

Best Start Strategy Consultation

Governing Body meeting

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5 March 2015

Author(s)	Dr Margaret Ainger, CCG GP Kate Laurance, Senior Commissioning Manager Presenter: Tim Furness, Director of Business Planning and Partnerships
Sponsor	Dr Nikki Bates, CCG Governing Body Lead for the Children and Young People and Maternity Portfolio
Is your report for Approval / Consideration / Noting	
For consideration and comment	
Are there any Resource Implications (including Financial, Staffing etc)?	
None identified at this stage	
Audit Requirement	
<u>CCG Objectives</u>	
To improve the quality and equality of healthcare in Sheffield	
To work with Sheffield City Council to continue to reduce health inequalities in Sheffield	
<u>Equality impact assessment</u>	
Not undertaken at this stage	
<u>PPE Activity</u>	
The development of the strategy has taken in to account two years of engagement and consultation with service users, families, the local community, voluntary and faith sectors	
Recommendations	
The Governing Body is asked to consider and comment on the draft strategy and offer the CCG's Children and Young People and Maternity Portfolio direction as to how best develop taking the strategy forward.	

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1. Introduction / Background

1.1. A paper outlining the Best Start Strategy came to Governing Body in December 2014.

1.2. The Governing Body is asked to consider the full strategy as part of the consultation process and its development.

2. Content

2.1 Best Start is a joint Local Authority and Public Health Strategy that is being developed with key partners in health, education and the voluntary sector.

2.2 The key drivers for the development of the strategy include:-

- Sheffield Joint Health and Wellbeing Strategy
- Child Poverty Strategy
- Early Years Foundation Stage
- Health Child Programme
- Building Successful Families

2.3 The strategy has been developed in partnership with a wide range of stakeholders.

3. Recommendations

The Governing Body is asked to consider and comment on the draft strategy and offer the CCG's Children and Young People and Maternity Portfolio direction as to how best develop taking the strategy forward.

Paper prepared by Kate Laurance, Senior Commissioning Manager

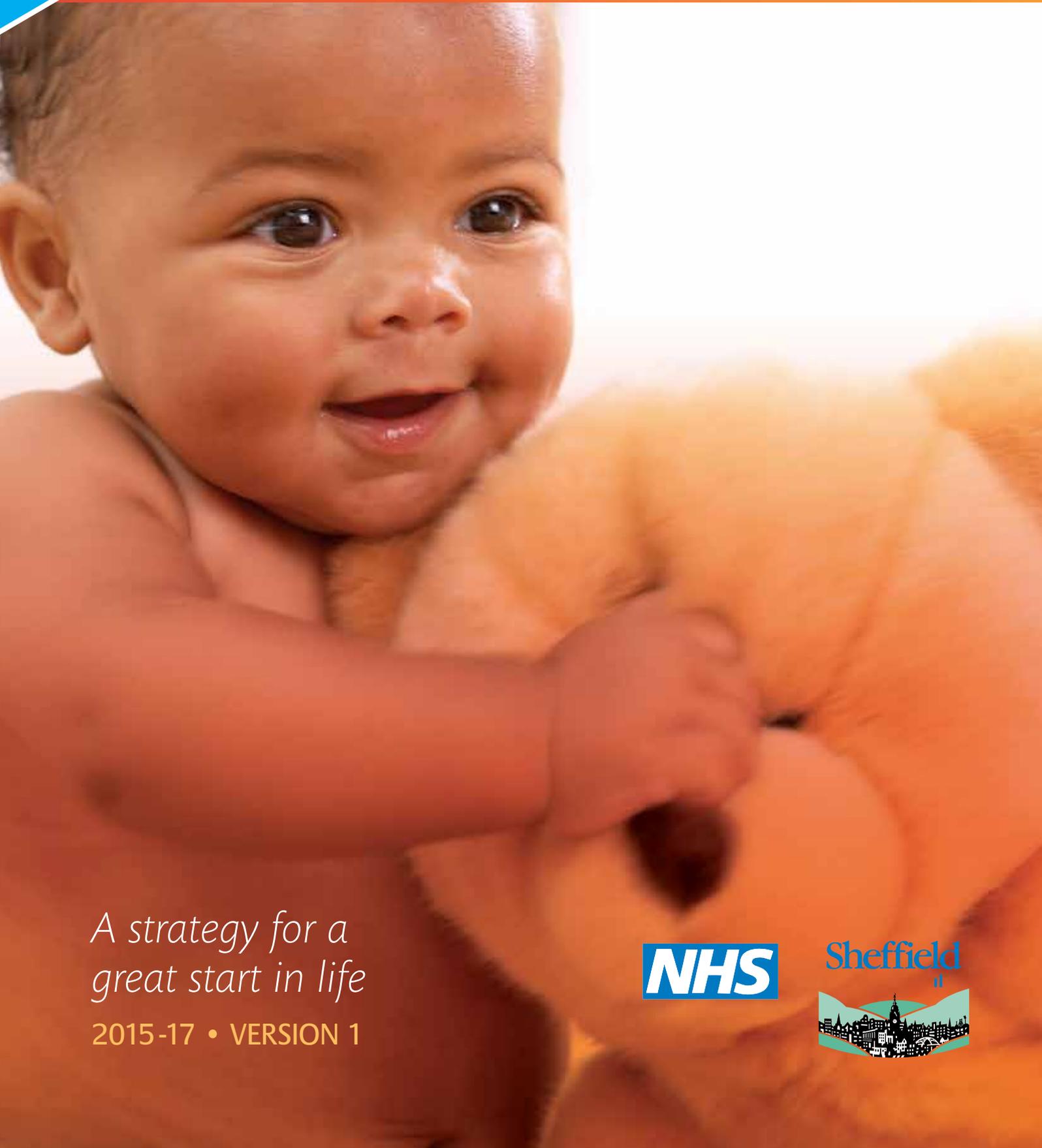
On behalf of Dr Nikki Bates, CCG Governing Body Lead for the Children and Young People and Maternity Portfolio

24 February 2015

DRAFT

Best Start

SHEFFIELD



*A strategy for a
great start in life*

2015-17 • VERSION 1



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Foreword

Welcome to Sheffield's 'Best Start' strategy for the delivery of Early Years' services – 'a strategy for a great start in life'. This is a joint strategy prepared by the Local Authority with Public Health, and builds on the existing relationships with schools, the health sector, private, voluntary, community and faith sectors.

Children in Sheffield deserve the best start in life and what they experience in their earliest years is the key to their success in adulthood. This strategy sets out our ambitions for children and describes how we will reshape services. By working together we will make the much needed improvements to outcomes for children in the city.

From 1 October 2015, Local Authorities will take over responsibility for commissioning 0-5 Public Health services (specifically Health Visiting and Family Nurse Partnership).

This transfer has brought about an opportunity to use the Public Health outcomes framework as a driver for shaping our integrated strategy and commissioning intentions.

Sheffield is at the forefront of developing new ways of working. It has strong and vibrant communities where newly arrived families are welcomed and new and diverse cultures are embraced. Building on our experience as a city which supports and encourages community partnerships, this strategy will give us the potential to deliver services more flexibly and sustainably and with reduced bureaucracy, which will result in higher quality output. This is reflected in the 5 key drivers which are:

1. Sheffield Joint Health & Wellbeing Strategy ¹
2. Child Poverty Strategy ²
3. Early Years Foundation Stage (EYFS)
4. Health Child Programme (HCP)
5. Building Successful Families ³

¹ <https://www.sheffield.gov.uk/caresupport/health/health-wellbeing-board/what-the-board-does/joint-health-and-wellbeing-strategy.html>

² <https://www.sheffield0to19.org.uk/professionals/strategy/Sheffield-s-Child-and-Household-Poverty-Strategy.html>

³ <https://www.sheffield.gov.uk/your-city-council/policy--performance/what-we-want-to-achieve/corporate-plan/tackling-poverty-and-increasing-social-justice/building-successful-families.html>

Our philosophy is aligned with our vision for a fairer city, one that builds on the strengths of our communities and citizens to create the best environment for the best start in life. This strategy is being published at a time of continuous change and challenge, with significant policy change and opportunity including the effects of the revised Early Years Foundation Stage Ofsted Framework and the transfer of Public Health to Local Authorities with the implementation of the Healthy Child programme.

In recent years it has become evident that the experience and outcomes for local people can be very different. Inequalities in early learning, early achievement, health and wellbeing have led to a gap in the achievement of children from disadvantaged homes compared to those more advantaged. It is one of our main objectives to reduce these inequalities across the city.

We will focus on building positive and successful relationships by achieving a cultural shift in the understanding of the importance of pregnancy, babyhood and infancy through to the end of the foundation stage. Evidence tells us we must focus on secure relationships with key adults and established routines in the first months of a child's life, to make sure our children can flourish in their school years and be able to access opportunities as they move into adulthood. All children need a supportive and nurturing environment and to be protected from harm and this needs to begin in the antenatal period and continue throughout childhood.

