



Independent Impact Evaluation: Bumblebee Children's Charity



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Executive Summary

Context

The Bumblebee Children's Charity team are **experienced experts** who:

- 1) Promote, sustain, and improve the capabilities of children with delay in their physical, mobility and/or neurological skills, whilst
- 2) Supporting and advising those upon whom the children depend (i.e. parents and caregivers).

Bumblebee offers **conductive education**, which treats physical disability as a learning challenge rather than as a primary medical problem ([Scope, 2014](#)). Bumblebee offers each child and their parents and care-givers a **2-hour session once a week** at the Bumblebee Children's Centre. Bumblebees have helped around 400 children over the 8 years, with these children often having a myriad of complex health conditions. Currently, the centre is open three days a week. Sessions are:

- In **small groups** of six children per session and their parents/carers - who are as much the focus of the sessions as the children.
- Semi-structured and more or less **the same each week** to create a strong sense of routine.
- **Positive**, talking in practical terms about what the child *can* do.

This report captures Bumblebee's impact and explores how its work might be enhanced and expanded in the context of the new integrated care system (ICS). The evaluators, **Civil Society Consulting**, took an inductive approach to gathering and analysing evidence that can be used to advocate for support and funding.

What impact does Bumblebee have on children?

Children supported by Bumblebee have **three main needs**, across all of which early intervention is key.

1. Fundamentally, children need somewhere to go, as they tend not to be able to interact with mainstream support groups, or education/care systems.
2. Children need their complex and specific needs met so that they can develop their physical capabilities.
3. Children need to develop socially and emotionally so that they can graduate on to other support groups and activities, including mainstream education where possible.

Bumblebee is successfully meeting the needs of the children who attend:

1. Children feel comfortable and safe in the space, able to participate, leading to improved wellbeing
2. Improved mobility: children make incremental progress and/or major breakthroughs
3. Improved general abilities, including sensory development and social and emotional skills
4. Personality and identity development
5. Improved relationship with parents and other caregivers which contributes to all aspects of the child's development.
6. Children are ready and able to graduate on to other support.

What impact does Bumblebee have on parents/caregivers?

Being a parents or caregiver of a child with physical disabilities leads to **four main challenges**:

1. High levels of stress and anxiety about their child's development
2. The logistical challenges of daily life
3. Lack of social support and connection
4. When facing high levels of challenge, with low levels of support, a negative mindset can ensue.

Bumblebee is successfully supporting parents and caregivers to overcome these challenges. All those that we spoke to reported the following outcomes:

1. **Improved knowledge, skills and confidence promoting their child's movement**, which reduces their anxiety, promotes their independence and helps them to cultivate a positive mindset.
2. Direct improvements to **emotional health**.
3. Parents gain **social connection**, a much-needed sense of belonging and a self-sustaining community of support.
4. Parents feel **practically more supported with logistical challenges**.
5. Improved **access to additional support**, which reduces the logistical challenges of daily life.
6. **Improved relationship with the child**. Parents and caregivers can see the child before disability.

The eight 'active ingredients'

It is no coincidence that Bumblebee consistently produces such a range of profound outcomes. We identified key features of the Bumblebee approach that are responsible

for Bumblebee’s effectiveness. These ‘active ingredients’ need to be protected and valued. They also offer a ‘recipe’ for other organisations that want to replicate the success of the Bumblebee model.

1. Personalised, holistic and strengths-led approach to working with the children
2. Striking a balance between providing hands-on support and promoting independence
3. The centre has a calm and accepting atmosphere, which is non-clinical and appropriately upbeat.
4. The staff are warm and authentically kind experts, with lived experience, working together.
5. Trusted by parents and caregivers
6. Consistency and routine
7. Appropriate equipment
8. Early intervention.

Looking ahead

The findings from this evaluation are overwhelmingly positive, so there were limited opportunities identified as to how Bumblebee can enhance its existing work. However, as the saying goes, **“the reward for good work is more work”**. Indeed, we ascertained that Bumblebee is uniquely well-positioned to deliver more support to more children and parents/caregivers:

- Open the centre more for more sessions and/or other types of sessions, more of the same, a new programme of activities, stay and play groups or weekend sessions.
- Facilitate sessions for parents.
- Satellite groups in the community.

We recommend that Bumblebee uses this report to secure further funding to support Bumblebee’s work at the current capacity and for expanding Bumblebee’s work. We also have some suggestions for how to improve internal processes, including: (1) optimising (and perhaps digitising) processes for producing weekly reports and (2) developing an impact measurement framework that can be easily embedded into current registration and reporting procedures (the outcomes framework will be derived from this impact report).

Bumblebee is a prime example of how voluntary and community sector organisations are able to complement the limitations of the statutory health system and produce outcomes that are difficult for health services to drive (Civil Society Consulting, 2023). We strongly encourage the ICS and local statutory partners to review how they may support Bumblebee to sustain itself, or better still, enhance and expand.

A. Context

About Bumblebee Children's Charity

Bumblebee Children's Charity exists to **support children with delay in their physical, mobility and/or neurological skills** and their parents.

According to the laws of Physics, Bumblebees "*shouldn't*" be able to fly because their wings are too small for the size of their bodies - at least according to 20th century engineers. But bumblebees prove them wrong every day. In the same vein, the Bumblebee Children Charity's team are **experienced experts** that promote, sustain, and improve children's capabilities, whilst **supporting and advising those upon whom the children depend.**

Children attending Bumblebee have a wide range of conditions that lead to impaired physical abilities, including Down's syndrome, Cerebral Palsy, Infantile Spasms, Autism, chromosomal abnormalities and other developmental challenges. Many have no diagnosis. The only remit is that the child has a delay in acquiring their physical, mobility and/or neurological skills. It is important to note that some of the children are coming from an incredibly low base in terms of their abilities and potential, which is typically extremely painful for parents and all loved ones involved. The Bumblebee team doesn't talk about what the child cannot do, nor do they even consider it all that relevant to focus on what the condition is. Instead, Bumblebee staff just talk in terms of abilities (e.g. whether the child can bear its own weight), focusing on what each child can do, and how to build on those positives/strengths. In the words of an Early Years expert from Suffolk County Council "*working in this way is really valuable, and it's only made possible because of such a high level of expertise and confidence among the Bumblebee team.*"

What does Bumblebee do?

Bumblebee offers **conductive education**. Conductive Education treats physical disability as a learning challenge rather than as a primary medical problem (Scope, 2014). Participants are learning motor control through a cognitive process which gives them a tool to problem solve and

a way to implement what they have learnt to overcome their motor problems in their everyday life (ibid.).

Bumblebee offers each child and their parents and care-givers a 2-hour session once a week within term time at the Bumblebee Children's Centre working alongside the national curriculum, located in a peaceful location off the beaten track on the outskirts of Ipswich. Parents and children continue coming for as long as the family needs it, usually until the child starts school.

The centre is open two days a week - with two sessions on each day. Sessions are:

- In **small groups** of three to five children and their parents/carers - who are as much the focus of the sessions as the children. Sessions are supervised by three to four Bumblebee team members. Children are **loosely grouped according to ability level** but all different ages and experiencing different conditions affecting their mobility. This creates a good combination of similarity and diversity - so children and parents are at a similar level but it does not invite comparison between the children.
- More or less **the same each week** to create a **strong sense of routine** that helps children feel more settled and comfortable.
- **Semi-structured:**
 - The first 1.5hr is structured: activities, songs and movement exercises developed in order to prompt mobility, neurological development and sensory development. In the classroom (see photo on page 8).
 - The final 30 minutes are unstructured play: in the **mobility / sensory room**, which has in it all the equipment (e.g. walking ladder; obstacle courses, parallel bars, stepping stones, vibration plate, balance boards, fitness balls) (see photo on page 9).

Being semi-structured leaves some room for **some flexibility where appropriate**.

Depending on the needs, mood, level and personality of the group, some sessions go a bit 'off script' if appropriate. When a child makes particularly fast progress compared with others in their group, they are moved on to another group so they are working alongside others with a similar ability.

