



ASSESSING THE IMPACT OF THE DAISY DROP IN

FEBRUARY 2009

Report prepared by:

Clare Lardner

**Clarity
20 Galachlawside
Edinburgh
EH10 7JG**

tel: 0131 445 5842
mob: 07808 930652
fax: 08717 33 55 62

e-mail: clare@clarity-scotland.co.uk,
www.clarity-scotland.co.uk

Contents

1	Summary.....	3
2	Introduction	5
3	Background.....	5
4	Methods	7
5	Results	7
6	Discussion and Conclusions	23
	Appendix 1: Sample Daisy programme, 2008	26

1 Summary

- 1.1 Clarity was commissioned by West Lothian Council to undertake an evaluation of the Daisy Drop In umbrella project in Craigshill, Livingston. The objectives of the evaluation were to:
- assess the impact of the project on parents who have used the Daisy Drop In
 - assess the impact on children whose parents have used the project
 - assess the effectiveness of partnership working on the project
 - examine the views of parents, staff and partners on the effectiveness of the Daisy Drop In
 - identify improvements that can be made to monitoring and evaluation in future.
- 1.2 The Daisy Drop In provides an access point for services provided by local community planning partners and a place for parents of pre-fives to get support, advice and information. The overall aim of the Daisy is to improve the life chances of young families living in Craigshill, particularly those in the most deprived datazones. Specific outcomes agreed for the Daisy are to:
- increase breastfeeding rates
 - improve the dental health of the pre 5 population
 - improve access to and education about the benefits of a healthy lifestyle
 - provide a co-ordinated parent support programme.
- 1.3 This evaluation was primarily qualitative in nature and based mainly on interviews with staff and partners and focus groups with parents. The evaluation took place over a six-week period in November and December 2008. Fifty people took part in the evaluation.
- 1.4 Approximately 100 parent visits and 75 child visits are made to the Daisy Drop In premises each month and there are 90 regular parent users. This evaluation found that the Daisy was having a positive impact on parents by helping them to reduce isolation and stress, feel more a part of their community, increase their confidence, parenting skills and other skills and in many cases move onto jobs, voluntary work or college.
- 1.5 The Daisy was also thought to be having a positive impact on children by helping them to bond with their parents, develop social skills and confidence, eat more healthily and have opportunities to take part in fun activities.
- 1.6 Partnership working in the Daisy project is clearly effective. The evaluation found that this is because there is a high level of trust between partners, a clear set of shared objectives and services are 'badged' under the Daisy umbrella. This evaluation found that certain behaviours are associated with effective partnership working and these can be the basis for training and selection of staffing in future (though a full job analysis should be conducted). The partnership between staff, parents and partners also worked well and parents felt that they had a big impact on the running of the Daisy.

- 1.7 The main improvements suggested by participants in the evaluation were to expand the premises and activities of the Daisy Drop In. Evaluation and monitoring will be improved by the implementation of a new database which will enable the recording of more useful and retrievable information. This will also allow parents to have a record of what they have achieved, which will help them in seeking work and other opportunities.
- 1.8 A high proportion of those participating in the evaluation thought that the Daisy was achieving its aim of improving the life chances of parents in Craigshill. It was felt that the addition of the outreach worker post had been particularly important in bringing in new families, particularly those who are hard to reach, or experiencing difficulties. This evaluation found clear quantitative and qualitative evidence of a positive impact on dental registrations and attendances. There is not clear quantitative evidence that the Daisy has impacted on breast-feeding rates but there is qualitative evidence that parents were supported to try or persevere with breastfeeding through attendance at the Daisy.
- 1.9 The Daisy is running a well-attended range of parenting support groups and classes and had encouraged vulnerable parents to attend. Partners report that attending such groups has an important effect in preventing crises occurring through early intervention when parents get stressed. In focus groups parents also said that they had developed more skills and confidence as parents and partners felt that this impacted on the behaviour of children and how parents managed it.
- 1.10 The Fresh as Daisy food co-op project and cookery and weaning classes have been popular with parents. Parents in focus groups said they had acquired new cooking skills and awareness about healthy food. Improvements in what was being cooked in parents' homes had been noted by workers. Messages about healthy eating and healthy lifestyles are reinforced by all partners.
- 1.11 Partners, parents and staff identified a range of success factors of the Daisy which included (but were not limited to) its location, the excellent partnership working on the project, the informality compared to other services and the community involvement in the Daisy from the start. These and other success factors, and the reasons why partnership working is effective, should be the basis for replicating the work of the Daisy in other parts of West Lothian.
- 1.12 It is recommended that a new database is developed for the Daisy Drop In by June 2009 which will allow better information to be gathered for monitoring and evaluation purposes. The database should allow both counting of numbers attending the drop in (without double counting) and all the associated activities and courses run under the Daisy umbrella *and* allow information recording of individuals so that progress and changes can be identified. Records should be anonymised by each parent (and child) having a unique identifier.

2 Introduction

- 2.1 Clarity was commissioned by West Lothian Council to undertake an evaluation of the Daisy Drop In umbrella project in Craigshill, Livingston. The objectives of the evaluation were to:
- assess the impact of the project on parents who have used the Daisy Drop In, in particular the impact on their skills and confidence, lifestyle choices, activities and aspirations
 - assess the impact on children whose parents have used the project (by gathering the views of key professionals and parents)
 - assess the effectiveness of partnership working on the project
 - examine the views of parents, staff and partners on the effectiveness of the Daisy Drop In - what has worked well and not so well and if/how it could be improved
 - identify improvements that can be made to monitoring and evaluation in future.
- 2.2 It is important to note that, in the absence of any objective 'before' measures, the evidence of impact for this evaluation was based largely upon the self-reported experiences and views of parents, frontline staff and partners who are involved in the Daisy in some way. However, quantitative evidence about the number of parents attending the Daisy and breastfeeding and dental registration figures were also obtained to supplement the qualitative aspects of the evaluation.
- 2.3 The evaluation was conducted during a six-week period in November-December 2008.

