

# TKR Partnership

Review and future development of parenting programmes in Medway

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## Contents

<b>1. Conclusions and recommendations</b>	<b>4</b>
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### **PART ONE: INTRODUCTION**

2. Background and context to the review	11
3. Aims of review	14
4. Review methodology	15

### **PART TWO: MESSAGES FROM RESEARCH**

5. What does research tell us?	17
6. Evidence-based practice	21

### **PART THREE: PROVISION, NEEDS AND PRIORITIES IN MEDWAY**

7. Current provision of parenting programmes in Medway	24
8. Parents and children in Medway	28
9. The views of partner agencies, managers and practitioners	34
10. Analysis of priorities, needs and current gaps	37

### **PART FOUR: OPTIONS FOR DEVELOPMENT**

11. Bringing together the different opportunities	42
12. Options for introduction of other parenting programmes in Medway	44
13. Lessons from other local authorities	54

### **PART FIVE: WORKFORCE IMPLICATIONS**

14. National qualifications and training developments	58
15. The local workforce	60
16. Developing the workforce	61

## Appendices

1. Agencies, managers and practitioners consulted as part of the review	67
2. Snapshot of current parenting programme provision in Medway	69
3. Families in Medway: demographic information relevant to parenting provision	75
4. The issues that parents say they want help with	82
5. Breakdown of Parentis referrals 08-09	83
6. Comparison of programmes by cost and sustainability	85
7. Evaluation of FAST in Milton Keynes	88

**Note: Throughout the report, the term ‘parent’ is used to include fathers, mothers, step parents, grandparents, foster carers and anyone involved in bringing up children.**

# 1. Conclusions and recommendations

## 1.1 Programme delivery to meet a continuum of needs

There is currently a rich and varied offer of parenting programmes and groups in Medway. One of the main issues raised by stakeholders during the review, however, was the lack of co-ordination between agencies to provide a coherent mix of services to meet local needs.

The review identified the need to build on the strengths of current provision to provide a joined-up and inclusive continuum of parenting programmes that offers choice and flexibility to local parents, as well as tailoring support to meet different levels and intensity of need.

- **Universal parenting groups in the early years**

- **The importance of parenting support in the early years**

The evidence about the vital role of parents in the first three years is overwhelming – the quality of relationship and experiences that parents provide for their children as part of daily life from the moment of birth has a lasting impact on children’s well-being and achievement. Supporting parents to provide what babies and very young children need is therefore crucial, both in enabling children to flourish and overcoming the effects of social disadvantage.

- **Parenting groups**

Children’s centres provide local and responsive hubs of support where parents can access universal parenting groups. Children’s centres know their local communities well and are able to pilot new ways of working when a need is identified; for instance a mentoring programme to reach young expectant fathers will be piloted in September 09. The PEAL training which has been delivered in children’s centres provides a framework for good practice in involving and working in partnership with parents.

Within this offer, baby massage groups are widely valued. They are effective in engaging parents in family support services via a non-threatening form of parent support, at the same time as actively supporting the parent-child relationship.

Currently the FCT ‘*Toddler and Tantrum Toolkit*’ course is also delivered by Parentis in children’s centres. Although this course is not currently on the NAPP’s training offer of evidence-based programmes, local feedback from parents and practitioners is that it works well at universal level. Independent evaluation of Parentis courses also found positive benefits for both parents and children.

The Family Links Nurturing Programme is on the NAPP’s training offer of evidence-based courses and offers a similar universal programme to the FCT courses. When matched against criteria required to meet local need, however, both the Family Links and FCT showed a similar level of ‘fit’ to local need. Given the similarity of what the two programmes offer in terms of meeting local needs and the fact that there are currently 15 local staff trained and available to deliver FCT courses, there appears to be no strong justification for changing the universal parenting course used in the early years.

**It is therefore recommended that:**

- **the *Toddler and Tantrum Toolkit* is retained together with baby massage groups as part of a raft of universal parenting support in the early years**
- **these courses are embedded in the offer of local children's centres so that they can be run in response to local demand**
- **the *Hit the Ground Crawling* pilot is carefully evaluated to enable a decision about rolling it out more widely.**

- **Post natal groups**

Health managers highlighted the need to review the content of post natal groups to determine that they are providing consistent core messages about parenting based on up-to-date evidence of positive outcomes for children. The Solihull training that is being rolled out by CAST for health practitioners in children's services provides a very helpful resource that can be used for this purpose.

**It is recommended that:**

- **the Solihull Approach is used to develop a flexible 'core curriculum' for post natal groups that includes emotional and behavioural issues**
- **the core messages of the Solihull Approach and the FCT *Toddler and Tantrum Toolkit* course are used flexibly and integrated into all work with parents by different agencies in the early years, including informal sessions within children's centres and work with young parents.**

- **Targeted parenting programmes as part of preventive early intervention**

- **Young parents**

The Step4ward programme, developed locally in conjunction with young parents, provides a tailored and 'teenage-friendly' package of support delivered in children's centres. It combines parenting support with educational opportunities and activities to build self-esteem and social networks of support.

The Family Nurse Partnership which will be piloted in Medway over the next two years will enhance and strengthen preventive work with young parents, by providing intensive home-based support for first-time mothers under 20 and their families for up to two years.

- **Reaching and engaging more vulnerable families as part of early intervention**

In addition to its early years courses, Parentis offers FCT courses for parents of primary and secondary age children across Medway. FCT is, however, a universal programme and concerns were raised during the review about its ability to include, and meet the needs of, more vulnerable families.

The two year Parenting Early Intervention Programme (PEIP) funding which Medway has recently been awarded by the DCSF provides an opportunity to pilot and test locally one of five recommended evidence-based programmes with parents of 8 – 13 year olds. The FCT programme is not included on this list.

The review compared the five recommended programmes against the criteria required to meet local needs in Medway. These criteria were informed by the views of local practitioners and managers (see Para. 11.2). When assessed against these criteria, the Families and Schools Together (FAST) programme was shown to best match Medway's needs for the following reasons:

- It has a strong evidence base (highest NAPP rating of 4 on the commissioning toolkit).
- It has been demonstrated to be effective in engaging more vulnerable families as part of targeted preventive work through its inclusive community-led approach.
- It is a whole family programme and research has demonstrated that work with both parents and children is more effective when working with the most disadvantaged families.
- It builds on the community-focused ethos of children's centres and extended schools, as well as a multi-agency partnership approach to supporting children and their families.
- Teams working closely with schools, for instance the Inclusion Team, Educational Psychology and Family Learning, have built positive partnerships with schools. They feel that many schools would welcome a programme like FAST that is able to break down barriers and bring together school staff, parents and other agencies to improve outcomes for children.
- As a whole family programme run in partnership with schools, the initial development will require the resources and dedicated focus that PEIP can provide.
- FAST practitioner training can be cascaded locally, making it more than programmes that do not offer training for local trainers.

**It is therefore recommended that the FAST programme is piloted locally during the two year PEIP.**

○ **Issue related courses to address identified needs**

A further two courses form part of Medway's preventive parenting support: *Speakeasy*, focused on helping parents talk to their children about sex and relationships, and *Drug Proof your Kids*.

Teenage conception figures and numbers of young people receiving treatment for substance misuse indicate that these courses meet an important need.

● **More intensive support to a fewer number of parents**

- YOT already offers the Incredible Years (IY) programme locally. The IY programme has been widely well-evidenced as an effective intervention for parents of children with

emotional and behavioural difficulties. It is a longer and more intensive programme than many (14 – 20 sessions) and it is recommended that the lead facilitator has a related degree-level professional qualification. These factors combine to make it a more expensive intervention than targeted programmes at lower levels of need.

Its target audience and the higher costs of delivery mean that the IY programme is best used to provide more intensive support to parents of children with emotional and behavioural difficulties. Parenting support for parents with ADHD was widely identified during the review as a gap in local provision, a need which the IY programme is designed to meet.

Training in the IY 0-6 programme is currently part of the NAPP training offer and Medway may be able to access training places, depending on availability.

**It is therefore recommended that:**

- **Medway continues to offer the Incredible Years programme to families with higher levels of need, including parents of children with ADHD.**
  - **identified practitioners outside the YOT who meet the IY criteria should train in the IY 0-6 programme to extend the Incredible Years programme to parents of children with ADHD in the early years and early primary age range, a gap identified as part of this review.**
- 8 practitioners in Medway have completed Triple P training as part of the NAPP training offer. The newly appointed Senior Parenting Practitioner in the Educational Psychology Team (funded by the DCSF Parenting Expert initiative) will be using the Triple P individual programmes, as well as delivering Triple P groups jointly with YOT, in her work with at risk 'chaotic' families. She has some concerns, however, about the accessibility of Triple P for parents with limited literacy. Her concerns are echoed by experience in Thanet, where Triple P was found to be too prescriptive for parents at higher level of need and the more flexible Strengthening Families, Strengthening Communities programme was used instead.

**It is therefore recommended that the Triple P local pilot is carefully evaluated to assess the programme's suitability and accessibility for more vulnerable families before training more practitioners and rolling Triple P out more widely.**

- Disabled Children's Services have specialist expertise and experience of delivering programmes for parents of children with ASD. From this they have developed the Daisy programme for parents of children aged 0-6 with ASD and are currently developing similar programmes for parents of primary age children and teenagers. These courses meet an important need for parenting support for parents facing the additional challenges of autism. Currently, however, the majority of these courses are provided at the Parklands Resource Centre in Gillingham during the working day, which makes them difficult to access for working parents or parents in other areas.

**It is recommended that the Daisy courses for parents of children with ASD are offered from community-based venues across Medway, including children's centres, which are currently under-utilised in the evening and at weekends.**

- CAMHS provide parenting groups at a specialist level, for instance parents of children who have attempted suicide or have eating disorders. They also offer some provision for parents with mental health needs through parenting groups run jointly with the adult mental health services. They will also be setting up a mother and baby mental health service which has recently been commissioned by Medway PCT.
- The review identified a gap in parenting support for parents with learning disabilities who keep their babies after assessment. It is felt that tailored on-going 'whole family' group support will best meet the needs of this group rather than a formal programme. A social worker will be appointed to the Shared Lives team to work with pregnant women with learning disabilities.

**It is recommended that parenting support to parents with learning disabilities is kept under review to establish whether their support needs are met by the new social worker post in the Shared Lives team.**

## **1.2 Increasing the effectiveness of parenting programmes**

The effectiveness of parenting programmes depends not just on the programme itself, but also on a range of factors that affect the programme's ability to really make a difference to outcomes for children. This is particularly the case for families facing barriers in accessing services.

**It is recommended that a proactive approach is taken to the following factors to enhance the reach and effectiveness of parenting programmes:**

- **Persistent and focused outreach and engagement** to ensure that all families feel they can access the programmes. The following steps will be helpful in making programmes as inclusive as possible:
  - Making the most of face-to-face opportunities for signposting and information about available support, for instance by ensuring that community midwife teams are well informed about early years services.
  - Using parents and practitioners from local communities to undertake local outreach and build relationships with parents. This is particularly important in including parents from minority ethnic communities.
  - Working in partnership with grassroots community groups.
  - Including 'father-friendly' activities to engage fathers as well as mothers and ensuring that services make clear that they are for fathers as well as mothers.

- Ensuring that the Adult Physical Disability Team are well informed about parenting support and programmes and are proactive in sharing this information with the disabled parents with whom they come into contact.

- **Consultation with local parents**

Local communities are constantly evolving, for instance in their ethnic make-up and the issues with which they need support. Meaningful consultation with parents in local communities needs to be an integral part of the planning and review of parenting programmes.

- **Co-ordinating and joining up work across agencies**

The review identified a strong need for co-ordinating and joining up work with parents across agencies in Medway.

Other local authorities contacted as part of the review have Parenting Development Teams led by a Parenting Development Manager; this is seen as vital providing strategic and operational leadership, as well planning co-ordinated provision at local level and supporting good practice across agencies.

Creating the infrastructure to provide this dedicated strategic and operational leadership for parenting within the Children's Trust will be key to effective development of parenting programmes.

- **Access and support requirements**

This review highlights some of the barriers parents experience in accessing parenting programmes. Programme planning and budgeting should take account of the need for:

- creche provision for daytime courses and childcare for evening and weekend provision
- transport, particularly for parents in rural areas, disabled parents and parents of disabled children
- availability of parenting programmes in the evenings and weekends, as well as during the working day
- bi-lingual practitioners or interpreters
- sign interpreters for deaf parents
- accessible venues.

- **Monitoring and evaluation against outcomes for children**

Monitoring and evaluation of parenting groups delivered in Medway is extremely patchy. Evaluation of the impact of many groups is based on informal feedback from parents and there is no co-ordinated monitoring of parent uptake of parenting groups across the different agencies in Medway.

Moving forward, a co-ordinated approach to monitoring and evaluation will be essential to inform future decisions about allocation of resources and programme offer. This co-ordinated approach should include:

- systematic collection of data about parent uptake and participants' demographic profile to understand patterns of service use and identify groups of parents who are not accessing services
- evaluation of programmes against specific outcomes for children that it is hoped the intervention will achieve
- collation, analysis and reporting of data that includes all parenting programme provision in Medway.

### 1.3 Workforce development

It is estimated that 60 practitioners will be needed over the next two years to deliver parenting programmes to meet the needs identified in this review.

It is recommended that:

- multi-agency teams are identified within each Integrated Team geographical area to deliver and co-ordinate delivery of parenting programmes in response to the needs of local parents
- FAST practitioner training is accessed, via either the NAPP Phase 4 training offer or PEIP funding
- practitioners working with parents of younger children train in the Incredible Years 0-6 programme to address the gap in provision of parenting programmes for parents of children with ADHD
- training in group facilitation skills is provided locally to complement programme-specific training where this has been identified as a training need
- co-ordinated support and supervision is provided for programme delivery, including multi-agency forums at local level to share good practice and continuing professional development.

## PART ONE: INTRODUCTION

### 2. Background and context to the review

Benefits to parents and their children of improved parenting skills are well evidenced, and opportunities for parents to take part in a parenting skills programme are integral to the core offers of a number of key services including Early Years, Extended Service Schools and the Youth Offending Team.

This review was commissioned to enable Medway to align the local development of parenting programmes to national policy and evidence of what works and to the vision of the National Academy of Parenting Practitioners (NAPP) that all parents who need support are able to access quality services from trained practitioners capable of helping them to raise their children to be happy, healthy, safe, ready to learn and to make a positive contribution and achieve economic wellbeing.

#### 2.1 Government policy framework

*Government does not bring up children – parents do - so Government needs to do more to back parents and families.*

Children's Plan, Department for Children, Schools and Families, 2007

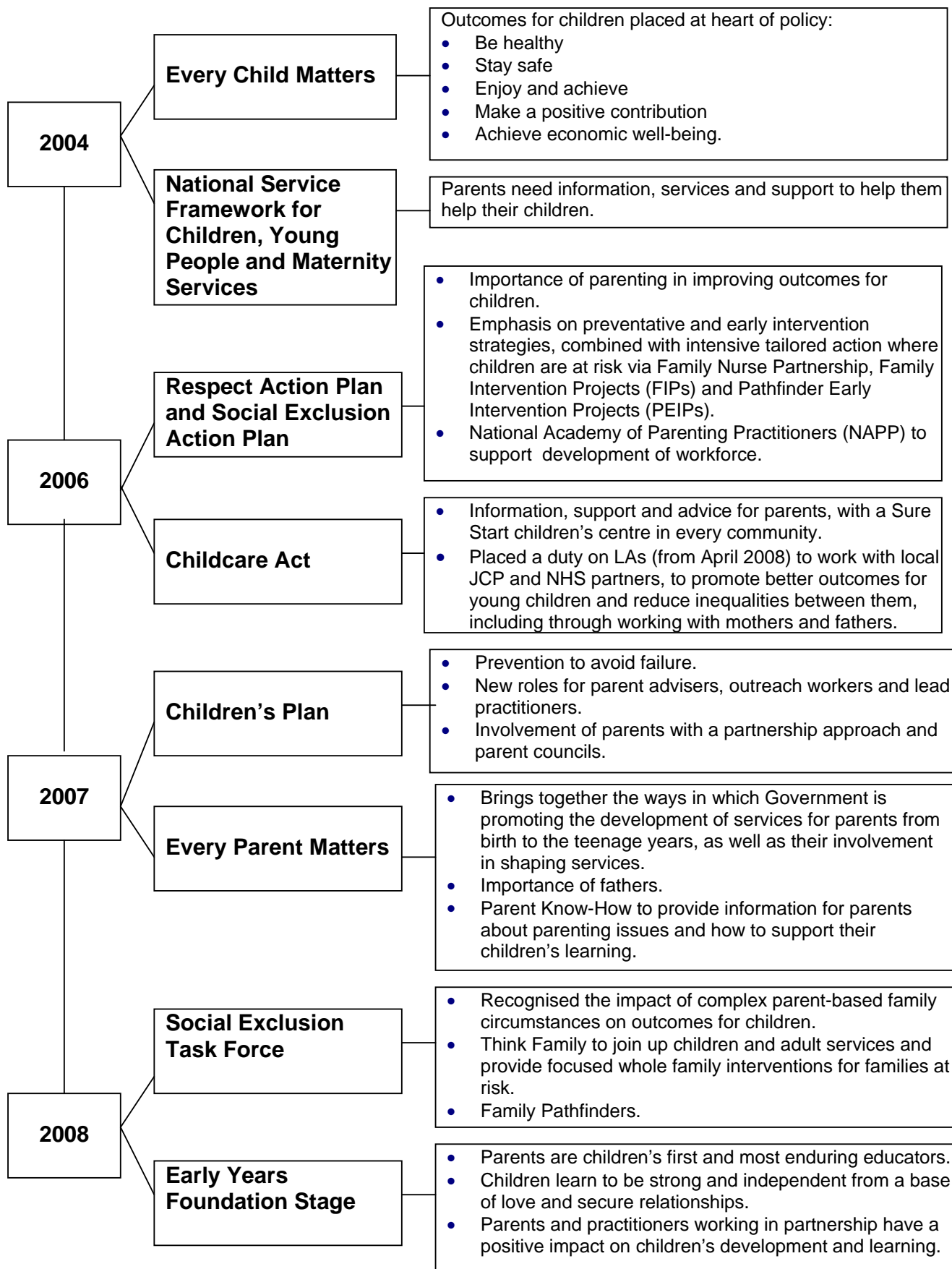
The vital role of parents in securing good outcomes for children has been increasingly recognised in Government legislation, policy and guidance in recent years.

To strengthen support to parents in order to improve outcomes for children, the Government has provided local authorities with both guidance and responsibilities which are reflected in Medway's commissioning of this review.

*Parenting Support – Guidance for Local Authorities in England (2006)* requires Local Authorities to:

- develop a strategic and joined up approach to the design and delivery of parenting support services that takes account of parents' views
- see support for parents as a continuum from early intervention and preventative services through to the use of enforcement measures
- commission programmes that are evidence-based and meet the needs of local parents
- establish a multi-agency Steering Group to develop the Parenting Support Strategy
- undertake a needs assessment and audit existing provision
- check that the full range of available support and intervention measures are being used
- develop an ongoing process of review and development.

The following snapshot provides an overview of the key elements of the national policy framework.



## 2.2 National Academy of Parenting Practitioners

The National Academy of Parenting Practitioners (NAPP) was established in 2007 and is working to transform the quality and size of the parenting workforce across England so that parents can get the help they need to raise their children well.

NAPP's work focuses on three main areas – research, workforce development and knowledge exchange.

To support Local Authorities develop both provision and the workforce, NAPP has developed:

- **A commissioning toolkit** that provides detailed information about the aims, theoretical underpinning, evidence base and content of a wide range of parenting programmes.
- **Core practitioner training modules** that together provide a generic and universal foundation of skills, knowledge and understanding for all Level 3 staff working with parents and based on the National Occupational Standards (NOS) for Work with Parents.
- **Commissioned programme-specific training** for programmes that have been positively evaluated by NAPP. The NAPP's review of programmes on the toolkit is still in progress, so the list of evidence-based programmes is at this stage by no means definitive; 8 programmes are currently part of the NAPP's offer. These programmes are described in more detail in Para. 12.1.

## 2.3 Parenting programme development in Medway

Over the last few years, parenting programmes in Medway have developed in response to need and opportunity.

In 2004/05, the Children's Fund and Big Lottery funding provided an opportunity to develop Medway-wide provision. Following consultation with parents, a multi-agency Steering Group decided that the Family Caring Trust programme was best able, within the resources available, to meet local needs and deliver the Every Child Matters (ECM) outcomes.

The Sunlight Development Trust was commissioned to deliver this programme as the Parentis service. Since then Parentis has established a menu of provision across Medway, working in partnership with other agencies and providing a range of courses to meet different needs.

Other programmes have been initiated by the Youth Offending Team (YOT), including the Incredible Years and, more recently, Triple P, whilst other specialist provision has also been developed, for instance for young parents and parents of children with Autistic Spectrum Disorder (ASD).

Although these developments have resulted in much excellent work happening across Medway, they have also resulted in fragmented services with 'islands' of provision and often little joining-up.

This report maps both current provision (Para. 7.1) and aims to bring both existing and new programmes together into a coherent whole that offers both choice and consistency to parents across Medway.

## 2.4 Children and Young People's Plan (CYPP) priorities

*Every child deserves to be safe and loved and have a happy and healthy childhood, free from harm - and every child should have the chance to make the most of their promise and potential.*

Medway's vision for children and young people, CYPP 09-11

This review has been informed by Medway's new CYPP. The needs assessment, priorities and vision of the CYPP are integral to the recommendations of the report.

The Medway Children's Trust wants children and young people in Medway who:

- are safe and cared for
- succeed in learning
- thrive.

To make this a reality, the Children's Trust undertakes in the CYPP that they will be championed by a confident and competent workforce, and arrangements will be in place to ensure:

- effective safeguarding
- integrated services and support
- timely and targeted interventions.

The CYPP commits to ensuring that there are in place:

- some services available for everyone – a high quality universal offer for all
- more services for some – to help them catch up and keep up
- and even more services for a few – the most vulnerable or disadvantaged children who will need focussed and sustained support

Whilst providing high quality universal services to ensure that all children and young people reach their full potential, the Children's Trust focus is on improving the life chances and outcomes of:

- children living in poverty
- children in care
- children with disabilities
- children with special educational needs
- children who are carers for others
- children excluded from school and with poor attendance.

## 3. Aims of review

The aims of this review are to:

- Assess the types of programmes needed locally as evidenced by:
  - management information from local partner agencies
  - current delivery by local agencies
  - current local service plans and strategies
  - national policy requirements
  - information and views from local service providers including Council, Health, Police, Third Sector and other partners as appropriate
  - evidence from other local authorities regarding impact of specific programmes

- views of parents and carers.
- Review the current programmes that have been positively evaluated by NAPP and recommend which best match local needs.
- Make recommendations regarding workforce development over the next two and a half years, including the range of courses to meet evidenced needs and the infrastructure and processes needed to roll out the training and ensure successful delivery to parents/carers.

## 4. Review methodology

This report is based on a wide range of information, gathered from available data, extensive consultation with local agencies and stakeholders and discussions with other local authorities.

The review methodology broadly encompassed:

- **Stage One: Desk research**

Consideration of available and relevant data, including:

- local needs assessments
- local parent consultations
- local policies and plans
- national policies and plans
- messages from research about work with parents
- NAPP commissioning toolkit.

- **Stage Two: Interviews with Medway family support managers and agencies**

A total of 27 interviews took place as part of this review.

13 of these were with local agencies either delivering or referring to group-based parenting provision were interviewed as part of an initial mapping exercise. Three additional agencies provided information by email.

A further 14 interviews were held with strategic managers across local agencies to gather information about what is working well, gaps, needs and a local vision for the development of parenting programmes.

The views of contributing agencies are discussed in Section 9.

A breakdown of contributing agencies and individuals is included at Appendix One.

- **Stage Three: Consultation workshop with local family support agencies**

A half day workshop attended by 19 local practitioners and managers was held. The NAPP Regional Development Manager presented information about the evidence-based parenting programmes in the NAPP's training offer and attendees shared feedback and views about how local needs could best be met by parenting programmes.

- **Stage Four: matching evidence-based programmes and local needs**

The information gathered from interviews and the consultation workshop was used to compile a checklist of local criteria for effective parenting programme provision that would meet local needs and priorities. Research-based criteria about what works in parenting support, particularly the National Institute of Clinical Excellence (NICE) guidance on parenting programmes, were added to this local checklist to provide a list of 17 requirements against which each parenting programme could be matched.

Five parenting programmes from the NAPP training offer were matched against these criteria. A separate exercise considering the sustainability and resource implications of each programme was also undertaken.

The criteria and matching are presented in more detail in Section 12.

- **Stage Five: learning from the experience of other local authorities**

The matching exercise highlighted particular programmes that appeared to best meet local needs. Interviews were then held with four local authorities delivering these programmes to test out initial indications of suitability for Medway's needs and discuss implementation issues. Findings are discussed in Section 13.

