



# Service Design of Early Years Interventions: An Operational Guide

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**Created in Partnership by  
Born in Bradford and Better Start Bradford.**

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**To be used by organisations in the design, planning and  
implementation of early years interventions.**

You are welcome to use this guide and adapt it to suit your needs; all we ask is that you acknowledge us in your work: An Operational Guide through the Service Design of Early Years Interventions. 2017: Born in Bradford & Better Start Bradford.

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# Introduction

The Better Start Bradford Innovation Hub (part of Born in Bradford) and Better Start Bradford have been working together to design, implement, monitor and evaluate numerous early years interventions. We have experienced many challenges in implementing so many studies at one time, whilst working across organisational boundaries. We have realised that it is important to think about monitoring and evaluation very early and throughout the service design process. As a result, we have developed this pragmatic operational guide to the service design process, with numerous tools to aid successful delivery, monitoring and evaluation of interventions. This guide is designed for use by any organisation that is designing (or redesigning), planning, and implementing a new intervention or service. The focus here is on early years, but we believe many of the processes and tools are adaptable to other topic areas.

Service design describes the process in which all aspects of an intended intervention or service are specified, from referral and recruitment through to data capture, monitoring and evaluation. It helps to ensure that all parties involved in the intervention or service are clear on the rationale behind it, how it will work, what resources are required, what the intended outcomes are and how the intervention or service should be monitored or evaluated.

We recognise that many organisations have their own service design process to follow. This guide has been developed so that you can pick and choose the elements that are most relevant to you. The operational guide gives you a structure to take an intervention or service through the service design process and links to the service design manual. It is recommended that the phases are completed sequentially, starting with the preparation actions. The guide also contains a series of templates to help you to set up an appropriate system to monitor and evaluate your service including:

- Advice on sources of information that may help you to select the appropriate intervention or service for your needs
- A structured way to specify your intervention or service clearly before commissioning or implementation
- Templates to support the service design process
- Suggestions about the types of data you may wish to collect in order to be able to monitor and evaluate the intervention
- Some Frequently Asked Questions and answers

# How to select an intervention

## Identifying the problem

Some questions to ask:

- Need:
  - What is the issue of concern/problem?
  - Who has identified this problem? Is it supported by data? Is the need recognised by members of the community, professionals, or others?
- Gap:
  - What other services/programmes are being provided in the area?
  - Would it be better to commission an additional intervention or scale-up currently existing services/programmes?

## Identifying a solution

Some questions to ask:

- Should the intervention aim to prevent the problem or reduce its effects?
- What level should the intervention operate at, e.g.
  - Individual (e.g. one-on-one support)
  - Group (e.g. parenting class)
  - Community (e.g. community cooking sessions)
  - Social or physical environment (e.g. green space improvement, poverty reduction)
- Should the intervention be universally offered to everyone, or targeted at a particular group with greater need (or a combination of the two)?

## Sources of information on evidence-based interventions

### The Early Intervention Foundation (EIF)

The EIF reviews and rates the evidence base for early life intervention programmes that aim to improve child outcomes. The EIF provides two ratings: a) an assessment of the strength of the evidence that programmes have been shown to benefit child outcomes; b) an assessment of the costs of early life interventions and a ranking of programmes based on how resource intensive programmes are per child.

<http://www.eif.org.uk/>

### Cochrane Library

The Cochrane Library is a collection of high-quality, independent reviews of evidence to inform decision making in health policy and health care. The Cochrane reviews are systematic reviews of the literature – this means that they use an agreed, robust process to identify, appraise, and summarise all the evidence available on a topic. Conclusions are therefore reliable summaries of all the evidence available. The library includes reviews on policy and service approaches to tackle health problems.

<http://www.cochranelibrary.com/>

### Campbell Collaboration Library

The Campbell Collaboration promotes the production and use of systematic reviews and other reviews of the evidence to inform policy and practice decisions. It includes reviews of the evidence base in the domains of crime/justice, disability, education, international development, knowledge translation, nutrition, and social welfare.

<https://www.campbellcollaboration.org/library.html>

### Evidence 4 Impact (E4I)

E4I reviews evidence for educational programmes. It provides a simple evidence rating system and short summaries of evidence to help people to make an informed judgement on a programme's effectiveness. The E4I database includes information on the effectiveness and costs of different educational programmes, with links for further support. <http://www.evidence4impact.org.uk/>

### The National Institute for Health and Care Excellence (NICE)

NICE provides information and guidance for commissioners, practitioners, and managers in health and social care. It produces evidence based guidance and advice that can be used by groups involved in delivering care or promoting wellbeing, including the NHS, local authorities, employers, and voluntary groups.

<https://www.nice.org.uk/>

# An operational guide through service design

## Preparation

Actions	✓	Notes
Establish service design group (including the service deliverer, experts in the field, an academic/research partner, the intervention management group and community representative(s))	<input type="checkbox"/>	
Establish a timeline for service design, implementation, and delivery date.	<input type="checkbox"/>	
Outline financial budget	<input type="checkbox"/>	
Clarify whether the service is already in existence and/or has a manual / is to be newly designed and agree process (see flowchart)	<input type="checkbox"/>	
Review local need for service*	<input type="checkbox"/>	
Consider value of consultation with parents and referrers*	<input type="checkbox"/>	
Send <a href="#">Service Design Questionnaire</a> to service provider or outline intervention proposal if no provider	<input type="checkbox"/>	
Identify expected outcomes	<input type="checkbox"/>	
Review evidence base for the service* (Service Design Manual section 3)	<input type="checkbox"/>	
Identify Early Intervention Foundation (EIF) rating and consider evaluation options*	<input type="checkbox"/>	
Identify logic model (if in existence)	<input type="checkbox"/>	
Complete any consultations with relevant community	<input type="checkbox"/>	

\*An academic partner would be advantageous for these items


# Phase 1

## First meeting of service design group

Suggested agenda items:

1. Allocate responsibilities within group
2. Service provider to give overview of intervention and share manual (if in existence)
3. Outline the expectations of the service provider: e.g. monitoring & evaluation requirements (including data capture)
4. Ask intervention provider to complete the [Service Design Questionnaire](#)
5. Discuss theory of change, logic model and proposed outcomes
6. Discuss findings from consultations
7. Agree timeline and next steps

### **Actions to be completed before phase 2\***

Actions		Notes
Complete actions arising from meeting	<input type="checkbox"/>	
Develop service manual (if one does not already exist)	<input type="checkbox"/>	
Complete theory of change	<input type="checkbox"/>	
Develop <a href="#">logic model</a> (if one does not already exist)	<input type="checkbox"/>	
Service provider to gather and share existing documents such as consent, registration, monitoring, and assessments.	<input type="checkbox"/>	

\* These may require further meetings




## Phase 2

### Second meeting of service design group; to consider implementation, monitoring, and evaluation

Suggested agenda items:

1. Agree theory of change
  2. Agree logic model
  3. Use completed [Service Design Questionnaire](#) to understand:
    - a. Implementation process of the intervention including recruitment, referrals, and engagement
    - b. Current data capture
    - c. Resources required for delivery
  4. Complete recruitment pathway
  5. Explore measures to evaluate outcomes
  6. Agree feasible levels of evaluation
- Please also see *The Better Start Bradford Innovation Hub Framework for Monitoring and Evaluation*

#### **Actions to be completed before phase 3**

Actions		Notes
Complete actions arising from phase 3 meeting	<input type="checkbox"/>	
Complete Sections 1-2, 4-9 of Service Design document (this may require further meetings depending on how well developed the intervention is)	<input type="checkbox"/>	
Work on budget to ensure it fits needs of intervention delivery	<input type="checkbox"/>	
Develop <a href="#">data collection requirements</a> based on implementation process and agreed evaluation/outcome measures*	<input type="checkbox"/>	
Draft evaluation proposal* (Please see the <i>Better Start Bradford Innovation Hub Framework for Monitoring and Evaluation</i> )	<input type="checkbox"/>	

