# **Home-Start South Leicestershire**

# **Delivery and Outcomes Report**

# 2019-20

This is a combined report, collating key delivery and outcome information available on all activities delivered by Home-Start South Leicestershire across Harborough District in the last financial year.

Information is included on:

- Outcomes Measurement Framework
- Volunteer Involvement
- Partnership Working
- Review of Projects
  - o Family Know-How Project
  - o Family Post Natal Illness Project
  - Young Parents Project
  - Active Families Project
- Exit Strategies

For each of the projects, the report contains details relating to:

- Summary Delivery Outputs
- Summary of Results/Achievements (outcomes from ended families)
- Family Feedback

#### **Outcomes Measurement Framework**

In all projects, initial assessment data for each family was created with parental input and recorded on the organisation database. This included information about both parental needs and child needs. In addition, a specific group outcome recording method was used to record children's observed development across both the Family know-How and Family Post Natal Illness projects, helping to retain a child-centred focus to these services where child and parent group sessions took place in additional to other services.

At the end of support, or at a year-end review point at the end of March, each family is rated as "Not Yet Started to Achieve", "Partially Achieved", or "Significantly/Fully Achieved" in terms of their progress towards any outcomes where a need has been identified. The full range of outcome measures is listed below:

Outcome Measure	Project in which this is specifically measured (NB even if not specifically measured, different outcomes may still be achieved within projects)
Gain a practical awareness and understanding of ways to manage their family's needs (incl. physical activity & nutrition)	Family Know-How
Gain a practical awareness and an understanding of parenting principles	Family Post Natal Illness
Improvement in practical parenting skills	Young Parents
Increased parental confidence to manage their family's	Family Know-How
needs	Young Parents
Improvement in parents' understanding of how to manage their Post Natal Illness better (incl. improving physical activity levels)	Family Post Natal Illness
Reduction in parental feelings of isolation	Family Post Natal Illness
	Young Parents
Improved relationship between parents and their	Family Post Natal Illness

children	Family Know-How
	_
Incompany of the control of	Young Parents
Improved management of household	Young Parents
income/expenditure	
Able to maintain a safe and healthy home environment & routine	Young Parents
Able to develop skills and qualifications to increase employability	Young Parents
Improvement parental awareness of local activity options	Active Families
Improved parental confidence to access physical activity options	Active Families
Improved social & community links	Active Families
Increased level of physical activity (parents & children)	Active Families
Increased enjoyment of physical activity (parents & children)	Active Families
Improved physical & mental wellbeing (parents &	Family Know-How
children)	Family Post Natal Illness
	Active Families
	Young Parents
Children have increased confidence to play	Family Know-How
	Family Post Natal Illness
	Young Parents
Children have improved social interaction with their	Family Know-How
peers	Family Post Natal Illness
	Young Parents

In addition, the courses delivered within the Family Know-How Project and the Family Post Natal Illness Project included a self-assessment evaluation form completed at the beginning and end of the 6 week delivery period.

Feedback and end evaluation of service was taken from parents throughout the year, and an annual "Parent Views" feedback session was held on 3.03.20 (previous sessions were held on 2.04.19; 14.06.17 and 22.04.16). Full reports are available on request.

Complete outcome result data for 2019-20 will be available an Appendix to this report after the end of the financial year. A summary of outcome results available from those families whose support has ended in 2019-20 is provided below in the Summary Delivery Outcomes section.

#### **Volunteer Involvement**

There has continued to be a significant level of volunteer involvement within Home-Start South Leicestershire. As we approach the end of 2019-20 we currently have 37 active family support volunteers, 10 Trustee volunteers, and 6 additional volunteers in non-family support roles.

Family support volunteers are those directly involved in supporting the delivery of our services, across all the projects. They may be visiting families on a one to one basis at home and involved in helping them access community activities and facilities, helping within our family group sessions, within our parent courses delivery, or in our crèche provision to support the parent courses. Occasionally a volunteer role will also include driving families to our services.

All volunteers have been recruited through a selective and vetting process. In May 2019, the latest annual recruitment round resulted in 9 new volunteers joining the organisation. We are currently recruiting for the April round with over 13 interested people at this stage.

The Course of Preparation, attended by all newly recruited volunteers, of 8 day time sessions over 8 weeks took place between 1.5.19 and 26.6.19.

