

CHILDREN AND YOUNG PEOPLE OVERVIEW AND SCRUTINY COMMITTEE

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SURE START CHILDREN'S CENTRES AND EARLY CHILDHOOD OUTCOMES 2013-14

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Summary

The core purpose of Sure Start children's centres is to improve outcomes for young children and their families and to reduce inequalities experienced by families in greatest need. This report provides information about the role that children's centres play in delivering early help and securing good outcomes for children in Medway.

"There is overwhelming evidence that tells us that the first few years in children's lives shape their future development, and influence how well children do at school, their ongoing health and wellbeing and their achievements later in life. In addition, it is widely acknowledged that a strong focus on the first few years of children's lives leads to huge economic, social and emotional benefits later on, both for individuals and for society as a whole."

Supporting Families in the Foundation Years, Department for Education & Department of Health, 2011

1. Budget and Policy Framework

- 1.1 The Childcare Act 2006 places a duty on local authorities, working with their NHS and Jobcentre Plus partners to improve the wellbeing of young children. Specifically, there is a reciprocal duty to improve outcomes for children in their early years and reduce inequalities between disadvantaged and other families with young children through the provision of integrated early childhood services, under the leadership of the local authority's Director of Children's Services and Lead Member for Children's Services.
- 1.2 The 2013-15 Council Plan priority that "children and young people have the best start in Medway" includes recognition of the role of children's centres and early years services in helping children to be safe and cared for, to succeed in learning and to thrive.

2. Early Childhood Strategy

- 2.1 Early childhood is a distinct phase, from pregnancy until the age of five years, inspected and measured in its own right, and with specific statutory duties and legislation.
- 2.2 Additionally, the progress and attainment of children during the early childhood phase has a direct bearing on progress and attainment in later childhood and beyond, as it evidentially provides the foundation for future learning and development.
- 2.3 The key objective of an early childhood strategy is to ensure that all children attain a good level of development, and that inequalities within the life chances of the population are reduced, such that children are ready for school, and are safe, healthy, and engaged. This is also the basis of the statutory duty in law – which rests with the local authority – and is the measure of success within the variety of inspection frameworks led by Ofsted.
- 2.4 Important by-products are the engagement of families, collaborative working by agencies, and embedding of early help approaches, that continue as the child grows older.
- 2.5 An overarching strategy is based upon an understanding of the pathways experienced by children and their families across the five years from conception through to commencing full time school. Whereas for most families a pathway of universal services and experiences will lead to good outcomes, for some families a pathway with additional targeted services and early help will be needed to ensure children do not fall behind, whilst for the most vulnerable children and families with complex needs, the early childhood pathway will involve specialist services and support.

3. Sure Start Children's Centres

- 3.1 Sure Start children's centres provide the core of the framework by which we improve outcomes and reduce inequalities in child development and school readiness; parenting aspirations and parenting skills; and child and family health and life chances.
- 3.2 Alongside, high quality early years services in schools, pre-schools and nurseries, health provision, voluntary organisations, and a skilled and effective workforce, children's centres are at the heart of the pathways.
- 3.3 A children's centre is a physical building and dedicated staff team but, much more than that, it is also a network of targeted services across a wider local area, and a collaborative team of professionals employed by a variety of statutory agencies and community organisations, working with local families and volunteers.
- 3.4 There are 19 Sure Start children's centres in Medway. Each locally managed centre is commissioned by the local authority via an annual service agreement and receives a devolved annual budget. The scale and focus of each individual centre reflects the community in which it is located. A differentiated funding regime based upon a formula means that each commissioned children's centre

receives a budget that reflects the relative level of deprivation of the area it serves, the number of families and children under 5 years of age, and the concentration of families living in disadvantaged circumstances.

