



Home-Start Bristol
Evaluation and impact report
April 2019 – March 2020

"I don't know where I'd be without Home-Start. I'm sad the support is coming to an end because they've been such a crucial part of my life, but I know I will be alright because they've given me the strength and confidence to know that I will cope." **Martha, mum of three**

Prepared by the Foundation for Social Improvement (FSI)

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Executive Summary

Home-Start Bristol is a registered charity that supports struggling families, with at least one child under five, living in Bristol and South Gloucestershire. They support families through weekly visits from carefully-matched volunteers or family support workers. Most families accessing the service are referred from another agency, and many struggle with low levels of mental health and self-esteem, being unable to cope with day-to-day running of the home, and struggling to manage their children's behaviour. Many are also very isolated and are not accessing other services.

The Foundation for Social Improvement (FSI) completed an independent evaluation of the Home-Start Bristol service, looking at data from April 2019 – March 2020 and undertaking additional data collection through focus groups and telephone calls with various stakeholders. It should be noted that this report was compiled during the 2020 COVID-19 crisis and thus responds in places to the changing needs arising from this.

Findings

It is clear from our analysis that Home-Start Bristol's service has significant positive impacts on the families supported, and is a vital part of the local infrastructure for families. Home-Start Bristol's services support families to feel better able to cope with family life, improve parent and child wellbeing, and increase families' knowledge of and confidence to access other services. Home-Start Bristol's support is often transformational for families and helps them overcome obstacles and build happier lives.

Data from families comparing their 'coping scores' at their final visit vs their initial visit show that the most significant change seen is in parents **feeling less isolated**, closely correlating with families **accessing more services**. Alongside this, families feel **better able to cope with everyday issues and concerns**.

Parents also saw their **mental health and wellbeing improve**: 80% of parents had increased self-esteem, and 79% were coping better with their mental health. Many parents also were better able to cope with extra work caused by having multiple young children, and most became more **involved in their children's development**, which is evidenced to have long-lasting impacts on children's life chances and attainment.

Wider benefits

Home-Start Bristol's work also has a **positive impact on the volunteers** who gain new skills, broaden their perspectives, and meet new people. Some have gone on to use these in a formal setting e.g. further education or career changes. Volunteers spoke very highly of the experience.

It is clear too that Home-Start Bristol is a **vital part of the local infrastructure** of support for families in Bristol and South Gloucestershire. Partner organisations interviewed clearly felt that Home-Start Bristol plays a unique role and meets needs that other services cannot, and increases impact overall by leveraging additional funding and working closely with other organisations. Their work with lower-need families enables statutory and more intensive support to be directed where they are most needed. They

also empower families to access other ongoing services that the families may not otherwise know about or have confidence to access.

Key themes and success factors

We identified a number of elements to Home-Start Bristol's approach that add value and increase impact. Firstly, the **early intervention** nature of their work – working with families of children at a young age, and before they are at crisis point – helps prevent family breakdown and helps families turn their situation around. Home-Start UK research showed that this early intervention links directly to long-lasting life prospects. Secondly, the peer-support, **volunteer-based model**, taking place in the family home, has enabled Home-Start Bristol to build trust with and access families that are unwilling to engage with statutory services. The volunteers are well trained and supported, with **additional support and expertise from paid staff** where needed. Home-Start Bristol operate a **flexible and person-centred model**, identifying the key needs facing each family and adapting services to meet that. They aim to empower families to take control over their lives and to become independent. This approach means they do not have to 'tick boxes', and there is no fixed time limit to the support, so the service responds to each family's real needs.

Learnings and recommendations

Through this evaluation, we identified a range of areas where Home-Start Bristol could strengthen their work. 2019-20 was a period of significant change for the charity, with new leadership and a number of new staff posts, which presented challenges in terms of continuity. Notably for the compiling of this report, the **monitoring and evaluation framework** is acknowledged to need development. For instance, only around 50% of families had a score for the MESH end visit, and the team are now reviewing their processes for 'closing' families to ensure they get this information. Home-Start Bristol have a **good profile locally**, nonetheless this is still an area to continue developing, in particular for communities with specific needs e.g. ESOL. At the same time, the charity should continue to review demand for other services, such as those offered by other Home-Starts across the UK, where there is need and no other service meeting that demand. While the **volunteer experience** was rated very highly, there were a number of suggestions to grow their effectiveness further – including developing a shared bank of information on services on a local level, formalising the feedback process to volunteers, and widening the criteria and role of volunteers where appropriate.

Conclusion

It is evident that Home-Start Bristol delivers a high-quality and much-needed service for families in Bristol and South Gloucestershire, that empowers families to overcome challenges and provides better futures for parents and children. Home-Start Bristol is held in high regard by families, staff, volunteers, trustees and local referral partners alike. Volunteers are at the heart of the Home-Start model, delivering practical, accessible support in a highly cost-effective way and with a focus on empowering families to overcome challenges and continue on a positive path.

As the level of need in families is set to increase in the coming months and years as the country recovers from the COVID-19 pandemic, services like those of Home-Start Bristol will be crucial to supporting families in both the immediate and long-term future.

Introduction and background

This independent evaluation was commissioned by Home-Start Bristol and was completed by the FSI during February – June 2020. The overall purpose of this evaluation was to assess the extent to which the planned outcomes of Home-Start Bristol's work have been achieved, to determine the effectiveness in achieving those outcomes, to explore future arising needs of beneficiaries that Home-Start Bristol should be aware of, and also to consider what lessons have been learnt that could be applied in similar future projects and activities.

Readers should note that this report was compiled during the spring of 2020 and coincided with the COVID-19 pandemic and lockdown in the UK. Therefore not all data collection methods were available and it was considerably harder to contact families and other stakeholders during this time.

About Home-Start Bristol

Home-Start Bristol is an independent registered charity that supports struggling families, with at least one child under five, living in Bristol and South Gloucestershire.

The small staff team recruits and trains local volunteers and carefully matches them with local families who need support. The scheme is managed by a board of volunteer trustees and is responsible for raising all its own funds.

Their vision is a world where families thrive and children are given the best possible start in life.

Their mission is to provide tailored support to struggling families with young children, enabling them to develop strategies to cope with current and future difficulties. Parent volunteers, trained and supported by our professional staff team, visit families at home, working with them to build confidence and resilience, and to develop a sense of belonging to their local community.

Activities delivered

During the period covered in this report (1 April 2019 – 31 March 2020), 151 families in total were supported. 20 were supported by a Family Intervention Worker or perinatal mental health worker, 17 were supported by a family support worker, and 114 were supported by Volunteers. Families supported by Family support/Early Intervention workers received more in-depth shorter pieces of work and families supported through Children in Need funding received more focused child led intervention, looking at school readiness, healthy lifestyles and helping parents create happier home environments.

Profile of Beneficiaries and Support Needs

Home-Start Bristol supports families struggling to cope with current difficulties. This can look very different for different families, and so in the initial visit and the referral form, the co-ordinator works with the family to identify the key needs they are facing from their monitoring form, known as MESH. The most prominent needs in 2019-20 were around parents' self-esteem, mental health and isolation, their ability to cope with day-to-day running of the home, and their use of other services.

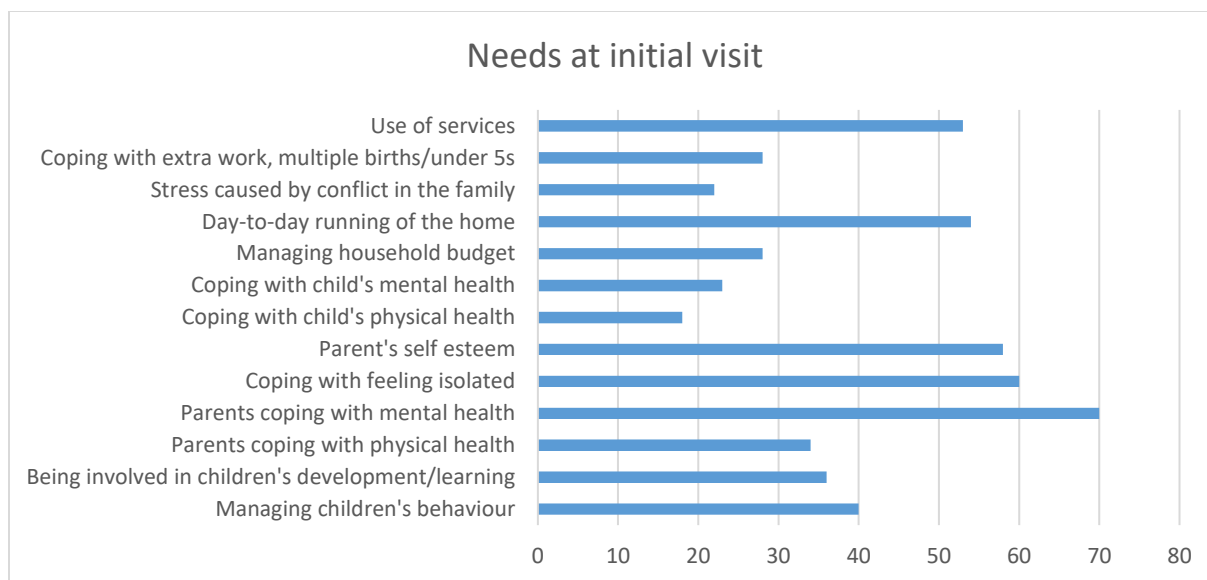


Figure 1 Number of families identifying each need at initial visit mesh form in 2019-20

Referral information

Families are referred to Home-Start Bristol from a variety of sources, the key ones being health visitors and health agencies, children's centres and social workers. In 2019-20, Home-Start Bristol received 253 referrals, of which they were able to take on 151. The remaining referrals were either not appropriate for the service, the families disengaged before support started, or there was no capacity at that time and they were signposted to alternative support instead.

