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Qualitative Evaluation of Flying Start

Research

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Qualitative Evaluation of Flying Start

Audience   Children and Young People's Partnerships, local authorities, national, local and voluntary organisations concerned with early years, children and young people's policy and provision in Wales.

Overview   This report presents the findings from the qualitative evaluation of Flying Start, which examines the user experience and outcomes of Flying Start for families. Through interviews with providers and users of Flying Start entitlements, the report explores the extent to which Flying Start provision is available and accessible. It also investigates the experience of service engagement and any impacts on families as a result of Flying Start.

Action required   None – for information.

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Additional copies   Further copies may be obtained at the above address.
This document can also be accessed from the Welsh Assembly Government website at: www.wales.gov.uk/educationandskills

Related documents   *Flying Start and Cymorth: An Interim Evaluation Report* (2009)

Foreword

The structure of the report clearly outlines the key areas of research and reflects the core objectives of the project. The report consists of five main chapters. The opening three chapters focus on the main strands of Flying Start service provision:-

Chapter 1 – Childcare

Chapter 2 – Parenting

Chapter 3 – Language and Play (LAP)

Within each of these chapters we will consider user experience and outcomes of the delivery of Flying Start for families, and use three of the four central research objectives to structure our reporting. The first three chapters are broken down into the following sub categories:-

- **Awareness and take up** in line with the objective to 'identify the extent to which Flying Start provision is available and accessible'.

- **User Attitudes** in line with the objective to 'analyse the perceived quality of Flying Start provision from the point of view of the parents, and the experience of service engagement'.

- **Outcomes** in line with the research objective to 'identify any impacts as a result of service provision'.

- **Provider views** in order to consider what providers of the service think of the service they provide and what is important to effective service delivery.

- Throughout the report we will also consider **Areas for Improvement** for Flying Start service provision on the basis of both user and provider experience.

The final two chapters of the report are:

Chapter 4 – Non-Users

Within this chapter we consider the two main types of Flying Start non-user; those who are unable to use Flying Start services, either due to a lack of information about what is available, or due to existing work commitments; and those who choose not to engage with Flying Start services for a specific reason. For each of these two broad groups we consider the specific reasons for non-use of Flying Start.

Chapter 5 – Integration of Services

The fifth and final chapter will draw on all preceding chapters to consider the second core research objective, 'establish if the various elements of Flying Start provision work as a package to support families with young children, or as separate elements' both from the perspective of the user and the provider. We employ a case study style approach to outline instances of best practice and areas for improvement. Furthermore, we will also incorporate relevant but unexpected findings from the fieldwork.

Acknowledgements

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Qualitative Evaluation of Flying Start

Introduction

Ipsos MORI was commissioned by the Welsh Assembly Government to conduct a qualitative evaluation of Flying Start in Wales. The study is one strand of a larger evaluation of Flying Start that the Assembly Government is carrying out, which is being undertaken by Ipsos MORI, SQW Consulting and the University of the West of England.

The Flying Start programme provides targeted investment for children up to the age of four years in the most deprived communities across Wales. Its primary aim is to improve the outcomes for children in these areas, with a long term focus of reducing the number of people with very poor skills and developing a more high-skilled economy. The main elements of the Flying Start programme are:-

- free part-time, quality childcare for two to three year olds (and for the under twos where a need exists);

- enhanced Health Visitor support;

- parenting programmes; and

- basic skills including the language and play programme (LAP).

This research project is focused on three of the four entitlements: childcare, parenting and LAP. Although health visiting is a Flying Start entitlement, due to resource constraints, the decision was taken to focus on the other entitlements. Health visiting is considered and discussed throughout the report, but more in terms of how it can provide a 'link' to and between the other three services as opposed to a detailed discussion of how health visiting specifically is working on the ground.

Aims and objectives

The key aim of this research was to explore the user experience and outcomes of the delivery of Flying Start for families.

Research took place in five areas across Wales, and in each, interviews were conducted with stakeholders, service providers, service users and non-users.

The main research objectives were to:-

- identify the extent to which Flying Start provision is available and accessible;

- establish if the various elements of Flying Start provision work as a package to support families with young children, or as separate elements;

- analyse the perceived quality of Flying Start provision from the point of view of the parents, and the experience of service engagement; and

- identify any impacts as a result of service provision.

Qualitative research was chosen for this project because of the in-depth information it can yield; one-on-one interviews and family case studies are an effective method of exploring not only *what* parents think and know about the provision they are offered, but also *why* and *how* they do certain things. The more open and flexible lines of questioning used in qualitative research provide a wealth of information, both general and specific, and can create a strong foundation and provide guidance as to the potential focus for research in the future.

Methodology and recruitment

Of key importance to this research was the selection of the five areas. While Flying Start is now operating in all Local Authority areas in Wales, provision varies by region, with some areas providing all elements of the programme fully, and others still in the early stages of implementation. As the research focuses on the parents and their experiences of accessing and using Flying Start, the most satisfactory approach would have been to visit the five most fully operational areas. However, it was important to account for other issues, such as whether or not the Local Authority would be undergoing an inspection at the same time; whether or not they were currently involved in any other research projects; and how long ago they were last visited by researchers working on the larger Flying Start evaluation.

A full assessment of all elements led to the selection of five areas, spread across Wales with a good mixture of both urban and rural regions. During the course of this report, the areas will be referred to by the letters A-E, to ensure that areas are not identified, but facilitating an understanding of how different elements in each area are working together.

The fieldwork for the project involved two key stages: stakeholder interviews; and the main stage fieldwork with providers and service users.

Organisation Interviews

This initial phase involved carrying out four depth interviews with key stakeholders in each area. This would always include the Flying Start Co-ordinator or Manager in each area, plus three other people nominated by them, who they felt had a significant input into the management and delivery of Flying Start. These other interviewees included a mix of co-ordinators for childcare, parenting and LAP, Flying Start teachers and health visiting representatives. All of the five areas nominated an interviewee with responsibility for health visiting.[1]

All respondents were recruited by telephone and with the help of the Flying Start Co-ordinator or Manager in each area. All appointments were set up in advance and the majority of interviews were conducted face-to-face at Flying Start offices. Interviewees unavailable for face-to-face discussions were interviewed by telephone at a time of their convenience.

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[1] The job titles of health visiting representatives spoken to included: Health Visitor, Lead Health Visitor, Health Co-ordinator, Specialist Health Practitioner and Flying Start Casework manager (with responsibility for all Health Visitors).

Main-stage fieldwork

This main fieldwork period typically ran over four to five days in each area. The aim in each case study was to conduct:-

- six provider interviews: two childcare providers, two parenting providers and two LAP providers;
- eight family case studies; either single, or paired depths with families using Flying Start services; and,
- four non-user interviews; people eligible for Flying Start services but choosing not to engage.[2]

In almost all cases, provider interviews were set up in advance, arranged via telephone. Interviews with users and non-users were largely arranged in the field, with researchers 'recruiting' respondents through attending Flying Start provision and talking in depth with the providers. In some cases, user and non-user interviews were set up prior to the visit, thanks to invaluable help from Health Visitors and service providers.

The key challenge for this piece of research proved to be the non-users. Detailed discussions with co-ordinators in each area prior to the start of fieldwork revealed that these were a hard-to-reach group, primarily because they are so small in number. In one area, only nine families had opted out of Flying Start provision, and their reasons for doing so were valid; they were moving out of the area, already had private childcare, or had a child at an age which almost made them ineligible.

On learning this, the definitions of 'users' and 'non-users' were revised as follows:-

A user – a parent or family engaging with at least two Flying Start services, for example the childcare service plus something else.

A non-user – a parent or family not engaged with Flying Start at all, or those using just the childcare service and nothing else.

Fieldwork and discussion guides

The organisational interviews were conducted during March 2009. The discussion guide was developed in conjunction with the Welsh Assembly, with input from the larger evaluation team.

The main-stage fieldwork was conducted by experienced researchers who visited the areas in pairs talking with providers and service users from all aspects of the Flying Start programme. Three discussion guides were developed for the main-stage; one for providers, one for users and one for non-users.

Copies of all discussion guides are available on request.

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[2] A breakdown of interviews achieved in each area can be found in the appendix.

Interpretation of the data

While qualitative research was the most appropriate methodological approach for this study, it is important to bear in mind that it utilises smaller samples that are chosen purposively, to ensure representation of a full range of views within the sample. Qualitative research is designed to be illustrative and does not look to produce statistics; this needs to be taken into account when interpreting the research findings. In addition, it is important to bear in mind that the research deals with perceptions rather than facts (though perceptions *are* facts to those that hold them).

Throughout the report we have made use of verbatim comments to exemplify a particular viewpoint. It is important to be aware that these views do not necessarily represent the views of all participants. Where verbatim comments have been used, the respondent's attributes are given in the following order: respondent 'type', gender and location.

Executive Summary

Introduction

The primary aim of the Flying Start programme is to improve outcomes for children in the most deprived communities across Wales. Targeted investment is dedicated to offering free part-time, quality childcare for two to three year olds, enhanced Health Visitor support, parenting programmes, and basic skills including the language and play programme (LAP).

The key aim of this research project (which focuses on childcare, parenting and LAP provision) was to explore the user experience and outcomes of the delivery of Flying Start for families. Research took place in five areas across Wales, and in each, interviews were conducted with stakeholders, service providers, service users and non-users.

Childcare

- Almost all service users are engaged with childcare even if they are not aware of other Flying Start provision. In areas where the Flying Start identity is weaker, parents often think that childcare is the only service provided.

- Information about childcare tends to come from the Health Visitor, but the level of information received through this source is often dependent on area.

- Childcare users tend to take up their full allowance of free childcare and are very positive about the quality of provision and how much their children enjoy attending.

- All parents whose children use the childcare service have been impressed with the progress their child has made since attending. Some key benefits raised include:-

  - **improved language, literacy and numeracy,** including advancements in Welsh language;
  - **social development and behaviour** i.e. children more confident and independent, able to interact better with both children and adults;
  - **a change in activity levels**, notably an increased interest in activities such as drawing, singing and reading as opposed to watching television; and
  - **wider family effects** such as changes to the family routine due to more controlled, better behaved children. Parents also meet other like-minded parents at the settings, and have extra time to do chores, shopping etc.

- Childcare providers are also very positive about how the provision is running on the ground. They seem engaged with Flying Start and proud to be part of a service which aims to improve family well-being in the local community.

- Providers focus on providing the best possible service, rather than being concerned with the overall coverage of Flying Start and reaching eligible parents. Some do try to raise awareness of Flying Start and develop community outreach mechanisms.

Parenting

- In most areas, awareness of Flying Start parenting courses is low, even amongst those parents who are engaged in Flying Start childcare.

- In some areas, parents are not being made aware of parenting courses by Health Visitors, finding out via word of mouth, posters or leaflets. Often, course attendees do not realise Flying Start are running them, and seem surprised that this is the case.

- There is often a stigma felt to be attached to parenting courses, which some parents see as an arena in which their parenting skills could be openly criticised. It is vitally important that parenting courses are approachable, and clearly distinct from social services or anything that might imply parents are incapable.

- Users of parenting courses have had extremely positive experiences and benefit hugely from attending. Some courses are extremely relaxed but others are quite structured, and it is these that seem to engage parents more successfully. Groups of around 6-8 people are preferred by parents and providers.

- Operating from a suitable venue is the biggest problem for parenting courses. Both parents and providers would like to see specially designed venues with a crèche for the children (who can be disruptive to groups if no suitable childcare is available).

- Course attendees mention their improved confidence levels which have led to a stronger relationship with their child. Learning how to improve their child's routine is a strong benefit which can impact on the family as a whole.

- Parenting providers feel that their courses can truly benefit parents, but acknowledge that the real challenge is getting parents through the door in the first place, and then maintaining their attendance from that point onwards. Unfortunately there is a high drop-out rate for some courses.

- Positively though, providers are able to identify specific areas on which attention could be focused to try and improve take-up and maintain attendance:-

    - **building parents' self esteem and confidence**, perhaps through group bonding sessions prior to the start of the parenting courses;

- **raising awareness of the provision** through marketing and advertising – there are suggestions that a stronger association with the popular Flying Start 'brand' could help;

- **gaining more Health Visitor referrals**, something that could be improved through closer relationships between providers and Health Visitors. It may be that co-location is the key to this process;

- **ensuring a suitable location and venue**, which as mentioned should preferably include an adjoining crèche for the children; and

- **ensuring the course content is the most appropriate** – sometimes providers feel that the content of some courses is not suitable for the parents in their particular area. It seems that some courses are more successful than others depending on the area in which they are run.

Language and Play

- Language and Play (LAP) courses are very prominent and popular in some areas, but less well established than childcare and parenting courses in others. However the common thread running through all areas is the lack of awareness among many parents (including those who use the LAP courses) that they are run by Flying Start.

- In most areas, providers feel that Health Visitors could be doing more to make formal referrals and get parents through the doors.

- LAP courses tend to have a less structured progression than parenting courses and seem to be taken less seriously by users. As sessions often involve taking part in activities such as singing and dancing which some parents find embarrassing, users say they prefer to know someone else in the group before they attend.

- Attendees are very positive and enjoy learning new tips to help them bond with their child. Things such as singing, dancing and reading together are all things that parents implement as a result of attending, and can impact positively on the language development of children.