- **Positive, talking in practical terms about what the child *can* do:** Conductive education is based on the principle that everyone has the capability to learn and develop irrespective of their starting point. At Bumblebee, there is a general 'rule' of not mentioning a child's condition, or defining their abilities in terms of what they can't do. The only time parents or caregivers have to tell Bumblebee what is 'wrong' is at the initial registration - they never have to repeat their medical history after that.



Typical journey for each child and their parent/caregiver

Diagnosis or suspected diagnosis: Child and parent/carer receive diagnosis or suspected diagnosis from interacting with the health and social care system. Some children have no diagnosis and the parent/carer would like some support.

Finding out about Bumblebee and/or getting a referral: Parents typically find out about Bumblebee from their child's physiotherapist or specialist health visitors. Sometimes the statutory professional makes a formal referral (though a referral form), whereby engaging with Bumblebee being part of the child's bespoke plan. Other times the parent or care-giver takes a leaflet from their health professional and contacts Bumblebee themselves. Some parents and care-givers hear about Bumblebee through word of mouth (for example, talking to other parents or foster carers who have children with needs, potentially via a support group, or hearing it from the child's previous foster carers).

Straight in, no waiting list: Despite having limited sessions, Bumblebee does not have a waiting list per se. They work flexibly to create space for new children, even if there is not a regular slot available. It is not uncommon for parents of disabled children to need to cancel (for obvious reasons); being agile and sincerely/deeply focused on outcomes for as many children as possible, Bumblebee has developed a methodology for flexibly squeezing in other children when there are cancellations. Therefore, those on the waiting list are able to start accessing Bumblebee's sessions ad-hoc whilst they wait to be allocated a regular weekly slot.

Settling in and setting goals: It can take a varying length of time for children to settle in, the transition is helped by the atmosphere and the structure (and repetition) which children find reassuring. The expert team set personalised individual aims for each child. For example to maintain independent sitting with straight legs.

Weekly reports: The Bumblebee team produces a short report, with commentary and photographs, which is emailed over to parents. The reports help parents to recognise what their child did well (as sometimes they forget or lose perspective on the progress their child makes) so as to motivate and encourage them. The Bumblebee team revisit goals twice a year - which is the sweet spot between keeping the pressure off whilst a sense of progress. In some cases, Bumblebee will keep physiotherapists updated.

Wrapping up: Normally children stop coming to Bumblebee when they start going to school; by the time they leave, the child is ready to start engaging with other activities/services. Some go to mainstream or Special Educational Needs (SEN) nurseries and/or schools and, some of whom then come back and do exercises.



Why this report?

This report is an independent impact evaluation of Bumblebee Children’s Charity, carried out by [Civil Society Consulting CIC](#).

As this the evaluation will show, Bumblebee is a prime example of how voluntary and community sector organisations are able to complement the limitations of the statutory health system and produce outcomes that are difficult for health services to drive.

The UK’s national health service is described as not being a health service, but “a national *illness* service” ([FT, 2023](#); [Civil Society Consulting, 2023](#)). The biomedical approach, though capable of miracles, focuses too mainly on eradicating illness, and not enough on promoting good health (e.g. [Kings Fund, 2018](#)). In light of this, the UK is moving towards a new preventative approach to health, embodied in a new model of care: the Integrated Care System (ICS). Integration is also about being more joined-up, so understanding each individual as a whole person, rather than focusing on specific aspects of their development or conditions (recognising that our relationships, our culture, our immediate and global environment all profoundly affect our health, development and well-being).

The ICS are set to be equal partners in the new system. And Bumblebee has a great deal to offer the East Suffolk and North Essex ICS. In this context, this report aims to capture and analyse the impact that Bumblebee has currently - and evaluate how its work can be enhanced and expanded to work alongside the new health and care system.

Stars have aligned to mean that Bumblebee exists and continues to exist, as Bumblebee’s history shows. Other local areas do not have a *Bumblebee* and it’s by no means a given that Bumblebee will continue to exist. To continue changing the life course of children with physical disabilities’ and their families in Suffolk, Bumblebee needs support and funding. Bumblebee has recently been awarded a game-changing grant from the National Lottery Community Fund - a significant (and deserved) uplift. This report captures the difference that Bumblebee makes to provide the evidence needed by other funders, as advised by the Lottery.

A brief history of Bumblebee Children’s Charity

Bumblebee exists, and continues to exist, thanks to the passion, expertise and commitment of a core team of staff, trustees, parents, and local supporters. In April 2000, firstly known as Suffolk School for Parents and founded by Scope. In 2002, Suffolk School for Parents registered as an independent charity, before merging with the Dame Vera Lynn Trust eight years later. In early 2015, after a difficult financial period, the Trust decided to close the charity. Parents and staff felt so strongly for the

need to continue providing such an essential service that they immediately launched a campaign to reopen the school under a new name and again as an independent charity in its own right now known as The Bumblebee Children's Charity.

How?

The Civil Society Consulting team could have taken many approaches to evaluating Bumblebee's impact. The majority of parents of children with delay in their physical, mobility and/or neurological skills are unpaid carers - parent carers. We could have assessed impact through these concepts and frameworks. We could have also analysed the impact through the lens of conductive education. In the end, we took an **inductive** approach: we asked parents, statutory partners and the staff about the outcomes and their significance and worked backwards from there to understand the story of change. Therefore the research process has been shaped by them and the things that they prioritise as important. We wholeheartedly thank all the individuals that gave us their time, energy and expertise for this report - and those who let us observe one of their sessions.

The parents will remain unnamed but we would like to thank the statutory professionals that contributed their expertise:

- Sam Rimmer,
Highly Specialist Paediatric Physiotherapist, Pre-School Complex Lead, Suffolk
Community Health Care
- Julie Lilicrop,
Specialist Health Visitor, Integrated Community Paediatric Services
- Carolyn Heyburn,
Quality and Access Coordinator, Early Years and Childcare Service, Suffolk County
Council

Photo: Civil Society Consulting and Bumblebee colleagues during a visit to Bumblebee Children's Centre

B. Need: children and parents

Having spoken with and gathered experiences and perspectives of parents, statutory partners and the staff, Civil Society Consulting identified the needs that children and their parents/care-givers have that are addressed by Bumblebee.

What do the children need?

Children supported by Bumblebee have three key needs. Across all three, **early intervention** is key. Mild or severe, children with delay in their physical/mobility/neurological skills will have many possibilities unlocked for them further down the line if they start physiotherapy sooner rather than later; with support to get comfortable in groups and with adults early on mitigates the impact of the child's physical condition on their identity and personality development (explained below).

1. Fundamentally, children need somewhere to go, as they tend not to be able to interact with mainstream support groups, or

education/care systems. All children have a right to participate in sensory play activities, which is vital for child development. Sensory play supports brain development (e.g. help children understand how their actions affect what's around them), language development, developing fine motor skills (i.e. being able to hold objects), supporting communication and social skills, memory, observational skills and creative and independent thinking. Mainstream services or even some SEN services/support groups (e.g. for those with less severe conditions) are not an option for many of the children that access Bumblebee. Some children refuse to go to nursery. Therefore, the most basic things that children with physical disabilities need is somewhere to go, to play.

2. Children need their complex and specific needs met so that they can develop their physical capabilities, which requires:

- A high level of supervision from experts;
- Support to develop routines for and upkeep of physio in between NHS appointments.

- Emotional support to feel safe, encouragement to participate and stimulation to stay engaged according to their specific needs (which depend on mental as well as physical capabilities, and their ability to interact with adults and other children) - some children may need more stimulation, others may become overwhelmed with too much stimulation.
- Opportunities to play and do “the simplest” of nice things: *“he sits in a wheelchair, he can’t see me or understand what I say and he’s very heavy - so I can’t even lift him for a cuddle!”*



3. Children need to develop socially and emotionally so that they can graduate on to other support groups and activities, including mainstream education where possible.