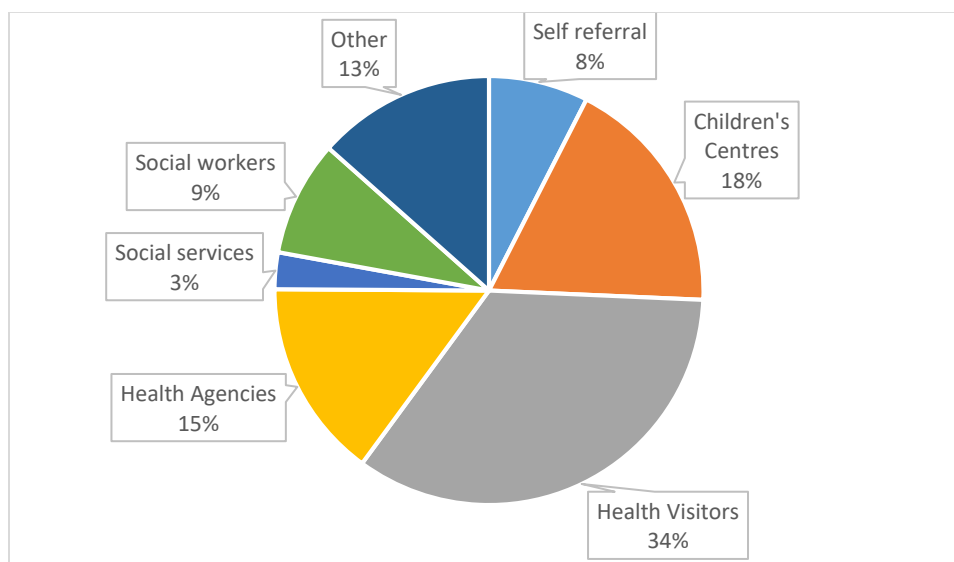


Figure 2 Breakdown of sources of referrals in 2019-20

Outcomes and indicators

Home-Start Bristol seek to achieve three key outcomes. They have identified a range of indicators that demonstrate that each outcome has been achieved.

Outcome	Indicator
1. Parents in disadvantaged families will feel better able to cope with family life	<ul style="list-style-type: none"> - Families report a decrease in their level of need - Parents feel better able to cope manage children's behaviour - Parents are more involved in their children's development - Parents gain confidence and skills in household management, managing the household budget, and coping with extra work caused by having multiple young children - Parents feel better able to manage stress and conflict within the family
2. Parents and children will experience improved health and wellbeing	<ul style="list-style-type: none"> - Parents coping better with physical health - Parents coping with mental health - Families feel less isolated - Parents improve their self esteem - Improved physical health of children - Improved mental health of children
3. Parents in isolated families will increase their knowledge and confidence, leading to a greater ability to access other services	<ul style="list-style-type: none"> - Families increase their awareness of and use of other services - Referral rates to and observations by other services

Methodology

In order to evaluate the work of Home-Start Bristol, the FSI worked with the Service Manager Andrea to collect and analyse a mix of quantitative and qualitative data from families, volunteers, partners and wider stakeholders.

Stakeholder group	Engagement method	Number	Sample size
Families	Telephone calls	3	151 families were supported during this time
	Family feedback forms	4 reviewed Data reviewed from 86	86 forms were completed
	MESH forms (quantitative scores on initial and end visits)	61	118 families finished support during this time
	MESH end visit forms (qualitative sections)	9	118
	Perinatal support forms (before and after)	5	38
Volunteers	Focus group	8	88 volunteers total
	Survey	5	
Referrers/partner organisations	Telephone interviews	3	3 agencies – 1 partner charity, 1 statutory funder, 1 health centre
	Referrer feedback forms	4	

Staff and trustees	Telephone interviews	2	
	End of grant reports	3	Big Lottery Fund x 2 South Gloucester Council SLA

Home-Start Bristol's existing data

We reviewed a range of data collected with Home-Start Bristol's current monitoring framework:

Monitoring and Evaluation System for Home-Start (MESH) forms

Together with the family, the Home-Start Bristol co-ordinator completes the MESH coping score form three times with each family, at the initiation of support, every three months during support, and once at an end visit once the support has finished.

From the referral forms and initial visit, the co-ordinator identifies a number of 'needs' facing the family, from a list of 13. They and the family agree on a score as to how well the family is 'coping' with each need at each visit, from 0 (not coping very well) to 5 (coping very well). They also have space for qualitative comments on family progress.

These forms provide a picture of the change experienced by each family through the support. However it is not a full picture: in 2019-20, only 60/118 families completed the 'end visit' and so there are significant gaps in the data available. The team noted that it is not possible to get end scores for many families for a variety of reasons including when a family:

- no longer responds to contact
- have moved without telling us
- now have too much going on in their lives or have too many services involved already

Home-Start Bristol have plans to review how they collect this end data, for example using the last mid-support score, visiting family before the final volunteer visit, or conducting by phone.

A copy of the MESH form is included in Appendix 1.

End of support feedback forms

To address the gap in MESH data, Home-Start Bristol currently also send out a printed feedback form with a stamped address envelope for families to complete. Around 73% of families complete this. This form is sent to all closed families so duplicates those covered by the MESH data in places. There is also in places a significant difference between results of MESH forms and self-reported feedback – in most places, a higher proportion of people report a positive change when asked directly in feedback forms, than when reporting coping scores to the co-ordinator.

A copy of the feedback form is included in Appendix 2.

Training feedback

Volunteers are asked to complete a feedback survey before and after each training course.

Additional data collected by the FSI

In order to obtain further insight and add depth the analysis, the FSI also collected data in the form of:

Family telephone interviews

We interviewed by phone three families whose supported has ended, selected by Home-Start Bristol, asking them about the support they received and what difference it made, and if the service could have supported them better in any way.

Volunteer focus group

A volunteer focus group was held on Monday 9th March at the Home-Start Bristol office, facilitated by the FSI, and attended by 9 volunteers.

Volunteer surveys

We sent a survey out to all volunteers. Just 5 volunteers completed it, a significantly lower return rate than in previous years, assumed to be attributed to the COVID-19 lockdown. A copy of the survey is included in Appendix 3.

Stakeholder telephone interviews

A set of structured interviews were undertaken to gather information from organisations who work with Home-Start Bristol, either as referrers, funders or partner agencies. Sample interview questions are included at Appendix 4.

Findings

Our evaluation finds that Home-Start Bristol's services support families to feel better able to cope with family life, improve parent and child wellbeing, and increase families knowledge of and confidence to access other services. Home-Start Bristol's support is often transformational for families and helps them overcome obstacles and build happier family lives.

We have structured this evaluation around Home-Start Bristol's three core outcomes:

1. Parents in disadvantaged families will feel better able to cope with family life
2. Parents and children will experience improved health and wellbeing
3. Parents in isolated families will increase their knowledge and confidence, leading to a greater ability to access other services

Data from families comparing their 'coping scores' at their final visit vs their initial visit show that the most significant change seen is in parents **feeling less isolated** (seen by 82% of parents), closely correlating with 80% of families **accessing more services**.

Parents also saw their **mental health and wellbeing improve**: 80% of parents had increased self-esteem, rising on average by 1.48, and 79% were coping better with their mental health. Many parents also were better able to cope with extra work caused by having multiple young children (82% of families affected), and most became more **involved in their children's development** (seen in 73% of parents), which is evidenced to have long-lasting impacts on children's life chances and attainment.

These findings echo research from the national Home-Start Netherlands¹ which found that children whose parents have had the support of a Home-Start volunteer have a better start in life than those who don't, with more positive changes in parental wellbeing, competence and behaviour during the intervention period in the group of parents accessing Home-Start support. These positive changes are long-lasting beyond the volunteer relationship: at the three year follow up, the Home-Start group showed, compared to the other groups, more improvements in parenting and child behaviour.

The research showed that Home-Start services contribute to families:

- Experiencing stronger social and support networks for parents;
- Better able to manage children's own behaviour, having a positive impact in other settings such as schools;
- Access to the wider community and improved engagement with other local services for families and children.

