

ALL ROADS LEAD TO BULWELL: AN EVALUATION OF ROOM TO PLAY



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EXECUTIVE SUMMARY

Aims

This report aims to describe the ‘Room to Play’ service and find out to what extent, and how, Room to Play is engaging ‘hard(er) to reach families’ and what their outcomes are after engagement with the service. Whilst this report acknowledges that the language surrounding hard(er) to reach families has been reframed in recent years to include underserved, underrepresented, or seldom heard individuals, families, groups and communities; the original terminology used when developing the evaluation strategy will be used throughout this report to offer consistency to the process.

Background

Room to Play is an extension of Small Steps Big Changes (SSBC’s) Toy Library Family Mentor service in Bulwell. A pilot ‘shop front’ project was created to overcome one of The Toy Library’s most significant challenges; engaging families that are eligible to use the Family Mentor (and other local child and family services), but don’t know about or are suspicious of them. Whilst other groups have been evaluated both internally and externally by SSBC[1] and Nottingham Trent University[2] respectively, to be of benefit to local families evaluation of Room to Play and, more specifically, its impact on access by underrepresented families has yet to be explored.

This evaluation used a Mixed Methods Sequential Evaluation Design with two phases to collect information from service users. It combines surveys and interviews to collect data[3].

Phase 1 involved the distribution of a paper questionnaire (Appendix 1) by Toy Library Family Mentors to all parents/ caregivers of children who attended Room to Play over the period of one month (March 2024). Ninety-four (n=94) questionnaires were distributed in total. This allows us to look at who is using Room to Play, when, and in what ways.

Phase 2 consisted of 10 semi structured interviews (Appendix 2) with service users identified as 'hard(er) to reach'. These were audio recorded, transcribed and thematically analysed using Braun and Clarke's (2006) six step framework[4]. This helps us to look in more depth at the experiences of the adults using Room to Play and its impact on them and their babies and children both in the short and long term (Appendix 3).

All data was collected, handled, stored and archived in accordance with General Data Protection Regulation directives.

Outcomes

The Toy Library's Room to Play offers support to a diverse range of parents through providing an accessible service, that is reported to provide multiple benefits for both adults and children who attend, including those who are underrepresented (Appendix 3). As one parent writes, Room to Play is:

'a chance for children to explore, discover and experiment with other activities. It's an absolutely lovely facility: bright, welcoming, enriching, community focused and vital for early years development as well as providing specialist and peer support for parents'(S).

Conclusion and recommendations

Learning shared in this report is supportive of the long-term sustainability of the Toy Library's Room to Play project. In recognising the multiple and complex needs of underrepresented families when raising and meeting the aspirations of their children, and providing locally-based, outreach-focussed, accessible parenting support, evaluation findings suggest that Room to Play has made a substantial difference to the health and wellbeing of children, parents and caregivers in the Bulwell community and beyond.



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1. INTRODUCTION

The Family Mentor (FM) service was developed by Small Steps Big Changes (SSBC), as part of a test and learn approach to service delivery funded by The National Lottery's, 'A Better Start' Programme.[5]

The FM service was established in consultation with local parents requesting ongoing emotional support, reassurance and expertise around parenting in the form of a non-judgmental, non-professional, home visiting service. It embodies the Small Steps Big Changes principle "Children at the heart, parents leading the way, supported and guided by experts".[6]

Recruited for their aptitude rather than the qualifications they hold, Family Mentors are a highly trained paid peer workforce. They are parents, grandparents and those with lived experience of parenting, with a passion for parenting or caring for children, and a desire to help children and families reach their full potential.

The FM service focuses on improving three key child development outcomes: nutrition; social and emotional development; and speech, language and communication. Family Mentors in each of the four identified SSBC wards, Aspley, St Ann's, Hyson Green and the Arboretum and Bulwell, deliver an evidence-informed, manualised programme of child development and preventative health support, 'Small Steps at Home'. The service is offered to the parents and care givers of children aged 0 – 4 years living in the SSBC ward boundaries, in addition to a range of community based social interactions designed to engage with and support local parents both in and on their parenting journey(s). In Bulwell the service is offered by The Toy Library.

External evaluation by Nottingham Trent University (NTU)[7] shows that parents perceive improvements in wellbeing and confidence in both themselves and their children when supported by the Family Mentor service. One hundred percent of parents would recommend the service to a friend or family member with a young child if they were eligible.[8]

When internally evaluated[9], parents reported enjoying participating in group activities known to support child development, such as singing and appreciated opportunities for their children to interact with other children in a safe and stimulating environment. Group success is attributed to enthusiastic, welcoming and engaging group leaders; leaders who used feedback gathered from parents to inform future group content and delivery style.

This report has been commissioned by SSBC in response to the innovation invitation as part of the existing Family Mentor contract and developed in partnership between the Toy Library and the Family Mentor service.[10] It explores the impact of Room to Play on the children, parents and caregivers of Bulwell including those who find accessing other child and family health care services more difficult.

2. BACKGROUND

Room to Play opened in October 2022 as an innovative, ‘drop-in’ style provision, designed to attract families who may reject a more conventional form of service delivery. Designed to improve the reach and success of the Toy Library Family Mentor (FM) service by acting as the ‘front door’ to these and other services, it aims to provide a safe space for parents and care givers who might benefit from additional support but who may miss out. For example, minority or special needs populations sometimes find mainstream assistance inappropriate or difficult to access, while more targeted or specialised forms of help may feel stigmatising or seem inappropriate to those with complex needs.[11]

The definition of underrepresented/‘hard(er) to reach families’ varies.[12] This may include those described as ‘vulnerable’, ‘isolated’, ‘excluded’ or ‘detached’ from the system (e.g. ethnic or language minority groups). They may be viewed as lacking in key skills and resources (e.g. self-esteem, confidence, employment, income, adequate housing), and some may experience problematic life trajectories (e.g. drug and alcohol abuse, domestic violence).[13] ‘Hard(er) to reach’ families may be isolated due to involuntary reasons such as being a single parent, belonging to a minority group or being a young parent. Alternatively, groups such as refugees and asylum seekers, travellers and prisoners’ families may isolate themselves voluntarily.[14]

Definitions of who is underrepresented / ‘hard(er) to reach’ can also vary depending on the locality, service provision and local expertise. Room to Play is located in Bulwell, a market town 5 miles (7 km) to the north-west of Nottingham city.

Nottingham North, which includes Bulwell, is one of the most deprived regions in the country, with 29.5% of children (under 16 years) living in low-income families in Nottingham, compared to 17.0% in England. The rate of conceptions in women aged under 18 (per 1,000 females aged 15-17) in Nottingham is 24.9 compared to 16.7 in England. Local restructuring of children's centres has included the closure of Bulwell children's centre with the nearest Family Hub opening in Bestwood (over 3 miles from Bulwell).



3. EVALUATION OBJECTIVES

The purpose of this evaluation is to find out and describe:

- The proportion of the families that visit Room to Play who are considered as underrepresented
- The nature of the contact underrepresented families are having at Room to Play
- How those who engage with Room to Play are encouraged to access other services including the FM service and how successful these strategies are
- How Room to Play is experienced by its users, particularly those who are considered under represented
- The current operation of Room to Play and how this meets service aims/objectives
- How many underrepresented families who are eligible but previously declined to use the FM service go on to engage with the service.

4. PHASE 1 - SURVEY



Methods used

Phase 1 of the Room to Play evaluation involved the distribution of a paper questionnaire by staff employed by the Toy Library Family Mentor service to all parents/ caregivers of children who attended Room to Play over the period of one month (March 2024). By choosing a month and offering the survey to everyone attending, the results offered a typical picture of attendances at Room to Play, allowing generalisations to be made about all attendees across different months.

The questionnaire asked demographic questions to ascertain who is using the service and whether they met any criteria for underrepresented families as described in the literature. It also asked about the nature of the contact families were having at Room to Play and what their visits consisted of (Appendix 1).

Free text questions provided an opportunity for parents and caregivers to share an opinion, describe personal experiences or perceptions not covered in the survey and explain or offer further insight into a previous answer.

Informed consent was gained through completion of the questionnaire for Phase 1 (the questionnaire included a question asking if parents / care givers would agree to be contacted for interview) and from a consent form for Phase 2 (Appendix 6). In line with the Mental Capacity Act 2005, capacity to provide informed consent was assumed unless it was proved otherwise.

A clear General Data Protection Regulation (GDPR) statement was provided in the Application for approval to conduct a Service Evaluation agreed with CityCare, and the following ethical statement shared with participants consenting to take part in the evaluation:

'All data will be anonymous, stored on secure servers and used only for the purposes of evaluating Room to Play.'

Information provided to parents / caregivers (including the reports dissemination strategy) was agreed by a dedicated group of parent volunteers prior to implementation.

Results

The survey included 94 unique adult attendances (256 unique attendances including babies and children).

Seldom-heard voices attending Room to Play included parents and caregivers from the following groups:

1. **Mental Health concerns** - 10% as a percentage of unique attendees in March 2024
2. **In receipt of benefits** - 44% as a percentage of unique attendees in March 2024
3. **English as an additional language** - 14% as a percentage of unique attendees in March 2024
4. **Ethnic Minority Families** - 17% as a percentage of unique attendees in March 2024
5. **Living with a disability** - 10% as a percentage of unique attendees in March 2024
6. **Parents and caregivers who were unemployed** - 17% as a percentage of unique attendees in March 24

Adults, who were typically mothers but included dads and grandparents, reported multiple benefits of attending Room to Play for both themselves and their children, including:

Benefits to parents and caregivers:

- 70% reduced isolation
- 66% improved wellbeing
- 67% reported having more ideas of activities to do at home to support child development.