4. Ofsted Inspection Framework

- 4.1 Ofsted has been inspecting children's centres since 2010, but made changes to the way it inspects in April 2013. It now places greater emphasis on the accountability of the local authority as the responsible body for children's centres, irrespective of whether they have commissioned these services to other private, independent or voluntary providers to run them on their behalf.
- 4.2 The new inspection framework judges the effectiveness of integrated early childhood services (the statutory duty that resides with the local authority) across all delivery partners. The approach adopted by HMI, the evidence base, and impact data, extend way beyond the work of the individual centre and staff team. Instead the impact of early education, health, employment, adult learning and social care interventions are all subject to intense scrutiny, and the effectiveness of this matrix of services is the basis of the inspection grading.
- 4.3 Ofsted itself says that the new framework is much more demanding for centres. It focuses on the impact centres are having on young children and their families, especially those that the centres have identified as being most in need of help and support. In the first seven months of the new framework, the proportion of centres judged good or outstanding nationally has been lower than under the previous framework (at just over 50%).
- 4.4 However, in Medway all centres inspected under the new framework have been judged good or outstanding. Overall, Medway has 2 graded as outstanding, 9 good, and there are 4 that were graded under the old framework as satisfactory. 4 centres are still to be inspected. The proportion of good or better children's centres in Medway is now better than the national figure. Ofsted's gradings are evidence that young children's outcomes in Medway are positive and improving.
- 4.5 Her Majesty's Chief Inspector's most recent annual report says: *"From the information available to us from our inspections of children's centres and from our relationships with local authorities, it is clear that improvement is possible, and that the leadership role and the strategic decisions taken corporately are significant in driving improvement"*

4.6 Core Purpose

Statutory guidanceⁱⁱ prescribes what local authorities and statutory partners (particularly commissioners of health services) **must** do because it is required by legislation, and **should** do when fulfilling statutory responsibilities.

The core purpose of children's centres is to improve outcomes for young children and their families and reduce inequalities between families in greatest need and their peers in:

- **Child development and school readiness** - supporting personal, social and emotional development, physical development and communication and language from pre-birth to age 5, so children develop as confident and

curious learners and are able to take full advantage of the learning opportunities presented to them in school.

- **Parenting aspirations and parenting skills** - building on strengths and supporting aspirations, so that parents and carers are able to give their child the best start in life.
- **Child and family health and life chances** - promoting good physical and mental health for both children and their families; safeguarding; supporting parents to improve the skills that enable them to access education, training and employment; and addressing risk factors so that children and their families are safe, free from poverty and able to improve both their immediate wellbeing and their future life chances.

5. Pathways For Children and Families

5.1 In Medway, our focus seeks to ensure

- **Universal pathways** leading to positive child health outcomes and school readiness for the large majority of Medway's children
- **Targeted pathways** leading to reduced inequalities and improved child health outcomes and school readiness for children from disadvantaged households (pupil premium) and those in need of early help
- **Specific pathways** for vulnerable children and families, including those with high needs (complex SEND), those where social care support has been required (child protection and ChIN), and looked after young children.

5.2 Medway's children's centres play a central role in ensuring that appropriate pathways are in place for every young child and every family in Medway. These differentiated pathways mirror the "Progressive Universalism" approach of the Healthy Child Programme.

6. Performance Outcome Measures

6.1 Medway's children's centres each provide services in accordance with an annual agreement and service specification, with the objective of contributing to an improvement in specific performance targets for children and families resident within its catchment area.

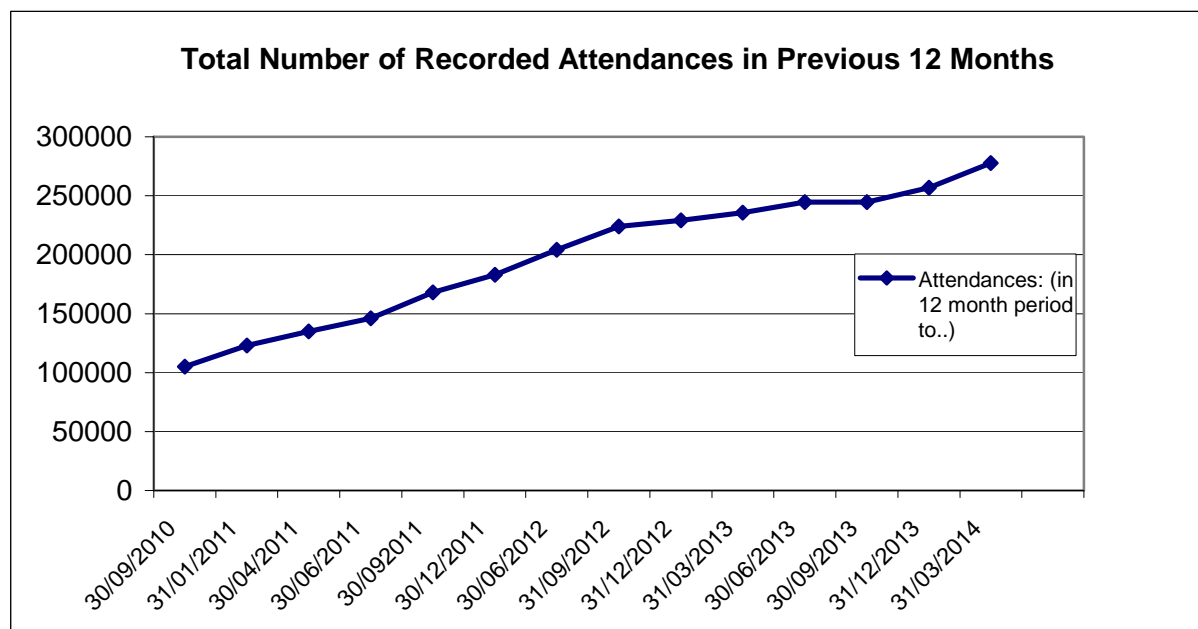
6.2 Overall performance outcomes in Medway in 2013-14