3 Background

- 3.1 The Daisy Drop In is an information centre for parents and carers of pre-school children. It is located in Craigshill, Livingston which, based on indicators such as employment, education, income and health, was identified in the Scottish Index of Multiple Deprivation as one of the 15% most deprived areas in Scotland and the most deprived in West Lothian.
- 3.2 The Daisy Drop In was established in 2005 following extensive, participative consultation with the local community, frontline workers and community planning partners. Of particular note during the development phase was the use of the draft National Standards for Community Engagement (West Lothian was a national pilot for the standards) and the use of art as a medium for communication. Since then parents and partners have been actively involved in designing, funding, planning and operating the Daisy Drop In.
- 3.3 The Daisy Drop In aims to improve the life chances of children in the area by maximising the impact of the community planning partners' services to parents and under 5s in the area, and particularly to those in the three most deprived datazones in Craigshill. Specific outcomes have been agreed to:
- increase breastfeeding rates

- improve the dental health of the pre 5 population
 - improve access to and education about the benefits of a healthy lifestyle
 - provide a co-ordinated parent support programme.
- 3.4 The Daisy Drop In is open every weekday morning and provides a focal point for people to access services provided by a wide range of partners, including Adult Basic Education, Health Visitors, Access to Employment, Midwives, Sure Start, Oral Health Promotion, Credit Union, West Foot Forward (walking groups) primary schools and playgroups. The Daisy provides information and advice and a small number of activities including cookery classes, music, arts and crafts sessions and summer trips. The food co-op and toothbrush exchanges take place at the Daisy. Group activities and courses are now published in a single programme with the Daisy logo, rather than separately by each individual service (see Appendix 1).
- 3.5 The Daisy is currently funded primarily through the Fairer Scotland Fund and through West Lothian Council voluntary organisations funding. There are two part-time workers located in the Daisy Drop In: a coordinator and a food development worker, who are employed through Broxburn Family Centre. A part time outreach worker employed by and based at Almond Enterprises liaises between the Daisy Drop In, early years services, community groups and parents. All three workers are supervised and supported by the Council Communities Team.
- 3.6 The co-ordination and support of the project is managed by the Council's Communities Team. It is estimated that, during the first two years of the development of the Daisy, this co-ordination and support amounted to 4 days per week. The team also provides a link between the multi-agency Early Years Action Group and the Daisy Management Group and ensure that action plans for the Daisy as a whole and the individual workers tie in with community planning and single outcome agreement priorities.
- 3.7 Community planning partners had gathered some anecdotal evidence that the Daisy Drop In was effective in helping and supporting parents to access a range of services and that it had led to an increase in the number of registrations with local dentists, encouraged people to make healthy lifestyle choices and provided good support to parents. However, it had not been possible to obtain official published data on, for example, the local incidence of dental caries and outcomes of healthy lifestyle choices. In any case, some of the impacts of healthy lifestyle choices may take longer than three years (the time the project has been operational) to be measurable.

4 Methods

- 4.1 The evaluation was conducted in a short timescale and the aim was to obtain the views of relevant people as quickly as possible. This meant offering a range of ways to participate.
- 4.2 Key partners who had worked closely with the Daisy and Daisy staff were interviewed face-to-face. Partners who had been less closely involved were either interviewed by telephone or were offered the option of responding to an online survey.
- 4.3 Parents' views were sought via two focus groups held at a time and place at which parents normally met. Some parents at focus groups also completed brief anonymised questionnaires about their life before and after the Daisy. A £10 gift voucher was offered to focus group participants as a thank-you for giving their time.
- 4.4 Overall, the evaluation received input from 29 partners/staff and 21 parents.

5 Results

Number of parents and children attending the Daisy

- 5.1 The number of parent drop in visits to the Daisy premises was 117 in the first four months of operation, then it fell to 88 in the first full year (2006). Since then it increased to an average of 91 a month in 2007 and 102 a month in 2008 (excluding December figures which were not available).
- 5.2 Between 2006 and 2008 the number of child visits to the Daisy fluctuated up and down between an average of 65 a month (2006) and 80 (2007).
- 5.3 There are a total of over 350 people on the Daisy's mailing list, which represents all the parents who have been in contact with the Daisy since it opened. Approximately 90 parents attend daily or weekly. Summer trips are a useful way of attracting new parents to the Daisy. Last summer, 7 new families joined this way.
- 5.4 Table 1 overleaf shows the number of visits to the Daisy during a sample month (September 2008). There were 173 visits to the Daisy Drop In and Fresh as a Daisy food co-op combined, during September 2008. Note that the figures may include double counting if people visited more than once. In addition, there were between 6 and 8 new referrals to the Daisy via the Outreach Worker during September 2008.

5.5 Table 2 shows the number of people attending courses or groups run by other services linked to the Daisy. Five courses or groups were run during September with the number of parents attending ranging from six at Parentcraft to 40 at the Parents group. Again, there may be some double counting across courses, if parents attended more than one course/group. All of these parents would have accessed or booked courses via the Daisy Drop In.

Table 1: Number of visits, September 2008

Daisy-based activity	Number of visits
Drop in	23
Fresh as a Daisy food co-op	80
Baby massage	12
Young mums to be	16
Childminding	10
Breast-feeding support	6
Playtime with Arlene	8
Credit Union Christmas savings	4
Tempus photography	5
Actifit	9
Total visits	173

Table 2: Number of parents on courses, September 2008

Daisy-linked course (all were of 4 weeks duration)	Number of parents attending
Weaning	8
English as a second language	10
Parentcraft (mums to be)	6
Parents group (at Riverside)	40
The Incredible Years	13
Total	77

The impact of the Daisy Drop In on parents

5.6 The first objective of this evaluation was to assess the impact of the project on parents who have used the Daisy Drop In, in particular the impact on their skills and confidence, lifestyle choices, activities and aspirations.