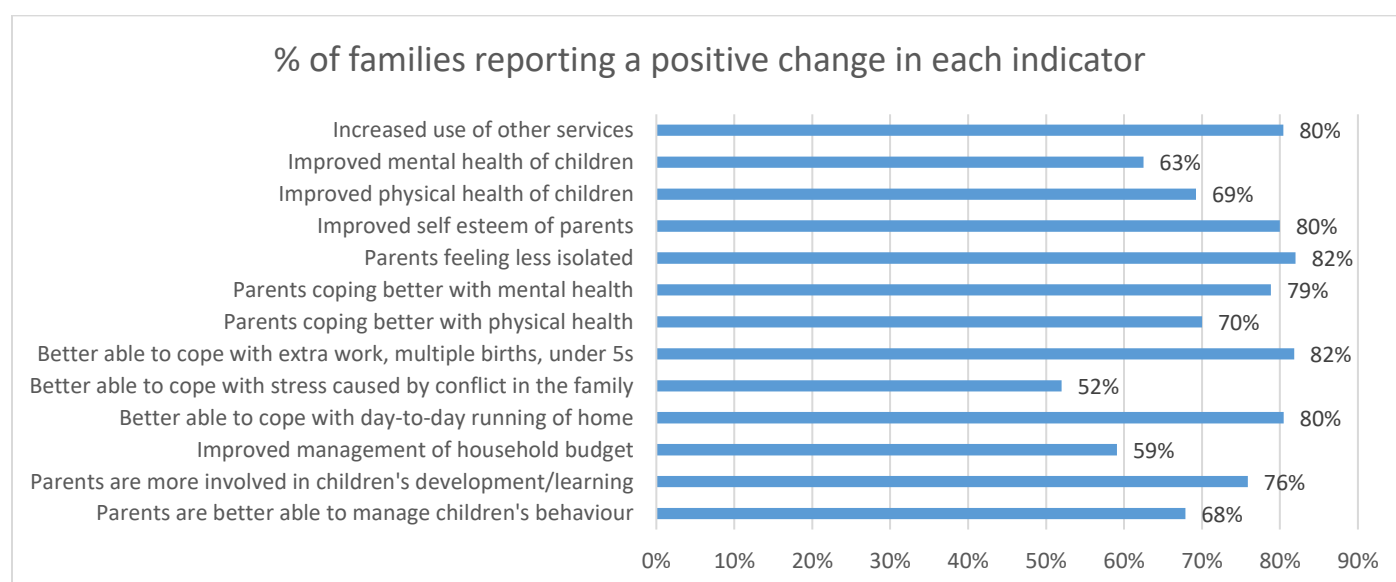


Figure 3 Percentage of families demonstrating an increased score at the 'end visit' from the 'initial visit', as recorded in MESH forms.

Case Study: Kat

Kat is a single mother of two young children, now 3 and 6. Her second pregnancy was particularly difficult, and she was eventually diagnosed with thyroid cancer when her son was seven months old. This had huge impacts on her hormones, energy levels and memory, her work and her relationship with her husband, particularly as they were re-mortgaging the house to convert an extra bedroom. Seven months after her cancer diagnosis, her husband left, and Kat was left alone and completely overwhelmed. Facing ill health, a house that was a building site, and two young children with no family support, she just couldn't cope. *"Everything had fallen apart, I had fallen apart, and I didn't know how to get it back together."*

¹ Jo M.A.Hermanns, Jessica J.Asscher, Bonne J.H.Zijlstra, Peter J.Hoffenaar, MajaDekovič, *Long-term changes in parenting and child behavior after the Home-Start family support program*, 2013 <https://www.sciencedirect.com/science/article/pii/S0190740913000467>

Her work recommended support from Home-Start Bristol, and her volunteer Sally began visiting weekly. Sally was a mother too, with kids at a similar age, and they shared a similar outlook on life. Mostly Sally entertained her children while she got on with stuff in the house – life admin, DIY, painting the new room. Sometimes they just sat and chatted, or Sally provided a shoulder to cry on when Kat needed that.

Before long, “the house was finally a proper home” – Kat now has her bedroom back and her own space, and the children have their own rooms. Kat is back at work, feeling much better physically, and is able to rest and enjoy spending time with her children when she comes home. [Home-Start Bristol] “were brilliant and I don’t think I would have managed to turn things around like that without them” she says.

Outcome 1: Parents feel better able to cope with family life

Home-Start Bristol’s programmes work with parents to help them feel better able to cope with family life, in the short and long term. 88% of families’ feedback forms said that they felt better able to cope with every day issues and concerns. This change achieved by imparting practical skills (e.g. guidance on sleeping routines), building up confidence and skills in parenting abilities, and providing immediate relief during visits. Parents are able to direct how the volunteer can best help; sometimes this is looking after the children while the parent cleans the house, sometimes it is helping tidy while the parent has some quality time with the children.

Improved parenting skills

“I have seen a family’s confidence in their own ability grow through the encouragement of a Home-Start volunteer and the varied support they offer. Learning to believe in themselves, their ability as a parent and being reminded that their child/children relies on them and loves them unconditionally has an impact on every aspect of their life and empowers them.” **Volunteer feedback**

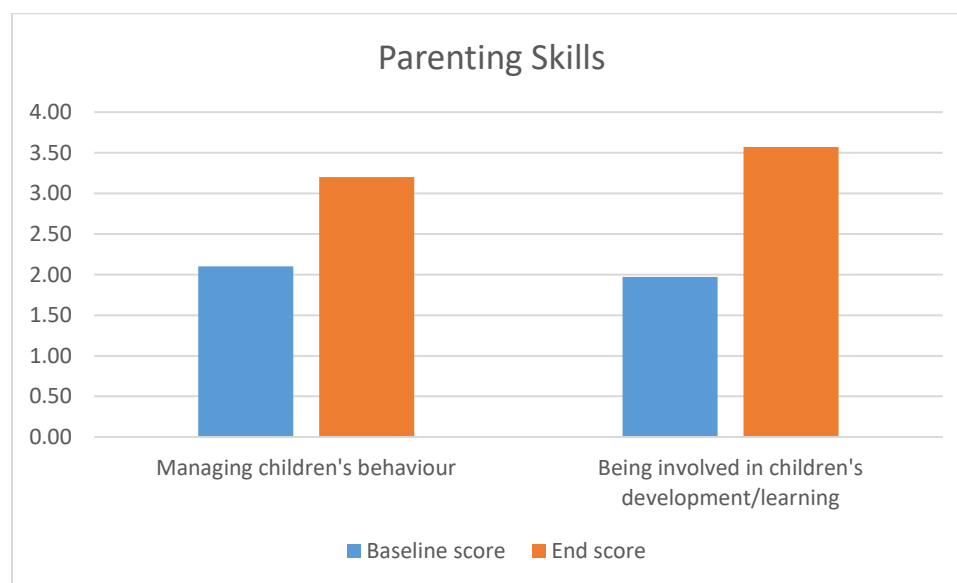


Figure 4 Average baseline score and average end visit score from MESH forms

68% of families felt better able to manage their child's behaviour by the end of the support, and 76% were more involved in their children's development. Parents who receive support feel more confident as parents and have greater understanding of how best to support their child's development. Research shows that this is likely to have a long-term positive impact on the child's development and to give them a better start in life. Parental involvement during children's early years has been shown to have "a significant impact on children's cognitive development and literacy and number skills".²

For some families, this is achieved by providing practical parenting skills, such as offering Nurturing Parent programme sessions, guidance on routines and health eating, and providing play resources. Where parents lack confidence in how to best support their child's development, volunteers have been able to build their confidence and skills. In some cases, parents are disengaged from the child's development or feel overwhelmed, and having a volunteer involved can change the dynamic and demonstrate positive ways to engage. A staff member described it as "de-mystifying their fears" and offering gentle handholding, which other families may get from their own support networks.

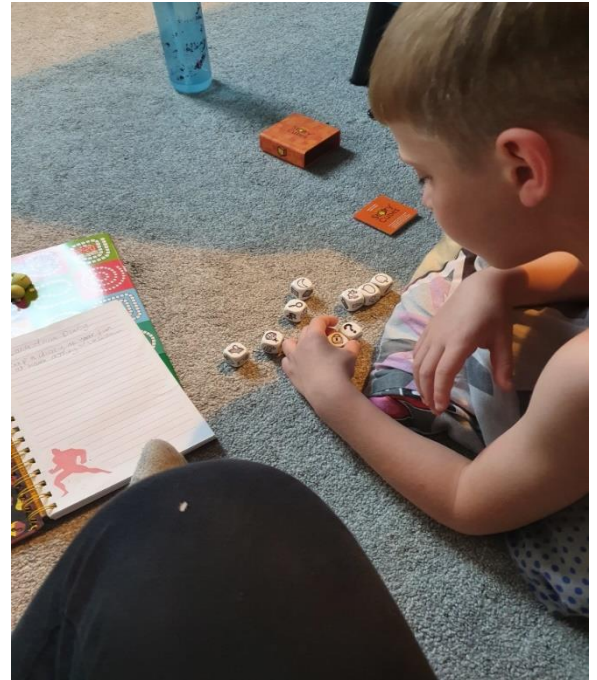


Figure 5 Photo of child playing with story cubes

Case study: One volunteer talked about working with a very young mother and an asylum seeker, arriving to the UK seven months pregnant, and overwhelmed. The mother reported to the volunteer that sometimes she "chats" to the baby but felt it was silly. The volunteer was able to inform her that those instincts were completely correct and would support the baby's development. When the volunteer next visited, the mother was sitting reading a book to the baby aloud.

