture by CRAs recruiting parents to BiBBS and is not a designated recruitment or sustainable way to obtain information about eligible parents for WTTW.

Recruitment processes

PGLs were not always responsible for recruiting to the programme themselves. Poor communication between teams may have led to parents being missed or given incorrect information. The developing relationship between PGL and participant is highly important for parental engagement and the approach of an intermediary to recruit was felt to hinder the recruitment of parents.