- LAP providers believe that parents benefit a great deal from the service, particularly with regard to the stronger bond that LAP can encourage between parents and their children and the language and numeracy development for the child.

- They stress the importance of a 'softly softly' approach, feeling that parents need time to acclimatise to the course, and that sometimes, six weeks is not a long enough period to build up trust. Having lead-in sessions is something that can help with this.

- As with parenting courses, a lack of dedicated venues for LAP can be a barrier to delivering courses successfully.

Non-users

- Those who do *not* engage with Flying Start services are usually choosing not to for a specific reason, or unable to, possibly through a lack of information about what is available or existing work commitments.

- Those who are unaware about what is available, often have a poor relationship with their Health Visitor, or do not see them frequently. Not knowing exactly what the different types of provision involve is a real barrier to participation.

- Some non-users had found out about provision on their own i.e. without advice or direction from a third party and were keen, but found that they had to jump through hoops to get the information they required. Online information would be a popular option, and clear accessible information may be all that is needed to encourage attendance in some cases.

- Parents who work can struggle to fit Flying Start services around their career. If courses ran at flexible times e.g. early morning, late afternoon, evenings or weekends, more working parents may be able to make use of the services.

- Those who make a conscious decision not to engage with Flying Start childcare are few in number, but usually do so because they have a strong network of family and friends whom they can rely on to help care for their child. Some parents are not keen on leaving their child at such a young age or worry they will miss out on their child's development.

- Those who choose not to engage with parenting or LAP courses commonly hold the opinion that they are unnecessary, particularly if they have older children or feel confident in their parenting abilities. Again, there is evidence that courses are seen as judgemental and this pre-conception can act as a barrier to engagement.

Integration of services

- Ideally, the childcare, parenting and LAP services should be fully integrated, working together with the support of the Health Visitors, to ensure that the wide-ranging needs of all families are met.

- The degree of service integration differs from area to area, but while a more advanced and integrated programme is in operation in some areas, in others, Flying Start services largely operate separately, and it seems that more could be done to bring them together as one, joined-up service.

- Potential improvements could be made to the integration of services through:-

  - **equal visibility of services** - while the free childcare is the most widely used element of Flying Start, it should not be the only element that parents are aware of, and currently in some areas, this is the case;

  - **co-location and communication** - having one central location for the core Flying Start team and the providers can have a large impact on

how well the various Flying Start staff communicate and share information;

- **information** - Flying Start branded leaflets and posters can go a long way to informing parents about Flying Start provision as a whole and increasing uptake; and

- **health Visitors**- they have a crucial role to play in presenting Flying Start as an integrated programme of services to parents, acting as an intermediary between the providers and potential users.

Chapter 1: Childcare

Introduction

Within the Flying Start programme, all eligible parents[3] are offered 12.5 hours of free childcare a week, from a variety of settings across the local authority. The childcare settings are either dedicated Flying Start providers, often running from purpose built venues, or they are existing private childcare providers who offer a limited number of Flying Start places to eligible parents.

Almost all service users are engaged with childcare provision even if they are not aware of other Flying Start provision. This chapter outlines the accessibility and take-up of childcare provision, the attitudes of the services users, the outcomes noted by users as a result of attending the childcare, and the views of the childcare providers themselves.

Awareness and take-up

Accessibility/visibility

- Branding/Identity

  In some areas where the identity of Flying Start is less strong, the parents think that the childcare *is* Flying Start, believing that it is the only service being run by Flying Start. In Areas D and E, this is likely to be because the Flying Start branding tends to be very clear, with Flying Start posters and signs highly visible both in and around the childcare settings.

- Information

  Parents using the Flying Start childcare service, tend to find out about it from their Health Visitor in the months prior to their child's second birthday. For many parents, this is the first time they learnt of their eligibility for the service, but some mention that their Health Visitor had informed them about the service earlier, not long after the child was born. However, it seems that the role of the Health Visitor varies widely depending on the area, and in fact, can vary within areas. In Area D for example, Flying Start Midwifes played an information provision role similar to that played by Health Visitors.

On the whole, parents do not see their Health Visitors very often, but this is to be expected given that their children are now a little older. However, some do say they that see their Health Visitor on a regular basis. Those who are pleased with their Flying Start Health Visitor often praise the fact that they are visited in their home, and receive a personal, friendly service. Several parents have older children, and therefore have experience of non-Flying Start Health Visitors. They are able to make comparisons between the service they receive now compared to then, and some mention that things are much better now than in the past when they had to visit a

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[3] All those with children aged 2-3 (or under 2 where the need exists).

clinic or doctor's surgery, and would often see a different Health Visitor each time, making it difficult to form a relationship with them.

"I think with Flying Start they tell you more of what's happening in our area and what's going on, and different carnivals and stuff. But with our Health Visitors in the doctor's, you didn't have none of that, it was just a baby clinic which was with the Health Visitor."

Flying Start user, Area B

"Since Flying Start it's a lot, lot better because before it was a clinic was down the road on a Thursday and you could see any Health Visitor, but you … would talk to them in a room with other people … didn't get any one to one time with them whereas now …. they come out to the house."

Flying Start user, Area C

There is also some positive feedback about the level of information Flying Start Health Visitors provide, and the fact that they take the time to listen and advise on any problems. In some areas it is clear that the role of the Health Visitor is crucial, and without them it seems unlikely that eligible users would have had the knowledge to access the childcare provision available to them.

"I've been really, really happy with the help we've had [from Health Visitors] … I don't know, I just feel comfortable with them, I think. Because, just feel like you can ask them and you don't feel that they're, I don't know, looking down at you or think you're being stupid for saying certain things … yeah, they've just been really nice and friendly."

Childcare user, Area C

"Very good [service from the Health Visitor] because otherwise I wouldn't have known anything. I would have just had to keep struggling along."

Flying Start user, Area E

However, some parents do have criticisms of their Flying Start Health Visitor, primarily regarding the level of contact they have with them and therefore the information they have received. Often, these parents felt less informed about Flying Start than those who say their Health Visitor provided them with more detailed information - some say that their Health Visitor has never mentioned Flying Start childcare provision, and they found out about it through word of mouth, usually from friends or family with slightly older children who were already using the service.[4]

"The Health Visitor? Not so good, not so good with the Health Visitor, but the Flying Start teachers or whatever you want to call them, brilliant. [The Health Visitor] doesn't have a lot of contact with you, she pushes you in the right direction but then when she's done that you don't hear nothing else … if she would have had more contact it would have been much better but I don't even know her name - that's how bad it is."

Childcare user, Area B

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[4] A more detailed assessment of the role of the Health Visitor can be found in Chapter 5: Integration of services.

"I suppose looking back it could've been a bit more informed. I think just basically more information of what Flying Start is and the purpose of it really and what type of things the children would be doing and not just … "a free two hours childcare every day.""

Flying Start user, Area A

Several parents mention that they have not had one consistent Health Visitor, and this can cause some problems; one mother had been through four Flying Start Health Visitors, and although her original opinion of them had been very positive, the constant switches had led her to become frustrated with the service.

"When she was a newborn they were brilliant, but because there's been so much swooping and swapping with Health Visitors, we don't even know who's ours is anymore. So, not so much now at her age, but when she was younger, yeah, we had a lot of support from them and they were really good."

Flying Start user, Area B

Take up of childcare provision

Most of the parents who are eligible for the Flying Start childcare do take up the offer, and most parents use the service regularly, sending their children for 2.5 hours, five days a week. This is something confirmed by the providers in all areas, who say that only a few parents send their children less often, though some do choose to start their child off with one or two days weekly and build up to the full week's attendance. However, there is still some feeling amongst some users of Flying Start services that not all eligible users in the local area are taking up the offer of childcare provision, although it is unclear to what extent this is true.

"I think there's still loads and loads of people that need to know about it, and especially the likes of young single mothers and things like that that aren't coping…"

Childcare User, Area C

User attitudes

Perceptions of service provision quality

Parents are overwhelmingly positive about the quality of childcare provision offered to them, and are particularly complimentary about the friendly and approachable staff and the range of activities and toys available to their children.

"The staff are brilliant with them and … if your child falls and cuts his knee open you've got an accident report straightaway. I don't know…it's nothing like a normal crèche, it's just, it's good isn't it? We've never had no problems here, never."

Childcare user, Area B

"It's really good because they've got so many different things and every day they've got something different … they take the children up the garden now the weather is

getting nice and the kids absolutely love that. We're coming to pick them up and you can hear them shouting and playing - they're happy."

Childcare user, Area E

Most parents are satisfied that the provision is available at convenient times, but a few parents in areas C and D mention that it would be nice to be able to take-up their allotted 12.5 hours of childcare per week in a variety of formats, rather than their child attending for 2.5 hours each day. Perhaps, for example, the child could attend two sessions in one day, and have another day entirely free to spend with their parent. This is of particular importance to working parents.

The location of childcare settings is also something that many parents are pleased with, as in most cases they are very close (often within walking distance) of their user community. In some areas however, parents do mention that the location of the childcare settings could be improved. In Area A for example, some parents have a '*bit of a trek'* to their setting because the most convenient route goes through school grounds which non-school staff or pupils are not allowed to cross. Furthermore, for those who travel by car there is a lack of parking because teachers at the school have priority over the limited number of parking spaces.

There is some suggestion from providers in several areas that the location of childcare settings next to schools can have a beneficial impact on perceptions of the services being offered. This is particularly important for users of childcare who may not have a positive opinion of schools or teachers, and may help acclimatise them to the idea of their child attending school after childcare. The proximity of the childcare setting to a school may mean that Flying Start providers can develop good links with school staff with the possibility of brokering relationships between parents and teachers or at least familiarity between the two. Findings from research commissioned by the Flying Start Partnership in Rhondda-Cynon-Tâf into parental perceptions of Flying Start services showed that some parents felt that teachers were familiar 'pillars' of the community and therefore were more accepting of Flying Start childcare if it was annexed to the local school.[5] Of course, there could be a reverse effect if the school the setting is annexed with has a bad reputation in the local community.

"They have problems because their school hasn't got a very good reputation so the parent doesn't want them to go to Flying Start because they think they automatically have to go to [that] school…"

Childcare Provider, Area A

Literal visibility of settings plays an important role in achieving awareness in community settings. A potential downside of being attached to a school is if the setting is not immediately obvious to the community it serves. This is the case in Areas A, and C where childcare settings are set back off the road and cannot be seen or at least easily identified. This is not so much an issue for users once they know where the setting is, but does mean that potential users who do not know about the setting through other means would not necessarily be aware of its

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[5] Consultation with parents and carers into service delivery models in Flying Start areas, Rhondda-Cynon-Tâf County Borough Council, July 2008.

existence. There is a similar issue in Area B where the childcare setting, although not on school grounds, is quite unclear and not well signposted, making it difficult to find.

"People don't really realise it's here…because you can't see it from the road….and people will say, well, 'where does she go to nursery?' then 'what nursery?'"

Childcare User, Area A

There are no concerns raised regarding the safety of the children at the childcare settings, with several parents spontaneously mentioning how impressed they are with the number of staff on-site; it appears that the ratio of staff to children is something which parents notice and consider important when it comes to the safety of their child. It is not that users are aware of official guidelines on staff to child ratios; it is simply reassuring to users to have sufficient staff delivering the service.

While not concerned about child safety, one parent in Area D whose child has previously attended childcare at more than one setting, reports a notable difference in the size of the childcare groups; one was around 30 children and the other was 12. Smaller group sizes are preferable for parents in terms of the one-to-one attention their child receives, but if the staff to child ratio is good and the space available in the venue is plentiful, group size is less of an issue.

Parents are also keen to explain that the children themselves love attending childcare. Parents report, without exception, that aside from the initial expected apprehension from their child, it did not take long before attending childcare was something their child looked forward to.

"He loves it, he absolutely adores it. I don't know what it is in particular but he loves everything, everything, and do you know, we're his parents and we didn't even know that he would sit down with one person and read a book? But he comes here and he'll sit and he'll listen to stories and he'll play nicely - we didn't think he could do that at home but coming here has made us realise what he can do."

Childcare user, Area B

Cost

The fact that the childcare provision is free is not something that many parents mention spontaneously as a benefit and many believe that free childcare is available to everybody in Wales. Once prompted though, parents acknowledge the importance of this element, with many claiming that they would not be able to afford childcare if the Flying Start service was not available. Positively, the fact that the childcare is free to all parents in the area does not seem to lead parents to feel as though they have been specifically chosen as needing support, rather the prevailing attitude is one of wanting to take advantage of any help offered.

"If you have something to tell them … just because it's free childcare, they don't treat you like you was a charity case or whatever. They didn't treat you no different than someone paying."

Childcare user, Area D

Feedback

Childcare providers give parents regular feedback about how their child is progressing, something that is widely appreciated across all areas. This feedback can be informal, for example a quick chat about what the child did during the day when the parents arrive at the setting to collect them; or in a more organised setting in which the provider sits down with the parent, sometimes accompanied by a Flying Start teacher, to discuss in detail how the child has been getting on. Some providers take photographs of the children engaging in various activities over the months, and then show these to the parents to demonstrate the range of skills their child has developed. In area B, the pictures are collated into scrapbooks along with explanations so that parents can track their child's progress. This method in particular is popular among parents who are impressed with the detailed level of feedback the Flying Start childcare settings provide.