Additional volunteer/trustee training sessions have included: The Solihull Approach Foundation Certificate (3.07.19 and 10.07.19); Paediatric 1<sup>st</sup> Aid (4.06.19); Group Volunteers Safeguarding Competencies Session (25.07.19); Trustee 15th June 2020 – Home-Start South Leicestershire

Safeguarding Update (11.06.19) All Volunteers Safeguarding Update (17.09.19 and 3.02.20); Trustee Equalities Update (28.10.19); VISTA Let's Get Moving Session (identification of sight issues in very young children) (27.01.20). Volunteer supervision sessions were ongoing throughout the year, in accordance with our Home-Start UK standards for frequency, and in addition, we held two event in 2019-20 to celebrate and reward volunteers involved – Volunteers' Week "Celebration of Commitment" (7.08.19) and Christmas Lunch (3.12.19). Volunteers and wider supporters also received a termly newsletter.

# **Partnership Working**

We believe in the value of working collaboratively, both within our own organisation, and across the Children and Families Field both locally, and further afield. We have initiated a formal Partnership with the two other Home-Start charities in Leicestershire (Home-Start NW Leics, and Home-Start Horizons) and held joint development/support meetings at intervals throughout 2019-20, and continue to be engaged together in the county-wide Active Families Project, led by Leicestershire County Council, and involving the Leicestershire District Councils.

To support local collaboration, sharing and networking, Home-Start South Leicestershire hosts a twice annual Harborough District Family Practitioners' Networking Session, maintaining a database of over 150 relevant contacts within the private, voluntary and statutory sectors to whom relevant information is regularly circulated. The networking sessions this year were held on 18<sup>th</sup> June 2019, and 18<sup>th</sup> November 2019 and attended by 19 and 17 delegates respectively.

A representative of the organisation has also regularly attended the Harborough District Think Family Partnership, which is hosted by the organisation, the Harborough Locality Integrated Leadership Team meetings (East Leicestershire and Rutland Primary Clinical Commissioning Group), Voluntary Action South Leicestershire Mental Health Forum, Market Harborough Multi-Agency Meeting (Leicestershire Adult Learning Service), and the Safeguarding Trainers Network (Leicestershire Safeguarding Partnership).

# **Review of Projects**

# **Project Aims**

# Family Know-How Project

The Family Know-How Project key aim is to support families with complex needs who need support to understand and develop healthy family lifestyles & routines which ensure their children have the best opportunities to thrive physically and emotionally. The criteria for referral to the project are one or more of:

- Low parental confidence or self-esteem;
- Lack of understanding of how to lead a healthy lifestyle;
- Chaotic family lifestyle which makes it hard to build in healthy routines, to plan ahead, or to prioritise their own or their children's longer-term wellbeing.

#### The Family Post Natal Illness Project

The Family Post Natal Illness Project is focused on those families where there is a suspected or diagnosed Post Natal Illness concern relating to one of the main care givers in the family. The specific criteria for referrals to the service are:

- At least one parent carer with a diagnosis or suspicion of Post Natal Illness which impacts on their parenting ability.
- At least one child under 5 years in the family is at risk of developing emotional, social and behavioural difficulties.

#### **Young Parents Project**

Provide support to young parents (under 21 years) with a least one child under 5 years in need of additional support. One to one support is provided by the Coordinator, with a weekly group for parents to attend with their children.

# **Active Families Project**

To increase the level of family physical activity enjoyed together by families referred to the project from the Leicestershire County Council Children and Families Wellbeing Service. Criteria for referral is:

- Families receiving support through the Children and Families Wellbeing Service
- Families with a least one child aged between 5 and 15 years
- Families with difficulties achieving or maintaining a healthy level of physical activity within the family

# **Summary Delivery Outputs**

Types of Support	Co-ordinator	Home-Visiting	Group Support	Courses
Project	Support	Support (Volunteer)		
Family Know-How Project	Ongoing to <b>57</b> families	321 hrs support to 13 families	19 Market Harborough sessions supporting 25 families and 19 Lutterworth sessions supporting 17 families	2 x 6 week Healthy Lifestyle Courses – 4.09.19 to 9.10.19 with 4 parents; 8.01.20 to 12.02.20 with 4 parents.
Family PNI Project	Ongoing to <b>54</b> families	125 hrs support to 6 families	19 Market Harborough sessions supporting 24 families and 20 Broughton Astley sessions supporting 22 families	2 x 6 week Post Natal Illness courses – 30.10.19 to 4.12.19 with 6 parents; 26.02.20 to 3.04.20 (pending completion) with 6 parents
Young Parents Project	Ongoing to <b>14</b> families	N/A	44 Market Harborough sessions	N/A
Active Families Project	Ongoing to <b>9</b> families	43 hrs support to 5 families	N/A	N/A