"Mum has started to play with her children instead of forcing them to play (mum realised this and now understands the difference)" **Co-ordinator feedback**

"I have seen a mum build a stronger relationship with her autistic son, because she had the time to spend quality time with him while I played with her younger son." **Volunteer feedback**

"I needed someone to talk to who wouldn't be there to judge me and tell me what to do. My volunteer was great and would come and offer advice, show me how to do things, listen to me and also interact with my child, which meant a lot." **Family feedback**

² DfES, *The Impact of Parental Involvement on Children's Education*, 2008 <https://campussuite-storage.s3.amazonaws.com/prod/1558547/25fac70c-4889-11e8-81cf-123d46065de8/1791897/4f285b62-7048-11e8-b464-12e5197c3b90/file/TheImpactofParentalInvolvementon365kb.pdf>

Improved family management

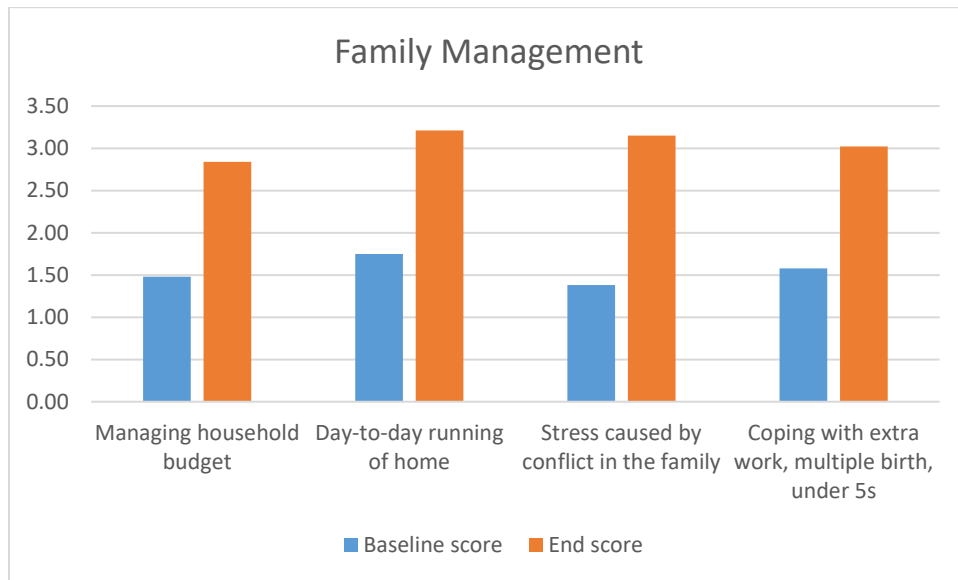


Figure 6 Average baseline score and average end visit score from MESH forms

The data demonstrates there is a noticeable improvement in the ability of families to cope with day-to-day family management through Home-Start Bristol's support.

Day to day running of the home

80% of families reported they felt better able to cope with day to day running of the home. Changes included being better able to manage chores and keep the house clean, being better able to complete tasks such as food shopping and cooking, and attending appointments. This is achieved sometimes by the volunteer providing practical support or looking after children while the parent completes tasks, and/or by building confidence and providing advice. Many families reported they felt able to "get on top of things" with the volunteer support.

For example, in the focus group, a volunteer spoke about one mother who suffered from severe anxiety and was finding it near impossible to leave the house, frequently leaving the supermarket mid-shop due to panic attacks. In one weekly visit, the volunteer was able to accompany the mother to the shops and buy food together, supporting her to overcome this fear. The mother said: "I've not had this much food in the house since the baby was born".

"This was a fantastic opportunity for me to get my life back on track. Just having someone come and talk to me and help me play with my children for a few hours a week made such a change, thank you so much." **Family feedback**

"Family are engaging more in the green spaces around them, walking daily with children. Mum has worked hard in making the home tidier and less cluttered. Child has now got a bed and bedroom is all set up to support child's imagination. Housing has supported family in clearing rubbish for them." **End visit feedback from co-ordinator**

Parents feel better able to cope with managing the household budget

59% of respondents reported an increase in their ability to cope with managing the household budget. This is a lower change than most other indicators, likely reflecting that often financial difficulties are not within the family's control.

Where families did see a positive change, it often made a big difference, for example securing housing with volunteer support to complete forms, or being referred to debt and finance support services.

"Family experiencing financial difficulties and on the brink of homelessness. Debt and finance support gained along with referring to housing/homeless services, which has supported family in making sure they have a roof over their heads." **Co-ordinator end visit form**

Home-Start Bristol doesn't offer specific services around budget management, and we suggest they may want to review the significance of this indicator – if this is a key area that they find families need support with, consider whether additional programmes or volunteer training would enable more families to see a change. If it is not a key indicator, consider including it within general household management indicator to reduce length of data collection.

Parents feel better able to cope with conflict, stress and extra work

52% reported they were better able to cope with stress caused by conflict in the family, the lowest percentage of change of any MESH indicators. However, 82% of families reported feeling better able to with extra work caused by having multiple young children. Many families when they first access the support often feel completely overwhelmed at the thought of coping with multiple young children. The Home-Start service provides practical support and confidence building to show they can manage.

"Being matched with the wonderful [volunteer] was great, she helped me practically and emotionally with my twins. I did not believe that I could do this and [volunteer] was there showing me that I can."
Family feedback

Outcome 2: Parents and children experience improved health and wellbeing

Improved health and wellbeing of parents

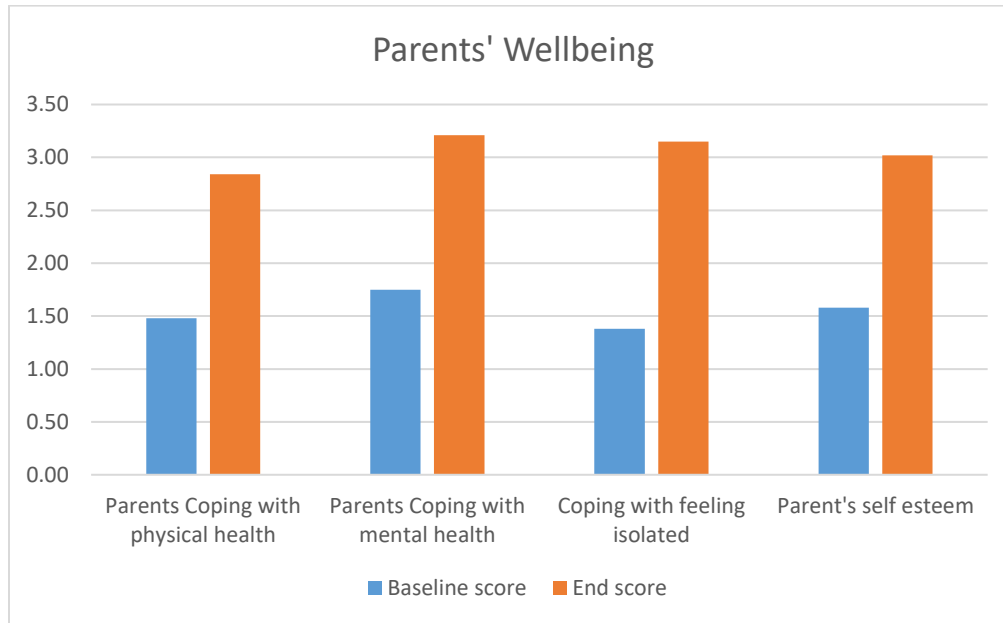


Figure 7 Average baseline score and average end visit score from MESH forms

Improvements in parents' wellbeing shone through the data as one of the most significant changes experienced as a result of Home-Start Bristol's support. Likewise, it was arose in 100% of conversations with volunteers, staff and referrers.

Case Study: Ellie (name changed)

Pregnant with twins and with a young daughter at home already, Ellie was struggling with undiagnosed antenatal depression and OCD, and following difficult postnatal depression after her first pregnancy was dreading the twins' birth: *"I didn't feel there was any way I could cope with raising twins, let alone enjoy it."* Her parents lived abroad and she felt isolated and almost suicidal.

She resisted support for a long time, feeling that she wasn't entitled to it as many had it much worse. But through multiple conversations, Home-Start Bristol's co-ordinator was able to convince her that she deserved support, and matched her with her volunteer, Sue (name changed).