Key Performance Measure	2013-14 Performance	Direction
To increase the % of children who achieve a 'Good Level of Development' in the Early Years Foundation Stage Profile	57% Medway 52% England	Improving
To decrease the % of children in reception year who are obese	9.9% Medway (2012/13) 9.3% England (2012/13)	Improving
To increase the % of mothers who are breastfeeding at 6-8 weeks.	39.8% Medway (Q2 2013/14) 47.2% England (2012/13)	Improving

NB These data are reported on a regular basis to the Health and Wellbeing Board, together with other performance measures such as breastfeeding initiation and smoking during pregnancy.

6.3 Contact And Engagement Rates

The number of attendances by children (aged 0-4) and their families at Sure Start children's centres in Medway has increased in every quarter over the past three years. In the 12 months from September 2009 to September 2010 there were 100,000 attendances. In the 12 months from April 2013 to March 2014, there were over a quarter of a million attendances (277,000).



6.4 The total number of different children aged 0-4 years attending a Medway Sure Start children's centre in the twelve months of 2013-14 was 11,191. This compares with a figure of 10,649 last year, and 8,781 in 2011-12.

6.5 The increase over the past two years ago reflects the improved information and data sharing arrangements between key partners, particularly NHS agencies, enabling targeted engagement with a far higher proportion of vulnerable families. As a proportion of the population cohort as a whole, 64.7% of children aged 0-4 attended a Medway Sure Start children's centre in the past year. The majority of those children not attending a children's centre are already at school or pre-school, meaning the rate of attendance by 0-3 year-olds is far greater.

6.6 An important development established since the last report to Committee has been the introduction of an information and data sharing protocol with Medway NHS Foundation Trust for the sharing of data on new births in Medway. This has led to a marked increase in the contact and engagement rates with the families of newborn babies, with a consequent uptake in support services offered by children's centres. Across the 12 months of 2013, 80% of newborn children in Medway registered with their children's centre. 60% of babies born in 2013 attended sessions and activities at the children's centre – averaging 10 visits per newborn child/parent.

7. Alignment with the Healthy Child Programme

7.1 The Healthy Child Programme (HCP) is the early intervention and prevention public health programme that lies at the heart of the universal service for

children and families. At a crucial stage of life – from pregnancy to five - the HCP offers every family a programme of screening tests, immunisations, developmental reviews, and information and guidance to support parenting and healthy choices – all services that children and families need to receive if they are to achieve their optimum health and wellbeing.

- 7.2 The expansion and transformation of the health visiting service is probably the single most important current development to extend and enhance the impact of children's centres in Medway. Having negotiated an alignment of strategic and operational delivery with our colleagues in Medway Community Healthcare, health visitors are now at the heart of the "team around the children's centre" multi-agency approach to supporting families.
- 7.3 The national Healthy Child Programme framework specifies key contacts by health visitors during pregnancy and the early years. In Medway, a particular focus has been placed on ensuring a comprehensive coverage of antenatal visits, and on a contact at 24-30 months (2½ years) to conduct a child developmental review.
- 7.4 Rates of attendance have risen rapidly in the past year, and a snapshot as at February 2014 showed that 69% of all children had been seen at a 2½-year developmental review in Medway. The large majority of reviews are carried out in the supportive environment of the local children's centre. The most vulnerable families are offered a home visit.
- 7.5 The development review involves the health visitor and the parent using an "ages and stages" assessment tool to identify any areas of concern in the child's wellbeing and development. In Medway we have developed a unique programme of onward support and intervention – the *Grow Together* pathways.
- 7.6 Since 2012, Medway has been one of only five local authorities to be working directly with the Department of Education and Department of Health in designing and testing how best to bring together the HCP "developmental review" of children with other assessments carried out in nursery settings (known as the "EYFS progress check"). Our local model of health visitor led reviews followed by Grow Together support in children's centres has been influential in determining the future direction of the DfE/DoH programme.
- 7.7 The Health and Social Care Act gave local government responsibility for local population health improvement and created local health and wellbeing boards. Commissioning of children's public health services from age 5 to 19 was transferred to local government in April 2013; but commissioning of 0-5 services – in particular health visitors - was retained by NHS England to deliver the new service vision by April 2015, before commissioning of these services is also transferred.