# **Summary of Results/Achievements**

Family Know-How Project 2019-20			
Ended with scores (18) and Ongoing reviewed (24) Families -	89%		
with Partially/Fully Achieved Outcomes			
[8 ended – unplanned without scores]			
2018-19 – 59 supported families	91%		
2017-18 – 70 supported families	69%		
2016-17 – 60 supported families (pilot year)	78%		
<b>General Family Situation</b> – of all <b>57</b> supported families in 2019-20			
1. Low Income	48%		
2. Domestic Abuse / Parental Conflict	25%		
3. Mental Health	48%		
4. Disability	16%		
5. Substance Misuse	4%		
Family Feedback Quotes:			

can talk openly and honestly without being judged. It also helps with being sociable as I always felt isolated. "

"The group has been fantastic and very informative, especially budgeting. The group has been very fun and helpful cooking in a stress-free environment."

"Thank you, you've really helped me cook on a budget from scratch and helped my healthy eating gluten free! Can't thank you enough"

Family PNI Project	
Ended with scores (26) and Ongoing reviewed (18) Families -	91%
with Partially/Fully Achieved Outcomes	
[5 ended – unplanned without scores]	
2018-19 – 52 supported families	92%
2017-18 – 50 supported families	75%
2016-17 – 39 supported families (pilot year)	85%
<b>General Family Situation</b> – of all <b>54</b> supported families in 2019-20	
1. Low Income	21%
2. Domestic Abuse / Parental Conflict	7%
3. Mental Health	100%
4. Disability	2%
5. Substance Misuse	2%

#### **Family Feedback Quotes:**

"Such a welcoming environment. It shocked me that PNI is real not just me and my head."

"Each week I start to identify more and more with myself and why I feel the way I do.

Every week gives me strategies to improve and become a better person."

"It's a very important course and very useful. It has helped me tremendously! I feel supported and I feel good about myself and my parenting ability because I can cope more."

"I feel more confident going forward with my counselling with Quetzal now that I have looked at the post-natal aspect."

Young Parents Project	
Ended with scores (5) and Ongoing reviewed (4) Families - with	75%
Partially/Fully Achieved Outcomes	
[1 ended – unplanned without scores]	
2018-19 (Project Start - Sept) – 7 supported families	80%
<b>General Family Situation</b> – of all <b>14</b> supported families in 2019-20	
1. Low Income	86%
2. Domestic Abuse / Parental Conflict	7%
3. Mental Health	64%
4. Disability	0%
5. Substance Misuse	7%

#### **Family Feedback Quotes:**

"I think the group is very welcoming and friendly. It is also supportive if you need someone to talk to."

"I like us all getting together for a meal at the table."

"It has helped me become more confident in myself and has given me the experience to go to a different group as well."

# **Active Families Project**

Ended with scores (3) and Ongoing reviewed (2) Families - with Partially/Fully Achieved Outcomes	83%
2018-19 (Project Start - Sept) – 4 supported families	63%
<b>General Family Situation</b> – of all <b>9</b> supported families in 2019-20	
1. Low Income	67%
2. Domestic Abuse / Parental Conflict	33%
3. Mental Health	67%
4. Disability	22%
5. Substance Misuse	0%

#### **Family Feedback Quotes:**

"Being part of this project has been really good...It has been really nice doing family things together with the children and being part of the project has helped me to get new ideas...I definitely feel more inspired to be more active."

"I found the project very good. It gave me more ideas about what I could do with my children...it was great to see my children mixing with other children. They find it difficult to mix but they did it, and it was good to see that people were kind."

# **Exit Strategies – Ended Families**

**65** families ended support during the 2019-20 financial year (with or without final outcome scores). In terms of where they went from Home-Start, this can be broken down into the following categories:

Accessing mainstream services/support no longer required	25	Main carer returned to work or training	13
Accessing another HSSL project	1	Accessing another targeted service outside HSSL (children's centre, social care intervention)	6
Parent no longer able to attend due to other service clash (nursey place etc.)	0	Unplanned ending/disengagement	13
Moved from area	7	Inappropriate for Home-Start support	0

#### Appendix A

# **Project Case Studies**

#### **Family Know-How Project**

At the point of referral, Mum was 20 and her partner 24. They had a son C who was 9 months old. The family was referred to us by the LCC Children and Family Wellbeing Service (CFWS). The issues were as follows;

- C had a developmental delay. He was unable to sit unaided, was only partially sighted, had poor muscle tone and there was a query regarding a possible genetic disorder. C was also overweight
- Mum had very little family support.
- Her partner worked away from home for weeks at a time.
- Mum and her partner had significant financial debt.
- Mum had her own health needs and allergies.
- Mum suffered with poor mental health largely due to the concern re her son's development, her increasing financial debt and her social isolation.