Many of the children who come to Bumblebee have delay in their sensory development as well as physical capabilities. These children tend to find new environments difficult and are resistant to being involved in activities or handled by other adults. Yet, if children don't have opportunities to engage in group activities supervised by adults, they will never become comfortable doing so. In fact, it is not uncommon for children to become very clingy, anxious and unable to interact with the wider world - one example was given of a child who was born during the pandemic, who couldn't detach from mum for a number of weeks in Bumblebee sessions - making no eye contact, hiding and climbing on mum. Some of their only interactions with other adults is in hospital settings - where there is a fear of being hurt. Some children refuse to go to nursery. What children need is the opportunity to develop socially and emotionally, and learn how to act or play with other children and adults in a comfortable space, so that they're able to graduate on to other services, activities and education.

Profiles

Baby A

- Pronounced brain injury and demonstrates autistic traits at times, having experienced pre-verbal trauma.
- He is unable to walk or talk and uses a feeding tube.
- Started at Bumblebee at 1 year old and recently left, just after turning 2.

Baby V

- Complex epilepsy and completely blind.
- He has very little head control but has developed key motor function and balance skills through working with Bumblebee staff.
- Socially aware and notices other kids staring at him whilst out in public (e.g. the park) which makes him feel self-conscious.
- Baby V is three years old but functions at around 15 months old and requires ear defenders when feeling stressed.

Child S

- Child S has physical impairments (e.g. non-mobile) and previously struggled with physio, but now does it regularly at Bumblebee without issue.
- Positive encouragement shown by Bumblebee staff has helped to develop certain social skills, such as eye contact, that S was not previously able to do.
- Started at Bumblebee at 1 year old and is now 3 years old. Having not been successful at other groups during this time, Child S has now received a place at a special needs nursery.

Baby B

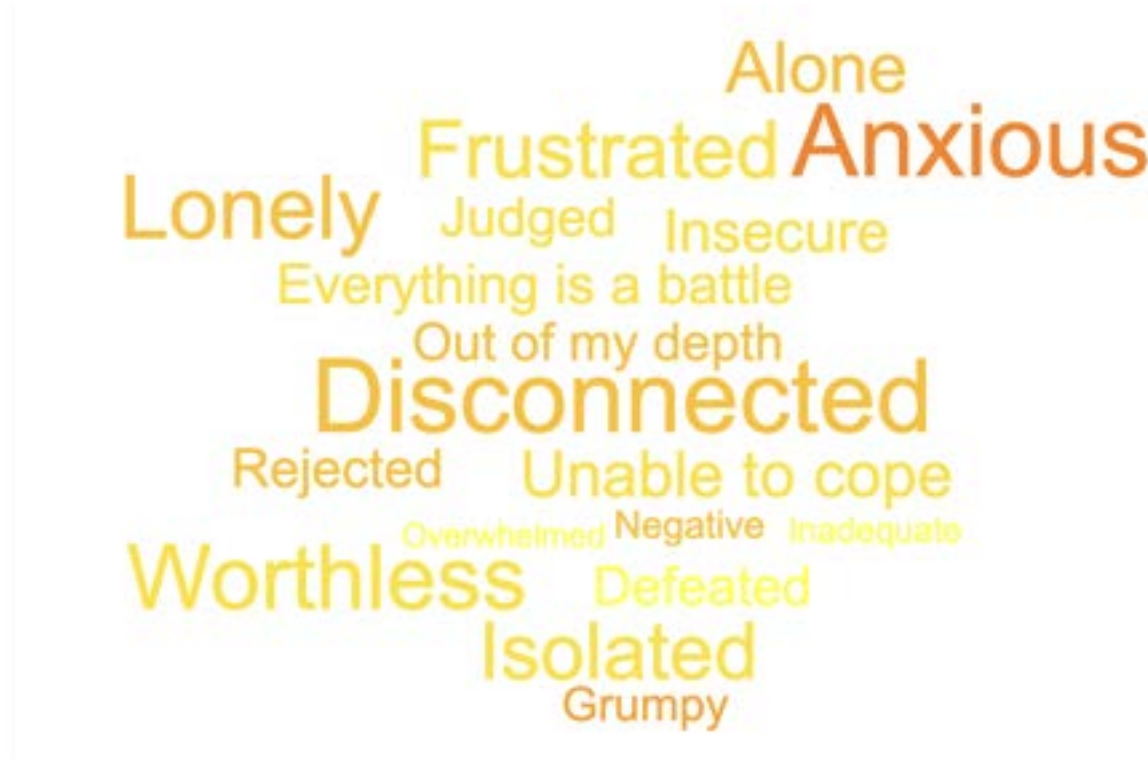
- Having been born at 30 weeks at just 2lb a head scan revealed two cysts on her brain that would result in mobility issues.
- After 1 year of physio, Baby B was referred to Bumblebees and for the last 18 months she goes twice a week.
- B is more able than other children at Bumblebee and has been given the opportunity to learn about helping others, which has contributed to her personality development.
- Recently, she started Nursery two days a week with able children.

Child B

- B is almost entirely unable to move.
- He has started moving as a result of attending Bumblebee's sessions
- Started going as/when there was a free slot when he was 17 months old; now 3 years old and going once a week and will centre nursery schedules around it in the future.

What about the needs of parents and care-givers?

Parents and caregivers of children with delay in their physical, mobility and/or neurological skills face many challenges. Many are unpaid carers: parent carers that are caring for the child. Others are foster carers. But who cares for the carer? See Figure 1 to get a sense of how parents describe how they feel.



Civil Society Consulting heard from parents and care-givers that they have four key needs: ultimately, they need support that reduces stress and suffering whilst also promoting their resilience/independence.

1. Parents and carer-givers experience high levels of stress and anxiety about their child's development:

- **Parents and caregivers shoulder the responsibility of overseeing their child's care.** There is a lack of joined-up care from statutory care providers, which sows seeds of doubt in parents/caregivers minds given the (sometimes long) gaps between appointments. Parents and caregivers don't have confidence in the (sometimes conflicting) information they've received from healthcare professionals; they also carry the mental load of overseeing their child's physio in between appointments, which is challenging because it can be difficult to get the child to do their exercises and parents

often fear getting it 'wrong' and/or making sure they don't hurt their child. There aren't many opportunities for parents/caregivers to gain skills or knowledge (there isn't a handbook). As a result, parents/caregivers are prone to **self-doubt** and high levels of **anxiety**.

- Parents and care-givers live in constant **fear of how their child will react to different situations** - e.g. those at mainstream or even some SEN services/groups for those with less severe conditions, at which their child may become overwhelmed/unable to engage.
- Out and about in the community, parents and care-givers feel perpetually **reminded of their differences**. *“Going to mainstream groups, even those aimed at younger children, just seems to highlight differences; [my child] is still non-mobile while other children are toddering around; I even feel this way walking around the park.”*

2. Logistically life is very challenging for parents and care-givers.

- *“Everything is a battle when you have a severely disabled child... Apart from Bumblebee; that's because they bend over backwards to be the opposite.”* Parents often have to give up work, the financial implications of which are immense. Children with complex needs are likely to have sleep issues, dietary issues and/or behavioural issues, which all present obstacles to simple day-to-day activities, - even like going out to get milk. Parents are **under pressure to plan “each and every move”** in advance.
- It's ever-challenging for parents and care-givers to **build-in opportunities to get the respite they need** - or go to appointments, work, or do 'life admin'. Children with complex care needs cannot be babysat by other family members, friends or neighbours. Waiting lists for expensive specialist care are always long and many parents feel as if they are **“constantly”** turned away from other services because of the child's condition - **“nobody wants us”**.
- Keeping up a good relationship with your child, whilst providing the care they need is a **constant balancing act**. Notably, it can be difficult to get the child to do physio exercises, so you have to find strategies to avoid your relationship being negatively affected by regular physio. If the parent-child relationship is eroded, it is likely to have a negative impact on everyone in the household).
- **Opportunities for family bonding are difficult to engineer** - it can be difficult for parents to find activities to do with their child, and have the shared experiences needed to feel like a family.