Before long, Sue's two hour weekly visits were an integral part of the family's routine and Sue had become "like family". Her calming and non-judgemental energy helped Ellie calm down and manage her worries, giving her a space to talk about anything she wanted and sharing her experiences of motherhood. Simple things like making a cheese sandwich so Ellie didn't need to miss lunch while breastfeeding, putting out washing together, or carrying the baby on a walk as Ellie's caesarean scar made that impossible, made a huge difference.

Ellie remembers fondly how Sue helped turn a child's hospital appointment from something they'd dreaded for months ("how can I possibly get everyone there together?") into a smooth and calm day, and last December when she made it possible for the whole family to go and see Father Christmas together.

Even now in lockdown, Sue is calling weekly and is providing a much needed sounding board for Ellie's worries but also her joys at her children's development.

Ellie's support will be ending soon, by her own decision, and while she's sad that it's ending, she's confident that she'll be fine: *"I don't just cope, I really enjoy life now."*

Improved physical and mental health and self-esteem

Many of the parents accessing Home-Start Bristol's support suffer from diagnosed mental health conditions such as OCD, anxiety and agoraphobia. More than 470,000 children under the age of five in the UK are living with a parent who has mental health difficulties.³ The support of volunteers has enabled many families accessing Home-Start Bristol support to increase their ability to cope with these. 79% of families' MESH scores showed an improvement in their mental health, with an average increase of 1.46 points, moving substantially from a 1.75 to 3.21 on a scale of 5 (1 being "not coping very well" to 5 being "coping well"), backed up by feedback forms in which 81% reported a positive change in their mental health.

Volunteers in the focus group reported successes that may appear small to others but were significant for the family, such as one mum with OCD overcoming her condition to play with 'hama beads' with her children and reporting: "they drove me mad but we still played with them." Another mum who struggled with agoraphobia was able to get out of the house, accompanied by a supportive volunteer, and play with her children in the local park.

80% of parents saw an increase in their self-esteem, both as individuals and as parents.

"Each week I have seen mum's anxiety decrease and her confidence in herself and her ability as a parent increase. When mum is going through a difficult patch, having someone she can talk to and air her concerns to has helped her feel better about things. Some weeks, just being able to give mum some time to herself has given her a boost to get through the day." **Volunteer feedback**

"[Volunteer] is so good and kind, she made me feel better and happy, I am stronger and more confident and know its ok to ask for help." **Feedback from family**

"I really bonded with my volunteer and so did my baby. She came to us when my baby was very young and I wasn't leaving the house, it was amazing the way that small gestures and talking through things helped. We now go out regularly as a family and I feel much more like a mum." **Feedback from family**

"I have seen a positive change in mum's mental health, she needed someone to support her and this is what happened. Mum appreciated the support she received." **SENDCO Bristol Children's Playhouse**

70% of parents reported improvements in their physical health, with families increasing activities and exercise such as going to the park and walking as a family.

³ Children's Commissioner Vulnerability Report 2018

Coping with feeling isolated

Reducing isolation in both the short and long term is a key outcome, with 82% of families reporting they felt less isolated. When compared to other data, this is the area where families saw the biggest change on average.

During support, parents reported that the visits provided social contact and support that they otherwise would not have access to. One coordinator reported that a mother said she “had not been able to talk to anyone else about her past and current issues.”

Furthermore, by enabling families to access other services, parents see long-term reductions in their isolation through ongoing further support.

“Having someone to help with my two children when I was at my lowest was amazing, having someone to talk to made a huge difference.” **Feedback from a parent**

Improved health and wellbeing of children

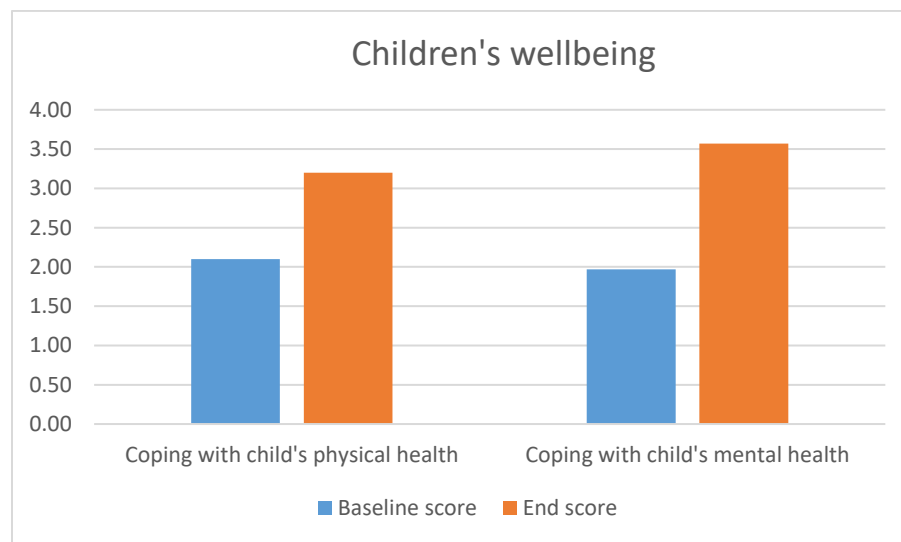


Figure 8 Average baseline score and average end visit score from MESH forms

There was a very low number of end scores for coping with children’s physical and mental health (14 and 17 respectively), suggesting that this is not a key need identified by many families.

69% reported a change in their child’s physical health. 63% of families saw an improvement in children’s mental health. 97% of families in Children in Need form children had either made significant progress or were starting to make progress on being happier and healthier. 90% were more school ready.

Changes achieved in this field included implementing better sleep routines, taking part in more family-centred activities, and introducing healthy lifestyle choices.

As explored below, one of the biggest changes seen was in families accessing other services, which include children’s immunisations and health appointments, dentists, and baby clinics.

Outcome 3: Families increase their knowledge of and confidence to access other services

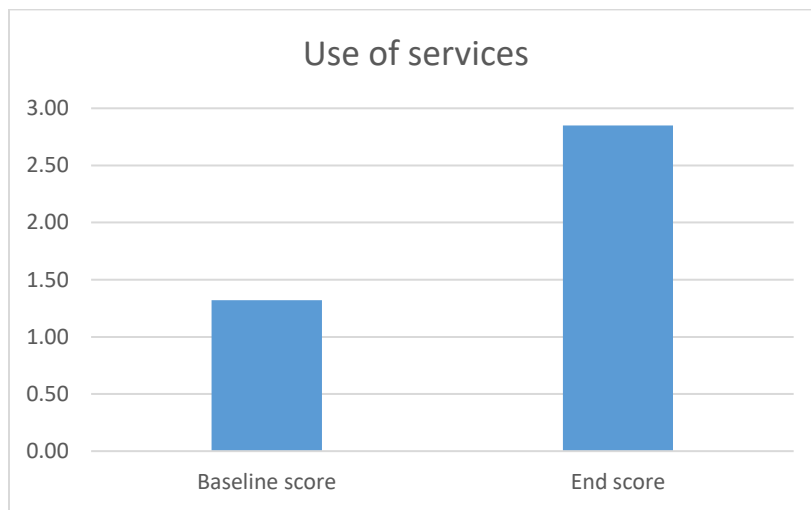


Figure 9 Average baseline score and end score from MESH forms

Successfully reducing isolation and, relatedly, increasing the propensity to access other services were consistently two of the biggest changes seen in families, seen in 82% and 80% of families respectively. There is a recognition that the trust built up through one-to-one ongoing support with a Home-Start Bristol volunteer can build parents' confidence to access other services.

Referrers felt this was also one of the most significant changes, and areas of need, they observe. Through volunteer signposting and support in building confidence, families have accessed support from a breadth of services including, but not limited too; toddler/baby/breastfeeding groups, museums, financial and legal services, benefit/housing services, libraries, counselling, the Freedom programme, city farms, local parks, swimming, dog walking, health appointments.

In some instances, having volunteer support has physically enabled families to access critical services that would other not be accessed, and in some cases significant implications to both parent and child. For example a young asylum seeking woman with a toddler who had no local support network, and needed surgery. The volunteer was able to look after her daughter so she could have and recover from the operation.

Case study: Yasmin (name changed) has historically had difficulties building trust with new people and refused to go along to support services, but was struggling with a high level of need. The Home-Start Bristol volunteer was able to build a strong relationship with Yasmin, and encouraged her to try Mothers for Mothers' (MfM) services, which she was eligible for. As a result, the MfM team was able to get her a referral to specialist teams, she has made a strong friendship with another mum, and has accessed cookery lessons to better feed her family, which she attends with her new friend. The MfM team felt that Yasmin would never have accessed their services without the Home-Start Bristol volunteer accompanying, and that this will have lifelong positive impacts on the family's life.