Through our engagement with families and the voluntary community sectors we know there is the will, skills and understanding to drive and shape the design and delivery of an integrated Early Years' Service, working alongside all partners.

To inform this strategy we have listened to families over the last 2 years, implemented outcomes from our Early Years' review, and our 'Call for Views' and more recently a restructure of the Early Years' services in the Local Authority.

We have identified what is needed to build up local community capacity and resilience, and want to embed a cultural shift across the community to offer collaborative working, quality improvement and active and vibrant partnerships to develop ideas and engage families.

We will respond to the increasing birth rate, the increasing Free Early Learning (FEL) for 2 year olds and the changing demographics across the city to ensure high quality flexible childcare. This strategy will be integral to the wider Public Health priority of encouraging good health and wellbeing throughout life.

We will make it a priority to fulfil these ambitions for every child in Sheffield.



Councillor Jackie Drayton

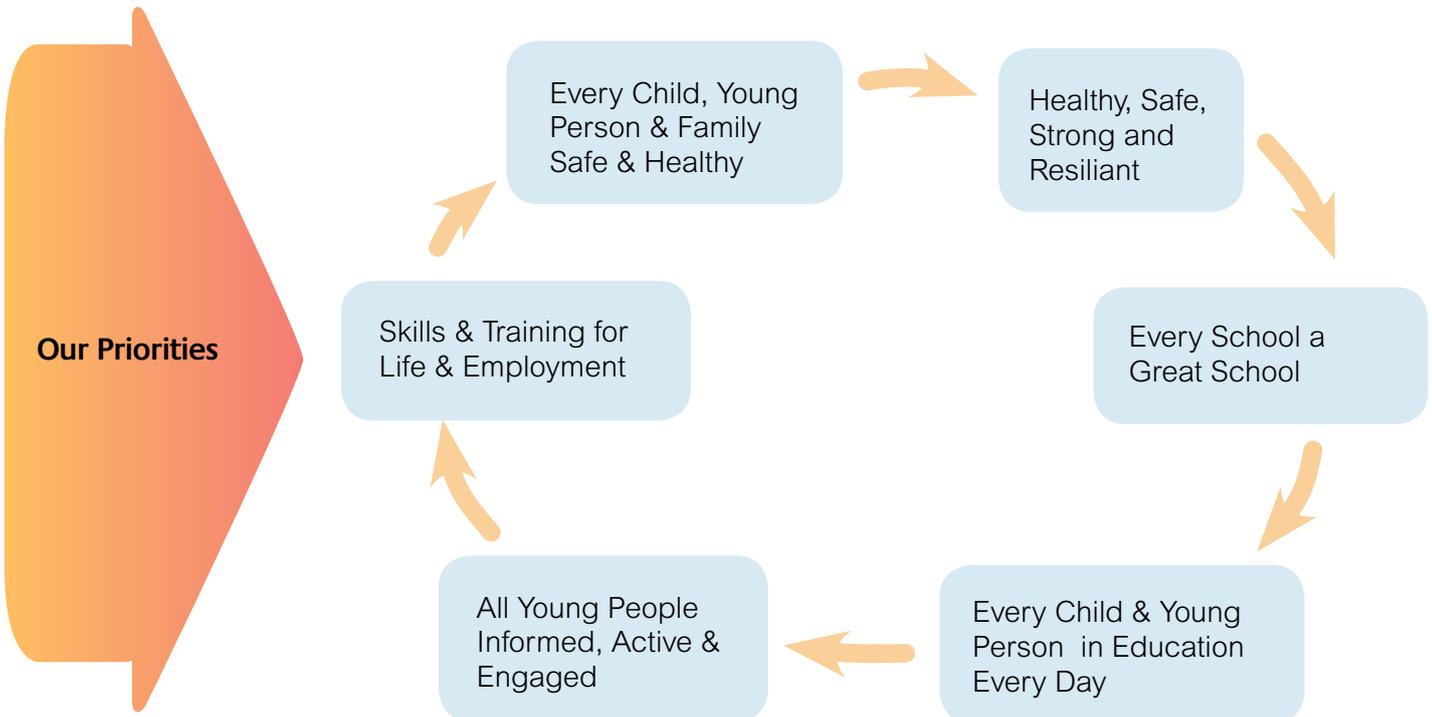
Cabinet Member for Children, Young People and Families



Our Overall Vision We will make sure all children have access to services that support healthy outcomes and every child is ready for school and life.

Our Ambitions for Sheffield

- Every Child, Young Person & families achieve their Full Potential
- Raising Expectations & Attainment
- Enabling Enriching Experiences for all Children & Young People



How

- Access to Play Learning & Support
- Access to early health & support
- Early Intervention / Prevention
- Improving the quality of Early Years provision
- Whole household approach
- Community engagement

Our Aims

- To ensure high quality childcare, play, learning & development
- To support families to become healthy & resilient
- To work in partnership with the voluntary & statutory agencies.

Our Objectives

- Delivery of high quality universal services
- Develop Early Years Best Start Teams in Children's Centre Areas
- Integrated front door for families to access services



The **Early Years** Vision

Our vision is that all children in Sheffield are:

- Happy, safe and healthy
- Inspired and enabled to reach their potential
- Ready for school and for life

We recognise that the future is dependent on families building strong relationships, feeling supported and living within caring and health promoting communities.

Our Priorities for action

We will

1. Empower parents, families and carers to be resilient, effective and independent
2. Improve early intervention and prevention and early identification for children and families in need
3. Improve access and coordination of health and wellbeing initiatives for children and families
4. Provide integrated flexible services to provide effective learning and childcare for all children and families
5. Engage communities to influence and play a positive role in shaping local activities and services.
6. Ensure the early years workforce has the knowledge, skills and support that will enable children to reach their full potential

The Early Years Foundation Stage (EYFS) Framework sets the standards that all providers must meet to ensure that children learn, develop well and are kept healthy and safe. It promotes teaching and learning to ensure a child's "school readiness"

Partnerships with communities developing in each ward will have a key role in influencing the vision, shaping and delivering support and services

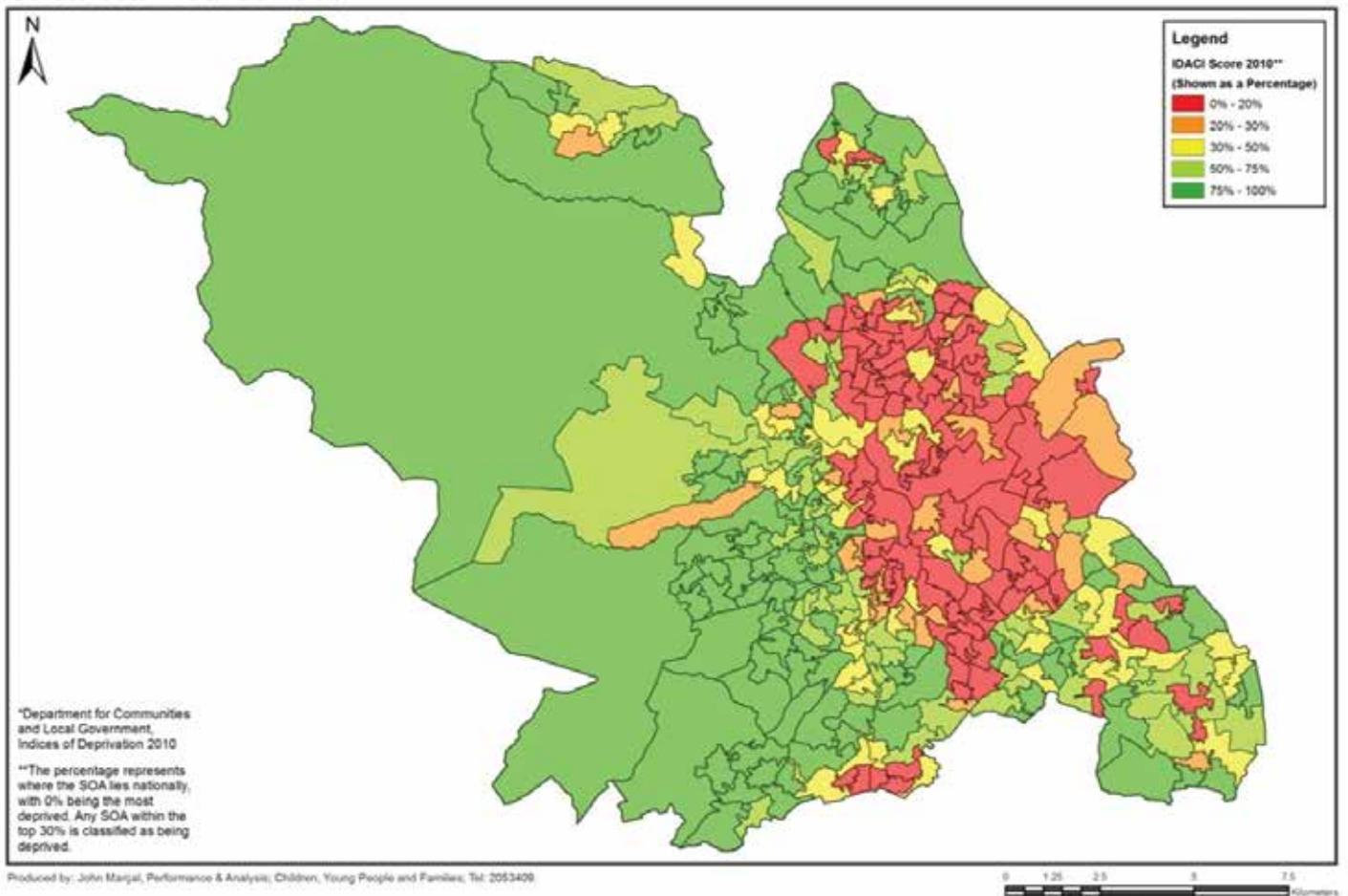
The Healthy Child Program supports families from pregnancy to provide safe, secure and appropriate care to infants. Through understanding the parent's needs, supporting their understanding of their infant, offering advice to boost parenting capacity, reviewing children's development, offering healthy living advice and immunisations - all services that children and families need to receive if they are to achieve optimum health and wellbeing.