3. Parents and care-givers lack social support, as well as acceptance and inclusion in their social networks, which leads to loneliness:

- Parents of disabled children lack instrumental or informational support due to a higher volume of issues and a smaller pool of people who can help. Since children with complex care needs cannot be looked after by other family members, friends or neighbours, parents and care-givers end up having **no one to turn to for help with childcare**. It is not unusual for parents to resist accepting help from other family members due to shame, fear, anxiety. Over time, they end up overloaded. **Informational support** is also vital because parents are typically encountering each hurdle for the first time - often parents lack access to people with the information and insight they need.
- Parents and care-givers feel like **outsiders** so often lack the social connection and/or emotional support they need: *“you move away from other parents whose babies are normal”*. One parent described feeling stared at when she goes to the park with her foster child. Even many SEN services don’t make parents feel accepted or included. One parent explained that whenever she tries new groups *“they always seem to do more harm than good, because being around other children just highlights differences.”*
- **Emotional loneliness**: Parents commented that they have friends with children, who try hard to understand, but without the lived experience, they just can never really understand how it feels. This leads to emotional loneliness, which is particularly bad for single parents. In some cases, relationships with friends and family break down and/or drift apart due to this feeling that no one understands.
- Long waiting lists and being turned away from services **feels like rejection**: *“He can’t walk, he can’t talk, he eats through a tube... it feels like rejection, even though it’s not.”* Parents and care-givers do not experience healthcare professionals as being easily contactable.

4. When facing high levels of challenge, with low levels of support, a negative mindset can ensue.

Parents need support to develop the positive mindset needed to cope, especially to redress loss of perspective and social comparison:

- **Loss of perspective**: a child’s progress can often be difficult to measure and parents/caregivers have a tendency to be preoccupied by present demands and are rarely afforded the opportunity to reflect and remember the bigger picture. This can create the perfect storm for a narrowing of perspective. Parents need support to zoom out on their journey in order to see the positive progress, keep going and stay positive about the future.
- **Social comparison** is where we compare ourselves with others. One parent described knowing that she shouldn’t compare kids, but *“it’s hard not to when you’re in a mainstream group and 1-year-olds are running around and your nearly 3 year-old is still sitting on his bottom.”* Parents and caregivers need support to create positive thinking patterns and habits, describing it as *“incredibly freeing and healing when you do”*. Arguably, a dedicated space (i.e. the Bumblebee Centre) is required to develop a culture of *not* comparing children.

C. Bumblebee's goals

Currently, Bumblebee seeks to address the needs of children and parents via two specific goals:

1. Produce positive educational, health and wellbeing and social outcomes for these children.
2. Provide specialist support, training and advice to those persons upon whom the child depends.



D. Outcomes: children and parents

What are the outcomes for the children?

A high number of children who are referred to Bumblebee have (and often a combination of) physical and neurological impairments. These children typically require specialist care to manage their complex needs, which is often hard to access in mainstream settings e.g. NHS and schools. However, Bumblebee reduces this service gap by offering unique, personal and accessible care that equips these children with better outcomes and more equal life opportunities.

1. Bumblebee staff ensure that children feel comfortable and safe in the space, able to participate, leading to improved wellbeing:

- **The children feel comfortable and safe, “as if they are at home”.** Similarly, adults feel safe and comfortable and the mirroring between children and adults creates a positive ‘upward spiral’ in sessions (virtuous circle). On his first day, Child S found new environments really difficult, he spent a lot of time at the group on his parent’s lap **“not being involved, not wanting to do anything”**. Now, he’s quite happy to sit on the stool and follow the activities. The predictable environment (because the sessions follow the same structure and activities each week) helps children to settle in quickly: **“the repetition and familiarity helps him to know where he is. He knows the songs, and everybody in the group knows which songs are his favourite!”**
- **The children enjoy themselves: “he knows where we are when we arrive, and he starts to smile; experiencing joy on a weekly basis is so vital and meaningful for us both.”**

2. Improved mobility: children make incremental progress and/or major breakthroughs, for example a greater range of physical movement, improved strength and/or learning to stand independently.

- **Feeling comfortable** in the space, children participate and follow activities; **“going to Bumblebee is what got him to start trying to move; for us it started by him moving his limbs with music...”**

- **A high level of involvement** from staff with a high level of expertise leads to progress. One parent described how the team really understands her child physically: *“Bernadette massages his neck in the right place and suddenly he is able to move his head. That was really emotional to see for the first time...”*
- Bumblebee set **achievable targets** *“little tips, small things that are very implementable”*. Paired with **repetition**, this leads to change over time. For example *“the staff hold the children’s hands to show them the actions; then some weeks later the child may be able to do it on their own by muscle memory. Before you know it your child is holding on to a stick instead of letting go.”*
- Children can do **exercises that parents can’t do at home**, which leads to breakthroughs over time: *“we do physio at home but often you need two pairs of hands, equipment or expert guidance, so it’s great that there are so many members of staff available to help with different movements; overtime, these are the exercises that have led to breakthroughs.”*
- Bumblebee helps parents and children **keep on top of their physio** - coming in regularly and touching base on progress *“helps you keep going, taking one week at a time”*.





3. Improved general abilities, including sensory development and social and emotional skills

- Sensory play has an important role in a child's development, because much of our learning comes from our ability to use our senses to retain information. Most children who come to Bumblebee see a **steady improvement in their general abilities**: ***“he starts to react to songs because he recognises them; now at home we’ve started doing a different story each week.”*** It's worth noting that for many of the children with complex needs, Bumblebee is their only opportunity for sensory development with other children.
- **Social skills development**: at Bumblebee, children (that otherwise wouldn't have many opportunities to) learn to share, say hello and greet friends. Children who were not able to previously do group situations become able to interact confidently. There is a ratchet effect, as group situations are where children get familiar with one another and make friends and learn valuable social/life skills, so the more they are able to participate in group situations, the more positive outcomes they will unlock in the future.

- Bumblebee sessions lead to improved **emotional regulation** and **behaviour**, which they need in order to graduate on to other support and activities, particularly school.

4. Personality and identity development

- Through developing relationships with other peers (e.g. learning to take turns) children learn how to interact with other children and, **bouncing off of one another's identities** and needs, develop their personalities. For example, being able to move more physically and participate in activities has allowed Baby B to develop into a bright and outgoing child: *“she loves going to Bumblebee every week; they do the same routine and she has learnt how to always be one step ahead, doing all the actions first and helping the others.”* Since Baby B is more able than some of the children at Bumblebee, she has had the opportunity to learn about helping others: *“if she was only interacting with other children in mainstream settings, she might have never got this opportunity”*; her personality development would have been restricted as a result and *“she may not have got the opportunity to be the kind and outgoing child she is.”*
- Children develop **social skills**.
- Bumblebee gives children the blueprints for **taking pleasure in learning**, through having a sense of achievement and progress, whilst in a group setting, that they might otherwise not have. They can take these blueprints with them into their later childhood and are more likely to enjoy and thrive in education settings in the future as a result.



5. Improved relationship with parents and other caregivers, which contributes to all aspects of the child's development.

- **Bumblebee's sessions build rapport between children and the caregiver that accompanies them:** One foster parent described developing her bond with her foster son; she is now able to practise head control exercises with him so that now he can sit in a wider range of positions: *"those little things that make life worth living"* for both mother and child. In some cases, other care-givers (e.g. grandparents) bring the child to Bumblebee (e.g. if the parents are working), which provides an opportunity to build a strong bond with another key caregiver.
- **Shared experiences and opportunities to bond:** there is lots of eye contact in the songs so Bumblebee provides an opportunity to connect and strengthen the emotional bond between parent/caregiver and their child. Children take the positive shared experience home with them.
- **Behavioural improvements:** Sometimes parents need help to break certain patterns of behaviour. Sometimes parents are asked to step out of the session so that the children can learn how to act without their supervision which goes a long way to improving their independence.