Local evaluation data related to programme delivery by these local authorities was also considered.

- **Stage Six: presenting interim findings to Parenting and Family Support Partnership Board**

Before writing the final report, interim findings were presented to the Partnership Board to ensure that the criteria drawn up to reflect both local and national elements of effectiveness were consistent with Board members' perceptions and views and to obtain feedback from the Board on the emerging themes and conclusions of the review.

## **PART TWO: MESSAGES FROM RESEARCH**

### **5. What does research tell us?**

#### **5.1 Parenting behaviour influences children's development from before birth**

*The home is the single most significant environmental factor in enabling children to develop the trust, attitude and skills that will help them to learn and engage positively with the world. A good home learning environment provides the love, security, stimulation, encouragement and opportunities that help children to flourish – a process that starts at birth, if not before.*

Early Home Learning Matters – a good practice guide, Family and Parenting Institute 2009

Medway Children's Trust wants children and young people in Medway to be safe and cared for, and to thrive and succeed.

Parents are key to making this a reality. Confident, supportive parenting has a significant beneficial effect on children's outcomes even after all other factors such as parents' social class and educational background have been taken out of the equation.<sup>1</sup>

#### **5.2. The parent-child relationship and early brain development**

In the last 25 years, technological advances have enabled important new discoveries about the growth of the human brain and the impact of a young child's experiences on its development.

The human brain is unfinished at birth. A baby's brain develops at an astonishing pace; it develops from 25 per cent at birth to 80 per cent of the fully formed brain by the age of three.

This development is 'experience dependent'. The quality of the relationship between parent and child during the first three years – as well as the experiences provided by parents for their young children - are fundamental to children's longer-term development and can have a positive or adverse impact.

When parents provide warm, loving attention, within secure clear boundaries, this builds the baby's future capacity for empathy and self-control, both of which have a major impact on a child's later relationships, behaviour and learning<sup>2</sup>.

#### **5.3 The importance of work with parents to 'narrow the gap'**

Poverty and social disadvantage are widely recognised as prime risk factors to children achieving their potential. Their impact on future life trajectories is evident from an extremely early age; more able

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<sup>1</sup> Desforges, C. with Abouchaar, A. (2003) The impact of parental involvement, parental support and family education on pupil achievements and adjustments, London: DfES (research report number 433)

<sup>2</sup> Gerhardt, S (2004), Why Love Matters, Routledge

children from deprived backgrounds are predicted to fall behind less able children from less deprived backgrounds from as early as 22 months<sup>3</sup>.

The link between social disadvantage and children's underachievement affects families from black and minority ethnic communities disproportionately, as they are more likely than other groups to be affected by poverty<sup>4</sup>.

Research evidence<sup>5</sup> clearly also shows, however, that the link between deprivation, underachievement and a repeated cycle of social exclusion is not set in stone and that the parent-child relationship can act as a significant modifying factor. This is crucially important information for all those who are either developing services for parents or working with them to help them meet their children's needs for love, security and stimulation.

#### **5.4 Fathers play an important role**

Children whose fathers are actively involved in their upbringing and education do better at school and have better mental health, even after other factors such as fathers' socio-economic status and education have been taken out of the equation<sup>6</sup>.

#### **5.5 Parents with additional support needs face difficulties in accessing support for parenting**

Parents with additional support needs are a diverse group of people, including parents with physical or sensory impairment, learning disabilities, mental health needs, difficulties associated with substance misuse, long-term medical conditions and parents who identify as part of the Deaf community.

The separation between children's and adults' services has resulted in a fragmented approach to work with families and different views about whether the focus of support is on child protection or on supporting people with their parenting role.<sup>7</sup>

The ways that services for adults and families are designed, accessed and delivered should ensure that the parenting role is fully supported. The children of parents with additional support needs should not automatically be seen as children 'in need'. Rather the aim should be to prevent children becoming 'in need' by prioritising services to support adults with their parenting responsibilities.<sup>8</sup>

#### **5.6 What works in parenting support**

In the last few years a growing body of evidence has provided information about effectiveness of service provision on which strategic decisions can be based.

### **Key messages from research**

<sup>3</sup> Feinstein, L. (2003) *Very early evidence: How early can we predict future educational achievement?* London: CentrePiece, London School of Economic and Political Science. Online at [www.cep.lse.ac.uk/centrepiece/v08i2/feinstein.pdf](http://www.cep.lse.ac.uk/centrepiece/v08i2/feinstein.pdf) (accessed April 2009).

<sup>4</sup> Sylva et al 2004, The Effective Provision of Pre-School Education (EPPE) Project

<sup>5</sup> Sylva et al 2004, Desforges 2003

<sup>6</sup> Flouri and Buchanan, 2001, Father Time, Community Care, October 40, 4-10

<sup>7</sup> Commission for Social Care Inspection, 2009, Supporting disabled parents: a family or a fragmented approach?

<sup>8</sup> Wates, M. (2002) *Supporting disabled adults in their parenting role*. York: Joseph Rowntree Foundation. Online at [www.jrf.org.uk/publications/supporting-disabled-adults-their-parenting-role](http://www.jrf.org.uk/publications/supporting-disabled-adults-their-parenting-role) (accessed April 2009).

- Early interventions report better and more durable outcomes for children; but late intervention is better than none and may help parents deal with parenting under stress.
- Interventions are most effective when they have a strong theory-base, clearly articulated model of the predicted mechanism of change and measurable concrete objectives.
- Services need to pay close attention to 'getting', 'keeping' and 'engaging' parents.
- Services should comprise universal and targeted provision, multiple routes in for families, more than one method of delivery and be of varying duration to address different needs.
- There is added value in interventions that work in parallel (though not necessarily at the same time) with parents, families and children.
- Interventions should be delivered by appropriately trained and skilled staff, backed up by good management and support.

*What works in parenting education? Review of the international evidence, Moran, Ghate & van der Merwe, 2004*

All parent-training/ education programmes, whether group or individual based should:

- Be structured, manual-based and have a curriculum informed by principles of social-learning theory and include relationship-enhancing strategies.
- Offer a sufficient number of sessions, with an optimum of 8 – 12.
- Enable parents to identify their own parenting objectives.
- Demonstrate proven effectiveness based on evidence from randomised control trials or other suitable rigorous evaluation methods undertaken independently.

*National Institute of Clinical Excellence (NICE) Guidance on Parenting Support 2006*

Services are more effective when they:

- involve parents as well as children
- provide intensive support to vulnerable parents in the first three years to enable them to meet their children's needs
- avoid labelling problem families
- target multiple risk factors
- last long enough to make a difference
- are developed in consultation with parents
- are culturally appropriate.

*C4EO Improving children's attainment through a better quality of family-based support for early learning 2009*

## **5.7 Implications for strategy and implementation**

Messages from research provide a framework for effective development and implementation of parenting programmes. The following box draws together these messages, describing the factors that contribute to the effective implementation of parenting services (Moran et al, 2004, What works in parenting education?).

**Practical factors**

- Child care facilities
- Provision of paid-for transport, especially where low-income or rural families are the users
- Convenient location (e.g. a place where parents might want to go for other purposes)
- Non-stigmatising, comfortable and welcoming venues
- Delivery at convenient times (including evenings and weekends where there is a demand)
- Ensuring that the service is properly advertised and marketed, so that parents and agencies on whom referrals may depend know about it

**Relational factors**

- Using 'trusted' local professionals with excellent inter-personal skills
- Ensuring that all staff are fully trained for the job
- Building rapport with parents before they begin a programme
- Using interactive rather than didactic style of working
- Avoiding 'talking down' to service users or making them feel belittled or inexperienced in their own lives
- Ensuring that user feedback is incorporated into changes to the service

**Contextual factors**

- Awareness of factors that may affect uptake, including single parenthood, marital discord, mental health, poverty, poor housing unemployment, gender, culture and ethnicity etc.
- Good interagency working practices
- Awareness that programme content and style may need adaptation for fathers

**Cultural factors**

- Awareness and respect for different models of parenting that arise within different cultures, and the need to tailor programmes accordingly, while at the same time recognising the commonalities of parenting within different cultures
- The use of workers with sufficient credibility and trustworthiness in relation to the clients' cultural background
- Provision of incentives for uptake and engagement of the service that are meaningful to clients within their culture, context or situation

**Strategic factors**

- Investing persistent effort in reaching and engaging parents before the programme starts
- Addressing barriers that may impede parents' attendance
- Providing one-to-one contact before, during and after the programme
- Providing incentives for attendance such as food, certificates, fun activities etc
- Mandating high risk parents to attend

**Structural factors**

- Using interactive and 'fun' activities rather than a didactic, formal style of working
- Consider alternative methods where face-to-face delivery is difficult for practical or resource reasons
- Provision of supporting materials (leaflets, books, videos etc) that reflect users' own lives and situations and do not seem over-simplified or patronising

- Tailoring programmes to the literacy levels of users
- Opportunities for group and individual work in response to individual needs
- Active attempts to include and engage both parents in two parent-families
- Taster sessions before the intervention starts

## 6. Evidence-based practice

### 6.1 What is evidence-based practice?

There has been an increasing focus on the importance of evidence-based practice in recent years. Lloyd's broad definition<sup>9</sup> is helpful when developing and planning evidence-based interventions:

Evidence-based practice is "*finding out what works, and ensuring that the interventions we and others make in children's lives are as good as they possibly can be*".

### 6.2 How do we 'find out what works'?

Evaluation of a programme's effectiveness considers the quantity, independence and level of evidence available, including:

- randomised control trials, in which participating parents are randomly allocated to a programme or a control group so that outcomes for each group can be compared
- cross-sectional studies, for instance the approach used to evaluate Sure Start, where outcomes for the whole population in Sure Start Local Programme areas were compared to outcomes in an area with a similar demographic profile but no Sure Start programme
- standardised measures - nationally recognised pre and post normative questionnaires, such as Goodman's Strengths and Difficulties Questionnaire which is commonly used to determine changes in child behaviour
- observation from practice
- qualitative information e.g. before and after interviews.

Establishing the effectiveness of different interventions is, however, not an exact science. It depends on many factors, for instance:

- The balance that is struck between programme fidelity and adaptation to the needs of particular communities and groups of parents.
- The level of funding: many programmes have not had the investment or opportunity to test their effectiveness in the same way as some of the well-known programmes developed in overseas clinical settings. This does not mean they are necessarily less effective, but it is harder to gauge their effectiveness.
- The effectiveness of data collection: this has a major impact on the size of the sample group, for instance when several pre and post measures are used, the number of 'complete' sets of data that

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<sup>9</sup> Lloyd, E (ed) (1999) 'Parenting Matters. What Works in Parenting Education?', Barnardo's.

can be used for evaluation purposes can end up being very small because of all the variables such as parent attendance, practitioner understanding of data collection methods etc.

It is therefore important to look carefully at a programme's evidence-base before making decisions. The NAPP has started to 'rate' the evidence-base of different programmes on the commissioning toolkit and this provides a useful independent evaluation of information provided by the programme developers. The process is, however, in its early stages and only a small minority of programmes on the toolkit have been independently rated by NAPP in terms of their evidence-base.

### 6.3 Theoretical underpinning

In addition to evaluation of programme outcomes, examining the theoretical underpinning of a programme's content provides important information about likelihood of effectiveness.

Evidence-based parenting programmes are underpinned by sound theoretical frameworks that have been supported by a substantial amount of research in the fields of child development and family therapy. Findings from this research<sup>10</sup> consistently suggest the following:

- Certain parenting behaviours, particularly warm and loving support combined with holding firm boundaries when necessary, are most successful in bringing up children who will become happy and healthy adults.
- Certain parenting behaviours, especially authoritarian discipline measures or neglectful inconsistent parenting and poor supervision, place children at risk for a host of negative outcomes, including low achievement, poor mental health and anti-social behaviour.
- Parenting behaviours are influenced by their culture and the community in which they live.
- Parenting behaviours can improve when the psychological needs of parents are met.

The following box provides an overview of the key theoretical frameworks that form the basis of many evidence-based parenting programmes:

Child development theory	Key message
Attachment	Forming a strong bond with responsive, sensitive and loving carer(s) is fundamental to successful child development.
Social learning	Human behaviour is shaped by its consequences and child behaviour is reinforced by parent response.
Parenting styles	Children of parents with a warm yet firm parenting style have higher levels of self-esteem, social responsibility, achievement and mental health and have more successful relationships.
Ecological systems	All children's environments – their homes, schools and communities – need to work together to meet children's

<sup>10</sup> Asmussen, K. (2009) *What is evidence-based practice?* National Academy of Parenting Practitioners Briefing Paper [www.parentingacademy.org/training\\_ebpractice.aspx](http://www.parentingacademy.org/training_ebpractice.aspx)

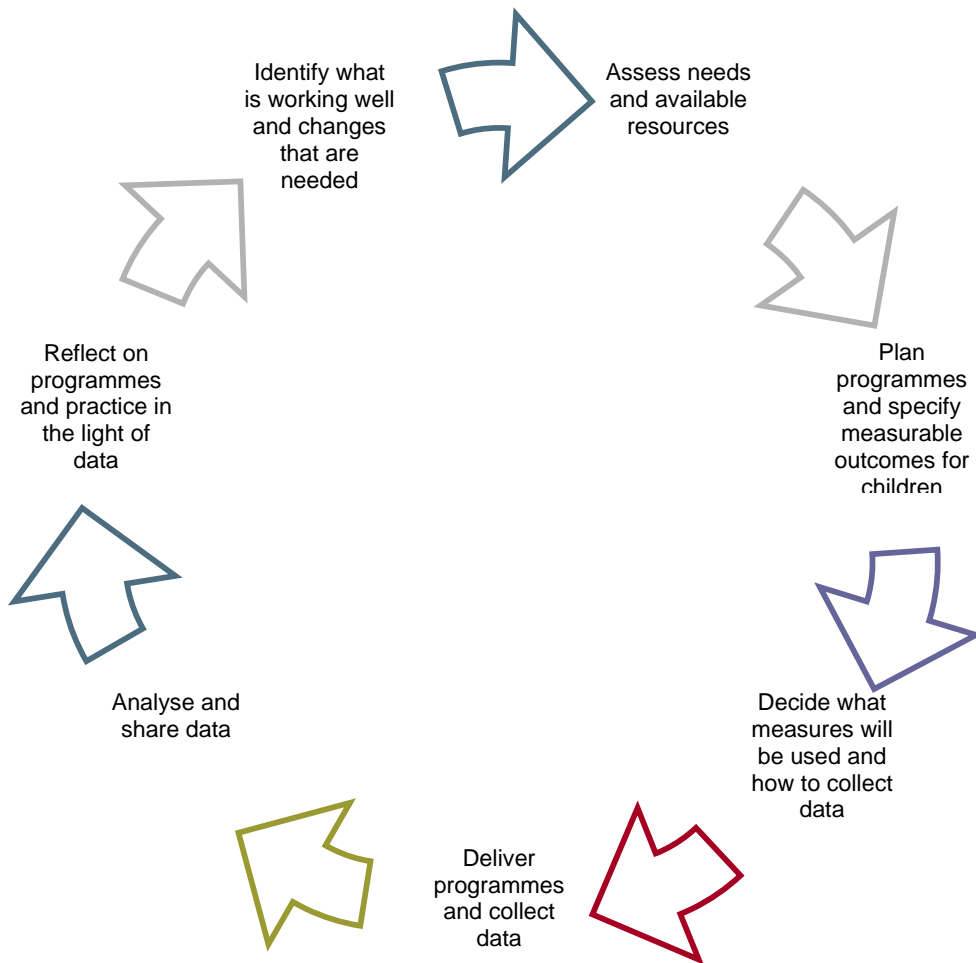
	developmental needs.
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## 6.4 Reflection and evaluation

On-going monitoring and evaluation as a routine and integral part of service development and implementation is a key element of evidence-based practice, enabling agencies to:

- assess the effectiveness of current programmes and plan future development
- disseminate knowledge about what works
- justify future investment in parenting programmes.

The following planning and evaluation cycle shows how outcomes and measures are built in to the development and implementation of evidence-based parenting programmes:





## **PART THREE: PROVISION, NEEDS AND PRIORITIES IN MEDWAY**

### **7. Current provision in Medway**

#### **7.1 Overview**

Medway currently has a range of provision that falls within the broad umbrella of parenting programmes. This provision is delivered via:

- Children's centres
- Extended schools
- Adult learning
- Ante natal and post natal groups
- YOT
- Parentis
- Educational Psychology
- NSPCC
- Teenage Pregnancy Partnership
- Disabled children's service
- CAMHS
- Rochester Young Offenders Institution
- Drug and Alcohol Action Team
- Fostering service.

Much of the group support for parents has been developed locally in response to identified gaps and needs. Externally developed structured programmes available in Medway include the Webster-Stratton Incredible Years delivered by YOT, and Family Caring Trust courses delivered by Parentis.

YOT have also been delivering the Escape programme developed by the Trust for Study of Adolescence (TSA), but are planning to discontinue this programme and pilot Triple P locally instead, in conjunction with the new Senior Parenting Practitioner appointed to the Educational Psychology team.

The Family Nurse Partnership programme will also be introduced in Medway later this year, focusing on first time mothers under 20.

The range of provision makes it difficult to accurately estimate the number of parents who currently participate in some form of group parenting support. It was not possible as part of this review to obtain figures for the number of parents who access 'informal' parenting groups in the early years, such as ante natal and post natal groups and the groups, often drop-in, offered within children's centres. This provision clearly makes a significant and important contribution to parenting support, and a best estimate of numbers of parents reached based on conversations with providers may be about 5,000 a year.

In terms of more formal provision, approximately 1,000 places on structured parenting programmes are currently provided annually in Medway.

The following table provides a breakdown of this estimate for the year April 08 – March 09:

Agency	Programme/ course	Tier	No. of parents
Parentis	<ul style="list-style-type: none"> <li>▪ Baby Massage groups</li> <li>▪ Parenting courses from babyhood to teens based on Family Caring Trust materials</li> </ul>	50.1% Tier 1 21.1% Tier 2 27% Tier 3 1.8% Tier 4	494
YOT	<ul style="list-style-type: none"> <li>▪ Escape programme for parents of teenagers developed by TSA</li> <li>▪ Webster-Stratton Incredible Years</li> </ul>	Tier 3	86
Adult Learning	<ul style="list-style-type: none"> <li>▪ Locally developed parenting courses as part of family learning</li> </ul>	Tiers 1 and 2	200
Disabled children's services	<ul style="list-style-type: none"> <li>▪ Locally developed behaviour management courses for parents of children with ASD, Asbergers and learning disabilities</li> </ul>	Tiers 2 and 3	100 (approx.)
Step4ward	<ul style="list-style-type: none"> <li>▪ Locally developed young parents' support programme</li> </ul>	Tier 2	30
Speakeasy	<ul style="list-style-type: none"> <li>▪ Parenting course to help parents talk to their children about sex and relationships, developed by Family Planning Association</li> </ul>	Mostly Tiers 1 and 2	70 (approx.)
NSPCC	<ul style="list-style-type: none"> <li>▪ Locally developed programme for parents who have been sexually abused based on Strong Mothers materials</li> </ul>	Tier 3	6
CAMHS	<ul style="list-style-type: none"> <li>▪ Specialist groups for parents of children with ADHD or mental health problems</li> </ul>	Tier 3	50 (approx.)
<b>Total</b>			<b>1,036</b>

A more detailed overview of local provision and the agencies involved, including less formal parenting groups not included on the above table, is at Appendix 2.

A breakdown of referrals to Parentis courses is attached at Appendix 5.

## 7.2 What is working well

The range of provision and agencies involved has resulted in a rich and varied local offer, with pockets of expertise across Medway responding to different needs. Some key strengths are described here; analysis of issues and gaps to be addressed is included in Section 10.

- **Parentis** has developed a universal council-wide service focused on the provision of parenting courses from babyhood to the teenage years. It is the only dedicated parenting programme agency in Medway.

This dedicated focus has enabled Parentis to develop the infrastructure to plan, deliver and monitor regular programmes of course delivery across the three districts. It brings added value to Medway beyond the direct provision of courses, including training staff across different agencies,

involving and consulting parents and co-ordinating other programmes such as Speakeasy. It is well known by practitioners in Medway and many local agencies working at Tier 1 and 2 refer parents to its courses.

Parentis courses have been shown to be effective at the universal level (2008 independent evaluation, Information by Design (IbyD)). This evaluation found a range of benefits for parents, including improved social cohesion and social networks, reduced isolation, learning opportunities, signposting, improved confidence and improved self-management. In the longer term, participants were still using the skills they had developed, and gave examples of where they had positively changed their behaviour, and the positive impact of the programme on the way they interacted with their children. Some mentioned that their children had improved at school.

On-going internal evaluation by Parentis through the use of pre and post questionnaires shows a significant change for parents during the course. At the start 49 per cent parents feel they have 'significant issues with their children. This has reduced to 29 per cent by the end of the course.

Parentis has also been able to develop its offer in response to need, introducing baby massage groups in children's centres alongside its other courses. These baby massage groups are widely valued by local practitioners as important opportunities to support bonding and attachment and engage parents into other programmes.

The IbyD evaluation showed that in the short and long term, parents felt that the programme had positively changed the way they behaved with their children, their interaction with the child and in some cases, the child's interaction with them. Participants agreed that the programme had helped them – giving them greater confidence, the ability to relieve the child's distress/discomfort, and to relax the child.

- **Children's centres and extended schools** provide hubs of flexible services at community level. They recognise the vital role that parents play in their children's lives and have an explicit commitment to work in partnership with parents.

Children's centres and extended schools bring many strengths that can benefit the development of parenting programmes locally, including:

- knowledge of local communities and families
- engaging local parents by employing outreach staff who are able to build trusted relationships with parents
- a wide range of informal activities alongside parent support
- addressing the underlying needs of parents themselves alongside parenting, such as the Topaz programme (for mothers with low self-esteem) and Freedom programme (focused on domestic violence), as well as support for young parents delivered in children's centres
- the ability to innovate in response to the needs of the local community, for instance a new programme for fathers, *Hit the Ground Crawling* will be piloted in a children's centre in September 09
- bringing local agencies together to provide a range of support for parents under one roof – this is particularly the case for children's centres
- local venues that can be used outside the working day

- staff working with parents, such as Community Liaison Officers and Home-School Support workers, who can be part of a multi-agency resource to deliver parenting programmes.
- **Innovative local responses to need** evident in the work of a wide range of agencies. Examples include:
  - the Step4ward programme developed in consultation with young parents to provide accessible and 'teenage friendly' support for young parents
  - the pro-active approach to engaging parents in family learning adopted by the Adult Learning Services, such as running sessions for fathers and children at Charlton Football Club
  - the development of a *Sharing Cultures* programme by Family Learning when the need to build cultural and racial understanding was identified at a local primary school
  - the links developed between Rochester Young Offenders Institution and local parent support agencies.
- **Specialist expertise** which can support the development of a continuum of parenting programme provision to meet particular needs. For instance:
  - The knowledge health professionals bring to enabling parents to meet their children's developmental and health needs, particularly in the early years. Additionally, the Solihull training which is currently being rolled out by the Children and Adolescent Support Team (CAST) to all health professionals working within Children's Services will enable these professionals to increase their focus on attachment and behavioural issues.
  - YOT has developed significant experience in delivering structured parenting programmes to families with higher levels of need. They have built an understanding and knowledge of the issues these families face and the kind of parenting support that is effective in meeting their needs.
  - Services for disabled children have used their experience of different specialist programmes to develop the Daisy programme tailored to the needs of parents of children under 6 years with ASD, helping them to understand and manage autism. This meets a vital need for support and guidance for parents who are coping with challenging family lives. Two similar programmes, one for primary age and one for teenagers, are currently in development and will be available by the end of the year.
  - The NSPCC offers a specialist programme for parents of children who have been sexually abused.
  - The specialist knowledge and expertise of CAMHS is vital in both developing and delivering and/or supervising work with parents of children with ADHD or mental health difficulties.

## 8. Parents and children in Medway

- There are 69,000 Children in Medway, 27% of the population.
- There are 109 state schools educating 44,100 children.
- 220 children are being educated at home.
- 1,585 pupils have a statement for additional educational needs (SEN)
- 344 children and young people are looked after by the Council.
- 157 children in Medway are on the Child Protection Register.
- There are 650 young carers in Medway.

Appendix 3 provides a snapshot of some of the demographic information that is relevant to the planning, development and delivery of parenting programmes, which is summarised here.

### 8.1 Geographical areas of need

Despite its relatively small size, Medway encompasses some of the most deprived and least deprived areas of England.

The well-evidenced link between social deprivation and poor outcomes for children means that identification of areas of greatest need is crucial in guiding the targeting of resources and delivery of preventive services. Social deprivation is not, however, the only indicator of particular need; other issues such as rural isolation (for instance for families living on the Hoo Peninsula) affects access to support when families need it.

