UNIVERSITY OF CENTRAL LANCASHIRE

PSYCHOSOCIAL RESEARCH UNIT

EVALUATION OF THE BROMLEY BY BOW CHILDREN'S CENTRE

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May 2008

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EXECUTIVE SUMMARY OF FINDINGS

- The Children's Centre's service provision has been determined strongly by external requirements. At the same time, creative capacities seem to persist, facilitating the Children's Centre's pursuit of its own service priorities, as well as innovation and flexibility in terms of user-orientated service provision.

- Indicators suggest that in terms of accessibility, the Children's Centre can largely be rated favourably.

- The Children's Centre's success in achieving an ethnic mix among its population and attracting many diverse users is apparent. Close relations with the community play an important role.

- Reaching fathers from diverse ethnic groups remains a challenge. A different challenge concerns the focus of services mainly on children under 5 and their parents and siblings, which poses a dilemma for staff used to working with all parts of the community.

- Personal relationships with users are important in the context of antenatal provision, given that user involvement in antenatal services is often the first step towards longer-term engagement in subsequent services.

- The Children's Centre recognises that families' needs for support vary. It has maintained a capacity to provide integrated services to families according to their specific needs, although of a somewhat lesser intensity and flexibility than the Bromley by Bow Centre used to provide, while developing an increasingly professional approach that is conscious of the need to use resources efficiently.

- The nature and scope of user input with regard to service provision is limited by external requirements. While the Children's Centre tries hard to be guided by user priorities, such constraints do not create the kinds of very open conditions that the Bromley by Bow Centre has shown to be conducive to the provision of integrated services that thoroughly reflect local priorities.

- The Children's Centre fosters parents' progression into employment through a structured approach. At the same time, maintaining a focus on personal development must be emphasised as a key component of integrated care for families.

- The Children's Centre largely conveys a picture of successful joint working. External partnerships seem strong, and there is a perception of a good culture of internal collaboration. The wish to address difficulties that exist with regards to both internal and external relations has been apparent.

- The Children's Centre has adopted a structured quantitative approach to monitoring and presenting success. Questions arise about potential adverse effects of this on its ability to provide in-depth integrated care. The use of qualitative indicators of success, namely stories of progression, and the capacity of staff to observe families from multiple angles suggest that a complex perspective on families is being maintained.

- Formal supervision and training contribute to a picture of increasing professionalisation. Such modern professional procedures benefit the work and development of staff. The impact of this on the provision of integrated services to families is yet to be established.

- Establishing outcomes for users was problematic considering that in-depth perspectives of users could not be obtained. Despite their limitations, the views collected through user questionnaires are encouraging. They suggest positive outcomes for users of the Children's Centre's provision of integrated family services.

INTRODUCTION

Government policy under New Labour has emphasised the well-being of children and support for families (e.g. DoH 1998 and 1999; DoH and DfEE 1999; DoH, DfEE and Home Office 2000, Home Office 1998). These policy priorities are central to the current *Every Child Matters* agenda (DfES 2004). Evidence exists of a relationship between early years provision to children from disadvantaged backgrounds and later social behaviours (literature review by Melhuish 2004), and between early disadvantage and later health and well-being (Wilkinson 1994, Roberts 1997, Ball 1994, Pugh 2003).

Sure Start was designed as a national programme offering multi-agency services for children under five and their families. It was intended to complement a wider set of policy initiatives aimed at tackling the interlinked problems of social exclusion, poor educational achievements and health inequalities. A total of 524 local programmes were rolled out in disadvantaged areas in England in 3 waves between 1998 and 2004 (Guardian Supplement 2003), funded jointly from the Department of Health and the Department of Education and Employment (which later became Department for Education and Skills). During the last wave of Sure Start in 2003, children's centres appeared on the agenda. In the first instance, the integrated services provided by the latter were to be developed from existing Sure Start programmes. Mainstreaming was the goal, with a vision of a children's centre in every community by 2010 (DfES 2006).

THE BROMLEY BY BOW CHILDREN'S CENTRE - ORGANISATIONAL BACKGROUND

The Bromley by Bow Children's Centre is part of the Bromley by Bow Centre. The latter was founded in 1984. It is situated in the Bromley by Bow ward in the London Borough of Tower Hamlets. Now a major player in local regeneration, it has grown organically and built on a professional and volunteer base to provide integrated health, education, welfare and leisure services to a deprived community. It has developed a distinct set of organisational values and methods. Through a complex web of partnerships it delivers both general and targeted services within a cross-generational and cross-cultural environment through outreach and agency-based work. The Bromley by Bow Centre has a record of developing integrated family services that long pre-dates Sure Start.

At a visit from then-Children's Minister Margaret Hodge and then-Health Minister John Reid to celebrate the national launch of children's centres in 2003, the Bromley by Bow Centre became the country's first children's centre[1]. Until April 2006 it was the only children's centre in Tower Hamlets, and no funding model was in place. It was mainly funded by the local authority (through DfES money), and Service Level Agreements with the Sure Start Local Partnership. The latter constantly had to be negotiated and involved complex procedures of re-claiming expenditure. Funding insecurities meant uncertainty around continuity of service provision. For a while the Children's Centre was running at a deficit. In April 2006 a funding model through the local authority was introduced with a proportional distribution of dedicated funds among the then 13 children's centres in Tower Hamlets. The Bromley by Bow Children's Centre's funds nearly doubled, with health staff being funded separately through the local PCT. While this annual funding is set to decrease, it has meant financial viability. Unlike the other children's centres in Tower Hamlets, it is not run by the local authority. It remains a charity (with the exception of its primary care services), and staff are employed by the Bromley by Bow Centre.

BACKGROUND TO THIS STUDY

In April 2006 a transition took place whereby local authorities were to play a

[1] Beyond being 'the Bromley by Bow Children's Centre' the Bromley by Bow Centre continues to run as a community development organisation that provides diverse services.

key role in strategically planning and ensuring funding for the delivery of integrated services from Sure Start children's centres. Local authorities were also to be responsible for the monitoring of the effectiveness of children's centres in achieving outcomes for children under five, their parents and older siblings (DfES 2003). The decision to extend the national reach of children's centres through the agency of local government has pre-empted evaluation of well-established projects that have grown within a community development framework (Coote 2005). Children's centres have commonly been created afresh, or through the joining up of – mostly already existing – services in an area. Having evolved from a mature organisation with its own culture and existing family services, the Bromley by Bow Children's Centre is distinct. It provides an opportunity to assess how this status has shaped the development of mainstream provision of integrated services to children and families. Evaluating it can benefit the Children's Centre in terms of promoting self-reflection and learning, as well as provide insights for other children's centres.

AIMS AND OBJECTIVES

The Bromley by Bow Centre has traditionally been characterised by its creative culture, based on which it has developed unconventional ways of working. Its reputation has been one of a 'bohemian' organisation that has insisted on 'doing things its own way', resisting the managerialist culture of recent years. Becoming a children's centre has brought with it the need to adhere to external requirements. In many ways the Bromley by Bow Centre's established culture is compatible with recent children's centre principles and demands of the wider policy environment, one example being partnership working. However, the Children's Centre has also found itself faced with unfamiliar requirements some of which go against its inherited culture, such as the need to 'professionalise' through adopting modern management practices. Froggett et al. (2005) found the Bromley by Bow Centre to be a complex and highly dynamic organisation with a mature culture that continuously adapted to the requirements of ever-changing social and policy contexts while remaining true to its ethos. This was linked to the organisation's creative mindset and can be seen to have enabled it to continue its track record of successful community work. The present evaluation set out to extend Froggett et al.'s (2005) *Bromley by Bow Centre research and evaluation project: focus on older people*. Through the lens of provision of integrated family services[2], the study examined to what extent the Children's Centre has been able to remain a complex adaptive organisation. This involved a dual focus:

1. Relating the Children's Centre's approach to the traditional approach of the Bromley by Bow Centre (as identified by Froggett et al. 2005)
2. Considering the Children's Centre's work in relation to national guidelines for children's centres

The overall aim was to conduct a qualitative evaluation of the Bromley by Bow Children's Centre's provision of integrated services for children and families, considering its roots in a mature organisation that has traditionally been highly successful at providing integrated services to a disadvantaged community. A key objective was to compare the findings, where appropriate, to findings from evaluations of Sure Start programmes in Tower Hamlets[3].

METHODOLOGY

Methodologically, Froggett et al.'s (2005) previous study had to respond flexibly in

[2] Beyond the co-location of different services, 'integrated services' can refer to their co-ordinated provision to meet the complex needs of families. This resonates with the traditional approach of the Bromley by Bow Centre, which has viewed families as 'more than the sum of their parts' and translated this into holistic packages of care rather than isolated efforts to address individual needs.