The DoH says: *"We need to ensure that commissioning of public health services for 0-5s is effective and embedded with commissioning of other early years services. We are therefore committed to ensuring that the transfer of commissioning of health visiting services to local government from 2015 is as successful as possible."*ⁱⁱⁱ

- 7.8 Locally, there has been success in enabling midwives to work from local children's centres. The local authority has provided ICT facilities that allow midwives to directly access medical records such as blood test results whilst delivering antenatal appointments in the children's centre.
- 7.9 Families say they want services under one local roof, and the "team around the children's centre" of health visitors, midwives, play and learning opportunities and family support and guidance is now a reality in Medway.

8. Early Education for Two Year-olds

- 8.1 The extension of free nursery education to disadvantaged and vulnerable children at the age of two has been a high profile programme for the Coalition government. The objective is to address inequalities in children's earliest learning skills, evident in the under achievement of the poorest children when they commence school. Entitlement is akin to that of the Pupil Premium strand within schools – encompassing those eligible for free school meals, looked after children, those with a SEND/EHC plan – but also includes a wider cohort of families who are in work but on below average income.
- 8.2 The DfE originally estimated that 690 children would be eligible for a place in Medway in the first phase of the programme (academic year 2013-2014). However, in what appears to have been a significant forecasting error, this has now been revised to 910 children. In September 2014, the eligibility is extended to low income working families, and the DfE currently forecasts that a total of 1490 children in Medway will be entitled to places at this point.
- 8.3 In the first two terms since the introduction of places, the number of children taking up a place has risen to almost 630. Places may be taken in any of 99 registered group settings, and with 42 registered childminders. Since July last year we have created (or are in the process of creating) additional places for 860 funded two year-olds using DfE capital grant of £560k.
- 8.4 Key issues & compliance with duty: The expansion of entitlement in September 2014 presents significant pressure on the capacity of the market to deliver places, particularly in the most disadvantaged localities in Medway such as central Chatham and north Gillingham – where the very large majority of families will all be eligible. The programme in these areas is akin to adding an entire school year-group, but without the accompanying scale of capital works.
- 8.5 If the addition of free nursery education for children aged two years is to have a positive impact, it is important that it is offered in high quality settings with skilled staff, and it is imperative that it is accompanied by support for parents to provide the conditions for good early child development provided by children's centres. Children's centres play a crucial role in both identifying and handholding eligible families into local early education provision, and supplementing the free 15 hours of group play and learning with targeted support for families.
- 8.6 The daycare nurseries located at four of Medway's children's centres have placed a particular focus on providing a large number free two-year-old places for local low-income and disadvantaged families. This change, which coincided with a move away from providing subsidised full-time childcare places in accordance with guidance from central government, has markedly increased the

number of local children accessing high quality places. The introduction of this change has necessitated change in staff working hours, and a reduction in the number of full day childcare places. It initially resulted in some concern and controversy from existing users of the childcare places at All Saints children's centre in the summer of 2013. However, all families were supported to secure alternative local childcare, and the reconfiguration was successfully completed in September. All Saints is now offering free early education places for 96 local children aged two and three years at its two sites, which is making a major contribution to improving the life chances and school readiness of local children in central Chatham and Luton.

9. Early Help

- 9.1 A central, and increasingly important, function of children's centres is the delivery of short interventions of bespoke support for families. These "Early Help" pathways encompass a broad set of activities and services that build resilience and prevent children's and families' difficulties escalating. It is carried out by teams, services and individual practitioners working in and around our universal and specialist offers.
- 9.2 The nature and range of caseloads covers a spectrum of need that includes domestic abuse, perinatal mental health, financial and housing difficulties, substance misuse, social isolation, relationship breakdown and attachment difficulties. At any given time there are approximately 300 – 350 families that are being supported with a more intensive and tailored Early Help package by a Medway Sure Start children's centre.
- 9.3 Professional supervision of children's centre staff delivering Early Help packages is commissioned from All Saints children's centre. A qualified social worker undertakes regular supervision across all 19 children's centres, overseen by a senior social worker who leads the All Saints "Switch" (family support) team.
- 9.4 Whilst the use of CAF is widespread within children's centres, the introduction of the Framework-I system during 2014 will ensure that targeted work with families of young children is properly captured and recorded within a framework that is used consistently by professional agencies.
- 9.5 Clear procedures and protocols are in place for the referral to and involvement of social care professionals where there are safeguarding concerns or children in need (CIN). Within the social care Triage and Assessment team, routine checks are made to ensure the involvement and knowledge of the local children's centre when a family with a child under five years is referred.
- 9.6 The council's early years service works closely with the social care team and the Virtual Headteacher to ensure coordination of children's centres and early years settings in supporting pathways for looked after children.