While feedback is something that most parents seem content with, a couple of parents in Area E say that they would like some more formal feedback to help shape the activities they can do with their child at home. They would value receiving a written note each month, outlining what their child is doing well, and what they could do to further their development.

Written feedback appears to be popular among parents, as in Areas A and B, a couple of parents express that they miss the written leaflet they used to receive on what their child had done during the session. This is something that used to be very popular but is no longer possible due to the larger number of children attending the childcare setting.

"Like before we used to have the books … when your child comes in you don't know - you'll know if he's hit somebody, if he's been naughty, you'll know if he's been good, but you won't know how many times he used a toilet or, just little things like that and if he's eaten or drunk anything because sometimes they'll come home and they'll say "Oh we're starving", … I think just a little bit of writing to say how they've done in the day, I think that could be improved I think that's about the only thing."

Childcare user, Area B

"At the end of each session, we used to have a leaflet which is filled in at the end of the day and I thought that was excellent, I've never seen that anywhere before, when they've told us they have used the toilet, so we were informed every day. Unfortunately it has stopped because it was paper every day to every parent, so they had to cut back on all the paper, environment friendly and all that."

Childcare user, Area A

Parents are also offered the opportunity to feedback to the providers if they wish. In many cases this will simply be through informal feedback at drop-off or pick-up, but some parents say that they have been given questionnaires or forms to fill in, to rate their satisfaction with the service. There is no evidence of parents feeling unable, or uncomfortable about giving feedback should they need to, aided by the apparently strong relationships between the childcare workers and the parents.

Information Provision

Some parents say they would have liked more information about what the childcare actually involved, rather than simply being told it was a 'nursery'. They mention that a taster session of some sort would have been useful as it could have provided them with an idea of what their child would be doing and who would be caring for them, and would help the child acclimatise to spending time away from home.

"I think a good idea would be…an hour session when your child starts [to] just sit and say, this is available…so that it's clear, otherwise you just think you're bringing them to nursery."

Childcare user, Area A

Those parents who were offered and attend taster sessions for childcare provision are complementary about the experience in preparing for them for the real thing and in outlining more clearly what childcare involves. Parents in some areas were offered a taster session, and it proved very popular.

Outcomes

All of the parents whose children use the childcare service have been impressed with the progress their child has made since attending. Some of the key benefits raised include language, literacy and numeracy; social development and behaviour; activity levels; and, wider family effects.

Language, literacy and numeracy

Since attending the Flying Start childcare provision, many parents believe that their children are now more talkative than they used to be, that they are using more advanced language and are more confident in conversing with other children and with adults. Most of the childcare settings deliver some elements of their service through the medium of Welsh, and some parents were delighted when their children came home and began counting or singing songs in Welsh, something that they had never been taught at home. In one extreme case in Area D, a mother whose child experienced speech and language difficulties reports that it was attending childcare that made a difference to her child's speech development, rather than speech therapy which he had been receiving previously with little benefit.

"My two year old come back speaking Welsh - counting to ten in Welsh. I'm changing the bed, and she's just standing there, "Un, dau, tri" … what?! She's only just been there, and come home with Welsh! They love going there."

Childcare user, Area D

"For me [the best benefit] has been the language development of my daughter - her speech command is brilliant since she came here … because they do singing every day and basic skills really, like holding a pen and doing painting and all that. They always come out with a picture they've painted, oh, and she's reading."

Childcare user, Area A

Social development and behaviour

Reports of more confident, happy children are common across all areas. Parents feel that interaction with other children from a young age has been beneficial to their child's social development and many have noticed that their child now interacts better with other children after having learnt key social skills such as sharing and listening. Some parents feel more confident in how their child will cope when it comes to attending school full-time, because they are already more independent, and prepared for being away from home and their parents during the day.

"She used to be really snappy, feisty, bratty. But now … since she's been there, because they have to share, they have to communicate, they have to… that's brought her on leaps and bounds."

Childcare user, Area D

Activity levels

Parents report that their children are actively involved in a range of activities during their time at the childcare setting, and that this is something that has continued at home. Rather than sitting and watching television, children are keen to replicate some of the activities they have done at childcare, such as drawing, painting, singing or dancing.

Some parents also report an increased interest in reading, with several saying that they now read their child a bedtime story each night at the request of the child, a clear indication of how childcare can impact on the learning environment in the home.

"They've got to read a book every night. Because they've been reading there before they come home. I've got to do a story, and even if I've got 50,000 things to, I've got to sit there and read them that story … it only takes five minutes to read that book, less now, because I know it off by heart!"

Childcare user, Area D

"It makes you think more of the child as learning everything you do, so you're more aware of everything you do … at bedtime and that, I like to read him a story now."

Childcare user, Area A

Wider Family effects

A child's attendance at a Flying Start childcare provider can have a big impact on family life as a whole, as their personal development seems to lead in many cases to a calmer home life, not least, as some parents say, because their child often returns from childcare quite exhausted!

"He'll come home, some days he'll try and fall asleep by one o'clock so I knows he's been running round playing but I try not to let him, he's in bed by half past six, fast asleep, right through the night, where when he was home he would be up and down all night. So it's making him tired like."

Childcare user, Area E

The whole family can benefit from Flying Start childcare according to some parents, with changes to the routine affecting everyone, including any other children.

"When [child] comes here everybody's in a routine - we'll get up early, they'll all have breakfast, the other ones will go off to school, we'll go out in the car … and then everyone will come home and then have their dinner and then have their bath or a wash and then they'll go to bed and, just, routine I think as well we've got out of it, haven't we?"

Childcare user, Area B

Parents themselves also experience specific benefits from using childcare, with many mentioning the valuable respite it offers them. Having just a couple of hours each day without their child is something that parents value, as it frees up time for them to do household chores or spend time with younger children if they have them.

"Just to have a break, it's not that I want to get rid of her, because I don't, I love her being home, but it's just that bit of time, quality time to do what you've got to do in your house, and if you've got to go out and do important things. I know she's safe, you know she's OK, I'll go and do what I've got to do, and then obviously come back, get her, and, yeah. It's just that bit of space."

Childcare user, Area E

Parents also describe the wider benefits of attending the childcare setting. The straightforward acts of dropping off, picking up and attending childcare settings creates social interaction between users. Many users mention that they have made friends at their childcare settings.

Provider viewpoint

Overview

Mirroring the views of the parents, childcare providers across all areas have a positive view of how the provision is going. Providers on the whole are confident in their ability to deliver a high quality, targeted childcare service aimed at developing the children who attend, and preparing them for the move into nursery and school. They seem to be engaged with the concept of Flying Start as a whole, and proud to be part of a service which aims to improve family well-being in the local community.

Type of Provider

The dedicated Flying Start providers in purpose built settings tend to have a different relationship with the whole Flying Start programme than childcare providers who work for a private nursery or Further Education College nursery with some Flying Start places available.

As might be expected, dedicated Flying Start staff are more likely to actively promote other Flying Start services than childcare providers with a limited quota of Flying Start places. The first responsibility of childcare providers is to their particular setting and they concentrate on provision to their majority user group.

"We haven't marketed it [Flying Start] only because we're so inundated with places…for private places, staff places and students…"

Childcare provider, Area C

One provider in Area C had three Flying Start places available annually but had only three Flying Start eligible children take places in the last two years. There was a similar case in Area D where a childcare provider with Flying Start places available had not filled the places, as children were going instead to the dedicated provider nearby. Another private nursery provider in Area C suggested that only eight Flying Start children used their childcare setting because only eight parents had expressed interest. However, given that there has been very little specifically Flying Start outreach from this provider, it is again reliant on the Health Visitor to publicise Flying Start services.

Despite the fact that providers with a limited number of Flying Start places are not so concerned with marketing and building awareness of Flying Start they tend to be more than happy to work with Flying Start in providing childcare and improving their own service. The involvement of Flying Start advisory teachers is often mentioned as a positive influence on childcare.

"The support that we've had from the Flying Start team has been very good…they're focusing more on specific training like this jabadao and the outdoor play…I know the staff have really enjoyed the training side of it…"

Childcare provider, Area C

Awareness of demand

Providers tend to remain focused on providing the best possible service, rather than being concerned with the overall coverage of Flying Start and reaching eligible parents. This is reflected by the fact that while providers tend to have a good knowledge of their own capacity and take-up, they are less sure about the wider/community demand for the service they provide. In Area A for example, the childcare provider at one setting was fully aware that all 16 childcare places were full and there was no one on the waiting list. Limitations around space and pupil to staff ratio mean that from the provider perspective this is as much as many of the providers feel they can worry about. The furthest providers may go is to chase up parents who had taken up a place but were not attending the sessions, but the one provider who mentioned having done this felt that it was beyond her remit.

However, some childcare providers do feel that it is within their remit to raise awareness of Flying Start and develop community outreach mechanisms. In Area A for example, childcare providers become involved in fun days, open days and outreach sessions, all aimed at engaging eligible parents with the Flying Start service.

Referrals

Most providers believe that all eligible parents are informed about the childcare provision by their Health Visitors. However, some are a little unsure of the referral process, with several admitting that they do not know exactly how the parents are referred. There is also quite low awareness of the marketing and advertising materials about the service available to parents. Knowledge of this kind of information seems to be outside the boundaries of what providers consider to be their 'remit', particularly among those providers who are not fully dedicated to Flying Start.

Determining success

Despite this though, all providers feel they have been successful in achieving their aims, having noticed positive changes in the children in terms of their language and social development. They are pleased with the strong feedback they have received from the parents, particularly with the spontaneous comments from parents on how the childcare service has helped with home life and improved the parent/child relationship. Having a strong relationship with the parents is vital, according to providers, and maintaining open channels of communication is essential if parents are to feel comfortable leaving their child in their care. In Area A for example, childcare providers have a board for parents to post questions anonymously, should a more sensitive issue arise.

Childcare providers also have strong links with the Flying Start advisory teachers, with whom they work closely on the development of individual children. In some cases, the teacher will become involved in the process of feeding back progress reports to the parents, and the providers regard their help as invaluable.
One provider in Area A does raise concerns however, that any gap in provision of Flying Start services beginning when a child leaves childcare and starts school could result in a significant reduction in the effectiveness and worth of the service.

"The main issue now is this [childcare] only goes to the term after they're three…if they go to the [NAME] school…they leave here now and they don't go to school till September so they've got a gap… they may regress…in terms of confidence and social skills."

Childcare provider, Area A

Aside from changes in the children, providers also acknowledge how the childcare service can benefit parents. Providers perceive more improvement in this area than the parents themselves, with many reports of more confident parents who interact positively with staff, other parents and most importantly, with their child.

Conclusion

On the whole, Flying Start childcare provision is deemed by both parents and providers to be a success. Aside from the odd minor concern about venue location and group size, parents cannot compliment the service and staff highly enough, and there is strong evidence of significant improvements to parent/child relationships other associated benefits for the rest of the family. It would be fair to say that the

provision has exceeded expectations in terms of the quality of provision, and if anything, parents feel that it should be publicised more.

Chapter 2: Parenting

Introduction

Parenting provision is up and running in all areas, with the primary offering being group courses designed to support and guide parents through the more challenging aspects of bringing up children. Some of the courses, such as the Webster Stratton Incredible Years course, and Managing Children's Behaviour have been trialled and tested, and are delivered across Wales, while others are more informal and less structured. On the whole, courses tend to run once weekly for several weeks, with each session lasting a couple of hours. Ideal group sizes (according to both providers and parents) range between six and eight parents, but can and do run with fewer or more parents when necessary.

In addition to the group courses, most areas offer parents one-to-one parenting support with a parenting worker in the home. This service is not used particularly regularly and would only be implemented if a parent was really struggling.

This chapter will look at parents' awareness and take-up of these courses, their views and opinions on the quality of provision available, any outcomes they have noticed as a result of attending courses, and the views of the providers who deliver them.

Awareness and take-up

Awareness/visibility

In most areas, awareness of Flying Start parenting courses is low, not only among those who do not engage with Flying Start services at all, but also among parents who are already using the Flying Start childcare service.

"I think I have heard of it actually but I can't remember how, or who brought it to my attention."

Childcare user, Area A

Stakeholders and the parenting providers themselves believe that Health Visitors are making parents aware of, and where necessary, referring parents to the various courses on offer. While this process seems to work well in some areas with most parents attributing their knowledge of parenting courses to information from their Health Visitor, in others, there is evidence from parents that this has not been occurring; in some areas, attendees at parenting courses say they largely found out via word of mouth from other parents at the Flying Start childcare settings, or from posters or leaflets.

In Area D, many parents access parenting courses at their family centre, somewhere that a lot of local mothers go each day to socialise with friends. Several of the mothers indicated that they would not attend the course if their friends did not go, reinforcing the idea that parents in pre-existing social groups are perhaps the most likely participants. It is important therefore that steps are taken to encourage the

more isolated parents to attend; one mother who does attend with a group of friends actually acknowledges how difficult it must be for those who do not have that social support.

"I wouldn't have been confident about sitting with other people that were already linked together, that already had a bond."

Parenting course user, Area D

In several areas, very few users of parenting courses know that they are run by Flying Start and seem surprised to learn that this is the case.