Parents views

5.7 Parents in focus groups were asked what difference they thought the Daisy had made to them as parents. Parents said that they felt less isolated, less stressed, had more friends, were busier, had more fun or felt more a part of the community. In terms of their parenting, parents said they had learned more about their child and themselves, had been supported to breastfeed or were more confident in being a good parent. Some parents mentioned that they had accessed information and advice more easily, for example information about childcare. Parents also said they were eating more healthily and found the school holidays much easier with activities and trips helping to structure their weeks and make *“the holidays fly in”*.

5.8 In terms of skills, confidence and aspirations, parents had acquired a range of skills through accessing services via the Daisy, including learning English, learning to cook, acquiring better parenting skills, learning how to operate a till and scales and learning about charity law. Many parents said they had become more confident in themselves and one gave the example of being more confident *“sitting in groups, having to speak, use your voice, meet other people and discuss different things”*. A number of parents said that the Daisy had helped them to get a job or go to college. Some had become crèche workers and others had taken on positions of responsibility in the Daisy, for example

committee roles. Some parents had given a presentation at a recent awards ceremony which they felt was something they could not have done before.

5.9 Some parents described the impact of the Daisy in their own words:

“Before the Daisy I did not go out very often and kept myself shut away. The Daisy has helped me by giving me a purpose to go out and meet people. I managed to breastfeed my child for 6 months with ongoing support. The cooking class has taught me how to make different meals. The most important thing about the Daisy for me is having somewhere to go just to meet people and be able to talk.”

“Before I came to the Daisy I was in a women’s refuge. I had no life, I just existed. The Daisy has been a lifeline to me. I’ve been on summer trips, the cooking class, cooking on a budget and the Thursday group. It has just given me the confidence to go out. It’s brilliant and I could not manage without them”

“I’ve been coming to the Daisy for two years. Before that my life depended on me just sitting in the house, watching telly. I didn’t know many people, had no confidence in myself. Now I am a volunteer for the food co-op and have gained the skills of using a till and scales. I have done a cooking course and then went on to cooking with numbers. It has helped me to get to know more people and build my confidence in being friendly to the community. I feel a lot better in myself and a lot happier.”

Staff/partners views

5.10 In the survey, 100% of partners agreed or strongly agreed that many parents had gained skills and confidence in their parenting because of accessing services via the Daisy. Staff and partners who were interviewed also reported many differences in parents that they had observed. They had noted changes in confidence and self-esteem, parents being more open and accepting and less judgemental about others and providing “massive peer support” for each other. Parenting skills had improved with parents communicating with and managing their children’s behaviour better and being more confident parents overall.

5.11 Parents were reported to have gained new skills through attending the many courses on offer, or by being involved in volunteering for the food co-op or the management committee. Many parents had moved on to college or jobs, or gained literacy and numeracy skills they previously lacked. Quite a few parents who had been involved in the Daisy had gone on to become involved in other aspects of the community, for example, the Gala Day committee, community council, Friends of Letham Park and primary school parent forums. A group of parents had recently given a presentation at the SURF awards ceremony.

5.12 Some staff or partners reported stories of the impact on parents:

“We have broken through with parents we never thought we would break through with. One parent who has been on the periphery of the Daisy for ages and we had concerns about her parenting, has started to come to the Daisy. She is now very involved, gets support for stuff at home and has come on leaps

and bounds. There is a massive difference in how she treats her children, she recognises she is calmer. After three years of trying we had thought she was a lost cause – that's what we call hard to reach".

"It's subtle things which are hard to identify, but in the groups coming through parenting classes you see an incomparable improvement in their relationships with their children."

The impact on children and families

5.13 The second objective of this evaluation was to assess the impact on children whose parents have used the project, by gathering the views of key professionals and parents.

Parents' views

5.14 Parents in focus groups said that the Daisy had impacted on their children in a range of ways, including building their confidence and teaching them social skills such as sharing, speaking to and mixing with other children and not being clingy any more. Some parents had noticed better behaviour in their children and others commented on how their children were much more likely to eat fruit and vegetables than before.

5.15 Parents were also asked about the impact on their families overall. Some parents had learned new ideas for games and activities with their family, whilst others said their families were healthier because of eating better and doing more walking. Parents said their families benefited because they had 'time out' and were less stressed. One parent said she had taken more responsibility for family finances since doing the 'Dosh course', whereas previously she had let her husband manage them.

Staff/partners' views

5.16 Many of the partners interviewed do not see the children regularly as the children are in the crèche whilst partners are providing services to parents. However, some staff/partners were able to comment based on direct observation. It was noted that some children had better routines and were more able to communicate, socialise and share with other children. Attending activities or the crèche had helped some children to reduce their separation anxiety and gain more confidence and independence. It was reported that the playgroup staff at Letham had noticed a huge difference in how quickly children settled in if they had been attending the Daisy (although it was not possible to verify this with the playgroup).

5.17 It was also noted that child/parent relationships had been improved through a range of activities, from better bonding helped by breastfeeding and baby massage, to having calmer, more confident parents.

5.18 One interviewee noted that some parents were saving money for their children through the credit union and another had observed, during home visits, that parents were making family meals. Children were more likely to eat fruit and

drink water than when they first attended the Daisy. The summer trips had also provided opportunities which children might not otherwise have had, for example, if their parents did not drive.