\*An academic partner would be advantageous for these items


# Phase 3

## Final meeting of service design group

Suggested agenda items:

1. Agree proposed outcome measures and data requirements
2. Agree appropriate level of consent required for data collection and sharing where relevant
3. Agree service design document
4. Agree key progression criteria and timeline for monitoring (Please see *Operational Guide to Monitoring & Implementation*)
5. Agree evaluation plan\*
6. Agree delivery start date and date for review prior to commissioning end date
7. Identify risks to successful delivery of intervention, future commissioning and contract management

### Actions to be completed before intervention is ready

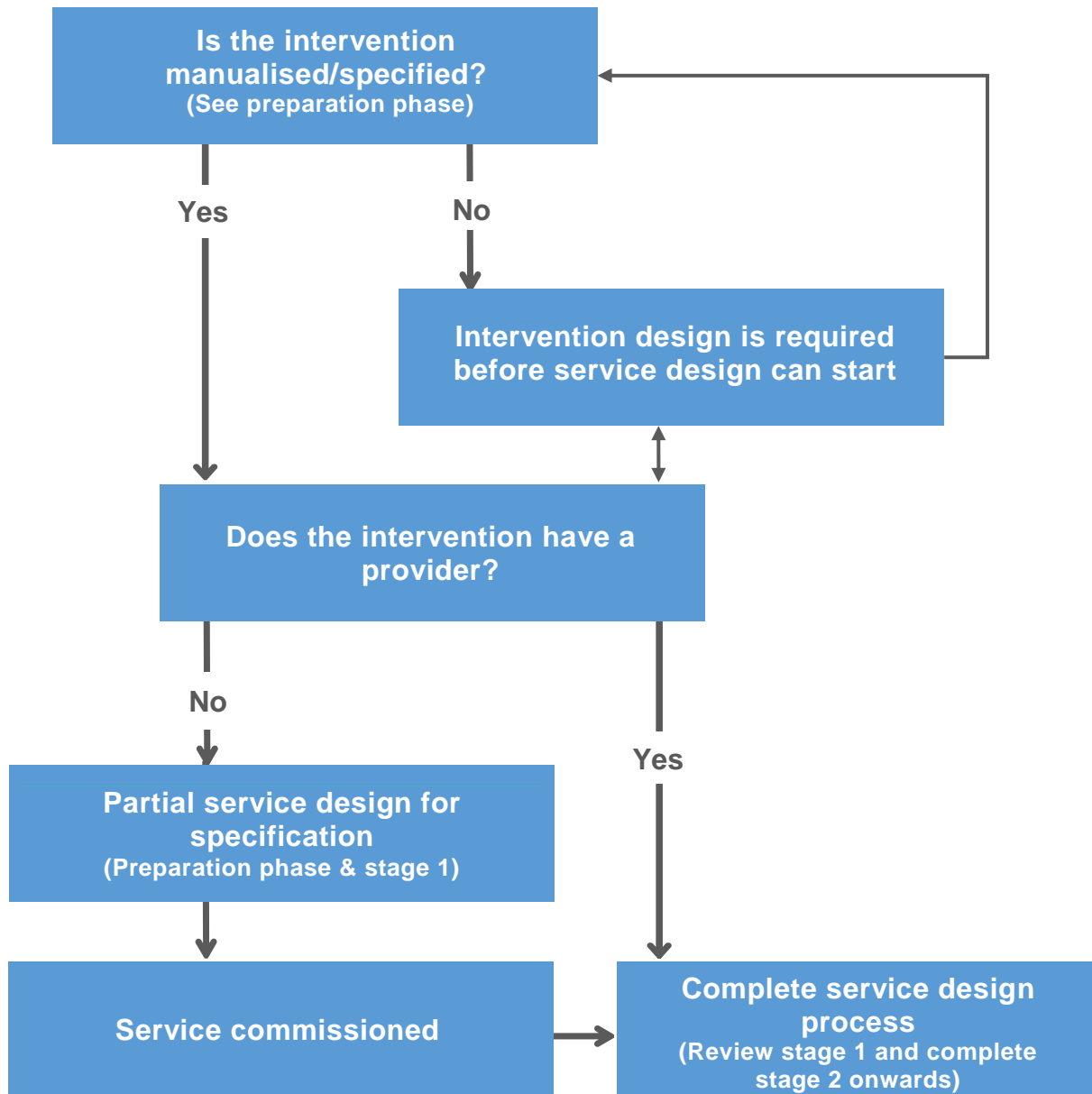
Actions		Notes
Complete actions arising from final meeting	<input type="checkbox"/>	
Identify any data that are missing from current data capture processes	<input type="checkbox"/>	
Resolve missing data by adapting databases and data collection forms	<input type="checkbox"/>	
Create/adapt a suitable consent form or privacy notice if any data sharing is required between departments or organisations. Complete a privacy impact assessment**	<input type="checkbox"/>	
Complete evaluation proposal	<input type="checkbox"/>	
Complete implementation plan, risk log and financial plan with intervention deliverers (Please see <i>Operational Guide to Monitoring &amp; Implementation</i> )	<input type="checkbox"/>	
Contracts negotiated & signed	<input type="checkbox"/>	

\*An academic partner would be advantageous for these items

\*\*<https://ico.org.uk/media/for-organisations/documents/1042196/trilateral-full-report.pdf>  
<https://ico.org.uk/media/for-organisations/.../pia-code-of-practice.pdf>

# Tools

**Flowchart of service design process dependent upon whether the intervention is manualised and has a provider**



# Service Design Questionnaire: Understanding the specifics of your service

Version 1.0, 8<sup>th</sup> May 2017

Before you begin to design your service, completion of the following questionnaire will help you to consider the detail required for monitoring of reach, recruitment, implementation, fidelity and completion.

The responses to each question will help you to understand what specific data items should be collected. Tables 1-3 are provided as examples of the data you may require. These should be tailored to your own service, local population (e.g. include specific ethnic groups) and monitoring interests.

## Service Design Questionnaire

### Section A

*This section aims to collate the information required for a comprehensive understanding of how your service works – target population, how people are recruited, how they are referred, methods of engagement, length of programme, etc.*

#### Target population

---

Who is the target population for this service?

---

How is the target population represented in the population?

*e.g. Number of people; baseline population statistics*

---

Are there any plans for recruitment of particular groups?

*e.g. With specific language needs or vulnerabilities*

---

How will parents/families be referred to the intervention?

*Include a referral pathway including referral sources/agencies and processing on receipt*

---

When will families be recruited?

*e.g. if antenatally, how many weeks pregnant?*

---

Who is the point of first contact with families?

*e.g. Professional role – volunteer, midwife, Children's Centre*

---

What methods of engagement will be used?

---

## Anticipated delivery

---

Anticipated number of contacts/sessions per individual/group  
*Please include frequency and duration*

---

Anticipated modes of contact per individual/group  
*e.g. Group session, face to face visit, telephone call*

---

Is there a manual for delivery available?  
*Please include for reference*

---

Is there a manual for the content available?  
*Please include or detail planned content per session*

---

Anticipated number of courses per year (if group-based service)

---

Anticipated number of parents/families to be seen/attend each year

---

Anticipated number of staff trained to deliver service, including job titles

---

Anticipated number of venues, including location and type

---

How is completion determined?  
*e.g. number of sessions attended*

---

## **Section B**

*Please list here the resources that are required to deliver intervention (e.g. paper questionnaires/forms, specific facilities, crèche, etc.)*

## **Section C**

*Information required relating to data collection processes for service monitoring*

### **Current data collection**

---

What data are collected at an individual/  
family level?