#### **HSSL** support:

An initial assessment of need was made and information about FKH group provided.

Mum and C attended the group for the first time after this. To begin with Mum was very anxious and nervous in the group. She felt her parenting was being judged as C was not making the same developmental progress as the other children.

Mum was supported by staff and group volunteers to build her self-esteem and confidence in her parenting. It was noticed that Mum enjoyed messy play and this became a focus of her time with C with positive benefits to both. C also bonded very well with one of the group volunteers increasing his confidence and social skills.

Mum was referred to the Mobile Toy Library for resources to aid C's physical development and to the local Library for audio books.

Mum was referred to the CFWS for an ante-natal group as she was now expecting a second child.

Mum was regularly issued with food bank vouchers whilst her financial situation was so challenging.

Mum completed the FKH Healthy Lifestyles course and benefited a great deal with this especially from learning to cook from scratch and creating gluten free recipes. This also supported Mum's commitment to keeping herself and he children more active.

After the course Mum was matched with HSSL home visiting volunteer who spends time one to one with the children allowing Mum time to complete practical tasks and admin in the home. This has now enabled Mum to take the necessary steps to engage with a debt support charity and a Debt Relief Order is now in place.

C is making great progress, his vision is now perfect and he has been discharged from the Paediatric team.

C's weight is under regular review by the health visiting team but is currently stable.

C's physical development has great increased, he is walking and riding a balance bike, and he starts preschool later in the year.

#### **Family Post Natal Illness Project**

Child A was born at 33 weeks, and has chromosome, heart and blood vessel disorders, and experiences seizures. Her mother had experienced Post Natal Illness at the time, and she was now 3 years old, and her mother was expecting another child and concerned the illness would return. The family were isolated from extended family, and dad worked away most of the time. The family also experienced financial problems including debt. All this was impacting on the capacity of Child A's mother to care for her, and her new sister when she was born. Child A's development was significantly delayed, affecting her speech (she uses Makaton to communicate basic needs) and mobility also (she wears a protective helmet as she falls often and takes big risks in movement).

Child A's mother brought her to the Home-Start group after much encouragement, as she was nervous having never attended any groups with her children, and concerned about how her child's behaviour, which had become challenging after the birth of her sister, would be perceived. One to one advance support was given to prepare the family for the group session.

Over time, Child A's confidence has grown. She presents as a very likeable child, eager to make social connections with both other children and the adults at the group, despite her difficulties with communication. The group has incorporated Makaton into the songs so all attending can learn and engage with her. Due to the amount of support in the group, Child A was able to have one to one time with her mum again, which improved her relationship and behaviour. She was very proud of the things she created in craft and sensory play activities. Photographs of children in positive play activities are taken at the group, and Child A was delighted with her photographs, and her mum reported she was very eager to take them home to show her dad. Mum explained that due to her mental health she hadn't taken many photos of the children.

Child A loved the routine of the group, and was very aware of what activity was due next. At snack time or story time she would help the volunteers prepare, and use gestures to let the other children and parents known what was happening. She thoroughly enjoyed joining in with story time, sitting and concentrating for a long period. She would also confidently use her Makaton to let staff know what song she would like to sing. She also took on the role of handing out the photographs from the previous week at the end of the session.

After some months of support, Child A's mum confirmed that she felt much better because of the help she had had, both with Child A and in understanding her own mental health triggers. She agreed to a referral to a weekly group specifically for children with disabilities, and to a local Toy Library for children with disabilities and additional needs.

# **Young Parents Project**

F is a 17 year old parent, referred to the young parents' project by her health visitor to reduce isolation, increase access to information, advice and services and enhance her parenting skills. When she first started attending the group, F's children were 15 months and 2 months old. She was living with her mother and sister and in the process of applying for her own accommodation. When she first started coming to the group, F was happy to speak when spoken to, but was obviously lacking in self-esteem and confidence and did not initiate conversation. By 5 months after support, she became a committed and engaged member of

the group and a lot more confident to speak out. She has taken part in cooking activities, crafts and group discussions about topics such as safe sleep, weaning, sexual health and internet safety. When F's housing application was processed, she asked for support to obtain safety equipment, and used her own initiative to source white goods and carpets. F has commented that her children enjoy the routine of the group, and her older child started asking for some of the songs to be sung at home. F loves seeing her children interact with other children and loves having her own peer support network and the volunteers to chat to. She has become firm friends with one of the other parents and they are starting to socialise outside of the group.

As at August 2019 F continues to be a regular and committed member of the group. She is a lot more confident to express her opinion in group conversations and with staff/volunteers than she used to be. She is also much more engaged in parent-child activities.