[3] Due to a lack of published evaluations of other children's centres at the time of writing, earlier local Sure Start programmes represent the closest comparable initiative.

order to keep up with continuous organisational change in the Bromley by Bow Centre. The present evaluation witnessed ongoing developments in the Children's Centre. These manifested themselves in changes to services and organisational procedures, with implications for the research methodology. The original evaluation design had foreseen considerable methodological flexibility. Periodic review and innovation were necessary to accommodate contextual and organisational changes. In order to grasp the complexity of the Children's Centre diverse methods were used:

- **Documentary analysis**:
  Timetables of activities; internal documents; evaluations of Sure Start programmes in Tower Hamlets[4]
- **Census data**
- **User questionnaires** (Appendix 1):
  9 with mostly female users of agency-based services of different ethnic groups
- **Staff questionnaires** (Appendix 2):
  5 with managerial and front-line full-time and part-time staff
- **Interviews**:
  11 with Children's Centre staff, 2 with Bromley by Bow Centre staff, 1 with staff of local Sure Start programme, 1 with staff of local Sure Start Plus programme
- **Observations**:
  Activities; agency meetings and day-to-day processes, often accompanied by informal conversations, followed by reflections and field notes

The original study design had envisaged a longitudinal perspective on work with individual families, and an evaluation of the outcomes of the Children's Centre's provision of integrated care for users. Attention was to be paid to the families' progress, particularly with regards to family well-being and parenting skills. The perspectives of users, staff and the researchers were to be triangulated. Methods envisaged were biographical narrative interviews with users (see Wengraf 2001, Rosenthal 1993), observations of case review meetings among staff, and observations of home visits. However, these did not materialise, for various reasons including staff concerns around confidentiality and the need to obtain families' consent, as well as the inability to identify suitable families. This meant a limited perspective on outcomes for users, particularly as viewed by users themselves.

FINDINGS

Based on the dual focus of this study, the following is organised according to headings that reflect current principles for children's centres[5] (DfES 2003), as well as key aspects of the Bromley by Bow Centre's traditional approach (see Froggett et al. 2005).

Organic growth, emergent working and flexibility

The Bromley by Bow Centre has traditionally operated a needs-driven in-depth approach to families work. Its provision of holistic care has been characterised by a readiness to experiment with unconventional methods tailored to individuals, rather than to apply standardised interventions (e.g. enabling a mother with depression to go strawberry picking rather than a GP prescribing anti-depressants). While this has required acceptance of the potential for failure, it has resulted in many successes. This flexible approach mirrors the level of organisational and project development. The Centre has been characterised by organic growth and emergent working through the contributions of local people. Froggett et al. (2005) define emergent working as "[involving] the development

[4] At the time of writing, only four evaluation reports were available covering Sure Start programmes in Tower Hamlets; three of these were concerned with the areas of Shadwell, Ocean (a preliminary report) and Weavers & Spitalfields; the fourth focused on family support work across local Sure Start programmes in the entire borough. The reports in question were of varying quality and depth.

[5] These are flexibility at point of delivery; working with parents and children; starting very early; services for everyone; respectful and transparent; community-driven and professionally co-ordinated; outcome–driven.

of ideas and projects without knowing in advance what the outcome will be" (p.105). This is akin to the creative process. It explains the diverse range of often 'exotic' activities in the Centre. The link to the traditionally central role of the arts in the organisation (see below) is apparent. The freedom to work flexibly and evolve through community input help explain the Bromley by Bow Centre's thorough reach of the community and its successful work.

The Children's Centre has not enjoyed the same degree of freedom. Its core venue, a satellite building of the Bromley by Bow Centre called Marner Centre, was purpose-built. Pre-April 2006, Children's Centre service development depended on the ability to negotiate SLAs with the local Sure Start programme.

> *… were not able to innovate and develop services as they would have liked. If they wanted to change any of the services, they had to re-negotiate the SLAs.*[6] (Senior member of staff, 16/02/06)

Since April 2006, restrictions and prescriptions have continued to operate. Views on the degree of flexibility that the Bromley by Bow Children's Centre has since enjoyed differ.

> *[Boom Bang Bees is] a speech and language activity. That's dictated to us, we actually are obliged to work with speech and language ... a very prescribed piece of training, Boom Bang Bees. ... [Staff] are trained exactly how to run it. Very, very prescribed actually ... Absolutely the same [with the other activities]. ... no movement at all.* (Senior member of staff, 21/03/07)

> *... within [external prescriptions] there have been ways in which we have been able to identify particular areas of need. ... And also evolving it slightly I think, in terms of response.* (Senior member of staff, 28/03/07)

The Children's Centre may have enjoyed greater flexibility since April 2006. However, throughout its existence it has been unable to employ unconventional interventions to the same extent as the Bromley by Bow Centre. A senior staff member sums up the process of developing as a children's centre:

> *We had a very flexible approach to the delivery of services before, very creative, lots of innovation. I think there have been some ways we've not been able to do some of the things that we might otherwise have done ...* (Senior member of staff, 28/03/07)

At the same time, the Children's Centre has at least partly maintained a traditional strength of the Bromley by Bow Centre, namely the capacity for creatively realising its own priorities in the face of obstacles. For example, the new regime introduced in April 2006 did not foresee any funding for crèches. Childcare has long been considered a priority in the Bromley by Bow Centre's families work. The Children's Centre has managed to partly replace its crèches with a childminding service, which is being funded by the Bromley by Bow Centre's Learning Project. It has also found new roles for existing childcare staff. Based on this continuing creativity there are perceptions that the Children's Centre distinctly differs from other mainstream services.

> *You set up a service and you're not sure whether it works or not, and you evolve it ... That requires a lot of effort around looking at people's individual roles. So we have staff trained up, our crèche staff, which we kept on, but were turned into Stay and Play workers ... essentially what we're doing is running a mainstream service, but in more of a Bromley by Bow way. So we're not quite like other services, but nevertheless it is mainstream.* (Senior member of staff, 28/003/07)

[6] While all quotes from informants reflect the information provided as faithfully as possible, they lay no claim to being verbatim.

The Children's Centre's provision of services has clearly been bound much more by external factors than originally that of the Bromley by Bow Centre. However, undeterred by obstacles, the Children's Centre continues to succeed at least to a degree in realising its own service priorities. These aspects of its provision of integrated care for families need to be discussed with regards to the arts and creativity as fundamental characteristics of the Bromley by Bow Centre.

Arts and creativity

The Bromley by Bow Centre has evolved around the arts. The arts have shaped its activities. Its 'sprawl' of buildings and the surrounding park are defined by artistic features. The entire setting boasts displays of artworks created by users. This colourful venue with its many open entrances reflects the diversity of services and facilities, and possibilities open to the Centre population. The role of the arts and creativity can be linked to the organisation's successful provision of integrated services for families (see Froggett et al. 2005). The arts have fostered trust in the creative process. This has encouraged lateral thinking and experimenting with unconventional interventions in the flexible provision of care. It has promoted a capacity for negotiating ways around obstacles to realise the Centre's service priorities. It has also enabled long-term work with families and a tolerance of slow and limited progress.

In the Children's Centre the role of the arts appears to be more limited. The purpose-built Marner Centre lacks the 'sprawling' facilities of the Bromley by Bow Centre. With its straight walls and locked entrances it appears uniform, less inspiring and less inviting and lacks a sense of discovery and possibility. Its 'straightforward' style mirrors a focused provision of Children's Centre services that has to fit within a (largely prescribed) framework of mainstream provision. Displays of artwork are far less prominent. The researchers witnessed a discussion on the view held by some staff that too much artwork on the walls looked "tacky". In the Children's Centre activities the medium of verbal language is key, particularly in the form of singing and storytelling, whereas the visual arts are less strongly present. Contrary to the impression of the researchers, respondents to the staff questionnaire stressed the importance of the arts in the Children's Centre. This might indicate a remaining link with the culture of the Bromley by Bow Centre, and a kind of wishful thinking.

External guidance places clear demands on children's centres, yet the use of the arts is not among them. One might ask whether the Children's Centre is preoccupied with meeting the specified requirements, at the expense of focussing on what has always been at the heart of the Bromley by Bow Centre's culture, and the implications of this for the provision of integrated care for families. Importantly, the wish to employ the arts has persisted in the Children's Centre.

> *Probably it would be nice to see [art and creativity] with some more input.* (Senior member of staff, 21/03/07)

Hampered by funding constraints, their use has been realised to an extent.

> *The art and health hasn't taken on a big piece of work with us. The funding [from April 2006] hasn't allowed us to employ an artist to lead on arts. We've employed sessional staff to do art activities to promote health agendas. But we haven't got an artist within our team that has got a remit to develop art and health …* (Senior member of staff, 21/03/07)

Other examples exist of the ongoing use of the arts with the available means. They are indicators of the Children's Centre trying to continue the Bromley by Bow Centre's efforts to pursue its own priorities in the face of obstacles. For example, information sessions on healthy snacks for children used visual aids and were run by a Children's Centre worker rather than an artist.