Impact on Craigshill

- 5.19 The evaluation explored views on the impact of the Daisy Drop In on the wider community of Craigshill. All (100%) of the survey respondents agreed or strongly agreed that the Daisy has had a positive impact on Craigshill.
- 5.20 Parents and partners identified a range of impacts on Craigshill. On an individual level, parents felt more a part of the community themselves because they knew lots more people and said hello to people in the Mall, whom previously they would have walked past. It was felt there was more community spirit and people helped each other. A number of people related a story about a new mum who urgently needed baby equipment. Parents, staff and partners all rallied round and found everything she needed for the new baby within a day.
- 5.21 At a community level, both parents and partners thought that Craigshill had a better reputation than it had previously and that more people wanted to move there. It was reported that housing applications had increased¹. Some partners considered there was a greater sense of pride in the community.
- 5.22 The Daisy was considered to be a focal point for the community and a source of information and advice for everyone, not just parents. Grandparents, teenage mums and dads had all used the Daisy for information and advice.
- 5.23 One of the most notable changes in the community was the reinstatement of the Gala Day, which had not been held for a few years. Daisy parents had helped form a new Gala Day Committee and galas had been held for the past two years, the most recent being one of the biggest in Livingston. In addition to the Gala Day, parents had, through their attendance at the Daisy, gone on to become volunteers on a number of other committees, as stated earlier in this report. The Daisy has also recently got two new parent representatives on the Craigsfarm Committee.

¹ Almond Housing Association confirmed that housing applications to Craigshill had increased but it is not possible to attribute this to the impact of the Daisy.

The effectiveness of the Daisy

5.24 The third objective of this evaluation was to obtain the views of parents, staff and partners on the effectiveness of the Daisy Drop In - what has worked well and not so well and what could be improved. An important aspect of assessing the effectiveness of the Daisy is how it has performed against its aim and objectives. The findings about effectiveness are therefore described under the following headings:

- Improving life chances
- Increasing breastfeeding rates
- Improving oral health
- Providing co-ordinated parent support
- Healthy lifestyle
- What could be improved about the Daisy

Improving life chances

5.25 Partners and staff participating in the evaluation were asked about how well they thought the Daisy was achieving its overall aim of improving the life chances of parents and pre-fives in Craigshill, especially those in the most deprived datazones. In the survey 100% of respondents agreed or strongly agreed that it was achieving this aim and 85% agreed or strongly agreed that the Daisy was successfully targeting the families who needed it most.

5.26 Among interviewees the overall numbers and the postcode sectors of parents participating in the Daisy were felt to indicate that it was reaching people in the most deprived areas of Craigshill. The flexibility of partners in being able and willing to engage parents in whatever way it suited them was thought to be important, as was the joint working between the health visitors and outreach worker in bringing in 'hard to reach' families who might not otherwise engage with services. However, 58% of survey respondents said that the Daisy need to work harder to bring in new parents, reflecting the tension between consolidating the skills and confidence of those already coming and continuing to bring in new 'hard to reach' parents.

Increasing breastfeeding rates

5.27 One of the four objectives set for the Daisy is to increase breastfeeding rates. Among survey respondents 57% thought that the Daisy was achieving this and the remainder did not know. Scottish National Statistics on breastfeeding for the seven Craigshill datazones show that rates for babies being 'exclusively breastfed at the 6-8 week review' increased from 11% in 2004 to 23% in 2005 (the Daisy started in August 2005) and have been maintained at around 21-22% since then. It is not possible to directly attribute the 2004/5 increase to the Daisy (the Daisy was only operational for 5 months in that year), but anecdotal evidence (see below) suggests it may have helped to maintain the higher levels since then.

5.28 The local community midwife's caseload figures show levels of 50% breastfed in 2005, 40% in 2006 and 47% in 2007-8. These figures are recorded when the

baby is 10 days old and include babies who are mixed fed, so are not directly comparable with the SNS figures.

- 5.29 There is evidence from parents that attending the Daisy has helped to support them to consider, try or persevere with breastfeeding. One parent in a focus group said she had been supported to breastfeed and one said that she had breastfed for longer (6 months) than she would have done if she hadn't been coming to the Daisy.
- 5.30 Partners also cited anecdotal evidence, such as the level of attendance in breastfeeding support groups (though one person thought attendance was sporadic), a general shift in attitudes about breastfeeding and higher numbers of people trying to breastfeed. It was felt that it was particularly noticeable that more young parents were attempting to breastfeed. It was reported that some parents had said that they were more likely to come to the Daisy for breastfeeding support than to the health centre, because they got support from other parents². Some parents have trained to become Breast Friends who offer peer support to others.

Improving oral health

- 5.31 Improving oral health is the second main objective set for the Daisy. Among survey respondents, 69% thought that this outcome was being achieved and the remainder did not know. The Daisy has held regular, well attended, toothbrush exchanges and provides oral health packs to all parents. Only fruit and water snacks are allowed to be consumed on Daisy premises. A dental registration drive publicised at the Daisy led to approximately 150 new registrations for local dentists, of whom 96% attended a first appointment. All of these new registrations were attributable to the Daisy. The local dentist said:

“The dental registration drive from the Daisy Drop in was a great success - 96% attended their first appointment and many are returning for treatment. The Daisy Drop in has made a good impact on the people from Craigshill and the surrounding areas - we are still getting people coming in to register as they have heard through the Daisy Drop in centre that our books are open.”

- 5.32 One parent from the Daisy has volunteered to participate in an oral health promotion group to be run in January 2009 to identify ways to improve children's dental health in the area. Parents in focus groups said they regularly take their children to the toothbrush exchanges.
- 5.33 Anecdotal evidence also suggests that the Daisy is helping parents to overcome dentist phobias. It was reported that some parents are going to the dentist who have not been for 20 years and others, although not taking care of their own dental health, attend toothbrush exchanges and ensure their children brush their teeth. One partner gave an example of a parent who had very neglected teeth and was terrified of the dentist and had now been encouraged to go via the Daisy. A parent in a focus group said she had been encouraged through the

² The local midwife and health visitors provide breastfeeding support at both the Daisy and the local health centre.

Daisy to go to the dentist and had been supported with her dentist phobia. The establishment of a peer support group for people with dental phobias is now being considered.