"The needs of the family were met, and the family have started to access services, which is great. Your service has been fantastic." **Children's Centre Family Support Worker**

“Mum has been receptive of information regarding groups/events taking place over the summer and has arranged to attend places with her friend and her children. Going out walking most days around the block, which is huge when family never left the home previously. Mum is feeling better in her-self and is able to contact people herself now regarding any concerns she has.” **Co-ordinator feedback**

“I feel confident to meet new people and explore different groups with my children.” **Family feedback**

Wider benefits

Benefits for volunteers

Home-Start Bristol volunteers join for a variety of reasons, the most common being to learn and develop skills and to get work experience, along with meeting new people, giving back and using existing skills.

From our sample survey, all volunteers felt that the experience met these expectations, and that it provided additional benefits including feeling a closer part of the community, keeping interested in people, keeping active, and seeing new perspectives.

Several volunteers have used skills and experienced gained to progress in their careers, in some instances changing careers to social work or social care, or taking further qualifications.

“The introductory training course gave me confidence that I was capable of more. It was delivered in a really professional and well considered way. I was inspired to get back into traditional learning and have subsequently undertaken the volunteering NVQ and another NVQ for Children and Young People’s mental health – both of which were offered and/or enabled by Home-Start. I have also now signed up to do a Diploma in Digital marketing”. **Feedback from volunteer survey**

“I used a lot of skills with that family. I looked up dentists, doctors, local support, foodbanks etc. It showed me I had to be resourceful as well.” **Volunteer feedback**

Impact on other services

Home-Start Bristol is a vital part of the local infrastructure of support for families in Bristol and South Gloucestershire. Partner organisations interviewed clearly felt that Home-Start Bristol plays a unique role and meets needs that other services cannot. Their work with lower-need families enables statutory and more intensive support to be directed where they are most needed. With a broader criteria for families eligible for support, they can take children at younger and older ages than other services such as Mothers for Mothers (who focus on birth and delivery), Bluebell Care and Rockabye, with whom they work in partnership.

Home-Start Bristol also attend and contribute to a range of multi-agency meetings and events, such as Neo-natal events, networking breakfasts and volunteer events.

They also empower families to access other ongoing services that the families may not otherwise know about or have confidence to access.

Ongoing relationship building with partner organisations, in part driven by joint funding applications (e.g. perinatal mental health funding) has increased understanding of what each service can offer families and has increased the number of referrals between services, offering families a wider range of support to best fit their needs.

As well as preventative support, Home-Start Bristol work with agencies to support families after statutory intervention to help them maintain positive changes. With the consent of parents, Home-Start Bristol are able to work together with other services to share information and ensure the best outcome for the family.

Home-Start Bristol have had success accessing grants additional to their statutory funding, adding significant value to this investment and reaching a greater number of families than would otherwise be possible, which is highly valued.

Feedback from referral agencies interviewed was very positive on Home-Start Bristol's programmes and processes, and their communication particularly in terms of feeding back on families' progress.

"Support was offered to my family very quickly and the volunteer was a great support to this mum and her children. There was lots of role modelling, which my mum has never had before. Mum looked forward to the visits and really worked at the plan which was put together by both mum and volunteer. I was kept up to date and informed when support was stopping as no longer needed." **Health Visitor.**

"The needs of the family were met, and the family have started to access services, which is great. Your service has been fantastic." **Children's Centre FSW.**

Key themes and success factors

Vital early intervention and preventative support

Research from Home-Start UK found that children whose parents have the support of a Home-Start volunteer have a better start in life than those who don't, experiencing positive changes in parental wellbeing, competence and behaviour.⁴ The study showed that these positive changes are long-lasting beyond the volunteer relationship and improvements were maintained at the three year follow up.

Home-Start Bristol meets an identified need for support for families before they reach crisis point or statutory intervention. They are one of few organisations working with pre-school children in Bristol. Referral agencies felt that this early intervention prevents family breakdown and helps families turn their situation around before there is a risk of children being long-term adversely affected.

Agencies who work with Home-Start Bristol felt strongly that they are an essential part of the local support ecology, and that by supporting lower-need families at a preventative stage, they create capacity for statutory services to deal with higher-need cases.

"Early years are so important to families and for family relationships, having a support of a Home-Start volunteer during that time can make such a huge difference to the future of that family." **Maria Viner, Mothers for Mothers**

A model built on a strong, skilled volunteer base

Home-Start Bristol's peer-support, volunteer-based model gives unique benefits. Several referrers commented on the challenges of engaging some families with statutory services or those that require the family physically visiting a service. Often there is a lack of trust or some fear around statutory

⁴ FIND REFERENCE

services, and there is a sense that statutory services are less flexible and people-centred. Home-Start is able to meet that need, build trust, and support families to access other services in future.

"Has been able to trust volunteer which is a hard thing for mum to do... [The mother] really appreciates that the volunteer is not paid – visiting because she wants to, not because she has to." **Feedback from end visit**

Home-Start Bristol have around 88 volunteers at present. Volunteers receive comprehensive training when they are inducted, and they are also able to access further ad hoc training on specific topics such as safeguarding refreshers and 'talk and interaction with children'. In 2019, Home-Start Bristol also began to offer free online training courses for volunteers and staff in partnership with AIM, on topics including 'Understanding child mental health', 'understanding autism', and 'challenging behaviours'. 14 volunteers and 2 staff members completed these. Volunteers also receive a newsletter and access to further information on social media groups and group emails.

The initial training is widely regarded (by volunteers and partner organisations) as of excellent quality and essential to the success of the model. While volunteers join Home-Start Bristol for a variety of reasons and from a variety of backgrounds, the training brings them all up to a well-prepared level and leaves them confident to begin their work with families.

"I feel very privileged to be part of the wider Home Start team as I think what they are trying to do – supporting families in need to improve the quality of life of parents and children – is a fantastic cause. The training with Home Start was a great opportunity to meet people, learn, develop new skills, and improve my confidence. Home Start has been flexible as my capacity to volunteer has varied over the years, and I have felt fully supported each time I have worked with a family. The whole Home Start experience has been extremely positive, and I would definitely recommend getting involved." **Volunteer feedback**

"The supervisory sessions are really useful and well timed. It's good to have someone to bounce ideas off." **Volunteer feedback**

"I was nervous, and I was excited. The course left me feeling very prepared. I felt we had gone through a lot. I was eager to put it into practice." **Volunteer course feedback**

Volunteers are well stewarded and frequently thanked, reflected in the length of service of many. For example, the board of trustees organise an annual Christmas lunch and free raffle for volunteers, flowers are given after different periods of volunteering time and there is volunteer representation at the monthly board meetings. 100% of volunteers who responded to the survey rated the overall volunteer experience as very good, and 100% said they would recommend to others. Volunteers frequently commented on how involved they felt in the organisation and that they feel treated as valued as the paid employees. Receiving ongoing positive feedback on the impact they make maintains motivation and confidence. However, currently this is delivered in an ad hoc manner as well as in supervisions, and Home-Start Bristol should consider how to formalise this.

Additional support from paid staff

While the volunteer base is integral to Home-Start Bristol's success, the involvement of paid specialist staff where appropriate is fundamental, for managing the referral process, organising effective matches, and providing additional expertise and support to volunteers.

When referrals come in, the service manager reviews the family's needs and decides whether a volunteer is suitable, or whether support from a Family Support Worker or Early Intervention Worker is needed. This can be a short or ongoing relationship and can provide practical support (e.g. sleep guidance, healthy eating, information on behaviour management, perinatal mental health, or Nurturing Parent programme), and prepare the family for a volunteer relationship where appropriate.

Alongside this, co-ordinators check in on volunteers more regularly where they are aware there may be increased need. This provides confidence and reassurance to the volunteer.

"It was great working through the Nurture activities and advice with the Family Support Worker and having support with my children's sleep and daily routines, I feel my self-esteem has increased and I am not so irritated". **Family feedback**

Person-centred and non-judgemental one-to-one support, with families in control

Home-Start Bristol operate a flexible and person-centred model, identifying the key needs facing each family and adapting services to meet that. They aim to empower families to take control over their lives and to become independent.

Referrers commented that few other services are that person-centred and accessible, and give agency and choice to the parent to decide what support they need; other services by design need to operate more of a 'tick box, shopping list' approach.

Seemingly small aspects of the approach achieve this – families can stop the support any time, it is not prescribed or assessed, they can change what the volunteer does with each visit, and with the support happening in their homes they are more comfortable and have to 'invite in' the support. The matching process is carefully thought-through and tailored to each family's needs, which makes a substantial difference. Several volunteers are past service-users themselves. A staff member commented that they never think or tell the parents they are "inadequate", instead it's gentle encouragement, standing by your side. With no set time limits on volunteer support, volunteers can take time to build trust and strong relationships with families.

"What I loved about the service was that they spent time with me at the start, got to know me a little bit and discuss the service. They took time to really know my needs, and matched us well – it felt like she'd found someone who could be my friend." **Family feedback**

"Flexible, listened to my needs, gave me ideas... I will look back on this period knowing that I was supported, listened to. I have appreciated how much a kind, regular contact can do wonders and help my family." **Family feedback form**

As a result, families have benefitted deeply, and in ways beyond the weekly support, such as being referred to further relevant services, having support at child protection, child in need or SAF meetings, or being supporting through a court case.