The persistence of creative capacities in the Children's Centre can be linked to an ability to hold on to key principles of the

Bromley by Bow Centre with its track record of successful families work. In the context of service provision shaped by external requirements, it facilitates the pursuit of the Children's Centre's own service priorities. It can also promote innovation and flexibility in terms of services and targets and, thus, foster provision that is more responsive to the dynamic and specific needs of users. A longer-term perspective is needed to monitor developments regarding the arts and creativity in the Children's Centre, linked to developments in the provision of integrated services for families.

Flexibility at point of delivery

The Sure Start Unit expects children's centres to be "flexible at point of delivery", with services designed to encourage access. Relevant issues are location, transport, co-location of services, care for other children and opening hours. Service provision through a single point of contact is considered important. While the practice guidance (DfES 2006) emphasises outreach, the eventual aim is to attract users in. Encouraging access is fundamental to the provision of integrated care to families.

For much of its history the Bromley by Bow Centre has consisted of one building that has integrated a range of services. The shared use of space among different areas of provision, which have included external agencies, has increased the connection between services, thus facilitating user access. Outreach aimed at gaining trust has played an important role in attracting people in. Operating on a full-time basis, the Centre has served a diverse and sizeable user population. However, people unavailable during standard working hours have remained excluded from most of its activities.

In recent years the Bromley by Bow Centre has opened two nearby satellite centres, Tudor Lodge and the Marner Centre. The former hosts a nursery, one of the Centre's partners, as well as performing arts activities. The latter has been purpose-built for the Children's Centre, yet services for families are run at all three sites. There may not be a single point of contact for *all* services, yet the number of venues is small, they are located close to each other, and are within easy reach in the community. Their spread may be viewed as advantageous in that it ensures a thorough reach into the community and can facilitate initial access. Much crossover occurs within and between the different settings for Children's Centre services. Staff from different fields and agencies move between them and share space as well as expertise within them in the provision of integrated care for families. This fosters well-coordinated provision that can facilitate users' uptake of new services. Agency-based provision is supported by home visits and outreach at local settings (e.g. GP surgeries) as opportunities to create trust and encourage access to in-house activities.

Questionnaire respondents have largely rated the Children's Centre[7] as convenient in terms of location, despite the Marner Centre being situated on a busy road. All considered the opening hours and times of activities convenient. While the Children's Centre has been successful in reaching a substantial part of its target population (see below), the fact that its opening hours are largely limited to standard working hours excludes families not available then.

The Children's Centre's wide range of universal and group-specific services (see Appendix 3) can be considered beneficial for accessibility. Changes to provision, brought about for example by funding issues, can affect accessibility. The loss of the crèches, for instance, threatened a negative effect on service uptake by users dependent on childcare. Staff are confident that the employment of childminders helped avert this. The uptake of childcare observed by the researchers indicates its importance as an enabling factor for service use.

The above suggests that in terms of accessibility, the Children's Centre can be rated favourably. In many respects it reminds of

[7] Commonly understood as synonymous with the Marner Centre among users and staff.

the Bromley by Bow Centre and its success in encouraging user access.

Ethnic diversity

Achieving an ethnic mix, traditionally a strength of the Bromley by Bow Centre, is consistent with practice guidance for children's centres (DfES 2006). The successful provision of integrated family services depends on reaching all parts of the community they target. Bromley by Bow's ethnic diversity (Appendix 4) is reflected in the Bromley by Bow Centre. In achieving this mix, the provision of a wide range of services, and giving everybody the opportunity to become involved, have been key. Its diverse users, volunteers and staff have been tied into local networks. This has enabled the use of informal information channels, which have been central to reaching the community. It has fostered a relationship of trust with the community, which the Centre considers the key to its success in reaching hard-to-reach groups.

Staff estimate that an impressive 75-90% of over 900 eligible local children have been registered on the Children's Centre's books. Involvement in a structured programme such as the Sure Start outreach programme (see below), which stipulated home visits to all local families with children under 5, can increase user numbers. However, responses to the user questionnaire revealed other routes of access to the Children's Centre: referrals by healthcare staff, leaflets, familiarity with the Bromley by Bow Centre and relationships with Bromley by Bow Centre/Children's Centre staff. This suggests that friendships with the community continue to play a role in attracting users. This blurring of boundaries between workers and users goes against the grain of contemporary notions of professional practice, which emphasise strict boundaries. However, it is conducive to attracting people who might otherwise not become involved.

Among users, volunteers and staff of the Children's Centre particularly the Bengali community are strongly represented. While this reflects local demographics, workers have wondered whether it reduces the involvement of other groups. Staff are confident that the Children's Centre reaches all parts of the community. However, some have mentioned a lack of workers from smaller local ethnic communities (e.g. Somali, Chinese) and more recent arrivals (e.g. Eastern European).

Responses to the staff questionnaire present a very positive picture of the Children's Centre reaching diverse ethnic groups, of people mixing in activities, and of friendships across ethnic groups. Challenges were acknowledged, such as the potential for people to occasionally feel left out if there was a dominant group, or if language presented a barrier. However, positive aspects were stressed, such as the availability of interpreters, and the view that missing language skills could be overcome by other ways of communicating and did not need to present an obstacle to participation and enjoyment. Similarly to what was reported by the Bromley by Bow Children's Centre's staff, challenges with respect to reaching all ethnic communities were identified in evaluations of earlier local Sure Start programmes in Tower Hamlets. For example, in a preliminary report on the evaluation of the Sure Start on the Ocean projects (While and Ferew 2003), strong concerns were expressed by Sure Start staff that groups outside the majority ethnic group in the Ocean estate (i.e. the Bengali community) were often not accessing the Sure Start services as they appeared to think that the latter were *only* for the Bengali speaking community. Sure Start staff emphasised the need to reach those groups and identified provision of interpreters to overcome language barriers as essential.

A potential for friction between members of different ethnic groups exists in the Bromley by Bow Children's Centre. The researchers observed a white mother readily blaming a group of Asian mothers for missing sewing equipment with a hostile: "It was them!" A lack of further evidence of this kind suggests that such instances, and their potential to cause serious damage, are limited.

While a few questions remain about the degree to which the Children's Centre re-

flects the ethnic diversity of the local community, its success in achieving an ethnic mix among its population and attracting substantial numbers of diverse users are apparent. Both are prerequisites for the successful provision of universal integrated family services in an area like Bromley by Bow. In achieving them, the role of close relations with the community, rooted in the Bromley by Bow Centre's traditional style of remaining connected to the community, cannot be ignored.

Reaching different parts of families

This is another prerequisite for successful integrated family services. A relevant principle of the Sure Start Unit is "working with parents and children". To an extent, this echoes the Bromley by Bow Centre's multi-generational focus. There, families have traditionally been dealt with as complex units. Diverse and integrated services have been on offer to meet their holistic needs. The focus has included all generations. Services have been age group-specific as well as focused on integrating different generations. Beyond its cross-generational focus on families, the organisation has succeeded in creating an environment with a frequently mentioned 'family feel' that integrates different generations.

Indicators exist of the Children's Centre continuing this work. It runs integrated as well as separate activities for children and members of older generations. The researchers' observations suggest that the Children's Centre is predominantly used by mothers with children. This includes adoptive and foster mothers. Comparatively few men access its services. Fathers used to be concentrated in the all-male Fathers' Forum, which stopped running. They also take up welfare and employment advice, and some have been the initial contact for home visits. All male service users and volunteers that the researchers are aware of are Bengali. It is likely that in bringing about their involvement, personal relationships between staff and the community have been crucial. The Children's Centre's only male worker, as well as a male Bromley by Bow Centre worker who runs the Children's Centre's welfare and employment service, are Bengali. Their efforts to engage men have been incessant, and evidence exists of a good relationship between local Bengali men and these workers. For example, the male Children's Centre worker used to co-ordinate the Fathers' Forum. Prior to each meeting he used to contact the members to remind them of the session.

Beyond parents and children, there are instances of older generations being engaged. Not only did staff talk about their work with different generations of families. The researchers also observed workers dedicating much effort to engaging a non-English speaking grandmother and her granddaughter in a Stay and Play group. At the same time, staff noted the limitations imposed on working with different generations and extended families by the children's centre framework.