6. Children are ready and able to graduate on to other support

- The developmental outcomes help children graduate onto other forms of support. For example, for Baby B, flourishing at Bumblebee was the catalyst to him beginning to go to other nurseries and daycares, and gradually he has a weekly schedule populated with activities. Now, he goes to two specialist nurseries and two mainstream nurseries. ***"Bumblebee kickstarted all of it, it's been a gradual process"***. A high number of children transitioned into nurseries and day care after completing their journey with Bumblebee, largely down to:
 - Transferable social skills (being more able to build relationships with peers and adults),
 - Improved self-confidence and personality development
 - Ability to adjust to new environments. For example, one of Bumblebee's 'graduates' is now at nursery two days a week with able children. Bumblebee has made her more sociable and confident to talk to other children, and adults. So she is getting on well there - she is happy interacting with different people; she settled in very quickly and the nursery commented on just how quickly.
 - Greater familiarity with classroom culture, and what good behaviour looks like. For example, one child started at Bumblebee being disruptive in sessions and Mum struggled to be firm - but staff have set boundaries, that he has adjusted to be ready for when he goes to school.

What are the outcomes for parents and care-givers?

At first glance, Bumblebee primarily focuses on the needs of the children. However, based on our research we can say with confidence that the needs of parents/caregivers are equally considered by Bumblebee staff. We cannot understate the importance of this: parents/caregivers are always willing to prioritise the needs of their child above themselves which often comes at a cost to their mental and physical wellbeing. Bumblebee acknowledges this risk and utilises every available resource to prevent this from happening whilst also equipping parents/caregivers with the best tools to take care of their children.

1. Improved knowledge, skills and confidence promoting their child's

movement: Bumblebee sessions are designed so that children are accompanied by a parent or care-giver. Parents and care-givers gain theoretical understanding about conductive education and practical tips from staff about how to care for their child, as well as an opportunity to practise. The sessions provide a supportive and encouraging environment for parents to learn and gain confidence, which leads to reduced anxiety, greater independence and a more positive mindset.

- **Reduced anxiety:**

- The more confident they feel supporting their child with movement, the less anxiety they feel. For example, parents receive guidance on how to ensure their child (who perhaps cannot communicate) is sitting comfortably and have the opportunity to practise doing so; implementing this at home, they are able to relax, safe in the knowledge that their child is comfortable.
- Parents and caregivers also worried about doing the wrong thing in physio at home, which often brought on high levels of anxiety. Bumblebee resolves this issue by equipping all parents and caregivers with a personalised methodology for completing physio at home. This is likely to improve the quality of care whilst simultaneously reducing anxiety among parents/caregivers. One parent explained that before Bumblebee, her child used to hate doing physio exercises at home, so it became something that her and her son would dread. Since Bumblebee, the parent is now able to use songs and references to Bumblebee to ensure it's a nice experience: ***“what they're doing is physio but they use songs to make it fun”***. There is reduced tension and no fear of tantrums or arguments.

- **Greater independence:** Parents play a key role in Bumblebee's sessions. Whilst Bumblebee staff provide a high level of supervision, parents are encouraged to build their skills, knowledge and **confidence** by working with, and not over-relying on, the staff. Through building their understanding of key concepts and of their own child, parents gain confidence talking about their child, which enables them to develop positive relationships with daycare providers because they can explain their child's needs confidently.

- **A more positive mindset**
 - With theoretical understanding about conductive education and as well as confidence using particular methods with their child, parents and care-givers develop new thinking patterns that are aligned with the Bumblebee culture: **“we notice that parents often start out wanting to know ‘what’s wrong’ - but after they are here awhile they learn to not worry about that so much”**
 - Parents and caregivers develop a deeper understanding of what is ‘normal behaviour’ by having in-depth conversations with the Bumblebee team; in a nutshell, they learn that *“there is no ‘normal’”*.

2. Direct improvements to emotional health: the Bumblebee team provides emotional support that helps cultivate a positive mindset among parents.

- The kind, forgiving and understanding atmosphere created by Bumblebee offers significant **respite** for parents and caregivers.
- Parents and caregivers feel like they themselves are **cared for** - a rare feeling for many parent carers, : **“They are really kind, they can see if you’re really tired or if you’ve had a bad day and they will help out and do some of the stuff and let you have five minutes to yourself.”** The amount of care that goes into the weekly reports for each child also make parents feel looked after; one parent said the reports serve as a reminder in between sessions that they’re not alone.
- **Regularity and routine:** Bumblebee provides a sense of routine, fostering structure in a “sea” of challenges and uncertainty, and ensuring children have regular contact with professionals - **“without on touching base with people weekly, especially people who really know [Baby S], and who really seem to care - it would be really hard.”**
- **Celebrating small wins to instil a sense of progress:** Children at Bumblebee have unique health conditions and are at different stages of their development, and so there is no right time to reach particular milestones. Instead, there is a strong emphasis on celebrating all achievements regardless of how minor or major they appear. Celebrating ‘small wins’ provides deep satisfaction to the parents and caregivers that negates many stresses associated with caring for a child with a complex need. For example, something as simple as giving eye contact when they do the hello song is a big win for a child that struggles with eye contact, so it should be celebrated. **“It’s taken us a long time, but we’re getting somewhere. In a mainstream group it wouldn’t even be noticed that he’d manage to make eye contact - it’s expected, it’s the norm.”**
- **Support to gain perspective to instil a sense of progress:** A child’s progress can often be difficult to measure as parents/caregivers have a tendency to be preoccupied by present demands and are rarely afforded the opportunity to reflect. Thanks most of all to the weekly reports, Bumblebee prompts parents to take stock of progress and therefore keep positive about the future (and the present!). **“Because we see her every day, and progress is subtle, we are prone to forgetting the progress we have made.”** The

Bumblebee team produces a report on each child after each session, which gets sent home. They take pictures during the sessions too, which parents enjoy looking back on. ***“When she first started, you had to help with every aspect of movement, even help her to keep her feet flat; now she’s all about standing up! It’s easy to forget that.”*** Parents felt they wouldn’t be able to ‘scrapbook’ their child’s progress on their own, because there is so much else on their plates.

3. Parents gain social connection, a much-needed sense of belonging and a self-sustaining community of support:

All parents and caregivers that we spoke to felt a sense of belonging and that they had gained access to a community of support. This outcome was not a primary reason for seeking out Bumblebee, but emerged as one of the most significant outcomes by all parents we spoke to.

- **Loneliness reduction:** Bumblebee reduces isolation and loneliness for most, if not all, parents that engage for a significant period of time: ***“if Bumblebee went up in a puff of smoke, my biggest concern would be how isolated I would feel.”*** Many parents felt that other toddler groups do not provide the opportunity for social connection for parents/carers of disabled children, because of how unique or “niche” the experience of having a child with disabilities is. Parents and caregivers expressed their relief when finally being able to share common concerns with other parents/caregivers who also had a child with complex needs. Relationships between parents and caregivers often blossomed into friendships: one parent explained she had made one particular friend with a parent of a child with similar disabilities, and children on a similar diet; they now take their children to the same nursery. Having been to a couple of events to bring parents together, one parent commented on how being able to talk as parents feels ***“just so good.. our children might have different needs, but we can relate to each other.”***
- Because of the nature of Bumblebee’s work, social connection manifests as a **strong sense of belonging**: ***“it’s a special club; compared with other groups, there is more of a feeling that you belong somewhere.”***
- **Happy memories:** regular group meet ups (e.g. park visits and tea parties) are described as ***“a really important coming together to experience joy and community”***.
- **Community of support:**
 - Most of the parents we spoke to highlighted the importance of the support network they gained via Bumblebee ***“I would feel overwhelmingly lonely and alone without being able to tap into this network of parents/ carers”***. Parents support each other practically and emotionally.
 - As well as benefiting from receiving help, parents delight in being able to offer it: ***“it also feels good to be able to give advice to others; for example, we’re very lucky to be able to afford private physio; it feels amazing to be able to share that information with others.”*** Helping others is good for resilience because

sharing things they have learnt ‘the hard way’ gives purpose to the struggle/hardship experienced by the parent/caregiver.