Providing co-ordinated parent support

- 5.34 The third main objective of the Daisy is to provide a co-ordinated parent support programme. The majority (93%) of survey respondents agreed or strongly agreed that this objective was being achieved. The Daisy publishes a programme of all the groups and activities for parents of pre-fives which will be running in the area. There are Sure Start support groups for mums under 20, mums over 20, parents who want to start moving on to employment and parenting courses such as the 'Incredible Years' and 'Getting Thru the Day' which run every year. There has been an increase in numbers attending SureStart groups, which is attributed to the Daisy, and Craigshill is one of only two areas in West Lothian with the demand, and sufficient trained and available staff to deliver the intensive Webster Stratton parenting course.
- 5.35 It was reported that some people are attending groups who did not go outside before and that the Daisy has been successful in encouraging 'lonely vulnerable parents' (including some with learning disabilities and some whose first language is not English) into the Drop In and thereafter into groups provided by the Daisy and other services.
- 5.36 The availability of a non-threatening environment in which to talk about parenting issues is thought to be important and the drop in facility means that parents can go for support when they are getting stressed and talk things through at an early stage, before a crisis occurs. There were anecdotal reports that health visitors had noted a reduction in referrals to the early years services group, which they attributed to the work of the Daisy.

Healthy lifestyle

- 5.37 The fourth objective of the Daisy is to improve access to and education about the benefits of a healthy lifestyle. The majority (93%) of survey respondents thought that this objective was being achieved and 69% agreed or strongly agreed that the 'Fresh as Daisy' food co-op and project has helped parents make healthier food for their families.
- 5.38 The Daisy provides access to a walking group, a food co-op, cookery classes (such as cooking on a budget) and weaning classes. There has been a good uptake of cookery classes and a number of parents have volunteered for the food co-op and/or trained to be cooking tutors. Although it takes some time for the impact on people's health to be evident in official figures, it has been noted that there is a greater uptake of fresh fruit by children in the Daisy and that fewer parents are putting tea, hot chocolate, Irn Bru or other unsuitable drinks into children's bottles. It was felt that this may have helped children behave more calmly. Some workers reported that, on visiting parents' homes, they had noticed that people who had attended Daisy cooking classes are making home-made soup and healthy meals at home. Parents in focus groups said they and their children were eating more fresh fruit and vegetables since coming to the

Daisy.

What could be improved about the Daisy?

- 5.39 Under the objective of examining the effectiveness of the Daisy, parents, staff and partners were also asked about whether they thought any improvements could be made.
- 5.40 There were three issues raised by two people (one parent and one partner) which were negative comments on the Daisy. The first was that there is sometimes gossip (talking behind someone's back) among parents, which has reportedly put off some parents from continuing to attend. It was felt that this should be "nipped in the bud" by staff³.
- 5.41 The second negative comment was that the ambience of the Daisy was not always good – this partner had not always felt welcomed there by staff and questioned whether, therefore, a vulnerable parent would feel welcomed.
- 5.42 Thirdly, the same partner had concerns about the child protection knowledge of staff⁴.
- 5.43 In terms of potential improvements, with the exception of the issues noted above, most of those identified related to how the Daisy could expand its activities. Many parents, staff and partners stated the need for the Daisy to be open longer hours and to have larger premises. Extended opening hours would enable more people to use the drop in and evening opening would allow more fathers to use the Daisy. In terms of premises, a kitchen, crèche room and activities/meeting room would allow cooking classes and other activities to take place on site and in-house crèche workers to be employed (at present the crèche is bought-in and is off-site), which would mean parents were in the same building as their children. It was considered that employing its own crèche workers would be more cost effective for the Daisy. However, it was also acknowledged that the shop front location of the Daisy in the centre of Craigshill was one of its strengths, and should not be lost. One person suggested that the soon-to-be-vacated Almond Housing Association premises would be ideal if new premises were being considered.

³ The Daisy Drop In states it has robust measures in place to ensure the Daisy is not 'gossipy' and staff respond quickly to any incidents as they occur, although it is not possible to ensure that everyone will always be happy with the outcomes.

⁴ All staff have received child protection training. A new partnership approach to training key frontline workers and volunteers will be implemented this year.

The effectiveness of partnership working

5.44 The third objective of this evaluation was to assess the effectiveness of partnership working on the project. The evaluation examined:

- Whether and how partnership working was effective
- The behaviours involved in partnership working
- Partnership with parents
- The impact on partners' own services

Whether partnership working is effective

5.45 In the survey, 92% of partners agreed or strongly agreed that all partners in the Daisy work well together. This was borne out by all interviews, in which partners and staff used terms like “*amazing*”, “*extremely effective*”, “*fantastic*” and “*absolutely brilliant*” to describe the effectiveness of partnership working on the project.

How partnership working is effective?

5.46 Given that there was broad consensus that partnership working was effective, the interviews were used to explore *how* it was effective. There were three key elements which made partnership working effective:

- The level of trust between partners
- A clear set of shared objectives
- Services ‘badged’ as Daisy services

These are explored further below.

5.47 What was clear from many interviewees was that a level of trust had developed between the partners which meant that they felt confident about appropriately sharing information about clients and allowing other partners to step into their shoes in certain circumstances (and with their permission), for example to help deliver courses, or to contact parents about whom there was a concern (for example, if they had not attended for a while). It was felt that this level of trust had developed in part because of the approach of the staff involved in the early stages of the Daisy which had empowered everyone (including parents) to feel valued and to participate on an equal basis in planning and developing the Daisy. It was also felt to be due to the skills, drive and enthusiasm of the people involved in developing the Daisy.

5.48 In addition to the level of trust between partners, the clear set of shared objectives of the Daisy meant that everyone began to give the same messages to parents in a consistent way, for example, modelling calmness when a child is misbehaving and reinforcing health messages in all groups and situations.

5.49 These aspects of partnership working are exemplified by interviewees:

“You can just pick up the phone to another professional if you have an issue and share it”

“We can substitute for each other when running groups etc, for example baby massage and young mums”

“There is lots of communication between everyone and parents know they will get the same message – they don’t play one professional off against another. They know issues will get handled appropriately”

“Parents see good, close working between professionals.”