> *[In the Bromley by Bow Centre's families work] anyone could come … seeking help ... Now ... we can only work with children under five and their families, no extended families. What happens to teenagers, what happens to grandparents? They do come into our offices … And you do feel bad* ... (Member of staff, 11/05/07)

With regards to the principle of working with parents and children, one challenge that remains is reaching fathers from diverse ethnic groups. A different challenge concerns the fact that children's centre services are to mainly focus on children under five as well as their parents and older siblings. This can, and does, pose a dilemma for staff. The fact that workers experience this dilemma, as well as some indicators that suggest that the workers' concerns are not always limited to children and parents, attest to the roots of the Children's Centre in an organisation that has traditionally focused on extended families and all generations.

Starting very early

According to the Sure Start Unit, children's centre services should start at the

first antenatal visit. They should focus on pregnancy health advice, preparation for parenthood, decisions about work, and advice on childcare and available support services (DfES 2003).

The Bromley by Bow Centre has a history of successful antenatal services. Provision has included on-site antenatal medical care, the Sure Start Plus teenage pregnancy programme, and advice and practical support for new and expectant parents on diverse issues including work, welfare, housing, and childcare. Many of these services could be accessed in the weekly antenatal and baby clinic, a colourful one-stop-shop that integrated additional creative and social activities and used to be very popular with users.

Antenatal provision is continued by the Children's Centre through medical services provided at the Bromley by Bow Centre surgery and various advice services. The antenatal and baby clinic seems to have lost much of its buzz as non-medical activities have been curtailed due to funding issues. Antenatal classes were highlighted as an area of – surprising – successful uptake.

> *We set up some antenatal classes. Everybody kept saying: "Don't do that, no-one ever comes." There was loads! We even had men coming along, with their partners, which is very unusual. ... She actually said there were too many people to run a class. ... what you have to do is build relationships with people, and then they'll start accessing services.* (Senior member of staff, 28/03/07)

Again, personal relationships with users emerge as crucial. In this respect the Children's Centre continues to operate in the spirit of the Bromley by Bow Centre. This is important in the context of antenatal provision because user involvement in antenatal services is often the first – and thus crucial – step towards longer-term engagement in subsequent services.

Universal coverage and responding to need

The Sure Start Unit expects children's centres to provide "services for everyone", stressing that services should respond to varying levels of need in families. The latest practice guidance for children's centres (DfES 2006) emphasises outreach as a means of reaching hard-to-reach groups and increasing access to children's centres. It stipulates home visits to all eligible families that should be time-limited as families should be encouraged to use services at the children's centre. However, it foresees regular reviews of the need for home services and allows for timing to vary according to need. The recognition that families' needs vary is highly relevant to the successful provision of integrated care. It implies that accordingly, varying interventions are required. Home visits can be an important part of services aimed at addressing families' needs. However, the universal coverage suggested by the practice guidance may be seen as at odds with the recognition that families have varying needs.

The Bromley by Bow Centre's traditional approach has been characterised by a strong home visiting component with the idea to eventually 'draw people in'. Rather than universal coverage, workers have provided needs-driven home services. They have engaged in long-term work with the most needy families of an intensity that home services according to the guidelines for children's centres would find impossible to match. While the aim has been for families to progress, failure of a family to do so (quickly) has not led to a withdrawal of support. This approach has resulted in an uneven distribution of resources. However, it has also resulted in many successes.

The Children's Centre's outreach staff were involved in the Bromley by Bow Centre's families work. Pre-April 2006 they were seconded to the local Sure Start programme run by Poplar HARCA where they were obliged to follow the task-driven Sure Start outreach regime of universal visits, tight timeframes and reviews for home services.

We used to be allocated certain families to support for 6 weeks, and then maybe more. After 6 weeks we do a review, and then if necessary we do more support work. (Member of staff, 11/05/07)

Senior staff were critical of the Sure Start regime. Their comments suggest an ongoing strong belief in the traditional Bromley by Bow Centre model.

The Bromley by Bow Children's Centre had had negotiations with Sure Start on the model of outreach work. The Bromley by Bow Centre believes in doing very detailed work with needy families. They also believe in continuity of staff who deal with individual families ... But the Sure Start model was different: different staff delivered different services, which meant less continuity for users, and their outreach work was task-driven, whereas Bromley by Bow Centre's model is family/need-driven. (Senior member of staff, 16/02/06)

Features of the traditional model persist in the Children's Centre. The researchers found anecdotal evidence of managerial staff providing "informal" long-term support to families pre- as well as post-April 2006. Post-April 2006, one staff member and former secondee to the local Sure Start outreach programme explained that she continued to work with a mother she had met in her former Sure Start area, although since April the woman officially belonged to the catchment area of the neighbouring children's centre: "I still work with her, because she is a person in need." Universal home visits have been replaced by more diverse ways of reaching families that are congruent with the Bromley by Bow Centre's traditional approach.

We are 926 [families] in our catchment, and our remit is to register them all … I don't think we're told we have to do cold calling. [Under Sure Start] they'd send a letter out, follow it up with a phone call, and do a home visit … [we've] invested our staff into all the baby clinics in our area, and then we registered parents through the baby clinics. We registered through our activities, through the Learning Programme and the Welfare and Employment Programme, and then we looked at who we hadn't registered, and then we sent letters out, phonecalls, and asked if we could visit them and talk to them about the Children's Centre. And we successfully registered quite a lot of people like that. (Senior member of staff, 21/03/07)

In line with requirements for children's centres, there have been efforts to limit home visits. However, support is not simply cut off.

The limit is about 6 weeks we try to give people really intense support, ... But after 6 weeks the expectation is that they've somehow started to use the services, and we withdraw a bit. … So we have got much clearer procedures of how we deal with people. But that does I think hold them, because that moves them on. I think if we saw a family that really wasn't moving on we wouldn't drop them, we would just find other services to support … (Senior member of staff, 21/03/07)

The Children's Centre has adopted key principles from the Sure Start model (e.g. systematic reviews, time-limited support), which it combines with elements of the Bromley by Bow Centre's traditional approach (reaching families through reaching out into the community, sensitivity to families' different levels of need, possibility of some extra support where necessary). It has maintained a capacity to provide integrated services to families according to their specific needs, although of a somewhat lesser intensity and flexibility than the Bromley by Bow Centre used to provide, while developing an increasingly professional approach that is conscious of the need to use resources efficiently.

User input

In the provision of integrated family services, the input of users plays an important

role for the identification of service priorities. Children's centres are expected to be "respectful and transparent", meaning that services should be customer-driven, and "community-driven and professionally co-ordinated", with parents being consulted on service priorities. The practice guidance (DfES 2006) specifies the need to listen to families and communities and stresses ongoing consultation through informal and formal methods, e.g. through Parents' Forums. It appears to suggest a professional-led approach. Volunteering is highlighted as a way of involving parents.

The Bromley by Bow Centre has encouraged user involvement through people's participation in practical activity rather than formal consultation mechanisms and representative structures [8]. Diverse people have become involved in a wide range of roles, often as volunteers. Many have brought with them a wealth of local knowledge. Their input has determined the organisation and its work. This has resulted in a successful provision of integrated services that have reflected local conditions.

In the Children's Centre the scope for users to shape service provision has narrowed in the context of external prescriptions. Volunteers are involved in activities that have been prescribed rather than emerged through their own input, such as the Parents' Forum. They make contributions and practical decisions within this given framework.

> *... Parents' Forum, who act as volunteers for our events. So our Parents' Forum will support the planning, the budgeting, and then take on responsibilities. In return we give them trainings that they would like, first aid, food hygiene, ...* (Senior member of staff, 21/03/07)

Parents are also engaged in an externally stipulated representative structure, the Partnership Board. In the recruitment of parent representatives and volunteers, the Children's Centre has succeeded in achieving an ethnic mix.

> *We did have a Somali lady on the Board for a while. We have now got a Bengali lady on the Board. We have a white lady on the Board.* (Senior member of staff, 21/03/07)

In addition to formal consultation mechanisms such as the Parents' Forum and the Partnership Board, informal consultation in the form of casual conversations between users, volunteers and staff is ongoing. Decisions on service provision are made by taking into account different sides, allowing for services to be partly community-driven.

> *I have to ... firstly look at the needs of the community. Secondly we discuss in the Parents' Forum, who lead the Parents' Forum, we call them "Parent Leaders". They also help us what their needs are. ... We get some information from the local authority, ... [the Children's Centre Manager] and myself set up the budget ... And mainly we have a Service Level Agreement with the local authority. We need to meet their targets as well.* (Senior member of staff, 25/04/07)

According to responses to the staff questionnaire, the Children's Centre team regularly discuss priorities for service provision. In traditional Bromley by Bow Centre style, relationships with the community are considered important for identifying user wishes. Responses also indicate that service provision follows official guidance on children's needs, a sign of increased orientation at external guidelines that is strikingly at odds with the Bromley by Bow Centre's traditional 'independent' approach.