- **The long-term outcomes for children can have a significant knock on effect on the parents’ social life.** One health visitor gave us the example of a child who had made such excellent progress with and on the back of Bumblebee that he has been able to graduate on to mainstream school and even participate in Sports day *“that mother never thought she would be able to attend a sports day, let alone one at a mainstream school”*.

4. Parents feel practically more supported with logistical challenges and more able to manage their life. A number of parents and care-givers described Bumblebee as a “hive” of information with staff eager to find something out immediately if faced with a new question they don’t know the answer to. They appreciated advice on how to achieve balance between caring and life, as well as recommendations for specialist equipment that can help. Some examples include:

- Advice on how to get an appropriate car seat.
- What to consider when exploring daycare and preschool options.
- Guidance on buying and using foot splints e.g. how to put them on properly and use them at home.
- Assistance to identify the correct specialist chair - *“when kids have a cough, parents are told to keep them on the move, but I can’t do that with [Baby B] because he’s very heavy”*; with the right equipment, the parent can ensure the child get the necessary movement without needing to lift him.
- Exchange of tips and information among parents leads to new ideas for solutions, e.g. one parent reported finding out about funded activities (offering up to £400) and the possibility of sailing as a good hobby for her child, given his abilities and disabilities.

5. Improved access to additional support, which reduces the logistical challenges of daily life.

- **From other family members who can bring the child to Bumblebee:** Because Bumblebee is so actively and closely supervised, the person accompanying a child can be a close family member or alternative caregiver to the parent. This encourages parents to share their workload with more than one care-giver (e.g. grandparents, close family friend or extended family member) which can, over time, reduce feelings of isolation and loneliness whilst also improving coping levels due to having other people stepping into the frame as carers.
- **From other support groups or services,** because, having built up a successful blueprint, parents develop the confidence to participate in other activities with their child.

In particular, having greater confidence talking about their child is crucial for building trust and understanding with other providers, e.g. daycare.

- **From the Bumblebee team**, who make time for chats before and after sessions (unpaid overtime), organise gatherings for parents

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6. Improved relationship with the child or between the child and another care-giver who can therefore help more with childcare duties, as reported under the previous subsection 'Outcomes for Children'.



CHARACTERISTICS OF EFFECTIVE LEARNING

Physical Development

Communication and Language

Personal, Social and Emotional Development

Learning to Read and Write

Mathematics

Science and Technology

Arts and Design

Communication and Language

The Early Years Foundation Stage (EYF) is the statutory framework that sets the standards that all Early Years providers must meet to ensure that children learn and develop well and are kept healthy and safe. It promotes teaching and learning to ensure children are ready for school and gives children the broad range of knowledge and skills that provide the right foundation for good future progress through school and life.

Learning to Read and Write

Mathematics

Science and Technology

Arts and Design

Communication and Language

Physical Development

Communication and Language

Personal, Social and Emotional Development

Learning to Read and Write

Mathematics

Science and Technology

Arts and Design

Communication and Language

AREAS OF LEARNING AND DEVELOPMENT

E. The ‘active ingredients’ making Bumblebee so effective

It is no coincidence that Bumblebee consistently produces such a range of profound outcomes for the children and parents/caregivers. Through discussions with staff, stakeholders and parents/caregivers, we identified key features of the Bumblebee approach - activities, procedures as well as aspects of the culture (e.g. beliefs, values, atmosphere). We noticed that parents and caregivers were able to attribute their positive outcomes to particular features, which enabled us to produce this list of ‘active ingredients’ - key features of the Bumblebee approach that are responsible for its effectiveness.

These ‘ingredients’ need to be protected and valued. They also offer a ‘recipe’ for other organisations that want to replicate the success of the Bumblebee model.

1. Personalised, holistic and strengths-led approach to working with the children:

- Being strength-based means identifying each child’s strengths and opportunities, and leveraging them to drive their progress. To do this, you need **intricate and holistic knowledge of each child** (their physical needs as well as cognitive, social and emotional). For example, one child likes to rescue people, so playing a game where an adult pretends to need help encourages him to engage and move. *“You have to observe children closely to recognise these little openings for getting the most out of the session”*; *“you have different tips and tricks for each one, because each child is so different!”*. **Small groups** enable Bumblebee’s committed team to get to know the children very well, keep track of what each one needs to work on.
- Being **holistic** also includes understanding a child’s family context. Acknowledging the role of the parents/caregivers and environment is vital for working in a strengths-led way beyond each weekly session, because not all strengths and opportunities will be intrinsic to the child.
- The Bumblebee team **focuses on what’s possible rather than what’s not** and sets appropriate, achievable targets accordingly - celebrating small wins along the way. The Bumblebee team leads by example to encourage parents to do the same.

2. Striking a balance between providing hands-on support and promoting independence:

- Bumblebee's team provides a high level of supervision to ensure that the child makes progress. If children work better without parents being in the sessions, parents may be invited to step out of the session. Similarly, if parents need a break: *“they are really kind, they can see if you're really tired or if you've had a bad day and they will help out and do some of the stuff and let you have five minutes to yourself. If you've had some bad news or had a bad night they're there and they can gauge what you need.”*
- Whilst the child's participation and development is priority, the sessions are also designed to provide an opportunity to the parents and caregivers to learn skills and build confidence handling their child. The Bumblebee team provides the necessary encouragement to ensure parents/caregivers participate and as much as possible support them to work with their child (rather than doing it all for them). Sessions are designed to empower parents and build the parent-child bond to promote independence.

3. The centre has a calm and accepting atmosphere, which is non-clinical and appropriately upbeat:

Bumblebee is situated, quite literally, in the middle of a field - far away from a main road or another building. The centre is calm and the atmosphere is accepting and gentle - *“nothing that everybody does phases anybody”* said one mum - yet it is upbeat.

- Parents described walking into somewhere that's **home** - they do not feel like guests, they feel like it's **a space for them**. Because adults feel safe and comfortable, so do children - in a virtuous circle.
- Bumblebee is **calm** and groups are staggered so the centre never gets overwhelmingly busy. For example, one parent tried recently to go to a *“regular toddler group”*, but it's busy and overwhelming, and neither her nor her child enjoyed it.
- There is a culture of **acceptance**: *“I've seen lots of new people come in, nobody is ever judged, nothing is ever too complex; that in itself is an incredibly healing and transformative thing for parents in our situation”*.
- Bumblebee is a **non-clinical** space, and not a nursery either - two environments that parents and caregivers struggle with. Instead, Bumblebee is non-threatening and pressure-free. It's helpful that parents don't have to revisit trauma about medical history etc in order to engage.
- **A culture of not comparing**: in each Bumblebee session, all the children are different. Though they are at similar enough levels to participate in the same session, they're all at different levels and nobody's reaching milestones at the 'right' time.

- There is a fine line between positive thinking and “toxic positivity”, which Bumblebee successfully treads. Whilst being strengths-led is a lot about being positive, **Bumblebee avoids ‘toxic positivity’** (i.e. denying the pain/hardship that parents are experiencing).

4. The staff are warm and authentically kind experts, with lived experience, working together.

“Bumblebee is made up of a wonderful group of women, they’re so lovely and their knowledge is so incredible... They are so attuned to the children and the mums, they just know when you walk through the door if you need a hug; it sounds so simple but it’s just such powerful stuff when you’re going through what we’re going through.” Civil Society Consulting were able to single out four key qualities of the Bumblebee team that ensure the positive outcomes: kindness, expertise, lived experience and team cohesion.