Sheffield – Our local context

There are currently 33,600 children under 5 in Sheffield including 6,839 two year olds (Autumn Census 2013)

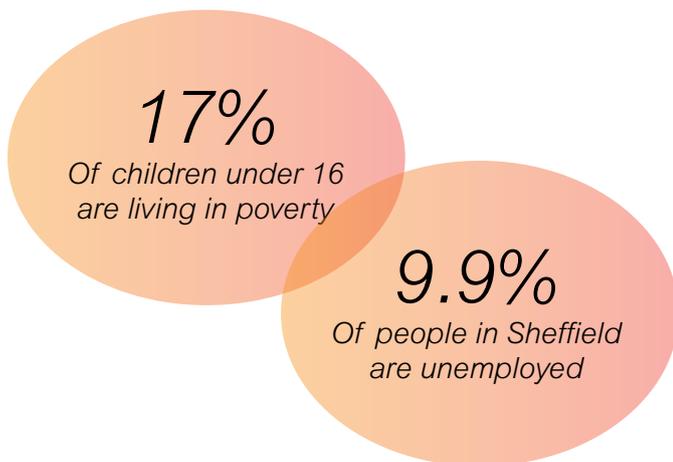
Map of Deprivation in Sheffield

Sheffield - IDACI 2010*





Priority 1: Empower parents, families and carers to be resilient, effective and independent



Why is this important

- Children growing up in healthy, stable and nurturing family environments are more likely to be better prepared for school and life, and to experience better outcomes
- Parenting is a key factor influencing children's early social and emotional development, and there is a clear link between parenting practice and child anti-social behaviour
- Evidence that shows that the early caregiving environment and in particular parenting mediates around 50% of the impact of many of the contextual factors (for example, poverty) which influence children's early development including wellbeing.
- Parental confidence and engagement is important in terms of early speech, language and learning

Where are we now

- National research suggests that up to 15% of families may struggle to provide their infants with safe, secure and stimulating relationships. This means up to 4700 infants in Sheffield may be at risk of disorganised attachment.
- Around 20% of people in Sheffield live in relative poverty (below 60% of median income) at any one time. In 2012 this included 23%

of all Sheffield children. Almost two thirds of children living in single parent families live in poverty.

- 125,000 [22%] Sheffield people live within areas ranked as the most deprived tenth nationally, and 47,000 [8%] live within the least deprived tenth nationally.
- Children's centre areas cover all parts of the city and provide access a range of universal and targeted care, support and activities from pregnancy right through to when their children start school.
- Sheffield provides evidence based parenting programs such as Incredible Babies and Triple P which support parenting in the early years and there are opportunities to access informal parenting support within children centre areas.
- There are a variety of ways parents can give their views on current activities and support in Sheffield including a parents' assembly which currently has over 800 members

What are we going to do

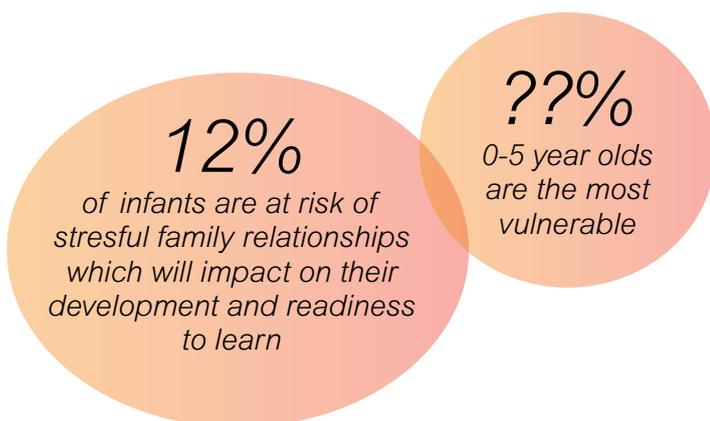
- Children's Centre areas will take a cross sector approach (including GP consortia, information and advice organisations, schools and voluntary and community sector organisations), offering an extensive range of effective support options for all including the most vulnerable families.
- Play, learning and development opportunities will be available to all parents. This offer will be co-ordinated across the city through the Best Start teams
- Evidence based, high quality parenting programmes will be made available to help parents in developing positive and fulfilling relationships with their children.
- Both employed peer support and volunteering opportunities will be made available in all children's centre areas, so that members of local communities can share skills and knowledge, help reduce social isolation, improve families' resilience, health and wellbeing

- Early years providers will identify harder to reach families, making sure they understand what early education and childcare choices are available and can reach an informed decision about their preferred option
- The Household and Child Poverty Strategy will put in place measures to tackle the root causes of poverty and give children the best possible chance of a poverty free future

Impact and Outcomes

Outcomes	Headline Measures	2015 - 2016	2016- 2017
Children’s Centre areas will take a cross sector approach (including GP consortia, information and advice organisations, schools and voluntary and community sector organisations), offering an extensive range of effective support options for all including the most vulnerable families.	Children’s centre registration and reach	Numbers to be confirmed	
Evidence based, high quality parenting programmes will be made available to help parents in developing positive and fulfilling relationships with their children.			
Opportunities to increase Parents employability	Number of parents achieving accredited qualifications in essential skills such as literacy numeracy and ESOL through the ‘Start Up’ programme		
Increase in volunteers			

Priority 2: Improve early intervention and prevention and early identification for children and families in need.



Why is this important

- Providing support to children and families at the earliest opportunity improves outcomes later in life, this is supported by evidence (Allen, Munro)
- Where problems have been identified early it is more likely to prevent situations from escalating and ultimately reduces the need for intensive specialist help or provides direction for the right level of support needed in a timely way.

Where are we now

- 0-5’s across the city has high levels of vulnerability and 53% of all children subject to

a child protection plan (CPP) are aged 5 and under.

- The number of 0-4's are projected to grow over the next few years and based on previous years the growth is expected to be in the more deprived areas of the city
- Multi Agency Support teams (MAST) based in localities across the city worked with 10,000 families in 2014, a high percentage were households with children 0-5. The main reasons for intervention are neglect, family dysfunction, domestic violence, mental health, school/ nursery attendance and parenting support.
- Use of Family CAF is increasing, but is used comparatively low for families with 0-5

What are we going to do?

- Continue to develop our services around early intervention and early help for families
- Improve the mental health and well-being of infants and their care givers.

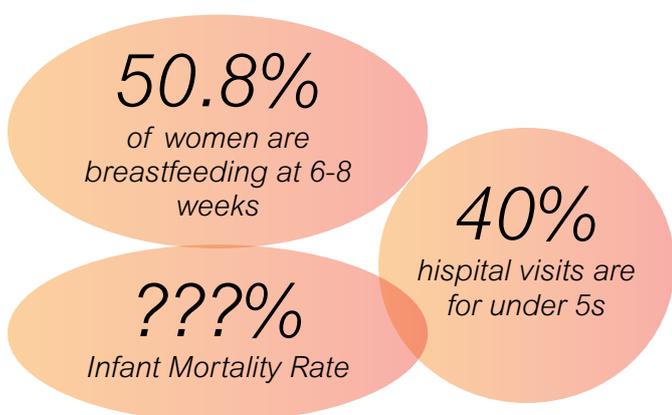
- Ensure that clear and consistent information is available to all parents regarding the community, universal, targeted and specialist services which are offered.
- Offer local support through Maternity services, GP's, Health Visiting within Children centre areas.
- Support access to high quality early learning, engage the most vulnerable 2 years old and identify those families who need help.
- Bring together local early years 'Best Start teams' in children centre areas to work in a co-ordinated way and improve links with partner organisations in the community and voluntary sector. Work jointly with mental health and disability services and develop a shared approach to service delivery and support.
- Effective outreach and sustained engagement with the wider community with a particular focus on disadvantaged children