There is evidence of the voices and contributions of diverse users in the Children's Centre. However, the extent of user influence on service provision is limited by

[8] In recent years additional representative structures with members from all sectors of the organisation have been created in order to sustain communication in the context of organisational growth.

external requirements. While the Children's Centre tries hard to be guided by user priorities, such constraints on service provision and user input do not create the kinds of very open conditions that the Bromley by Bow Centre has shown to be conducive to the provision of integrated services that thoroughly reflect local priorities.

Parental employment and personal development

Parental employment or, more broadly, the professional and personal development of parents, is relevant to family well-being, and thus integrated family services. The latest practice guidance for children's centres (DfES 2006) stresses parental employment. It highlights volunteering as a route into employment, with an emphasis on training and supervision for volunteers.

The Bromley by Bow Centre has traditionally promoted personal and professional development. Volunteering has been an important vehicle. Enabling people to move into employment has always been a strong ambition, alongside personal development. The approach has been to nurture individuals into increasingly challenging roles while making generous allowances for their circumstances. Many success stories exist of people who have embarked on unexpected careers, and people who, while not moving into paid work, have developed in ways that have had hugely beneficial impacts on their lives.

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In the Children's Centre volunteering represents a way of fostering parental development. Interview data suggest a slight move away from the Bromley by Bow Centre's traditionally gentle approach:

> *Unless supported well, volunteers can be a bit of a nuisance. They can run late, leave early, turn up as and when they please, etc. This is now picked up on, volunteers are reminded of their responsibilities, that volunteering is a commitment, and that they have to be reliable. We have tightened up a bit on these issues.* (Senior member of staff, 19/01/2006)

Compared to the Bromley by Bow Centre's former informal approach, volunteering in the Children's Centre has become increasingly structured. It follows professional procedures and is backed by support structures such as formal training. This is portrayed positively by staff.

> *We put them through the volunteering system via HR, … they will get their CRB check …, they will be offered training …, but they'll be also shown what the Centre has to offer and where do they want to volunteer. So it's slowed everything up, but it's made everything more professional, which is the right thing actually. … We've got a couple of parents who have been keen volunteers. … They've maybe gone on to do childcare training, and then they've come back into the system … on work placements. And then they go off and usually get jobs. So that is volunteering. It's not quite as we used to do it.* (Senior member of staff, 21/03/07)

Data from the Children's Centre's earlier stages suggest a focus not only on employment but also on other developmental goals. Documentary evidence was collected from a Sure Start-funded project run by the Bromley by Bow Centre's Learning Team for the Children's Centre. In a progress report in November 2004, the project is called 'Access to Learning', in line with the Bromley by Bow Centre's emphasis on the importance of learning in itself and as a tool for social inclusion. In a later progress report (July 2005) the project has been re-named 'Access to Employment'. This is in line with the Sure Start agenda. The question arises whether this change in language signifies a change in belief and practice. A later conversation with a project worker suggests otherwise: she uses the old name 'Access to Learning' and tells the story of a father who has taken up an English class to illustrate the success of the project, rather than telling about a parent who has progressed into paid work.

The Children's Centre continues the Bromley by Bow Centre's focus on fostering progression into employment, its ap-

proach being more structured. This focus sits comfortably with the requirements of children's centres. Personal development, also traditionally a goal of the Bromley by Bow Centre, does not seem to have been assigned the same importance in the guidance for children's centres. While there is no evidence to suggest that it has fallen by the wayside in the Children's Centre, the need to maintain a focus on it as an important part of integrated care for families cannot be emphasised enough.

Similarly to what was observed in the Bromley by Bow Children's Centre, in evaluations of earlier Sure Start programmes in Tower Hamlets (Cordis Bright 2005, White and Ferew 2003), parental employment emerges as an important long-term goal for those programmes. Volunteering is also highlighted as an important means of facilitating progression into employment for parents.

Joint working

Children's centres are to be "professionally co-ordinated", with professionals "sharing expertise". The practice guidance (DfES 2006) emphasises improving multi-agency working, including information sharing, co-location of professionals at children's centres, and joint training for staff from different agencies. The relevance of joint working for the provision of integrated care to families is self-explanatory.

Partnership working has been one of the key principles of the Bromley by Bow Centre. There has been a culture of collaboration and sharing information about users within and between the diverse voluntary and statutory services co-located there. While this has raised issues around trust and confidentiality, it has been highly successful at supporting people, and at avoiding an issue that has rocked statutory services in recent years: people 'slipping through the net' due to a lack of communication between agencies. As for external partnerships, the Centre has a record of collaboration with a variety of agencies. With a small number of local agencies, particularly statutory ones, relations have been difficult. Different priorities and approaches have stood in the way of joint working.

Responses to the staff questionnaire suggest a strong culture of joint working with internal and external partners through referrals and meetings in the Children's Centre. Senior staff invest much time in partnership structures.

> *We meet with the health visitors, GPs for a shared health meeting ... It's an opportunity to talk about individual cases ... [We] do a lot of informal cross-over, as we do with [former Public Health Co-ordinator] ... I have to attend Children's Centre Management Meetings. [My colleague] attends Family Support Management Meetings ... There is a Childminding Steering Group, which I attend ... I also manage in part Teenage Parent programmes, which is borough-wide, so I have to attend those meetings ....*
> (Senior member of staff, 21/03/07)

There is widespread consensus among staff about the strength of collaboration with other parts of the Bromley by Bow Centre. Indicators of this are e.g. jointly run activities, collaboration on funding arrangements (e.g. childminders), and meetings. At the same time, the researchers observed tentative signs of a rift. In a Children's Centre team meeting at Marner, a staff member bemoaned a shortage of activities for children under 5 at the Bromley by Bow Centre and perceived staff there as being detached from Marner and ignorant of the activities there. Such criticism seems surprising, given the traditional closeness of Children's Centre staff to the Bromley by Bow Centre. A senior staff member who acts as a link between both venues suggested remedial action in the form of an open day at Marner.

Concern seems to surround the issue of confidentiality. In a wider climate that emphasises confidentiality, the latest practice guidance (DfES 2006) stresses the need for information sharing protocols to address issues of confidentiality between collaborating agencies. In a conversation with a researcher, a member of staff men-

tioned a training course run by the local authority that had stressed that information on users was strictly confidential and could only be shared with their explicit consent. Having worked in the Bromley by Bow Centre, she was used to internal information sharing based on trust. The new rules made her feel uncertain about information sharing even within the Children's Centre team. While the importance of protecting service users is undisputed, such rules are likely to undermine trust and have an adverse effect on partnership working. Concerns about confidentiality also affected the research relationship. It stood in the way of sharing information about users with the researchers, despite the strict confidentiality requirements of the study, and protection of user identity greatly restricted the researchers' ability to obtain user perspectives on (aspects of) the Children's Centre.

Collaboration with external partners is pursued strongly, e.g. through community work as well as joint training and representation of partners on the Children's Centre Partnership Board. Relations with some statutory partners continue to be challenging.

> *[Social Services] … are often not very co-operative. We're hoping for closer relations and are thinking about having a social worker on the Board.* (Senior member of staff, 18/01/06)

Other statutory partners are perceived to have developed trust in the Children's Centre. Considering their past suspicion of the Bromley by Bow Centre, this is surprising.

> Re. auditing by the local authority: *The financial monitoring will be the bit that they're really interested in. In terms of the outcome monitoring we send in our reports … They read them, I think, and we've had one or two meetings. We had more meetings in the early stages, because the money is from the London Borough of Tower Hamlets. But they've been a very light touch more recently … I think you have to produce the information for people to have confidence in you … probably we were just a bit of an unknown quantity.* (Senior member of staff, 28/03/07)

Generally positive views have been expressed on external partnership working. Its development has been related to developments of the Children's Centre.

> *[Partnership working has] developed and developed. … We're probably much more integrated into a wider programme than we used to be as the Bromley by Bow Families Project … it's been quite stressful for us, but we've all upped our ability in terms of how we operate on a professional level. Although I think there was no lack of professionalism it was in-house. And now we have to take it out into a broader world … Very, very different culture of operating. Which I think we're all managing to do.* (Senior member of staff, 21/03/07)

The Children's Centre largely conveys a picture of successful partnership working conducive to the provision of integrated family services. It appears to have developed an even stronger culture of working with external partners than the Bromley by Bow Centre. Pressures on children's centres in this respect might have played a role. Internal collaboration, traditionally strong in the Bromley by Bow Centre, continues to be emphasised. However, tentative signs of a rift between Marner and the Bromley by Bow Centre exist that have the potential to lead to greater divergence. Also, alien external requirements concerning confidentiality have introduced uncertainty. Designed to protect users, these have the potential erode a successful culture of integrated working, to the detriment of users. Addressing them in an open debate can only be helpful. As for the other difficulties noted around both internal and external partnership working, the wish to address them, and thus prevent damage to the provision of integrated services, has been apparent.

