

# Giving Every Child in Enfield the Best Possible Start in Life through improving school readiness

July 2018 Update

## Background

The JHWBS identified BSIL as a key priority. The working group identified as school readiness as an area of focus, which was agreed by the HWB.

What happens in pregnancy and early childhood impacts on physical and emotional health all the way through to adulthood. Positive early experience is therefore vital to ensure children are ready to learn, ready for school and have good life chances.

It is shaped by several factors such as:

- parenting effectiveness
- deprivation
- the impact of high-quality early education and care

Parents have the biggest influence on their child's early learning. For example, talking and reading to a baby can help stimulate language skills from birth.

Early communication skills help children to develop a range of cognitive skills that are crucial for their development, including working memory and reading skills. This can help prepare children so that they are ready to learn at 2 and ready for school at 5.

## Ready for school at five

At the Health and Wellbeing Board Development session it was agreed that ensuring children are ready for school at five should be an area of focus for the remainder of the Joint Health and Wellbeing Strategy, to April 2019.

On leaving the Foundation Stage at the end of Reception, a child is considered to have a 'good level of development' (GLD) if they have achieved at least the expected level in the Early Learning Goals in all aspects of Personal, Social & Emotional (PSE), physical development, Communication and language, Literacy and Mathematics.

## Local Context

In Enfield, for a cohort of 4,634 children the data shows an improvement of 1.6% for the GLD from 66% in 2016, to 67.8% in 2017. The unconfirmed national GLD has also risen from 69% to 70.7%.

This means that, whilst Enfield has consistently improved in line with other Authorities, it has not yet narrowed the gap in school readiness measures in terms of national or regional comparators.

This provides a clear challenge and focus for the Best Start in Life work.

The impact of intervention strategies for vulnerable children including boys, Early Years Pupil Premium (an additional payment to settings for some children) and children who attended Two-Year-Old (Terrific Twos) provision in Enfield has led to some schools being able to 'close the gap'.

Some Enfield schools, who have a high percentage of children from families with many complex issues, can ensure that 66+% of children do achieve a GLD while for others it is still only 55%.

Schools are reporting significantly higher mobility within the year group. During the reception year 160 children (4%) left while another 80 transferred internally to another Enfield school, (240 children in total). During the year, 200 children joined the cohort (5%), and from this group only a quarter had attended some form of Early Education in another LA, meaning less children had benefited from proven interventions, leading to lower scores.

## Responding to the Challenge

Commissioners and partners across Education and Children's Services, Public Health and Health Providers have worked together to ensure that early intervention services are commissioned and developed to respond to the challenges set by ensuring the Best Start in Life. Early Years education is also at the forefront, with greater support for schools being developed to ensure peer support and learning for teaching staff.

Below are updates on the key examples of work being carried out to respond to the challenge to deliver improved school readiness in for Enfield children:

### 1. Empowering Parents, Empowering Communities Programme

The importance of good parenting cannot be underestimated when working towards positive outcomes for children and their families. Enfield has developed a consistent approach to its parenting offer over the past three years, starting with the introduction of Webster Stratton: Incredible Years in Children's Centres and then in schools. This programme is delivered by Children's Centre staff with input from Educational Psychologists, trained in the Child and Young People Improving Access to Psychological Therapies programme (CYP-IAPT).

The work around Best Start in Life has identified the need to increase the capacity of parenting support in the early years, especially to reach those families that may not engage with more traditional services.

Commissioners have been successful in bidding to deliver a new service in partnership with parent volunteers, which is able to complement the more traditional work at a neighbourhood level.

Empowering Parents, Empowering Communities (EPEC) developed by the Centre for Parent and Child Support, SLAM and the CAMHS Research Unit, King's College, London is an internationally recognised evidence-based peer-led parenting programme.

It provides a system for training and supervising parent-led parenting groups that help parents to learn practical parenting skills for everyday family life and develop their abilities to bring up confident, happy and co-operative children. Free crèches are provided alongside each group and parents attending the course can choose to gain accreditation for their work through the Open College Network.

EPEC offers parenting support that improves:

- Children’s social, emotional and behavioural development.
- Children’s readiness for school and learning.
- Parenting, parent confidence and well-being.
- Family communication, interaction, routines and resilience.
- Social support and social capital.
- Parent engagement and service uptake.
- Early identification of risk and effective early intervention.
- Efficiency, cost-effectiveness and integration of local parenting support.