The following table uses seven multiple indices of deprivation (income; employment; health, deprivation and disability; education, skills and training; barriers to housing and services; crime; and finally living environment) to identify the 15 most deprived Super Output Areas (SOA) within Medway wards. (England is broken down into 32,482 SOAs and Medway into 164.)

- **Combined multiple indices of deprivation** show that:
  - the Gillingham North ward contains a SOA that falls within the most deprived 10 per cent in England
  - Chatham Central, River, Luton & Wayfield, Princes Park and Gillingham South wards contain SOAs that fall within the most deprived 20 per cent in England.

KEY to table	
	In most deprived 10% in England
	In most deprived 20% in England

SOA	IMD SCORE	NATIONAL RANK OF IMD (where 1 is most deprived)	Medway rank of IMD		Ward
E01016032	46.62	2929	1	9.02%	Gillingham North
E01016023	44.32	3451	2	10.62%	Chatham Central
E01016033	43.97	3534	3	10.88%	Gillingham North
E01016111	43.02	3754	4	11.56%	River
E01016017	42.26	3941	5	12.13%	Chatham Central
E01016031	39.41	4800	6	14.78%	Gillingham North
E01016069	36.79	5622	7	17.31%	Luton and Wayfield
E01016049	36.52	5711	8	17.58%	Gillingham South
E01016063	35.82	5921	9	18.23%	Luton and Wayfield
E01016083	35.58	6014	10	18.51%	Princes Park
E01016068	34.94	6259	11	19.27%	Luton and Wayfield
E01016161	33.97	6594	12	20.30%	Twydall
E01016159	33.16	6909	13	21.27%	Twydall
E01016153	32.73	7052	14	21.71%	Strood South
E01016150	32.10	7284	15	22.42%	Strood South

**Source: Office of the Deputy Prime Minister, Indices of Deprivation 2004**

Analysis of the more detailed information contained at Appendix 5 shows that:

- on the **single deprivation index of education, skills and training:**
  - Chatham Central and Gillingham North contain SOAs in the most deprived 5 per cent in England
  - Walderslade, Strood South, Princes Park, Luton & Wayfield and Twydall contain SOAs in the most deprived 10 per cent in England
- **on the single deprivation index of crime and disorder:**
  - Chatham Central contains a SOA in the most deprived 5 per cent in England
  - Gillingham North contains a SOA in the most deprived 10 per cent in England.
- **The following wards have under 18 conception rates above the national average:**
  - River (significantly higher)
  - Chatham Central
  - Gillingham North
  - Gillingham South
  - Strood South
  - Rochester East
  - Luton & Wayfield
  - Princes Park
  - Peninsula
  - Twydall.

## 8.2 Need for parenting support

An indication of the parenting issues parents want help with is provided by the 'starting out' questionnaires used by Parentis.

The 'top issues' that parents would like to address in parenting programmes are:

- listening to children and building positive relationships
- building children's self-confidence
- engaging children's co-operation
- supporting children to learn.

Additionally parents said they wanted help to:

- keep children away from crime
- keep children away from drugs and alcohol
- talking to children about sex and relationships.

A full breakdown of the issues parents want help with when they start Parentis courses is attached at Appendix 4.

A similar picture of the kind of help parents need in their parenting role is conveyed by parents and carers who responded to the 'Extending Services Survey 2007'. When asked to name the two most important topics for parenting support in their area:

- 54 per cent said managing children's behaviour
- 46 per cent of respondents felt that having advice and support in relation to children and young people who use alcohol/drugs was the greatest need
- 28.5 per cent wanted help to communicate with their child
- 22.6 per cent said they would like advice and support on how to talk to their child about sex and relationships.

The views of children in the *Rainer Communities that Care* Survey in 2008 also provide useful information about parenting. Whilst 90 per cent children and young people felt close to at least one parent, only 76 per cent felt they could share their thoughts and feelings with a parent and 32 per cent named family conflict as a problem in their life.

## 8.3 Minority ethnic communities

The ethnic make-up of Medway families is constantly changing, for instance, the increase in number families from Eastern Europe over recent years.

The main ethnic groups within Medway currently include:

- Indian, Pakistani and Bangladeshi
- Chinese
- Afro-Caribbean
- Eastern European, including Russian, Polish, Czech, Slovakian and Turkish.

Around 30 different languages are spoken in Medway.

Families from minority ethnic backgrounds share the same needs for parenting support as other parents, in addition to particular issues related to ethnicity. These may include:

- **Language barriers** for parents for whom English is an additional language: programmes will be most effective if they are delivered by people within the community who are able to speak minority languages or work with interpreters.
- **Inter-generational tension and conflict:** this can be a particular issue in families from a South-East Asian background where parents may have very high expectations of their children in terms of achievement, behaviour, gender norms and relationships. Children and young people can find themselves living in two very different cultures inside and outside the home.
- **Cultural norms** which may influence the 'acceptability' of seeking support and talking about personal issues outside the family. Again, delivery of parenting support by people within the local community and using community venues such as mosques can help to overcome this barrier.
- **Knowing what help and support is available:** word of mouth and personal relationships are particularly important in communicating information to parents. The Positive Parenting Network website, which many local parents use to find out about services, has limited use for many parents from minority ethnic communities, as a large percentage don't have access to a computer.

## 8.4 Fathers

Parenting support services are still mainly used by mothers; 82 per cent of referrals to Parentis are female.

Although research<sup>11</sup> demonstrates the positive impact fathers' involvement can have on outcomes for children, the Communities that Care 2008 survey revealed striking differences between maternal and paternal involvement:

- 90 per cent of children and young people felt close to their mother, compared to only 74 per cent who felt close to their father.
- 76 per cent of children and young people felt they could share their thoughts and feelings with their mother, but only 55% felt they could do this with their father.

Fathers themselves talk about the barriers they face in accessing support and describe the kind of help they would like in their parenting role. Views shared in the 2008 on-line Dads' Survey, to which 63 fathers responded, include:

- Fathers feel that services are geared to mothers, for instance the lack of parenting support outside the working day and the lack of communication by services and schools with fathers who do not live with their children.
- Many fathers want and try to stay fully involved in their children's lives after separation and divorce, but face barriers to do with legal and contact issues, as well as a difficult relationship and communication with their children's mother. The need for help in dealing with these issues was frequently voiced by fathers who participated in the survey.
- Some fathers find it hard to cope with the stresses of family life and would benefit from help to understand and cope with their own feelings and to share experiences with other dads.

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<sup>11</sup> Flouri and Buchanan 2001

- The role of step parent brings additional challenges and there is a need for support focused on stepfamily issues.
- Fathers would value support in dealing with children's behaviour, as well as the changes and life transitions as their children grow older.
- Only 10 per cent of respondents felt it was easy or very easy to access a parent support group.

## **8.5 Disabled parents**

The Adult Services Physical Disability Team estimates that 23 adults to whom they are providing services have children living with them.

Medway was one of 50 councils surveyed in the recent Commission for Social Care Inspection (CSCI) report, *Supporting Disabled Parents: a family or a fragmented approach?* This showed that disabled parents continue to face difficulties in accessing services which support family life. The separation between children's and adults' services has resulted in a fragmented approach to work with families and different views about whether the focus of support is on child protection or on supporting people with their parenting role.

Although disabled parents want to have their parenting role recognised and to be able to access mainstream parenting services, many service managers interviewed as part of this review identified disabled parents as a group services were not effectively reaching.

## **8.6 Parents of children with additional needs**

- **Disabled children and young people**

1,585 pupils in Medway have a statement for additional educational needs (SEN). 70 per cent of these are boys. The following table shows the numbers and percentages by need description and gender split:

Need Description:	Female		Male	
	Count	%	Count	%
Autistic Spectrum Disorder	25	1.58	202	12.74
Behavior, Emotional and Social Difficulties	14	0.88	155	9.78
Hearing Impairment	14	0.88	26	1.64
Moderate Learning Difficulty	111	7.00	241	15.21
Other Difficulty/Disability	4	0.25	9	0.57
Physical Disability	37	2.33	57	3.60
Profound and Multiple Learning Difficulty	0	0.00	4	0.25
Severe Learning Difficulty	26	1.64	83	5.24
Specific Learning Difficulty	25	1.58	79	4.98
Speech , Language and Communication Needs	88	5.55	236	14.89
Visual Impairment	14	0.88	22	1.39
<b>Base</b>	<b>1585</b>			

Source: IMPULSE October 2008

Issues raised by parents as part of the Aiming High consultation that are relevant to parenting programme delivery include:

- the challenges of managing children's disruptive behaviour
- the impact on the family and the stress of parenting children who need constant supervision
- bullying of disabled children by other children
- the difficulties of using mainstream resources such as public transport and crèche provision with a disabled child.

The greatest need for parenting support is amongst parents of children with ASD or behaviour, emotional and social difficulties; 80 per cent of referrals to parenting programmes run by the Disabled Children's Service are parents who fall into these two groups.

- **Children and young people with mental health difficulties**

Specialist CAMHS Tier 3 services are largely focused on children and young people who:

- have attempted suicide
- are experiencing psychosis
- have eating disorders.

There has been a striking increase in the number of referrals to CAMHS of teenagers who have attempted suicide – an almost fourfold increase from 2004 to the present. 60 referrals were made in the whole of 2004; this figure had doubled by last year and there have already been 55 referrals in the first quarter of the current year.

The pressure on CAMHS to respond to the most acute cases means that there is a gap in parenting support for:

- parents of children with ADHD – CAMHS is currently running two weekly support groups for these parents but feels that more provision is needed at an earlier preventive level of intervention.
- parents of young people who are self-harming; enabling parents to respond sensitively and appropriately to disclosure or discovery of self-harm is crucial in helping young people.
- **Children and young people misusing substances**

In 2007-08 133 young people were referred for, and 104 young people received, treatment for substance misuse, a significant increase of 73% from 2006-07<sup>12</sup>.

Looked After Children, young people not in education, employment or training (NEET) and young people in the criminal justice system are more likely to misuse drugs and alcohol.

Of the 133 young people referred:

- 94 were male
- most were aged between 15 and 17
- 59% of treatment was for cannabis, 30% for alcohol, 2% opiates.

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<sup>12</sup> Medway Substance Misuse Assessment for Young People, December 2008

## 9. The views of partner agencies, managers and practitioners

29 managers and practitioners from agencies involved with Medway families were interviewed as part of this review. Particular themes and issues consistently emerged in these interviews, indicating a broad consensus of opinion about the kind of parenting programme provision that is needed to meet local needs.

These themes and issues can be summarised as follows:

- **This review is felt to be a priority**

The need for clarity and coherence in terms of local parenting programme offer was expressed by almost everyone consulted. There is confusion about the current situation, with some people believing that Triple P is Medway's programme of choice and others waiting to see what choices will be made about future provision as part of the new Parenting Strategy.

- **A sense of opportunity and enthusiasm**

Discussions with practitioners and managers highlighted a widespread enthusiasm for improvement and development of the local parenting programme offer.

The convergence of new developments and initiatives (e.g. children's centres, extended schools, new programmes such as Family Nurse Partnership, as well as this review itself) are seen as providing an opportunity to create a cohesive, responsive and high quality network of support for parents locally.

- **Little joining up of programme provision currently**

As the mapping exercise shows, there is a wide range of programmes currently being delivered in Medway. Interviews repeatedly demonstrated, however, a lack of shared knowledge of what is available and how individual programmes complement each other, resulting in 'islands' of provision.

For instance:

- Behaviour management programmes for parents of children under 6 with ASD or Asbergers are developed, planned and provided separately from children's centres.
- Ante-natal parent education, which offers an unparalleled opportunity to reach and engage parents, is not systematically integrated with parenting support provided by other agencies after birth.

- **One size doesn't fit all**

The courses currently offered by Parentis are generally felt to work well for parents at a universal level, but the view was repeatedly expressed that they do not cater for vulnerable families with complex needs. Services working with families at Tier 2 and 3 reported that families who they referred to Parentis often drop out saying "the other parents weren't like me".

Issues raised during interviews included:

- The need for a more tailored approach with some families and a mix of individual and group support, combined with home-based outreach to reach the most vulnerable families was strongly expressed. The Integrated Teams, including FASST, do not feel there is currently a programme available in Medway that meets the complex needs of families with whom they are working.

- Formal parenting programmes were not felt to be appropriate for young parents, who have clearly articulated a need for provision designed around their needs. Support for young parents needs to provide a balance of social support, educational opportunities, fun activities and trips out, parenting support, self-esteem building and practical skills such as budgeting, healthy eating and first aid.
- Programmes need to be tailored to cultural needs and attitudes.

- **Lack of inclusion of parents with greatest needs**

Local practitioners and managers frequently commented on the fact that current group programmes tend not to meet the needs of the most vulnerable parents.

A community child health nurse working from All Saints Children’s Centre commented that for every 30 new parents invited to post natal groups, only 6 – 8 parents actually attend.

Local experience and concern is backed up by research that shows that the most disadvantaged families tend not to access group parenting programmes without intensive engagement work with parents before and during programmes.

Agencies who participated in the consultation workshop talked about the ‘invisible’ families who don’t access services, including traveller families, homeless families and families from minority cultures in which young children have very little contact outside the home. Concern was also expressed about families who do not reach the threshold for mandatory intervention, but do not access parenting support because they do not accept there is a problem within the family.

Barriers to involvement are felt to be personal (lack of confidence, fear of being judged etc), external circumstances (parents are often dealing with multiple pressures in many aspects of their lives) and practical (lack of transport, childcare, etc).

Lack of knowledge about available support is also perceived to be a major barrier for many parents.

- **The need for shared knowledge about what is available and signposting**

Practitioners and managers frequently commented on their lack of awareness of provision offered by different agencies. Most people interviewed were aware of the parenting support provided by Parentis, but were hazy about other available programmes.

The challenge of feeding information to extremely busy frontline practitioners was recognised; concern was also expressed, however, about practitioners’ ability to signpost and refer parents effectively. For instance:

- Community midwives, who have a key ‘universal’ role in terms of signposting because of their access to parents (4,800 babies are born on average each year), know little about local service provision for parents after birth. The Head of Midwifery is very keen to address this missed opportunity and integrate midwifery and early years provision more effectively.
- The Adult Physical Disability team, which could play a crucial role in signposting disabled parents to services, currently knows little about parenting provision as this has traditionally been outside its remit.

- **Accessibility**

Significant access issues were raised, including:

- Lack of geographical coverage and comprehensive locally based provision e.g. specialist courses for parents of children with ASD are largely run in Gillingham.
- Lack of childcare – not all daytime courses have crèche provision and there is no childcare for school age children for evening provision. When Parentis lost their budget for crèche and transport provision, this significantly affected uptake.
- Timings of programmes – most courses are run during the working day, although children’s centres are keen to encourage use of their facilities during evenings and weekends, as they are currently underutilised at these times.
- Lack of transport, especially for parents in rural areas such as the Hoo peninsula and parents who come from all over Medway for specialist provision such as YOT courses or courses at Parklands Resource Centre.
- Language difficulties for parents with limited English.
- The need to take the service to the parents in some local communities, for instance by using a playbus.

- **The need for early intervention**

Practitioners and managers consistently highlighted the importance of a continuum of provision from before birth in creating a culture in which external support is seen as a natural and acceptable part of family life.

Many were also aware of the importance of supporting parents in the very early years of a child’s life to avoid entrenched problems developing that may be extremely difficult to tackle effectively as a child grows older.

- **Capacity issues**

Involvement in parenting programme delivery is part of a much wider role for many staff, affecting their availability to deliver groups. For instance, the heavy workload of HVs and social workers means their focus has to be on safeguarding and activities which fall within their core service delivery.

Of the 39 parents and practitioners trained by Parentis to deliver courses over the last two years, only 17 are currently available for this work and only 9 of these are Medway practitioners.

- **Children’s centres and extended services as hubs of multi-agency provision**

The opportunities presented by the roll out of children’s centres across local communities in Medway were widely recognised.

Children’s centres were felt to be accessible, family-friendly and flexible venues, from which a range of multi-agency staff can work together to meet local needs.

Whilst schools are not always perceived as inviting and accessible venues by parents (Parentis commented that parents are often reluctant to attend courses in their local school), they have the

advantage of being sited within local communities. Breaking down the barriers between schools and parents was also seen as an important factor in involving parents as partners in their children's learning and improving school attendance and achievement.

## **10. Analysis of priorities, needs and current gaps**

This section draws together the key messages from interviews and written data about current local provision to identify priorities for development that will address needs and gaps in services.

These priorities can be identified as:

### **10.1 Persistent and proactive inclusion and engagement**

In their extensive 2004 study of what works in parenting support, Moran et al looked at what helped services in:

- **'getting'** parents (enabling them to use the service in the first place)
- **'keeping'** parents (enabling them to attend sessions regularly or complete a course)
- **'engaging'** parents (making it possible for them to engage actively in what the service has to offer and become active partners in enabling children's well-being, development and learning).

Para. 5.7 looks in detail at the factors that enable services to achieve these tasks; the study highlights, however, the vital importance of relationships in inclusion and engagement. A trusted and known worker can provide the bridge to accessing support and developing the confidence to join a group programme.

Both interviews and written data suggest that the current programme offer is not as effective as it could be in terms of getting, keeping and engaging parents. Of the 341 parents who were referred to Parentis, only 189 completed a course.

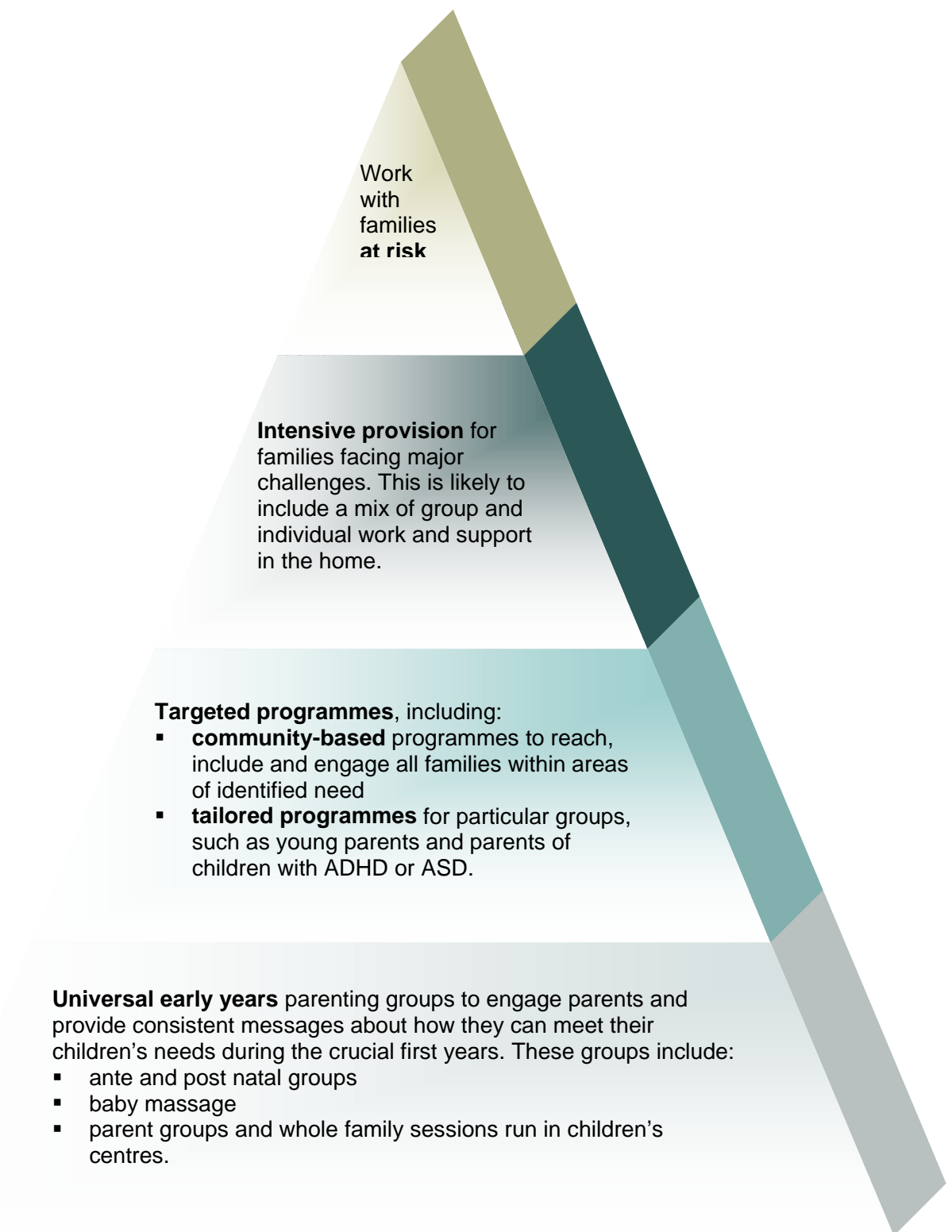
Future development of parenting programmes locally needs to:

- recognise and address the need for persistent and proactive outreach within local communities to include and engage parents in need of support
- consider the track record of different programmes in including, retaining and engaging these parents.

### **10.2 A continuum of provision to meet different needs**

There is widespread agreement locally that implementing a 'programme' is not enough.

Parenting programme delivery needs to take place within a continuum of provision that meets different needs:



### **10.3 Joining up work by different agencies**

Different agencies each contribute particular strengths and roles to the local parenting programme offer. There is a rich and diverse local pool of experience and expertise, but this needs 'joining up' so that the individual elements together make a coherent and comprehensive whole.

There is an urgent need for:

- strategic and operational leadership and co-ordination of parenting programmes
- multi-agency sessions at district level to:
  - plan and co-ordinate delivery to address needs and gaps and avoid duplication
  - build knowledge about the role and services of other agencies
  - share good practice and learning.

### **10.4 Clear and consistent messages about children's needs and parenting**

One size does not fit all and there is a well-justified need for a mix of parenting support, from formal structured programmes to informal groups and individual work that may be provided both as part of outreach and service delivery. The variety and range of provision, however, makes the need for clear consistent messages even more important.

Some provision such as ante and post natal groups has evolved over the years, with individual health professionals determining the content of sessions. Managers have recognised the need to ensure that the content of these groups is consistent, evidence-based and in line with the most up-to-date good practice guidance. Training in the Solihull Approach is being rolled out to health professionals working in Children's Services to promote a common understanding.

Formal parenting programmes delivered locally need to provide core messages for parents about the parenting style and strategies that have been shown to result in best outcomes for children.

All practitioners working with parents need to have a clear understanding and grasp of these messages and how to best share them with parents.

### **10.5 Consultation with parents in local communities**

Local communities and their needs are constantly evolving. If parenting programmes are to effectively meet the needs of local parents, including those from different ethnic backgrounds, fathers as well as mothers, and families with additional support needs, providers need to have a clear understanding of these needs and how programmes can be offered in a way that local parents want, and are able to access.

### **10.6 Monitoring effectiveness of programmes in meeting outcomes for children**

Conclusions about the effectiveness of some current parenting group provision in Medway are based on ad hoc feedback from parents and practitioners.

Although this feedback is helpful in understanding how parents are responding to what is offered, there is a concern amongst managers that little is known about the impact of current provision on outcomes for children. For instance:

- Does parent participation in the parenting programmes delivered by YOT have an impact on re-offending rates or entry into the youth justice system for their children?
- What impact do antenatal and postnatal groups have on the parent–child relationship and children’s development?

Local decisions about parenting programme need to identify the outcomes for children in Medway to which it is hoped the programme will contribute. Similarly, programme delivery needs to be evaluated against these specific outcomes (see Para. 5.4 for a model of planning and evaluating services against outcomes for children).

### **10.7 Developing provision to fill identified gaps**

There is widespread agreement across local agencies about parents not adequately included or catered for within the current offer. These gaps include:

- parenting groups that are able to reach and meet the needs of the most vulnerable families
- programmes that tailored parenting support for parents with learning disabilities who keep their children after assessment
- provision for parents who themselves have additional needs e.g. parents with mental health issues or parents who are misusing substances misuse
- inclusion of disabled parents in mainstream parenting programmes
- tailored parenting groups for parents of children with ADHD
- parenting programmes that include the whole family
- inclusion of fathers
- expansion of provision for young parents; there are 250 parents in Medway under the age of 20, but only 30 participated in the Step4ward programme last year
- bi-lingual practitioners to reach parents from minority ethnic backgrounds who have limited English
- locally-based provision for parents of children with ASD or learning disabilities
- intensive programmes to support parents during crucial times e.g. when young offenders return home or when aiming to place children in care back with their families.

### **10.8 Criteria for choice of parenting programmes**

The consultation that took place as part of this review identified a broad consensus about the elements of a parenting programme that are required to meet local needs and address local priorities.

The following criteria reflect local views and needs and provide a starting point for decisions about the development of parenting programmes locally.