Benefits to babies and children:

- 92% benefited from play opportunities
- 80% benefited from opportunities to socialise with other children
- 73% reported their child has grown in confidence.

Three out of the ten parents interviewed in Phase 2 of the evaluation shared its importance post pandemic.

'We need to play and things like that, so it gives them a little network, which was difficult with kids anyway, and then with the pandemic as well, I think it mitigates a lot of the negative outcomes that could have been from lockdown' (interview 4)

36 out of the 94 parents and caregivers who completed the survey lived in Bulwell, with 28 reporting having a Family Mentor. Eight were approached by SSBC but declined the Family Mentor service and 42 out of 94 had not been offered a Family Mentor.

To get a Family Mentor, a family needs to live in a SSBC ward, be pregnant or have a child aged 1 or under. Automatic referrals into the service for pregnant women, babies born in ward, or babies and children who moved into the area aged up to nine months old come from SystemOne[15].

Families interviewed with a child eligible for the Family Mentor service who shared wanting but not being offered a Family Mentor were either new to area with a child aged one or over, or were separated from the main carer who lived out of ward.

'I did get asked by one of the ladies that run the group here and apparently we just missed it because he's over the age they offer it .. I-I just think that would have been helpful..'(interview 8)

Unlike the SSBC Family Mentor programme, the Room to Play service does not have strict ward boundaries. This means some of the respondents completing the survey and attending Room to Play would not have been eligible for a Family Mentor.

"I travel about an hour to get here. So we come like every other week so that, like, it's not too much on my daughter traveling but so we still get to access Room to Play". (Interview 1)

The majority of parents and caregivers attending Room to Play were either referred by a Family Mentor (n =26) or by parents and / or caregivers who were already attending (n=21). Its location in the centre of Bulwell also offers opportunities to 'discover' the service by chance (n=18).

'It's a good place for it to be... I think it's ideal, it's accessible .. It's probably central to Bulwell market so people would just drop in (interview 7).

The majority of the parents and caregivers who responded to the survey had been attending Room to Play for a few months or more, with almost 50% attending for over a year.

Open six days a week, Room to Play provides an accessible service to those who work or need to prioritise what they attend in the week.

'Most groups that you find do only do weekdays or, and like most services that you find, day do weekdays, like health is really open Monday to Friday, if they're even open' (interview 1).

Survey results suggest that trust in statutory service provision might be an issue for some of the families attending Room to Play. When asked, 40 out of the 94 adults surveyed rated trust in other services as 3 or below on the 5-point Likert scale used[16]. This suggests that while just over half of adults asked shared trusting statutory service provision at 57%, 43% did not. In keeping with a recent Kinship survey (2023) where just under half (49%) of respondents said they did not trust their local authority to support them and their family[17], this finding is reflective of much of the literature that surrounds ‘hard(er) to reach’ families, who find engaging with statutory services more difficult for a variety of reasons.[18]

Whilst a significant percentage of parents and caregivers shared using their General Practitioner (56.4%) or the Health Visiting service (54.3%) as sources of information and support, for some Room to Play was the only service accessed (2.1%). When exploring this with a parent recently separated from their partner in Phase 2 of the evaluation, despite having parental responsibility and caring for their child, their ‘registration’ elsewhere in the City meant that they had no access to statutory services. *‘If there's something that I specifically had a concern about and I wanted a second opinion on I wouldn't know who else to come to apart from here’ (interview 6).*

Again, parental / caregiver feedback here is reflective of the national picture. 97% of parents with children aged nine months had seen a Health Visitor, 88% a midwife, 87% their GP in comparison to 15% who had attended a Family Hub and 2% who had accessed the support of an early help worker[19]. Analysis undertaken by The Children’s Services Funding Alliance found that spending on early interventions (such as children’s centres, family support services and services for young people) declined by 48% between 2010–11 and 2019–20, while expenditure on late interventions increased by 34%.[20] Room to Play was created in response to this imbalance, and helps to redress this.

Both phases of the study explored the role of Room to Play in signposting on to other services. 52% of families attending were signposted to and accessed professional support elsewhere. Parents and caregivers interviewed attributed uptake to the relationships developed with the Family Mentors and Volunteers at Room to Play and how easy they were to talk to:

'Seeing a familiar face sometimes makes people more easier - you know - (people) don't feel so shy or not 'I won't say' or scared' (interview 5)

Topics discussed with Toy Library Family Mentors at Room to Play included child development, health (including nutrition) and behaviour management (sleep, potty training etc). Information shared is supported by the delivery of more structured sessions for example baby massage and by professionals who come in to deliver health-specific messages.

Phase 1 summary

Room to Play is attended by groups previously described as 'hard(er) to reach'. For example 44% of families attending Room to Play described themselves as being in receipt of benefits[21].

"The environment is always clean, warm and welcoming. Nice that it is unstructured. As a single parent it is nice to be able to be around other friendly adults' (S)

The benefits of attending Room to Play are positive for babies, children and their parents / main caregivers. This is best expressed by one parent / caregiver who wrote in the free text section of the survey:

'The benefits of Room to Play are absolutely immeasurable and have shaped my child's early life so positively'(S)

Another, that Room to Play is recognised in the community as, 'somewhere friendly, local and free to come' (S).

Limitations

The survey was conducted during Ramadan and therefore the month selected might not be reflective of families who attend across the year. This affects the reliability of the findings and reduces the ability to generalise the findings beyond the data collected, analysed and shared here.

Whilst useful, descriptive statistics can only provide a broad overview of Room to Play. In order to explore how Room to Play is experienced by its users, particularly those who are considered 'hard(er) to reach', a qualitative evaluation is needed.

5. PHASE 2 - QUALITATIVE INTERVIEWS

Phase 2 of the Room to Play evaluation consisted of 10 semi-structured interviews with parents / care givers who were considered underrepresented. Interviews focussed on their individual experiences of using the Room to Play service. These were conducted either at home or at Room to Play, audio recorded and transcribed.

Whilst the initial protocol stated that all interviews would be conducted in the home, parents and caregivers were offered a choice in location when the original interviewer left the SSBC programme. As a Specialist Public Health Nurse or Health Visitor, it was felt that parents and caregivers might feel less comfortable talking with the new interviewer who could be perceived as a threat and / or where the potential for 'role conflict' might arise. Overflow dates were included in the interview schedule to conduct rescheduled sessions.[22]

The names and addresses of consenting parents and caregivers meeting the criteria of the underrepresented were selected by a third party from a list of parents with characteristics recognised as Underrepresented and shared with the interviewer by email. These were deleted post interview and a number attributed to each transcript to ensure anonymity.

When organising interviews, parents and caregivers were prepared for the interview by the recruiter who confirmed the identity and background of the interviewer, shared an approximation of the time needed (15 – 30 minutes) and described the conversational style of the interview[23].

Additional contact at this point in the evaluation offered an opportunity to both clarify the nature and purpose of the interview and confirm parent / caregiver consent, increasing the validity of subsequent findings.

Braun and Clarke's (2006) framework for systematic data analysis was used to identify patterns or themes within the qualitative data collected. Braun and Clarke (2006) distinguish between two levels of themes: semantic and latent. Semantic themes look at what is said or has been written. In contrast, the latent level '...starts to identify or examine the underlying ideas, assumptions, and conceptualisations of the data[24]. Both are looked at here. After reading and re-reading the transcripts, each line was summarised and coded. No pre-set codes were used, but instead codes were modified and developed as the coding process progressed and themes were identified, increasing the credibility of the findings.

Results

Ten interviews were conducted in total, each identified with one or more of the criteria shared for being 'hard(er) to reach'. [25]

Room to Play is described as an accessible service by all of the parents / caregivers:

'There's always something going on, so even if you just need to drop in here, there's always gonna be someone there' (interview 6).

Its location in Bulwell town centre was seen as a positive by everyone interviewed.

'And it's so accessible to get to as well, with, like, the trams and buses only being around the corner, and there's even the train because like, we've had to come on the train before because the trams haven't been running, and so I think having it in this location as well makes it really accessible for people to come to if they're not from the area.' (interview 1)

Universal 'admission' from across the city was thought to promote diversity and encourage inclusive practice.

'It's really nice to see a variety of people as well because you can go to some places and it's very segregated or there's just one type of community there .. I'm black, my [child] is black, and we come here and we don't feel left out.' (interview 6)

Room to Play is open weekdays and Saturdays for long periods of time, meaning that parents can come and go as they please. No pre-booking is required.

'Sometimes I don't go consecutively, you know, you've got your life going on... And I think that makes it a bit more comfortable kind of thing, you don't have to really commit, and then if you can't commit to it, then you've lost your space or something.' (interview 7)

No costs at point of delivery means that the hidden costs of accessing the service can be easily 'balanced' by those attending.

'We don't need to pay anything.. so that's good, it's just one place you can go otherwise, you have to pay everywhere where you want to go. Anywhere you're going to, like any play area if you're going, you have to spend money. It's a good place, you don't need to bring anything there.'(interview 2)

Multi-professional use of the room means other services feel more accessible to parents attending.

'There was another lady that came, and she came about speech therapy, but I didn't get time to actually speak because it was very busy... That was good that they have somebody asking you, like, are you worried about his speech... which I am, so if she comes again, I'll make sure I get there. So that's good because it seems like a one stop shop .. you know where you can come and kind of think, I can get some guidance there or some advice there' (interview 8).

Feedback shared by three of the services using Room to Play is equally supportive of the need for an accessible safe space in which to build the trust that relationships and community connections require for effective early intervention to take place.