*Please attach copies of all data collection  
proformas used (if any)*

---

How is the intervention/service currently  
monitored?

*Some interventions produce reports for their  
commissioners; please list all items reported*

---

How is information collected from  
participants?

*Who collects data? What is the process e.g.  
where, when?*

---

How is information recorded?

*What database is used (if any)? Where is  
data entered and who enters it? Can data be  
exported?*

---

Will support from your Data Manager/  
Administrator, or IT department be required  
to support reporting?

---

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What information sharing policies are in place? Will additional agreements be required to support reporting from intervention data?

---

## Required data collection

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How will the intervention/service be monitored in the future?  
*Who will the data be reported to? In what format is this required?*

---

Do you collect the suggested demographic dataset, including list items?

*Please see attached (Table 1). This should be altered to suit your service. Items in bold are advisable for equality monitoring. Personal identifiable information is necessary if you plan to link to other datasets.*

---

Do you collect the suggested dataset required to monitor fidelity and implementation?

*Please see attached (Table 2). This should be altered to suit your service. Items in bold are the minimum advised.*

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If relevant, do you collect the minimum dataset for volunteer monitoring?

*Please see attached (Table 3). This should be altered to suit your service*

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If applicable, could your current data collection forms be altered?

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If applicable, could your current database be altered?

---

Is your organisation registered with the Information Commissioner's Office?

*This should be considered if collecting individual level data from participants*

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## Minimum Demographic Dataset

**Table 1: Minimum demographic dataset for recipients**

Demographic	Details	Suggested specification	✓
Consent to share data/ record of privacy notice opt-out	Per recipient; data only to be shared if consent recorded/participant has not elected to opt-out.	Binary	<input type="checkbox"/>
Unique participant ID	Allocated per intervention, per recipient	Free text	<input type="checkbox"/>
Unique family ID <i>If necessary</i>	Allocated per intervention, per family group	Free text	<input type="checkbox"/>
NHS number	Of all recipients	Validation: Modulus 11	<input type="checkbox"/>
Forename	Of all recipients	Free text	<input type="checkbox"/>
Surname	Of all recipients	Free text	<input type="checkbox"/>
<b>Date of birth</b>	Of all recipients	Validation: expected date range YYYY-MM-DD	<input type="checkbox"/>
<b>Sex</b>	Of all recipients	Categorical: Text or coded – must be pre-set to include: <b>Male</b> <b>Female</b>	<input type="checkbox"/>
Address line 1	Of all recipients, if parent and child differ	Free text	<input type="checkbox"/>
Address line 2	Of all recipients, if parent and child differ	Free text	<input type="checkbox"/>
Address line 3	Of all recipients, if parent and child differ	Free text	<input type="checkbox"/>
<b>Postcode</b>	Of all recipients, if parent and child differ	Free text	<input type="checkbox"/>

<b>Disability</b>	Of all recipients	Categorical: Text or coded – must be pre-set to include: <b>Not disabled</b> <b>Disabled</b> <b>“Prefer not to say”</b>	<input type="checkbox"/>
<b>Religion</b>	Of all recipients	Categorical: Text or coded – must be pre-set to include: <b>None</b> <b>Christian (including Church of</b> <b>England, Catholic, Protestant</b> <b>and all Christian</b> <b>denominations)</b> <b>Muslim</b> <b>Sikhism</b> <b>Buddhism</b> <b>Hinduism</b> <b>Judaism</b> <b>Any other religion: [free text</b> <b>space]</b> <b>“Prefer not to say”</b>	<input type="checkbox"/>
<b>Ethnicity</b>	Of all recipients	Categorical: Text or coded – must be pre-set to include: <b>White; English/Welsh</b> <b>/Scottish/Northern</b> <b>Irish/British</b> <b>White; Irish</b> White; Polish White; Slovakian White; Romanian White; Czech <b>White; Gypsy/Roma or Irish</b> <b>traveller</b> <b>Other White: [free text space]</b> <b>Pakistani</b> <b>Indian</b> <b>Bangladeshi</b> <b>Chinese</b> <b>Other Asian: [free text space]</b> <b>African</b> <b>Caribbean</b> <b>Other Black: [free text space]</b> <b>Mixed White and Black</b> <b>African</b> <b>Mixed White and Black</b> <b>Caribbean</b>	<input type="checkbox"/>

---

**Mixed White and Asian  
Any other mixed/multiple  
ethnic background: [free text  
space]**

Arab

**Any other ethnic background:  
[free text space]  
“Prefer not to say”**

---

Sexual orientation  
*If appropriate*

Of adult recipients

Categorical: Text or coded –   
must be pre-set to include:

Heterosexual

Lesbian, gay man or bisexual

Other: [free text space]

“Prefer not to say”

---

## Minimum Dataset for Implementation Monitoring

Table 2 : Minimum dataset for fidelity and implementation monitoring

Item	Details	Data requirement	✓
<b>Anticipated number of referrals to service</b>	Per service, if multiple offered		<input type="checkbox"/>
<b>Anticipated number of families supported by service</b>	Per service, if multiple offered		<input type="checkbox"/>
<b>Number of referrals received</b>	Per service, if multiple offered		<input type="checkbox"/>
<b>Number of referrals accepted</b>	Per service, if multiple offered		<input type="checkbox"/>
<b>Reason for non-acceptance of referral</b> <i>e.g. uncontactable/unable to allocate staff/no longer interested/support no longer required</i>		Categorical: Text or coded – should be pre-set	<input type="checkbox"/>
<b>Anticipated number of staff/volunteers required to deliver service</b>			<input type="checkbox"/>
<b>Anticipated number of new staff/volunteers trained per year</b>			<input type="checkbox"/>
<b>Anticipated number of courses planned per year</b> <i>If applicable</i>	For group based services		<input type="checkbox"/>
<b>Number of courses that took place each year</b> <i>If applicable</i>	For group based services		<input type="checkbox"/>
<b>Number of staff/volunteers available to deliver service per year</b>			<input type="checkbox"/>

<b>Number of new staff/volunteers trained per year</b>			<input type="checkbox"/>
<b>Planned date of each contact for one to one service</b> <i>If applicable</i>	Data required at individual level	Date; standard form e.g. YYYY-MM-DD	<input type="checkbox"/>
<b>Planned location of contact for one to one service</b> <i>If applicable</i>	Data required at individual level	Categorical: Text or coded – should be pre-set	<input type="checkbox"/>
<b>Planned Staff member/ Volunteer of contact for one to service</b> <i>If applicable</i>	Data required at individual level	Categorical: Text or coded – should be pre-set	<input type="checkbox"/>
<b>Planned date of each course for group based service</b> <i>If applicable</i>		Date; standard form e.g. YYYY-MM-DD	<input type="checkbox"/>
<b>Planned location of each course for group based service</b> <i>If applicable</i>		Categorical: Text or coded – should be pre-set	<input type="checkbox"/>
<b>Planned Staff member/ Volunteer per course for group based service</b> <i>If applicable</i>		Categorical: Text or coded – should be pre-set	<input type="checkbox"/>
<b>Date of each contact</b>	Data required at individual level	Date; standard form e.g. YYYY-MM-DD	<input type="checkbox"/>
<b>Type of contact</b> If variable <i>e.g. At group, one to one, engagement activity</i>	Data required at individual level	Categorical: Text or coded – should be pre-set	<input type="checkbox"/>
<b>Location of contact</b>	Data required at individual level	Categorical: Text or coded – should be pre-set	<input type="checkbox"/>
<b>Staff member/Volunteer of contact</b>	Data required at individual level	Categorical: Text or coded – should be pre-set	<input type="checkbox"/>