“We don’t get professional bickering and no-one says ‘it’s not my job’”

5.50 Another important aspect of the partnership working has been that services are co-ordinated via and ‘badged’ as being a Daisy service, rather than a service provided by SureStart, Adult Education etc. This means that the service is both less stigmatising for parents and appears to be seamless. One interviewee said *“We were working together already but now it is much more structured and co-ordinated. We are like an orchestra being conducted by Arlene”* (the co-ordinator).

What behaviours made partnership working effective?

5.51 The behaviours of partners/staff involved in the Daisy which were described by interviewees have been analysed, as this will be important learning to apply to future similar projects (for example through training). The types of behaviours described included:

- Regular attendance at meetings
- Being committed and dedicated - doing things you say you will do
- Bouncing ideas off each other
- Lots of communication
- Sharing concerns with each other
- No hierarchy
- No professional jealousy, bickering or competing for clients – *“We don’t get the huff if parents go to someone else”*
- Valuing everyone’s contribution
- Having a forum to raise things – *“we don’t always agree but now we don’t go away and fume”*
- Sharing information and support to ensure consistent messages
- Being confident in your own role
- Being good at working with people at ground level
- Being willing to *“roll your sleeves up”*, *“get all hands on deck”* and not having a *“9 to 5 attitude”*
- Valuing parents as partners
- Sharing new ideas
- Having shared goals for the community, not for our careers
- Learning from each other
- Recognising that you can’t provide everything that is needed
- Being allowed a high degree of autonomy by managers
- Permission (from managers), drive and enthusiasm to be involved

Partnership with parents

- 5.52 Another aspect of partnership working which this evaluation explored was the partnership between parents, staff and partners in running the Daisy. Parents had been involved in the Daisy right from the start, including the initial consultation, designing the type of service and making decisions on the location, logo, finances and management. This process was described by one partner as *“a journey with, not for, the community”*.
- 5.53 The survey showed that 85% of partners agreed or strongly agreed that parental involvement in planning and management works well and 85% also agreed or strongly agreed that relationships between parents and Daisy workers are good. The partnership between parents, staff and partners was felt to be important in giving parents a sense of ownership of the project and making it feel less formal and more approachable. The integrated parents' group and management committee which meets on a Thursday was thought to work well, with any parent being able to attend and raise issues.
- 5.54 However, it was felt it was also important for partners to maintain professional boundaries in relationships with parents.
- 5.55 Parents in focus groups also thought that it was a good thing that they were involved as it made them feel included and welcomed, they felt that new people could join in and that everyone could bring ideas and *“people are happy to change things and work together”*. Parents felt that they have a big impact on the running of the Daisy.

Impact on partners' own services

- 5.56 Partnership working can have an impact on partners' own services. Partners were asked about this in the evaluation. In the survey, 46% of respondents disagreed or strongly disagreed that the Daisy had made no difference to who used their services. Moreover 54% agreed or strongly agreed that the outreach worker had helped bring new people into their service. In interviews partners said that the Daisy enabled them to reach new parents, for example those who do not normally attend antenatal or postnatal classes, and one said that they knew that *“the right parents, who would benefit from the group and were primed to attend”* would come along. Another felt that it was easier to run her classes because she knew she had support from partners. One partner said:

“The Daisy has provided me with a place to deliver and discuss topics with groups I would never normally have the opportunity to speak to. Due to the relaxed and friendly atmosphere people feel able to discuss issues that I believe would never otherwise be mentioned to me, e.g. personal safety, crime prevention and the like”.

- 5.57 Not all partners had found this to be the case, however, as one said:

“Although sited near our own service, it has not had any real impact on our work. We occasionally work with them on things like No Smoking Day but given

the levels of alcohol and drug use in the area, we would have thought we would have had direct referrals⁵. We do tell our clients about the Daisy facility.”

5.58 A few partners reported that the Daisy had helped reduce the number of parents getting to a crisis situation because earlier intervention was available. One partner from universal service said that it helped her service to focus on the most urgent cases, because she could refer the less urgent cases to the Daisy and knew that they would get appropriate support. The outreach worker post had been particularly important in getting earlier help for families in need. Health Visitors believe that vulnerable families received additional support because of the opportunity to participate in the summer trips.

5.59 One partner said:

“Personally, working in Craigshill, there is a lot of poverty and sadness – it is very stressful. The social workers are on the phone every day about lots of different families. Being able to have a balance of both reactive and proactive, preventative work has probably made the difference for many of us in staying in Craigshill”

5.60 Other comments on the impact on services included that it had reduced duplication, provided a link in the area to local mums (from a service outside of Craigshill) and that it had made it easier to publicise courses.

Improvements in monitoring and evaluation

5.61 The fourth objective that the evaluation sought to address was to identify improvements that could be made to monitoring and evaluation in future.

5.62 This evaluation was qualitative in nature, partly because there is very little quantitative information currently available which can be used to assess impact, other than the number of parents and children using the Daisy and the breastfeeding and dental registration data cited earlier in this report.

5.63 The lack of quantitative data was acknowledged by partners and staff and there are plans already underway to develop a database. It is intended that this will enable recording of information about participants from their first involvement with the Daisy to when they move on. This will help both with assessing the impact of the Daisy on individual parents but also, importantly, will provide a record for parents of which courses and activities they have taken part in, to help them with CVs and further opportunities.

5.64 It is important, therefore, that the database is constructed in such a way that it allows both counting of numbers attending the drop in (without double counting) and all the associated activities and courses run under the Daisy umbrella *and* allows information recording of individuals so that progress and changes can be identified. Records should be anonymised by each parent (and child) having a

⁵ The Daisy Drop In gives out information about drug and alcohol services but does not make direct referrals. These would either come from Health Visitors or parents would self-refer.

unique identifier. It would be important to record the postcode so that the datazone can be identified. It might also be useful to have a drop-down menu of relevant vulnerability issues, though this would need to be balanced against the need to have a non-threatening and welcoming ambience, which could be affected by too much form-filling at the start.