Take up of parenting courses

Take-up of parenting courses is far lower than the take-up of childcare provision. There is certainly a stigma felt to be attached to courses of this nature, which some parents see as an arena in which their parenting skills could be openly criticised. This may be in part due to the use of the term 'parenting', which is not particularly popular among users or providers who feel that the term itself *sounds* judgemental. Providers in Area A mention that they would like to be called something other than 'parenting workers' because they believe this would have a positive impact on perceptions of what they do, or would at least go some way to dispel the myths that parenting workers are there to judge and criticise, instead letting parents know that they are there to give them tips, tools, advice and support. There are suggestions that using a term such as 'family support worker' would be much friendlier and less intimidating for parents.

In actual fact, the courses do not aim to criticise or judge parenting skills at all, but the misconception alone is enough to act as a barrier for some eligible users. For this reason, it is vitally important to make parenting courses approachable, and clearly distinct from social services or anything that might imply parents are incapable or that they might be in danger of losing their children. In Area D, some parents were made to feel uncomfortable when they chose to attend a parenting course alongside those who were obligated to attend (i.e. for child protection/social services requirements); it is clear that this approach is not successful.

The providers themselves are the key to making parenting courses appealing to those who could benefit from them. They need to be reassuring and approachable, striking the delicate balance between structure and formality, within a friendly, inclusive and non-judgemental atmosphere. It is also important to have continuity of staff, so that there is always a friendly face, and continuity of venue, so that the course takes place in familiar surroundings.

Users often emphasise the importance of not feeling like they are being 'judged' when attending parenting provision. Because parenting courses and provision tend to be viewed as a more direct and even personal comment on the capabilities of the user as parent it becomes even more important for users to experience what they perceive as a non-judgemental service provision.

"She would always say, we are not here to judge you or anything like that, I'm just here to help, which was nice, because you'd never have any judgement forced upon you."

Parenting user, Area A

User attitudes

As with the childcare, those who use parenting courses are extremely positive about their experiences and the benefits of attending. Some users say that once they were offered parenting courses, they were keen to attend straightaway and had no reservations about going along to see what was on offer.

"No, I wanted to go straightaway, because a) it's socialising and getting out the house, and b) it's getting advice, just reassurance, yes, you are doing OK, you're doing a good job."

Parenting course user, Area D

Others were initially a little unsure about attending, worrying about whether or not they were going to be judged or criticised. However, none of these parents say that their fears were founded, as it did not take long before they were made to feel at ease.

"I was happy in one way but then in another way I felt "Oh are they trying to poke their nose in?" So I took it and it was fine. I realise they were there to help you but at first you think, what are they doing poking their nose in? Government, do you know what I mean? You never know."

Parenting course user, Area E

The number of parents attending a course can impact on how comfortable users feel during the session itself. Parents suggest that around six to eight attendees per session is the ideal number. Those who have attended a course with fewer parents than this, say that such a small group means there are fewer people to listen to and bounce ideas off, and also that it makes them feel exposed and open to the attention of the provider. The importance of the social element should not be underestimated, as there is evidence that the most successful parenting courses are those where participants are familiar and comfortable with each other.

Most users enjoy attending the courses and have formed a good relationship with their parenting provider. This is particularly evident in Area B where a parenting provider regularly gives lifts to two parents to ensure their attendance at a course.

Parents attending the courses praise the parenting providers for their friendly, approachable attitudes and the way in which they offer them helpful advice without making them feel that they have not been raising their children correctly.

"I think it's nice … you don't feel like you're left on your own. I suffered with postnatal depression and stuff, and it's nice knowing that I'm not going to be judged. If I've done something wrong or if I'm feeling such a way, it's like I've got to have support

but it's not Social Services, do you know what I mean? And they don't say to you, no, you're doing it completely wrong, this is how you should be doing it."

<div align="right">***Parenting course user, Area D***</div>

Parents feel that to get the full benefit of the course, it is important to attend all sessions, and subsequently some do feel that they have missed out if they are unable to attend one session. In some areas, the parenting provider will follow up with a one-to-one session in the home, or make themselves available for a chat at anytime, which is popular with parents.

"The Flying Start lady there, she was really good. You could ring her any time of day or night, explain your problem, and she'll try and advise you through it, any time of day or night, 24 hours, which was really good. Not many people would do that."

<div align="right">***Parenting course user, Area E***</div>

There is considerable variation however in how the courses are run, and this appears to impact on how parents respond to them. Some parents are very keen to attend courses, always looking for new ways to better themselves and develop as a parent. In Area E for example, some parents are 'serial users' who attend every course they can get their hands on.

In Area A, one user had received one-to-one parenting support in the home in the past, which she was extremely positive about. She felt that the sessions had really benefited her as the provider was there more as a 'shoulder to cry on', than to teach or assist her with specific tasks, which was exactly what she needed at that time. Perhaps, even more tellingly, this particular user (who is fully engaged with all elements of Flying Start) identified one-to-one parenting as the most beneficial of all aspects of Flying Start she had used.

Venue and location

The venues in which parenting courses are run are important, as unsuitable venues can make the parenting courses unattractive to parents; it is important that there is a consistent location for the courses, to foster a feeling of familiarity and comfort, and that venues are easily accessible so that parents do not need to be taxied in. In

Area C, there is evidence of a postcode lottery, with the scope of parenting (and LAP) provision determined to some extent by the availability of venues. One non-user would have liked to have attended parenting courses but there were none locally available.

Parents in Area B express particular concerns about venues; they report that sometimes parenting courses will take place in a local family centre, but other times in an upmarket hotel. Some parents say that they feel uncomfortable and out of place attending a course in such a smart location and prefer for them to be run locally, in more familiar surroundings.

"At first I was a bit nervous about attending - the [NAME] Hotel isn't somewhere someone like me would normally go."

Parenting user, Area B

Feedback

The opportunity to give feedback on the parenting courses seems to be undertaken regularly and formally across all areas, with parents often given evaluation forms to complete anonymously at the end of the course, and sometimes, at the end of each individual session. Parents feel that this method works well, with some mentioning that an issue they had raised on their evaluation form was dealt with in a later session.

"At the end of the lesson you always got a form for the feedback and you can tell them what you want to tell them. You haven't got to put your name on it which I thought that was ideal because if you had something to say but you didn't want to say it out loud, you can just put it on there and they don't know whose it is."

Parenting course user, Area E

Some providers mention that they use an overall satisfaction question to measure success, and they have targets to meet on this measure; reports are that feedback on evaluation forms is overwhelmingly positive. One provider in Area D says that she has not once seen a negative comment.

Outcomes

Social development and behaviour

Improved parent confidence is perhaps the greatest benefit of parenting courses, and is something that several parents can recognise in themselves. For some, the courses reassure them that they are doing the right thing by their children, and handling situations in the best possible way, while for those who are less confident to begin with, the course allows them to start at the beginning and learn the key skills they need to parent effectively.

"Now I've got more confidence to be able to walk home with my child crying and just ignore him, rather than stand in the park shouting and screaming, not wanting to

ever walk the street with my child crying. I felt, oh everyone's looking at me, but now I will do it because of that child behaviour course."

<div align="right">***Parenting course user, Area E***</div>

This improved confidence leads to a stronger relationship with their child, and several parents report that they now lose their temper less often, are able to be firm without getting angry, and are generally better placed to handle any difficult situations that arise.

"I don't need to shout a lot now, I don't need to use the time out because I haven't had to. Just now on the way home from school, [my son] lifted his arm to me as if to say "I'll punch you!", but [his brother] goes "No, you'll be on the time out!" And then he said "Sorry mummy". So you see they know! They're just getting on and it's lovely".

<div align="right">***Parenting course user, Area D***</div>

Family and Wider effects

- **Family**

  Some of the outcomes of parenting courses relate closely to those named by parents using childcare services. This is primarily improvements to the child's routine such as set mealtimes and bedtimes, and the introduction of a bedtime story each night. If the parent has more than one child, these kinds of changes tend to benefit them too, and so there are improvements for the family as a whole.

"Well, like the bedtime routine, I did, I used to put him upstairs 50 times when I put him to bed. And then I learned - you just do it, and stand there and you won't let them out. So I've done it and it's worked."

<div align="right">***Parenting user, Area D***</div>

In Area A, one parent who had received one-to-one parent support saw big improvements to her family life. This parent found one technique particularly useful in dealing with her child's behaviour but stressed the overall importance of having 'options' to manage children's behaviour, something she felt that one-to-one parenting provision was particularly good at providing.

"She gave me options on what you could say, like, that wouldn't cost money…she said, don't bribe them with sweets…just tell them you'll go to the park…and it did work…so, the options that she gave was really good."

<div align="right">***Parenting user, Area A***</div>

The success of one-to-one parenting provision is encouraging and could potentially help many more parents who are looking for more personal support, comfort and reassurance that they are doing the right thing.

- **Community**

Another valuable element of parenting courses is the social interaction they facilitate between parents in the local community. They enable parents to meet others in their local area (or provide a place for pre-existing social groups to convene), and offer an opportunity to discuss more general parenting issues together.

"One of the parents was having problems with their little one sleeping…..we gave her ideas on what we do, and now she's managing to get her little one to sleep better. So that was really good as well. Where we were having problems with the boys when one, with the potty training and that, and the other parents gave us advice, oh, try this and try that. And it works…because we were all giving each other's, each other ideas as well."

Parenting user, Area E

Provider viewpoint

Overall, parenting providers have a positive view of the courses they offer, and the benefits the parents take away from them. Providers like the fact that this type of course makes it possible to see a real progression from when the parent starts the course to when they have finished, in terms of their confidence and happiness in their parental role.

Providers in Area C report a real sense of progress with parenting provision and feel they have built up sufficient levels of trust with their user communities for the service to be a really effective early intervention in the lives of users and their children. The success of parenting provision in Area C is implied by the increasing number of self referrals to parenting courses, something of which the providers are justifiably proud. These self-referrals are largely evident in areas where parenting provision is at a more 'mature' stage where courses have been available for a substantial period of time, and indicates a familiarity and strong relationship with the providers.

Despite the positive outcomes that providers acknowledge for those who attend the courses, many feel that the real challenge is getting parents through the door in the first place, and then maintaining their attendance from that point onwards. There seems to be quite a high drop-out rate for some courses; this may be for a number of reasons but most commonly it is to do with ease of access or degree of comfort in the setting particularly socially. In Area A for example, one parenting course began with 12 parents and ended with just four, partly as a result of the inconvenient location which meant that parents had to be taxied in, a situation which also has cost implications. In terms of feeling socially comfortable if the group attending the sessions don't know each other and are not sufficiently bonded there may be difficulties with retention. This is particularly true for courses that are run 'cold' for example without any time for a group to bond.

Positively however, providers are able to identify specific areas on which attention could be focused to try and improve take-up and maintain attendance. This includes the need to build parents' self esteem and confidence (related to the perceived stigma of parenting courses as discussed previously); raising awareness of the

provision; ensuring a suitable location and venue; ensuring the course content is the most appropriate and gaining more health visitor referrals.

Self-esteem and user confidence

Related to the issue of stigma is user confidence and developing user confidence in a way that allows users of parenting provision to engage with the service in a worthwhile way. In all areas parenting providers stress the importance of building parental 'self-esteem' and in group settings achieving sufficient group bonding before delivering the course material. This suggestion was echoed by a LAP provider in Area A particularly in relation to the most deprived and isolated communities of users.

"We're looking at self-esteem now, for the parents, which will impact on the children's self esteem…we went to X for a shadowing visit….they ran [parenting] cold…and their drop out was quite high and their engagement and retention was low so now they work on self esteem to bring them in…"

Parenting provider, Area A

"Beforehand I'll do some sing-alongs, maybe for four weeks to prepare them…I sort of devised that myself to just get them on board…"

LAP provider, Area A

More marketing/advertising to raise awareness

There is a sense that providers feel that parenting courses are not as well-publicised as other elements of Flying Start. This is certainly reflected in what the parents say, as many, particularly those who do not have a strong relationship with their Health Visitor, or pre-existing social groups in the area, are unaware that the courses even exist. Despite the fact that providers know that generating more awareness is key, they are surprised to learn that many of the parents currently using the service do not realise that the course they are attending is run by Flying Start.

As the Flying Start name is well known through the childcare service and is held in high regard among many parents, more marketing and advertising of the courses and clearly branding them as Flying Start could potentially have an impact. Parenting providers believe that being associated with the popular Flying Start 'brand' would mean that parents approach the courses with a more positive attitude from the outset.

Operating from a suitable venue

Many parenting course providers are not based at a single location where they can both deliver courses and do desk-based work. Instead, they constantly move around to deliver courses in various venues and have a temporary office base. Some feel that this makes it very difficult for them to be available and approachable for parents, which does little to help build trusting relationships, something they feel is vital when delivering courses of this nature.

Operating from a single location offers a greater degree of accessibility and may help to build the visibility of parenting provision in a given area. In Area A, the fact that both parenting providers work part-time and have no single, dedicated location to work from may contribute to the relatively low profile of parenting in the area and in comparison to other elements of Flying Start.

Providers in Area C specifically mention that consistency in terms of location alongside the accessibility and visibility of a dedicated Flying Start centre has really helped to improve provision. One provider made a pointed comparison between the strong demand and success of parenting provision at a dedicated Flying Start centre and the much less successful provision of parenting courses in another area that did not have a dedicated building and was much less obviously branded as Flying Start.

"I think having this building is a positive path in that it's non stigmatising, it's linked to the school, families are coming here as normal to bring their children to school and for playgroup…it's almost made us more accessible because at [another location] we haven't actually got a building at the moment."