Similarly to what was observed in the Bromley by Bow Children's Centre, inter-

agency collaboration and joint working emerge as key staff priorities in evaluation reports covering earlier Sure Start programmes in Tower Hamlets. For example, the evaluation of family support services as delivered by local Sure Start programmes across Tower Hamlets (Cordis Bright 2005) suggests that effective collaboration between Sure Start family support staff and other service providers was viewed as essential in principle but in practice it was much more difficult to achieve. The effectiveness of joint working was found to vary significantly across programmes and partners, whereas challenges between Sure Start staff and Social Services were particularly noted.

Indicators of success

An important aspect of the provision of integrated family services are ways of assessing and presenting the success of the work undertaken. Children's centres are expected to be 'outcome-driven'. The latest practice guidance (DfES 2006) reflects the wider contemporary culture by emphasising monitoring, record keeping and managing performance. It introduces a Performance Management Framework that incorporates outcomes (Appendix 5) and specifies indicators for the assessment of performance. For the evaluation of children's centres, there has been an emphasis on quantitative impact measurements and outcomes, popular contemporary tools. At the same time, qualitative evidence and process have been given attention.

The Bromley by Bow Centre has traditionally stressed the importance of process as well as outcomes in its work with users. It has used stories of users' progression as a rich and meaningful way of demonstrating success. Its long-standing resistance to reductive 'ticks in boxes' has become increasingly difficult to sustain in a wider managerialist context that emphasises quantitative monitoring. Funding requirements have necessitated an increasing degree of compliance, which has been accompanied by fears about compromising successful organisational traditions.

The Children's Centre has developed a monitoring culture. A dedicated Monitoring Officer maintains a Sure Start database (E-Start) of user details and data on attendance at activities (Appendix 6), which provides evidence of outcomes. The Children's Centre is also able to present outcomes based on quantitative data held by its partners. For example, the Learning Team keeps records of qualifications gained by parents and progression into employment.

While the researchers observed no obvious resentment to collecting data, some criticism was voiced.

> *It was very nice before – you didn't have to worry about paperwork, but you could have ten people. Now you can serve only five people, maybe less, but ... do your paperwork. I do understand. Recently a family was murdered ... the Council needed the information. We kept the information. Like which groups they attended, when they attended, who were there, when they moved in, when they were registered, the child's name, the parents' name, where they're from ... So that's one good thing ... But we serve less people and do more paperwork.* (Member of staff, 11/05/07)

At the same time, the benefits of the new monitoring regime were highlighted.

> *... the team is now more highly trained, more effective, ... I think that our monitoring is now second nature to us ... it doesn't interfere with how we interact with people. I don't think it stops people enjoying using the service. ... I think Sure Start gradually moved us towards [monitoring]. So although that was a difficult period for us I think for the staff in terms of working with something that was outside of the Bromley by Bow Centre, taking on different expectations, being put through training, I think we've got a much stronger team as a result of all that.* (Senior member of staff, 21/03/07)

> *[Monitoring] just proved we're very successful ... I think people were*

afraid that it would undermine the basis on which we [operate]…, which is that individual personalised touch … I think … now it's part of the job. (Senior member of staff, 28/03/07)

Indicators exist that suggest a simultaneous persistence of 'old' ways of presenting success. In traditional Bromley by Bow Centre style, a project worker from the aforementioned 'Access to Employment' project uses stories to illustrate the project's success.

An outreach worker worked with a Vietnamese family where the father was blind and the mother was of very low status in Vietnam. They had terrible difficulties settling their child into the crèche. So the outreach worker got the crèche worker to visit the family in their home, where the crèche worker played with the child and built up a relationship. Now, the child is thriving in the nursery, and the father is doing an English class. (Member of staff, 14/03/06)

Responses to the staff questionnaire mentioned different ways of measuring success. In addition to monitoring attendance, staff reported on the use of standard measurement tools: screening tools for speech and language development, and monitoring of children's development by health visitors through a so-called 'MOT' that focuses on physical and creative areas. Workers' experience was stressed as important for picking up on any developmental problems. Staff also highlighted the traditional Bromley by Bow Centre approach of building relationships with families and talking to them, observing children and families, and judging progress by children's happiness, people's social skills and interactions, and developments in relationships between parents and children. User feedback about the Children's Centre is collected through evaluation forms (Appendix 7) and informal conversations.

In a context of constant funding pressures and demands for 'hard evidence', the adoption of a quantitative approach to monitoring and presenting success is hardly surprising. The question arises whether this new regime had an adverse effect on the Children's Centre's ability to provide in-depth integrated care to families. Beyond paperwork deflecting attention from families, might the superficial nature of quantitative data be replicated in a superficial approach to families? Might the complexities of families and attention to lengthy processes of development be neglected in favour of a focus on outcomes? The continuing use of traditional indicators of success, namely stories of progression, and the capacity of staff to observe families from multiple angles suggests that a complex perspective on families is being maintained. This can only be seen as beneficial for the provision of integrated family services.

Staff training and supervision

The provision of integrated care to families relies on workers who are well-equipped for the task. In the Bromley by Bow Centre, staff development has traditionally relied heavily on informal practices. Alongside some formal education and training, informal training, 'learning by doing', and ad-hoc conversations with line managers have played an important role. In the recent transition to modern management practices, formal training and supervision have been emphasised more strongly.

The Children's Centre has also introduced formal arrangements, which is congruent with the push for professionalisation of children's centres apparent in practice guidance documents (DfES 2006). Structured supervisions have followed on from the informal Bromley by Bow Centre-style arrangements that had initially continued. Staff expressed positive views about them. Interpersonal trust, traditionally a strength of the Bromley by Bow Centre, seems key.

[The supervisions are] quite good actually, they talk about … your personal things as well as personal development and Centre as a whole, and the Children's Centre's … if you would like to develop your skills, or training, education, … If you're hav-

ing any problem … (Member of staff, 11/05/07)

While senior managers have 'carried' a lot of the issues raised by the staff they supervise, by the time of data collection they themselves had not been able to benefit from the new support structures.

No, we didn't have [supervisions] yet, but we are going to be planning, maybe [senior colleague] can do my mine and I can do hers. (Senior member of staff, 25/04/07)

In terms of training, the Children's Centre, with its exceptional status of not being run by the local authority, benefits from the programmes offered by the latter. This was considered highly beneficial.

… one thing that's very good in the Children's Centre from the local authority we have so much training ... It is really hard for the people … but they get more knowledge … it is really luxurious for us. We can't fund all the training … we all use it … (Senior member of staff, 25/04/07)

Similarly to what was observed in the Bromley by Bow Children's Centre, evaluation reports covering earlier Sure Start programmes in Tower Hamlets indicate that increased importance was attached to systematic training and professional development by Sure Start staff (Cordis Bright 2005).

The more formal training and supervision procedures contribute to a picture of increasing professionalisation at the Bromley by Bow Children's Centre. In the Bromley by Bow Centre's families work community knowledge and open communication between workers and managers were key. While successful, this approach was risky, given the sensitive work with high-risk families, and problems such as staff burnout occurred. The Children's Centre as a mainstream service needs to fit into a modern professional world. Formal training and supervision offer benefits such as increasing staff confidence, helping to avoid burnout, promoting personal and professional development, and minimising risks in the sensitive work with users. The long-term impact of this on the provision of integrated services to families is yet to be established.

Outcomes for users

Regarding the Bromley by Bow Centre's families work, positive outcomes for users could be identified (see Froggett et al. 2005). With regards to the Children's Centre, establishing outcomes was problematic. Staff are confident about positive outcomes, as indicated by several quotes above. However, in-depth perspectives of users reflecting their trajectories of engagement with the Children's Centre are lacking (see Methodology). Data from users collected through questionnaires were of limited depth. Respondents named as important benefits for their children the promotion of social interaction, confidence, learning and speech development. The opportunities the Children's Centre offers for children to 'get out', explore different things in a new social environment, play and engage in diverse activities were regarded as beneficial. For mothers, the social aspect of meeting others was appreciated. Mothers described their general feeling about the Children's Centre and its staff in a variety of positive terms including "welcoming", "excellent", "helpful", "friendly" and "approachable". Despite their limitations, the views collected through user questionnaires are encouraging. They suggest positive outcomes for users of the Children's Centre's provision of integrated family services.

CONCLUSION

The Bromley by Bow Children's Centre is rooted in a mature organisation with a successful record of providing integrated family services. At the same time, it is required to adhere to new external demands many of which go against the grain of its inherited ethos. In many ways it has adapted to external requirements. Staff largely portrayed the resulting changes positively.