The local parenting programme offer should provide:

- a continuum of provision that caters for different ages and from birth/ pre-birth
- a continuum of provision that offers universal support in the early years, as well as targeted provision and more intensive support when needed
- core messages about children's needs and parenting that can be integrated in all work with parents
- choice for parents and the flexibility to respond to local and individual needs
- a structure that address the needs of parents and the social contexts of their lives, alongside parenting skills
- a structure that is appealing to parents – 'informative but informal' – and includes incentives such as food and fun activities
- a means of breaking down barriers between parents and schools in areas where poor school attendance is impacting negatively on outcomes for children
- a mix of individual and group support
- community involvement, for instance community-based provision that involves and trains local parents and incorporates peer support
- a joined-up multi-agency approach
- content that is based on clear evidence of what works in helping families make positive changes
- some whole family provision
- local cascading of training to deliver programmes.

## PART FOUR: OPTIONS FOR DEVELOPMENT

### 11. Bringing together the different opportunities

The next two sections present options for development that will build on the strengths of current parenting programme provision in Medway (described in Paras 7.1 and 7.2), and which also dovetail with the opportunities presented by new initiatives already planned for Medway.

The following table shows planned developments already in the process of implementation or piloting, and the priorities and gaps described in Section 10 that they will address:

Existing planned development	Identified priority need for future development (taken from Section 9) it will meet or partially meet
<p><b>Family Nurse Partnership (FNP):</b> a model of intensive, nurse-led home visiting for vulnerable, first time, young parents. It will be offered to all first time parents under 20 in Medway.</p> <p>A team of five nurses with a background in children's services is currently being recruited to deliver the service in Medway. It is planned that the team will work with 100 families over the next two years and outcomes of the pilot will be closely monitored.</p>	<p><b>Expansion of provision for young parents:</b> The introduction of FNP combined with the Step4ward groups delivered in children's centres will together address this priority need.</p>
<p><b>Senior parenting practitioner:</b> a new two year post in Medway funded by the DCSF as part of its Parenting Experts initiative. Laura Finn has recently taken up post based within the Educational Psychology department and, in addition to co-ordinating and delivering services to 'chaotic' families, will lead on the inception and continuing development of a virtual partnership of parenting practitioners, both operationally and strategically, in Medway.</p>	<p><b>Joining up work by different agencies:</b> This role will be extremely helpful, but will not alone have the capacity to provide operational and strategic leadership for parenting services across the whole of Medway.</p>
<p><b>Triple P:</b> will be piloted over the coming months, with the focus on 'chaotic' families.</p>	<p><b>Reaching, and meeting the needs of, the most vulnerable families:</b> Careful evaluation of the local small-scale pilot will be important before rolling out more widely. Other options for parenting programmes to meet this need are also considered as part of this report.</p>
<p><b>Parenting Early Intervention Programme (PEIP):</b> As part of Think Family, Medway has received two year funding from April 09 to implement parenting programmes for parents of 8 – 13 year olds at risk of poor outcomes. The DCSF has specified five programmes that can be funded as part of the PEIP:</p> <ul style="list-style-type: none"> <li>▪ Incredible Years</li> <li>▪ Triple P</li> </ul>	<p><b>A continuum of parenting programmes that match local needs</b> and <b>Clear and consistent messages about children's needs and parenting:</b> PEIP will enable delivery of a programme that offers a targeted intervention for parents of 8-13 year olds. The programmes</p>

<ul style="list-style-type: none"> <li>▪ Families and Schools Together (FAST)</li> <li>▪ Strengthening Families, Strengthening Communities</li> <li>▪ Strengthening Families 10 -14.</li> </ul>	<p>listed are compared in terms of best match to local need in Para. 12.2.</p> <p>All five programmes provide clear and consistent messages about children's needs and parenting that can be woven into work with parents outside the structured programme.</p>
<p><b>Children's centre roll out:</b> the continuing roll out of children's centres across all local communities in Medway provides an infrastructure for reaching parents within local communities and the delivery of community-based parenting support and programmes.</p>	<p><b>Persistent and proactive inclusion and engagement</b> and <b>A continuum of parenting programmes that match local needs:</b> The full roll-out of children's centres will make a major contribution to addressing these priority needs for parents of under 5s.</p>
<p><b>Solihull Approach:</b> an integrated early intervention model for working with families affected by children's emotional and behavioural difficulties. The approach provides flexible resource packs for practitioners to use in their work as the basis for both group and individual support. The Children and Adolescent Support Team (CAST) provide training in the Solihull Approach, which is being rolled out to all PCT health professionals working in children's services.</p>	<p><b>A continuum of parenting programmes that match local needs</b> and <b>Clear and consistent messages about children's needs and parenting:</b> This training will strengthen health professionals' ability to respond to parents' need for support with emotional and behavioural issues as part of post natal groups. It will also provide common core messages about these issues to ensure consistency between health professionals.</p>
<p><b>Hit the Ground Crawling:</b> a mentoring programme that brings together expectant fathers with new fathers and their babies. The programme is being piloted in Medway in September 09 in partnership with the Fatherhood Institute.</p>	<p><b>Inclusion of fathers:</b> This could play an important role in engaging young fathers at an early stage if it rolled out beyond the pilot.</p> <p>There will be outstanding needs for proactive work to include other fathers.</p>
<p><b>Daisy programmes for parents of children with ASD:</b> these programmes have been developed locally by Disabled Children's Services. The programme for parents of under 6s is already running; two additional Daisy programmes for parents of primary age children and teenagers will be piloted later in the year.</p>	<p><b>Locally-based provision for parents of children with ASD or learning disabilities:</b> Embedding the Daisy programmes in children's centres and extended schools in addition to delivery from Parklands Resource Centre in Gillingham will be important in improving accessibility.</p>

## 12. Options for introduction of other parenting programmes in Medway

### 12.1 Programme options

This section compares different parenting programmes in terms of ‘best fit’ for Medway’s needs and priorities.

As discussed in Para 2.2, the NAPP is currently offering training in specific evidence-based programmes. Medway was allocated 15 - 20 places for practitioners, 8 of which have already been taken up for the Triple P training.

7 - 12 places may therefore still be available during the last phase of the training starting in September 09, although demand for places from local authorities during this final phase is high and availability may be limited. Training in the FAST programme is being offered in addition to the numbers of places allocated to local authorities, but availability will again depend on demand.

Training to enable programme delivery as part of the PEIP could be purchased using PEIP funding if enough training places are not available as part of the NAPP offer.

This training offer and the PEIP funding requirements have guided the selection of different evidence-based programmes for consideration as part of this review. The following 7 programmes are considered:

- the Family Caring Trust courses currently delivered locally by Parentis
- the five programmes which can be funded as part of the local PEIP for work with parents of 8-13 year olds (IY, Triple P, FAST, SFSC and SF10-14)
- the Family Links Nurturing Programme, which offers a universal intervention for parents of all ages, including younger children not included in the PEIP, and is part of the NAPP training offer.

The following table provides a brief overview of each of these programmes:

Programme	Brief overview	Currently in Medway
Family Caring Trust (FCT)	10 session courses for parents at a universal level, with a strong ethos of parent empowerment. Instead of providing prescriptive advice, the courses provide ideas and strategies to help parents find solutions that will work best for their family. The range of courses includes: <ul style="list-style-type: none"> <li>▪ Toddler and tantrum and toolkit (ages 1-5)</li> <li>▪ Growing pains (5-8)</li> <li>▪ All Change (8-13)</li> <li>▪ Whatever! (teens)</li> <li>▪ BRIC (communication and relationships)</li> </ul>	Yes
Incredible Years (IY)	Range of targeted and intensive level courses for parents of children experiencing emotional or behavioural difficulties. Courses are each 14 -20 sessions and aim to increase positive interactions between parents and children through play, praise and encouragement and handling misbehaviour. The range of courses includes: <ul style="list-style-type: none"> <li>▪ Baby and toddler (0-3)</li> <li>▪ Early childhood (3-6)</li> <li>▪ School age (8-11)</li> </ul>	Yes

Triple P	A multi level system of parenting programmes that together encompass universal, preventive and intensive/ specialist work with parents of children of all ages. At higher levels of need, the programme includes both group and individual support.	Pilot about to start
Families and Schools Together (FAST)	Whole family 8 session universal and targeted programme for children of all ages, with a strong ethos of community involvement, which can be run in early years settings, primary and secondary schools. Its primary focus is on: <ul style="list-style-type: none"> <li>▪ reducing family stress and isolation</li> <li>▪ increasing parental involvement in schools</li> <li>▪ building family relationships and resilience</li> <li>▪ enhancing child's social skills at home and school.</li> </ul> <p>On-going parent support groups continue for two years after the programme, facilitated by parent volunteers.</p>	No
Strengthening Families, Strengthening Communities (SFSC)	Culturally sensitive 13 week programme for parents of children aged 3-18 at both universal and targeted levels. Its primary focus is on enhancing parent-child relationships, positive discipline and community involvement.	No
Strengthening Families 10-14 (SF10-14)	Whole family 7 session programme at universal level for children aged 10-14. Its primary focus is on preventing young people's substance misuse by increasing positive parent-child interactions and strengthening the parent-child relationship.	No
Family Links Nurturing Programme (FL)	Universal programme for parents of children of all ages. The programme is built around four elements: <ul style="list-style-type: none"> <li>▪ self-awareness and self-esteem</li> <li>▪ appropriate expectations</li> <li>▪ empathy</li> <li>▪ positive discipline.</li> </ul>	No

## 12.2 Best fit to local needs

The table below matches each of these programmes against specific criteria.




The criteria listed in Para. 10.8 based on the programme elements local stakeholders felt were required in order to meet local needs have been used as the starting point for this matching exercise. Messages from research about what works in parenting support, in particular NICE guidance about effective parenting programmes, have been added to these elements to produce a set of criteria that encompasses evidence-based practice and local needs.

Shading has been used on the tables to indicate the degree of match against each required element and to enable the programme(s) that offer(s) best fit to be easily identified.

This matching exercise shows that:

- the **FAST programme** strongly meets 95 per cent of the criteria and appears to offer the best fit to Medway's needs.
- **Strengthening Families, Strengthening Communities** strongly meets 53 per cent of the criteria and is the 'next best' fit in terms of local needs.
- **Family Caring Trust** and **Family Links**, which are both universal programmes, perform similarly to each other in terms of best fit to local needs, strongly meeting 47 per cent and 42 per cent of the criteria respectively. The other universal programme, **Strengthening Families 10-14**, only meets 37 per cent of the criteria.
- **Incredible Years** and **Triple P**, whilst only strongly meeting 37 per cent of the criteria, both provide interventions at higher levels of need. As other programmes do not meet intensive needs, these programmes could be important as part of a continuum of provision alongside other programmes.

**Key to shading:**

	Strongly meets the criteria
	Partially meets the criteria
	Does not meet the criteria



### Best fit with Medway's needs: matching programmes against criteria

Criteria	FCT (currently delivered by Parentis)	FAST	Family Links	IY	SF 10-14	SFSC	Triple P
Caters for different ages and from birth/ pre-birth	Ages 0-16	Ages 0-15	Ages 2-15	Ages 0-11	Ages 10-14	Ages 3-18	Ages 0-16
Continuum of universal and targeted provision	Universal provision	Universal and targeted – works with all parents within local community	Universal provision	Targeted and intensive	Universal	Universal and targeted	Universal, targeted and intensive
Structured manual-based content	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Curriculum informed by child development theory and relationship-enhancing strategies	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Provides core messages about positive parenting to use in all work with parents	Yes	Yes	Yes	Yes	Yes but geared to 10-14 age group	Yes	Yes
Flexibility to adapt programme to meet local needs and the needs of different parents	Adaptation encouraged within programme fidelity	Adaptation encouraged within programme fidelity	Some	No	Adaptation encouraged within programme fidelity	Adaptation encouraged within programme fidelity	No
Includes and retains the most vulnerable families	Mostly not	80% retention including vulnerable families	Specific data on retention not available	Specific data on retention not available	Specific data on retention not available	Specific data on retention not available	Specific data on retention not available
Accessible to parents with limited literacy	With adaptation	Yes	With adaptation	No	Yes	With adaptation	No
Engagement activities included to reach vulnerable families, including home visits	Not as integral part of programme	Community inclusion and home visits are integral to programme	Not as integral part of programme	Not as integral part of programme	Not as integral part of programme	Not as integral part of programme	Not as integral part of programme

Criteria	FCT (currently delivered by Parentis)	FAST	Family Links	IY	SF 10-14	SFSC	Triple P
Involving parents in schools	No	Yes	No	No	No	No	No
Mix of individual and group support	Group sessions only	Includes 1:1 coaching and group sessions	Group sessions only	Group sessions with weekly phone calls to parents	Group sessions only	Group sessions with phone calls to parents	Yes
Works with whole family, including children	No	Yes	No	No	Yes	No	No
Community involvement model with opportunities for on-going peer support	No on-going support, but opportunity for parents to train as co-leaders	Parents can train as co-leaders. Monthly peer support groups for 2 yrs	No	No	No on-going support, but opportunity for parents to train as co-leaders	No on-going support provided, but focus on role of parents in communities	No
Offers sufficient number of sessions, with optimum of 8 – 12	10 sessions	8 sessions + monthly group for 2yrs	10	14-20	7 + 4 optional booster sessions	13	Standard Triple P is 5 group sessions and 3 individual phone calls
Works in partnership with parents and enables them to identify their own parenting objectives	Yes	Yes	Within objectives and strategies of programme	No	Within objectives and strategies of programme	Yes	Within objectives and strategies of programme
Enables links across services	Yes	Yes	Yes	Possibly, but requirement for qualified professionals	Yes, but focus on 10-14 age group	Yes	Possibly
Based on knowledge and evidence of what works	NAPP rating: 2	NAPP rating: 4	NAPP rating: 2	NAPP rating for 6-12yrs:4	NAPP rating: 4	NAPP rating: 2	NAPP rating for teens: 3
On-going evaluation of delivery against child outcomes using standardised measures	Standardised parent report questionnaires	SDQ*	SDQ* WEMWBS**	SDQ* CBCL***	Information not provided	SDQ* WEMWBS**	Standardised parent report questionnaires
Recognised accreditation or qualification for practitioners	OCN Levels 2 and 3	FAST certification	C&G Level 3 award WWP	IY certification	Accreditation by programme developers	Accreditation by programme developers	Accreditation by programme developers

[\*SDQ = Goodman's Strengths and Difficulties questionnaire; \*\*WEMWBS = Warwick-Edinburgh Mental Well-Being Scale; \*\*\*CBCL = Aschenbach's Child Behaviour Checklist]



### 12.3 Cost effectiveness and sustainability

The differences in terms of what each programme offers makes it impossible to compare 'like with like' when making cost comparisons. Some programmes are parent-only, whilst others are whole-family, which impacts significantly on the delivery costs.

The 2008 Parenting Early Intervention Pathfinder Evaluation<sup>13</sup> included an assessment of the cost-effectiveness of the three programmes (IY, Triple P and SFSC) piloted during the first wave of PEIPs. This assessment found wide variations in the delivery costs of programmes because of:

- programme type and length
- size of group
- drop-out and retention
- staffing arrangements
- support costs (venue, crèche, food etc).

For instance, the actual cost of programme delivery of SPSC courses as part of the PEIP was intermediate to IY and Triple P. The higher average group size (12 parents) of SFSC courses during the PEIP, however, meant that the mean cost per parent completing a SFSC group was the lowest of all three programmes.

IY programmes are longer, resulting in higher programme costs and higher mean cost per parent than the other two programmes.

The costs of the three PEIP Pathfinder programmes 2006-2008 are shown below. These include staff training costs, as well as management, organisation and administration costs. As the costs include the initial set-up costs e.g. staff training and recruitment, they could be expected to reduce in later phases of delivery, once staff and systems are in place.

Name of programme	No. of courses delivered during PEIP	Cost per course	Average group size	Retention rate	Cost per parent completing course
IY	76	32,955	9.5	72%	4,789
Triple P	230	11,651	6.2	70%	2,743
SFSC	119	20,851	12.1	76%	2,261

Although it is important to gain an understanding of the cost-effectiveness of parenting and family interventions, the difficulties of doing so are widely acknowledged in the research literature. This is not least because few programmes are able to adequately measure the long-term impact of the programme on outcomes for children.

However, the London Economics 2007 study, *Cost Benefit Analysis of Interventions with Parents*<sup>14</sup> found that the UK estimates of cost per family for community-based group provision at a preventive stage represented good value for money, ranging from £603 - £899, and concluded that:

*"The extent of the analysis remains limited due to the lack of studies examining the long-term effectiveness of parenting programmes.... However, the long-term benefits of any parenting*

<sup>13</sup> <http://www.dcsf.gov.uk/research/data/uploadfiles/DCSF-RW054.pdf>

<sup>14</sup> <http://www.dcsf.gov.uk/research/data/uploadfiles/DCSF-RW008.pdf>

*programme would only have to be small to make the very small investments in parenting programmes efficient.”*

Given the complexity of assessing cost-effectiveness of programmes, a commentary on the cost, sustainability and value for money implications of the variable costs of delivering the programmes considered in Para.11.2 is therefore provided below. The table provides an overview of the variable issues that have implications for cost, sustainability and value for money, for instance:

- It is possible for local trainers to be trained to deliver Family Caring Trust, FAST, Family Links and Strengthening Families 10-14 programmes. This ability to use local staff to cascade training to more practitioners in the future makes these programmes more sustainable than the other programmes that do not train trainers to enable local cascading.
- Programmes that offer shorter practitioner training may be lower cost, but may not include generic skills to work with parents in groups in addition to programme familiarisation. For instance, training in Family Caring Trust courses offered by Parentis costs above average, but provides a longer training that includes group work skills and offers 5 accredited OCN units – so although more expensive than Triple P training, which only includes programme familiarisation, it is also better value for money.
- Similarly, the whole family programmes, FAST and Strengthening Families 10-14, are more expensive to deliver because of the cost of providing food and materials to larger groups comprising both parents and children so that families can share meals and craft activities together. As children also directly benefit from the intervention, however, and research shows that interventions that work with both parents and children are more effective, it is likely that these programmes provide better value for money than parent-only programmes.

Infrastructure costs such as management and administration, as well as support costs such as creche and transport, are not included here, as these may be assumed to be the same for each programme.

<b>Programme</b>	<b>Practitioner training</b>	<b>Delivery costs</b>
FCT	Higher cost than other programmes but provides value for money because: <ul style="list-style-type: none"> <li>▪ includes group facilitation skills</li> <li>▪ offers OCN Level 3 accreditation</li> <li>▪ can be cascaded locally.</li> </ul>	Lower end delivery costs, but this would be expected for a universal parent-only programme. Costs include: <ul style="list-style-type: none"> <li>▪ parent manual</li> <li>▪ refreshments</li> <li>▪ one room</li> <li>▪ 2 facilitators at QCF level 3</li> </ul>
Family Links	Medium cost training and provides excellent value for money because: <ul style="list-style-type: none"> <li>▪ includes group facilitation skills</li> <li>▪ offers C&amp;G Level 3 qualification</li> <li>▪ can be cascaded locally.</li> </ul>	Medium delivery costs and higher than some other parent-only programmes. Costs include: <ul style="list-style-type: none"> <li>▪ parent manual</li> <li>▪ nurturing gifts</li> <li>▪ refreshments</li> <li>▪ one room</li> <li>▪ 2 facilitators at QCF level 3</li> </ul>
SF 10-14	Lower end training costs, but only programme familiarisation. This provides less value for money as additional training in group facilitation would be needed for practitioners not	Higher end delivery costs, but value for money because it is a whole family programme. Costs include: <ul style="list-style-type: none"> <li>▪ handouts</li> <li>▪ materials for craft activities</li> </ul>

	<p>already experienced in running groups.</p> <p>Training can be cascaded locally which is advantageous in terms of sustainability.</p>	<ul style="list-style-type: none"> <li>▪ food for a meal</li> <li>▪ 2 rooms</li> <li>▪ food preparation facilities</li> <li>▪ 2 facilitators at QCF level 3</li> </ul>
FAST	<p>Lowest training cost of all programmes. Good value for money in that 3 days of the training are hands-on coaching and support during first programme, so practitioners only need to be released for 2 days to do the pre-programme training.</p> <p>Training can be cascaded locally which is advantageous in terms of sustainability.</p>	<p>High end delivery costs, but value for money because it is a whole family programme. Costs include:</p> <ul style="list-style-type: none"> <li>▪ materials for craft activities</li> <li>▪ small gifts for each family</li> <li>▪ food for a meal</li> <li>▪ 3 rooms</li> <li>▪ food preparation facilities</li> <li>▪ 2-3 facilitators in addition to parent volunteers depending on size of group (ideally one at QCF level 6 and one/two at QCF level 3).</li> </ul>
SFSC	<p>High end training cost and not possible to cascade locally so less sustainable.</p>	<p>Medium delivery costs; although a meal is provided, the programme is parent-only so lower food costs than whole family programmes. Costs include:</p> <ul style="list-style-type: none"> <li>▪ parent manual</li> <li>▪ food for a meal</li> <li>▪ one room</li> <li>▪ food preparation facilities</li> <li>▪ 2 facilitators at QCF level 3.</li> </ul>
IY	<p>Medium - high training cost and covers only programme familiarisation. This provides less value for money as additional training in group facilitation would be needed for practitioners not already experienced in running groups.</p> <p>Not possible to cascade locally so less sustainable.</p>	<p>Higher end delivery costs because of length of programme. Costs include:</p> <ul style="list-style-type: none"> <li>▪ parent manual</li> <li>▪ nurturing gifts</li> <li>▪ refreshments</li> <li>▪ one room</li> <li>▪ 2 facilitators (ideally one at QCF level 6 and one at QCF level 3).</li> </ul>
Triple P	<p>Medium - high training cost and covers only programme familiarisation. This provides less value for money as additional training in group facilitation would be needed for practitioners not already experienced in running groups.</p> <p>Not possible to cascade locally so less sustainable.</p>	<p>Medium delivery costs. Costs include:</p> <ul style="list-style-type: none"> <li>▪ parent manual</li> <li>▪ refreshments</li> <li>▪ one room</li> <li>▪ 2 facilitators QCF level 4.</li> </ul>

Detailed information about the programme costs are attached at Appendix 6. A similar shading has been used to the matching table in Para.11.2 to enable identification of lower and higher cost programmes.

## 13. Lessons from other local authorities

As part of the review, local authorities delivering five of the programmes under consideration (and not already delivered in Medway) were contacted to obtain feedback about perceived programme effectiveness, drawbacks and implementation issues. The following authorities were contacted:

- Oxfordshire County Council: Family Links
- Milton Keynes Council: FAST
- Kent County Council: Strengthening Families, Strengthening Communities (SFSC) and Triple P
- Hampshire County Council: Triple P

### 13.1 Family Links (Oxfordshire)

Oxfordshire commissions the Family Links programme alongside in-house provision of Incredible Years.

- **What's worked well:**

- Described as an excellent universal programme, with excellent materials (by Parenting Development Manager).
- Feedback about the practitioner training was also extremely positive; it is felt to be an excellent training that includes generic training in facilitation skills as well as programme familiarisation.
- Provides very useful 'core messages' about positive parenting that can be cascaded into other work with parents; training early years workers and home-school support workers in the Family Links programme has embedded these messages.
- Parents in some of the most deprived areas have responded well to the programme.

- **Drawbacks and issues:**

- The parent manual, although it is simply written and includes lots of visuals, requires parents to have a basic level of literacy.
- It is felt to be a packed programme with a lot of content. When working with parents with higher level of needs, it needs to be slowed down and delivered over a greater number of weeks.

- **Implementation issues**

Parenting support in Oxfordshire is co-ordinated by a Parenting Development Team, managed by the County Parenting Development Manager. This team includes local development workers who provide local co-ordination and organisation and provide supervision for practitioners running parenting groups.

This structure is felt to work well, providing an overview of the whole local offer, co-ordinating in-house provision and commissioning externally provided services to add value to those provided by the statutory sector. Good supervision, which the team also provides, is also felt to be very important for practitioners working with vulnerable groups of parents around emotional issues.

## 13.2 FAST (Milton Keynes)

The Families and Schools Together (FAST) programme, developed in the US, was first piloted in Milton Keynes with Year 7 families at Stantonbury Campus, a secondary school with three thousand pupils. Delivery in an infant school followed. The lead practitioner interviewed was extremely positive about the programme. Despite being sceptical at first, he commented that he had never come across a programme before that “does what it says on the tin”.

The evaluation of the programme run at Stantonbury Campus is attached at Appendix 7. This includes a detailed commentary about benefits, methodology, issues and practical considerations.