Parenting provider, Area C

The venues that parenting workers use to deliver courses are often unsuitable, either they are too small, with limited seating, or they are poorly located for parents who have to be taxied in. Sometimes, providers say they have no set location, but offer courses where the space is available; this can impact on provider morale, with parenting providers regularly feeling that they have been forgotten.

Finally, having a venue with some sort of suitable childcare provision for the duration of the course is key; unfortunately, parenting courses do not always run concurrently with the Flying Start childcare sessions, so parents will often have a child in tow when they arrive. Providers feel the ideal solution would be to have a purpose built venue with adjoining crèche, so that the children can be cared for nearby while the parents attend the course. The parents are in agreement; they acknowledge that having children running around during the session is counter-productive, but like to have their child nearby. Currently, most areas do not have dedicated facilities for parenting provision, so these facilities simply do not exist, which impacts on the take-up and success of the provision.

Course Content

Many of the parenting courses are standardised and delivered across Wales, and almost all are successful and popular with both providers and parents. One course however, the Webster Stratton Incredible Years course, is regarded quite differently across areas, criticised by some as too 'abstract' or 'scary'.

- In Area A both parenting providers we spoke to provide the Incredible Years course programme. Both providers experience difficulties with recruitment and retention of users and emphasise the importance of building a cohesive group particularly through building self-esteem before delivering the core course content. Both providers also suggest that for some the requirements of Incredible Years, such as role-play and homework, are inappropriate. However, users that do complete the

courses tend to be positive and want the provision to run over a longer period.

- In Area B one provider we spoke with ran the 'Handling Children's Behaviour' course and one ran the 'Getting to Know Your Baby' course. Both courses are popular and there are no concerns that the content of the courses is inappropriate for the user audience. 'Handling Children's Behaviour', in particular, is so popular it has a core of repeat users who continue to attend because they feel they are constantly learning and consolidating their parenting skills.

- In Area C, one provider offered the Webster Stratton Incredible Years course and the other offered the Family Links Nurturing programme. Both providers felt the former provision was in some cases too 'academic' for their usual audience and 'terminology' and 'wording' needed to be tailored in order to engage with and retain users. In particular, some elements of Incredible Years such as video clips are currently American and would benefit from a more 'British format'. The providers suggested that the two courses had different strengths and may be appropriate to different types of user groups; the Family Links course is felt to be particularly good at dealing with 'emotive, emotional issues' whereas Incredible Years may be more suitable for users likely to be more engaged and able to deal with more complex tasks.

- In Area D the Incredible Years course is a complete success. The provider who runs the course believes in the messages the course delivers, and feels strongly that there are excellent benefits if parents attend the full course. The users themselves are very positive about the course and the way it is run, and feel it has made big changes to their home lives. Several parents in this area enjoy the course so much that they choose to sit it again.

- In Area E the parenting providers see the Incredible Years course is an integral part of their parenting course programme, which aims to provide parents with a series of courses to help them through their child's development from birth onwards. When this research was conducted the course was not currently running, and none of the parents spoken to had taken the course themselves.

More Health Visitor referrals

"Establishing and then maintaining a good working relationship with the Health Visitors is vital because they're our mainstream for referrals."

Parenting provider, Area A

While most providers are confident that Health Visitors are referring those who are in need of parenting support to the courses, they are keen for them to do more. Providers feel that their courses can benefit a wider range of parents than those currently attending, and they do have the capacity to take on more people. They would like Health Visitors to tell all eligible parents about the courses on offer as standard and feel that this process, combined with some targeted marketing materials and branding could make a big difference to the number of parents coming

through the doors. Health Visitors are clearly perceived by many parenting providers as key to not only referring parents to provision but also in encouraging parents to access provision and in complementing existing forms of information provision.

"You can put posters up until you're blue in the face and it won't really make any difference, and our best results really come through Health Visitors…It's word of mouth, isn't it?"

Parenting provider, Area C

However, it is parenting courses which seem to be the element of Flying Start that Health Visitors find hardest to help parents engage with, and they themselves identify with the 'stigma' issue that parents raise, explaining that worries about being criticised mean that parents are not keen to attend.

"Unfortunately they see childcare as something where they can dump the children and do what they want, whereas parenting programme they have to do the work themselves. Some of the mothers … see the children's behaviour as the children's problems not their problems. It's "Oh look at her, she don't do this, she don't do that", and you say "No, you're not playing with her, she needs stimulation, she needs to be involved with you." …You try and say that and they don't want to know, that's something that they won't accept.""

Health Visiting Representative, Area A

In some areas, as the providers are keen for them to do, Health Visitors are expected to keep *all* parents informed about parenting courses being run by Flying Start. In others though, they are required to do an assessment of need for each family and make referrals if they feel a parenting course could be of benefit; this may explain why some parents say they have not been told about parenting courses by their Health Visitor – potentially they were not identified as being in need of one.

"The parenting if we're honest is probably our weaker area and that's simply because the parenting programme seems to be much harder to engage with. So we're trying all sorts of different things. Again we do a similar planning exercise we look at the Health Visitors to do the assessment of need, work out whether they would benefit from a parenting course and then they fill in a referral form that comes to our parenting officer. Then, we keep a waiting list of how many families have we got."

Health Visiting Representative, Area B

Related to this, some providers feel that referrals are not always made when they should be. There is also some feeling that Family Support Workers tend to receive more referrals from Health Visitors because they tend to offer advice which may be perceived as more practical for example providing advice about the jobcentre. In areas where there are almost no self-referrals, the role of Health Visitor in validating the provision becomes even more important, yet there is a clear suggestion that the working relationship between some parenting providers and Health Visitors could be better coordinated.

"Perhaps we should work closely together and then look at the referral and say…I think they need to look at the original, the very beginning of their referrals and how we can actually bring them to the correct support stream…"

Parenting provider, Area A

In one area, a Health Visitor explains that one-on-one parenting is easier to introduce to parents than the group sessions. In that situation, the Health Visitor can explain to the parent that a parenting session might be necessary and can arrange to be present at the home for the first session, introducing the parenting worker and acting as the 'familiar face' for the parent so they don't feel overwhelmed. They can then step back and allow the parenting worker to follow things through. This process can help to develop relationships between Health Visitors and parenting workers, but does not happen often, as one-on-one parenting sessions are generally only offered to those who are really in need of the help; most parents will need to attend a group session for parenting support.

Even in areas in which parenting provision is relatively well established though, there is still considerable scope for improving the relationship between the providers and Health Visitors. This is particularly relevant to reaching potential user communities with which the parenting provider has no pre-existing relationship. Health Visitors have pre-existing relationships with potential users of parenting provision and can play a role in preparing them for events like taster sessions and in providing the parenting provider with information about the area and potential users. This may be particularly important in accessing the hardest to reach audiences who may be least likely to accept people/providers they don't know.

"Before every course we have an information event like a coffee morning…we go to those fairly blind…it can be a bit hit and miss so we need to, I don't know, tighten it up a bit."

Parenting provider, Area C

It should be noted briefly, that in some areas, the Health Visitors are trained to deliver parenting programmes themselves,[6] and this seems to be a successful approach where it is in place. In these cases, the Health Visitor is both the person who 'sells' the idea to the parents, and the person who delivers the support.

"We've got both Health Visitors and the community parent development team … trained to deliver the Webster Stratton basic Infant and Toddler Programme, and the Family Links Nurturing Programme. We do a lot of outreach work initially to get people to the point where they're happy to attend a group and then we have a policy whereby we make contact with those families in between each of the sessions - "How are you getting on? Was it OK? Is there anything you want us to go over again?" That sort of thing. And then we have the opportunity to follow them up for six months afterwards so that they've got that link."

Health Visiting Representative, Area C

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[6] Health Visitors who do this would generally do so within their own 'area' so they are primarily working with parents already on their caseload.

"What we devised was a referral form. And then Health Visitors, all of whom have been trained in the programme, began to talk it up …. selling it. [It's open to] anybody who we think has got need, but also, to who might be able to commit to the twelve sessions, because it's a structured learning thing."

<div align="right">

Health Visiting Representative, Area D

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If required, the Health Visitors who deliver these courses act in the same way as dedicated parenting providers, saying they will do follow-up home visits with parents who have missed a session, or if they need extra support, will do ad hoc one-on-one sessions in the home.

Conclusions

Although the parents who use parenting courses are largely positive about the content of the courses and subsequent benefits and outcomes of using the service, it is evident that more could be done to publicise the courses to eligible parents who are not currently attending.

Some non-attendance is likely due to the stigma attached to parenting courses, and misconceptions about a judgemental atmosphere, and providers are aware of this and working hard to promote themselves as friendly and approachable support workers who are there to advise rather than criticise.

Having a consistent venue from which to deliver courses (preferably with childcare facilities so that parents can have their children nearby) would aid this process.

A lack of information about parenting courses is another key reason why take-up is lower than it could be in some areas, and providers feel that more marketing and branding of the service as Flying Start-run could help parents to engage. Health Visitors are seen as key to the publicising of parenting courses, and according to some parenting providers, could be doing more.

Chapter 3: Language and Play

Introduction

The prevalence of Language and Play (LAP) courses as part of the Flying Start offer is different in each area; in some places they are very prominent and popular, while in others they are not as well established as childcare and parenting courses. However, the common thread running through all areas is the lack of awareness among many parents (including those who use the LAP courses) that they are run by Flying Start.

This chapter will discuss the visibility of LAP courses across all areas, and the take-up of the courses. It will consider parents' attitudes to the provision on offer and the outcomes they have noted since attending, finishing with an assessment of the providers' viewpoint.

Awareness and take-up

Accessibility/Visibility

One of the key findings to emerge from the research is the fact that the term 'LAP' is not in common usage among parents in all areas. There is a degree of variation in how and when the term is used, and although sometimes courses are simply referred to as LAP courses, more often than not they are given a more descriptive name such as 'Gym Tots'. Parents who attend these courses tend to refer to them by their names, or as 'toddler groups' and do not know that they are 'LAP'.

In Area C, one mother had heard of the specific LAP provider but did not know what the service was and decided not to engage with it as a result. She explained that had she known what LAP entailed, she would have wanted to use it.

The ways in which parents engage with LAP provision tends to vary across areas:-

- In Area A, LAP courses often run from the same venue as the childcare setting, which means that parents in this area tend not to see LAP and childcare as separate entities, but rather as part of the same service. However, elsewhere in the same area, LAP providers operate from separate, less suitable venues.

- In Area B, some parents explain that they decided to attend a LAP session after seeing a poster while attending another Flying Start service, or via a leaflet they received in the post. Marketing materials play an important role in this area and serve to show users how the different Flying Start services integrate with each other.

- In Area C there is strong evidence of both Health Visitor referrals to LAP courses, and a good deal of information spread by word of mouth and other sources; demand for LAP in this area is extremely high and the courses are distinctively branded. Providers report instances of

15-20 people turning up for sessions designed for 10. LAP provision in this setting is almost too successful; there is demand for another member of staff, but no funding to make this possible.

- In Area D, there is a mixture of more structured six week courses which are well attended and more informal ad-hoc courses that run as and when they are needed - one LAP provider appears to have a very informal arrangement with a family centre, and will hold sessions for parents who happen to be there at the time. Parents can find out about these on posters in the family centre.

- In Area E, LAP courses are sometimes intertwined with parenting courses, with parents attending a parenting course first before being joined by their children at the end for a short LAP session. In this area as a whole, Flying Start is very visible in the community and Health Visitors play an important role in referring parents to LAP courses.

The more formal referral process via Health Visitors does not seem to play a vital role in encouraging parents into LAP courses in most areas, with the exception of Area C, where Health Visitors make referrals to LAP courses and one-to-one LAP support, and Area E, where strict referrals to LAP courses are made. In this area, LAP courses are regarded as important for child development, and parental confidence and Health Visitors are key in ensuring that eligible parents are aware of the options available to them.

Take-up of LAP provision

Take-up of the courses varies widely by area and there are issues around maintaining attendance for the full course. LAP courses tend to have a less structured progression than parenting courses and therefore seem to be taken less seriously by the users; there is strong evidence that parents will attend sporadically, rather than making a commitment every week. As with parenting courses, parents prefer to attend (and will be encouraged to attend more) if they already know someone else in the group, again stressing the importance of friendship pairs and the social aspect of the group, and creating a comfortable and non-threatening environment.

User attitudes

Perceptions

Some parents from lower income areas regard LAP courses as mother and toddler groups, something they see as being inherently 'middle class' and therefore not suitable for them. As with the parenting courses, some parents do feel worried that they may be criticised if they attend a LAP course, but again, any initial apprehension disperses once they have attended the first session.

"In the beginning I wasn't sure but then I come to the first one and I thought it was going to be all about learning but it wasn't because obviously there was the play there as well. Because I wasn't very good in school I didn't want to come and put

myself to shame, but it wasn't like that at all, it was pretty much, so you could sit there and learn with your child as well."

LAP user, Area B

Those who engage with LAP courses are very positive about their experience and the benefits they have gained from attending. Many users see the courses as a place to learn new tools and tips about things to do with their child, and like the element of being there *with* their child; some say that they find it to be a less judgemental setting than a parenting course, and that they do not feel the guilt of leaving their child alone at the childcare setting. Some parents just enjoy being involved with anything that could benefit them and their child, and see LAP courses as another way to add strings to their bow.