<b>Language one-to-one/course session conducted in</b> <i>If service is likely to be delivered in languages additional to English</i>		Categorical: Text or coded – should be pre-set	<input type="checkbox"/>
<b>Assessment date</b> <i>If recipients assessed</i>	Data required at individual level	Date; standard form e.g. YYYY-MM-DD	<input type="checkbox"/>
<b>Assessment score and measure type</b> <i>If recipients assessed</i>	Data required at individual level	Score: Numerical Type: Categorical: Text or coded – should be pre-set	<input type="checkbox"/>
<b>Referred from</b>	Data required at individual level	Categorical: Text or coded – should be pre-set	<input type="checkbox"/>
<b>Date referral received</b>	Data required at individual level	Date; standard form e.g. YYYY-MM-DD	<input type="checkbox"/>
<b>Referred to</b> <i>If external referral made</i>	Data required at individual level	Categorical: Text or coded – should be pre-set	<input type="checkbox"/>
<b>Date referral made</b>	Data required at individual level	Date; standard form e.g. YYYY-MM-DD	<input type="checkbox"/>
<b>Date of final contact</b>	Data required at individual level	Date; standard form e.g. YYYY-MM-DD	<input type="checkbox"/>
<b>Reason for final contact</b> <i>E.g. disengaged, completed, lost to follow-up</i>	Data required at individual level	Categorical: Text or coded – should be pre-set	<input type="checkbox"/>
<b>Satisfaction</b> <i>Recommended to measure by standard questionnaire</i>	Data required at individual level		<input type="checkbox"/>
<b>Fidelity indicator</b> <i>Variable by intervention e.g Whether sessions that ran as planned, reported as a percentage</i>			<input type="checkbox"/>

---

**Number of engagement activities held by activity type**

*e.g. drop-in session, community event*

---

**Number attended engagement activities**

---


**Number of families requiring a crèche**

*If crèche facilities are provided*

---

## Minimum Dataset for Monitoring of Workforce

**Table 3: Minimum dataset for monitoring of staff/volunteer workforce**

Item	Details	Data requirement	
Postcode		Free text	<input type="checkbox"/>
Sex		Categorical: Text or coded – must be pre-set to include: Male Female	<input type="checkbox"/>
Date of birth		Date; standard form e.g. YYYY-MM-DD	<input type="checkbox"/>
Ethnicity		Categorical: Text or coded – must be pre-set to include: White; English/Welsh /Scottish/Northern Irish/British White; Irish White; Polish White; Slovakian White; Romanian White; Czech White; Gypsy/Roma or Irish traveller Other White Pakistani Indian Bangladeshi Chinese Other Asian African Caribbean Other Black Mixed White and Black African Mixed White and Black Caribbean Mixed White and Asian Any other mixed/multiple ethnic background Arab Other	<input type="checkbox"/>
First language		Categorical: Text or coded – must be pre-set to include: English Punjabi	<input type="checkbox"/>



	Urdu (including Hindi) Polish Slovakian Hungarian Romanian Russian Gujarati Spanish Pashto Bengali (including Sylheti, Chatgaya/Chittagonian) Arabic Other	
Second language	Categorical: Text or coded – must be pre-set to include: English Punjabi Urdu (including Hindi) Polish Slovakian Hungarian Romanian Russian Gujarati Spanish Pashto Bengali (including Sylheti, Chatgaya/Chittagonian) Arabic Other	<input type="checkbox"/>
Country of education	Categorical: Text or coded – must be pre-set to include: England Pakistan India Bangladesh Poland Slovakia Hungary Elsewhere (Other) No qualifications	<input type="checkbox"/>
Level of education	Categorical: Text or coded – must be pre-set to include: Less than 5 GCSEs (A*-C), CSE or O-Levels 5 or more GCSEs (A*-C), SCEs	<input type="checkbox"/>

	or O-Levels GNVQ foundation level NVQ1 GNVQ intermediate NVQ 2 (Young) apprenticeship NVQ 3 Advanced apprenticeship GNVQ Advanced AS or A level, International Baccalaureate or BTEC NVQ 4/5 Higher National Certificate/ Higher National Diploma, Higher Education Diploma Foundation Degree Bachelor's degree 3-5 years Master's degree (taught/research) or Postgraduate qualification, Doctorate/ PhD None of these Unknown Other	
Religion	Categorical: Text or coded – must be pre-set to include: None Christian (including Church of England, Catholic, Protestant and all Christian denominations) Islam Sikhism Buddhism Hinduism Judaism Any other religion “Prefer not to say”	<input type="checkbox"/>
Disability	Categorical: Text or coded – must be pre-set to include: Yes No	<input type="checkbox"/>
Appointed date	Date; standard form e.g. YYYY-MM-DD	<input type="checkbox"/>
Appointment end date	Date; standard form e.g. YYYY-MM-DD	<input type="checkbox"/>

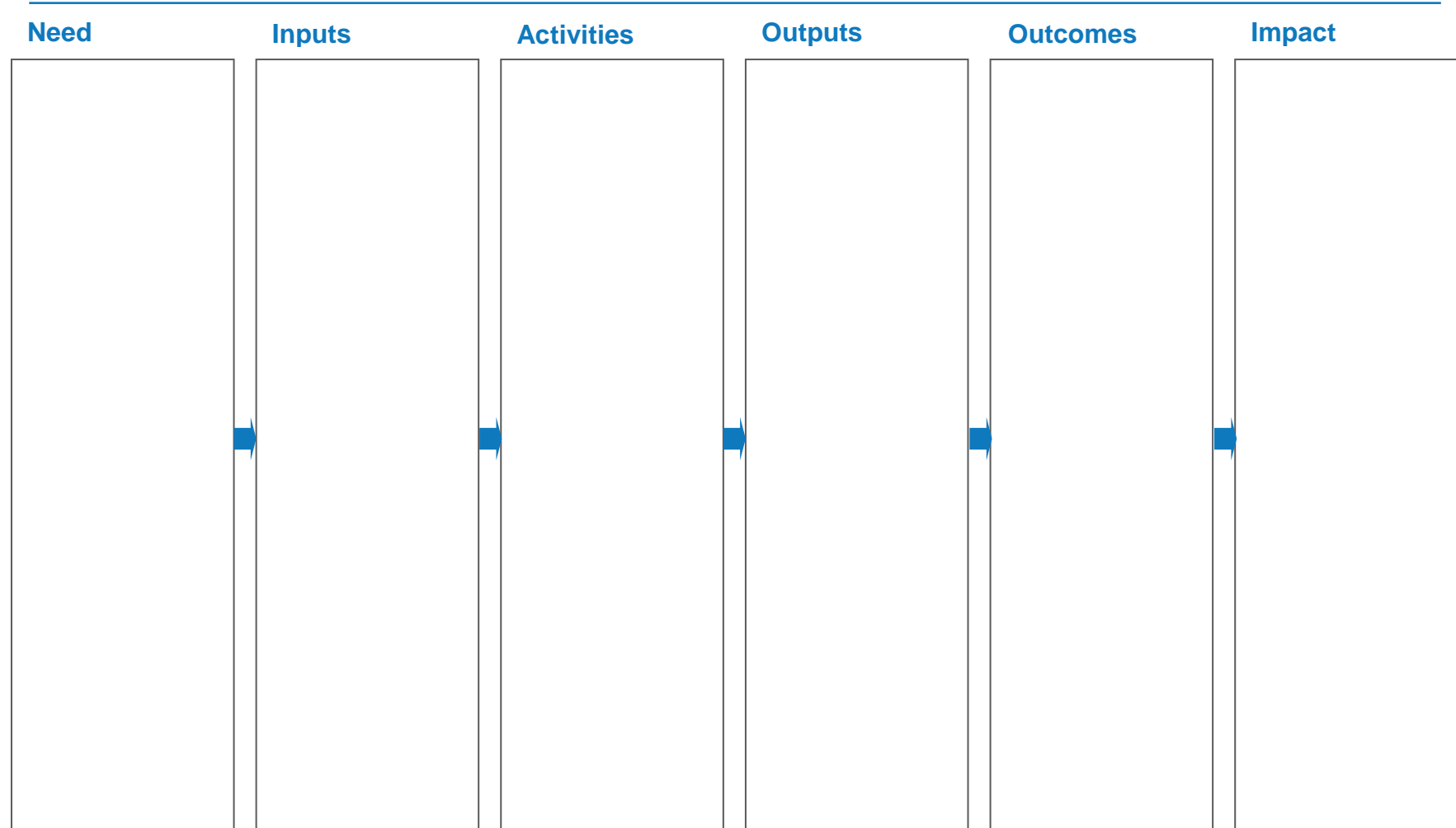
---

Motivation for role	Categorical: Text or coded – should be pre-set	<input type="checkbox"/>
Role/activities	Categorical: Text or coded – should be pre-set	<input type="checkbox"/>
Reason for resigning	Categorical: Text or coded – should be pre-set	<input type="checkbox"/>