- I. **Warmth, kindness and approachability:** parents and caregivers described, with emphasis, how understanding the team are, and how good they are at listening. *“They’re all just so lovely and wonderful! ...They are really kind.”* The team position themselves as friends and *“they care; they sincerely care!”*
- II. The Bumblebee team are **absolute experts**, having worked with children who have additional needs for almost twenty years. They are:
 - Qualified in Conductive Education and experienced in Physiotherapy thanks to which every child makes some progress.
 - Adept at ensuring a positive experience for the child by ensuring all activities are **fun**, whilst ensuring children are and feel **safe**. For example, the team recognizes the minute before a child gets distressed his imminent need for ear defenders; the team knows each child’s body restrictions, allergies etc.
 - Knowledgeable of equipment, which is key.
 - Extremely knowledgeable of the **local area and health and social care system**: all children are unique but they’ve often got similar needs in terms of physical disability and other things alongside that. The Bumblebee team has personal experience and/or can advise parents about what has worked for other families/children who have had similar needs - such as where other children have moved on to (e.g. nurseries and schools), what the feedback has been, and what things you might want to consider as you try to make a decision about school.
 - Adroit at **communicating with non-verbal children** through body language.
 - Proficient at **interacting with the child-parent dynamic appropriately** - *“you have to go through the parents to get the children; parents need to learn to trust staff and it’s not unusual to have to do some work around supporting mum with letting go.”* The Bumblebee team know when and how to get parents to step out of the session or how to encourage them to join in so that they can learn from the Bumblebee team; in effect, they use ‘[nudge theory](#)’ to break unhelpful patterns of behaviour (although they don’t refer to it by this term).

- Experts in handling children (described as ‘magic hands’) - and they possess the physical strength required! At times, it is a very physical job as some children have significant mobility issues.
- III. All members of the team have not just experience of working with children with disabilities, but **lived experience** themselves. Because of this, their motivation to help children and parents/caregivers ‘runs deep’.
- The team **goes the extra mile** to work flexibly to find solutions. For example, one of the team babysat the child on a voluntary basis so that the parent could go to a hospital appointment. *“The level of care is over and above”* described one Early Years expert from Suffolk County Council. The Bumblebee team are non-transactional, but instead outcome-oriented (i.e. they’re not there to ‘tick boxes’ but are genuinely focused on ensuring outcomes, so they problem-solve to ensure each child/family moves forward). For example, the team links parents/caregivers up with one another when their children have similar needs or they themselves have something in common (e.g. from the same cultural heritage or similar professions).
 - To do this well, the team works **holistically**: *“quite a few of them, like Michelle, have experience of parenting a child with additional needs/disability, so they have such a good understanding of what it’s like for a parent in this situation.”*
 - Since Bumblebee staff are non-transactional, parents *“finally”* feel seen *“as a human being”*. The annual garden party hosted voluntarily by one of the Bumblebee team in particular made parents feel humanised.
- IV. **Team cohesion and rapport** is the glue that ‘brings it all together’. Parents and caregivers also suggested that the harmony between Bumblebee colleagues sets the tone for the atmosphere of the whole centre. Clearly, the team is united behind a common goal of producing the best outcomes for the children. They:
- Share learning and update one another on each child.
 - Have specific roles and specific knowledge - and complementary strengths. For example:
 - Michelle is adroit at putting parents and children at ease and *“very good at explaining what we do”*; she’s also knowledgeable about the medical side of things and the healthcare system.
 - Donna is excellent at working with children with behavioural problems, and their parents as well as children with autism and non-responsive children.
 - Bernadette is a movement expert with *“magic hands”*; she oversees conductive aims and physical development.
 - Lisa is the glue that brings it all together, covering coordination of the centre and charity administration.
 - Have a culture of gravitating to leading on your strengths, and supporting when you’re not leading.



5. Trusted by parents and caregivers: Parents need to be able to trust that Bumblebee has their best interest at heart, otherwise they can't engage well (i.e. follow their guidance and work with them in sessions). Bumblebee's approach (which works) and atmosphere (which is the tonic parents need) builds the trust of parents - the lived experience and expertise of the individuals also increases trust. High trust is also helped by the short waiting time (with Bumblebee working flexibly to ensure those on the waiting list get access to sessions ad-hoc while they wait for a weekly spot becomes available); Bumblebee's authentic determination to help at the very first touchpoint sets the tone for a trusting relationship to develop.

6. Consistency and routine:

- Bumblebee provides a rhythm in being a **weekly fixture** in children and parents' schedules. If for whatever reason children have a gap in their support from the statutory services (e.g. if a child is unwell, they might miss an appointment and then have to wait a

long time before being able to get another) parents and children do not feel like they have completely *“dropped off the radar”*.

- **Semi-structured sessions** hit the sweet spot between predictability and flexibility. Every child settles in at Bumblebee, because it's very structured and the sessions are the same each week. The structured portion of the sessions set boundaries, giving parents a blueprint for how to respond to children's difficult behaviours. However the sessions remain adaptable to the situation - e.g. if children are tired, or if they are particularly enjoying something, the structure is not rigid.

7. Appropriate equipment: Bumblebee is kitted up with excellent equipment that helps with sensory development and physiotherapy, which is not readily accessible for parents of disabled children. For example, since Child S has grown taller, his parents are not able to find equipment of the right size in the home; it is only through having access to Bumblebee's equipment that he can now bear weight on his feet at all.



8. Early intervention: Last but not least, timing is everything. Bumblebee works with children early in their development journey (under age five) which is crucial for long-term impact. The earlier the intervention the better it is for parents too, because many negative outcomes can be prevented from happening in the first place (e.g. if support is provided before any negative thinking patterns become too entrenched, poor emotional health may be averted). As one statutory professional put it: ***“Bumblebee is amazing for families, at a time they desperately need them.”***





F. Opportunities for enhancing and expanding Bumblebee's work

The findings from this evaluation are overwhelmingly positive, so there were limited opportunities identified as to how Bumblebee can enhance its existing work. These are set out below. However, as the saying goes, *“the reward for good work is more work”*, and we ascertained the Bumblebee is uniquely well-positioned to deliver more support to more children and parents. This section sets out a range of exciting opportunities to expand Bumblebee's work. Note, it would not be possible to leverage these opportunities without further funding.

Opportunities to enhance

1. Development of stronger communications could boost the sense of belonging that Bumblebee fosters for parents and caregivers - for example social media presence to develop a stronger online community, or a newsletter to create a sense of community among current and former participants.

2. Production of a one-pager for statutory partners to share with prospective parents and care-givers: *“It would be nice to get some feedback from parents and caregivers to be able to share with potential referrals - or generally provide us with a bit of information on what's happened with the referral, so that we can share the success stories.”*

3. Development of a bank of resources: document questions asked and how they are resolved and analyse these in order to produce a bank of resources, which means the information does not get lost (and could be made available to a wider pool of parents across the whole of Suffolk and North Essex). There were a few suggestions as to what the 'resource bank' could include:

- NHS is very much geared towards 'typical development'; Bumblebee could develop some guidance for atypical development trajectories.

- A directory of other services, e.g. some swimming pools are a little bit warmer; knowing which and where these are is game-changing for parents.
- In the past, Bumblebee had information and videos on their website, showing tips and tricks for physio. Health visitors and those from Early Years at Suffolk County Council felt this resource was very useful to parents and caregivers.

4. Partnership with other charities, statutory services and support groups:

- Allow other volunteer-led services to use the space - e.g. There's no sensory service at all for children with autism, Bumblebee would be really well-placed to either partner with another local entity to develop a playgroup for children with Autism or let other organisations come in and use the building to run their own sessions. More outreach via the groups that parents and caregivers belong to outside of Bumblebee like Ruth's foster parent support group (however, this would require more funding to be able to put on more sessions)

Opportunities to expand

1. Open the centre more for more sessions and/or other types of sessions: as it stands, the centre is open just two days a week - with two sessions on each day. All parents commented on the potential for more and how "crazy" it is to think how many more good outcomes could be produced if the centre was open more. There were a number of suggestions:

- **More sessions** on the other days in the week so that more children and parents/caregivers can access the benefits of Bumblebee.
- **A second programme of activities** - i.e. a second 'curriculum' - to offer some variety. It was reported (second-hand) that some parents find the repetitiveness of the sessions (which are the same songs and movements each week) a challenge, particularly if their children are not making progress. If further funding was secured, Bumblebee is well-placed to develop other activities for children who don't make progress too. Other children make good progress and could benefit from exercising their skills in new and different ways. A second stream could offer some variety to these children.
- **Stay and play** - after sessions, in the evenings or at weekends. Children and parents would benefit from more time at Bumblebee, but further sessions need not be formalised and structured. Parents mentioned that it would be good to have longer in the sensory room at the end of sessions - or the option to come in to spend more time in there just informally (albeit with some supervision).
- **Weekend sessions:** *"as a working parent I feel I miss enough, so I'd love for there to be activities and an opportunity to engage at the weekend."* A couple of contributors to this

parties at the weekend (means-tested renting out of the space).