Impact and Outcomes

Outcomes	Headline Measures	2015 - 2016	2016-2017
MAST referrals?		Numbers	_____
Mental health support?		to be	_____
Reduce referrals to social care for 0-5's		confirmed	_____
Monitor number of FCAF's initiated for young children and subject/nature of referral			_____
Increase numbers of families accessing information and services in Children centre reach			_____
Increase number of parents participating in programmes or educational activities / qualifications			_____

Priority 3 : Improve access and coordination of health and wellbeing initiatives for children and families



Why is this important

- The early years lay the foundations for later resilience in investment during this period has considerable benefit in terms of potential cost benefits
- Universal and targeted support in line with the Healthy Child Programme should be fully commissioned and universal provision provides key opportunities to identify families at risk or in need of greater support
- Poor maternal health during pregnancy increases the risk of birth complications, stillbirths, low birth weight and poor mental health for the child

- Breastfeeding protects babies and mothers against many illnesses and provides the best nutrition for babies
- Primary prevention of obesity should begin in infancy with the delivery of interventions aimed at improving children's eating and activity patterns

Where are we now

- Sudden infant death rates are higher in Sheffield than nationally and concentrated in more deprived areas
- Smoking during pregnancy is still above the national rate and there are wide differences at community level in the proportion of women who are smoking 'at delivery'.
- Breastfeeding rates in Sheffield are good and are above the national average but wide inequalities exist within the city and continue to widen.
- There is currently a high use of children's emergency care and the rate of emergency admissions of young babies is of concern.
- Emergency admissions rate (09/10) for respiratory conditions in 0-4 year olds in Sheffield is highest in England. Local data show that the highest use of A&E attendance in Sheffield is from the most deprived areas

where rates are up to 50% above the city wide average.

- Sheffield teenage pregnancy rates are lower than ever – although still above the national rate.

What are we going to do

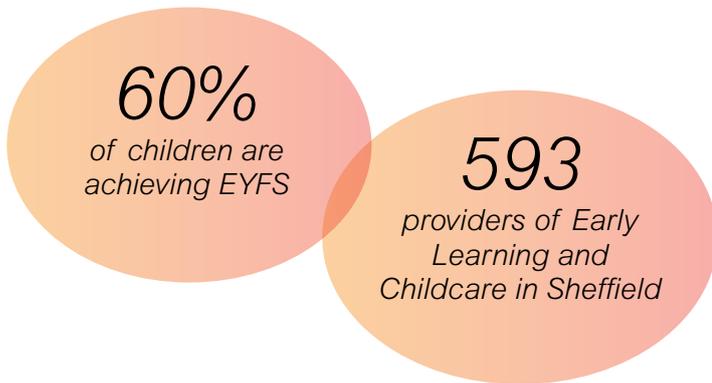
- The Infant Mortality strategy delivery plan will continue to take forward actions to address associated risk factors including reducing smoking, breastfeeding, safe sleep, consanguinity, early antenatal booking, child poverty and teenage pregnancy
- Start Well Sheffield will support families in making healthy diet and lifestyle choices to manage and reduce the incidence of childhood obesity

- Improve early identification and pathways for low level maternal mental health needs
- Continue to develop integrated Best Start teams operating through children’s centre, creating strong links between midwifery, health visitors, GPs maximising opportunities for collaborative working
- Continue to share learning from and develop the Family Nurse Partnership
- Achieve transfer of commissioning for health visiting from NHS England to Sheffield City Council using this as an opportunity to establish clear shared understanding of roles and responsibilities in delivering the Healthy Child Programme

Impact and Outcomes

Outcomes	Headline Measures	2015 - 2016	2016- 2017
Reduction of under 18 conceptions	TBC	Numbers to be confirmed	_____
Reduction Infant mortality			_____
Smoking status at time of delivery			_____
Increase in percentage of women ‘booked in’ with maternity services at 12 weeks			
Increase in percentage of mothers who receive a first face to face antenatal contact with a Health Visitor at 28 weeks or above			
Increase in women accessing Pregnancy Birth and Beyond			
Increase in breastfeeding initiation and prevalence at 6-8 weeks			
Increased vaccination coverage			
Reduced tooth decay in children			
Reduction in numbers of children who are obese or overweight (in Reception) aged 4-5 years			
Reduction in A & E attendances <5s			
Increase in number of women supported by FNP			
Reduction in referrals to speech and language therapy			

Priority 4 - Provide integrated, flexible and high quality effective learning and childcare for all children and families.



Why is this important?

- The earliest experiences of a child's life from 0-5 have an enormous influence on later life chances. A holistic approach is required to 'this age of opportunity' to enhance the lives of babies, children and their families. Support, advice and early learning services should be available to all families with children under 5 with a particular focus on conception to aged 2.
- It is essential for all children to make good progress in their early development, that there is early identification of any problems, and support for these children through universal and more specialist services.
- High quality learning and childcare, support through good parenting and stimulating environments will improve the 'school readiness' of children and shape the foundations for later life.

Where are we now

- It is widely reported that many Sheffield children start school well below expected levels of development for their age, and prime areas of the Early Years Foundation stage (EYFS) results show the most vulnerable areas of attainment to be reading, writing and numbers. Concerted efforts have been made and the

outcomes for Sheffield's children at the end of the 2012/13 academic year was favourable and in line with national results at 60% achieving acceptable levels at the EYFS.

- In Sheffield the attainment gap which is a calculation of the difference in attainment between the average child in Sheffield and the average child in the lowest attaining 20% has been very high, however at the end of 2012/13 the gap measure was 41 % this narrowed to 37% for 13/14 and is a strong positive trend.
- Current take up of children accessing their entitlement for free early learning (FEL) for 3 and 4 year olds is 93% compared to average take up of children across England which is 96%. In autumn 2013 this equated to 6,775 aged 3 and 6,771 aged 4.
- FEL for 2 year olds is accessed only by those families who meet the criteria (based on free school meals entitlement), in Autumn 2013 there was a total of 1,150 children aged 2 accessing their entitlement out of 1,758 who were eligible. This is steadily increasing due to regular marketing information and interest from schools to develop provision for younger children.
- There are 593 providers in Sheffield; this includes schools, private, voluntary, community and child-minders. Of these 593 providers 260 provide FEL places for 2,3 and 4year olds. 78% of child-minders out of 368 and 76% of group providers out of 167 were judged as good or outstanding in their latest Ofsted inspections.
- The number of children with English as an additional language is increasing every year and there is a growing need for universal provision to respond to the changing demographics of the city and the number of children with significant speech and language delay.
- Speech and language acquisition on entry to the EYFS is very unequal across the city,

although Sheffield’s speech and language results were close to the national average; this masks the number of children from language poor homes.

What are we going to do?

- Develop collaborative arrangements through a ‘hub’ approach in localities, between providers from the PVI sectors, schools, LA and contributing partners. This will develop ‘Best Start’ teams from a range of employees to work together, focus on agreed outcomes, share policies and practice and maintain sustainable provision within local communities.
- Prioritise service delivery and appropriate interventions and early help to the most vulnerable children ensure children with additional needs or disabilities are supported in their local areas.
- Increase the take up of vulnerable 2 year olds taking their entitlement, and support providers to offer high quality provision for the youngest children.
- Ensure high quality of provision is flexible, consistent and available across the city with the ‘Best Start’ practitioners sharing good practice and joint working with schools to review support to all providers.
- Provide opportunities for continued professional development, by joint activities, training and support to a skilled and motivated workforce. The ‘hub’ approach to be used to develop professional and learning environments in localities.
- Promote a consistent and comprehensive approach to measuring and recording children’s progress at key transitions. Develop the joint 2 year old Health Visiting and EYFS assessment which will inform a baseline for children going into early year’s provision. This will identify issues early on and inform parents and practitioners where and what support.

Impact and Outcomes

Outcomes	Headline Measures	2015 - 2016	2016- 2017
Increase in uptake of FEL for 2/3/4 year olds		Numbers to be confirmed	
Narrowing the attainment gap			
Development of 2 year joint assessment			
Involvement of parents in their children’s progress			
Continued development through ESCAL and other speech and language programmes, making training and tools available to practitioners in all sectors			
Increase in number of early years settings and schools judged good or outstanding by Ofsted.			
Development of ‘learning hubs’ in localities			

Priority 5: Ensure the early years workforce has the knowledge, skills and that will enable children to reach their full potential



Why is this important

- A competent, skilled and compassionate workforce can make a difference to children's development and ensure families engage in activities and support systems when required
- The workforce can work more effectively together if they have shared knowledge and language as the needs to best protect children and given them a best start
- It is important that people working with vulnerable children and families have the knowledge, skills and support they need in order cope with the demands of working with high risk families and retain their compassion and professionalism
- A workforce that is appropriately resourced and supported will be best able to fulfil their role, contribute to service improvements and have greater retention rates and less staff absence

Where are we now?