“Room to Play is a wonderful venue where I have facilitated several of our specialist parent/baby groups. The room itself is stimulating and inviting for both young children and families – our families are always giving positive feedback on the venue and how accessible it is, being on the high street and near good transport links. RTP offers lots of toys and resources that have supported our groups, the use of the shutters also offered privacy during our baby massage sessions which was fantastic. We also appreciated the air-con system when running groups in the warmer months, many venues we use are unable to offer this. The staff at RTP have always been hospitable and always make our staff and families feel welcome. Many of our Bulwell families have continued to use RTP after our specialist sessions have ended and enjoy the flexibility of the drop-in sessions. We often encourage our families to attend RTP as it is a great opportunity for them to meet new families and provide great learning/play opportunities for their child”.

-Healthy Little Minds- An SSBC commissioned Parent Infant Relationship service delivered by Nottingham City Council

“The EY SEND team have been using RTP as venue for our SEN session since September 2023. (The service has a timetabled weekly slot of an hour and a half during term time). The central location of the venue has good public transport which allows parents to get to us easily. Most of our parents at the moment drive and there is adequate parking nearby. RTP has good access into the building allowing for children’s specialised equipment such as walking frames. The toilet facilities are good and fire exits are clearly marked and the room is very clean and inviting. The team at RTP have been very welcoming which has allowed us to network together and for us to share advice and support around referring into our service. We have access to all the resources and have been able to use these for our own sessions.

“The team are happy for us to move furniture and equipment to meet our needs for the session. The families that attend our session have shared that the environment is an important factor when bringing children with additional needs to a group or activity. They have found RTP to be a clean bright environment that feels inviting. They feel it makes such a difference having a venue that is tailored towards children’s play. We found that having a single-purpose venue like RTP without access to the public for other services ensures that our families feel safe and comfortable. It can be an anxious time when parents they first bring their children to a group and RTP gives them the opportunity to do so. Coming to our session initially has given some parents more confidence to attend other activities in the local community”.

-Early Years Special Educational Needs and Disability (SEND) Team

“The Early Intervention Speech and Language Therapy Team have used the Room to Play venue to host our Tiny Steps to Talking groups as we know the importance of using accessible venues that are in the heart of the community. Room to Play has also been used for our Speech and Language Advice Drop-In sessions, attended so far by 5 families, who we were able to give immediate advice to and refer into our service for some further support. The central location within Bulwell town centre, close to local bus routes and a short walk from free parking means this is a popular venue for families to attend. Room to Play is a warm, friendly and easy to access venue and all the families we have worked with in the setting value the resources Room to Play offers and the support that the Family Mentor Service gives”.

-Early Intervention Speech and Language Therapy Team

In addition to opening up service accessibility, friendly staff, a welcoming environment and no reception to get past helps parents and caregivers to relax when attending Room to Play.

‘My immediate reaction was wow this is really homely and comfortable and we took our shoes off, and we were greeted and welcomed very nicely’ (interview 9).

'I felt really comfortable just to walk in and ask and I'm not sure what it was. I think it's because there isn't like a reception or anything like that it's just you can walk in and as soon as anyone that comes in the door there's always one, that says, oh hi you, okay, and then they'll come and talk to you so it's .. the informal atmosphere of the place that really helps everyone that comes here' (interview 6).

Everyone interviewed spoke about the importance of feeling accepted.

'It wasn't like, you know, oh, I'm just taking my child to play I felt like um parents are supposed to be acquiring information and acceptance and feeling acceptance' (interview 9)

For some this made a huge difference.

'I was struggling a bit to get out, find groups because I was such a young mum, but as soon as I came here, I was welcomed in' (interview 3).

Shared information from parents and trained peers feels unlimited in terms of time; is supported by displays and leaflets; and is seen as non-judgemental:

'...and then they (Family Mentors) was giving me like their own advice kind of thing as well, like from them being mums and having their own children. I've had advice on every single thing, and it's, like, made me feel a lot more confident, as a young mum, to kind of, get out with a baby and just get out with her' (interview 3).

'it's nice to talk with other parents as well so we can share whatever want to share like discuss our child if they are any, like any, any type of, any problem, so we can share with other parents as well' (interview 2).

'I've got two friends who are also young mums. and I think we were kind of talking because there's this kind of judgment on young mums and it's kind of a bit judgmental, but as soon as we came here now it's been really good and all the mums are friendly. They all know me by name..' (interview 3)

For some it was the only service they were accessing for information and advice, whilst for others, it complimented what was being delivered already:

'A lot of the time, the advice I'm getting from here is the exact advice I'm getting there, and if not a bit more personal, like views and a bit more time kind of speak to here, cause it's like four-hour play session and you can sit and talk the whole time to someone about advice, and they'll sit and talk to you'. (interview 3)

Everyone interviewed shared how beneficial Room to Play was to both themselves and their babies and children, supporting the data collected in Phase 1 of the evaluation. For parents, the range of play activities – both unstructured and guided – gave them new ideas about what their child enjoyed and what they could do at home to support their child's development.

'There's always lots of activities, activities that I don't wanna do at home. You know like your painting and your messy play and the water and everything' (interview 4)

They appreciated the opportunities it provided for their babies and children to socialise, learn from and build relationships with other children.

'Her walking, crawling everything, she comes here and .. she's watching all the kids running around and she's like, I want to do that and she just got up and done it...And she's grown so much more confident, to the point where she's not physically like that, attached to me, I can go out and leave her knowing she'll be okay'. (interview 3)

'He benefit too many things from here as like I said he like play with kids, other kids. He want to see other kids, he want to talk' (interview 10).

Parents also described how the environment actively promoted the skills needed to be school ready, increasing the child's sense of independence and curiosity about the world and making the transition to nursery easier.

'She gets to play with similar age groups while also being around babies as well. She gets to learn how to be careful and learn how to be present and just to explore other toys or sensory activities and, even though it's not told there are rules, and she gets to abide by them and experience that as well' (interview 9).

'We've only been to the like, baby groups, for like just babies, I've seen, as they get to start walking, they do like, a little graduation thing for them, almost like, oh, well done, you can't come to babies anymore. You've got to graduate to the next stage and I think that's really nice to show her that there's a transition.'(interview 1)

Whilst watching their children at play was seen as a positive by everyone interviewed:

'It gives me enjoyment watching her doing something or even independently going off and doing her own thing that she wouldn't normally do at home ..' (interview 5)

Meeting other parents with children similar ages, networking and making friendships was equally important for them.

'We can just meet up and sit and have a mum talk, and we know the kids are off playing and they're like happy' (interview 3).

Whilst more mums than dads attend Room to Play, fathers felt it gave them a sense of belonging and routine too.

'Room to Play became the one thing that we were doing actively every week, and it's where I could meet with other parents and see what other parents were doing with their kids'. (interview 6)

Parents felt that being part of the Room to Play community was central to maintaining good mental health.

'It's really good for my mental health cause, like, cos I know if I stayed in all week at home, I would go a bit crazy..'(interview 1)

It reduced feelings of loneliness, helped overcome social anxiety and built parental confidence in themselves. *'A very clean, supportive group that helped me when I was lonely and supported me through many challenges'. (S)*

'Through coming, we know a few families, so we know each other so, especially for her, my wife they are friendly now they talk by phone as one... You know, I mean, like even someone, some of them, like my wife, see no feeling come the other one ringing, oh, come on let's go. You know, I mean like they help each other .. I go to work for five day a week um. I talk to other people at work and then when I come back, I just fall asleep before my wife. Is really hard, to be, honest. Without this? ... she need to come to be honest' (interview 10).

Families are buoyed by the relationships made with Family Mentors, who plan and run the group.

'Each time (I go) I see familiar faces, children of other parents growing up and um, people working there catching up with me and seeing how I'm doing and trying to give advice if I want to, all of my friends It's just um, its like a safe safety net. It feels like a safety net' (interview 9).

Creating a relational environment in which all are welcomed and diversity is celebrated, is considered a core element of the service's success:

'They make it more, you know, not hostile. Because you can go someplace and you feel out of place and you think I'm not going back there again but they go out of their way to speak to people. And I've seen them speak to lot different parents so they go through speak to people and have a good laugh you know have a good chit chat and um so, they make an effort to do that'(interview 7).

This was particularly important for one dad who shared how The Toy Library Family Mentors have created a father inclusive space in Room to Play:

'They point out father groups, there's things on the walls as well, so it's nice to reassure you that you're welcome back.' (interview 4)

Supportive of the 'Think Dads' campaign[26] championed by SSBC, Family Mentors recognise the importance of listening to fathers as a marginalised group, acknowledge the difficulties they face when accessing services and, in looking at both its location and the days and hours it is open, have made some inroads into delivering a service which is able to communicate with dads and male caregivers, directly.

Seen as more knowledgeable others;

'I think in terms of the knowledge that the, the mentors here have, it's invaluable as a local resource'. (interview 6)

The support offered by Family Mentors is not only helpful but reassuring, to the parents and caregivers who attend, particularly by those without family nearby:

'Just talking to them about general advice really because sometimes it's just that reassurance that you are doing the right thing and just someone else talk to who's more knowledgeable about that than you are.. My family live another in another city so we don't really have a lot of family around, so making those friends early on in parenting has really helped, because I felt, in those first few weeks I felt very isolated and, like, very nervous to go out there but now I'm out there I feel like I could just go to anything and just brave it, and see what experience we can get out of it' (interview 1).

Limitations

A change in interviewer may have affected the information shared. Interpretations of the data may be limited as a result of subjective bias

(both interviewer and adults interviewed).

Conclusions drawn are transferrable (readers of the report can ask if the evaluation is useful in practice), but are based on personal experiences, perceptions or opinion rather than hard (objective) facts or figures that might be generalised.