2. Facilitate sessions for parents (e.g. support groups or regular get togethers). Already, the Bumblebee team matches parents and caregivers up when their children have similar needs, or the parents have something in common (e.g. from the same cultural heritage or similar professions) and puts them in touch. There are ad-hoc coffee mornings and an annual summer party. Supportive friendships between parents and caregivers frequently emerge.

Currently, the Bumblebee team ‘magic’ the time for ‘matchmaking’ out of nowhere, and in effect, do it as volunteers. However, the ‘match-making’ is invaluable and could be properly supported and expanded. For many users, Bumblebee is the main/only opportunity to meet other parents they can relate to; multiple parents explained that they might try to meet up on their own outside of Bumblebee, but life gets in the way, they need a convenor. Given all the intricate knowledge that the Bumblebee team already have about each child and family/household, as well as the level of trust and respect they have from parents, Bumblebee are in an excellent position to convene groups of parents on appropriate themes.

Some specific suggestions were:

- A social support group
- A coffee club once a term where the parents can sit down and chat, with children free to play in the Bumblebee centre.
- For working mums in particular, a few more social things outside of office hours **“would be great”**.

3. Introduce a sitting service: Bumblebee’s semi-structured sessions are focused and transformative for both the children and parents who engage. However, there is also a need for childcare so that parents can get respite and keep on top of the many logistical challenges in their lives. Most parents and care-givers that engage with Bumblebee have a very limited pool of people that can support them with childcare, which creates logistical challenges. The Bumblebee team are qualified, trusted and have the necessary pre-existing relationship with the children.

4. Satellite groups in the community: Many parents do not drive; Bumblebee has a fantastic (peaceful) location, but it is not accessible. Numerous representatives from the statutory sector suggested that Bumblebee could run satellite sessions in accessible locations, although it would not be possible for them to bring with them all the equipment from the centre. Another good solution could be to work with statutory partners to develop a travel system.

G. Recommendations

Recommendations for Bumblebee

1. Explore funding opportunities to support Bumblebee's work at the current capacity.

In the organisational strength review that was conducted in parallel with this independent impact evaluation, we learnt that whilst Bumblebees team's remuneration is benchmarked at the industry standard, it doesn't appear to be reflective of their level of expertise and value. Though easier said than done, we recommend that Bumblebee continue to review the benchmark and explore further funding to be able to continue its work at the current level/capacity in order to safeguard the current outcomes.

We recommend protecting and valuing the 'active ingredients' that make Bumblebee a success, almost all of which hinge on the team delivering the sessions and running the centre. When we interviewed the team, they clearly love their jobs and feel valued. However, they are talented and experienced and their skills may be sought-after by other organisations. We recommend continuing to cherish this team and invest in their retention.

2. Explore funding opportunities for expanding Bumblebee's work.

We recommend the Bumblebee team and trustees review the 'opportunities to enhance and expand' sections of this report. We'd recommend growth be gradual (e.g. by taking a 'two by two' approach, bringing in no more than two new initiatives at the same time) so there will be a need to prioritise - either by what's most needed, or what's most achievable. More than one contributor recommended exploring what good things came out of going online during the pandemic that could be duplicated.

Note: many of the opportunities to expand Bumblebee's work entail putting on more sessions. However, the fact that there are limited sessions is likely to affect the way that people engage with Bumblebee - they value it and prioritise it because they know there are limited spots and opportunities. This contributes to the smooth-running of the centre. Parents and care-givers have busy lives and competing priorities. Given that Bumblebee's rural location will never lend itself to Bumblebee being a drop-in centre, we recommend keeping specific/targeted opening hours.

3. Open Bumblebee's doors to partnership opportunities:

Bumblebee has an excellent reputation among statutory health professionals and daycare providers, nurseries and schools. We recommend Bumblebee keeps its doors open to partnership opportunities given the

new integrated care system and how well Bumblebee already aligns to the approaches to health that the system advocates for. Bumblebee is also likely to have synergies with other charities working on adjacent themes; in particular, [Suffolk Family Carers](#) support parent carers. We recommend exploring opportunities to work together in support of the parent carers that use Bumblebee's service.

4. Optimise processes for producing weekly reports: The weekly reports are cherished by parents and key for producing many of the positive mental health outcomes for parents. However, they take considerable time and energy to produce and the data that gets recorded is not used to its full potential. We recommend that the report system could be digitised, to:

- Free up capacity,
- Enable Bumblebee to access the aggregate data for easy impact reporting in the future.

5. Develop an impact measurement framework that can be easily embedded into current registration and reporting procedures: on the back of producing this report, Civil Society Consulting will work with the Bumblebee team to produce an outcomes framework. Each child has their own individual 'programme of learning' and individual aims, so have different indicators of success, which has made it difficult to create an impact measurement framework. The outcomes framework will use the outcomes identified in this evaluation and aim to be embedded into weekly reporting procedures or other existing processes.

6. Prioritise equity and inclusion: We recommend exploring who doesn't come to Bumblebee and why. Explore how the centre could be more *actively* equitable and inclusive to those from ethnic minority backgrounds and those on lower incomes without access to transport: *"I don't know what happens for those out of range of Bumblebee who don't have a car, but I know that more people would attend if they could."* Physiotherapists commented that whilst many families love it, for others the routine is too much; However, Bumblebee is working really well for the families that have engaged with it, so it would not be advisable to bend itself out of shape in case it lost its appeal to its current users.

Recommendations to ICS and other statutory partners

1. Support Bumblebee to sustain itself, or better still, enhance and expand.

Bumblebee is complementing gaps in statutory care in Suffolk and North Essex, producing developmental outcomes for children and mental health outcomes for parents. The work is inherently preventative, adding even more value to the system when you factor in the long-term impact. However, Bumblebee does not receive any public funds; much of its excellent work is achieved thanks to individual/ private grants and donations, as well as of course the National Lottery Community Fund.

The charity has a strengths-led approach to working with children and families holistically that works, which is helped by the centre having a calm and accepting atmosphere that is non-clinical. The team position themselves as professional friends and have the trust of parents/caregivers, unique expertise and authentic motivation due to their lived experience.

As equal partners in the new system, the East Suffolk and North Essex ICS should explore how The Bumblebee Children's Charity could be better supported/valued. Better still, we recommend these statutory partners explore how Bumblebee's opportunities to enhance and/or expand its work could align with the system's health priorities.

2. Replicate the Bumblebee model elsewhere. East Suffolk and North Essex are fortunate to have Bumblebee Children's Charity - and the highly effective model is something for the whole system to be proud of. As well as looking to scale Bumblebee's work in the area, we recommend that the successful approach is shared with other ICS that may wish to replicate the successful model.

3. Explore how statutory service providers and nurseries/schools could shadow and learn from Bumblebee staff. In the past, Bumblebee has had an offer to spend a day with daycare providers, supporting with new-starters that have previously gone to Bumblebee and upskilling daycare staff. In a similar vein, the Bumblebee are very willing to have practitioners to visit them - and learn together. This offer is not taken up as much as it could be - potentially due to capacity. Further opportunities for partnerships are likely to emerge once the individual practitioners make connections and get talking.