---

# Logic Model Template & Worked Example

Logic Model: [*Intervention name*]



# Logic Model – Example Taken from Better Start Bradford’s Welcome to the World

## Logic Model: BSB Welcome To The World

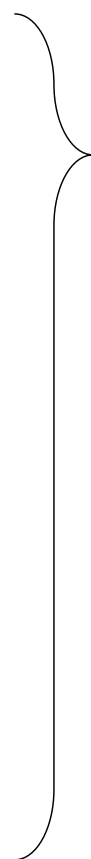
Need	Inputs	Activities	Outputs	Outcomes	IMPACT
<p>Low level of parental engagement in Antenatal activities</p> <p>Poor participant retention</p> <p>Poor practitioner referral processes</p> <p>Lack of awareness of practitioners of Welcome To the World</p> <p>Poor parental communication and relationships</p> <p>Poor parental knowledge and awareness of the importance of sensitive parenting and attachment</p> <p>Poor parental confidence and skills in caring for a baby</p> <p>Low parental wellbeing</p> <p>Poor social and emotional development outcomes</p>	<p>Children Centre Family Support Worker time</p> <p>Incentive resources e.g baby photos, vouchers</p> <p>Referral guidance for practitioners</p> <p>Marketing and Communications plan</p> <p>BSB Learning Together resources</p> <p>Promotional and communication materials</p> <p>1x FTE Programme co-ordinator</p> <p>Provision of crèche facilities</p> <p>Venue facilities ; room &amp; refreshments</p> <p>Programme delivery resources; 22 facilitator packs, 250 parent manuals.</p> <p>39 x facilitators trained</p> <p>Training resources</p> <p>IT &amp; Printing resources</p>	<p>Initial engagement phone call for referred families</p> <p>Home visit for families to introduce facilitator</p> <p>Provision of incentives to complete the programme</p> <p>Targeted recruitment through BIBBS cohort at Glucose tolerance Tests.</p> <p>Promotion through midwives, GP, CC staff, obstetricians and other practitioners</p> <p>Promotional activities as per communications plan</p> <p>BSB Learning Together activities to increase awareness and communication</p> <p>Delivery of 8 week Welcome to the World Antenatal programme as per manual</p> <p>Facilitator training for additional facilitators as demand increases</p> <p>Coordination , supervision and support for facilitators</p>	<p>No of women contacted about the course</p> <p>No of home visits made</p> <p>No of women starting the course</p> <p>No of parents completing each week</p> <p>No of parents completing the course</p> <p>No of referrals received per centre</p> <p>No women recruited as result of promotional activities</p> <p>11 Centres trained to deliver courses</p> <p>25 Courses delivered per year</p> <p>39 facilitators trained</p> <p>250 parents participating in groups per year</p> <p>3 courses provided per children Centre(7)</p> <p>1 course provided per community venue(4)</p>	<p><b>Project Level:</b> More expectant parents will participate in Welcome to the World programmes</p> <p>More parents will complete welcome to the World</p> <p>Delivery centres will receive increased and better quality referrals.</p> <p>All practitioners will be better informed and have increase awareness of Welcome to the World</p> <p>Parents will experience improved sense of well-being with less anxiety/depression</p> <p>Parents will feel confident in their ability to care for their baby</p> <p>Parents will report an improved sense of attachment with their baby</p> <p>Parents will report improved communication /inter-couple relationships</p> <p>Parents will indicate their intention to breastfeed their child.</p>	<p><b>Short Term:</b> Fewer mothers will experience severe post-natal anxiety or depression</p> <p>Improved Maternal sensitivity at 3-4 months</p> <p>More babies will be breastfed at birth and on discharge.</p> <p>More babies will be fully or partially breastfed up to the age of 6 months</p> <p><b>Medium Term:</b> Improvement in quality parent/child interactions at age 2</p> <p>More toddlers have good social and emotional development with lower levels of aggression in pre-schoolers</p> <p><b>Long Term:</b> Children in Primary school have improved school behaviour and engage positively with their peers</p>