10. School Readiness

- 10.1 The Early Years Foundation Stage (EYFS) and the summative measure at the end of EYFS (immediately prior to the start of Key Stage 1) were new for 2013. The "good level of development" (GLD) measure for a child is at a demonstrably

higher level of attainment than that for the period to 2012 – the implication being, that settings and schools need to be teaching more at a younger age.

10.2 Children are defined as having reached a good level of development at the end of the EYFS if they have achieved at least the expected level in:

- all the early learning goals in the prime areas of learning (personal, social and emotional development; physical development; and communication and language) and;
- all the early learning goals in the specific areas of mathematics and literacy.

10.3 57% of children in Medway attained the good level of development in 2013, as compared with 52% in England as a whole. This places Medway in the top quintile for performance.

10.4 42% of children in Medway who are eligible for free school meals attained the good level of development, as compared to a national figure of 36% nationally, placing Medway as the 20th highest performing LA out of 149.

10.5 These attainment data for children aged 5 years are the culmination of a strategic plan to improve early childhood in Medway that originated a decade ago. It reflects a combination of strands of concerted improvement activity:

- workforce development and upskilling of practitioners, to ensure they understand how children learn and have the skills to do so
- environmental improvements, ensuring children learn in developmentally appropriate environments
- expanding the role of schools in delivering early years education. From fewer than 10% of schools having nursery classes in 1998, to now more than half of Medway schools having nurseries/EYFS classes.
- differential targeting of interventions and support - ensuring greater resource in the most disadvantaged communities where children under-attain
- a strategic embedding of Sure Start children's centres at the core of communities in partnership with health services, each with a clear focus on improving child outcomes through working with parents and families in a planned manner - the universal gateway to targeted services
- a clear understanding of the importance of teaching throughout the early years foundation stage, and a strategy of ensuring that school leaders are empowered to monitor and improve children's learning within the EYFS in their schools, through rigorous and supportive assistance by the LA team

10.6 Ministerial announcements herald a new “on-entry” assessment will be introduced for children at the start of Year R from September 2015. Whilst this is neither at the start nor the end of the EYFS, and whilst the nature of the assessment has yet to be described in detail, it can be safely assumed that this will be the benchmark measure in future, both of progress and attainment at the end of the “pre-school” phase, and for measuring and monitoring progress and effectiveness across the school

10.7 Last month Ofsted announced that inspectors would re-introduce a separate grade for early years within schools: *“Given the importance of Nursery and Reception classes (which together make up what is referred to as the Early Years Foundation Stage or EYFS) in a child's development, the significant resources involved, and the distinctive nature of that stage of education, we*

propose introducing a separate graded judgement about the overall effectiveness of Nursery and Reception classes in the inspection framework for maintained schools and academies. We would also require inspectors to write a discrete paragraph evaluating this provision.”^{iv}

- 10.8 In a further policy development in March, the Prime Minister and Deputy Prime Minister announced that Pupil Premium funding would be introduced in 2015-16 for children in nursery education aged three and four years who are from the most disadvantaged backgrounds.