5.65 The outreach worker and community education worker have introduced, on a pilot basis, a form for recording parents' confidence levels. If this is found to be useful, confidence scores could be entered into the database at different stages of parental involvement in the Daisy.

Success factors

5.66 Parents, staff and partners were asked about what they thought were the success factors in the Daisy and what things should be replicated elsewhere. The main factors identified were:

- The location of the Daisy in the Craigshill Mall, minutes walk from a range of other services including shops, the health centre, housing association, library, Craigsfarm community centre, drug and alcohol project, nurseries and schools. The location and the shop front made it accessible, visible and it had lots of passing traffic
- Effective partnership working on the project (described above)
- The informality of the Daisy – unlike other services, you could just drop in and chat
- Community involvement and development – including the team building which had taken place which had established relationships, trust and sharing
- The skills and drive of key people involved
- Having a co-ordinator post and approachable, friendly, dedicated staff
- Management 'buy-in'
- Funding
- Flexibility to change if ideas don't work
- Innovation and creativity, for example, using arts in the consultation process, getting a TV character to attend the opening and many other examples
- A programme of activities with social highlights

5.67 The differences between the Daisy and other services were discussed with parents. They said they were more likely to use the Daisy than other services because:

- *"It is run by parents"*
- *"Because it is other parents like us, it is easier to talk"*
- *"You have to keep your child quiet in the library"*
- *"It's free – I haven't got the money to sit in a café"*
- *"I might not feel comfortable contacting the surgery, for example, if I'm not sure if it is something serious. I can talk to people at the Daisy first"*
- *"You can get information about buses, shops and other services"*
- *"You can get the right advice"*
- *"The health visitor and midwife come to the Daisy – it is less formal than the health centre"*

- *“You can get sometimes get more helpful information from other parents than you can from the doctor”*
- *“You only get a five-minute appointment at the health centre”*
- *“I see them [other services] as officials”*
- *“The Daisy is not judgemental”*
- *“You can get personal and confidential support”*

Other issues

5.68 A number of other issues were raised by partners during interviews. The first was concern about the uncertainty of future funding of the Daisy, and therefore, of staff posts. Management of the Daisy by the Broxburn Families Centre had also been discussed and parents were reported to be concerned about this.

5.69 The second issue was the tension between economic development targets (getting people into jobs) and community development approaches, which take time to engage people and are based on an empowering, ‘bottom-up’ approach. Although many parents had gone on to work after attending the Daisy, it was felt that an empowering approach should allow opportunities and choices and not only be geared towards jobs (which might not always be best for parents of small children).

5.70 The third issue was the use of the Craigsfarm community facilities⁶. It had been a slow and painstaking process to get access to Craigsfarm facilities on a reliable, regular basis. There had been instances in the past where a booking of a room by the Daisy had been cancelled in favour of a paying client (the Daisy and other local organisations are entitled to use Craigsfarm free of charge). In addition, a room that would be suitable for a creche is not permitted for this use because it would disturb the office staff below.

⁶ Lack of community access to Craigsfarm has been raised in another project being conducted by Clarity recently and is clearly an issue that needs to be tackled.

6 Discussion and Conclusions

- 6.1 This evaluation aimed to examine the effectiveness of the Daisy Drop-In and its impact on parents and children using the project. The evaluation was qualitative in nature and almost entirely based on the self-reported experiences of parents, staff and partners who are involved in the Daisy in some way.
- 6.2 The evaluation aimed to examine:
- the impact of the Daisy on parents
 - the impact of the Daisy on children and families
 - the impact of the Daisy on Craigshill
 - whether the Daisy was achieving its aims and objectives
 - the effectiveness of partnership working
 - what could be improved
 - success factors
- 6.3 Approximately 100 parent visits and 75 child visits are made to the Daisy Drop In premises each month and there are 90 current regular parent users. Based on the views of parents, staff and partners, the evaluation found that the Daisy was having a positive impact on parents by helping them to:
- reduce isolation and stress
 - feel more a part of their community and participate in community groups
 - increase confidence
 - increase parenting skills
 - make positive lifestyle choices
 - acquire new skills
 - in many cases move onto jobs, voluntary work or college
- 6.4 The Daisy was also thought to be having a positive impact on children by helping them to:
- bond with their parents
 - develop social skills
 - increase confidence
 - eat more healthily
 - have opportunities to take part in fun activities which they might not otherwise be able to do
- 6.5 It was also felt that the Daisy was helping families to eat more healthily, learn new activities and be less stressed.
- 6.6 Parents, staff and partners thought that the Daisy was having a positive impact on Craigshill because:
- more people know each other
 - the Daisy provides a focal point for the community by providing the food co-op and a place to get information and advice
 - people help each other more
 - parents are more involved in local committees
 - the Gala Day has been reinstated and two successful Gala Days held