# Process Flowchart

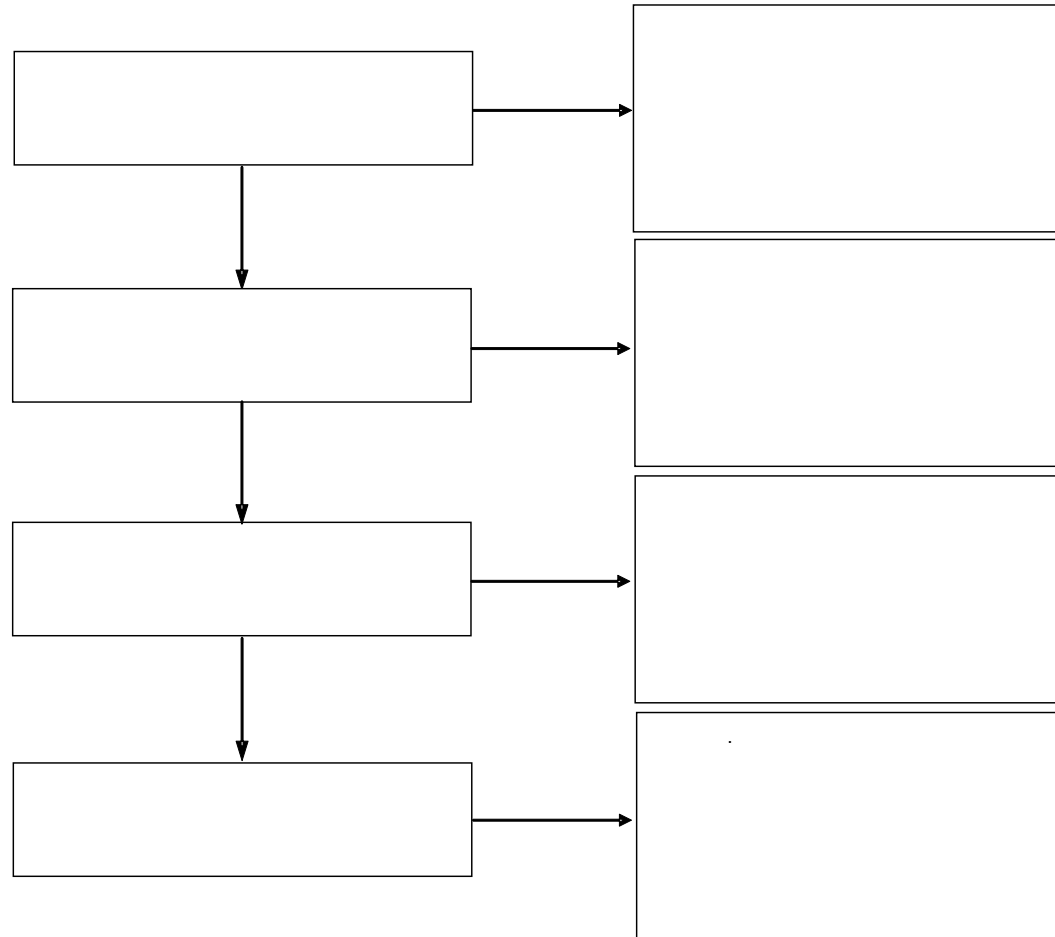
Blank process template v1

## Referral source from who & when, how many (n)

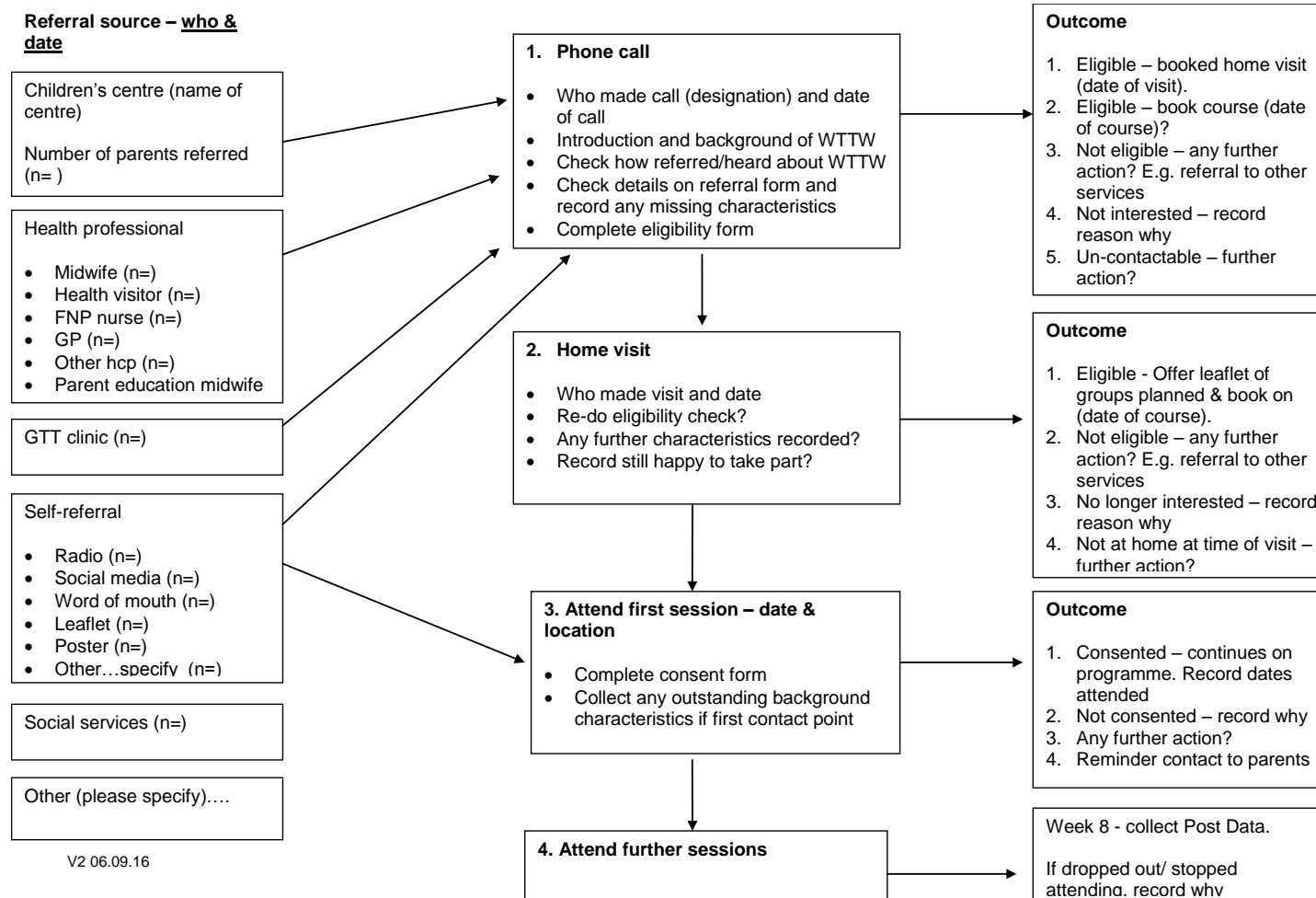
- Children's Centres (n)
- Health professional (n)  
Health visitor  
GP  
Midwife  
Mental health  
Other
- Social worker (n)
- Social services (n)
- Education (n)
- Housing (n)
- Voluntary organisation (n)
- Assessment team (CAF/TAC) (n)
- Members of the public (n)
- Other (please specify) (n)



## Outcome of referral



# Process Flowchart worked example from Better Start Bradford's Welcome to the World



## Summary of Evaluation Levels

	Monitoring	Implementation	Before and after	Effectiveness*	Background studies
<b>Objectives</b>	Facilitate periodic review of intervention inputs, activities and outputs against progression criteria.  Identify need for support around data capture and implementation	To assess intervention implementation, fidelity and participant satisfaction  To inform future evaluations and assess evaluability	To provide evidence of change in outcomes before and after participation of an intervention  This may provide EIF level 2 evidence	To provide evidence of effectiveness of the intervention in relation to short, medium and long-term outcomes  This may provide EIF level 3 evidence	To provide context to evaluations and inform future evaluations
<b>Data to be used</b>	Standard intervention data specified in data requirements	Standard intervention data Satisfaction Qs  <i>As required:</i> Interviews / focus groups* Observations*	Standard intervention data	Baseline & Outcome data  <i>As required:</i> Questionnaires Interviews / focus groups Observations	<i>As required:</i> Questionnaires Interviews / focus groups Observations Research data
<b>Method</b>	Descriptive statistics	Descriptive Statistics Qualitative analysis* Evaluability checklist*	Basic statistical analyses	Comparison of outcome(s) between participants and control group; may use randomised control trials or quasi-experimental methods*	Various; depends on study aim and design
<b>Outputs &amp; Timing</b>	Quarterly & annual reports	Report by the end of the contract period	Report by the end of the contract period	Longer-term	Depends on study aim and design



<b>What it will tell us</b>	Data quality and suitability; informs evaluability assessment  Interventions performance against progression criteria	Interpretation of data on reach, recruitment, engagement, satisfaction, fidelity to explain intervention performance  What future evaluation might be possible*	An estimate of change in outcome(s) after participation in the intervention	An estimate and interpretation of the strength and direction of the effect(s) of an intervention on an outcome  Assessment of certainty of the results	Depends on study aim and design
<b>What it won't tell us</b>	Effectiveness of the intervention  Why the intervention is or isn't performing as expected	Effectiveness of the intervention	Effectiveness of the intervention	The effect on those not reached  Effects beyond the period of follow-up  Effects on other outcomes	Depends on study aim and design
<b>What you need to produce this output</b>	Consent routinely collected System for data capture Data sent to IH on time each quarter Agreed progression criteria	As per monitoring  <i>As required:</i> Access to intervention for observations Access to staff and participants for interviews	As per monitoring  Logic model and intervention service design are suitably defined  Use of reliable, valid and relevant outcome measures*	Intervention EIF rating of 2 or 3  Sufficient number of participants  A control group can be identified	<i>As required:</i> Access to intervention for observations Access to staff and participants for interviews  Intervention willingness

## When will you need an academic partner?

	Monitoring	Implementation evaluation	Before and after study	Effectiveness evaluation*	Background studies
<b>When you will need academic input</b>	None required	For any qualitative work such as interviews and observations	To check the reliability, validity and relevance of your outcome measures  To comment on the outcome	All elements require academic input / lead	All elements would benefit from an academic partner

### Where can I find an academic partner?

Many Universities are interested in supporting local initiatives but don't always know about them. Make contact with your local University looking for relevant departments such as health sciences, midwifery/nursing/medicine and policy etc.