- **What’s worked well:**

- The programme targets all the parents within a particular cohort, for instance a year group within a school, with proactive engagement by volunteer parent champions before the programme starts. This has been found to be a highly inclusive approach, engaging parents with a broad range of needs within local communities, including those at universal, targeted and intensive levels of need.
- 11 families participated in the pilot programme, with a retention rate of 85%. Parents and young people described the benefits as:
  - improved communication in the family
  - increased understanding of each other and feeling more confident to talk to each other
  - enjoying doing things together as a family
  - making friends – parents and children
  - increased confidence and self-esteem.
- Local experience has been that the core process of the programme - ‘doing with’ the local community and parents, rather than ‘doing to’ - has proved extremely powerful. It has created a culture in which parents ask for support and show demonstrable increased trust in professionals. This has had a positive impact on other aspects of work with parents, for instance CAF assessments.
- The programme can be adapted to the local community within the fundamental principles and core activities. Team leaders aim to reflect the ethnic mix of the local community and parent co-leaders are part of the local community.
- Activities such as enabling families to prepare and eat meals together seemed daunting at first, but worked extremely well in practice.

- **Drawbacks and issues:**

- Delivery costs (excluding staffing) averaged £2,500 per programme in the pilot. This includes the cost of hospitality during community engagement and the purchase of equipment for games that can be used again in later programmes.
- School ownership is vital for the programme’s success in breaking down barriers between parents and schools and involving parents. Schools have to be ready for a change in culture. In schools where there is no history of parent involvement, buy in may be more difficult to achieve. Starting with schools with a track record of parent involvement to demonstrate the benefits can help to overcome these barriers.

- **Implementation issues**

The FAST programme is co-ordinated by a senior practitioner with the job title of Every Child Matters Social Worker. This post is funded 50 per cent by Social Care and 50 per cent by the 18 schools in the Extended Schools Partnership. It is deemed essential to the success of the programme to have someone with responsibility for driving it forward and providing leadership at local level.

Two Parent Champions have been identified and trained in each of the 18 schools in the Partnership. These Parent Champions undertake engagement activity with all parents within the identified cohort before the programme starts and co-lead the programme as volunteers. In secondary schools Youth Champions are also recruited to engage young people (with their parents) in the programme.

FAST enables schools offering extended services to meet half the criteria on the Self-Assessment Form (SEF) as 'Think Family' and community involvement objectives are now also included, which provides an incentive to schools to get involved with FAST.

### **13.3 Strengthening Families, Strengthening Communities (Kent)**

Kent chose SFSC in Thanet in preference to Triple P because of its community-orientated and flexible approach. It has been offered mostly to parents of children of primary and secondary age, but has also been delivered as part of early years provision.

- **What's worked well:**
  - Parents respond positively to the programme and retention is good.
  - The emphasis on providing parenting support within the context of parents' lives within the community and their family history. Parents share ideas with each other and are introduced to strategies that they are encouraged to try out and adapt for their family.
  - The social aspect of the programme e.g. having breakfast together at the start of each session encourages attendance and helps to develop peer networks of support.
- **Drawbacks and issues:**
  - The parent manual was not felt to be accessible for local parents with limited literacy. The manual is not used in Thanet but has been used as the basis for simpler visual handouts, with the American content transposed for an English audience.

- **Implementation issues**

The programme is led and co-ordinated in Thanet by a Respect Senior Parenting Practitioner, who also supports the sharing of good practice via a practitioners' forum. Having one key person locally is felt to be vital to making the programme work.

Five other practitioners (from YOT team and family liaison officers within schools) took part in the SFSC training and co-deliver with the Senior Practitioner. Two or three programmes a week are delivered at any one time – about 7 programmes a year.

Every parent who is referred to the programme is visited at home before the programme starts.

### **13.4 Triple P (Hampshire CC and Kent CC)**

Hampshire piloted Triple P as part of the first wave of PEIPs. This national Pathfinder pilot was evaluated by Warwick University.

Kent trained practitioners to deliver Triple P in Thanet, but after training decided that it was not sufficiently accessible to the families with greatest needs.

- **What's worked well:**

- Enabled a significant expansion of parenting programme provision in Hampshire; between April 08 and March 09, 90 Triple P programmes were delivered to 540 parents.
- The multi level approach was valuable in enabling interventions at universal, targeted and intensive levels of need.
- Evaluation of the Pathfinder pilot pointed to positive and tangible outcomes for parents and children. Parents reported improvements in their children's behaviour, as well as increased confidence as a parent and understanding of themselves and their children. Data from children themselves and from schools confirmed the positive impact on behaviour.
- Generally a positive response from parents who participated in Hampshire to the style and content of the programme.

- **Drawbacks and issues:**

- Some parents commented that the Australian cultural context of the DVDs and content was unhelpful.
- The cost of training more practitioners after PEIP funding. The Hampshire County Parenting Manager has serious concerns about the sustainability of Triple P for this reason. Although one of his team is now a Triple P trainer, he is not able to access training directly from her and still has to purchase training from Triple P International.
- Kent felt that the Triple P content was too prescriptive and that a programme that could be tailored to local needs would be more accessible to vulnerable families in Thanet.
- The programme is not accessible to families with limited literacy as both group and individual work use a parent manual.

- **Implementation issues**

Hampshire has a County Development Manager who is both the single parenting commissioner for the Children's Trust and the operational manager of the Parenting Development Team. The team includes District Parenting Officers who drive the parenting agenda at district level, supporting the planning and co-ordination of provision and enabling multi-agency information sharing and practice development. This structure works well, providing a clear overview of provision across the county and ensuring that multi-agency working is joined-up, coherent and well-supported.

The majority of parenting programme provision is delivered by statutory agencies, with a relatively small percentage commissioned from the voluntary sector. Hampshire delivers parenting programmes developed in-house, as well as Triple P.

PEIP enabled the training of 266 practitioners in the Triple P programme, providing a framework for joined-up training across providers and agencies. As a result, trained practitioners span a wide range of roles, including health, education and child and family support services. The following roles have the largest numbers of trained practitioners:

- behaviour support workers (29)
- family support workers (72)
- home school link workers (30)
- education welfare and inclusion workers (28).

Training large numbers of practitioners who may deliver parenting programmes as part of a wider role does not, however, make the most effective use of expensive training. Although 266 practitioners were trained, only 90 programmes were delivered in the year April 08 – March 09. As there are two facilitators per programme, this means that at least 86 trained practitioners didn't deliver a programme in the whole year.

## PART FIVE: WORKFORCE IMPLICATIONS

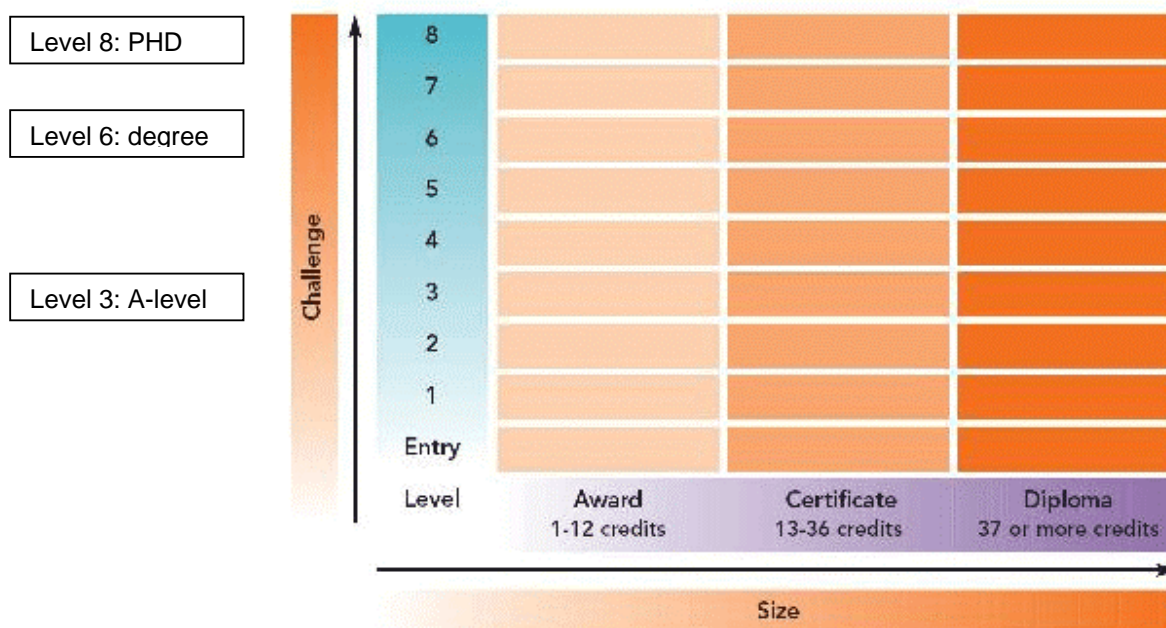
### 14. National qualifications and training developments

#### 14.1 Qualification and Credit Framework (QCF)

The lack of an agreed and consistent national pathway into work with parents means that practitioner training within the sector has tended to be piecemeal and reactive. As much training is non-accredited, many generic practitioners have little to show on paper for their skills and experience. Professionals involved in work with parents may have qualifications related to their professional status, such as child or adult social work, youth justice or health visiting, but these do not always fully equip them to provide interventions and support to parents.

This has resulted in a multitude of training programmes and accreditation that is hard for practitioners and managers alike to make sense of – for instance what level they are, what content they cover and how long they take to complete.

The QCF has been introduced to recognise skills and qualifications and provide a framework within which qualifications across all sectors can be easily understood and measured. It includes 8 levels (depending on how challenging the content is) and units of credit that reflect the length of training:



The boxes on the left show the equivalent level of difficulty of some of the QCF levels to give an indication of the kind of qualification each level represents.

National workforce development strategy aims for QCF Level 3 as the minimum qualification for generic parenting practitioners and Level 2 for practitioners working with direct supervision.

## 14.2 National Occupational Standards for Work with Parents (NOS)

The National Occupational Standards for Work with Parents (NOS) developed by Lifelong Learning UK (LLUK) provide a detailed overview of the knowledge, understanding and skills required to work with parents. (More information at <http://www.lluk.org/national-occupational-standards.htm>.)

The NOS provide a clear benchmark against which existing practitioner competence can be assessed and training needs identified.

## 14.3 Nationally developed training and qualifications

Key organisations involved in the development of training and qualifications for work with parents include:

Organisation	Focus of training development	More information
City and Guilds (C&G)	<ul style="list-style-type: none"> <li>▪ Level 2 Award in Work with Parents (12 credits)</li> <li>▪ Level 3 Award in Work with Parents (12 credits)</li> <li>▪ Level 3 Certificate in Work with Parents (30 credits)</li> <li>▪ Level 4 Award in Work with Parents (6 credits)</li> </ul>	<a href="http://www.city-and-guilds.com">www.city-and-guilds.com</a>
National Academy of Parenting Practitioners (NAPP)	Training for practitioners in core skills for work with parents and evidence-based parenting programmes. NAPP has developed training materials for 4 units covering core skills for working with parents that LAs can use to deliver the C&G Level 3 Award.	<a href="http://www.parentingacademy.org">www.parentingacademy.org</a>
Training Development Agency for Schools (TDA)	Training for Parent Support Advisers and others in similar roles	<a href="http://www.tda.gov.uk">www.tda.gov.uk</a>
Children's Workforce Development Council (CWDC)	Training and qualifications for the Early Years Foundation Stage, including Early Years Professional Status	<a href="http://www.cwdcouncil.org.uk/early-years">http://www.cwdcouncil.org.uk/early-years</a>
National Children's Bureau (NCB)	Parents, Early Years and Learning (PEAL) training and framework for working in partnership with parents in the early years	<a href="http://www.ncb.org.uk">www.ncb.org.uk</a>

## 15. The local workforce

In the same way that parenting programmes defy neat definitions, it can be equally challenging to pin down the practitioners involved in delivering the work.

The development of work with parents over the last few years has led to the emergence of new roles. Locally these have included community liaison officers (CLOs), home-school support workers and parenting practitioners, working alongside well-established roles such as health visitors. There has also been an increase in peer-based support; Parentis trains parents who have participated in programmes to deliver them to other parents.

To add to the complexity of the picture, many within the children's workforce now have working in partnership with parents as part of their role, although their primary expertise lies in work with children.

### 15.1 Local practitioners with a relevant role

The following table provides an overview of some of the key practitioner roles in Medway that are, or could be, involved in delivering generic parenting programmes.

Practitioners involved in specialist programmes such as those run by Disabled Children's Services, CAMHS and NSPCC have not been included.

Agency/ team	Roles most relevant to delivery of parenting programmes	Comments on practitioner availability
Children's centres	Community Liaison Officers (CLOs)	Between one and three CLOs in each centre. Currently 14 centres, with 7 more due to be operational by January 2010.
Home-School Support Workers		23 in post, will rise to 42 by Sep 09. Capacity to deliver if to parents at their school.
Parentis	Facilitators	6 workers employed by Parentis
Adult and Community Learning	Family learning tutors	4 tutors currently deliver parenting courses
Midwifery services	Maternity care assistants	With training and support maternity care assts could deliver post natal groups
Children's services (health)	Health visitors Community health nurses Nursery nurses	? Capacity limits availability
Child and Adolescent Support Team (CAST)	Parenting practitioners	Would like to be involved in delivery if sufficient capacity
Family and School Support Team (FASST)	Educational welfare officers Family workers	Would like to be involved in delivery if sufficient capacity
YOT	Parenting co-ordinator Senior practitioner YISP co-ordinator and worker Health project worker	5 staff currently involved in programme delivery

Educational Psychology	Senior Parenting Practitioner	New post with dedicated focus on delivery and co-ordination of support to 'chaotic' families
Rochester Young Offenders Institution	Children's and families officers	2 officers are currently training with Parentis to deliver to young fathers in YOI

## 15.2 Trained local practitioners

The following table provides a breakdown of the practitioners in Medway who have already received training to deliver parenting programmes and who are currently available or actively involved in delivering groups. A further 22 parents and practitioners have completed Parentis training, but are not available to deliver so have not been included.

Programme	No. practitioners trained	Agency
Family Caring Trust (Parentis)	17	Medway Council (9) Employed by Parentis (6) Rochester YOI (2)
Incredible Years	5	YOT
ESCAPE (TSA)	5	YOT
Triple P	8	YOT Educational Psychology
Speakeasy	15	Children's centres School nursing Connexions
Solihull Approach	Will be delivered to all health professionals working in Children's Services	Children's Services (Health) – 70 staff
Hit the Ground Crawling (Fatherhood Institute)	5 will train in Sep 09	Children's Centres

## 16. Developing the local workforce

### 16.1 Issues to be addressed

Having a range of practitioners across agencies who are trained to deliver parenting programmes has many benefits in terms of embedding skills and programme delivery within parent support services across the council and across agencies. It also brings needs and issues which will need to be addressed as part of workforce development strategy, in particular:

- identifying the number of practitioners required to deliver parenting programmes in Medway and the practitioner capacity within each agency

- identifying training needs in terms of generic skills to work with parents in groups, in addition to programme-specific training
- making best use of the investment in training by maximising the opportunities for trained practitioners to deliver programmes
- keeping track of 'active workforce capacity' within Medway to enable informed decisions about future training need
- sustainability issues in terms of future practitioner training and programme delivery after PEIP funding has ended
- mapping locally developed training to National Occupational Standards (NOS)
- promoting common standards and training across agencies
- providing high-quality supervision for practitioners, as well as continuous professional development and sharing of good practice via multi-agency practice development groups at local level.

## **16.2 How many practitioners?**

Currently about 1,000 parents a year participate in some form of parenting group or programme (excluding ante natal and post natal groups).

When agencies and teams were asked during the review how many parents a year they would refer if a range of parenting programmes were available, including ones that were able to meet the needs of parents with greatest needs, they estimated 1,500. It can be assumed that there is some double counting within this figure as some agencies may be working with the same parents.

Providing parenting programme places for 1,200 parents a year therefore seems to be a reasonable working number, given that there are parents who need support who are not currently accessing programmes.

Estimating an average of 10 participants per programme, this means 120 programmes a year would be delivered. Assuming practitioners could, on average, deliver one programme a week, each practitioner could reasonably be expected to deliver four programmes a year.

As two facilitators are required for most programmes, this gives 60 as a 'working estimate' of the number of practitioners required to deliver parenting programmes as part of their role. There are currently approximately 30-40 practitioners in Medway who are trained and available to deliver some form of parenting programme.

## **16.3 Putting together a virtual team of practitioners to deliver programmes**

The need for locally-based parenting support has been highlighted as part of this review. Identifying practitioners within each of the three Integrated Team areas to form local 'virtual' teams will enable joined-up planning and co-ordination of local parenting programmes to meet local needs, as well as support sharing of information and good practice at local level.

## 16.4 Identifying training needs

In considering the training needs of this diverse workforce, it is helpful to identify both the tasks involved and the skills and knowledge that are needed by all practitioners to successfully implement parenting programmes.

The NOS provide a much more detailed overview of required competency. The following boxes are helpful, however, in providing a brief description of the most important tasks, skills and knowledge practitioners need to successfully implement high-quality parenting programmes to inform an analysis of training needs.

### Tasks involved in implementing parenting programmes

- Getting to know the local community, what the needs are and where vulnerable families are.
- Outreach to engage the most socially excluded families within the local community, including fathers, those from different cultural backgrounds and parents with additional support needs.
- Consultation, both formal and informal, to involve local parents in the design and implementation of services.
- Building authentic and supportive relationships with parents that value the parent's role and recognise their strengths.
- Understanding the wider family environment and other pressures in a parent's life.
- Creating safe learning opportunities in which vulnerable parents can reflect, learn and share experiences with one another.
- Enabling experiential learning through facilitation of reflection and discussion and structured sessions that include a range of learning styles.
- Developing parents' self-awareness and understanding of the impact of their behaviour on their children.
- Developing parents' understanding of their children's needs and how they can meet them.
- Fostering and maintaining parents' confidence in their parenting role.
- Promoting the parent-child relationship and communication in the family.
- Promoting parent involvement in their children's play and learning.
- Helping parents to acquire the knowledge, confidence and skills to build close and affirming relationships with their children.
- Helping parents to acquire the knowledge, confidence and skills to provide boundaries using positive reinforcement and an authoritative rather than authoritarian approach.
- Tailoring support to the needs of individual families and to cultural and gender needs.

- Making informed decisions about risk and when specialist services are required.
- Working as part of multi-agency service provision.
- Monitoring take-up and evaluating the impact of parenting programmes on outcomes for children.

### **Skills and knowledge needed to implement parenting programmes**

Effective practitioners are able to:

- understand key child development theories and their relevance to positive parenting styles and strategies
- understand the influences on parents and the impact of their wider environment
- undertake creative outreach activities to reach and engage families most in need of support
- listen and build supportive relationships with parents within an ethos of partnership
- understand why parents and the parent-child relationship are so important
- engage and work with a wide range of parents, including fathers, parents with different cultural backgrounds and parents with additional support needs
- identify parents' strengths and needs, and make informed and responsive decisions about how to tailor programmes to the needs of individual families
- facilitate experiential learning in groups, managing the emotions and group dynamics this may generate
- communicate clear messages to parents that will help them meet their children's needs and in ways that include parents with different learning styles and needs
- help families develop problem-solving skills and find their own solutions to the challenges they are facing
- identify difficulties early and know when and how to involve other specialist services
- reflect on their practice
- recognise the potential contributions of partner agencies and work effectively in multi-agency teams.

## 16.4 Next steps

The development of a detailed training strategy will follow the Parenting and Family Support Partnership Board's decisions about parenting programme development as a result of this review and as part of PEIP implementation in Medway.

The aims of this training strategy for parenting programmes need to include the development of:

- multi-agency teams with the capacity and expertise to deliver a continuum of locally-based parenting programmes for parents of children of all ages and at different levels of need
- a common core of generic knowledge, values and skills across agencies, in addition to programme-specific expertise
- high quality supervision and support to ensure and share good practice.

The following provides an outline plan for the next steps in developing a workforce able to implement the recommendations of this review.

Timescale	Action	Comments
June 09	Request the following training places as part of NAPP Phase 4 offer (Sep – Dec 09): <ul style="list-style-type: none"> <li>▪ Up to 12 places on IY 0-6</li> <li>▪ FAST training of 20 places</li> </ul>	The Phase 4 offer is currently over-subscribed so these places should be requested as soon as possible to maximise the chances of allocation. If there is no availability as part of the NAPP offer: <ul style="list-style-type: none"> <li>▪ FAST training as part of PEIP should be negotiated with NAPP</li> <li>▪ Alternative funding will be required to train practitioners working with parents in early years in IY</li> <li>▪ PEIP funding could additionally be used to train practitioners working with parents of children aged 8-13 in IY.</li> </ul>
June-Aug 09	Identify local multi-agency teams of practitioners who have the capacity and relevant experience to deliver parenting groups as part of their role	The following agencies or practitioners could potentially be part of local multi-agency practitioner teams to deliver parenting programmes: Parentis Family learning tutors YOT Disabled Children's Team CLOs in each children's centre Home-School support workers CAST workers FASST workers Maternity Care Assistants YOI family support team.
June – Aug 09	Undertake training needs analysis of identified practitioners to establish the number who require training in group facilitation skills in addition to programme-specific training.	NOS and the skills and tasks outlined in Para 3 will be helpful in carrying out this training needs analysis.

June – Aug 09	Identify PEIP funding for backfill costs to enable practitioners from teams with limited capacity to participate in training.	
June – Aug 09	Decide and implement infrastructure to develop and co-ordinate parenting programme delivery across Medway.	The need for a dedicated manager and team to provide strategic and operational leadership within the Children’s Trust for parenting was highlighted by this review. Other LAs have found this to be essential in providing effective and joined-up provision. The new Senior Parenting Practitioner has some responsibility for this within her role, and could contribute to this infrastructure.
Sep – Dec 09	Training of first wave of practitioners in FAST programme (20) and IY (12)	Suggest first wave of FAST practitioners are from Chatham and Rochester as Senior Parenting Practitioner has developed links with local schools who are keen to participate.
Sep – Dec 09	Identify trainer resources within Medway who are able to: <ul style="list-style-type: none"> <li>▪ provide generic training for running group programmes</li> <li>▪ train as FAST trainers to roll out the training locally.</li> </ul>	The following agencies or practitioners could potentially be part of local multi-agency trainer team to train local practitioners: Parentis Adult and Community Learning CAST FASST Senior Parenting Practitioners Teenage Pregnancy Team (Speakeasy)
Sep – Dec 09	Decide and implement QA, supervision and support arrangements for practitioners delivering parenting programmes	
Jan – Mar 10	Deliver generic group facilitation skills training to practitioners for whom this has been identified as a training need.	
Apr – July 10	Training of second wave of practitioners in FAST programme (20)	Training can be purchased from FAST using PEIP funding.
Sep – Dec 10	Training of third wave of practitioners in FAST programme (20)	
Sep – Dec 10	Up to 4 local trainers to train to deliver FAST programme to practitioners	Using PEIP funding to train local trainers to cascade FAST locally will be important for long-term sustainability.
Jan – Mar 10	Deliver generic group facilitation skills training to practitioners for whom this has been identified as a training need.	

## **Appendix 1: Practitioners and managers consulted as part of the review**

### **Individual interviews (29)**

Steve Allen (Parentis)  
Liz Bailey (Children's Services)  
Balbinder Biring (Fostering)  
Rachael Burton (Educational Psychology)  
Helen Campbell-Wroe (Rochester Young Offenders Institution)  
Hanife Dacosta (Adult and Community Learning)  
Sue Dunkin (NSPCC)  
Lynn Edwards (Inclusion team)  
Laura Finn (Educational Psychology)  
Barbara Gunning (Homestart)  
Hugh Hawkins (YOT)  
Richard Hill (Learning Disability team)  
Colleen Howard (Place2Be)  
Wendy Irons (Adult Physical Disability team)  
Nigel Leonard (Children's Disability team)  
Michelle Lofting and Jan Davies (Research and Information)  
Sally Lunnon (Early Years)  
Anne Lynch (FASST)  
Karen McIntyre (Midwifery)  
Azhar Mahmood (Medway Racial Equality Council)  
Angela Martin (Police)  
Hildan Nunn (CAMHS)  
Sarah Powley (Early Years)  
Anne Price (CAST)  
Karen Reardon (Chatham and Rochester Integrated Team)  
Jinny Robinson (Teenage Pregnancy team)  
Carolyn Theedom (All Saints Children's Centre)  
Sarah Thornby (Drug and Alcohol Action Team)  
Jenny Wilkins (Parentis)

### **Email response (2)**

Stephanie Crow and Sam Goodchild (Extended Schools) provided an email response.

### **Attended consultation workshop (18)**

Angela Alfield (Home-School Support)  
Steve Allen (Parentis)  
Kay Bradshaw (FASST)  
Liz Caldwell (Greenvale Infant School)  
Helen Campbell-Wroe (Rochester Young Offenders Institution)  
Pauline Cradock (Early Years)  
Hanife Dacosta (Adult and Community Learning)  
Hugh Hawkins (YOT)  
Sue Hockley (Homestart)  
Colleen Howard (Place2Be)  
Alan Lambird (Children's Social Care)  
Sally Lunnon (EYDCP)  
Sarah Powley (Early Years)  
Dot Smith (Midwifery)  
Amanda Steer (FASST)  
Carolyn Theedom (All Saints Children's Centre)  
Jenny Wilkins (Parentis)  
Vanessa Wilson (Housing Solutions)



## Appendix 2: Snapshot of current provision of parenting programmes in Medway

N.B. This overview is not exhaustive, but aims to capture the key parenting programmes currently available and the range of provision. It does not include services other than parenting programmes provided by the agencies listed.