- 6.7 The overall aim of the Daisy is to improve the life chances of young families living in Craigshill, particularly those in the most deprived datazones. A high proportion of those participating in the evaluation thought that the Daisy was achieving this aim. It was felt that the addition of the outreach worker post had been particularly important in bringing in new families, particularly those who are hard to reach, or experiencing difficulties. However, some partners thought that more needed to be done to bring in new families, though others were concerned that too much emphasis on this would make it difficult to do the required level of work with existing families. Unless new resources are providing, there is clearly a balance to be struck between reaching new families and consolidating work with existing users.
- 6.8 In terms of increasing breastfeeding rates, there is not clear quantitative evidence that the Daisy is having a positive impact. However, staff and partners feel that parents are more likely to consider, try or persevere with breastfeeding, due to their attendance at support groups at the Daisy or advice given there. Two parents at focus groups said that attending the Daisy had helped them to breastfeed their babies.
- 6.9 The Daisy has clearly had an impact on awareness about oral health, as seen in the new dental registrations and attendance. This was supported by anecdotal evidence from parents and partners. The Daisy is also developing work to help parents with phobias to attend the dentist. Furthermore, the Daisy's policy on allowing only fruit and water to be consumed on the premises appears to be having an impact on children's eating habits and bottle-feeding habits. However, the ultimate impact in terms of oral health is not currently measured.
- 6.10 The Daisy is running a well-attended range of parenting support groups and classes and had encouraged vulnerable parents to attend. Partners report that attending such groups has an important effect in preventing crises occurring through early intervention when parents get stressed. In focus groups parents also said that they had developed more skills and confidence as parents and partners felt that this impacted on the behaviour of children and how parents managed it.
- 6.11 The Fresh as Daisy food co-op project and cookery and weaning classes have been popular with parents. Parents in focus groups said they had acquired new cooking skills and awareness about healthy food. Improvements in what was being cooked in parents' homes had been noted by workers. Messages about healthy eating and healthy lifestyles are reinforced by all partners.
- 6.12 Partnership working in the Daisy project is clearly effective. The evaluation found that this is because there is a high level of trust between partners, that there is a clear set of shared objectives and that services are 'badged' under the Daisy umbrella. It is important to note the behaviours that are associated with partnership working as these can be the basis for training and selection of staffing in future (though a full job analysis should be conducted).
- 6.13 Partnership between staff, parents and partners also worked well and parents felt that they have a big impact on the running of the Daisy.

- 6.14 Although most aspects of the Daisy are effective, there were some aspects of it that were less positive. Although these were raised by only two people, it is important to be attentive to such concerns, as they may be reasons why some people do not use the Daisy. The main one which may impact on parents is the potential for gossip to develop (although the Daisy has measures in place to address this). The other is that, at times, for some people, the Daisy may not feel like a welcoming place.
- 6.15 The other concern raised by a partner was that the level of child protection training of Daisy staff may not be adequate. However, it is noted that all staff are trained in child protection and that there are plans to provide further training this year.
- 6.16 Potential improvements identified by parents, staff and partners were focused on the need to expand the Daisy by getting larger premises and opening for longer hours. This would allow more people to attend and more groups to be run, as well as having an in-house crèche.
- 6.17 Most partners felt that the Daisy had a positive impact on their own service by helping them to access hard-to-reach parents and providing opportunities for earlier intervention. One partner felt that it helped her and colleagues stay working in the area because it made their jobs more balanced and less stressful.
- 6.18 Partners, parents and staff identified a range of success factors of the Daisy which included (but were not limited to) its location, the excellent partnership working on the project, the informality compared to other services and the community involvement in the Daisy from the start. These and other success factors, and the reasons why partnership working is effective, should be the basis for replicating the work of the Daisy in other parts of West Lothian.
- 6.19 It is recommended that a new database is developed for the Daisy Drop In, by June 2009, which will allow better information to be gathered for monitoring and evaluation purposes. The database should allow both counting of numbers attending the drop in (without double counting) and all the associated activities and courses run under the Daisy umbrella *and* allow information recording of individuals so that progress and changes can be identified.

Clare Lardner
February 2009

Appendix 1: Sample Daisy programme, 2008

Autumn/Winter Programme				
Date	Activity	Time	Venue	Crèche
Monday 25th August (ongoing)	Breastfeeding support	11.00-12.00pm	Daisy Drop In	No
Mondays & Thursdays (ongoing)	Fresh As A Daisy Market Stall	9.00-12.30pm	The Mall (outside Daisy)	N/A
Tuesday 26th August	Zoolab Exotic Animals	11.00-12.00pm	Daisy Drop In (Limited Places)	No
Wednesday 27th August (ongoing)	TOPP Mums	1.30-3.00pm	Beatlie School Campus	Yes
Thursday 28th August (ongoing)	Daisy Group	10.00-12.00pm	Craigsfarm	Yes
Friday 29th August (ongoing)	YM2B	11.00-1.00pm	Daisy Drop In	Yes
Monday 1st & 8th September	Xmas Savings Special—Credit union	10.00- 12.00pm	The Mall (outside Daisy)	No
Tuesday 2nd September	Career Sometime? - Sure start	9.00 -11.00am	Daisy Drop In	No
Tuesday 2nd September For 4 weeks	Pam's Weaning Classes	9.30-11.30am	Riverside Community Wing	Yes
Wednesday 3rd September for 4 weeks	Talking Teeth The Daisy Way	9.15 - 10.15am	Daisy Drop In	No
Wednesday 3rd September (ongoing)	Baby Massage	11.00-12.00pm	Daisy Drop In	No
Thursday 4th September (1st Thurs every Month)	Childminding support Group	10.00-11.00am	Daisy Drop In	No
Monday 22nd September for 12 weeks	Incredible Years	12.30-3.00pm	Craigsfarm	Yes
Monday 22nd September (ongoing)	Play time with Arlene	10.00-11.00am	Daisy Drop In	N/A
Saturday 27th September	Latham Park Grand Opening	12.00-3.00pm	Latham Park, & Bowling Club	N/A
Wednesday 1st October (ongoing)	Frannies Fit Fun Walk	9.15-10.15am	Meet At Daisy Drop In	No
Tuesday 28th October for 8 weeks	Getting Through the Day	12.45 - 2.45	To Be Confirmed	Yes
Tuesday 28th October	Meg and Mog - Zoolab (Fancy Dress)	11.00-12.00pm	Daisy Drop In (Limited places)	N/A
Tuesday 4th November for 4 weeks	Cooking On a Budget	9.30 - 11.30am	Riverside Community Wing	Yes
Thursday 6th November for 4 weeks	DOSH Finance Course	12.30 - 2.30pm	Craigsfarm	Yes
Monday 1st December	Usbourne Books Fayre	10.00-12.00pm	The Mall (outside Daisy)	N/A
Tuesday 2nd December	Daisy Drop In Celebrates Success	9.30-2.00pm	Riverside Community Wing	Yes
Wednesday 17th December	Daisy Xmas Party	10.00-11.30am	Craigsfarm	No