If you're in Bradford, then Born in Bradford should always be your first port of call – we're happy to help! [www.borninbradford.nhs.uk](http://www.borninbradford.nhs.uk)

The National Institute for Health Research have local research networks including public health,, who will have research contacts that might be relevant to you <https://www.nihr.ac.uk/about-us/how-we-are-managed/managing-centres/crn/>

They also have a study support department  
<https://www.nihr.ac.uk/funding-and-support/study-support-service/>

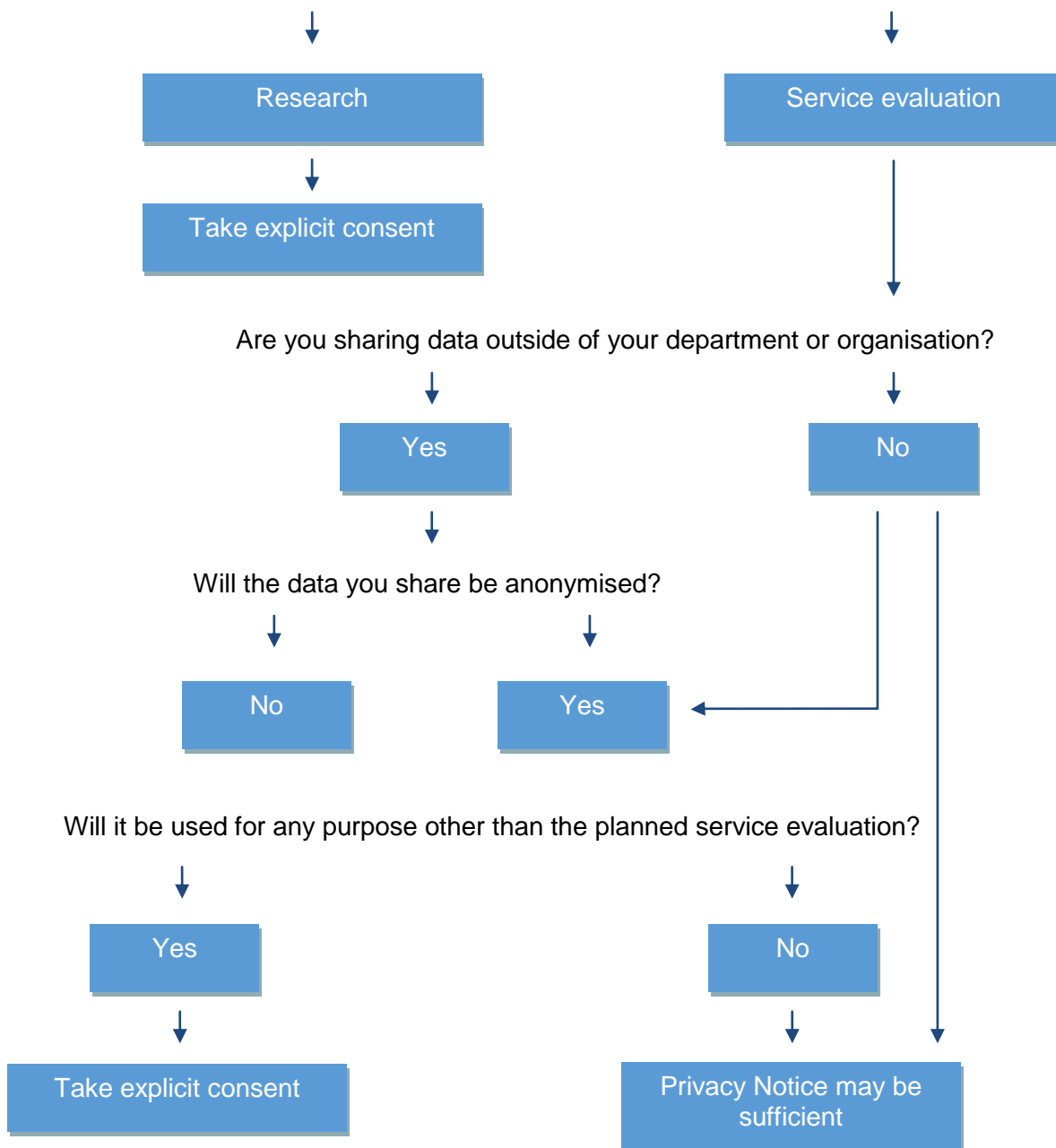
Other useful contacts would be through the NIHR CLAHRCs if your work is health related: <https://www.clahrcinterventions.co.uk/>

Or Department for Education if it is education focussed – they might have relevant tenders or suggestions for support:  
<https://www.gov.uk/government/organisations/department-for-education/about/research>

# Considerations for consent

Is the data collection and evaluation for research or for service evaluation?

<http://www.hra-decisiontools.org.uk/research/>



Please note, this is meant as a guide to your decision making process, you should consult directly with your Information Governance team and/or seek advice from ICO <https://ico.org.uk/> before agreeing your process.

# Example Consent Form

## Welcome to Better Start Bradford!

[SERVICE] is part of the Better Start Bradford. This leaflet explains what information will be shared with Better Start Bradford and how it will be used.

### What is Better Start Bradford?

Better Start Bradford (BSB) offers parents and children the opportunity to be involved in an exciting portfolio of interventions that will help give children a good start in life. The interventions will help to improve children's language and communication, their emotional health and their physical health. BSB is a full and equal partnership led by Bradford Trident, bringing together partners from Children's Services, Health, Police, voluntary sector and the community to help parents give their children the best start in life. It covers the council wards of Bowling and Barkerend, Bradford Moor and Little Horton and will run for 10 years from 2015.

BSB would like to collect some information from [SERVICE] to find out how this service is benefitting you and your children. This will help BSB to understand how to give children the best start in life not only in Bradford, but across the country and around the world.

**You can find out more about BSB at [bradfordtrident.co.uk](http://bradfordtrident.co.uk) or on our Better Start Bradford Facebook page.**

### What information will be shared and how will it be used?

The information that [SERVICE] will share with BSB may include your and your child's NHS Number, Name, Address, Date of Birth, Ethnicity, Religion, and Disability if appropriate. It is important that BSB have this information so that they can make sure that all families in the BSB community benefit from the interventions. [SERVICE] will also share information about how you and your child have used this service (for example the number of sessions you have attended), and what difference it has made to you and your children.

This information will be sent to the Better Start Bradford Innovation Hub (a partnership between BSB and Born in Bradford) based within Bradford Teaching Hospitals NHS Foundation Trust. The Innovation Hub will use this information to find out which interventions help to improve children's wellbeing and development the most.

Your information will be sent securely to the BSB Innovation Hub. You will be given an intervention number and only a small number of authorised members of the BSB Innovation Hub will be able to identify you from your intervention number. All the information will be stored securely and in strict confidence using this intervention number. Authorised members of the [SERVICE] team and/or BSB Innovation Hub will need to look up your NHS number if it has not already been provided, this will be used to find out which other interventions you have been a part of and how you and/or your child have benefitted.

The information will be used to prepare anonymous reports for BSB and its partners. **BSB will not publish any information which could identify you or your child as an individual.**

BSB may share your name and contact details with other BSB interventions that they think you may benefit from. **No other information about you or your child will be shared with other interventions and we will not share your personal information with anyone outside of Better Start Bradford.** If you do not want to be contacted by other BSB interventions, please let BSB know using the details below.

### **What happens if I don't give consent?**

If you do not want [SERVICE] to share your information with Better Start Bradford you can still use this service, but your information will not be shared.