Verbatim quotes are used throughout the report to help mitigate against the potential for bias described, increasing the dependability of the results.

Phase 2 summary

Room to Play creates the conditions necessary for a healthy relational environment to grow. The provision of regularly timetabled play activities for a range of ages, repeated throughout the week, developed and supported by a knowledgeable workforce of trained peers (Family Mentors) and invited professionals, offers a welcoming, safe space in which parents and caregivers can seek parenting support as and when needed.

As one mum shared Room to Play is:

‘An accessible place to play and a community of parents and families that can grow as parents and children together’ (3)

6. DISCUSSION



In contrast to Department for Education funded Family Hubs, Room to Play, delivered by the Toy Library, is a locally developed ‘Family Hub’[27] attuned to the community’s needs. Easily accessed by parents and children from across the city, it is seen as a non-stigmatising, culturally inclusive one-stop-shop for parenting information, support and advice.

In forming the relationships necessary to connect ‘the right help from the right people in the right way’,[28] Family Mentors have established a unique way of ‘being’ with parents and caregivers; raising their awareness of and increasing access to the support they might need whilst their children grow.

Evidence suggests that without the readily accessible family support which Room to Play provides, many families, including those who are underserved by statutory services, will experience poorer outcomes.[29]

Room to Play raises parental aspirations and supports parenting. It compliments delivery of the Healthy Child Programme[30] by providing a large, safe space for children to play and for families to realise their potential and thrive.

As one parent / caregiver writes:

‘It provides an essential service and Bulwell’s children would be a lot worse off without it’(S).

7. CONCLUSION & RECOMMENDATIONS

Labelling individuals and groups as “hard(er) to reach” fails to recognise that service users aren’t getting the services and support they need. It ignores the diverse and complex reasons behind why someone might struggle to take up the services being offered and blames individuals, families and communities for not speaking out about their needs, when in fact their voices are ‘seldom heard’ and underrepresented. Service users labelled in this way often report a lack of engagement by statutory services and would describe themselves as under-served as a result. In acknowledging the responsibility of service providers to change how they approach different communities to meet local health and child development needs, The Toy Library’s Room to Play has established new ways of being with underrepresented babies, children and families[31].

In Nottingham, establishing a Family Mentor service has both increased the protective effect of the family and enhanced service reach: helping providers to stay in touch with, adapt to and successfully meet the needs of local families. Making use of a unique set of values, skills, and behaviours, Family Mentors have established safe, mutual, trauma-informed relationships with the families they work with. Unlike many professional relationships, these relationships are not framed by the giving of advice, but offer instead time, hope and self-belief to parents requesting support. Room to Play extends this service.

Parents are experts in where and how they live. When they are involved in making decisions about what groups are needed, not only is the design more appropriate and the information shared more relevant, but members of the community are more likely to feel a sense of ownership, spread the word, and be advocates of the service.[32]

By co-creating opportunities for social interaction and learning activities for the whole family, community-based groups like The Toy Library's Room to Play have helped develop positive identities; built parenting confidence and self-efficacy; and enriched opportunities for community networking, building the community's capacity to develop and sustain the activities, groups and services required to meet local need themselves.

The hallmarks of a caring system are not only the quality of encounters between practitioners and families, but also the extent to which the system measures itself in providing needs-based support to all who need it. This report adds to a growing body of evidence supporting the continuation of the Family Mentor service and to maintaining Room to Play as an essential, non-stigmatising and much needed 'one stop shop' for those who find accessing statutory health and social care services more difficult.[33]

REFERENCES

SSBC is currently considering the programme's legacy website. Hence, for some of the reports which have been commissioned and/or produced by SSBC, the references below include a weblink to the SSBC website homepage (www.smallstepsbigchanges.org.uk) rather than a weblink to the specific report. Please use the search function on the SSBC webpage to locate the specific report titles.

References

[1] McDonald, A (nd) It's not what you do it's the way that you do it! SSBC review of groups. SSBC. Nottingham

[2] Lushey, C., Tura, F., Toft, A., Newham, K., Slater, J., Law, S., Jameel, A., Rathore, G. and Paechter, C., 2022. Evaluation of Small Steps Big Changes annual report: 2022. [online] https://www.smallstepsbigchanges.org.uk/assets/downloads/SSBC_Evaluation_Annual_Report_2022_Final.pdf.

[3] A survey allows the report to describe the service, quantify the data and generalise the results, from the adults asked, to the wider population of Room to Play users. It can answer questions like, how much? how many? or to what extent? Semi structured interviews allow the report to share an understanding of the reasons, motivations and experiences of the adults (babies and children) attending Room to Play. It enables a small number of hard(er) to reach parents and caregivers to share what going to Room to Play means to them. This type of approach to collecting information answers the why? and how? questions outlined in Appendix 5.

[4] Braun, V. and Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3, 77-101.

[5] [SSBC Programme - Our Story 2023 Q3 | SSBC \(smallstepsbigchanges.org.uk\)](https://www.smallstepsbigchanges.org.uk)

[6] Small Steps Big Changes is a partnership of parents and professionals working together, through co-production and parent powered change, to drive the delivery of the programme and focus on helping children to live happy, healthy and fulfilled lives.

[7] Ibid note 3

[8] Harding, R., and Paechter, C. (2022). Experiences of SSBC families in having a family mentor: report prepared for Small Steps, Big Changes. [online] NTU Evaluation of Small Steps Big Changes 2022 | SSBC

[9] Ibid note 2

[10] In Nottingham, commissioning local providers to deliver the Family Mentor service was seen as crucial to gaining the communities trust and having an impact. The Toy Library was already known to the Bulwell community whilst supporting the co-production of services, like a Room to Play which was collaboratively developed with local need in mind.

[11] Cortis, N., (2012). Overlooked and under-served? Promoting service use and engagement among 'hard-to-reach' populations. *International Journal of Social Welfare*, 21(4), pp.351-360.

[12] Coe, C., Gibson, A., Spencer, N. and Stuttford, M., (2008). Sure Start: voices of the 'hard-to-reach'. *Child: care, health and development*, 34(4), pp.447-453.

[13] Evangelou, M., Coxon, K., Sylva, K., Smith, S. and Chan, L.L., (2013). Seeking to engage 'hard-to-reach' families: Towards a transferable model of intervention. *Children & Society*, 27(2), pp.127-138.

[14] Boag-Munroe, G. and Evangelou, M., (2012). From hard to reach to how to reach: A systematic review of the literature on hard-to-reach families. *Research Papers in Education*, 27(2), pp.209-239.

[15] SystmOne is a secure centralised clinical computer system, providing clinicians and health professionals with a single shared Electronic Health Record (EHR).

[16] A simple rating system, allowing respondents to express a range of opinions, from strong agreement to strong disagreement, including a neutral option, Likert scales can facilitate the collection of more nuanced feedback when used as part of a survey.

[17] Breaking Point: Kinship carers in crisis (2023). Available at: <https://kinship.org.uk/breaking-point/key-findings-support/>

[18] Barriers include; the stigma that surrounds asking for help in certain communities; a lack of trust in services; a lack of awareness of or familiarity with a service; the hidden / unknown consequences of seeking help and geographical, environmental, language and availability barriers. Available at: <https://learning.nspcc.org.uk/news/why-language-matters/not-hard-to-reach-reframing-responsibility-for-accessing-services>. See also Suffield, M., White, C., Koerbitz, C., Matthews, P., Saunders, C., Horsley, A., Thornton, K and Fisher, C (2022). Effective practice and service delivery: learning from local areas. Available at: <https://www.gov.uk/government/publications/levelling-up-for-families-annual-report-of-the-supporting-families-programme-2021-2022>

[19] First 1001 Days Movement (nd) A Manifesto for Babies. Available at: <https://parentinfantfoundation.org.uk/1001-days/manifesto/>

[20] <https://www.probonoeconomics.com/a-decade-of-change-for-childrens-services-funding> cited in A Manifesto for Babies, *ibid*.

[21] Low income households are more likely to be in receipt of benefits and have fewer buffers against the impact of poverty (savings for example). These households typically contain children, are headed by single wage aged adults, informal carers or the disabled and live in private or rented accommodation: see <https://www.jrf.org.uk/uk-poverty-2023-the-essential-guide-to-understanding-poverty-in-the-uk>

[22] When conducting evaluations, the location of any planned interviews should be carefully considered. Home interviews for example might be seen as intrusive or unsafe. In this evaluation acknowledging the dual role of the interviewer and the complex living arrangements of local parents' increased participation rates. 13 adults were approached for interview, 3 were unable to attend scheduled sessions, 6 were interviewed at home, 4 at Room to Play.