Additional training other than the core training offer for early years workforce includes:

- Quality improvement in childcare setting in response to the expansion of 2 year FEL
- Understanding two year olds, ESCAL (Every Sheffield Child Articulate and Literate) 6 sessions, Community of Practice, CAMHS core skills four sessions with Child Care Team

- Inclusion and Learning Services - Quality improvement in EYFS Training brochure
- Early Years Inclusion
- Health Visiting
- Motivational Interviewing, Perinatal Mental Health , Ages and Stages etc., Restorative Supervision, Education, Child Health Policy, CAMHS core skills
- HENRY Train the Trainers: Starting Well: (healthy eating and exercise for the really young) parenting programme
- UNICEF baby friendly initiative: equips staff to support women to make best choices antenatally/postnatally : delivered to maternity, health visiting and early years 0-5s workforce
- Attachment and Attunement training - Over 3,000 practitioners have received training on critical importance of attunement and regulation and the critical importance of infancy but this has been delivered ad hoc.
- Safeguarding training

What are we going to do?

- We want to be sure that people working with children and families have the knowledge, skills and support they need in order cope with the demands of working with high risk families and retain their compassion and professionalism
- Important for all agencies involved in supporting families including the wider workforce e.g. Housing and Police to understand the critical importance of infancy – Outcome tiered Baby Matters training
- Good understanding of multi-agency working and resources available for families
- Enable workforce to listen and respect communities, families and children needs
- Strengthen inter-agency and multi-disciplinary working – clarity of role and referral pathways

Impact and Outcomes

Outcomes	Headline Measures	2015 - 2016	2016-2017
<p>People working with children and families have the knowledge, skills and support they need in order cope with the demands of working with high risk families and retain their compassion and professionalism</p>	<p>Practitioners feedback re supervision and line management arrangements</p> <p>Audit of learning needs</p> <p>Promote reflective practice</p>		
<p>All agencies involved in supporting families including the wider workforce e.g. Housing and Police to understand the critical importance of infancy</p>	<p>Outcome tiered Baby Matters training</p>		
<p>Enable workforce to listen and respect communities, families and children needs</p>	<p>User feedback</p>		
<p>Strengthen inter-agency and multi-disciplinary working</p>	<p>Clarity of role and referral pathways</p>		

Delivery Model - Our Offer to Families

This offer will provide all families with a programme of support tailored to meet their needs. Within each Children's Centre area, locally based teams will work together to deliver a range of services to provide support through pregnancy upto admission to in school. This will combine the Healthy Child Programme and the EYFS Framework and will follow the tiered approach based on the national "Health Visitor Implementation Plan 2011- 2015: a call for action". This is outlined below:

Community Universal Services

The Healthy Child Programme, EYFS framework and other care/early learning services will be implemented to support all parents and carers to access to a range of universal services. This will involve a planned programme of contacts and services for all families to ensure their well-being, development and safety and include interactive feedback from the users of the following services.

- Maternity services
- Health visiting
- Information services
- Preparation for birth and beyond
- Early Years activity groups and parent groups
- Early Years Foundation Stage provision for 3 / 4 year FEL
- Breast feeding support
- Volunteer support
- Schools/Private/Independent/ Voluntary nursery provision
- Attainment and attachment
- GPs
- Vaccination and Immunisation
- Dental and Pharmacy service

Universal Plus (Targeted Services)

Additional services from the extended Best Start teams that a family might need for a specific length of time, intervening early to prevent problems developing or worsening. For example packages include parenting support, breastfeeding, behaviour or disability. This will include interactive feedback from the users of the following services.

- Parent Education Classes
- 2 Year Free Early Learning (FEL)
- Peer Support – HENRY
- Health Visitor Universal Plus
- Maternity
- SEND support services
- Baby incredible years (parenting programme)
- Volunteer support
- Doula (teaching peer support)
- GPs

(Universal Partnership Plus) Specialist Services

Targeted services for vulnerable families requiring on-going additional support from the extended Best Start Teams. For example families at a social disadvantage, adults with mental health or substance misuse issues where there are safeguarding child protection concerns or children with a disability of complex needs. This will include interactive feedback from the users of the following services.

- Family Nurse Partnership (FNP)
- Volunteer support
- Maternity specialists
- Health Visitor Universal Partnership Plus
- Stepping Stones
- Key worker support
- Speech and language/portage interventions
- Minding the baby / NSPCC
- Access to specialist services
- ASD/Educational psychologists
- NHS Paediatric Team
- GPs



Best Start Support Pathway

Preparing for my arrival



The mother's own physical and emotional health during pregnancy influences the child's future health and development.

I am new to the world



The new born is amazing at learning. The brain is growing at the most incredible rate and babies learn from the interactions they receive from their caregivers. They need sensitive, safe and appropriate care to flourish.

Now I am 1



One year olds are great communicators and understand more than they can say, it is important to be attuned to their needs.

Bounty Pack - You and Your Pregnancy
Stakeholder Forum / Community Partnerships
Parenting programmes Webster Stratton
Safety Package
Adult Learning Workshops
Basic Skills Workshops
Cleaning and Hygiene Support - Referral
Family Nurse Partnership
Antenatal Clinics
Breast feeding / Healthy Eating Support Groups
Pregnancy & Healthy Early Years - Volunteers

Parentcraft
Confidence Building / Assertiveness
Budgeting & Debt Management Workshops
Benefits Advice & Support
Job Club
Great Places Housing Advice
Basic First Aid for your Baby
Aromatherapy Classes
Aqua Natal Classes
Substance Misuse Support / Referrals
Domestic Violence Support / Referrals
Smoke Stop Support / Referrals
Prevention Support Contact in the Home
Prevention Support Contact in the Centre
Intervention Support Contact in the Home / Referrals
Doula Volunteer Programme / Referrals
CAD (support with food and cots etc.)
Counselling Sessions

Access to Childcare - Families Information Service (FIS)
Stay / Play & Learn Sessions
Home Learning Packs
Reading and Booksharing Workshops
Baby Lets Play
Round About
Bounty Pack - You and Your Newborn/Family Pack
Stakeholder Forum / Community Partnerships
Parenting programmes Webster Stratton / Triple P
Safety Package
Adult Learning Workshops
Basic Skills Workshops
Cleaning and Hygiene Support - Referral
Family Nurse Partnership
Health Visiting Clinics - 6 - 8 Week Visit
Midwifery Post-natal Visit
Infant Feeding - Volunteers
Pregnancy & Healthy Early Years - Volunteers
Baby Yoga
Baby Massage

Family Relationship
Confidence Building / Assertiveness
Budgeting & Debt Management Workshops
Benefits Advice & Support
Job Club
Great Places Housing Advice
New Parents Group / Bringing Up Baby
Basic First Aid for Your Baby
HENRY - Nutrition Programme - Referral
Perinatal Mental Health Support
Substance Misuse Support / Referrals
Domestic Violence Support / Referrals
Smoke Stop Support / Referrals
Prevention Support Contact in the Home
Prevention Support Contact in the Centre
Intervention Support Contact in the Home / Referrals
CAD (support with food and cots etc.)
Counselling Sessions

Specialist Home Based Childcare - Referral
ASP/Educational Psychologists
NHS Paediatric Team

Access to Childcare - Families Information Service (FIS)
Stay / Play & Learn Sessions
Home Learning Packs
Bookstart Corner
Stakeholder Forum / Community Partnerships
Parenting programmes Webster Stratton / Triple P
Safety Package
Cooking on a Budget
Adult Learning Workshops
Basic Skills Workshops
Cleaning and Hygiene Support - Referral
Family Nurse Partnership
SEN Support
Healthy Child Programme - Visits / Clinics / 1 Year
Assessment / Immunisations
Activity Sheffield - Miracle Cure
Infant Feeding - Volunteers
Pregnancy & Healthy Early Years - Volunteers
Baby Yoga
Baby Massage

Family Relationship
Confidence Building / Assertiveness
Budgeting & Debt Management Workshops
Benefits Advice & Support
Job Club
Great Places Housing Advice
Paediatric First Aid
HENRY - Nutrition programme - Referral
Perinatal Mental Health Support
Substance Misuse Support / Referrals
Domestic Violence Support / Referrals
Smoke Stop Support / Referrals
Prevention Support Contact in the Home
Prevention Support Contact in the Centre
Intervention Support Contact in the Home / Referrals
CAD (support with food and cots etc.)
Counselling Sessions

Come and Do
Music and Movement
Speech Language
Specialist Home Based Childcare - Referral

The above shows the range of service for families. These may not be available across all localities.

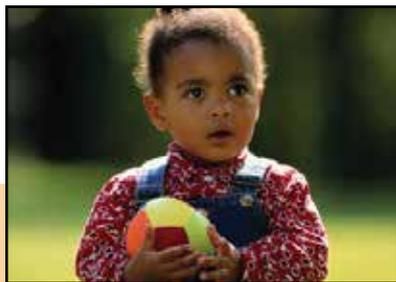
– Children’s Centre Programmes

Now I am 2



Play is essential at this age , allowing them to explore their world and build up all areas of their development.

Now I am 3



Environments need to be safe and stimulating to promote their development and offer opportunities for parents to get to know each other.