F has been living in her own first floor flat for a few months, but has found it to be logistically unsuitable with two young children and a double pushchair. She asked for support with informing housing of this matter to help her move to a more suitable property in the near future. F has also asked for support to replace a broken fridge freezer, and we approached the Market Harborough & The Bowdens Charity to fund this, which was successful. F is much more inclined to ask for help now than when she first started attending the group, and is also much more motivated to take responsibility to "do her bit".

# **Active Families Project**

The family includes a single mother plus her four teenage children. Child 1 is a 17 year old girl, has a diagnosis of ASD, hole in heart and previous Anorexia Nervosa. Currently undertakes no physical activity. Child 2 is a 16 year old girl and attends dance and theatre college. Not participating in this project as very physically active and long days at college. Children 3 and 4 are twin boys aged 14. Child 3 enjoys keeping fit and goes to the gym and karate on a regular basis. Child 4 has a diagnosis of ASD, is experiencing social and educational challenges and is increasingly aggressive towards mother and child 1. Currently undertakes no physical activity.

Our volunteer (V) was matched with the family just before Christmas 2019, and started her Active Families role in January 2020 after a pre-Christmas visit to build relationships. Due to the busy nature of the household, the only mutually compatible time was found to be Fridays between 3 and 5pm. The agreed action was for V to arrive with enough time to offer some emotional containment to mum before the children arrived home from school. Mum does not have a circle of friends locally to whom she feels she can talk freely about her parenting challenges. She also doesn't discuss her troubles with her parents. She is used to professionals being involved and undertaking assessments, so this befriending support was felt to be of huge importance to support mum's mental health.

When all participating children have arrived home, V's role is to support the whole family to play an active game together. As the weather improves, this is gradually moving to outside activity, including local walks and ball games.

In her recent three month review, mum stated that the whole family look forward to V coming, as this is the only time they have to bond together. She finds the playfulness of the activity helps the family have fun together- something that is lacking at other times. At present, mum relies on V's energy and calm, non-judgemental presence to give her the confidence to play with her children. At other times, she feels overwhelmed by the conflict within the family.

The overall feeling of this volunteer support is that it is highly valued respite from the otherwise very stressful lives of the family members.

# Appendix B Child Case Studies

#### **Improved Confidence to Play**

Children who have experienced significant progress include those whose confidence to play has increased considerably, observed by active engagement in all play activities in the groups or course children's activities, roaming confidently away from parents. For example, a 3 year old child from a local Traveller community, who did not access any groups with his carer, was very apprehensive and anxious for the first two sessions, but his delight at seeing the toys and activities available to him resulted in him wholly embracing the play opportunities, increasing his confidence in the group, and developing his language. Another boy whose parent experienced childhood trauma and was detached from her son, and was reluctant to join the group at first, is now a regular attendee and has developed his confidence immensely, and is now meeting his developmental milestones.

## **Improved Social Interaction with Peers**

Children experiencing significant improved social interaction with their peers have been able to join in or initiate shared games and joint activities happily with other children, begin to develop and use speech through interactions with other children, or for very young children to show interest in other children in the group. An example of this is a 4 month old baby who comes to the group with his 17 year old mother who is rurally isolated, living with her parents in a village and very nervous of travelling to the group. As a result the parent's mother took time off work to bring her and her child to the group. As a result, the child has grown significantly in confidence, actively seeking contact with other children and adults. Another child, whose mum experiences acute anxiety, and had been using her daughter as a personal comfort and shield, has gradually become more sociable. With lots of positive reinforcement, role modelling, praise and encouragement she now initiates play with other children, informing them when it's snack time, or story time, and has some strong relationships in the group.

# Improved relationships between parents and children

Children who have experienced significant progress in their relationship with their parent are those where the groups, or course children's activities, have increased parents' pride in their children's abilities to engage in the activities (such a making food items to take home) which has consequently allowed the children to feel pride in themselves and to be happy to have pleased their parent. Additionally, children and parents who have had highly positive moments through shared play together have created positive memories to reflect on and to recreate at home. An example of this is a boy who was exhibiting very challenging behaviour which his parents found difficult to cope with, and which isolated him and the family. With lots of support and advice to the parents who responded positively and provided lots of stimulating activities at home, having learned ideas through the groups they all began to enjoy spending time together, leading to a positive cycle of improving relationships. Another child struggled to form a strong bond with his mother, due to Post Natal Illness. Over time, through attending the group regularly, the bond has significantly improved with his mother now showing great care towards him, and increasing in confidence to attend other groups with him. Her son now displays emotions of feeling secure, loved and understood.