- [23] Evidence suggests that incentives increase the number of people willing to participate in an evaluation, mitigating against non-response bias and offering compensation to those with a lived experience of a phenomena, by ‘rewarding’ them for their expertise and time. Interview attendance was incentivised in this evaluation by the offer of a £20.00 Love to Shop Voucher
- [24] Braun, V. & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3, 77-101.p 84
- [25] Economically disadvantaged individuals and groups, teenagers, asylum seekers and refugees, fathers and male carers, individuals living with a disability, people whose first language is not English etc.
<https://learning.nspcc.org.uk/news/why-language-matters/not-hard-to-reach-reframing-responsibility-for-accessing-services>
- [26] Family Mentors working in Room to Play have all received Father Inclusive practice training in line with SSBC’s Father Inclusive practice strategy: <https://www.smallstepsbigchanges.org.uk/>
- [127] Like Room to Play, Family Hubs bring together different services in a ‘one stop shop’ to make it easier for parents and caregivers to get help. They provide a single place to go for face-to-face support and information from a variety of services and trained staff. Available at: <https://educationhub.blog.gov.uk/2024/01/10/family-hubs-everything-you-need-to-know>
- [28] Lewing, B., Stanford, M and Redmond, T., (2020) Learning from practice and research on children’s centres and family hubs. Available at: <https://www.eif.org.uk/report/planning-early-childhood-services-in-2020-learning-from-practice-and-research-on-childrens-centres-and-family-hubs>
- [29] Pickett, K.E., Vafai, Y., Mathai, M., Small, N. (2022) The social determinants of child health and inequalities in child health, *Paediatrics and Child Health*, 32, 3, 88-94.
- [30] The Healthy Child Programme collection sets out a range of public health interventions to reduce health inequalities and vulnerabilities. It offers commissioning and service delivery guidance to local government, the NHS, integrated care boards and other partners, helping to inform local implementation of the healthy child programme framework.
 Aimed at improving children’s outcomes from preconception to adulthood the national healthy child programme 0 to 19 continues to offer an evidence-base programme of interventions, including screening tests, immunisations, developmental reviews, and information and guidance to support parenting and healthy choices following the withdrawal of the Healthy Child Programme: Pregnancy and the First 5 Years of Life in September 2023.
- [31] <https://learning.nspcc.org.uk/news/why-language-matters/not-hard-to-reach-reframing-responsibility-for-accessing-services>
- [32] Local Trust (2022) Working with community groups: Why and how to do it. Guidance for public agencies. Local Trust. London. Available at:
<https://www.tnlcommunityfund.org.uk/media/insights/documents/Working-with-community-groups-Guidance-for-agencies-2022.pdf>
- [33] Baah FO, Teitelman AM, Riegel B. Marginalization: Conceptualizing patient vulnerabilities in the framework of social determinants of health—An integrative review. *Nurs Inq*. 2019 Jan;26(1):e12268. doi: 10.1111/nin.12268.

APPENDIX

Appendix 1 - Survey questionnaire

Room to Play



Thank you for filling out this survey. It should take about 10 minutes.

We want to hear from you as someone who attends Room to Play. This survey asks questions about you, your family, and your use of Room to Play. Your responses will help us to evaluate the service.

Your responses to the survey will remain anonymous. As a thank you for your time, a £5 high street shop voucher will be available. To receive this, we will need your email address. Your email address will be separated from your other responses. Email addresses will be uploaded to a file and shared securely with Small Steps Big Changes (SSBC). SSBC will send you a voucher as a thank you for your time. It will only be used to send you the high street shopping voucher. Once the voucher is sent, your email address will be deleted. If you do not receive your voucher after 4 weeks please inform the Toy Library.

Completed surveys will be stored in a locked box/filing cabinet on the Room to Play premises. Your anonymous responses will be entered onto online data collection tool which is accessible to the Research and Evaluation team at SSBC. Paper copies will be destroyed.

We are asking for a small number of people to take part in interviews. If you are willing to do this, we will ask you to include your phone number/email address and name. We may use the details you provide to contact you to be interviewed. Your contact details will be stored securely in a locked cabinet at Room to Play. They will be kept until after the interview and then will be destroyed.

Anonymous responses to the survey will be shared with Small Steps Big Changes Research, Evaluation, and Learning Team. The SSBC team will collate responses. Findings from the evaluation overall will be written up in a report available to the public. No information that would identify you would be in these reports. Anonymous results may also be used in other reports and publications about the Room to Play service.

If you have questions before participating, contact Amy McDonald, Evaluation Manager at SSBC amy.mcdonald1@nhs.net

Completing this survey is your choice. Not participating won't affect your access to Room to Play or your relationship with Room to Play staff.

The evaluation follows the Data Protection Act (2018) and stores data securely. Only anonymized demographic data will be collected. Any names or identifying info needed for interviews, will be stored securely on the Room to Play premises. Only the study team can access this personal information.

No Research Ethics Committee review is needed, but the study was reviewed by Nottinghamshire Healthcare NHS Foundation Trust's Research Compliance team.

By finishing this survey, you confirm you've read and understood the information above.

ABOUT ROOM TO PLAY

How did you hear about Room to Play?	
I noticed it while walking past	<input type="checkbox"/>
Health Visiting team	<input type="checkbox"/>
Family Mentor	<input type="checkbox"/>
Other parent	<input type="checkbox"/>
Other (please describe)	<input type="checkbox"/>

How long have you been coming to Room to Play?	
This is my first visit	<input type="checkbox"/>
A few weeks	<input type="checkbox"/>
A few months	<input type="checkbox"/>
Since it opened	<input type="checkbox"/>
Other (please describe)	<input type="checkbox"/>

How often do you visit?	
This is my first visit	<input type="checkbox"/>
I visit once a week or more	<input type="checkbox"/>
I visit 1-3 x per month	<input type="checkbox"/>
I visit every now and then	<input type="checkbox"/>
Other (please describe)	<input type="checkbox"/>

Do you use any of the following services? (tick all that apply)	
Health Visiting Services:	<input type="checkbox"/>
- Baby weighing clinic	<input type="checkbox"/>
- First Foods or nutrition groups	<input type="checkbox"/>
- Breastfeeding Peer Support	<input type="checkbox"/>
- Family Nurse Partnership	<input type="checkbox"/>
- I see my health visitor for regular reviews	<input type="checkbox"/>
GP services	<input type="checkbox"/>
Family Hub/Children's Centre	<input type="checkbox"/>
Mental Health Services	<input type="checkbox"/>
Social Services	<input type="checkbox"/>
Drug and Alcohol Services	<input type="checkbox"/>
Parenting Support Groups	<input type="checkbox"/>
Employment Support	<input type="checkbox"/>
Domestic Violence Support Services	<input type="checkbox"/>
Housing Services	<input type="checkbox"/>
Legal Support	<input type="checkbox"/>
Community and Faith-based Organizations	<input type="checkbox"/>
Dental services	<input type="checkbox"/>

Other (please describe)	<input type="checkbox"/>
Prefer not to say	<input type="checkbox"/>

Which groups/activities/sessions have you participated in at Room to Play? (tick all that apply)	
Free play sessions	<input type="checkbox"/>
Baby weighing clinic	<input type="checkbox"/>
Healthy Little Minds	<input type="checkbox"/>
Story and Rhyme Time	<input type="checkbox"/>
Baby Play	<input type="checkbox"/>
Baby Massage	<input type="checkbox"/>
Hometalk	<input type="checkbox"/>
Breastfeeding support	<input type="checkbox"/>
Other (please describe)	<input type="checkbox"/>

Have you received advice on any of the following from staff at Room to Play? (Tick all that apply)	
Mental health	<input type="checkbox"/>
Domestic violence	<input type="checkbox"/>
Benefits	<input type="checkbox"/>
Foodbank	<input type="checkbox"/>
English for Speakers of other Languages (ESOL) Courses	<input type="checkbox"/>
Safety messages	<input type="checkbox"/>
Sleep	<input type="checkbox"/>
Weaning	<input type="checkbox"/>
Breastfeeding	<input type="checkbox"/>
Nutrition	<input type="checkbox"/>
Healthy start vouchers	<input type="checkbox"/>
Child health	<input type="checkbox"/>
Child development	<input type="checkbox"/>
New fathers information pack	<input type="checkbox"/>
Speech and language	<input type="checkbox"/>
Nursery/Early years funding	<input type="checkbox"/>
Dummies	<input type="checkbox"/>
Bottle feeding	<input type="checkbox"/>
Groups	<input type="checkbox"/>
Tantrums	<input type="checkbox"/>
Housing	<input type="checkbox"/>
Potty training	<input type="checkbox"/>
Employment rights	<input type="checkbox"/>
ASQ questionnaire	<input type="checkbox"/>
Other (please describe)	<input type="checkbox"/>

What have been some of the benefits to you of visiting Room to Play? (tick all that apply)	
Improved wellbeing	<input type="checkbox"/>
Increased social support	<input type="checkbox"/>
Support to improve parenting skills	<input type="checkbox"/>
Increased confidence	<input type="checkbox"/>
Reduced isolation	<input type="checkbox"/>
Access to Information	<input type="checkbox"/>
Sense of belonging to the local community	<input type="checkbox"/>
Have more ideas of activities to do at home	<input type="checkbox"/>
Other (please describe)	

What have been some of the benefits to your child(ren) of visiting Room to Play? (tick all that apply)	
Play	<input type="checkbox"/>
Social opportunities	<input type="checkbox"/>
Increased language development	<input type="checkbox"/>
Increased confidence	<input type="checkbox"/>
Other (please describe)	

SINCE STARTING TO ATTEND ROOM TO PLAY

Have you accessed any other groups or services that you have heard about from Family Mentors or other parents at Room to Play?	
Yes	<input type="checkbox"/>
No	<input type="checkbox"/>

Have you used any other groups or services with your child that you did not hear about through Room to play?	
Yes	<input type="checkbox"/>
No	<input type="checkbox"/>

Is there anything else you would like to share with us about your experiences of visiting Room to Play?

ABOUT YOU

What is your age?	
14-19	<input type="checkbox"/>
20-24	<input type="checkbox"/>
25-29	<input type="checkbox"/>
30-34	<input type="checkbox"/>
35-39	<input type="checkbox"/>
40-45	<input type="checkbox"/>
45+	<input type="checkbox"/>

Are you the child's	
Mother	<input type="checkbox"/>
Father	<input type="checkbox"/>
Other (please describe)	

What is the age of the child you attend with (please tick as many as apply)	
0-1	<input type="checkbox"/>
1-2	<input type="checkbox"/>
2-3	<input type="checkbox"/>
3-4	<input type="checkbox"/>
4+	<input type="checkbox"/>

Please describe your ethnicity you did not hear about through Room to play?	
White British	<input type="checkbox"/>
White (Other)	<input type="checkbox"/>
Black (African)	<input type="checkbox"/>
Black (Caribbean)	<input type="checkbox"/>
Black British	<input type="checkbox"/>
Asian	<input type="checkbox"/>
Asian British	<input type="checkbox"/>
Mixed/multiple ethnicities	<input type="checkbox"/>
Other (please describe)	

What is your postcode?