Enfield will deliver an EPEC Hub through its commissioned Children’s Centre. The Children’s Centre consists of a team of over twenty individuals working across several sites based in schools – mostly located in areas of deprivation – to provide a mix of family support and universal services to families with children under the age of five. The core work of the Children’s Centre is to improve outcomes for children and contribute to their school readiness by ensuring effective early help is provided, with a focus on early communication and supporting carers to parent effectively. The Centre works as part of a multi-agency team with health and other partners, using a range of parenting interventions, including Family Star for individual assessment and parenting programmes where needed. The Centre provides individual family support for up to six hundred and fifty families per year and is the focal point of Enfield’s early help offer for families with children under five.

The Children’s Centre will further develop its relationship with the Enfield Parent Engagement Panel (PEP), which has over 400 affiliated members ready to undertake some form of volunteer work. We would also propose to develop a Local Authority-led steering group, comprising all partner agencies involved in delivering the Enfield parenting offer, to oversee the progress of EPEC. This would include partners already working with the Centre to provide parenting support e.g. CAMHS, Educational Psychology, local Troubled Families team, Public Health.

In addition to the resource and training being provided as part of the successful bid, Public Health has committed funding for a 0.4 FTE Children’s Centre worker to coordinate the programme and the Children’s Centre service will provide £5,000 towards ongoing re-imbursment of parent volunteers.

## 2. Healthy Early Years

Healthy Early Years London (HEYL) is an awards scheme funded by the Mayor of London which supports and recognises achievements in child health, wellbeing and education in early years settings.

Building on the success of Healthy Schools London, HEYL will help to reduce health inequalities by supporting a healthy start to life across themes that include healthy eating, oral and physical health and early cognitive development.

HEYL complements and enhances the statutory Early Years Foundation Stage framework, adding to the focus on children, families and staff health and wellbeing.

The 4 levels of Awards - HEYL First Steps, Bronze, Silver and Gold - can be used to improve and support practice in all Early Years settings:

- private, voluntary and independent nurseries
- early learning and day care in children’s centres
- childminders

- Early Years in schools including schools with two-year old provision
- nursery schools
- crèches and playgroups

Enfield's approach to delivering HEYL will be to create a 0.6 FTE post (funded by Public Health) and positioned with the Early Years' Service, as part of its Quality and Outcomes Team, working closely with PVI settings to ensure that provision is of the highest quality.

### 3. 0-19 recommissioning

There are national specifications for service delivery for Health Visiting, School Nursing and Family Nurse Partnerships. Collectively these specifications offer a comprehensive approach to engaging families and young people to ensure that children are developing well and to work with families who have concerns or additional needs and complexities.

It has been acknowledged as part of the review of current service provision that Health Visiting particularly has a key role to play in promoting and ensuring children's readiness to learn at 2 and readiness for school at 5.

Commissioners have worked closely with the service provider to develop programmes and support mechanisms that extend beyond the work mandated in the national specifications.

This work includes a First Time Parents programme, delivered through the Children's Centre with sessions run by Health Visitors, Speech and Language Therapists and counsellors from the IAPT service.

Sessions focus on key aspects that will promote a positive start in life. These include:

- Emotional wellbeing for the parents
- Information on immunisations, breastfeeding, weaning and child development
- Early communication screening
- Information on whole family support and services available

### 4. Anna Freud Project

The Anna Freud National Centre for Children and Families (AFNCFF) and Enfield Health Visiting (HV) piloted a model of an integrated baby clinic in three clinics in areas of social disadvantage. The new proposal will roll out the model into more clinics, to reach a greater number of families and incorporate learning from the pilot project. The aim is to create a transfer and cascade of infant-directed intervention skills to establish a culture of baby focussed clinics throughout Enfield.

Under the new arrangements, the Health Visiting Service will work collaboratively with Enfield Children's Centre (CC) to deliver the project at four sites – both health clinics and Children's Centre sites.

The aims of the pilot are to:

- increase staff confidence to support caregiver-baby interactions within the clinics and decrease escalation of referrals to family support;
- increase cooperative working between CC and HV staff in four Enfield baby clinics, where families can be thought about together;
- recruit and supervise mentors from CC and HV in each clinic, who will support for the model and weekly reflection sessions. To develop a service evaluation to assess the success of these aims;

- reduce overall referrals from HV to CC, as it is expected that this model will enable staff to support families during clinic time;
- ensure that any referrals that do need to be made for early help are appropriate and contain full and useful information.