I think we're in a much better position now than we were before the Children's Centre. I think our staff are better trained, more co-ordinated, we have clearer targets that we're setting ourselves. We have to operate in a tighter framework, which probably makes us clearer about what we are doing with people, how we are carrying them. I think we're probably less likely to burn out, because people are being moved, and if they're not being moved then there's a sort of a structure to deal with why that is. We've got a budget that is secure, although it's been [cut], but at least there's security there. I think that the wider partners that we work with also have been a challenge, but I think they have also inspired us to improve what we're trying to offer to people. We've always seen employment as important, but now we see it as a target, so we're a bit more focused about trying to see how people can be moved into employment. I think it's only improved what we do. But I have to say it's probably because it sits on the back of an awful lot of experience. And we have a very good team, absolutely excellent team. (Senior member of staff, 21/03/07)

Such positive views were expressed on new practices that do not sit comfortably with the Bromley by Bow Centre's traditional approach, including quantitative monitoring and changes as regards the work with families. This is surprising, considering the Bromley by Bow Centre's past resistance to external demands that did not fit its ethos. As a mainstream provider the Children's Centre had no choice but to adopt the new practices. Praising their benefits might be a way of coping with anxieties that they might bring about the loss of fundamental organisational characteristics. Importantly, the adoption of new practices has been restrictive, and there are clear indications that at least in some ways it has been detrimental to families work, for example in terms of paperwork deflecting from support work.

At the same time, the Children's Centre has managed to maintain elements of the 'old' approach, such as prolonged in-depth work with users, that have contributed to the success of the Bromley by Bow Centre's traditional families work and enrich the Children's Centre's provision of integrated care. The ability to adapt to new policy requirements while maintaining elements of the traditional Bromley by Bow Centre ethos suggests that the Children's Centre operates to a great extent as a complex adaptive organisation. The Children's Centre is thus not just another mainstream service that follows the managerialist culture of the day. Currently, it is staffed by workers many of whom used to be involved in the Bromley by Bow Centre's families work. The question arises whether the organisational heritage will be diluted further by the future arrival of new staff who lack the connection to the traditional organisational ethos.

This study suggests that in many ways the Children's Centre meets national guidelines, as well as wider prerequisites for the successful provision of integrated care to families. This seems to be particularly strongly the case in terms of the reach of its target population, the reach of a diverse population, and partnership working. Those areas represent traditional strengths of the Bromley by Bow Centre. They constitute areas where the Children's Centre has benefited from its organisational history, and areas where other children's centres might be able to learn from the Bromley by Bow Children's Centre. The limited user perspectives in this study prevent definite statements about the actual success of addressing the complex needs of families in holistic ways, something the Bromley by Bow Centre used to excel at. Naturally, this is where the focus of the Children's Centre must lie. Further research that is able to take into account in-depth user perspectives to comment on outcomes for families is required.

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APPENDIX 1 – SERVICE USER QUESTIONNAIRE

I INVOLVEMENT WITH THE CHILDREN'S CENTRE

1. Who in your family uses the Children's Centre?
   ☐ Myself
   ☐ My child(ren) – how many? ____
   ☐ Other – who? _____

2. Which activities do you (& your children) choose to attend in the Children's Centre?

3. Do you (& your children) have home visits through the Children's Centre? If yes, say briefly what you do there.

4. How long ago did you (& your children) start using the Children's Centre?

   How often did you & your children use it then?

   How often do you & your children use it now?

5. How did you (& your children) find out about the Children's Centre?

II MEETING OTHERS

6. Have you (& your children) made friends through the Children's Centre?

III HOW GOOD IS IT?

7. Has using the Children's Centre helped you (& your children)? If yes, how?

8. What do you (& your children) like best about the Children's Centre? Why?

9. What would you (& your children) like to change about the Children's Centre, if anything?

10. Is there anything that you (& your children) would like that the Children's Centre does not provide?

11. Give me 1 word that describes best how you feel about the Children's Centre workers? [Example?]

IV ACCESSIBILITY

12. Are the opening hours of the Children's Centre convenient? If no, why?

13. Is the time of the activities/home visits convenient? If no, why?

14. Is the place convenient? If no, why?

V USER INVOLVEMENT

15. Have you helped with planning and organising anything in the Children's Centre?

16. Are you a volunteer in the Children's Centre? If yes, what is your role?

VI PERSONAL INFORMATION

This information would help us, but you are free not to answer (a) question(s)!

Are you a) female b) male?	Your child(ren) using the Children's Centre are __ boy(s) __ girl(s)
What is your ethnic background?	What is your child(ren)'s ethnic background(s)?
Your religion?	Your child(ren)'s religion?
Your first language?	Your child(ren)'s first language?
How old are you?	How old is/are your child(ren) using the Children's Centre?
Do you have a disability or any health problem(s)?	Does your child(ren) have a disability or any health problem(s)?

THANK YOU!

Activity, date, time, place:

APPENDIX 2 – STAFF QUESTIONNAIRE

I MONITORING

1. How do you measure 'success' (e.g. a child's development; a family's progress)?
2. Do you use any standard measurement tools (e.g. SS language development tools)?
3. How you get feedback from the users regarding the Children's Centre work (both positive and less positive aspects)?
4. How are initial assessments and follow-ups of families and children done?
5. How do people come to the Children's Centre (e.g. referrals)?

II APPROACH

6. Describe your approach in the Children's Centre work

III CREATIVITY

7. What is the role of the arts in the Children's Centre?

IV DIVERSITY

8. What are the successes and challenges of trying to reach diverse groups of users?

V SUSTAINABILITY

9. Has the Children's Centre been affected by the funding difficulties and resulting changes in the Bromley by Bow Centre?
10. How is it decided what Children's Centre activities are funded with the available money? Who decides?
11. Is it different working in the Bromley by Bow Centre and Marner Centre? (How?)

VI INTEGRATED WORKING

12. How do the different services work together in the Children's Centre?

VII ADAPTING TO CHANGE

13. What has transition to becoming a Children's Centre been like (easy; difficulties)?

THANK YOU!

Respondent's role, activity, date, time, place:

APPENDIX 3 – BROMLEY BY BOW CHILDREN'S CENTRE SERVICES (SEPTEMBER 2007)

HEALTH SUPPORT
- Baby Clinic (incl. antenatal care, breastfeeding & child nutrition advice, dental hygiene advice)
- Child psychologist
- Child psychotherapist
- Referrals to external NHS Speech and Language therapist
- Boom Bang Bees (speech and language development)
- NHS midwifery and health visiting team at Bromley by Bow Centre
- Public Health Co-ordinator (shared with other children's centres)
- Homeopath
- Exercise for parents
- Swimming for parents

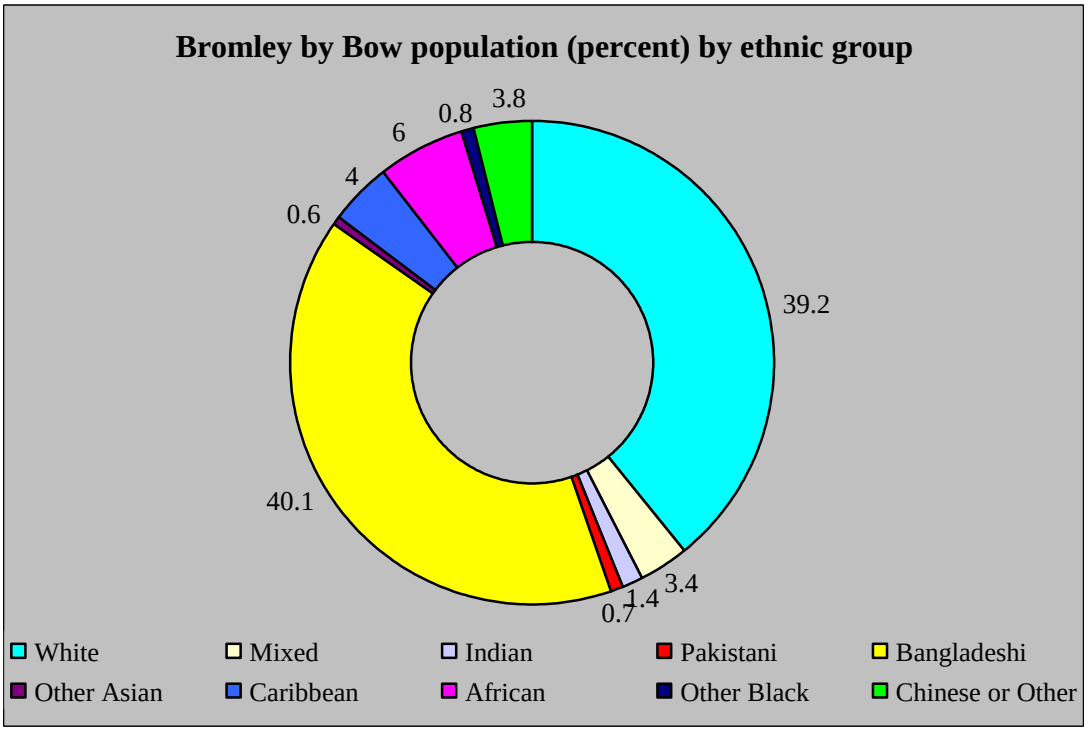
FAMILY SUPPORT
- Employment and benefits advice
- Parents' Forum (for women)
- Outreach
- Home visiting
- Stay and Play
- Sure Start Plus (teenage parent advice)