"You have little activities you take away with you…You learn basically as well, you're made aware of things that you wouldn't think that the children should be doing I suppose."

LAP user, Area A

"Anything you can do to improve yourself is a bonus, isn't it? So even if you only learn one thing from a whole course, it's still something isn't it?"

LAP user, Area D

There is also an element of embarrassment involved with LAP, which often involves group activities such as singing or dancing; parents with low confidence levels can feel self conscious and reluctant to join in, and some say that they would not go to a course if they knew they would have to do so. In Area C, a LAP taster session was openly ridiculed by some parents because of the group singing. It is clear that providers need to have a good knowledge of their target audience in order to market LAP services effectively.[7]

One mother had received one-to-one LAP sessions in her home for extra help with her child who was experiencing some learning difficulties. Again, this was very well received and the mother concerned was full of praise for the LAP worker and the ground they covered in the sessions.

"I really liked it because … there was the four of us at home so we was all getting involved. And me being involved with all the activities that they were doing together was just absolutely tremendous. It was a really, really good experience and if I could do it again I would."

One-to-one LAP user, Area E

Overall, there are very few criticisms about the LAP provision with parents overwhelmingly positive about the service. However, there were a couple of comments made by parents as suggestions for improvement. One mother in Area D mentions that sessions could be longer, particularly those involving 'messy' activities which involve cleaning up, as this can eat into the main session time, while in Area E, a couple of parents report that more co-ordination is needed as they have

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[7] See 'knowing your audience' section below for further details.

repeated the same tasks in two completely different sessions. However, on the whole, parents are happy with the LAP provision as it is currently.

"If there was a problem, we know we can always go to them, but we've never had nothing, apart from like "Oh they enjoy this and they enjoy doing that", we've never had anything negative to say. I've got to say it's brilliant up here."

Lap user, Area B

Outcomes

Language, Literacy and Numeracy

Singing together, dancing together and reading together are examples of just some of the things covered in LAP courses, and some parents do take these on board and put them into practice at home. New activities can spark particular interests in children, encouraging them to step outside the boundaries of their usual routines; in Area D, one mother describes how her children constantly ask if they can do cookery at home after doing some at a LAP course.

All of these activities contribute to the language development of children, and particularly when coupled with the childcare received, parents are able to notice big differences in how their children are communicating.

"You know, they show you it's from birth - speaking, talking, singing, counting, everything, facial expressions."

LAP user, Area A

"His speech is more clear and he's also been able to, not 100% yet, but he is being able to identify colours a lot more since we started doing the session, from when we were doing it. So he has come on in leaps and bounds."

One-to-one LAP user, Area E

Some of the LAP sessions focus specifically on numeracy (NAP sessions) and improved numeracy not only among the children, but also increased parents confidence interacting using numbers.

"The number and play was fab, that's one thing I would say was great, yeah, because you're like interacting with the child in so many ways."

LAP user, Area A

Social development and behaviour

To some extent, LAP can combine the benefits of childcare and parenting courses. LAP enables the socialisation and peer group bonding for both parents and children while also providing parents with an opportunity to see and learn new ways of bonding with their child. LAP courses allow users first hand experience of what happens as part of Flying Start provision. For some users LAP allows a more complete understanding of what Flying Start provision offers and how the different

elements of Flying Start provision complement each other. Another aspect of LAP provision that is particularly popular with users is the fact that LAP provides tools and 'options' which can be taken directly into the user's home environment. The popularity of 'options' learnt from Flying Start provision is apparent across all forms of provision but particularly pertinent to LAP because of the intimate nature of the provision and the fact that parent and child share the experience.

"You're made aware of things that you wouldn't think that the children should be doing I suppose, you think that that's all for the school, but it's not, it starts from here, much younger, and that's where they get that head-start."

LAP user, Area A

"But if you said to her like, "Oh if you go to bed tonight you can have this perhaps tomorrow", or something like that and she gave me options on what you could say that wouldn't cost money, and she said, "Don't bribe them with sweets because it doesn't work … Just tell them you'll go the park or something like that", yeah, and it did work. So, the options that she give was really good options and they did work."

LAP user, Area A

"[LAP] brings what they do here in the childcare setting environment, it brings that home, you take that home with you, don't you?"

LAP user, Area D

Wider Family Effects

As with other Flying Start provision, time spent with their child and other parents allows for social interaction with other mothers in their area. The LAP environment is very informal and relaxed, and parents feel comfortable talking with other mums about any issues or concerns they may have.

"With the language and play sessions … we're all invited into this room and we all sit down, and it's so informal … the language and play leader is very good at making you feel at ease and helping you really understand things to help you with your child."

"Yeah, definitely, and I've made lots of friends, I have, purely through this kind of setting."

LAP users, Area A

Provider viewpoint

On the whole, LAP providers are confident in the service they provide, and believe that the users benefit a great deal from the service, particularly with regard to the stronger bond that LAP can encourage between parents and their children and the language and numeracy development for the child. They do however raise several issues which they feel can impact on the take-up and engagement with the service.

Knowing your audience

Although the sessions are not regarded with fear by some parents in quite the same way as parenting courses, LAP providers stress the importance of a 'softly softly' approach. Providers acknowledge that parents can be wary in any situation where a stranger is seen to be in a position of authority regarding their relationship with their child Providers feel that parents need time to acclimatise to the course and course leaders, and that sometimes, six weeks is not a long enough period to build up trust. For this reason it is essential to create a welcoming, relaxed atmosphere, perhaps by providing tea and cakes for the parents. In Area C, providers described the positive impact of holding a 'tea and toast' session with parents. A consistent finding is the importance of making LAP settings (and others) as inviting and sociable as possible.

Emphasising the social side of LAP activities to potential users is a potential hook to encourage attendance. In Area A, one LAP provider discusses the importance of giving parents time to acclimatise to LAP provision. She explains that she devised four 'sing along' sessions to lead in to the core content of LAP, helping parents to build confidence and develop self-esteem.

While making sessions sociable is essential, it is just as important for providers to recognise and meet the needs of their user group as far as possible. In Area C, one LAP provider wanted to encourage the involvement of fathers in LAP courses and so shortened the length of her courses as well as involving the local media to publicise the success of the course.

"That was the half hour session…we got the paper involved and the picture in the gazette and a write up of how well we were doing…and they all came back to do number and play."

LAP provider, Area A

Embarrassment

LAP providers often mention the embarrassment some parents feel in attending such courses, particularly when there is singing involved, but feel that slowly and surely, parent confidence can be built. 'Lead-in' sessions such as the ones run in Area A are evidently a good way of introducing parents slowly to the course content, rather than throwing them in at the deep end and expecting them to join in. However, a gradual build-up of activities as the course progresses seems to work in many cases, with several LAP providers describing parents who sat aside in the first session, too awkward to join in, who by the end of the course were throwing themselves into the mix and getting the most out of the process.

Integration of Services

Some LAP providers feel somewhat excluded from the rest of Flying Start, particularly those who are located some distance away from other core teams (this mirrors how some parenting providers feel, as mentioned previously). There is certainly a sense that once again, not having a suitable venue from which to operate is a barrier to delivering LAP successfully; not only does it mean that there is a lack

of consistency and familiarity for parents, but LAP providers do not feel that they are part of the Flying Start team, missing out on sharing information and discussing referrals etc.

Attendance

On the whole, providers report that attendance at LAP courses is good, though there is quite a lot of variation in attendance, even within areas. In Area D for example, one LAP group was attended by just two families, while another one held just three days later was full. Area C have particularly high attendance at LAP courses, so much so that they feel they need to take on another member of staff, something that the budget does not allow. In this area, LAP providers actively 'recruit' parents to attend courses, by going into existing LAP sessions to sign people up for the next one; this creates a flurry of word of mouth recommendations which again contributes to the high take-up in this area.

In a particularly hard to reach community in Area A, one LAP provider feels they have done everything possible to advertise LAP services including door to door visits, speaking to people in the streets but still feels that many eligible parents are not reached and are not using FS provision as they might.

"There is so many young parents…I think, well, where are you all? What are you doing? Why aren't you coming?"

LAP Provider, Area A

Referrals

In Areas C and E in particular, Health Visitors play a crucial role in referring parents to LAP provision. However, most LAP providers feel that Health Visitors could be doing more to encourage attendance. In Area A for example, providers were disappointed that they received only one referral from a Health Visitor over the course of an entire year to do a one-to-one LAP session with a parent, as they are convinced that there are more parents who could benefit from such a service. Before LAP providers in Area C had developed a good relationship with both generic and Flying Start Health Visitors the approach to recruitment of users had to be much more pro-active 'going into playgroups…schools…and going into toddler groups.' One provider suggested that developing an effective referral stream has helped joined up working and developing constructive relationships with other relevant organisations.

"I think the referrals have made more of an impact on how we work better with other agencies, for example social services…I think it's helped us to get the social workers in and get them trained up…and find out more about language and play…to get that into the homes we can't necessarily get to I think has been fantastic."

LAP provider, Area C

Conclusions

Those that attend LAP provision have a very positive experience. Users tend to appreciate the opportunity to learn with their child; to see first hand how Flying Start services are delivered; to understand how different elements of provision work together; to learn from providers for whom they tend to have the greatest respect and praise, and to develop as parents with techniques and tips they can take into their home settings.

At the same time providers suggest that due to the more explicit interaction of parent and child as part of LAP provision there is scope for discomfort for potential users due to unfamiliarity or embarrassment. This can be a problem for hard to reach groups in particular, some of whom express concerns that the courses may be all about 'learning', which makes them feel uncomfortable; providers should be reassuring and approachable, making it clear from the outset what the course is designed to achieve. Effective marketing LAP to new audiences may therefore require a considered and 'softly softly' approach.

The positive experience of parents attending courses is closely linked to the very positive outcomes users tend to experience as a result of LAP provision. Users recognise clear improvements in language skills, social development and numeracy (particularly for those attending NAP courses). Furthermore, users perceive clear benefits as a result of LAP beyond the setting particularly in improving relationships with their children which in turn has a knock on effect on family life and often leads to parents feeling more in control.

However, it is clear that there is some room for improving awareness of LAP provision amongst potential and even existing users. The term LAP is not in common use across all areas and LAP provision is sometimes not seen as distinct from childcare provision. There is clearly room for more effective marketing of LAP with Health Visitors often mentioned as an obvious route for raising the profile of LAP provision. In some cases LAP providers feel somewhat isolated from the rest of Flying Start ad not as integrated as they might be with other services. There is potentially a lesson to be learnt from the good practice demonstrated in Area A, in which LAP courses operate from the same venue as a childcare setting – the benefit of this is that parents see childcare and LAP as one, integrated service.

Chapter 4: Non-users

Introduction

Locating complete non-users of Flying Start services, for example, families who have chosen not to engage with any provision, despite being eligible, proved to be very difficult in all areas.[8] This in itself is a positive finding, which suggests that most eligible families are taking up at least one element of Flying Start provision.

Although a few complete non-users were interviewed, families who were using the childcare service alone were considered to be non-users for the purposes of this research project, and were asked to give their reasons for not engaging with parenting and LAP provision.

Non-users can generally be classed in two broad categories:-

1. those who are unable to use Flying Start services, either due to a lack of information about what is available, or due to existing work commitments; and

2. those who choose not to engage with Flying Start services for a specific reason.

Both types of non-user are discussed in this chapter.

Non users: unable to engage

Lack of knowledge

One of the key reasons why some eligible parents are not engaging with Flying Start is simply due to a lack of knowledge about what is available to them. This is often the result of a poor relationship with their Health Visitor, who arguably should be playing a crucial role, informing them of the different services for which they are eligible. However, it is also true that some parents simply do not see their Health Visitor that frequently; if the parent in question is relatively proficient it may be appropriate for the Health Visitor to see parents for standard check-ups.

Several parents say that although their Health Visitor has told them about the free childcare, there has never been any mention of parenting and LAP provision. However, it is not just those parents who have a difficult relationship with their Health Visitor, one non-user who has a very close relationship with her Flying Start Health Visitor says that she has never said a word about Flying Start at all.

"They do free, is it free playgroups? And I'm not quite sure what else they do. I don't really know much what they do but as far as I know they are really, really good on helping children and stuff."

Non-user, Area E

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[8] In Area A, no interviews were conducted with non-users. There is evidence that in one particularly hard to reach area there are many non-users, but access to this proportion of the population is particularly difficult – in this instance, liaison time with Health Visitors and providers was not sufficient to secure interviews with anybody relevant.

"I haven't got a clue [what Flying Start do]. I moved to the Area, and I was told by my Health Visitor that [child] could come here for two days, two mornings. I kind of, I've heard they do courses, but I don't know where they are, or what they do."

<div align="right">***Non-user of parenting and LAP, Area E***</div>

Furthermore, not knowing exactly what participation in the different options of provision will involve is a real barrier to participation. If the name of the session is unclear or does not give any information about the course, parents may be unwilling to engage. This is particularly true for those who have low self esteem.

"There was nothing explained about it, it was just [NAME] so you make out what you want…I don't like [NAME], what you get from that is you actually like learning some language and speech and sound and stuff like that."

<div align="right">***Non-User, Area C***</div>

On being told about some of the potential services available to them, some non-users were disappointed and even angry that they had not been informed, while some expressed an interest in attending in the future. Some parents had actually heard the names of the courses being run, but did not know the details, or that they were being run by Flying Start.