Programme/ service	Tier	Age group	Location	Target group	Service offer for parents	Programme delivery/ practitioner training
Work with parents as part of Children's Centre core service offer	Mostly 1 and 2, sometimes 3	0-5	14 centres across Medway	All parents of under 5s within catchment area of each centre, with additional targeted early intervention	Formal and informal groups to: <ul style="list-style-type: none"> <li>• build parents' confidence, skills and knowledge to engage in their children's early learning</li> <li>• provide support for parenting and the parent-child relationship</li> <li>• respond to the needs of specific groups e.g. fathers, young parents, adopters, new parents.</li> </ul>	<ul style="list-style-type: none"> <li>• Practitioners trained in PEAL approach to partnership work with parents.</li> <li>• Parentis groups, mostly Baby Massage, Toddler Tantrums and Growing Pains.</li> <li>• Freedom programmes (domestic violence)</li> <li>• Topaz (7 wk semi-structured course to raise self-esteem for women with mild mental health issues)</li> <li>• Baby Matterz has been piloted with young parents.</li> <li>• Hit the Ground Crawling will be piloted with young fathers from Sep 09.</li> </ul>
Adult and Community Learning	1 and 2	2-16	Across Medway	All parents	<ul style="list-style-type: none"> <li>• Wide range of family learning courses - from first aid and healthy living to sharing cultures.</li> <li>• Parenting courses e.g. <i>Confident Parent</i> and <i>Understanding your Teenager</i></li> <li>• Playbox – mobile parent and child play sessions currently running in Parkwood, Woodlands</li> </ul>	<ul style="list-style-type: none"> <li>• Courses developed in-house by tutors who hold a teaching qualification.</li> </ul>

and Gillingham						
Programme/ service	Tier	Age group	Location	Target group	Service offer for parents	Programme delivery/ practitioner training
Parentis	1 and 2	0-19	Across Medway	All parents	Range of groups, including baby, toddler, primary and teens.	<ul style="list-style-type: none"> <li>Family Caring Trust</li> <li>Baby Massage</li> </ul>
Children's Services (Health)	Mostly 1 and 2, with some 3	0-16	Across Medway	All parents, with particular focus on early years	<ul style="list-style-type: none"> <li>Post natal groups delivered by Health Visiting teams over 5-6 weeks covering varied topics such as weaning, minor ailments, infant resuscitation and other practical parenting issues.</li> <li>Breastfeeding groups based on UNICEF guidelines</li> <li>Baby massage</li> <li>Some Parentis courses</li> </ul>	<ul style="list-style-type: none"> <li>Solihull training being rolled out for all health professionals working in children's services</li> <li>No structured programme content used for post natal groups</li> <li>A small number of HVs (approx. 3) have trained to deliver Parentis courses</li> <li>Approx 10 staff have trained with Parentis to deliver baby massage.</li> <li>All HVs are trained to deliver breastfeeding advice and support within UNICEF guidelines</li> <li>One HV is Health Project Manager within YOT and has undertaken Triple P training</li> <li>Family Nurse Partnership (FNP) will be introduced from July 09</li> </ul>
Community Midwifery	1 and 2	Before and after birth	Across Medway	All expectant parents	<p>Ante-natal Parent Education groups running over 4-6 weeks delivered by community midwives. These focus on:</p> <ul style="list-style-type: none"> <li>preparation for labour</li> <li>physical care of newborn baby</li> <li>breastfeeding</li> </ul>	No specific programme used – each midwife prepares own content. No training for midwives in delivering group programmes.

Programme/ service	Tier	Age group	Location	Target group	Service offer for parents	Programme delivery/ practitioner training
Youth Offending Team	Mostly 3 Some 2	8-17	Chatham	Parents of children showing signs of anti-social behaviour	Parenting programmes.  • lifestyle and healthy eating.	<ul style="list-style-type: none"> <li>• Incredible Years</li> <li>• Escape (TSA programme)</li> <li>• About to start delivering Triple P instead of Escape</li> </ul>
Educational Psychology	2 and 3	Pre-school and primary	Just starting but will run programmes from children's centres across Medway	'Chaotic' families	Senior Parenting Practitioner appointed to co-ordinate and deliver intensive support to identified families	Trained in Triple P, but also keen to consider other programmes that may be more accessible to the families who are the target of this service.
NSPCC	2	0-19	Gillingham	Parents of children who have been sexually abused	Group programme runs once a year	In-house development of programme following format of Strong Mothers guide
Teenage Pregnancy Partnership	1 and 2	0-16	Across Medway	Dual target group: <ul style="list-style-type: none"> <li>• Young parents</li> <li>• Preventive role in supporting parents to talk about sex and</li> </ul>	<ul style="list-style-type: none"> <li>• Speakeasy – to support parents to talk to children about sex and relationships</li> <li>• Step4ward young parents' support groups in which parenting support is integrated with fun activities, educational</li> </ul>	<ul style="list-style-type: none"> <li>• Speakeasy is OCN accredited programme developed by Family Planning Association</li> <li>• Step4ward groups are developed in consultation with young parents to respond to their needs</li> </ul>

rel'ships opportunities etc.

Programme/ service	Tier	Age group	Location	Target group	Service offer for parents	Programme delivery/ practitioner training
Disabled Children's Service	2 and 3	0-19	Gillingham with a small amount of provision in other locations	Parents of children with ASD, Asbergers, learning, physical or sensory disability	<ul style="list-style-type: none"> <li>• Behavioural management programmes especially for parents of children with ASD or Asbergers.</li> <li>• Host self-run peer support groups e.g. Down's Syndrome support group.</li> </ul>	<ul style="list-style-type: none"> <li>• Behavioural Exchange (4 week behaviour management course developed in-house)</li> <li>• Magic ( condensed version of above)</li> <li>• Piloted Early Bird programme for parents of under 5s developed by National Autistic Society but no longer running</li> <li>• Recently developed in-house Daisy programme (in conjunction with Sanderson Centre) for parents of under 6s (covers what autism is and how to manage it)</li> <li>• In process of developing Daisy Plus (for primary age) and Daisy Teens – will be running by the end of 2009</li> </ul>
CAMHS	3	0-18	Gillingham based	Parents of children that meet criteria for specialist Tier 3 mental health service – main focus is anorexia, attempted suicide and psychosis	<ul style="list-style-type: none"> <li>• Support groups for parents of children with ADHD</li> <li>• Group for parents with mental health problems (run jointly with adult services)</li> <li>• Systemic group family therapy for families with a child with eating disorders</li> <li>• Group for parents of teenagers who have attempted suicide, running alongside group for</li> </ul>	<ul style="list-style-type: none"> <li>• Material developed by local family therapists and practitioners in response to need and evaluated during pilot</li> <li>• Group for parents of children with OCD is currently in development</li> </ul>

teenagers

Programme/ service	Tier	Age group	Location	Target group	Service offer for parents	Programme delivery/ practitioner training
Rochester Young Offenders Institution	2	0-5	Within Rochester YOI	Young fathers and expectant fathers in custody	<ul style="list-style-type: none"> <li>• Toddler courses</li> <li>• Midwife sessions for expectant fathers</li> <li>• Monthly whole family messy play sessions</li> </ul>	<ul style="list-style-type: none"> <li>• Parentis provide toddler courses</li> <li>• All Saints Children's Centre run monthly whole family play sessions</li> </ul>
Drug and Alcohol Action Team	2	10-14	Not known	Targeted work with parents to reduce substance misuse by young people	'Drug Proof your Kids'	DAAT commission course from external provider
Services for adults with learning disabilities (Shared Lives team)	3	0-16	No specific services	Parents with learning disabilities	Assessment programmes for parents and their babies – only 20 – 30% keep their babies after assessment	<ul style="list-style-type: none"> <li>• External organisations used – Symbols at Snodland and Sunlight Centre at Gillingham</li> <li>• Full-time social worker will be appointed by Medway Council to work with young pregnant women with learning disabilities</li> </ul>
Fostering service	4	0-16		Foster parents	Fostering preparation course including attachment, resilience, behaviour management etc	Developed and delivered internally



## Appendix 3

### Families in Medway: demographic information reflecting levels of need

This appendix provides a brief overview of some of the demographic information that is relevant to the planning, development and delivery of parenting programmes. A much fuller picture can be obtained from the **Medway Overall Report 2008 produced by the Research and Information Team.**

#### Index of Multiple Deprivation (IMD)

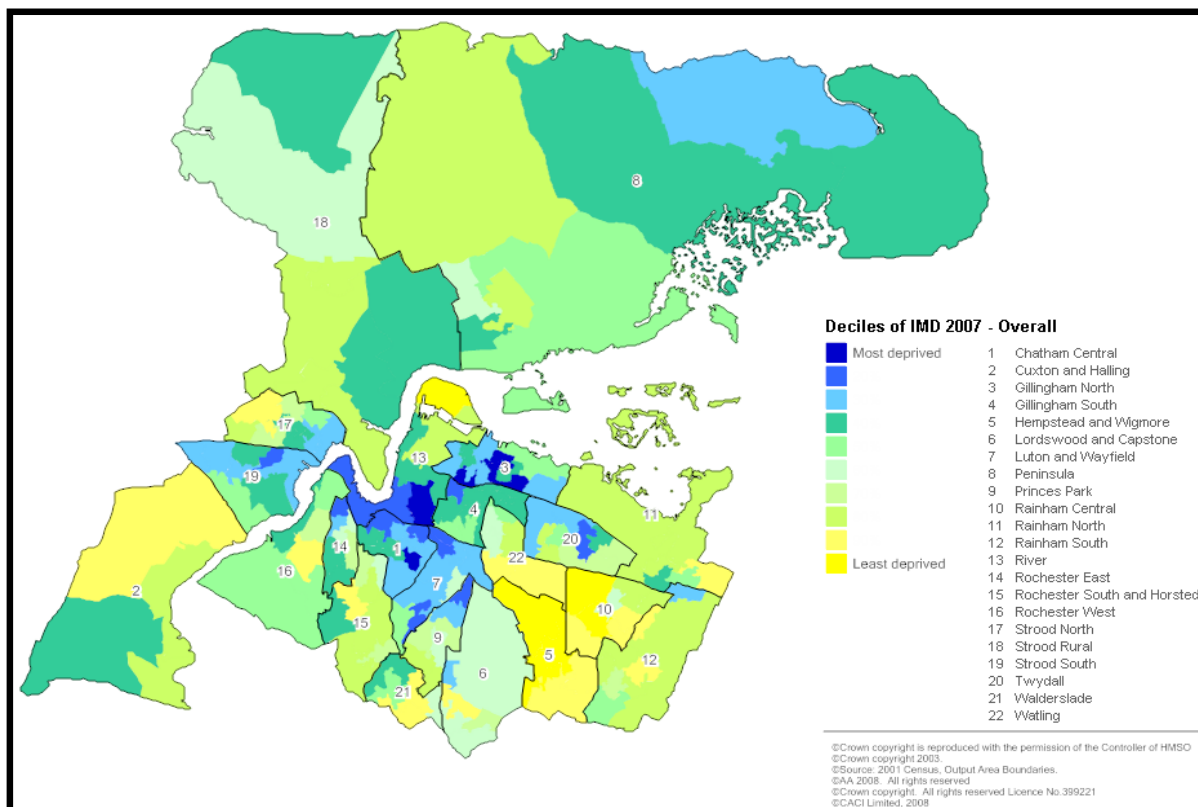
In 2007 the Department for Communities and Local Government released revised indices of multiple deprivation (IMD 2007). This is an index of deprivation at a small area level, based on distinct measures of deprivation experienced by people living within a particular area.

To work out the overall IMD score there are seven areas as listed below that are used which are weighted and combined to create the overall score.

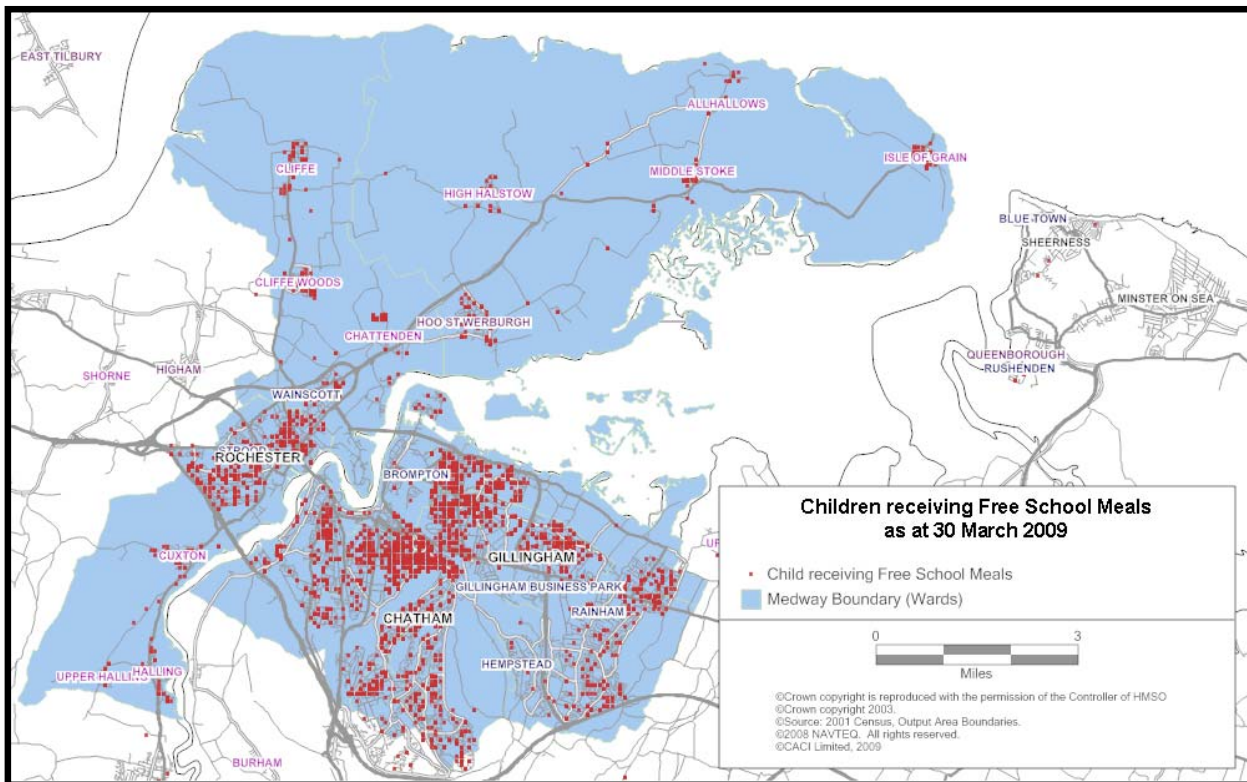
- Income
- Employment
- Health and disability
- Education skills and training
- Barriers to housing and services
- Living environment
- Crime

A high IMD score indicates an area of high deprivation and a low indicates low deprivation.

The map below shows the overall 2007 IMD at super output level. For ease of comparison at a local level we have categorised Medway's IMD scores into ten even-sized bands. (Source: DCLG, 2007)

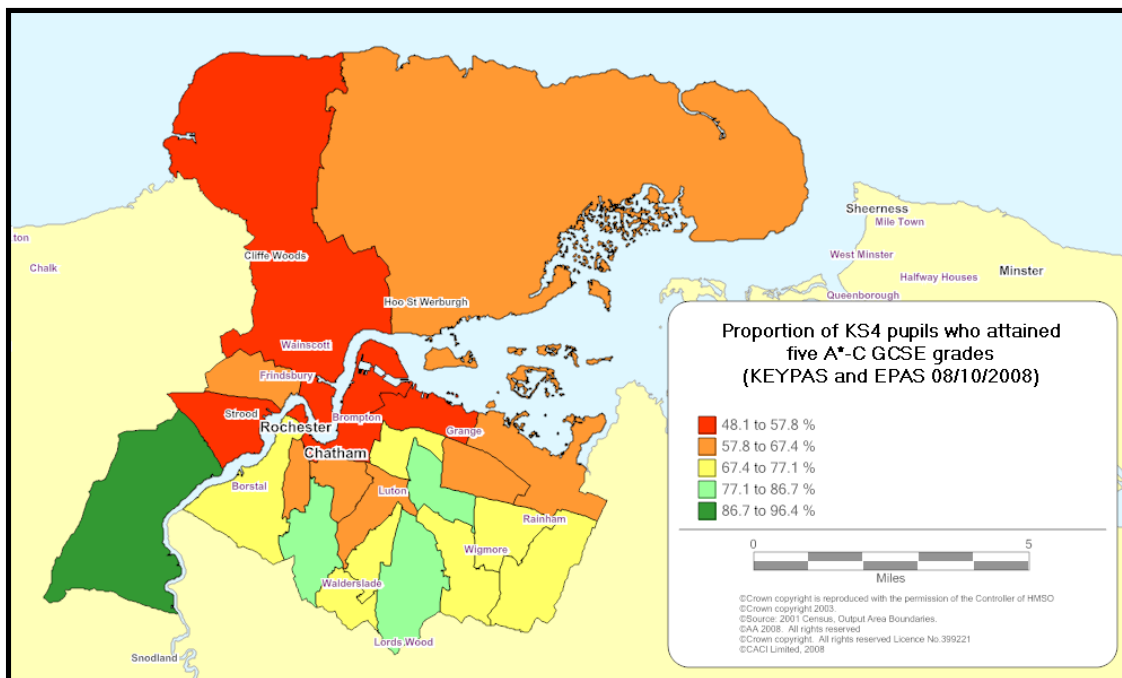


## Free School Meals



## Educational achievement

The proportion of pupils who attained five A\* - C GCSE grades by electoral ward.  
 (Source: Management Information Team)



**Education, skills and training of local population by Super Output Area (SOA) – showing only those SOAs in Medway that fall with the most deprived 20% in England**

*N.B. 32,482 SOAs in England and 164 in Medway*

**Source: Office of the Deputy Prime Minister, Indices of Deprivation 2004**

KEY to table	
	In most deprived 5% in England
	In most deprived 10% in England
	In most deprived 20% in England

SOA	EDUCATION SKILLS AND TRAINING SCORE	NATIONAL RANK OF EDUCATION SKILLS AND TRAINING SCORE	Medway rank of IMD		Ward
E01016023	76.78	525	1	1.62%	Chatham Central
E01016032	69.27	961	2	2.96%	Gillingham North
E01016033	61.13	1690	3	5.20%	Gillingham North
E01016171	58.64	1929	4	5.94%	Walderslade
E01016150	55.22	2378	5	7.32%	Strood South
E01016084	55.14	2390	6	7.36%	Princes Park
E01016083	55.03	2410	7	7.42%	Princes Park
E01016068	54.75	2441	8	7.51%	Luton and Wayfield
E01016160	54.72	2443	9	7.52%	Twydall
E01016153	53.28	2649	10	8.16%	Strood South
E01016159	50.03	3164	11	9.74%	Twydall
E01016156	48.02	3510	12	10.81%	Strood South
E01016161	47.62	3590	13	11.05%	Twydall
E01016155	45.86	3927	14	12.09%	Strood South
E01016071	44.63	4150	15	12.78%	Peninsula
E01016031	42.55	4572	16	14.08%	Gillingham North
E01016063	42.36	4622	17	14.23%	Luton and Wayfield
E01016158	41.99	4709	18	14.50%	Strood South
E01016157	41.43	4841	19	14.90%	Strood South
E01016111	41.12	4923	20	15.16%	River
E01016049	40.07	5130	21	15.79%	Gillingham South
E01016024	39.57	5272	22	16.23%	Chatham Central
E01016036	38.78	5441	23	16.75%	Gillingham North
E01016164	38.69	5459	24	16.81%	Twydall
E01016038	38.38	5546	25	17.07%	Gillingham North
E01016149	38.09	5617	26	17.29%	Strood Rural
E01016154	37.75	5707	27	17.57%	Strood South
E01016069	37.60	5742	28	17.68%	Luton and Wayfield
E01016018	37.49	5774	29	17.78%	Chatham Central
E01016074	37.42	5790	30	17.83%	Peninsula
E01016040	37.25	5843	31	17.99%	Gillingham South
E01016120	36.97	5925	32	18.24%	Rochester Sth & Horsted
E01016077	36.00	6230	33	19.18%	Peninsula
E01016059	35.46	6382	34	19.65%	Lordswood & Capstone
E01016066	35.32	6415	35	19.75%	Luton and Wayfield

**Crime and disorder by Super Output Area (SOA) – showing only those SOAs in Medway that fall with the most deprived 20% in England**

*N.B. 32,482 SOAs in England and 164 in Medway*

**Source: Office of the Deputy Prime Minister, Indices of Deprivation 2004**

KEY to all tables	
	In most deprived 5% in England
	In most deprived 10% in England
	In most deprived 20% in England

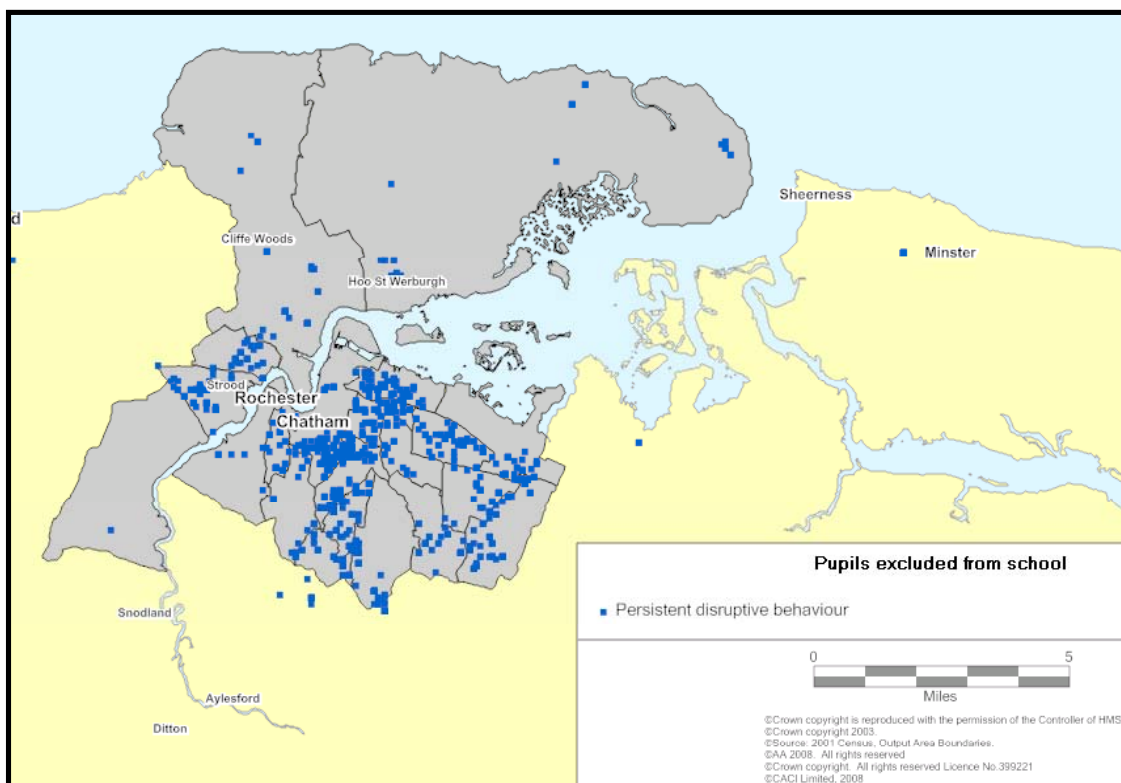
SOA	CRIME AND DISORDER SCORE	NATIONAL RANK OF CRIME AND DISORDER SCORE (where 1 is most deprived)	Medway rank of IMD		Ward
E01016017	1.53	1088	1	3.35%	Chatham Central
E01016031	1.24	2299	2	7.08%	Gillingham North
E01016039	1.04	3577	3	11.01%	Gillingham North
E01016041	1.03	3676	4	11.32%	Gillingham South
E01016049	1.02	3753	5	11.55%	Gillingham South
E01016110	0.97	4101	6	12.63%	River
E01016019	0.95	4316	7	13.29%	Chatham Central
E01016058	0.95	4373	8	13.46%	Lordswood and Capstone
E01016111	0.92	4603	9	14.17%	River
E01016066	0.85	5306	10	16.34%	Luton and Wayfield
E01016159	0.84	5386	11	16.58%	Twydall
E01016038	0.84	5428	12	16.71%	Gillingham North
E01016032	0.80	5820	13	17.92%	Gillingham North
E01016045	0.80	5824	14	17.93%	Gillingham South
E01016063	0.74	6462	15	19.89%	Luton and Wayfield