Soon I will be at school



Ready for school and life, happy safe and healthy and motivated to succeed.

KEY



Universal
Services / activities - for all families with children under 5 years



Universal Plus
Services / activities - evidence based, responsive, targeted



Universal Partnership Plus
Services / activities - specialist service via referral

Joint 2 Year Assessment with Health
Access to Childcare - Families Information Service (FIS)
Parent & Toddler Group
Stay / Play & Learn Sessions
Home Learning Packs
Bookstart Corner
Every Child a Talker ECAT
Parenting programmes Webster Stratton
Triple P / Stepping Stones
Safety Package
Cooking on a Budget
Stakeholder Forum / Community Partnerships
Adult Learning Workshops
Basic Skills Workshops
Cleaning and Hygiene Support - Referral
Family Nurse Partnership
SEN Support
Healthy Child Programme - Visits / Clinics /
2 Year Assessment / Immunisations
Activity Sheffield - Miracle Cure
Infant Feeding - Volunteers
Pregnancy & Healthy Early Years - Volunteers

2 year Free Early Learning
Ready Steady Go
Family Learning
Family Relationship
Confidence Building / Assertiveness
Budgeting & Debt Management Workshops
Benefits Advice & Support
Job Club
Great Places Housing Advice
Paediatric First Aid
HENRY - Nutrition Programme - Referral
Perinatal Mental Health Support
Substance Misuse Support / Referrals
Domestic Violence Support / Referrals
Smoke Stop Support / Referrals
Prevention Support Contact in the Home
Prevention Support Contact in the Centre
Intervention Support Contact in the Home / Referrals
CAD (support with food and cots etc.)
Counselling Sessions

Speech & Language - RAG = R = Talking Toddlers
Speech & Language - RAG = A = Ready Steady Talk
Speech & Language - RAG = G = Universal
Toddler Group
Specialist Home Based Childcare - Referral

3/4 Year Old Free Early Learning
Access to Childcare - Families Information Service (FIS)
Parent & Toddler Group
Stay / Play & Learn Sessions
Home Learning Packs
Bookstart Corner
Every Child a Talker ECAT
Stakeholder Forum / Community Partnerships
Parenting programmes Webster Stratton
Triple P / Stepping Stones
Safety Package
Cooking on a Budget
Adult Learning Workshops
Basic Skills Workshops
Cleaning and Hygiene Support - Referral
SEN Support
Healthy Child Programme - Visits / Clinics
Activity Sheffield - Miracle Cure
Pregnancy & Healthy Early Years - Volunteers

Family Learning
Family Relationship
Confidence Building / Assertiveness
Budgeting & Debt Management Workshops
Benefits Advice & Support
Job Club
Great Places Housing Advice
Paediatric First Aid
HENRY - Nutrition Programme - Referral
Perinatal Mental Health Support
Substance Misuse Support / Referrals
Domestic Violence Support / Referrals
Smoke Stop Support / Referrals
Prevention Support Contact in the Home
Prevention Support Contact in the Centre
Intervention Support Contact in the Home / Referrals
CAD (support with food and cots etc.)
Counselling Sessions

Speech & Language - RAG = R = Talking Toddlers
Speech & Language - RAG = A = Ready Steady Talk
Speech & Language - RAG = G = Universal
Toddler Group
Specialist Home Based Childcare - Referral

3/4 Year Old Free Early Learning
Access to Childcare - Families Information Service (FIS)
Parent & Toddler Group
Stay / Play & Learn Sessions
Home Learning Packs
Bookstart Corner
Every Child a Talker ECAT
Transition to School Support
Stakeholder Forum / Community Partnerships
Parenting programmes Webster Stratton
Triple P / Stepping Stones
Safety Package
Cooking on a Budget
Adult Learning Workshops
Basic Skills Workshops
Cleaning and Hygiene Support - Referral
SEN Support
Healthy Child programme - visits / Clinics / Immunisation
Activity Sheffield - Miracle Cure
Pregnancy & Healthy Early Years - Volunteers

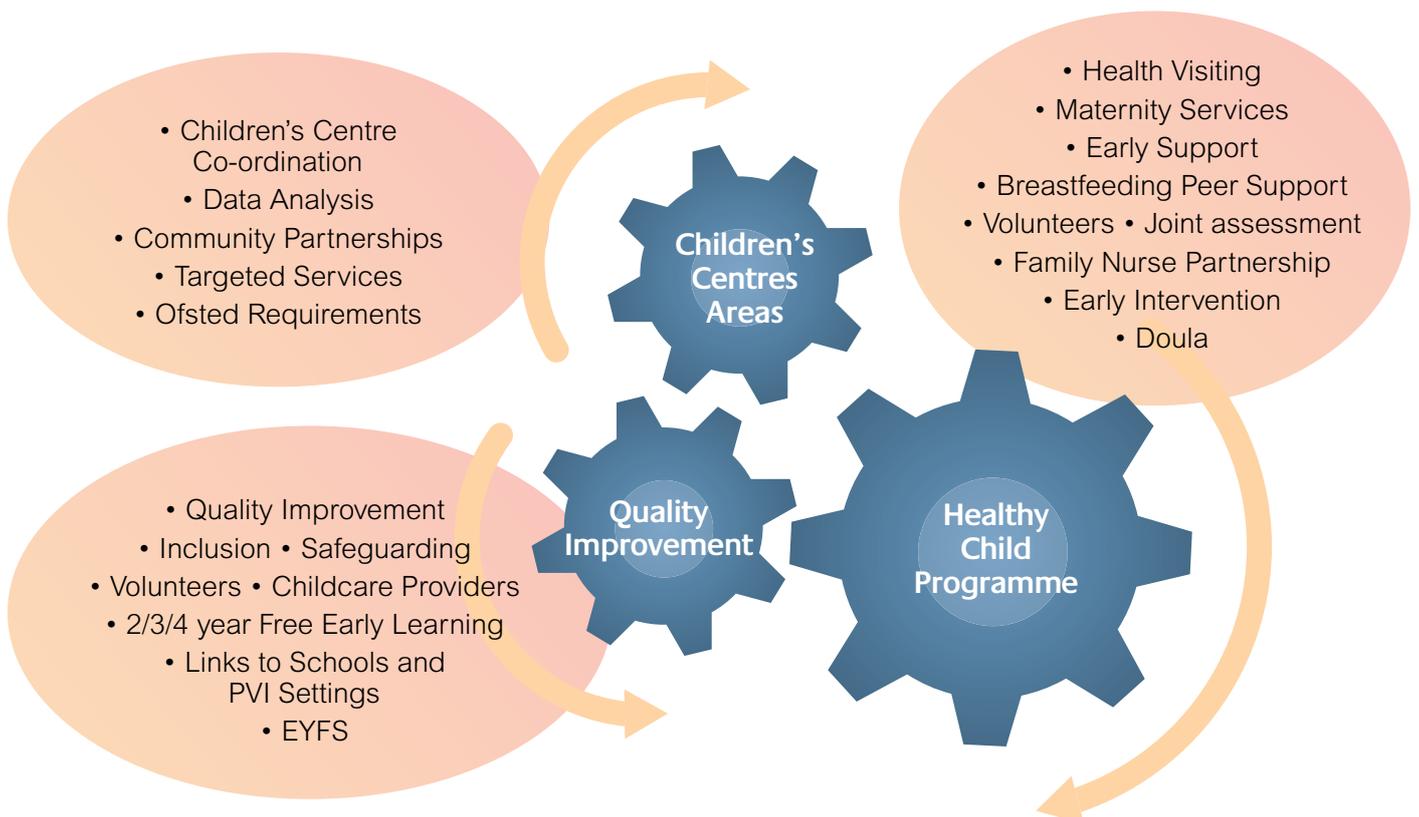
Family Learning
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Toddler Group
Specialist Home Based Childcare - Referral



Early Years' structures - New ways of working

The following diagram outlines the make-up of services in each locality. This will be an evolving model as Early Years is integrated with community partnerships and early support programmes will be embedded in Universal through to Universal Partnership Plus to achieve overall school readiness.



New ways of working -

How we will do this

The delivery of integrated Early Years' services will be locality based and work towards a community partnership model, consisting of skilled practitioners based in Children's Centre areas as outlined below:



It all begins with Babies

Children's experiences in the very earliest years, from conception, make a significant difference to their lifelong health, wellbeing and life chances. The key protective factor to enable infants to reach their potential is the quality of the interactions they receive from their caregivers.

They need sensitive, predictable and stimulating relationships. Empathy, self-regulation, attention, sociability and motivation are well embedded patterns in a child's brain by the age of 3. A child's development score at just 22 months can serve as an accurate predictor of educational outcomes at 26 years.