LEARNING
- ESOL
- NVQ Level 2 in Care
- NVQ Levels 2 and 3 in Childcare
- HNC/HND in Public Arts Management
- Computing
- Sewing group
- Arabic
- Community library
- Toy library

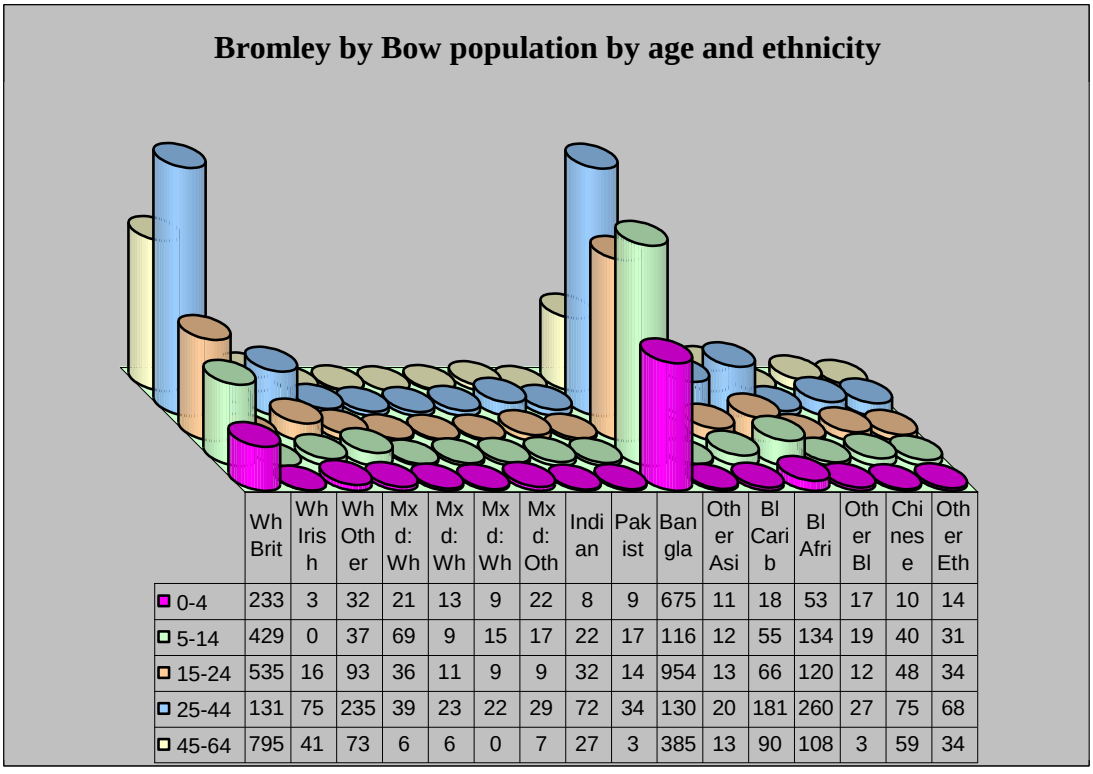
CHILDCARE
- Nursery
- Childminder service

ONE-OFF EVENTS
- Christmas parties, Eid parties, International Women's Day
- Summer programme (day trips for families, activities in the park)
- Training courses (food hygiene, first aid, first aid for children)

APPENDIX 4 – BROMLEY BY BOW POPULATION



Source: Based on data from 2001 Census, Statistics about Bromley by Bow.



	Wh Brit	Wh Irish	Wh Other	Mxd: Wh	Mxd: Wh	Mxd: Wh	Mxd: Oth	Indian	Pakist	Bangla	Other Asi	Bl Carib	Bl Afri	Other Bl	Chinese	Other Eth
0-4	233	3	32	21	13	9	22	8	9	675	11	18	53	17	10	14
5-14	429	0	37	69	9	15	17	22	17	116	12	55	134	19	40	31
15-24	535	16	93	36	11	9	9	32	14	954	13	66	120	12	48	34
25-44	131	75	235	39	23	22	29	72	34	130	20	181	260	27	75	68
45-64	795	41	73	6	6	0	7	27	3	385	13	90	108	3	59	34

Source: Based on data from 2001 Census, Standard Tables for Wards in England and Wales (Table S101).

APPENDIX 5 – PERFORMANCE MANAGEMENT FRAMEWORK FOR SURE START CHILDREN'S CENTRES

Outcomes	Performance Indicators
Learning and development of children	Personal, social and emotional development indicators; communication, language and literacy indicators
Teenage mothers	% of mothers aged 16-19 in education, employment or training
Access for the most excluded groups	% of members of the following groups that are in contact with Children's Centres: Teenage mothers and pregnant teenagers; lone parents; children in workless households; children in BME groups; disabled children and children of disabled parents; other vulnerable groups
Parental satisfaction with services	% of parents satisfied with services

Source: DfES (2006).

APPENDIX 6 – BROMLEY BY BOW CHILDREN'S CENTRE REGISTRATION AND MONITORING FORMS

SureStart
Children's Centres
Tower Hamlets

Family Registration Form – Confidential

NHS Service/ Bromley by Bow Children's Centre, St Leonards Street, London E3 3BT
Staff Name
……

ID No's

NHS Number

[Insert label from red book here]

PLEASE COMPLETE IN BLOCK CAPITALS

Section A – Adult details

Mother / Carer Name	Ethnicity	D.O.B	Expected Delivery Date
Father / Carer Name	Ethnicity	D.O.B	
Relationship to child(ren)	Language(s) Spoken		Interpretation Need-ed
Address			Postcode
Telephone	Mobile		
GP Name / Address	Health Visitor Name / Address		

Section B – Child details (children under 5 only)

First Name	Last Name	D.O.B	Gender M/F	Ethnicity
		/ /		
		/ /		
		/ /		
		/ /		

Section C- Consent under Data Protection Act

I understand that my personal details will remain confidential to the Children's Centre and will be held by the Local Authority, the National Health Service and named partner agencies. Such information will not be passed onto anyone else (except as required by operation of law, statute or court order), unless I give my consent. I understand that I can ask to see information held about me at anytime.

I agree to this information being stored on a computer to be used to:

- Keep me informed about Children's Centre activities
- Monitor and evaluate the Children's Centre programme

Parent/Carer Signature…….. Date _____/____/_____

I am already registered with Sure Start (Tower Hamlets Primary Care Trust). I agree for my information to be transferred to Children's Centre (London Borough of Tower Hamlets).

Parent/Carer Signature…….. **Date**
_____/____/_____

Children's Centres are committed to safeguarding children and strictly adhere to policies on safeguarding children. Children's Centre staff and volunteers will at all times take action where necessary to ensure children are kept safe and free from harm.

Bromley by Bow Children's Centre

SureStart

Activity Monitoring Form

PLEASE USE CAPITAL LETTERS

Provider Name:_____

Project Worker:_____

Location:_____

TOWER HAMLETS

Activity / Event: _____

Date	**ID No.** (if known)	**Parent / Carer or Childminders Name** Please indicate if Childminder is Registered (R) or Pre-Registered (P)	**Child/ren's Name**	**DOB & Gender** (of child)	**Address**	**Full Post Code**

Date	**ID No.** (if known)	**Parent / Carer or Childminders Name** Please indicate if Childminder is Registered (R) or Pre-Registered (P)	**Child/ren's Name**	**DOB & Gender** (for child)	**Address**	**Full Post Code**

Please send completed forms to Akash Sottar, email: akash@bbbc.org.uk, address: Bromley by bow Children's Centre, St Leonards St, London E3 3BT, fax 0208 880 6608

APPENDIX 7 – QUESTIONNAIRE FOR PARENTS

Parents Comments
On The Bromley by Bow Children's Centre

1) How many groups do you attend?

2) Do you enjoy the groups?

3) Do you find the staff Friendly and Helpful?

4) Have you used any of the specialist services?
   e.g.
   a) Child & family Counsellor
   b) Adult Psychology
   c) Boom Bang Bees

5) Do you use our Learning Programme?
   e.g. ESOL, computing

6) Do you use our Employment and Welfare & Benefits services?

7) Would you like us to provide you with more information about the Children's Centre? If Yes, Please give us your address.

Name

Address

8) Do you have any other comments?