Home-Start Bristol's ethos and training instils in volunteer an equitable attitude without a 'them and us' power dynamic. Many volunteers reported they were previously worried about being accidentally judgemental or patronising, but the training and support abates that and opens up volunteers' eyes.

Arising needs

This report is written during the 2020 COVID-19 pandemic, and all recommendations need to reflect the significant impact that has and will have on Home-Start Bristol's services.

Even before the COVID-19 pandemic, Bristol and South Gloucester were predicting significant population growth. The South Gloucestershire population has grown over the past decade by 10% and is projected to rise by a further 17% by 2037⁵ and Bristol's population is expected to reach half a million by 2027 (from 463,400 in 2018).⁶

Partners and referrers predicted a multiplicity of impacts of the COVID-19 pandemic that will increase the volume and severity of demand for Home-Start Bristol in both the short and long terms.

Social services teams have in places been redeployed and have been unable to support families as normal during lockdown. Funding for other services is likely to suffer and reduce their capacity; and the level of need of families in Bristol and South Gloucester is likely to increase. Already, Home-Start UK's 2019 Impact Report shows that across the UK there has been a year on year increase in families facing mental health and wellbeing and isolation needs.⁷ Now, families that may have had normal births and early years will now be challenged with a lack of family and friend support due to social distancing, increased anxiety around health, increased stress and tension within families due to lockdown, and an inability to access all the pre and post-natal service they would normally rely on. Many are also predicting a spike in cases affected by domestic abuse, substance abuse and mental health. The lockdown may also result in some positive changes, such as fathers being at home for more of their child's early life, and so this should be factored in too.

The long-term economic impacts of the pandemic will in many situations affect those already struggling and those in areas of deprivation. As Bristol has 41 areas in the most deprived 10% in England, including 3 in the most deprived 1%, Home-Start Bristol should expect see increased need in these areas and an increased focus from the local authority on these areas.⁸

Home-Start Bristol must also bear in mind the increasingly diverse population of the area, with at least 187 countries of birth and 91 main languages now spoken in Bristol. Many of these families may be

⁵ South Gloucestershire Council Joint Strategic Needs Assessment 2017 <https://edocs.southglos.gov.uk/jsna2017/pages/summary/>

⁶ Bristol Local Authority Area Population Report <https://www.bristol.gov.uk/statistics-census-information/the-population-of-bristol>

⁷ Home-Start UK 2019 Impact Report <https://www.home-start.org.uk/Handlers/Download.ashx?IDMF=6faf4bc2-9c20-4e66-a0e0-dc8ad7578f9c>

⁸ State of Bristol Key Facts Oct 2019 <https://www.bristol.gov.uk/documents/20182/32947/State+of+Bristol+-+Key+Facts+2018-19.PDF/263d5f0f-763e-9553-467d-c9704f307d7c>

among those in need of Home-Start Bristol's support, and services should be adapted as far as possible to offer this.

There is a recognition from referral organisations that they are likely to need organisations like Home-Start Bristol more than ever in the future.

Learnings and recommendations

Our analysis has identified the following recommendations for consideration.

Refine the monitoring and evaluation framework

Whilst Home-Start Bristol have some good monitoring and evaluation processes in place, there is also a recognition from Home-Start Bristol that the current framework is not as comprehensive or refined as it could be. Data is collected in multiple ways for some indicators (e.g. MESH forms and family surveys), and not at all in some cases (e.g. low levels of MESH end scores). We recommend the team thoughtfully review their current collection methods and ways to increase their reliability, particularly ensuring that all families have an end visit score – for example by completing the end visit scoring before the volunteer's last visit, so the family is still engaged, or completing by phone where that is not possible.

Developing a comprehensive, logical impact measurement framework, driven by Home-Start Bristol's core outcomes, will also be beneficial when compiling future funding applications. Currently the team are having to report against a complex range of different indicators for different funders, creating additional work. Where possible, funding applications should align with the core organisational outcomes and indicators and current collection methods.

There have been learnings from this evaluation process which Home-Start Bristol can utilise in future. For example, there was zero take-up of the family survey disseminated by SurveyMonkey then by email, aiming to capture impact 3 months or longer after families finish support. This is likely an impact of the coronavirus pandemic, but nonetheless it seems unlikely that this will be a successful collection method in future. To capture this data in future, consider other methods such as offering incentives for completing the survey (e.g. enter to win X), telephone calls with a sample of families (as trustees have done previously – however this doesn't need to be with all closed families if capacity is not available, and can be with a smaller representative sample), collecting anecdotal information at other points e.g. an activity day, Christmas party, Easter egg hunt – this is a popular choice for other Home-Starts.

Continue to raise Home-Start Bristol's profile

Home-Start Bristol seem to do well in spreading the word about their available support locally, nonetheless one family's feedback was that they wished they had known about the service earlier. As an early intervention service, ensuring families know about the support as soon as possible can make a difference. Therefore, Home-Start Bristol should continue to review and grow how they raise awareness of their services, and how they demonstrate who they are relevant to. This could be informed by an audit of local organisations and workplaces to ensure an up to date communication list, and by including a future survey question with current families to identify how else they might come across information.

Work to reach parts of Bristol's community not currently engaged

Home-Start Bristol are aware that they are not fully engaging all groups within the community equally. 30% of families supported in 2019-20 were identified as BAME, compared to 38% of school pupils in Bristol.⁹ There is a recognition that there is additional unmet demand, and that often these communities are not accessing services in the same way. Recent steps such as connecting with a local Muslim charity who reached out demonstrate there is opportunity to build mutually beneficial links with groups and individuals within different communities, to better understand where Home-Start Bristol's support would be most useful and how to implement it. There has been discussion about whether to set this as a set strategic priority for the service, if Home-Start Bristol wants to ensure they are serving those most in need in its community.

Increase awareness of and adapt services for specific needs

Earlier we outlined a range of arising needs that Home-Start Bristol should be aware of and responding to, such as a growth in families with English as a second language, which was identified as a potential gap in Home-Start Bristol's services. In addition, many predict an increased rate of domestic abuse and substance abuse, and a growth in the severity and prevalence of mental health needs. Home-Start Bristol should ensure their staff and volunteers continue to be upskilled in managing these needs, where appropriate, and consider offering additional specialist support where needed or specifically recruiting volunteers with relevant existing skills such as multiple languages.

Continue to innovate and progress, and explore demand for additional services

2019-20 saw some significant changes for Home-Start Bristol, with 50% of staff posts being replaced during this period. This has presented challenges in terms of continuity and learning periods, however it also presents opportunities to bring fresh insight and new ideas, to reflect on learnings (such as from this report and from adapting services and working practices in the lockdown), and explore new options.

Many other Home-Starts across the country offer additional services beyond home visiting, such as drop in groups and training workshops. There was little proactive demand for this in family feedback, and there appears to be a good level of complementary services run by others that volunteers can signpost families to. Nonetheless Home-Start Bristol could undertake further research to identify if there is demand. This could be particularly informed by this evaluation, looking perhaps at indicators that were less strongly met and where Home-Start Bristol appears to perform less strongly than the Home-Start UK national average, such as in budget management (59% vs 91%), coping with stress caused by family conflict (52% vs 89%), and improving children's physical health and development.¹⁰ Home-Start UK is likely to hold insight or be able to connect Bristol to other services to learn from their approaches.

⁹ State of Bristol 2020 report, <https://www.bristol.gov.uk/documents/20182/32947/State+of+Bristol+-+Key+Facts+2020>

¹⁰ <https://www.home-start.org.uk/Handlers/Download.ashx?IDMF=6faf4bc2-9c20-4e66-a0e0-dc8ad7578f9c>

Continue to improve communication and relationship building with other services

Broadly, partner organisations are very happy with communication and referral processes with Home-Start Bristol. However, a small number of comments suggested there could be more work done on strategic partnership development to build long-term relationships and continued understanding of how services work best together.

Build on successes with recruiting and retaining volunteers

Broadly, volunteers are hugely positive about their experience with Home-Start Bristol. They feel well-supported and trained, and are gaining the benefits they had hoped to. The following recommendations build on these strengths.

Consider ways of increasing volunteers' knowledge of services

There is currently no central directory of all services to which volunteers can signpost families, and some commented that often they learn about these anecdotally. They understand that it is difficult to keep information up to date but that some place for sharing information, particularly on a hyperlocal level, would add great value. This could be hosted by Home-Start Bristol but also provide a method for additions and updates by volunteers.

"There are so many resources available on different topics (via websites, children's centres, books etc) and I am very happy to do research for my family but several times, I have thought it would be useful to have easy and quick access to good, sensible resources in several areas. Also, as my kids get older, I do find myself forgetting what I did for them and being behind on the latest advice!" **Feedback from volunteer**

In addition, some volunteers felt that there is a gap between where Home-Start Bristol would escalate and step away from a family due to high need, and where social services would step in, and thus they felt they may be leaving the family in a "void". Consider ways of demonstrating to volunteers how Home-Start Bristol works with other services and how such situations are addressed.