## School exclusions

During the academic year of 2007/08 there were a total of 3,483 fixed term exclusions in Medway:

Exclusion Type:	Base	Female		Male	
		Count	%	Count	%
Bullying	47	5	10.64	42	89.36
Drug and alcohol related	80	46	57.50	34	42.50
Persistent disruptive behaviour	1376	345	25.07	1031	74.93
Damage	53	5	9.43	48	90.57
Other	226	15	6.64	211	93.36
Physical assault against adult	229	32	13.97	197	86.03
Physical assault against pupil	623	141	22.63	482	77.37
Racist Abuse	46	6	13.04	40	86.96
Sexual misconduct	35	2	5.71	33	94.29
Theft	42	4	9.52	38	90.48
Verbal abuse / Threatening behaviour against adult	609	163	26.77	446	73.23
Verbal abuse / Threatening behaviour against pupil	117	40	34.19	77	65.81
<b>Total exclusions:</b>	<b>3483</b>				

The following map locates pupils excluded from school because of persistent disruptive behaviour



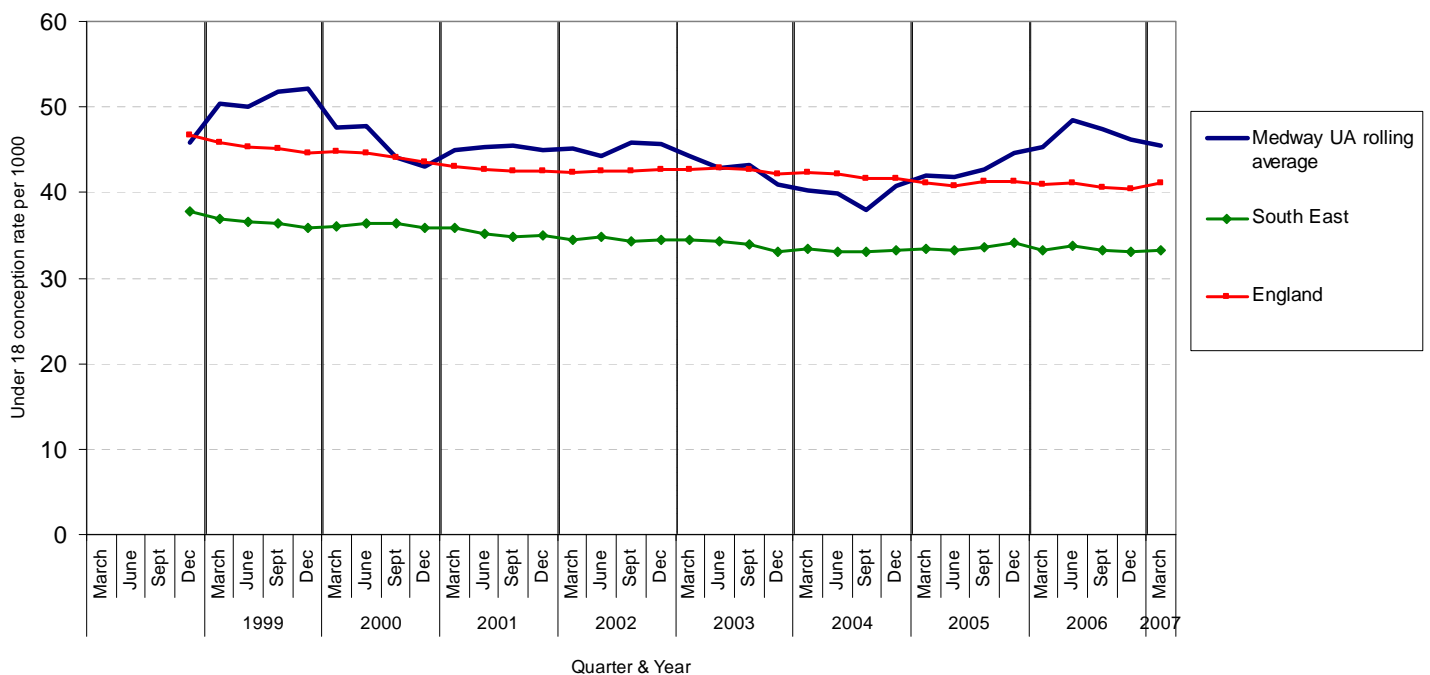
## Teenage Pregnancy

Medway's conceptions data by ward for 2000 – 2005 (Source: ONS website Aug 2008):

Note on conception data suppression: Numbers of conceptions followed by \* were suppressed on publication to avoid the identification of individuals. These have therefore been estimated.

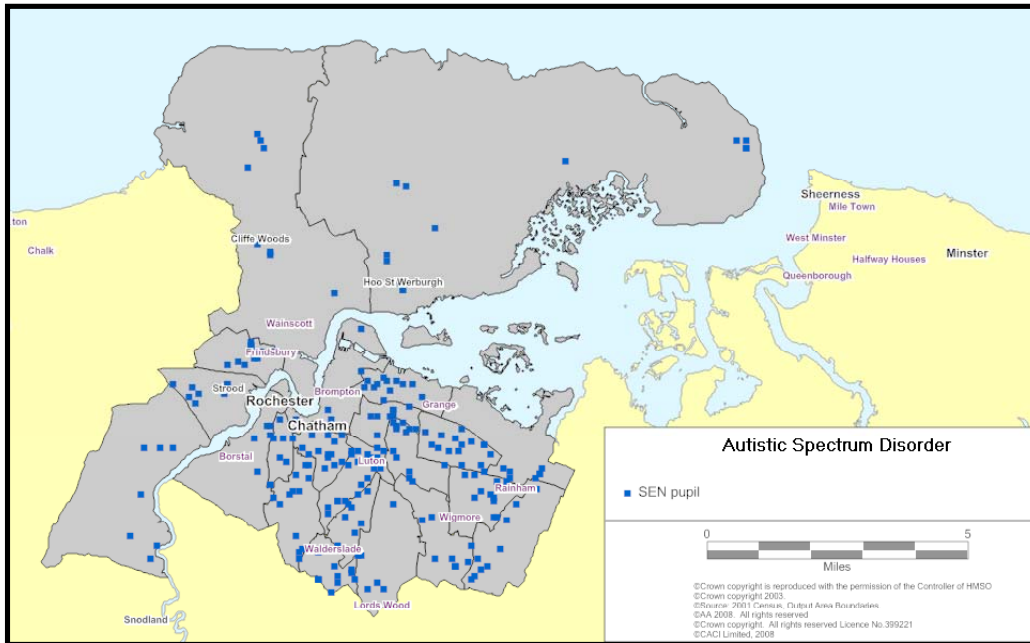
Ward Name	Resident female population aged 15-17 (2001)*	2000 - 2002		2001-2003		2002-2004		2003-2005	
		Number of under 18 conceptions	Average annual <18 conception rate per 1000 females aged 15-17	Number of under 18 conceptions	Average annual <18 conception rate per 1000 females aged 15-17	No. of u18 conceptions	Average annual <18 conception rate per 1000 females aged 15-17	No. of u18 conceptions	Average annual <18 conception rate per 1000 females aged 15-17
River	249	27	108.4	27	108.4	23	66.7	23	92.4
Chatham Central	957	65	67.9	64	66.9	72	80.0	72	75.2
Gillingham North	909	74	81.4	72	79.2	61	59.3	61	67.1
Gillingham South	930	60	64.5	57	61.3	61	57.3	61	65.6
Strood South	972	61	62.8	62	63.8	60	60.6	60	61.7
Rochester East	513	21	40.9	23	44.8	30	51.3	30	58.5
Luton and Wayfield	879	48	54.6	45	51.2	50	56.5	50	56.9
Princes Park	645	22	34.1	32	49.6	29	46.7	29	45.0
Peninsula	741	32	43.2	33	44.5	33	46.0	33	44.5
Twydall	924	53	57.4	51	55.2	41	45.3	41	44.4
Strood North	843	32	38.0	39	46.3	35	42.3	35	41.5
Rochester West	474	18	38.0	16	33.8	17	35.9	17	35.9
Watling	573	15	26.2	17	29.7	20	32.1	20	34.9
Cuxton and Halling	288	8	27.8	6*	20.8	10	37.0	10	34.7
Walderslade	612	23	37.6	20	32.7	20	32.2	20	32.7
Rochester South and Horsted	714	14	19.6	17	23.8	20	28.5	20	28.0
Lordswood and Capstone	681	19	27.9	19	27.9	18	29.4	18	26.4
Rainham Central	765	19	24.8	17	22.2	17	21.5	17	22.2
Strood Rural	741	19	25.6	17	22.9	16	20.4	16	21.6
Rainham North	546	17	31.1	13	23.8	11	22.0	11	20.1
Rainham South	1059	25	23.6	23	21.7	16	17.4	16	15.1
Hempstead and Wigmore	552	11	19.9	11*	19.9	7	14.8	7	12.7

Regional and England quarterly comparisons (Source: Medway's Teenage Pregnancy Team 2008)

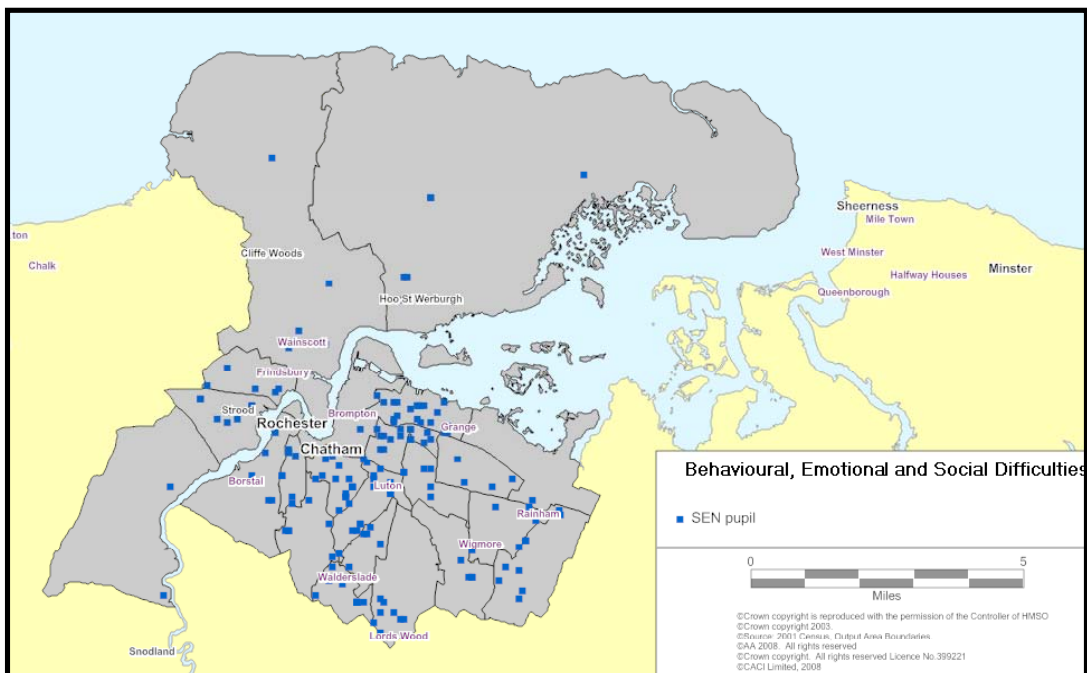


## Children with additional needs

Children and young people diagnosed with ASD by electoral ward:



Children and young people diagnosed with behavioural, emotional and social difficulties by electoral ward:

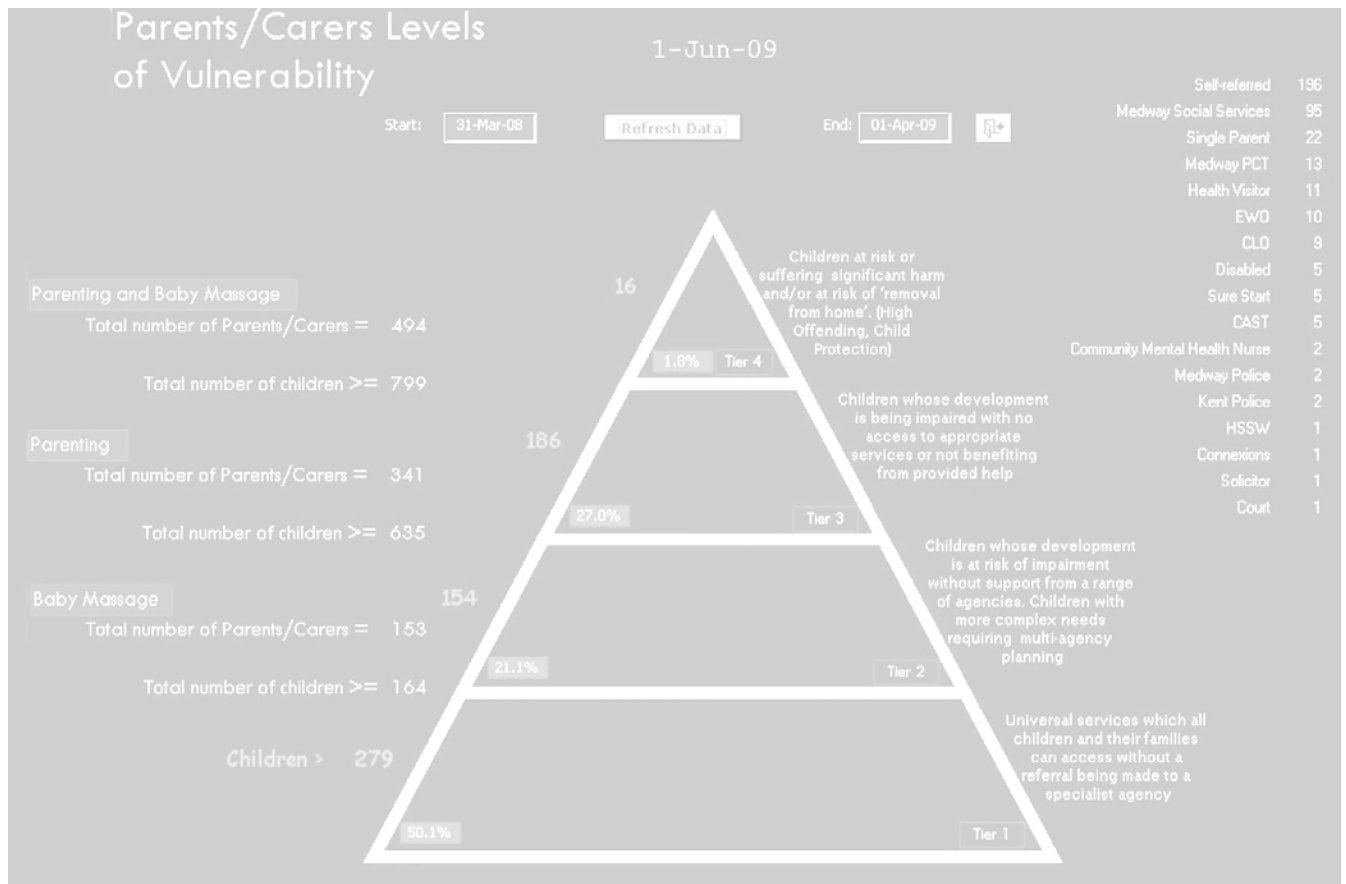


Appendix 4  
The issues that parents say they want help with

	%
How to help my children to be generally <b>healthy</b>	41
How to keep my children to feel <b>safe and secure at home</b>	39
How to feel <b>closer</b> to my children	50
How to give my children <b>healthy food choices</b> at home or outside the home	38
Looking at how <b>my behaviour</b> affects my children	<b>69</b>
Helping my children to keep <b>away from crime</b>	46
<b>Listening</b> to my children	<b>67</b>
Helping me to get my children to <b>co-operate with me</b>	<b>78</b>
Supporting my children to <b>learn</b>	<b>67</b>
Helping my children to <b>respect</b> other people	60
Helping my children to have <b>self-confidence</b>	<b>69</b>
Being <b>positive</b> with my children	<b>71</b>
Helping my children to enjoy <b>recreation and play</b>	44
How to get the most from my <b>family budget</b>	42
Finding out where to <b>get help</b> with jobs, courses, and childcare	40
Finding out where to <b>get help</b> with my children if I need it	61
Helping my children to keep away from <b>drugs and alcohol</b>	40
Talking to my children about <b>sex and relationships</b>	47

Source: Parentis 'starting out' questionnaires

## Appendix 5 Breakdown of referrals to Parentis April 08 – March 09



Source: Parentis

### Definition of levels of vulnerability used by Parentis in agreement with Medway Council

Tier 1	All referrals not separately listed below
Tier 2	Single parent, Disabled parent, CAST, Duty teams, Children's services inc HVs, Children's centres, Education Welfare, Home School Support Workers, NHS inc doctor or hospital, Primary Behaviour Support, Teenage Pregnancy Project
Tier 3	Community Mental Health Nurse, Child Protection Team, NSPCC, Social worker, YISP
Tier 4	Court, Police, Solicitor, Anti-Social Behaviour Team



## Appendix 5 Comparison of programmes by cost and sustainability

### Key to shading:

	Low cost implications
	Medium cost implications
	Higher cost implications

Cost implication	FCT (delivered by Parentis)	Family Links	SF 10-14	FAST	SFSC	IY	Triple P
Length of initial training	5	4 days	3	2 days	5	3 + 1 day for baby programme	3
Requirement for follow-up training days	3	1 per year	None	3 on-site during first programme	None	None	1 accreditation day
Includes training to run groups as well as programme-specific knowledge	Yes	Yes	No	To some extent through coaching	To some extent through modelling programme delivery	No	No
Training can be cascaded locally to other practitioners	Yes – currently Parentis provide local training	Yes if local trainer becomes a Family Links trainer. Cost of this is £2,000.	Yes if local trainer becomes a SF 10-14 trainer. 150 hr distance learning at cost of £1,917.	Yes if local trainer becomes a FAST trainer. Cost of this is £2,500 and takes 9 days.	No	No	No
Desirable minimum qualification for lead trainer*	QCF Level 3	QCF Level 4/5	QCF Level 3	QCF Level 6	QCF Level 3	QCF Level 6	QCF Level 4
Desirable minimum qualification for co-trainer	QCF Level 2/3	QCF Level 3	QCF Level 3	QCF Level 3 Parent co-leader: no qual.	QCF Level 3	QCF Level 6	QCF Level 4
Number of paid facilitators required for delivery	2	2	3	2-3	2	2	1-2

Cost implication	FCT (delivered by Parentis)	Family Links	SF 10-14	FAST	SFSC	IY	Triple P
Time commitment per practitioner	Not specified. Estimate 12 days over 4 month period.	Not specified. Estimate 12 days over 4 month period.	Not specified. Estimate 12 days over 4 month period	12 days over 4 month period	Not specified. Estimate 12 days over 4 month period	20 days over 4 month period	Not specified. Estimate 12 days over 4 month period
Cost of training per practitioner if it cannot be cascaded locally	£725	£575, but can be cascaded	£498 based on group size of 20, but can be cascaded	£300, but can be cascaded	£975	Approx £350	£716
Certification costs	£425	Included in above	Included in above	none	Included in above	£300	Included in above
Cost of training materials per practitioner*	Included in above	Included in above	Included in above	£150	Included in above	Included in above	Manual included in above. DVD £75
Number of parents/ families	8-10	6-10 parents	6-10 families	12 families	8-15 participants inc children	10-14 parents	10-12 parents
Number of rooms required for programme delivery	1	1	2	3	1	1	1
Cost of learning materials per parent/ family	£6.50	Approx £20 for manual and nurturing gifts for parents	Approx £24 for handouts, craft resources and gifts	Approx £24 for craft materials and small gifts	£12	Approx £20 for manual and small gifts	£8.50 - £11.45 depending on programme
Cost of other resources required for programme delivery e.g. food, presents etc	Refreshments	Refreshments	Meal	Meal	Meal	Refreshments	Refreshments

\* Programme developers specify the desired level of qualification and experience for group leaders. These are intended as a guide, rather than an absolute requirement. Qualification and Credit Framework (QCF) levels broadly equate as follows:

QCF Level 6	Professional degree level qualification e.g. social worker, health visitor, teacher, clinical psychologist etc
QCF Level 4	Foundation level degree
QCF Level 3	Recommended level of qualification/ accreditation for practitioners working with parents e.g. community liaison officers, home-school support workers. Qualifications such as the C&G Work with Parents is Level 3.



## **Appendix 7**

### **Evaluation of FAST programme at a secondary school in Milton Keynes**

#### **Stantonbury Campus FAST Project Evaluation**

##### **Overview**

This report is about the first British pilot of secondary school FAST (Families and Schools Together) designed in the USA for 14 year old students. This was used for Year 7 students (11/12 years old) and run at Stantonbury Campus, the largest secondary school in Britain (2900 pupils). This report needs to be read in conjunction with the FAST training manual to contextualise the content.

FAST was open to Grafton and Saxon Halls for this pilot of FAST.

Recruitment of Youth and Community leaders and the invited families began in July simultaneously, with presentations in seven of the Campus feeder Primary Schools just prior to the summer holidays when the target youth were Year 6 students. Hubs met over the summer holidays to build relationships and keep the momentum going for the start of FAST.

FAST training was held on the 17<sup>th</sup> and 18<sup>th</sup> of September 2008 and the project began on the 2<sup>nd</sup> October and ran until the graduation on the 4<sup>th</sup> December.

##### **Outcomes**

FAST was a success. The pilot was invaluable. It has proven that FAST translates from the US culture it was developed in, and that its central aims and predicted outcomes are provable and correct. I believe it to be an achievable community project that draws schools and families closer together, as well as benefiting students.

Furthermore, FAST is topical as it complements the Every Child Matters agenda, fits perfectly into the extended schools agenda, and running a FAST course in a school would meet many of the Every Child Matters support needs required in the Schools Evaluation Form (SEF) that OFSTED require.

28 families were recruited: 13 attended the first FAST session. 11 families graduated (this included a family who dropped out late in the course, having completed their 6 FAST sessions.) The family that dropped out first (attending only one session) did so due to larger issues in the family that were nothing to do with FAST. There was some illness and some families had holidays, but this was not interpreted as drop out.

Therefore the graduating percentage of families was 84%. This is nearly identical to the first primary pilot of 83% at Pepper Hill School.

The families who did not turn up could not be contacted and did not respond to the messages we left. We respected this and did not pursue further.

The stated aims of this FAST pilot according to those partaking- aiding family communication, the building of social capital and the lowering of family stress- were successful with responsive questionnaires putting these at generally level 4 (with 5 being the best)

The most popular parts of the project were RAIN with the adult leaders, craft and 1-2-1 with the parents, craft with the youth invitees (Year 7's) and meal prep with the youth leaders.

The least popular parts of the project were the board game with the adult leaders, parents and youth leaders, with a broad mix with the youth invitees (Year 7's).

### **What the parents said**

**“All of it was very enjoyable”**

**“It was all good, we enjoyed all of it- shame it was ending”**

**“Meeting different families (was good)”**

**“Everybody was freely communicating with smiles”**

**“The fact that it made us all spend time together was good”**

**“We all enjoyed the craft and it was great not to have to cook on a Thursday!”**

**“Adam and I communicate quite well at the moment but I think FAST benefited (my daughter) perhaps more”**

**“I found the 1-2-1 time with my daughter absolutely priceless.”**

**“FAST has blessed my family”**

### **Final costs**

FAST took £2500 to run, which was £1000 over initial projected budget. This was comprised of four main parts- recruitment hospitality (youth leaders lunches, and parent leaders drinks and meets etc) sundries (set design i.e. for Family Fortunes, a second hand PS2) family meal costs, and family prizes.

The Pepper Hill pilot (which graduated 26 families) cost some £2,300. Therefore a rough cost of £2,500 seems accurate, and does not vary much with size of attendees, possibly due to bulk buying, and the fact Stantonbury Campus parents were offered complete freedom in ordering whatever meal they wanted to prepare, whereas at Pepper Hill menus were drawn up and there was less variety.

### **Successes**

#### **Graduation Rates**

FAST continues to be proven right when it says you will graduate a minimum of 80% of the families attending. Pepper Hill, the original infant school piloting Yr 1 FAST, graduated 83%. Stantonbury Campus graduated 84% of families.

#### **Milton Keynes Play Association (MKPA)**

The MKPA led the craft activities for the bulk of the FAST course, providing resources and activities. They also led a special FAST session where they helped families build dens and have a den war after dinner- firing foam missiles at each other! They gave large amounts of time free of charge and were very enthusiastic and encouraged the families.