What is your home language?

Which best describes your immigration status	
British Citizen	
Settled (Indefinite Leave to Remain)	
Refugee	
Asylum Seeker	
Other (please describe)	
Prefer not to say	

Do you consider yourself to have a disability?	
Yes	
No	
Prefer not to say	

What level of education do you have?	
No formal qualification	
GCSEs or equivalent	
A-levels or equivalent	
Vocational/Technical qualification	
Degree	
Other qualification	
Prefer not to say	

What is your current employment status?	
Employed (Full-time)	
Employed (Part-time)	
Self-employed	
Unemployed	
Student	

Stay a home parent/caregiver	
Prefer not to say	

Are you or anyone else in your household receiving any benefits?	
Yes	
No	
Prefer not to say	

Are you currently receiving any support for a mental health concern?	
Yes	
No	
Prefer not to say	

Outside of Room to Play and the Family Mentor Service how would you describe your typical level of trust in different services designed to support you and your child?					
1	2	3	4	5	
1 No Trust avoid using if I can			5 High Trust/Use all services		

Do you have a Family Mentor?	
Yes	
I have been offered the Family Mentor service but have chosen not to accept this offer	
I have not been offered the Family Mentor service	

CONSENTS – Please place your initials in the appropriate box to confirm consent

I give permission to be contacted about taking part in an interview about my experiences of attending Room to Play (£15 High Street Store shopping voucher available)
 Please note not all families will be contacted for an interview.

Yes
 No

If you selected 'yes' and are happy to be contacted to take part in an interview, please add your contact details below

Name:	
Email:	
Telephone:	

Please add your email address below if you would like to receive a £5 high street shopping voucher for completing this questionnaire.

Email:	
--------	--

Appendix 2 - Interview Topic Guide

Room to Play Interview topic guide

Introduction

- Ensure the participant has read and signed the Room to Play Evaluation Consent Form v1.0
- Ensure the participant understands that participation is voluntary and that they are free to withdraw at any time
- Explain the aims and purpose of the interview and give a brief description of the interview structure.
- Provide an opportunity for participant to ask any questions
- Set Microsoft Teams to 'record'

Questions (In line with qualitative methodology, topic guides may be updated after each interview).

Ask the participant to describe their experiences of visiting Room to Play. This may include how they heard about/initially engaged with the service, what groups/activities they/their child(ren) have engaged with and how they feel this has benefitted them/their child(ren).

Give the interviewee plenty of time, listen carefully. Use minimal prompts if needed (e.g. "Do go on") but try to let the participant answer in their own words.

Follow up questions:

- How did they begin using Room to Play and what was that experience like?
- What do they like/find helpful/supportive about Room to Play?
- Do they use any other services and what are their experiences of using these?

- Have they been encouraged to access other services including the Family Mentor service whilst at Room to Play and how?/ have they done this?
- What have been the benefits to them them/their child(ren) of visiting Room to play?

If the participant becomes distressed during the interview, ask if they would like to take a break or stop. If the participant reveals information which is of concern and may need reporting i.e. potential risks to another person or to themselves, or criminal behaviour, then continue the interview if you feel comfortable to, but discuss these with your line manager/ Room to Play management at the earliest opportunity and where appropriate report accordingly.

End of interview

Explain the interview is now over and ask if the participant has any final questions. Give information about timeline for the evaluation and how results can be accessed. Thank the participant for their participation and ensure they are given the £20 Love2Shop voucher.

Appendix 3 - Logic Chart

Logic chart for 'Room to Play'

Context	
<p>Room to play is an accessible 'Shop-Front' service in Bulwell town centre offering drop-in, peer led group sessions/activities for families with children aged 0-4 in order to engage 'harder to reach' families.</p>	
<ul style="list-style-type: none"> Room to play is a pilot 'shop front' project in the market town of Bulwell. It is designed to overcome one of SSBC's most significant challenges; that of reaching those families that are eligible to use the Family Mentor (FM) service but don't know about the FM service, or are suspicious of it. Room to play is an extension of SSBC's FM service. The family mentors are a paid peer workforce of local parents and grandparents who support children's development through the delivery of early intervention services and activities through a manualised programme called the Small Steps at Home Programme. Room to play is designed to improve the reach and success of the FM service by acting as the 'front door' to these services. A local charity, The Toy Library were awarded the contract by SSBC in August 2020. The toy library already hold the contract for the FM service and Room to Play is an extension and enhancement of this contract. SSBC believes that operating Room to Play alongside and within the Family Mentor Service in Bulwell will not only be an enhancement of the existing service, but also a unique learning opportunity for the wider SSBC programme and ABS to find the best ways of supporting parents to engage with the Small Steps at Home Programme and to build trust so that they are able to engage with other originations and services. 	<ul style="list-style-type: none"> The FM service has been shown to facilitate development of a close relationship between FM's and parents and children through regular contact. This relationship fostered trust, which was mentioned by parents as being very important. Parents spoke about how much they trusted their family mentors with details, which led to the advice being specific to their needs and parents feeling able to ask family mentors for support in other areas, for example when speaking to health professionals about their children. Room to play hopes to build trust between FM's and parents in a shop front setting in order to encourage further engagement. Bulwell is a market town.5 miles (7 km) to the north-west of Nottingham city. Nottingham North, which includes Bulwell, is one of the most deprived regions in the country. 29.5% of children (under 16 years) live in low-income families in Nottingham, compared to 17.0% in England. The rate of conceptions in women aged under 18 (per 1,000 females aged 15-17) in Nottingham is 24.9 compared to 16.7 in England. The prevalence of obesity among children in Year 6 is 26% in Nottingham.

Policy circumstances (and aspirations)

Local (GM) policy circumstances/issues	National policy circumstances/issues
<ul style="list-style-type: none"> Local restructuring of children's centres including closure of Bulwell children's centre. Family hub open in Bestwood (over 3 miles from Bulwell) In Bulwell in 2022, 62% of childcare places for children aged 0-2 are filled, 72% places for 2-year-olds and 78% of places for 3- and 4-year-olds were taken up. 	<ul style="list-style-type: none"> Statutory care excludes some age groups, e.g., 'A Better start' covers age 0-4, however some children don't start school until they are 5 Currently health visitors visit at 10-14 days after birth, 6-8 weeks after birth, 9-12 months old and at 2-2½ years. However, a staff survey by iHV identifies severe staff shortages resulting in a knock-on effect in care. Perinatal mental illness affects up to 27% of new and expectant mums and covers a wide range of conditions The transition to parenthood and early parenting is a key life-stage and a very vulnerable period for mental ill health of fathers as well as mothers Ofsted-registered early years providers must follow the EYFS standards for learning, development and care from birth to 5 years old. However, many children aren't in early years childcare (see Local policy). This may be for cultural reasons (E.g. ESOL families less likely to take up nursery places) A 'Health Street framework' conceptualised by Heatherwick studio proposes to diversify the use of local Highstreets to deliver new social and civic space where services are co-created, holistic and relevant to the needs of the community.

Inputs What we will undertake/invest	Outputs		Expectations (Outcomes & Impacts)	
	Activities - What we will do*	Participation – Who we will reach**	Short & Medium Term Outcomes	Long Term Impacts
<p>SSBC funding: £171,872 from 1st September 2022 to March 2025</p> <p>Established SSBC Family Mentor service who run groups and activities until March 2025</p> <p>Shop front premises secured in Bulwell high-street</p> <p>Prior links developed with other SSBC services</p>	<p>Engage parents of children aged 0-4 who live in Bulwell who are considered 'hard to reach' i.e., families who meet service criteria and who may like to use services but experience difficulties in doing so.</p> <p>FM's run a weekly timetable of free play and structured groups and activities</p> <p>Outside services and agencies run groups on the premises that parents can sign up for or drop in including baby weighing clinic run by targeted healthy lifestyle team, SEN team, Brush book and bed, Home talk team and Ignite.</p> <p>Advice given by FM's including: Weaning, Mental health, Oral Health, Child development, Social and emotional health, Speech and language, Healthy Weight,</p>	<p>Parents who are often termed 'hard to reach' including those who belong to ethnic minorities, those for whom English is not their first language, parents with mental health issues, younger parents and dads.</p> <p>Families who are eligible for the FM service but have declined the service</p> <p>Room to play is open to any families of children 0-4 who live in the Bulwell area of Nottingham.</p> <p>Although the service is designed for families who live within the Bulwell ward, Family Mentor do not turn away those who come from other postcodes</p> <p>Older siblings are allowed to attend in school holidays and Saturdays</p>	<ul style="list-style-type: none"> Families attend Room to Play and engage with groups, free play and with FM's in Bulwell Families engage with appropriate wider services who run groups from the premises including baby weighing service, healthy lifestyle tea and SEN team. Families have a positive experience Families develop trust in FM's and other service providers Effective signposting of 'eligible' families to other support agencies and services 	<ul style="list-style-type: none"> Sustained engagement of 'harder to reach' families Families build trust and engage with relevant wider services Improve uptake FM service for those who are eligible but previously declined Improved outcomes for children ages 0-4 in diet and nutrition, social and emotional skills, language and communication skills, Contribute to systems change; that is to change, for the better, the way that local health, public services and the voluntary and community sector work together with parents to improve outcomes for children
	<p>Smoking cessation, Safe sleeping</p> <p>Verbal signposting/ referrals to other services including: FM's, ESOL, Local Authority C&F, Health Visitor, SLT, Home talk, Healthy Little Minds, GP, Healthy Lifestyle Pathway</p> <p>Build community relationships between Room to play, wider services and those who access Room to Play in order to aid recruitment and access to other services</p> <p>Develop level of trust in service providers from those who do not access other services or settings or had previously declined the service.</p>			