"I got a leaflet [about a particular LAP course] saying "That's what we do" sort of thing. Come and join us if you want. I didn't know it was anything to do with Flying Start … I just thought you take the kids and they play but I didn't know it was like Flying Start. If it was I would have took her. If it was explained more in detail about what they do up there, then fair enough."

<div align="right">***Non- user of parenting and LAP, Area E***</div>

A couple of non-users had found out about provision on their own i.e. without advice or direction from a third party and were keen, but found that they had to jump through hoops to get the information they required.

"Well I read in the local paper, they were saying Flying Start do courses for mothers, and I was quite interested in that. And I went on the website, I couldn't find anything about it, so I did come up here, and I spoke to one of the nursery teachers, I said any idea how I can get involved in doing a course? And they said that I'd have to ring a phone number, tell them what I'd be interested in doing, and then go from there, which I haven't actually done yet."

<div align="right">***Non-user of parenting and LAP, Area E***</div>

For these non-users who are primarily not accessing services through a lack of information, it seems that providing that information is all that would be needed to encourage some of them to engage. The internet was mentioned several times by parents as an ideal way of publicising services, in fact several parents had looked online and been unable to find anything of relevance.

"I just think if Flying Start built a website with information - contact us, any worries, information, times, this is happening, go here. Like last year they went for a teddy

bear's picnic, I didn't know about it, I'd have gone, it was a nice day. We didn't know and it doesn't take much to set a website up does it? Just all we're after is information, that's all parents need is just information."

Non-user of parenting and LAP courses, Area C

"Obviously if I was going to, consider letting my child go there, I'd want to know who's there, and what sort of people she's going to be round and stuff - definitely wouldn't just let her go there, no way."

Non-user, Area E

In some areas, as previously mentioned, the visibility of Flying Start as a programme of support is quite poor, and this presents another barrier to engagement for parents whose knowledge of the services is already low. In Areas A and C for example, the childcare settings are not particularly convenient, as they are located 'off-road' so users have to know they are there in the first place.

Working Parents

Inability to access Flying Start services due to working commitments is the other key reason why some eligible parents are not currently engaged but some of these parents are very positive about the service on offer for those who can access it.

"I think it's an incredible asset to the county, to Wales in general because it's a very lonely time as a mum … so yeah, as a support network, it's fabulous and you've got health professionals who perhaps have walked that road before and are helpful in past experience. But there's no better experience than the experience of other mothers."

Non-user of parenting and LAP, Area B

Some working parents felt that the times at which courses run can act as a barrier, as they do not fit with working patterns. One working parent in Area C says that she would love to attend courses, but they do not run at flexible times; early morning, late afternoon, evening or weekend sessions should be available.

Of course, there is only so much that providers can offer at a convenient time and location given the number of staff available; in this mothers' area, while LAP courses are in demand, there are only so many that a three-person team can deliver.

"Well, the timing issue was the problem because I work Monday to Friday from 8.30 till 2 o'clock which means I then can leave and pick up my son for 3 o'clock and pick up my daughter. So my work is driven for my childcare needs … there isn't any leeway."

Non-user of parenting and LAP, Area C

Non-users: choosing not to engage

Among those who make a conscious decision not to engage with Flying Start provision, the reasons are varied. Although choosing not to engage with the free childcare provision is unusual, those who have decided against it primarily do so due to their strong network of family and friends whom they are happy to use as the primary source of help in caring for their child. Some parents are also wary about leaving their children at such a young age, and prefer to keep them at home until they are a little older.

"I like that I can trust my Mum to do things the way that I want them done, I don't have any doubts leaving him with her, he's so happy to go to her and spend time with her and she does so many different things with him … he's having the same kind of upbringing as I had. I certainly don't think I was worse off for not starting school until I was three."

Non-user, Area D

"They've given me loads of information sheets on the healthcare and stuff, the childcare and things, but again, I've looked through it, it seems general enough in all the things they offer and seems good, but again, it's just me … I'm not ready to let them go off with somebody who's not convincing enough for me yet to let my kids to go off with them, so I've just said no, that's it."

Non-user, Area E

Other parents are keen not to miss out on any of their child's development, during what they see to be a crucial and exciting time in their child's life, particularly if the child has slower than average language development or medical problems. Despite acknowledging the benefits that sending their child to childcare might afford, some of these parents would simply rather wait until their child is a bit older. One parent in particular had an extremely good relationship with her Health Visitor and knew all about the different elements of Flying Start and the potential outcomes, but still resisted engaging with the service.

"I may want her to go in a couple of months or something, if she develops a bit better and that, but it's not like I fully said I don't want her to go, it's just that with her being a bit slower than others … I didn't want to miss out on that, and I wanted to be there to support her, do you know what I mean?"

Non-user, Area C

Although for the most part, parents have very positive experiences with Flying Start, for a small minority, a bad experience with provision in the past has been enough to put them off engaging with the childcare service completely, but it is only a minority who have had such cause for concern.

"I sent my daughter [to the childcare] and she's got a cow's milk protein allergy, and they gave her cows milk. That kind of bought to a halt anything of me sending her anywhere else, I was too afraid."

Non-user, Area D

With regard to parenting and LAP courses, non-users commonly hold the opinion that they are unnecessary. This viewpoint is particularly prevalent among those who already have older children or experience of caring for relative's children, as they feel that they already know how to be a good parent and will not benefit from the courses. At the same time, it may also be true that those eligible for FS may have already attended parenting courses and do not feel the need to refresh what they have already learnt.

"They're good for people who don't know how to be a parent but as for me, I think I know how to be a parent so I just wouldn't take them up."

Non-user, Area E

This attitude is often associated with a feeling that the course leaders are likely to be critical or judgemental. For this reason, non-users say that it is vital that any information available about these courses is clear, and explains exactly what the courses will involve so that parents are left in no doubt that they will not be drawn into an arena where their parenting skills are questioned.

"If you don't know about them, I think a lot of people …. would think you don't know how to be a parent … but then saying that, I think if it was better explained in leaflets and things, that it was to help you as a parent and to help with child behaviour, behavioural problems and things like that, just to phrase it differently - then, maybe".

Non-user of parenting and LAP courses, Area D

The embarrassment factor that the providers of LAP courses acknowledge as a barrier to engagement does indeed seem to be an issue, with some non-users explaining that they are uncomfortable being around new people, especially when there is a requirement to get involved with hands-on activities. This seems particularly prevalent among young teenage mums, and while some do feel that having a friend or familiar face there with them would help, it certainly is not enough to persuade them to attend.

"They tried to [persuade me to go] to one of the groups that she's just opening now in [place name], I was adamant I'm not going there because I find them embarrassing. I just, I don't know, it sounds stupid, but I do."

Non- user, Area E

"It's just that all the new people I had round me, loads of new people, I didn't know anyone … I couldn't do it, bit of a paranoid there, like."

"It would obviously be a support [to go together] but, yeah, I'd still feel embarrassed with sitting in the groups where you sit with the different mother and fathers…"

"And then if you've got to talk or do anything..."

"Yeah, and there's mime, there's miming as well…"

"Yeah, it's horrible."

Non-users (couple), Area E

Conclusion

As suggested there are two main types of non user; those that are unable to engage and those that choose not to. It should be noted that non-users are in a minority in the five areas that were visited.

Non-use through an inability to engage with Flying Start services is often due to a lack of awareness about existing provision. A lack of awareness about existing provision is often the result of a limited relationship with the Health Visitor. Being told about Flying Start provision and being eligible is sufficient for some parents to engage with the service but for some it is not. Without sufficiently clear first hand explanations of what particular Flying Start provision entails and why it is pertinent to the particular (non) user, potential users may simply not engage with provision. Non-users that have not engaged express a preference for clear information about dates, times, course content and some indication of expected outcomes. Bearing this in mind, it may be important to provide more widely available information from other users about how Flying Start provision has helped them. A different segment of non-users unable to engage are working parents. While many of these parents recognise the benefits of Flying Start they often express a desire for provision to be made more flexible and easier to access particularly outside of normal work hours, for example at weekends or evening sessions.

Non-users choosing not to engage are a relatively niche segment of those eligible for Flying Start provision. Choosing not to use Flying Start is commonly because there are existing support networks in place usually through family or the parent in question is relatively experienced and feels that they do not need to access Flying Start services. However, for a few, non-use is a result of the perceived possibility of criticism or embarrassment.

Chapter 5: Integration of services

Introduction

One of the key elements of this piece of research was to establish whether the various elements of Flying Start provision work as a package to support families with young children, or as separate elements. Ideally, the childcare, parenting and LAP services should be fully integrated, working together with the support of the Health Visitors, to ensure that the wide-ranging needs of all families are met.

This chapter will set out the extent to which service users see and use Flying Start provision as a package, and explore the views of providers on the integration of services using case study examples from each of the areas. It will then put forward potential ways in which integration of services could be improved.

Area case studies

While the degree of service integration and the environment in which Flying Start services operate differs from area to area but despite evidence of a more advanced, integrated programme of services in Areas B and E, it would be fair to say that in most places Flying Start services are largely operating separately, and that more could be done to bring them together as one, joined-up service.

> **Area A**
>
> Integration of services in Area A is potentially more challenging than in other areas. Childcare and Parenting providers are employed by a different organisation than Language and Play providers and Family Support Workers with some attendant difficulties for provider integration.
>
> In most instances this does not appear to be a problem in terms of service integration. Users still tend to associate Flying Start primarily with childcare and certainly childcare is the highest visibility service but this is compensated for by the fact that other Flying Start entitlements, particularly LAP, are run from the same location. However, the level of user awareness of other services is clearly not as developed as in Area C particularly with regard to parenting provision. The level of awareness amongst users again seems to depend on the information provided (or not) by Health Visitors.
>
> Users do not necessarily make a distinction between different Flying Start entitlements. Therefore, those services provided in dedicated settings branded as Flying Start (usually Childcare) tend to experience much greater demand than those Flying Start services that do not always have a dedicated setting as is the case with LAP and Parenting provision in one particularly hard to reach community in Area A.

Considerable efforts are made at integration and a united front on behalf of providers; they meet regularly, know each other well, wear the same branded T shirts, advertise widely and have existing relationships with local communities. However, despite providers being familiar with each other awareness of Flying Start amongst users still seems to be patchy across the area. Awareness of Flying Start tends to be better in some areas (characterised by small, tight knit communities) than others (larger communities that are 'territorial' in their make up).

As mentioned above, both LAP and parenting providers suggest that a lack of engagement with their services has much to do with a lack of dedicated venue in which to deliver their strands of Flying Start. Parenting providers in Area A feel particularly strongly that relationships with Health Visitors, sharing of information and overall coordination of services could be significantly improved and even suggest that it sometimes feels as if there is 'no such thing as Flying Start' such is the lack of coordination and collaboration at times.

Area B

In this area, the integration of services is relatively strong, with childcare, parenting and LAP working well alongside each other.

Health Visitors play a vital role in promoting Flying Start services to parents and tend to inform them of all the elements of Flying Start services available to them as opposed to just the childcare, as noted in Area D[9]. This is likely to be a result of close relationships with providers: one LAP provider says that she talks to Health Visitors about whether specific families might benefit from LAP, so that the Health Visitor can then go out to inform them and encourage attendance.

Written documentation such as leaflets or posters, branded as Flying Start, are commonly available in this area, and parents report receiving them from their Health Visitor (along with a recommendation to attend), through the post, or picking them up while attending another Flying Start service. This kind of 'snowball' marketing is key, and as a result, parents who engage with one Flying Start service are more likely to know about the other services available to them.

In addition, Flying Start services in this area often run from the same family centre, and this offers parenting and LAP providers an opportunity to engage with parents while they are using the childcare and encourage them to attend a wider variety of courses.

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[9] N.B. Some discrepancies are noted in Area D with minority of parents reporting that despite regular contact with their Health Visitor, they have never been told about Flying Start at all.

Area C

Services in Area C appear to be well integrated and suggest a relatively mature program of service provision. Coordinators and service providers are very familiar with each other and meet regularly.

There are a number of prominent Flying Start settings in which childcare tends to be the most visible element of provision. However, awareness of other strands of Flying Start provision compares favourably with other areas mainly because of the apparently more engaged role that Health Visitors seems to play with users. Health Visitors play a prominent role in informing users about Flying Start provision although there is considerable discrepancy between different Health Visitors in terms of what they consider to be their duty to inform and market Flying Start.

Referrals appear to be a good indication of the degree of integration of services in Area C. Parenting providers receive referrals from a wide variety of other related services including Health Visitors, children's services, community midwives, community police, domestic violence panels and even teachers. There are also instances of self-referral to parenting provision in Area C suggesting this element of provision has a much higher profile and is better integrated in comparison to parenting provision in other areas although this may be in part explicable by a longer period of service availability and/or greater provider experience.

Similarly, LAP provision has an apparently robust relationship with Health Visitors, social services and other local organisations like schools and toddler groups. Generally, the profile of Parenting and LAP appear to be higher in Area C than in many other areas and as a result both services appear to experience greater demand.

Despite this level of integration there is still felt to be room for improvement in terms of coordination particularly between service providers and Health Visitors, which is widely considered to be the most important relationship in terms of integrating Flying Start in the area.