Ensure volunteers receive feedback on their impact in a consistent and structured way

Volunteers felt strongly that ongoing and specific feedback on families' progress and their personal role within that was essential to maintaining motivation and confidence. This should therefore be built into every supervision, and additionally where possible. There may also be value in a volunteer-facing version of impact reports/evaluation reports to demonstrate the overall benefit of the charity.

Consider reviewing volunteer criteria

Volunteers for Home-Start Bristol currently must be or have been a parent themselves, as historically the organisation has felt that this strengthens the relationship being built between a family and their volunteer or worker as the parents appreciate that the volunteer or worker know what they may be going through. However, several volunteers suggested that this may not need to be an exclusive rule –

for example, many named friends with experience as aunts, nursery teachers or in specific fields e.g. mental health who would bring value. In addition, many reflected that their own parenting experience was 30+ years' ago in some cases, and in very different circumstances, and that experience may no longer be exactly transferrable.

Identify and maximize the wider skillset of volunteers

Home-Start Bristol have already begun considering how to utilise volunteers in different ways e.g. marketing and training facilitation. There was definitely interest from volunteers for more opportunities of this nature, to increase impact and to meet their own development goals.

Conclusion

It is evident that Home-Start Bristol delivers a high-quality and unique service for families in Bristol and South Gloucestershire, that empowers families to overcome challenges and provides better futures for parents and children alike. Home-Start Bristol is held in high regard by families, staff, volunteers, trustees and local referral partners alike. Volunteers are at the heart of the Home-Start model, delivering practical, accessible support in a highly cost-effective way and with a focus on empowering families to overcome challenges and continue on a positive path.

As the level of need in families is set to increase in the coming months and years as the country recovers from the COVID-19 pandemic, services like those of Home-Start Bristol will be crucial to supporting families in both the immediate and long-term future.

Appendix 1: End Visit MESH form

End Visit Form Home-Start Family No:

Co-ordinator name:

Date of visit:

Family's e-mail address:

Please refer to Initial visit/Review visit forms for the needs identified, outcomes and the coping scores in the initial and previous visit.

<ul style="list-style-type: none"> Lone parent Domestic abuse Referral to FR/FP 	Needs identified last visit ✓	Coping score initial visit	Coping score last review	Level of coping today							Outcome: Achieved, partially achieved or not achieved	
				0	1	2	3	4	5	NG		
A. PARENTING SKILLS												
1. Managing children's behaviour												
2. Being involved in the children's development/learning												
B. PARENTS' WELL BEING												
3. Coping with physical health												
4. Coping with mental health												
5. Coping with feeling isolated												
6. Parent's self-esteem												
C. CHILDREN'S WELL BEING												
7. Coping with child's physical health												
8. Coping with child's mental health												
D. FAMILY MANAGEMENT												

<ul style="list-style-type: none"> Lone parent Domestic abuse Referral to FR/FP 	Needs identified last visit ✓	Coping score initial visit	Coping score last review	Level of coping today 0 = not coping very well 5 = coping very well							Outcome: Achieved, partially achieved or not achieved
				0	1	2	3	4	5	NG	
9. Managing the household budget											
10. The day-to-day running of the home											
11. Stress caused by conflict in the family											
12. Coping with extra work caused by multiple birth/children under 5											
13. Use of services											
14. Other (specify).....											

Services used

	Which services are the family currently using?	Which services would the family like to use?	Has Home-Start helped the family access the service? Yes/No	If Yes, how has Home-Start helped the family to make better use of services?					
					Signposted – provided address and contact details	Accompanied family to appointment	Discussed the service prior to or after use	Looked after children while family attended appointment	Other
1. Family GP									
2. Health Visitor									

3. Social worker									
4. Mother & Baby Clinic									
5. Bristol Autism Support									
6. Children's centre									
7. CAMHS									
8. CPN/Mental health									
9. CAB									
10. Debt counselling									
11. Turn2Us online and/or helpline services									
12. Housing advice/support									
13. Benefits department									
14. Legal support									
15. Job Centre Plus									
16. Adult education									
17. Parent & Tots group/ Nursery/Schools									
18. Parenting programme									
19. Dentist									
20. Other statutory services (specify)									
21. Other voluntary services (specify)									
22. Other (specify)									

Hardiker level of need: please circle the appropriate level for this family: Level 1 Level 2 Level 3
Level 4

Interpreter used: YES/NO **Who answered the questions:** Mother/Father/Other (please identify)

Children's Assessments. Please complete those boxes which apply to any of the children.

Child's name eldest first	Date of birth	Has a referral been made to First Response (or First Point if South Glos) If yes by whom and when.	Subject to assessment of needs e.g. SAF (√)	Was the assessment initiated by H-S? (√)	Who is the lead professional? [HS is lead professional =1; Other agency =2]	Child in Need (√)	Child care/ protection plan in place
C1.							
C2.							
C3.							
C4.							
C5.							

Please provide reason for volunteer support ending (please circle one):

Family no longer requires Home-Start support.	Home-Start identifies family's needs as better met	Family prematurely ends support.	Family becomes unobtainable.	Safety concern or statutory intervention (child protection or police)	Other (specify)
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Mutually agreed closure.	via alternative service(s).			requirement) results in withdrawal of service.	

Co-ordinators Summary:

Appendix 2: Family feedback form

BHS Number:

Date:

Family Evaluation Form

As someone who has used our service your views are very important to us. We would be very grateful if you would take a few minutes to complete this form. Thank you.

1. How would you describe the support you received from Home-Start?
2. What support did you need?
3. What worked well?
4. Do you feel better able to cope with everyday issues and routines? YES/NO (please circle)
5. Could we have done anything differently? YES/NO (please circle)
If yes, please state how below:
6. Has your knowledge of local services increased and do you feel more confident to access these? YES/NO (Please circle)

If YES can you please comment on which services you have used below:

7. How would you describe your relationship with your volunteer or paid worker?
8. Do you feel that your family's mental health and well-being has improved, since your HSB support finished? YES/NO (please circle)
9. If you were feeling isolated before support started, do you feel less isolated now? YES/NO (Please circle)

10. Any other comments

How happy were you with your Home-Start support? (1 being very unhappy and 5 being very happy)

1-----2-----3-----4-----5

Would you recommend Home-Start to others? YES/NO (Please circle)

Would you like to continue to receive information about the scheme, for example, our newsletters? (This will be done by e-mail)

Yes/No

E-mail address:

Appendix 3: Volunteer survey

We are committed to making volunteering with us a fantastic and fulfilling experience. We love to hear positive comments about your volunteering, but we also need to hear if we can make things even better. To help us find out more, please take a few minutes to answer some questions. Your feedback will remain anonymous unless you would like to give us your permission to use your comments. Your feedback will be used to will be used to develop and improve our services and to evaluate the effectiveness of our work.

Q1 How long have you been volunteering with us? *Tick boxes*

- Less than 1 year
- 1-3 years
- 3-5 years
- Over 5 years

Q2 When you started volunteering with us, what did you hope to gain? (please select as many as you like) *Tick boxes*

- Meet new people
- Get some work experience
- Learn/develop my skills
- Use my skills
- Give back to the community
- Make friends
- Other *text box*

Q3 To what extent does your volunteering meet your expectations? *Tick boxes*

- Fully
- To a great extent
- To some extent
- Not met at all

Please tell us more *text box*

Q4 In your own words, tell us about a change you've seen in a family's life because of Home-Start Bristol.

Q5 Is there anything Home-Start could do to help you to improve family experiences?

Q6 How would you rate the:

- Overall volunteering experience
 - Volunteering recruitment process
 - Training/preparation course
 - Additional Training
 - Ongoing Support from HomeStart Bristol
- Very good
 - Good
 - OK
 - Poor
 - Very poor

Comments

Q7 What other support would benefit your volunteering experience?

Q8 Would you recommend volunteering here to family and friends? *Tick boxes*

Yes

No

Q9 Any other comments

Q10 Would you be happy to provide a quote about volunteering at Home-Start Bristol? If so, please leave one below with your name.

Appendix 4: Stakeholder telephone sample interview questions

1. Can you tell me about how you work with Home-Start Bristol?
2. Can you tell me about your understanding of HSB's services?
3. Does HSB make your work easier? Or more effective? Why/why not?
4. What positive changes have you noticed in clients being referred – any particular stories that jump out at you?
5. Would you suggest any improvements to HSB's work – their referral process and how they work with stakeholders, or other aspects?
6. If you aren't referring to HSB, who else might you refer a family to? Who else is operating in the local area and why is HSB different?
7. Are there any significant gaps in provision within a specific part of the community or area where more might need to be put into developing relationships?
8. How do you see families' needs changing in the future, and are there arising concerns that HSB should be aware of?
9. Would you be happy to provide a quote for the evaluation report about the value you see in HSB's work?