Appendix 4

Objective Evaluation: method employed, outcomes and recommendations for practice

Objectives	Evaluation Method
What is the proportion of the families that visit room to play who are considered “hard to reach”?	Survey
How are those who engage with Room to Play encouraged to access other services including FM service and how successful are these strategies?	Interview
What is the nature of the contact ‘hard to reach’ families are having at Room to play?	Survey and interview
What are the experiences of using room to play of those who are considered ‘hard to reach’?	Interview
Define/describe the current operation of Room to Play and how this meets the service aims/objectives.	Survey and interview
How many harder to reach families who are eligible but previously declined to use the family Mentor service, go onto engage with the service.	Survey

This evaluation provides evidence that the following short- and long-term outcomes have been achieved:

- Families attend Room to Play and engage with groups, free play and with Family Mentors in Bulwell
- Families engage with appropriate wider services who run groups from the premises including the Special Educational Needs team.
- Families have a positive experience
- Effective signposting of 'eligible' families to other support agencies and services happens in Room to Play.
- Families build trust and engage with relevant wider services through Room to Play.
- Room to play contributes to 'systems change'. Changing for the better, the way that local health, public services and the voluntary and community sector work together with parents to improve outcomes for children. As one parent shared,

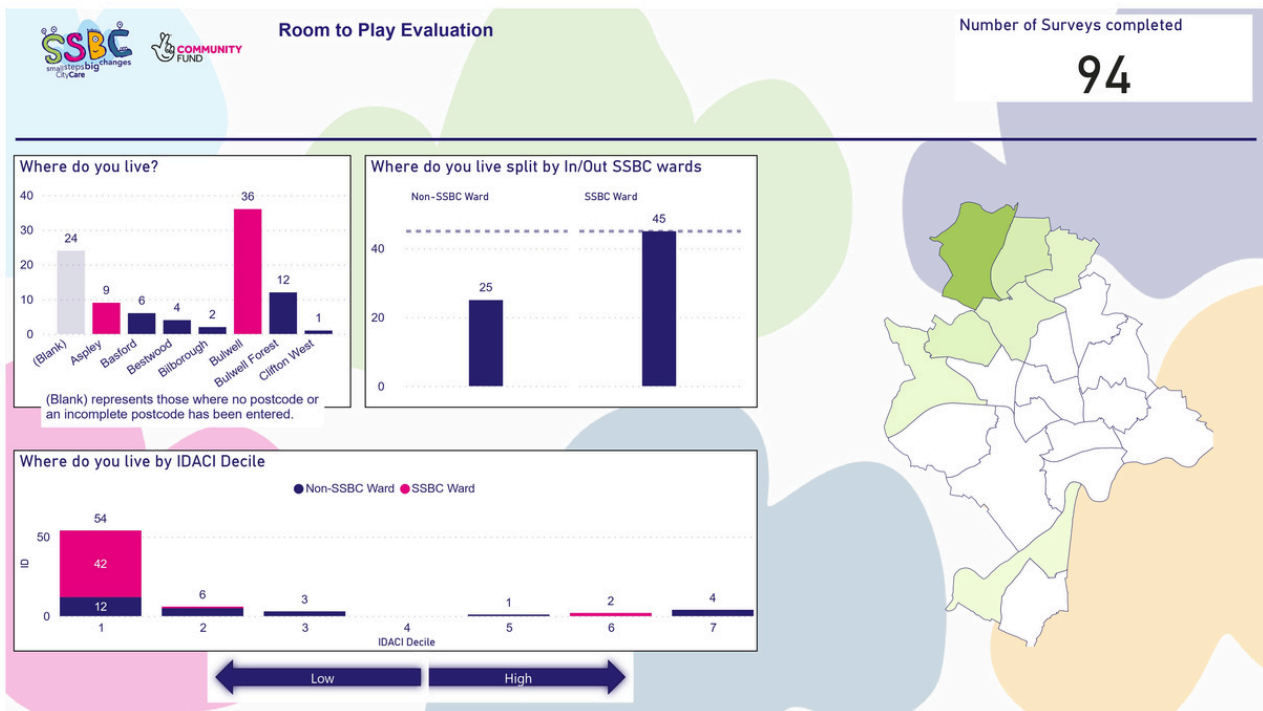
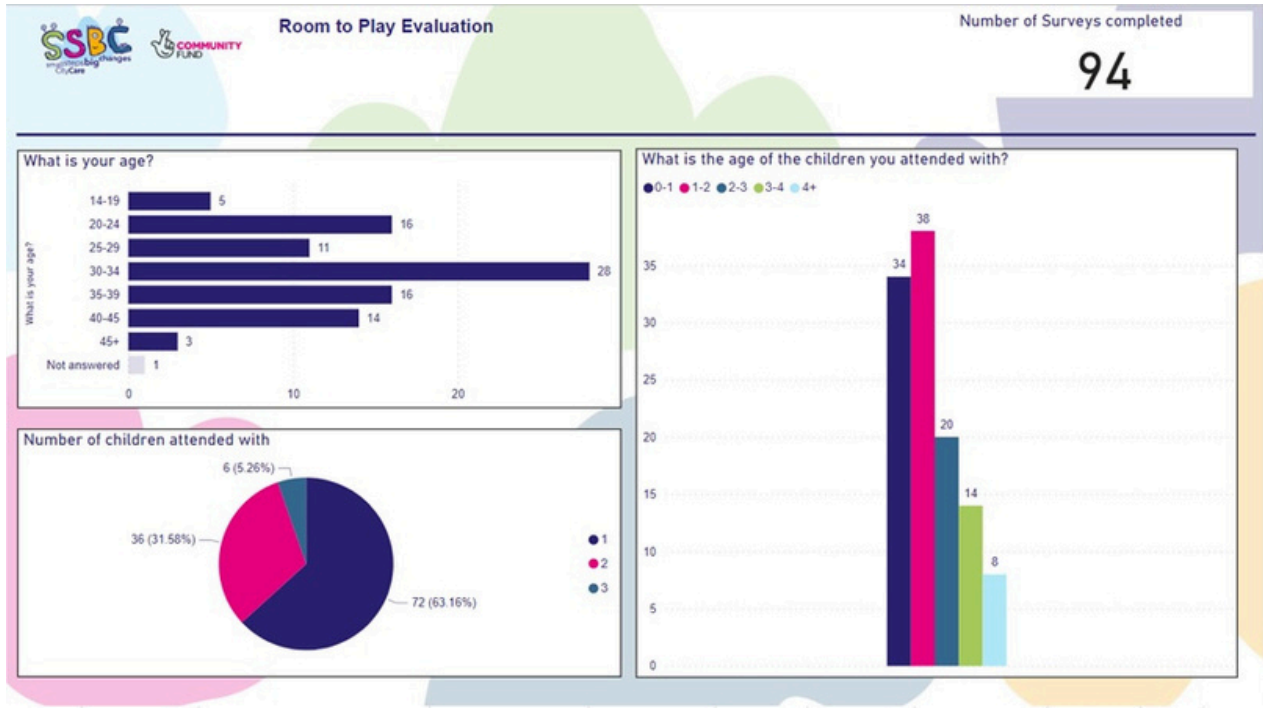
“Room to Play is invaluable as a local resource. I think that's really interesting, because, you know, if we're really going to be a children's city - an intervention city, then we need to know that there are places where parents can come and seek that support and advice” (6).

Whilst evidence shared in this evaluation is suggestive of improved outcomes for children ages 0 - 4 in diet and nutrition, social and emotional skills, language and communication skills, this is anecdotal and needs to be supported by more robust investigation into the direct impact of Room to Play on child development outcomes using validated tools.

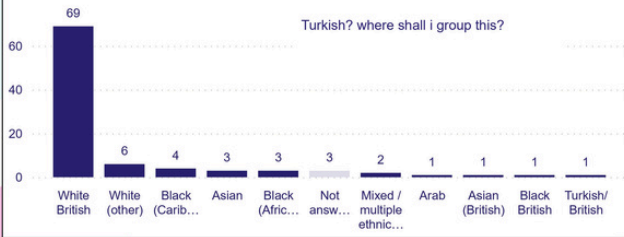
Further evaluation is also required exploring the impact of Room to Play on the following outcome areas:

- Families develop trust in other service providers
- Sustained engagement of 'hard(er) to reach' families
- Uptake of the Family Mentor service for those who are eligible but have previously declined a Family Mentor.

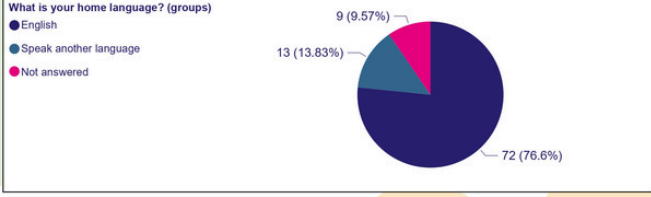
Appendix 5 - Quantitative Data



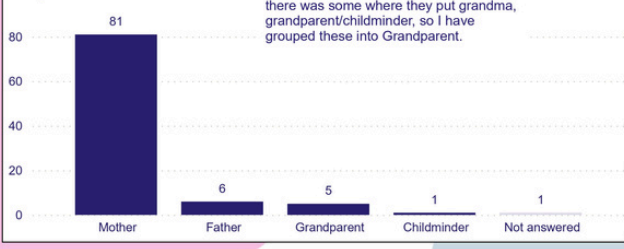
Please describe your ethnicity?