One setting playing an unexpected but important role in improving awareness of Flying Start in Area C is the drop-in. Drop-ins appear to provide an interim platform for potential and/or existing users of Flying Start to learn more about Flying Start in an informal setting. The drop in is typically held in a community hall or similar building. Parents are provided refreshments and given the opportunity to talk to each other and/or drop-in staff some of whom are also Flying Start staff. The children at the drop-in are provided a safe play environment and are generally overseen by the drop-in staff who also provide food for them. Therefore, the drop-ins represent a good opportunity to market Flying Start services and build trust between potential users, existing users and providers.

Area D

A lack of communication between providers in this area means that services are not as well integrated as they could be. The primary reason for this is the lack of one central location for all Flying Start staff. The Flying Start core team are based in their own office while providers of childcare, parenting and LAP courses are located in various venues across the catchment area. Some providers in this area specifically mention that they feel isolated with this set-up, and would be keen to co-locate in the future.

Health Visitors too, are separated from all other Flying Start staff, and there is certainly evidence that they are not providing parents with full information about what is available to them, potentially because they do not have a strong enough relationship with the providers. Parents who have had information from their Health Visitor say that it only related to the childcare provision; very few have received information about parenting and LAP in this way.

An outcome in this area is that providers are not fully aware of what other Flying Start services are available for parents; one childcare provider knows that a LAP course is held in a room adjoining their setting on a specific day each week, but is unsure whether or not it is run by Flying Start. The LAP provider who runs the course confirms that it is indeed a Flying Start LAP course, but there is no evidence of any signposting to it in the childcare setting, which seems to be somewhat of a missed opportunity. Indeed, when asked, several of the parents whose child attends the childcare setting know nothing of this LAP course or what it involves.

While parents in this area know that the childcare they use is provided by Flying Start, the same can not be said of parenting and LAP. With just one exception, those who access these courses do not know that the provision they are accessing is run by Flying Start, and feel that had they known, they would have been more encouraged to attend in the first place due to their positive experiences at the childcare settings.

Area E

The integration of Flying Start services is more advanced here than in other areas, primarily due to the fact that all Flying Start staff are located together in one large building in the middle of the catchment Area, something facilitated by the fact that the Flying Start area itself is small.

Every member of staff, from the Health Visitors, to the LAP providers wear the same distinctive blue, Flying Start-branded polo-shirt uniform, and it seems that parents across the area know who they are and where they are based.

The benefits of this arrangement for the team are that all staff can share information and discuss specific cases with ease; any staff member working with a specific family has access to a shared family case file, which can be updated by any staff member to ensure that the bigger picture is always available. This arrangement seems to aid the referral process in particular, with Health Visitors in this Area doing considerably more to engage parents with Flying Start services than those elsewhere, primarily due to their daily contact with providers.

The set-up also benefits parents, who essentially have a one-stop-shop if they have a question or need information, and any query can be dealt with promptly. Parents in this area also report receiving a good deal of written information about Flying Start services through the post, in the form of leaflets, but still feel that more could be done to publicise the services on offer. There is also a downside in that the mix of roles and services under one roof can lead parents to become confused as to what exactly Flying Start is (healthcare, educational or social related?) but when accessing services, they know without question that they are run by Flying Start.

Areas for improvement

Unequal Visibility

While the free childcare is the most widely used element of Flying Start, it should not be the only element that parents are aware of, and currently in some areas, this is the case.

"All I associate Flying Start with is childcare."

Flying Start user, Area D

"I qualify for Flying Start because I live in the right Area, and I know that you can get free childcare … I understand that, and I understand that there's playgroups that they can go to, like the drop in centre I go to, and that's all I know about it really."

Non-user, Area C

Through consideration of the elements that contribute to a strong, integrated programme of services, several areas for improvement can be identified.

Co-location

As seen in Areas B and E, having one central location for the core Flying Start team and the providers can have a large impact on how well the various Flying Start staff communicate and share information. The result is a smoother delivery of services, and strong links between them. This is something that providers and stakeholders across all other areas mention as the ideal, and something that they would all eventually like to have.

Communication

This is something that could be facilitated by introducing co-location, but there is strong evidence to suggest that better communication among staff is needed. In

some cases, providers are unsure of the links between their own service and the other Flying Start providers; although ideally, all eligible parents should be informed of all Flying Start provision by their Health Visitor, signposting from other providers is another key way to spread information and in some cases, it is not yet happening.

Information

As demonstrated in Area B, provision of Flying Start branded leaflets and posters, and making them available to eligible users through Health Visitors or other relevant means can go a long way to informing parents about Flying Start provision as a whole and increasing uptake. It is likely that adopting a similar approach elsewhere would help to strengthen the links between the different elements of Flying Start, presenting it to parents as a complete programme rather than separate services.

Health Visitors

While co-location of staff would no doubt help *providers* feel part of a team delivering one joined-up services, Health Visitors have a crucial role to play in presenting Flying Start as an integrated programme of services to parents, acting as an intermediary between the providers and potential users. One health visiting representative explains the importance of Health Visitors working closely with providers and the rest of the Flying Start team to ensure that they have sufficient information to deliver the best possible service – providing parents with information is a key role for the Flying Start Health Visitor, and makes the job more diverse than that of a 'traditional' Health Visitor whose focus tends to be on offering support and advice.

"Traditionally, Health Visitors are quite possessive of their caseloads … we made it very clear from the beginning that there was no hierarchical structure within this team. And Health Visitors needed to work more closely with other members of that bigger team and not think that they had to do everything … we've moved away from giving advice to providing information and that is a huge shift. It's not about telling people what they should do, it's about people making life choices for themselves and enabling people to make those choices - so lots of confidence building."

Health Visiting Representative, Area C

However, this does not seem to be happening across all areas, and there is huge variety in the Health Visitor roles even within areas, with user experiences varying quite dramatically in some places. Health Visitor influence may be tempered by the provision of alternative sources of information (such as branded leaflets and posters, or information directly from providers) and existing familiarity among parents with the types of service provision available and the providers to run them.

In Area A for example, parents are subject to a wide variety of information sources about Flying Start including taster 'dance' and 'reading book' sessions, 'open days' and word of mouth recommendations. Furthermore, parents and potential users were already familiar with the providers of a playgroup which eventually became the Flying Start childcare setting.

But this level of information is not available in all areas, and it seems that engagement with information sources varies significantly within areas depending on the nature of the local community; closer knit and more affluent communities tend to engage better with Flying Start services, and across all areas, parents appear to be more likely to attend if they already know someone who is engaged with the provision.

Ultimately then, the influence of Health Visitors and closer one-to-one relationships in delivering information to potential service users cannot be underestimated. It seems likely that potential users are affected more by relationships with their Health Visitor than less personal and sporadic types of information provision. Without persuasion and frequent contact from Health Visitors it is far from certain that some eligible users would access Flying Start services, and parenting and LAP courses in particular.

The information Health Visitors are providing to parents about Flying Start varies by area in terms of content and accuracy. As mentioned above, in Area B, eligible parents are told about Flying Start services in depth, and therefore have a strong awareness of everything available to them and how the different services complement each other. By contrast in other areas, the information received is very much 'top level' – Health Visitors deal with such a wide range of issues, that it seems they can advise and inform only up to a certain point, before making a referral or asking a specialist to assist. This often comes down to heavy caseloads, which mean that Health Visitors do not have the time to make visits to the same family week after week. Essentially, the Health Visitors 'sell' the Flying Start provision to the parents, and the providers are then required to put in the work to maintain their attendance from that point onwards. In Area D for example, almost all eligible parents say that other than the initial information about the childcare, their Health Visitor did not mention anything else about Flying Start at all. There is also evidence to suggest that in some areas, Health Visitors are 'under-selling' Flying Start to parents, and it seems they could promote it more successfully by stressing the benefits of the provision.

"She came out and said there's Flying Start, she explained it's two hours a day and it's free childcare…like a little nursery."

Childcare user, Area A

In this particular case the Health Visitor described the provision as like a nursery but did not emphasise clearly the unique selling points of Flying Start provision; from discussions it is clear that parents want to know, and would have appreciated to learn, that that the childcare was actually 'structured play' rather than simply a place children were looked after in a 'nursery' setting.

It may be that among Health Visitors in some areas, there is shortfall in a wider understanding of what Flying Start provision entails, and so this information is not reaching parents. As a result, this awareness may not actually develop until users visit the settings and experience provision first hand.

"…it was only when really we started here and they were saying to us about language and play and number and play and things…"

Childcare user, Area A

It is fairly clear that potential users of Flying Start provision would appreciate more information from their Health Visitor about what Flying Start is and what each of the constituent elements entails. It also seems that a clearer understanding of the role the Health Visitor plays in the delivery of Flying Start, would benefit both the users and the providers.

Other issues

During the course of this project, researchers encountered some interesting findings not directly related to the key aims and objectives of this project. Whilst not of key relevance, these issues do add value to the key findings, and details can be found below.

Eligibility for Flying Start

Despite the widespread availability of Flying Start childcare services there is considerable confusion amongst users about their own eligibility. Even if users are aware of their eligible status given that there is a strong association between Flying Start and childcare without necessarily considering the other elements there is potential for confusion about entitlement. It was common for users to be confused about those elements of Flying Start they did use and sometimes not be able to distinguish between different forms of provision, especially if they took place in the same setting as happened with Childcare and LAP in Area A, for example.

Another element of confusion around eligibility is an understanding of what constitutes Flying Start eligibility in the first place. Those eligible for Flying Start are generally unable to identify why they are eligible, and this can result in a variety of outcomes:-

- **Confusion/Irritation:** some parents do not understand why eligibility varies so much within a small area, why are people on one street eligible but those on the next street are not. While most are simply confused about eligibility, a minority express irritation and express concern that eligibility for Flying Start is 'not fair'.
- **Awkwardness:** on occasion parents mention feeling awkward if they are eligible but their friends or family members, who live very nearby, are not.
- **Embarrassment:** more of an issue among non-users, one or two feel that they and their children are being labelled as 'deprived' simply because they live in a certain area.

Drop-Ins

Drop-ins were not a specific focus of this research, but in some areas, particularly Area C but also in Area E, there is evidence that they play an important role in the diffusion of information about Flying Start. The drop-ins are always informal, sociable settings where parents can have a bit of a rest while their children play, but close-by enough that parents can maintain a connection with them. Often, refreshments are provided for both the parents and children, and this can be a strong draw for parents. Providers emphasise the importance of having long opening hours for Flying Start

settings so that the services seem more friendly and informal, and less reliant on pre-determined, rigid course structures. While this is not necessarily possible at all settings, the drop-ins can offer this type of service.

Drop-ins enable parents to develop relationships with providers and other Flying Start staff, enabling a build-up of trust which, as discussed, is vital to encourage attendance at parenting and LAP courses in particular. Providers can use the drop-ins as a platform to demonstrate what will be involved in the various Flying Start services, which again is important to parents who do not feel confident about engaging.

"Yeah, since I went to the drop ins and got to know [Flying Start staff member] and everything, I thought, well she's going to be here, so I thought [my daughter's] going to be comfortable here."

Drop-in user, Area E

"And in terms of if you wanted to find out a bit more about the courses and something, where would you go, or who? For the Flying Start, do you mean, that? Yeah. Mainly the drop in, because the family workers are really good, they come round and they speak to you. And they all say, like we've had to write down before now things we have."

Drop-in user, Area C

For parents who remain uneasy about attending a parenting or LAP course, the drop-ins can actually serve as an alternative to the more formal service. Usually, parent confidence will be built through attendance at the drop-in, and so they play an intermediary role, easing harder-to-engage parents into a fuller, longer term involvement with Flying Start services as a whole. Particularly helpful in this process is the social element of the drop-ins, once again revealing the importance of existing social groups to engagement with Flying Start provision.

"The drop ins are really useful because that's … in the days and stuff and that, and Megan obviously gets bored and it helps me, I go when my friends go, it helps me meet up with them and she loves it, she plays with all her friends in the playgroup."

Drop-in user, Area E

Conclusion

Different areas seem to have integrated services to varying degrees and with different levels of success. However, it is possible to identify elements common across areas that enable a more integrated service provision for users and providers of Flying Start.

- Dedicated venues for Flying Start in which all staff are co-located aids collaboration, communication and sharing of information between providers and provides a visible and certain point of contact for users. Not only this but co-location and dedicated settings tend to create a greater sense of belonging and unity amongst service providers.

- Health Visitors have an important role to play in integrating Flying Start services operating as an intermediary between provider and user. It is not necessarily only up to the Health Visitor to market Flying Start provision but it is clear that Health Visitors are uniquely positioned to play a coordinating role. It is also noticeable that Health Visitors often have a prevalent role, recognised by providers, in joining up users and providers in those areas that are more successfully integrated.

- Geography and type of community impact on the degree to which Flying Start services are integrated. It may be easier to provide a more integrated service in smaller, more tightly knit communities because of pre-existing social relationships and a higher degree of trust amongst people.

- Integration of Flying Start services may to some extent be a function of time. A crucial component in the relationship between user and provider is familiarity and trust, something which takes time to develop.

The common features of these elements seem to be some combination of visibility, trust and coordination of activities. This may be why intermediary actors such as Health Visitors and drop-ins play such an important coordinating role for Flying Start provision, not only do they do they provide a potential source of information but they also offer the potential to develop trust between provider and user.