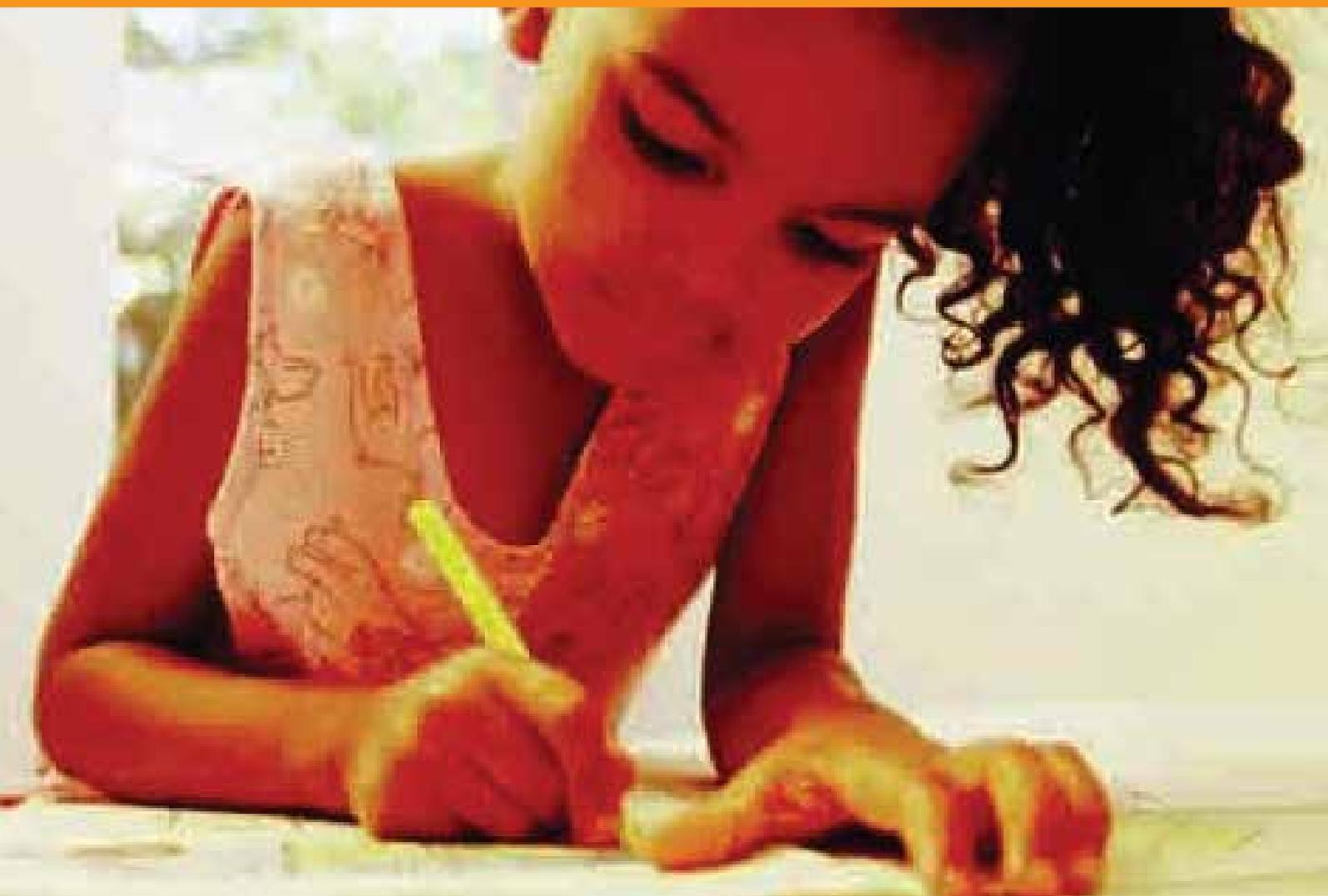
It is in these early years that the infant is laying down the foundations for the higher mental processes, the non- cognitive skills which optimise learning - the ability to focus, be motivated, have self-belief, flexibility in thinking, working memory, logical thinking, empathy – these are known as Executive Function Skills which alongside self-regulation are the key skills children need to access learning, enjoy fulfilling relationships and benefit from opportunities which are available to them.

If babies experience significant adversity and their stress response systems are chronically over activated, maturing brain circuits can be impaired, metabolic regulatory systems and developing organs can be disrupted and the probabilities increase for long term problems in learning, behaviour and physical and mental health.

Stressors on the caregiver/ infant relationship may be due to adult, child or social factors but the infant relies on the carer's ability to regulate the demands to protect them from high levels of chronic stress.

Advances in neuroscience suggest that interventions that enhance the mental health, executive function skills and self-regulation capacities of vulnerable mothers beginning as early as pregnancy can protect the developing brains of children. Resilient families are the key to optimising children's development.





The role of schools - in the Early Years

We believe all children should achieve their full potential in education, every child whatever their background or circumstances deserves the opportunity to progress and succeed in school and beyond.

This ambition requires a high quality early education and care system to give to all children and in particular those from disadvantaged families, a best start in life. It also requires a system which can foster and create improvements by high expectation, aspiration and innovation where practitioners and leaders can work together in all settings and schools to provide the best services for all children.

A sound foundation of language and vocabulary in the early years is a vital component in children's

long term progress and attainment and there is a clear moral imperative to tackle the link between the circumstances of a child's birth and their future educational outcomes.

Therefore the relationship between early years and schools is essential and in particular to impact on support, engagement and achievement for all children.

The early years' for children are the foundation years in which a great deal of learning takes place. Getting children into learning at an early age provides opportunities to expose children to high quality early learning experiences as well as opening up the potential to identify and intervene quickly where children may show signs of developmental delay.

In spite of the wide spread Early Years provision only a little more than one third of children from low income backgrounds nationally reached a good level of development (2012/13 – Ofsted)

Facts:

- Maintained sector provision perform the strongest in deprived areas (Ofsted 2013)
- Children from disadvantaged areas make the strongest progress when supported by highly qualified staff (EPPE 1997 – 2014; Ofsted 2013)
- There is no standardised way of tracking children's progress through the variety of EYFS providers – this is proving problematic for schools receiving data at the point of transition
- The Early Years sector in Sheffield is diverse and relationships between the private and maintained sectors is variable
- 40% of children in the city failed to reach a good level of development at the end of the Early Years Foundation Stage

Cultural change

The early years is one single phase and the delivery of early education across the mix of provision is supported through the Early Years Foundation Stage Framework.

However, outcomes at the end of the early years phase is only measured and reported through the Early Years Profile Assessment. This assessment takes place in school at the end of the year in which most children are 5 years old.

It is widely reported in Sheffield that many children begin school demonstrating behaviours typically lower than those expected for their age. This is reported to be most notably around the areas of communication and personal, social and emotional development.

Transition between the private/independent and maintained sectors are variable as is the quality of the exit data passed on to schools as children begin their year in reception.

There is an imperative to improve communication between the sectors in order to improve the current position, not only with regard to the sharing of data but also to achieve consistent delivery of

high quality Early Years provision. To do this we aim to take the following actions:

- Family of Schools meetings take place across the city on a termly basis and these meeting involve the private sector providers.
- Processes for EYFS moderation are firmly embedded for schools in the maintained and independent sectors as part of the LA Statutory Functions. Process for moderation across the PVI pre-school providers is currently being developed and shared moderation for schools and pre-school providers offering 2 year FEL is in place.
- A number of schools are taking a lead role in the delivery of continuous professional development to the private sector providers (not yet to childminders but this could be offered) in their localities. Teachers are visiting PVI sector providers modelling good practice and supporting quality improvement.
- A city-wide training programme for the delivery of 2 year FEL is now available to schools and PVI providers.
- All providers will work together to help develop good practice examples.
- Targeted support for children with SEND

From September 2016 baseline data for children starting Reception will be subject to a greater level of scrutiny. It is therefore critical that sectors work together across the city to help ensure the school readiness of our children and closing the gap for disadvantaged children.

Schools to provide flexible childcare all year round and extend opening from 8am until 6pm to fit with the work agenda.

Governance

The Children's Health and Well being board is responsible for drawing together the overall governance of children's services and will be instrumental to guide commissioning and provision of service. The Early Intervention and Prevention Services is responsible for Early Years services and will lead the transfer of Public Health to the Local Authority. The aim is to provide integrated working across the statutory and community partners with the Best Start Early Years teams in locality hubs across the city. The teams will be skilled, experienced and provide leadership for Early Years services.

The Best Start teams will consist of practitioners in health and wellbeing, early learning, inclusion and safeguarding to meet the requirements of both the Healthy Child Programme and the EYFS. Following

our reorganisation of Children Centre areas, we now have Children's Centre stakeholder forums which will be key in determining local priorities.

These will be integrated with Area Community Partnerships, some of which have been recently formed in Darnall/Tinsley, Shiregreen/Brightside and Manor/Castle wards, to create Children's Centre area Community Forums.