### **What happens if I change my mind?**

If you change your mind and no longer want BSB to use your information, please contact [SERVICE] using the details below.

### **Contact Details:**

Contact Name:

Contact Number:

Address:

Email Address:

You can also contact the Innovation Hub on:

Tel:

Address:

## Consent

Please tick the box below to confirm that you agree to the following:

I have read the above information and understand how Better Start Bradford will use my information. I agree that [SERVICE] can share information about me and my child/children with Better Start Bradford as described above.

### Parent/Carer information

Forename:  Surname:

Date of birth:  NHS number:

Unique ID:

Signed:  Date:

### Child information

Forename:  Surname:

Date of birth:  NHS number:

Unique ID:

Forename:  Surname:

Date of birth:  NHS number:

Unique ID:

Forename:  Surname:

Date of birth:  NHS number:

Unique ID:

# Example Privacy Notice (short)



## Welcome to a Better Start Bradford project

Looking after your information - summary

This project is part of the Better Start Bradford programme. We need to collect information from this project to see how it is helping you and your family, and to understand the best way to support others too.

You can find the full version of this document at: [betterstartbradford.org.uk/projects](https://betterstartbradford.org.uk/projects)



### What information will be shared and how will it be used?

All information collected by this project will be shared with Better Start Bradford. Some of this information will be available to approved staff from our other Better Start Bradford projects that you go to. Access to your information will be strictly controlled by our Better Start Bradford Innovation Hub. Every member of this team has a legal duty to keep your information private and safe. Anonymous information from everyone who gets involved in our projects will be used to make reports for Better Start Bradford and our partners.

If you do not want your information to be shared with us, please let the project team or our Innovation Hub know. You will still be able to get involved in our projects.

Better Start Bradford  
The Mayfield Centre, Broadway Avenue,  
Bradford, BD5 9NP  
01274 723146  
[bsb@bradfordtrident.co.uk](mailto:bsb@bradfordtrident.co.uk)



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Bradford, BD5 9NP  
01274 723146  
[bsb@bradfordtrident.co.uk](mailto:bsb@bradfordtrident.co.uk)



# Example Privacy Notice (long)



## Welcome to a Better Start Bradford project

Looking after your information

This project is part of the Better Start Bradford programme. We need to collect information from this project to find out how it is helping you and your family. This information will help us to understand the best way to support other families in Bradford, and across the country too.

### What is Better Start Bradford?

Better Start Bradford is a community-led partnership programme working with families to help give children the best possible start in life in our part of Bradford: Bowling & Barkerend, Bradford Moor and Little Horton. Led by Bradford Trident, we have been funded by the Big Lottery Fund to run over 10 years.



We're working with families and organisations to create, coordinate and evaluate 22 projects in our area of Bradford. Through these, we're aiming to ensure families have all the support and information they need to give their children the best possible start in life, in terms of health, social and emotional development, and language and communication.

You can find out more about us at [betterstartbradford.org.uk](http://betterstartbradford.org.uk). To keep up to date with our work and opportunities for your family to get involved, sign up to our **text alerts** (text your postcode and 'sign me up' to 07494 558337, take a look at our **Facebook page** or sign up for our **monthly email bulletin** – it's all on our website.

### What information will be shared and how will it be used?

All information collected by this project will be shared with Better Start Bradford. This will include your and your child's NHS number, name, address, phone number, date of birth, ethnicity, religion, and disability if relevant. It will also include the answers you give in any project questionnaires and how many times you were seen by the project team.



Some of this information will be available to approved staff from our other Better Start Bradford projects, but it will only be looked at if there is an important reason to do so.

Access to your information will be controlled by our Better Start Bradford Innovation Hub, which is a partnership between us and Born in Bradford, based at Bradford Teaching Hospitals NHS Foundation Trust. The Innovation Hub will use your information to find out how our projects have helped families in Bradford. To keep your identity safe, you will be given a project number. Only approved members of the Better Start Bradford Innovation Hub team will be able to identify you from this. Every member of this team has a legal duty to keep your information private and safe.

Better Start Bradford  
The Mayfield Centre, Broadway Avenue, Bradford, BD5 9NP  
01274 723146  
[bsb@bradfordtrident.co.uk](mailto:bsb@bradfordtrident.co.uk)



Approved members of the project team and/or the Innovation Hub may need to look up your NHS number. This will help us to find out if you go to any other Better Start Bradford projects.

Anonymous information from everyone who gets involved in our projects will be used to make reports for Better Start Bradford and our partners. Reports may also be published in scientific journals and the press. **These reports will never include information that could identify you or your child.**

Better Start Bradford may share your name and contact details with our other projects which we think you may benefit from. **We will not share your personal information with anyone outside of the Better Start Bradford programme.**

If you do not want your information to be shared with us, please let the project team or our Innovation Hub know. You will still be able to get involved in our projects.

### Our Better Start Bradford Innovation Hub can be contacted by:

Phone: 01274 383941  
In writing: BSB Innovation Hub Data Team  
Temple Bank House  
Bradford Royal Infirmary  
Duckworth Lane  
Bradford BD9 6RJ

Privacy information for families – full version  
last updated: Feb 2017

Better Start Bradford  
The Mayfield Centre, Broadway Avenue, Bradford, BD5 9NP  
01274 723146  
[bsb@bradfordtrident.co.uk](mailto:bsb@bradfordtrident.co.uk)





# Frequently Asked Questions

## How do we get the optimum meeting size?

The first service design meeting will need to include all those considered as a partner in the service as well as those that bring expertise to the group however it is helpful to keep this to a manageable size suggested no more than 12) to enable useful discussion.

## How do we make sure we get the right people to every meeting?

There will be a requirement to have “catch up” meetings with some members of the group. Good meeting planning at the beginning of the process. Facilitators of the service design will need to share a timeline with all members irrespective of their role in the group.

## How do we make sure everyone appreciates their role in service design?

The basic principles and template documents should be shared from the beginning.

## How do we get service user involvement in service design?

Use providers to bring service users with them to service design. Consider other similar interventions with parents engaged to approach and discuss. Ensure consultation is carried out as soon as the group are ready and questions are helpful to the actions of the plan.

## How do we describe/find the evidence base?

The evidence base can include a range of different sources, including evidence of effectiveness or implementation from scientific studies. The Early Intervention Foundation has reviewed the evidence for a number of different interventions, and provides ratings of the strength of the evidence for these programmes (<http://www.eif.org.uk>). In cases where this is not available, it may be useful to approach an academic partner for support with a literature review.

## How do I find an academic partner?

Many Universities are interested in supporting local initiatives but don't always know about them. Make contact with your local University looking for relevant departments such as health sciences, midwifery/nursing/medicine and policy etc. If you're in Bradford, then Born in Bradford should always be your first port of call – we're happy to help! [www.borninbradford.nhs.uk](http://www.borninbradford.nhs.uk)

The National Institute for Health Research have local research networks including public health,, who will have research contacts that might be relevant to you <https://www.nihr.ac.uk/about-us/how-we-are-managed/managing-centres/crn/>. They also have a study support department <https://www.nihr.ac.uk/funding-and-support/study-support-service/>

Other useful contacts would be through the NIHR CLAHRCs if your work is health related: <https://www.clahrcinterventions.co.uk/>

Or Department for Education if it is education focussed – they might have relevant tenders or suggestions for support: <https://www.gov.uk/government/organisations/department-for-education/about/research>

#### How do I get data if this is a new intervention?

Partners in the service design group, national data sets, JSNA and local data.

#### How do we make sure decisions and risks are reported adequately?

A process will be required to ensure information is shared with the lead organisation

#### How do we assure progress and stability in a service provider whilst committing to only continuing interventions achieving outcomes?

Ensure the progression criteria are clear and well considered, logic models are realistic in their outcomes.