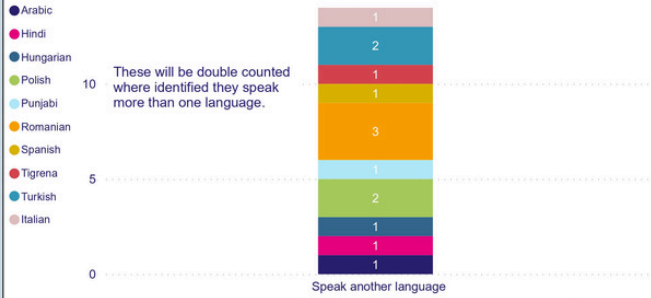
What is your home language?



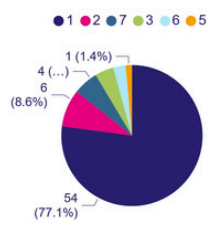
Are you the child's?



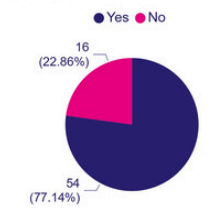
What is your home language other than English?



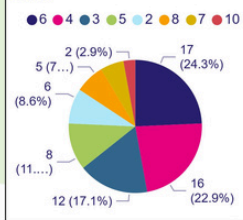
IDACI Decile (2019)



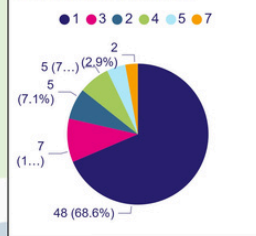
Living in 10% Most Deprived Areas (IDACI 2019)



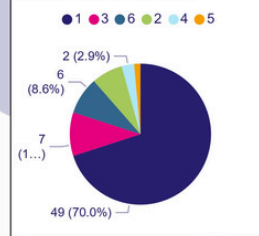
Barriers to Housing and Services Decile



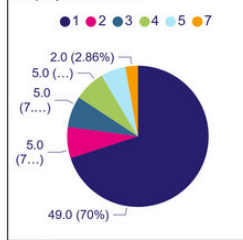
Education and Skills Decile



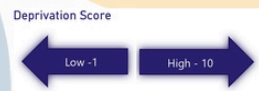
Multiple Deprivation Decile



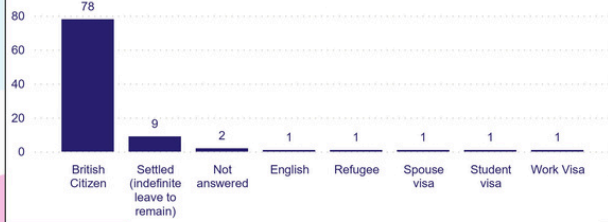
Employment Decile



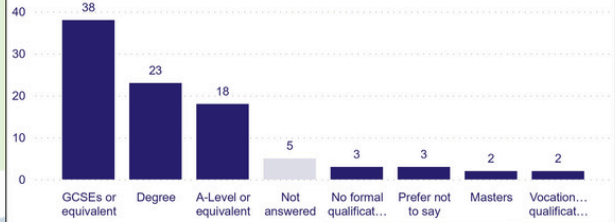
I have removed where it is incomplete/blank on this page.



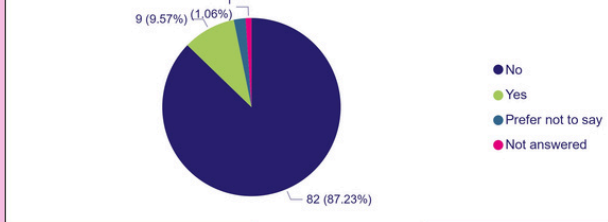
What best describes your immigration status?



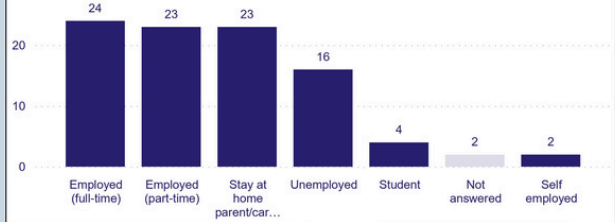
What level of education do you have?



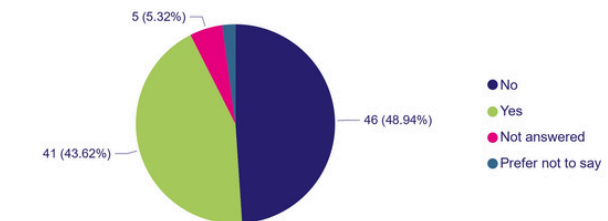
Do you consider yourself to have a disability?



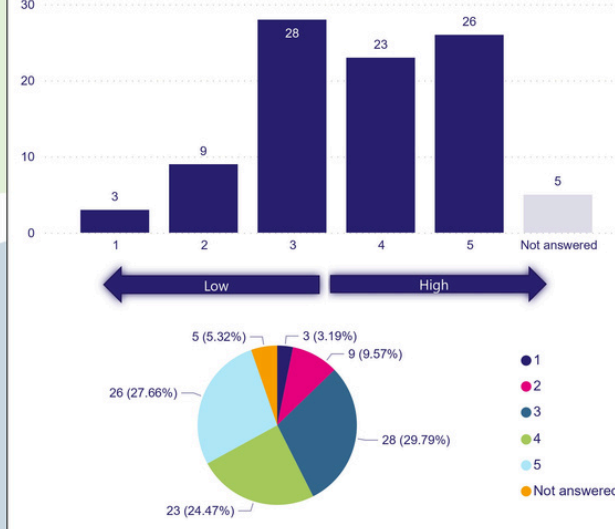
What is your current employment status?



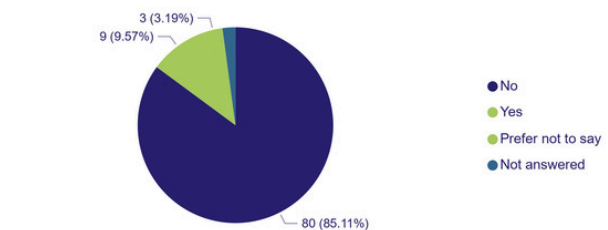
Are you or anyone in your household receiving benefits?



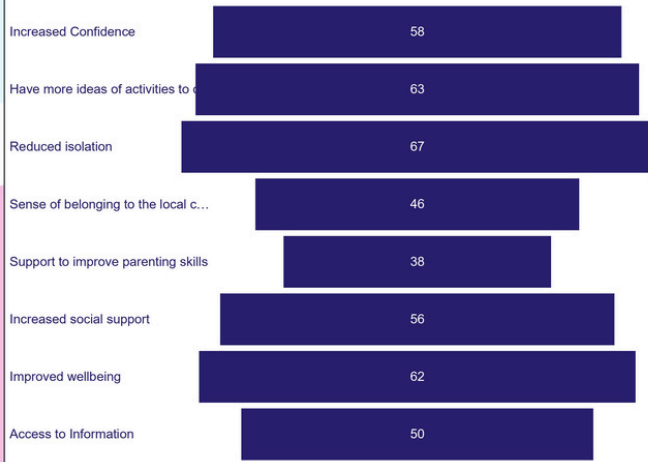
Outside of Room to Play and the Family Mentor Service how would you describe your typical level of trust in different services designed to support your child?



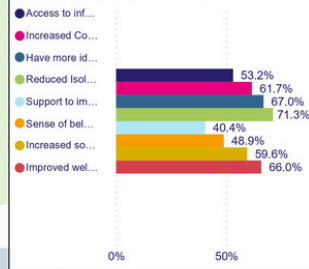
Are you or anyone in your household receiving support for mental health concerns?



What have been some of the benefits of YOU visiting Room to Play?



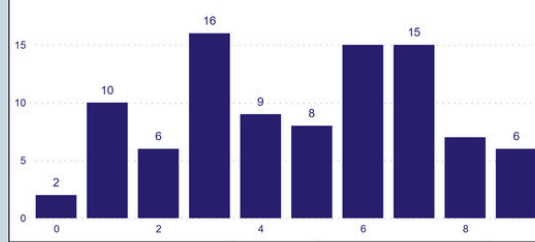
What have been some of the benefits of YOU visiting Room to Play?



Other comments

- Informal learning
- Immeasurable benefits
- Father support
- Socialising my toddler
- Encourages my son to share
- It has been a godsend as a childminder to have a safe and friendly place to bring the children I care for
- A safe place to socialise
- Advice re older children from experienced staff.
- All amazing.
- Helps bring structure to day

How many benefits do YOU feel you get from visiting Room to Play?



Appendix 6 - Consent form

CONSENT FORM

Room to Play Evaluation

Please delete as appropriate

I am/am not willing to take part in an interview for the Room to Play evaluation

If willing to take part in the evaluation, please tick the boxes

1. I confirm that I have read and understood the information about taking part in an interview for the above evaluation and have had the opportunity to ask questions about participating in the evaluation.
2. I understand that my participation is voluntary and that I am free to withdraw from the interview at any time, without giving any reason. I am aware I can do this by informing the interviewer
3. I understand that the interview will be audio recorded. I give my permission for anonymous quotes from this interview to be used in any reports/publications that might result from this study.

Please complete your details below

_____	_____	_____
Your name in	Your signature	Date
BLOCK CAPITALS		
Home address		

Contact details / email address		

SSBC

• 10 YEARS OF TEST & LEARN •