11. Better Start Lottery Bid

- 11.1 “Medway – A Better Start”^v is the biggest single bid for Lottery funding for early childhood – which, if successful, is worth up to £42million over the next ten years. The Big Lottery Fund is wanting to trial new approaches that will improve social and emotional development, communication and language development, and nutrition.
- 11.2 The programme will deliver a range of evidence and science-based programmes for families from pregnancy to starting school, focusing on an area of central Chatham and Gillingham. Our bid centres on using local children’s centres as the base for a range of peer-support programmes, and professionally led interventions such as Grow Together and the Family Nurse Partnership.
- 11.3 From over 140 initial expressions of interest, Medway was one of 50 areas invited to bid, and has been shortlisted to the final 15. The bid consortium is led by national charity Family Action, with Medway Council, Medway NHS Clinical Commissioning Group (CCG) and representatives of parents, carers and community organisations.
- 11.4 The final bid presentation was made by David Holmes CBE (chief executive of Family Action), Dr Peter Green (Medway CCG), Barbara Peacock (Director) and a local parent, on 8 May, with the results expected in June.
- 11.5 If successful, the Better Start programme will immediately bring significant new money into Medway, funding a physical expansion of five of our children’s centres. However, even if our proposal is not one of those to be awarded funding, the bid itself underlines the commitment and passion across organisations to invest in preventative programmes, and to work together to improve the foundation of children’s lives.

12. Financial Information

- 12.1 Local authority expenditure on early childhood services comprises statutory funding for nursery education places in schools and pre-school settings, and funding for services that improve child and family outcomes including children’s centres. Overall, the budget for early years in 2014-15 is £19.28million. This budget comprises £14.6million within the Dedicated Schools Grant (DSG) early years block, and £4.6million from the council’s General Fund.
- 12.2 In setting the annual budget for 2013-14, Medway Council agreed a reduction in expenditure on early years services from the general fund from £6.4 million to £4.6million per annum. However, the impact of this budget reduction was

temporarily offset by the simultaneous increase in the Dedicated Schools Grant (DSG) early years block, to fund the statutory provision of free nursery education for children aged two years which in the period 2012-2015 will increase from £0.5m to £3.55 million.

- 12.3 Whilst frontline devolved budgets for each of the 19 children's centres have remained at 2012 levels (i.e.: there has been no budget reduction or increase), the impact of public sector financial restraint on other early years services continues to be felt. Widespread efficiency savings, and service changes including the reduction of support posts and local authority staff, have ensured that Members' commitment to protect children's centres has been honoured.
- 12.4 The 38% increase in attendances over the past two years has been achieved in the context of no increase in budget, and is indicative of continually improving the effectiveness and impact of the work of each children's centre.
- 12.5 Front-line services have been aligned to ensure that expenditure explicitly will improve outcomes and reduce inequalities in child development and school readiness; parenting aspirations and parenting skills; and child and family health and life chances. This has meant that some areas of activity – such as offering subsidised full day childcare – has necessarily stopped, to be replaced by more impactful services for children and families.
- 12.6 In April 2012 additional financial scrutiny of expenditure by Medway's children's centres was introduced in agreement with the Deputy Leader. Clear and consistent financial reporting arrangements are set out in the binding "annual service agreement" with each children's centre. This ensures that budgets are exclusively used for the purposes intended, and cannot be used to underpin other services (such as the school budget of the host body), or to create excessive reserve balances.

13. Conclusion

- 13.1 Medway's children's centres are a central part of the local authority's strategy for giving children the best start in life. They play a key role in supporting children's learning and development, in improving health and wellbeing, and in preventing the escalation of difficulties that would require more expensive interventions if left unchecked. They are the core building block around which all of the public agencies and organisations involved in early childhood and family support are organised in Medway.
- 13.2 In the four years since the development phase of programme was completed, contact and engagement with families has more than trebled and continues to rise. The large majority of young children born in Medway, or living in Medway, are users of their local children's centre.
- 13.3 Children's attainment at the age of five and school readiness in Medway are at an all time high, although the inequalities borne of poverty and disadvantage are still clearly evident. Ofsted are finding that Medway's services for early childhood are increasingly delivering good and outstanding outcomes.

13.4 The task for the next four years is to make certain that the integrated strategic approach we have developed in Medway continues to deliver positive improvements, and to adapt to the changing statutory and financial landscape.

14. Recommendation:

Members are asked to note the report.

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Background papers

Notes:

ⁱ Ofsted Early Years Annual Report 2012/13 (April 2014)
<http://www.ofsted.gov.uk/about-us/annual-report>

ⁱⁱ Sure Start children's centres statutory guidance. Department of Education (April 2013)
<https://www.gov.uk/sure-start-childrens-centres-local-authorities-duties>

ⁱⁱⁱ National Health Visitor Plan. Department of Health and Public Health England (June 2013)
<https://www.gov.uk/government/publications/health-visitor-vision>

^{iv} Ofsted Inspection Consultation (March 2014)
<http://www.ofsted.gov.uk/resources/consultation-introduction-of-separate-graded-judgements-early-school-years-and-sixth-form-september>

^v Medway – A Better Start
<http://www.medwaybetterstart.co.uk/>