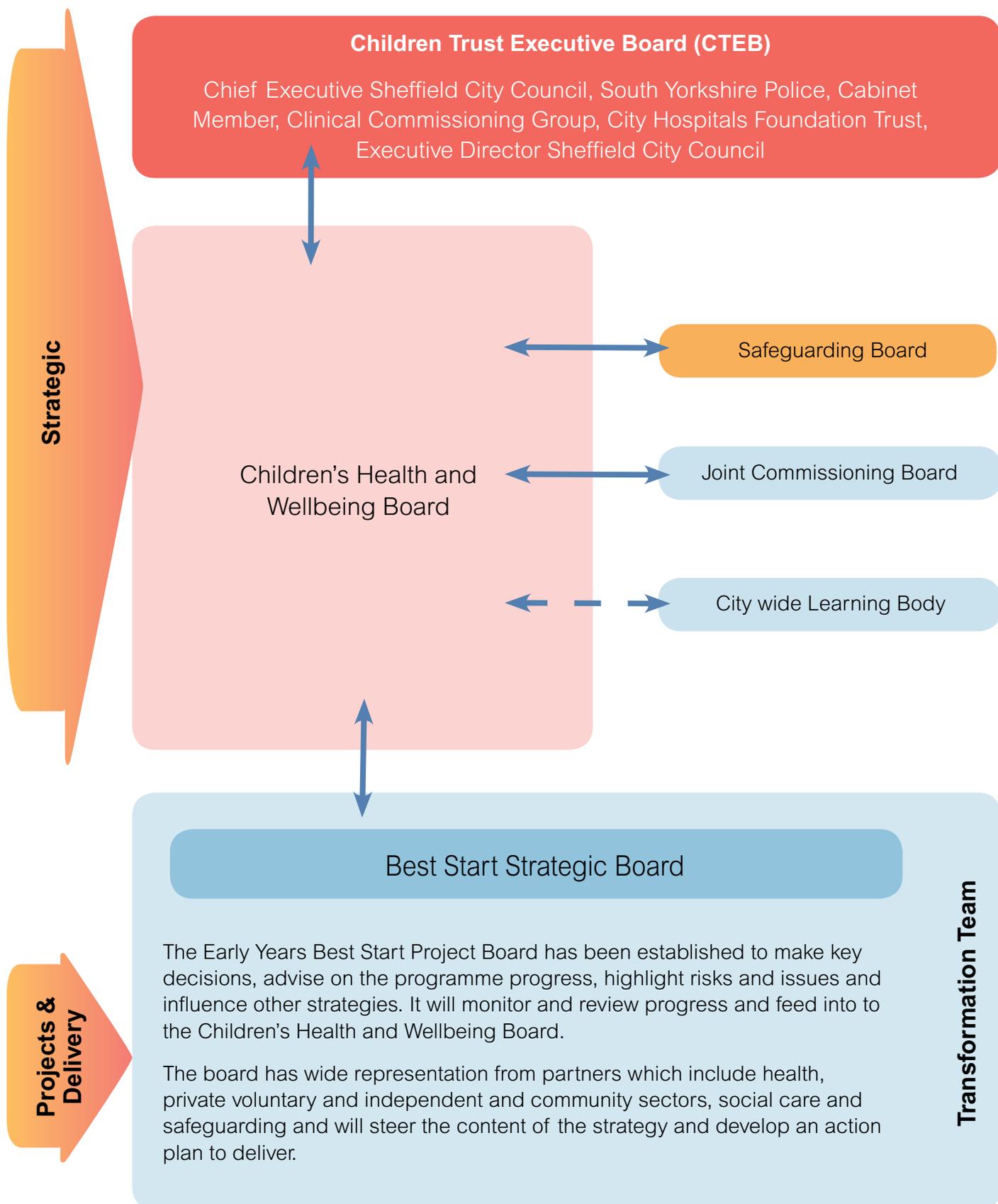
Presently our end of Foundation stage results show that 60% of our children meet the national GLD this is in line with the national percentage. This is an improvement of 9% from the previous year.

Our broader strategy proposes a co-ordinated approach between Public Health 0-5 and Early Years providers with a joint outcomes framework.



Children Young People & Families Transformation Programme

Delivery and Governance Structure





Indicators and Impact

Health Indicators and potential impact of effective early years services

Key Indicator	Impact of effective early years services
Under 18 conceptions	Can be reduced by, for example, Health Visitors supporting teenage mothers to take up contraception and avoid future pregnancies.
Infant mortality	Can be improved through antenatal work with mothers to support quitting smoking and substance misuse and maintaining a healthy weight.
Smoking status at time of delivery	Can be reduced through antenatal work with mothers to support quitting smoking.
Breastfeeding (prevalence at 6-8 weeks)	Can be improved by antenatal support and by early identification and responsiveness to a mother's concerns.
Vaccination coverage	Can be improved by outreach to parents who do not take up vaccination.
Tooth decay in children age	Can be reduced through encouraging breastfeeding and healthy weaning in-line with the guidelines, as well as healthy family nutrition.
Excess weight at 4-5 years	Can be improved through encouraging breastfeeding and healthy weaning in-line with the guidelines, as well as healthy family nutrition.
Child development at 2-2 ½ years	Can be improved through delivery of evidence-based parenting programmes and through close working with Children Centres and Best Start Early Years teams.
School readiness / EYFS	Effect and consistent transition arrangements in schools and the private sector Early Years providers including child minders.
2/3/4 year FEL	Implementation of a city wide training programme for the delivery of FEL to made available to all sectors.

Outcomes - What difference will we make by 2016?

Measures for Integrated Maternity and Early Years Performance Framework (under 5s)	National frameworks/ legislation
Women who smoke at the time of delivery	PHOF 2.3
Women who are obese and morbidly obese at the time of booking with maternity services	
Term babies with low birth weight	PHOF 2.1
Percentage of pregnant women 'booking in' with maternity services at 12 weeks	NHS Outcome
Numbers on intermediate maternity pathway accessing Pregnancy Birth and Beyond	
Breastfeeding initiation	PHOF 2.2
Breastfeeding at 6 to 8 weeks	PHOF 2.2
Percentage of children who are obese or overweight (in Reception) aged 4-5 years	PHOF 2.6(ii)
A & E attendances < 5s	
Referrals to speech and language therapy	
Increase in number of mothers who receive a first face to face antenatal contact with a Health Visitor* at 28 weeks or above	
Number of parents achieving accredited qualifications in essential skills such as literacy, numeracy and ESOL through the 'Start Up' programme	
Referrals to social care for young children (rate per 10,000) Census Statistical First Release	DfE CIN
Number of Common Assessment Frameworks (CAF) initiated for young children	
No of young women supported by FNP	
Numbers of SEN identified and by whom	
Uptake of nursery education for 2 year olds who meet the eligibility criteria 2006: section 7	Childcare Act
Percentage of families who receive a joint summary of their child's development at 24-36 months	
Children's Centres reach 2006: section 1- 5	Childcare Act
The average attainment of pupils in the lowest 20% at the end of the Foundation Stage	

Commissioning Framework

The following principles will underpin any commissioning framework:

- Multi-agency agreement at a strategic level
- Agreed outcomes for children and families
- Agreed common vision
- Work together to provide the right and effective intervention for vulnerable children and families as early as possible.

The framework will respond to changes in Government policy, indication reductions in available funding and will consider the following:

- The alignment of frontline staff, systems and practice, and accept that service integration and resource alignment should take place where it makes sense – but not where it does not
- Adopt an approach to commissioning which emphasises the building of relationships between commissioners, providers and parents/carers to improve outcomes, rather than commissioning relationships which rely solely on planning and transactional exchanges

- Commissioning framework will be aligned with health visitors national service specification
- Commission and provide services which achieve equity of outcomes for children and families across the country i.e. provide relevant levels of support and intervention according to need in local areas and with respect to equality and diversity
- Interventions that are based on evidence of what works and/or good practice. Where they cannot be evidence based, they should be evidence informed and evaluated using a common framework
- The race of children and parents will be heard to inform future commissionings
- There will be clear and agreed common understanding and definition of what constitutes an outcome, an indicator and a measure of improvement and performance
- Mobilisation of the voluntary sector in supporting building capacity and strengthening communities

“Reap the benefit of local commissioning of innovative and transformational services - commissioning for targeted outcomes and impact”



Useful Documents

1. **Quality and Inequality** – Sandra Mathers and Rebecca Smees – Published by Nuffield Foundation. www.nuffieldfoundation.org
2. **Measuring what Matters; A Guide for Children's centres** – Jill Roberts/Angela Donkin with Demetris Pillas – UCL Institute of Health Equity. <http://www.instituteofhealthequity.org/projects/measuring-what-matters-a-guide-for-childrens-centres>
3. **Getting in on the Act** – Children and Families Act 2014. www.local.gov.uk
4. **Overview of the Six Early Years High Impact Areas** – Pauline Watts. DOH
5. **EYFS Framework** - <https://www.gov.uk/government/publications/early-years-foundation-stage-framework--2>
6. **Healthy Child Programme** - <https://www.gov.uk/government/policies/giving-all-children-a-healthy-start-in-life>
7. **Graham Allan** - TBC

Best Start

SHEFFIELD



This document can be supplied in alternative formats,
please contact 0114 205 3353

Early Years
Children, Young People and Families
www.sheffield.gov.uk