#### **Youth Team Building**

One of the major successes of FAST is how it achieves “incidental” victories- one of these being the extraordinary way it has gelled 19 youth leaders- many of whom were strangers prior to the project- into a team. The team were creative, showing flair in artwork, organisation and running the quiz “Family Fortunes” in the diner. The 19 youth leaders who completed FAST are willing to be used again for FAST or any other project if their workload allows. They have built good relationships with each other and proved to have good relational skills with the invited FAST families. The majority of the youth leaders were very keen and mature, often coming up with their own suggestions on how to keep

the Year 7 students focused on activities. They also made various activities their own, for example the Family Fortunes and “Singstar” games in the diner.

### **Family Fortunes**

The popular TV quiz game “Family Fortunes” was used to occupy and involve those family members not engaged in the youth/parent hubs and the 15 minutes 1-2-1. FAST International disallow DVD watching (presumably because it is passive and does not build relationship) , and I wanted to encourage family solidarity and also give the families a chance to compete against each other for points, which went on to a weekly leaderboard and led to first and second prizes at the graduation.

### **Micro Social Capital**

A FASTWORKS (the ongoing meet up of families having completed FAST) group was achieved informally. At least three families of the graduating eleven have become friends and meet weekly, and two of the parents who came as invitees want to be Parent Champions for future FAST projects and other projects linked to my job. On two occasions a family made a cake and brought it in to share with other families. Once, one of the Year 7’s was ill, but his family still came in to cook. Another parent was having a very stressful week. He mentioned to his son “Let’s put this behind us and go to FAST”. As mentioned above, the youth leaders have gelled and can be used for various school based resources.

Quite why a formal FASTWORKS was not achieved is not clear (and is actually academic). I think it could be a combination of family busyness, and a view that it being formally facilitated at school by a social worker could be seen as a form of family support for “needy families”.

Various departments within the school were brought together. An art teacher, involved with the Urban Arts Collective (an extra curricular group of youth into graffiti and street art) designed and made the various backdrops that decorated the Hub rooms. Links were made with GEM-K (charity attached to the school with the brief of sustainable communities and cross cultural learning) and drama teachers (who loaned out the storage room for Hub boxes).

### **Multi Agency Working and Networking**

FAST brings together agencies. When agencies come together, at least two things happen. One is that **synergy** created (“Synergy comes from the Greek word synergia, meaning joint work and cooperative action. Synergy is when the result is greater than the sum of the parts. Synergy is created when things work in concert together to create an outcome that is in some way of more value than the total of what the individual inputs is”. (<http://ergonomics.about.com/od/glossary/g/defsynergy.htm>))

Another is that often agencies find they have a **win/win agenda**- that is, FAST draw in community agencies to help staff and lead the project, and community agencies looking for ways to engage the community find they have a ready made project. Community agencies often come with resources- whether that is people or goods. This happened at FAST.

### **Some Issues to Consider**

These issues are central to secondary school FAST. Please bear in mind FAST was a success, and these issues were relevant to the leadership team only. Few of these issues were known to the participating families at the time.

**Secondary Schools are not “organic”**- they are actually groups of systems, many of which do not normally interact (room booking people, site managers, cleaners, teachers and extended school

personnel, etc). For instance, the head teachers approved and encouraged the project, but there was no staff buy in or awareness lower down in the way that would be instant in a primary school. People allocating room bookings are completely divorced from the people who normally use those rooms day to day. Trying to work with or around these independent systems was very stressful. Cleaners would be mopping floors as we tried to set up, and their cleaning schedules could not be changed- if they had been, we would have had less clearing up, and the same floor would not need to be dirtied twice. Site managers would be locking buildings we still needed access to. There was no storage- especially for foodstuffs- which precluded cheaper food bulk buying to save costs.

Due to the multitude of departments in secondary schools, it is essential to meet with the departments and set up a common e mail and form of communication. The stress caused by keeping various people and departments informed and happy was exhausting and was the job of a team in itself.

The major problem we had was the frustration caused by FAST in classrooms. Food had never been consumed in the building and after the first FAST, the cleaning up was not as good as it should have been and one teacher locked us out of the room for the duration of the project, despite apologies.

Not all schools will have this issue; FAST is easier to facilitate in primary schools due to the smaller nature of the venue and the tight knit staff team. The leadership of the head teacher is more direct and all systems in smaller schools are in regular contact with leadership.

**Student workload.** Secondary school students are busy with school work and various other commitments. Due to this, when setting up the youth leader meetings some 3 or 4 months prior to FAST, it is essential to address this. In setting up a new venture, it is hard to be strict about this at inception in case youth decide they cannot commit! Clubs may need to be cancelled. Parents will need to be informed about the workload. Teachers will need to be informed and it is hoped FAST will be seen as an extension of the school curriculum- and grace extended about school work deadlines etc.

**Hidden costs.** These included refreshments for leaders, higher costs to food and prizes than expected, having to procure a second hand games console for the family entertainment, and the various thank you and “sweetener” presents throughout FAST and at the end.

**Chef!** Originally we had a trained chef help in the kitchen, as we were not sure of the cooking ability of the families, or how long the food prep would take. However it turned out the families felt he took all the work off them, so in the end the chef did food prep at his house (i.e. cheese grating, chopping vegetables etc) and the prepared food was collected en route to FAST.

Food prep took a lot longer than expected. Allow at least 1 and a half hours to prep and cook the meal. We would recommend that food ingredients are prepped before FAST to shorten cooking times.

**Responsibility of stewardship.** This unexpected stress problem arose when classrooms and the kitchen were found to be left less clean than they should be. Also, on two occasions kitchen equipment broke down (through no fault of ours) and yet it added to the perceived running problems of FAST. A working kitchen is a thing of order and I would recommend that future FAST cooking be done in food science areas, with their domestic type ovens, rather than large industrial kitchens.

I would recommend that a “dummy run” is planned, perhaps as part of the leadership training, so that the kitchen equipment, space and cleaning time is noted prior to session one.

**Security.** This issue took us all by surprise. One at least 3 occasions, youths from outside the school congregated outside the venue and went inside. There were personal belongings and school computers in the venue. Fortunately nothing was taken (apart from some kitchen foodstuffs). This is a difficult problem to deal with, because youth leaders cannot be expected to police the venue in case

they are assaulted. I would recommend one person to be given the job of security, stationed on the door

**Taking of kitchen food.** There were a few occurrences when people unknown took drinks and cookies from the kitchen. It was never discovered whether this was people involved with FAST or the youths who occasionally tried to get in. Things like this are problematic and it may be better to run FAST from a food science room as the central Hub, to avoid being responsible for two sites.

**Storage.** This was a problem. The school is very busy and space is limited. We managed to secure a small storeroom for FAST Hub boxes, but could not store food. Finding a store that was open during FAST hours proved difficult, as most of the school was shut, or available rooms were too far away from the FAST area.

**Family activities.** Preparing activities for those members of the family not engaged in the youth/parent Hubs and the 15 minutes 1-2-1 was hard. We were both a victim of our own success and hampered in trying to find fun activities that engaged all family members and were fun, but not so much fun that the target youth and chosen parents wanted to take part and thus destroy the central component of FAST- the communication in the family. This happened on one occasion with one Year 7 and his parent- the student refused to stay in his 1-2-1 despite the best efforts of youth and adult leaders to convince him to return- he wanted to watch Family Fortunes!

Another problem was the sets for Family Fortunes. Lots of wood, paint and materials were bought at some cost. However the back drop sets could not be secured to the wall, were damaged in set up and storage, and were dwarfed in the large dining hall venue. This was frustrating and waste of money. Future FAST courses need to remember the old adage- Keep It Simple Stupid! (KISS).

**Burnout.** Towards the end many of the leaders were shattered and not able to muster the energy needed to make things as smooth as they had been. I had underestimated the cost of running a FAST without the organic school buy in one would get in a small primary school. The above problems had a slow, demoralising effect, although FAST was still a success. FAST needs to be a leadership team venture, with at least 4 people sharing the large workload with leaders under them who can run with smaller tasks.

**Dark Winter Nights.** FAST was running in cold, wet, dark winter nights- not conducive for high attendance! The whole term timing of FAST has been considered and I do not think FAST should be run after the summer holidays but rather New Year and Easter terms.

## **Analysis of FAST**

### **Target Year**

Year 7 pupils were targeted as the Campus felt that this transition year was important to support. Furthermore, Year 7 students have only been at the Campus for two years and it was felt this year group would benefit from some focused support. Their parents have been used to more school contact at the primary school, and FAST encourages such school/ home contact. These Year 7 (11/12 year olds) were younger than the 14 year olds the content was originally aimed at, but it was felt that British youth would be sufficiently streetwise to grasp the older content. However the target youth were a little hard to keep focused on the question to their chosen parents.

### **Stantonbury Campus Halls invited, and why**

Initially only Grafton Hall (some 110 potential families) was to be used as the pilot as it was felt that a smaller course would be more manageable. However Saxon Hall was added to ensure more people could potentially benefit, which gave a capacity to offer FAST to over 200 families. In the final analysis all Halls of the Campus could have been invited utilising the recruitment methods we did.

### **Initial budget**

The initial budget was £1500, although new data has come to light showing Pepper Hill spent £2,500 on FAST. I had also forgotten that I had previously used a smaller budget to support Pepper Hill's funding that I had not taken into consideration.

### **Final costs**

Final costs were £2500. There was an overspend because of the following:

- The SSP SW had no equipment or resources to lend to the school, as the post is new
- There were no pre existing school materials to use (i.e. music system, kettles, craft materials, used PS2 games console etc)
- The food price per head of Pepper Hill school could not be replicated, as a more "democratic" week by week Hub ingredients request by winning families was used
- All prizes had to be bought (Pepper Hill had some already via donation)
- There was no overnight/ over week food storage, preventing bulk buying, and thus making costs higher
- The cost of "hearts and minds". The amount of volunteer hours FAST demands means that the facilitator cannot expect people to attend meetings without at least being given quality refreshments, or parent leaders being given petrol money etc. Parent leaders are the lifeblood of FAST and need to be honoured. Hence, when meeting with them, I would recommend a quality coffee house (i.e. Starbucks) as opposed to a greasy spoon, or vile corporate coffee! Being treated tells parent leaders they are valued and honoured. These hidden costs add up. Pepper Hill has been using Parent Champions for some time and their own system of honouring them had long been in place.
- Childcare. Essential for invited families and parent leaders. This can cost a lot of money depending on the ages of children and the staff ratio needed legally to care for them. See link for legal ratios-  
[http://www.surreycc.gov.uk/sccwebsite/sccwspages.nsf/LookupWebPagesByTITLE\\_RTTF/Staff+to+child+ratios+in+childcare+settings?opendocument#Child](http://www.surreycc.gov.uk/sccwebsite/sccwspages.nsf/LookupWebPagesByTITLE_RTTF/Staff+to+child+ratios+in+childcare+settings?opendocument#Child)

Costs could be cut by asking families to buy their own meals in turn, cook them at home and bring them in for their hub (as per the standard FAST procedure). This was not asked of attending families for these reasons:

- The cost (aprox £40 per week per Hub) would be too much
- You cannot presume families will know how to cook a meal for up to 12 other families, and transport it there (will cause stress)

- You cannot presume food hygiene will be followed (people could get food poisoning- a whole school year could go down with illness!)
- Overall a pilot FAST, given that it asks so much of families, should not ask for such a financial or emotional (stress inducing) buy in
- Food cooked at home by invited families could fall foul of food hygiene regulations (we had to have a Basic Food Hygiene trained person in the kitchen around the food prep)
- The issue of families with special dietary needs. It may be unfair and confusing for families to have to cater for diets such as Halal and vegetarian and too risky to presume nut allergies etc would be understood and dealt with.

### **Training**

In addition to the Hub and general leaders meetings, Lynn McDonald (FAST founder, and Professor of Social Work, Middlesex University) came and taught for two days back to back. This needed community professionals and youth being available and proved difficult to achieve, although there was a good turn out. It is important not to underestimate the cost of refreshments- at about £180 for the cheapest (and unhealthy) option- pizza, donuts and drinks. Healthy sandwiches and drinks made on site would have come to well over £200 a day.

FAST needed more training and refresher training between the sessions (i.e. perhaps after session 2) so that the team can refocus and unlearn developing bad habits. This was not possible due to my (school social worker, and parent leaders, other workloads). As a result there was some loss of focus within the team.

### **FAST Personnel**

- Parent Champions (parent leaders) from previous FAST at Pepper Hill
- Youth leaders
- Bridgebuilders Charity
- Women at Work
- MK Play Association
- Community Mobilisers
- Safer Community Wardens
- Urban Arts Collective
- MK Police
- Platform 8-13 (Youth Offending Team)
- Connexions
- GEM-K
- Family Advice and Support Team (Children's Social Care)

### **Recruitment Methods**

#### **Comment on the timing of FAST**

FAST was run in early October, weeks after the end of the summer holidays. This is not a good time to run FAST as engaging with youth and their parents just prior and during the summer means they are not focused on events afterwards. People go away and generally are unable to commit "head space" to the concept of things after the holidays, or when they are in a new school. See also my comments

about dark winter nights. New Year and Easter terms suit better, although these too will be disrupted by the two week Christmas and Easter holidays

### Community Agencies

Because at the time the SSP SW had no formal system of community engagement (Locality Planning is now the model and is based upon this) invites were sent through existing relationships. Therefore the target group of potential community agencies who could help was small, but nearly all agencies approached signed up to help.

### Youth Leaders

Most youth leaders were existing Year 10 peer mentors, who had already received peer to peer training and were deemed mature and with good people skills. In addition to these year 10's, a few year 10's were approached who were deemed to be struggling pastorally at school. This was not broadcast to the wider youth leadership. Generally, there was a better performance from the Peer Mentors.

As there was not enough set up time to recruit youth advocate agencies like Barnados etc, it was decided that Year 11- 13 "sixth formers" would provide the advocacy in lieu of this. These students were recruited almost all from Health and Social Care studies, with a handful coming later through friendships with these students. Finally two Year 9 students and one Year 8 student came to help (these were the sons and daughters of FAST parent leaders). The younger students were very helpful and followed the lead of the older students.

Youth leaders were recruited via a series of meetings and later lunchtime groups (with the lure of pizza and cake!)

Youth, once committed, were put into 4 Hub groups (a parent leader heading up each one) and these groups met from the end of the summer 2007 term and throughout the summer, continuing into the Autumn term.

Whilst the "6<sup>th</sup> formers" were excellent leaders, motivated and almost always went the extra mile in both commitment and inventiveness (for instance designing role play, unasked, as part of the youth assembly) they did not really fulfil the job of youth advocates as such. This was because they had too close a relationship with the younger students and could not be expected to achieve the professional distance such advocacy demands. This is not a criticism of them, but a learning outcome for people planning to run FAST. However, their lead and focus on FAST was fantastic and I would recommend sixth formers being part of any FAST, in addition to the adult youth advocates.

### Families and Target Youth

FAST International recommends that the invited (target) youth to be paid a token amount for their continued attendance at FAST. The reason for this is that it enables the invited youth to diffuse awkward criticism from peers ("why do you want to attend a course with your embarrassing parents?") as well as provide an incentive to come. This was not adhered to for the following reasons:

- The cost would be too high. Even if the amount were £5 per session per student, that would amount to £45 per student over 9 weeks. If 30 families came, that would be £1350.
- The concept seems to work against the spirit of the building of social capital.

- The USA has a different culture (pioneering, enterprising, with arguably a stronger blend of capitalism), and no welfare state. These variables do not translate into British culture. Paying youth to attend would be awkward and raise too many dissenting voices, especially from schools and community agencies.

The Youth Leaders came with the SSP SW to assemblies in the primary feeder schools when the target students (Year 7) were Yr 6. We discussed FAST in either the assemblies or smaller classroom meetings, and the youth leaders were encouraged to take the lead and share why FAST was so good and would be so beneficial.

#### Initial letter

See appendix A. It was hard to pitch FAST without giving too much science. My job title of School Social Worker caused undue concern within some families. This is due to how social workers are perceived within Britain with their almost exclusively reactive and child protection focused work. Parents seeing the job title often wrongly assumed that their child, or their parenting, was a cause of concern.

#### Telephone calls to each family

These were made almost completely by the Parent Leaders, as they would be considered neutral by other parents (given the comments above). They were on the whole successful, but parents were hard to get hold of and it took repeated attempts to get through to parents.

#### Follow up letter

A follow up letter was sent to all families similar to the first.

#### Frequently Asked Questions sheet

Went out with the letters. See appendix B.

#### Home visits

These were done by either myself, or a parent leader, with a minimum of one youth leader. Generally as a rule once we had got to the home visit stage, the families were committed.

#### Stalls at parent's day (when parents come in to hear of their child progress)

The Year 7 parent's day came two weeks before FAST started- this was some 220 families potentially. A FAST stall was set up in Saxon Hall open area, where tea, coffee and donuts were served to families visiting, giving us an opportunity to discuss the project and meet people. The stalls were manned by youth and parent leaders. Some families were recruited via this method.

#### Year 7 assemblies

There were two opportunities for FAST youth leaders to reach Year 7 students via their assemblies. Amongst themselves, sixth former youth leaders put together a dramatic recreation of what FAST seeks to achieve via helping families communicate better. They role played the 1-2-1 time between parent and child. This was well received.

### Pre FAST youth Groups

FAST International recommend that youth groups are created prior to FAST starting. The idea is that the youth become so enthused that they sell it to their parents later.

Unfortunately we neither had the time or the budget to meet with youth groups (based on my belief that youth will not commit to weekly meetings without food. Holding lunchtime meetings without food effectively means the student will not eat at Stantonbury Campus, as they have less than an hour and the school diner is extremely busy)

On the basis of starting FAST with this handicap, I feel the recruitment went well. The families who came on FAST said as much- generally- in their feedback questionnaires.

I would recommend all the above strategies **in addition** to the setting up of pre FAST youth groups months before, to make recruitment even more successful.

### Venue

FAST was run in the Grafton 1 building, an ideal Multi Hub venue comprising a large central meeting area (where the crèche was situated) and eight large classrooms opening off it. The block also had toilets and was just down the steps from the larger kitchens and diner where the food was prepared and where the family activities took place.

As stated elsewhere in this report the industrial kitchens were actually not ideal to work in as they require a lot of cleaning, were full of food and drinks (which proved too tempting for some people not to consume) and came with the added pressure of inconveniencing the kitchen teams. The dining hall was too large for the role and seemed to dwarf the activities in it.

### Special FAST sessions

Some families were frustrated at the routine of FAST (the various components followed every week) and communicated this through Hub leaders. It was decided to run two special FASTs. This was hard to arrange at short notice, and to find content that was relevant to the families. The special FAST sessions we decided upon were a presentation by Women at Work (a local charity committed to getting women back in the workplace after having children/ being out of work, and a family based computer project where families learnt about their family tree and the history of Milton Keynes) and the Milton Keynes play Association leading den building.

I would recommend four special FAST sessions over the duration of its run to ensure families remain stimulated and engaged.

### Conclusion

FAST was a success, and a lot of fun! It is achievable to set up and run for any community agency or school if they commit to the correct recruitment and planning. Running FAST generated teams of people who can be used again for other projects.

**FAST is an enormous project.** It is far more comprehensive in regards to its set up, aims, and intended impact than other comparable projects such as Webster Stratton, etc, which tend to focus on one issue at a time (boundaries with children, etc) rather than a whole system, such as the family . FAST should not be seen as an isolated course, but rather a strategy in bringing the local community into the life of the school, empowering them, and replicating the model- FAST is designed to run on a rolling basis. It works best at the “Universal end” of social support, where all are invited, with the idea

that if parents want support they will ask for it, and this targeted support can be offered via other agencies or targeted parenting courses. Due to this, it complements the Every Child Matters agenda.

**Secondary FAST is more complex to plan and facilitate than Primary FAST**, mainly due to the fact it introduces another strata of leaders- the Youth. Youth need a lot of time spent with them, and a lot of direction. It was clear that the youth wanted to spend more time talking to the FAST leadership team. For this reason any FAST at a secondary school should have a youth leader, with their role solely to liaise with the youth leaders. See also the other issues discussed above.

**FAST expects a lot of its leaders-** and one of the biggest things it expects is an equitable buy in across the team, and emotional investment. Ideally, there can be no semi committed leaders, or community leaders who do not have a 100% buy in from their managers and superiors, allowing them to commit their time without hindrance or last minute double booking. This is very hard when FAST is an unknown project, and community agencies are unaware of what it is achieving.

Solutions to this would be to recruit from community agencies at senior manager level, but many of these senior managers are hard to access. Furthermore, Milton Keynes has a myriad of departments and agencies that department and agency heads find hard to keep track of, and who to ally themselves with/ provide resources to. Therefore, agencies running FAST will need to think carefully about the level of community agency relationships they have, and the amount of time they can give cultivating new ones, prior to running FAST.

**FAST expects a massive buy in from the attending families.** Nine weeks is a long time (in reality ten to eleven depending on which term the half term or Easter holiday falls). FAST has to compete with increasingly busy families, families working (especially different shift patterns) holidays and easy to forget variables such as faith groups religious festivals (Ramadan, Eid, Divali etc) many of which demand fasting and attendance at the place of worship. The school that first ran (primary school) FAST forgot Ramadan and ran FAST during it, precluding the Muslim majority of parents attending.

FAST has to combat youth boredom, in an increasingly fast moving, highly stimulated society. Some youth do not regularly communicate with their families, and in the modern age communication itself is changing (texting, chat rooms, social networking, online gaming etc) FAST has proven it can engage with teenage/ pre teen youth, however, if the core components of the program are followed faithfully. The youth attending were very positive in their feedback (see feedback form in Appendix C).

**FAST, to my knowledge, was the first after school project ever run at the Campus since it was built in 1974.** It went against a culture of 35 years that did not facilitate any after school work with families. This culture went beyond the school systems, and seemed to “clash” with the expectations of students families. FAST “did not compute” (parents were surprised to hear from the Campus) and this was possibly one of the reasons there was a lower turn out than hoped (alongside the incomplete recruitment). Another issue was the fairly high amount of Stantonbury Campus students living far outside the catchment area of the local estates- too far to warrant coming in.

As with any preventative social work project, people are suspicious of the word “social work” (commonly equated to child protection and the removal of children), and even after carefully worded letters and lengthy discussions to make it clear there is no targeting and that FAST seeks to enhance skills in the family already there- rather than fix a problem- people can remain defensive.

**FAST is expensive (but comparable to other family support projects).** With that said, schools get a lot for the money- in short, a closer relationship with parents, empowered youth helpers, and FAST statistics suggest better behaved and more socially connected children. FAST is actually comparable on price to Webster Stratton, the favoured community family support project with most Local Authorities (usually called The Incredible Years). Webster Stratton costs £5878 for 12 weeks, and

FAST about the same for 9 weeks, although FAST provides meals and prizes (however standard youth and family recruitment is likely to prove more expensive).

**FAST completely supports Every Child Matters.** It completely dovetails into extended schools, and parent partnership and empowerment. FAST is a natural springboard for community projects, local leadership emergence, and the baseline for families beginning to identify their support needs- and meeting people (the leadership community professionals) who can support those needs

This is why I believe FAST should be run at secondary schools both for what it achieves in its own right, and what it can kickstart. It is also excellent at empowering and inspiring youth.

### **Recommendations for schools considering running a FAST program**

Secondary FAST needs a large leadership team. Each main job within FAST needs a dedicated leader, experiences, passionate and gifted in organising that area. Here are some suggestions and their main duties:

#### *Kitchen Leader*

- To organise the prep of FAST food
- To organise and direct FAST kitchen helpers
- To support FAST families cooking week to week
- To ensure the cleaning and re setting of the borrowed FAST kitchen
- To liaise and placate normal school catering staff
- To arrange suitable bulk buying and storage of food and beverages

#### *Administration Team*

To ensure the communication between the FAST leadership and the various departments of the school, and communication between FAST leaders, and the FAST leaders and the attending families. Other jobs should include:

- Contacting families during FAST
- Contacting teachers for comments on students progress every week to feed back to parents
- Liaising with community agencies
- When doing non pilot FAST, ensuring the questionnaires have been readied and completed
- Shopping for food and prizes

#### *Youth Advocate*

- To ensure the youth have their needs and suggestions taken into consideration, and that their participation on FAST is not merely token
- To get youth to reflect on their practice and experiences in FAST

#### *Youth "Manager"*

- To work closely with the Youth Advocate
- To ensure the youth stay on track, and disputes are settled
- To allocate rotas and ensure these are followed
- To ensure youth follow FAST training

### *Hub Leaders*

- To be responsible for their respective Hub boxes, keeping them fully stocked, and ready for each new session
- To ensure the smooth running of FAST and troubleshoot
- To ensure communication within the Hub

### *Security*

At least one person to be on the door, secure personal belongings, and ensure that people do not come in from outside. This person will need good interpersonal skills to diffuse potentially difficult situations.

**Simon Langley, Liz Hand, Josan Race, Vicky Kellegher, Karen Clarke  
Stantonbury School Partnership Steering Group 2009.  
Please mention the above if using excerpts from this report.**