## 5. Play and Communication and Universal Play & Communication Assessment Toolkit (UPCAT)

In September 2015, Enfield rolled out the Play and Communication Programme, which uses a tool to profile children attending universal Children’s Centre sessions, to identify speech, language and communication needs (SLCN) as early as possible. The information captured is fed into the Early Intervention Performance Outcomes Framework to provide a detailed record for each child; this in turn feeds into a summary dataset, demonstrating the outcomes at each review stage (12 weeks, 6 months and 1 year). The programme now forms a key part of the speech and language pathway in the early years and has previously demonstrated a success rate of up to 80% (success being defined as children being supported by the Children’s Centre who would otherwise have been referred into the core health speech and language service).

Many children between the ages of 0-4 living in Enfield also attend a private, voluntary and independent (PVI) sector nursery or pre-school, so are unlikely to also attend universal Children’s Centre services.

Therefore, a PVI-focussed and delivered variant of the Play and Communication programme has been commissioned. As with the Play and Communication programme, UPCAT utilises a screening tool based on the hierarchy of speech and language development and the EYFS Ages and Stages. A key difference is that the tool and framework can be used by a worker without a parent being present. Commissioned speech and language therapists can train PVI staff to use the tool effectively and provide support to settings on strategies to use to help the child. Children are also able to be referred into the Children’s Centre element of the programme if needed and resource is being increased to ensure that supply meets demand. The programme has been piloted successfully with several PVI settings and rollout will be ongoing through 2018/19.

Education and Children’s Services have committed an additional £80,000 per annum to commission this service and commissioners expect the following outcomes to be achieved:

- Improvement in the early identification of SLCN in under 5s
- Children’s Centre and PVI staff are empowered to accurately identify SLCN and make appropriate referrals
- TalkACTivity – as part of the care pathway – successfully reduces the number of children requiring more specialist intervention
- Children taken onto caseload through accessing access and advice sessions have a reduced waiting time to access clinical SLT services

## 6. Interschool Moderation

During the start of the spring term 2018 five interschool moderation trialling sessions took place. During these sessions Early Years Team Leaders were asked to bring current observations and assessments as evidence of children’s work for the five moderated Early Learning Goals. The evidence includes children who are predicted to achieve the range of outcomes, which are Emerging, Expected and Exceeding by the end of the summer 2019 term. All schools with reception aged children sent a representative to one of these sessions and it is our intention that these meetings will continue to be used to support teaching in the Early Years Foundation Stage.

## 7. School Peer Cluster Meetings

Over the academic year a programme of local cluster meetings has been arranged for both nursery and reception teachers. Schools have been asked to present five pieces of mark -marking/writing, that represents the range of attainment across the current cohort for either their nursery or reception children, as of the third/fourth week in November.

During the Cluster Meetings team leaders are asked to assess the pieces of children's writing and to align these to the Enfield Writing Progression Template, which provided writing criteria from children working within the 30-50 months range to children who were deemed to be 'exceeding' at the end of the reception year.

Over the previous year, 16 clusters have been formed, with more than 200 delegates attending meetings.

## Assessing the Impact

The projects described herein have all been implemented to support the Best Start in Life. Below is a summary of the outcomes we expect the projects to be achieving and by when.

Project	Outcomes/outputs	To be achieved by
Empowering Parents, Empowering Communities	<ul style="list-style-type: none"> <li>• 100 parents to benefit from programme</li> <li>• 16 parent volunteers to be delivering</li> <li>• 10 programmes to be delivered</li> <li>• Children's social, emotional and behavioural development.</li> <li>• Children's readiness for school and learning.</li> <li>• Parenting, parent confidence and well-being.</li> <li>• Family communication, interaction, routines and resilience.</li> <li>• Social support and social capital.</li> <li>• Parent engagement and service uptake.</li> <li>• Early identification of risk and effective early intervention.</li> <li>• Efficiency, cost-effectiveness and integration of local parenting support.</li> </ul>	June 2019

	<ul style="list-style-type: none"> <li>•</li> </ul>	
Healthy Early Years London	<ul style="list-style-type: none"> <li>• Accredited private, voluntary and independent sector childcare providers</li> <li>• Creation of dedicated post (to be combined into PVI objectives)</li> </ul>	June 2019
0-19 Recommissioning	<p>Embedding First Time Parents programme into the service to achieve:</p> <ul style="list-style-type: none"> <li>• Emotional wellbeing for the parents</li> <li>• Information on immunisations, breastfeeding, weaning and child development</li> <li>• Early communication screening</li> <li>• Information on whole family support and services available</li> <li>• Health Start Vouchers</li> </ul>	April 2019
Play & Communication / UPCAT	<ul style="list-style-type: none"> <li>• Reduction in number of children requiring core speech and language services</li> </ul>	Ongoing – UPCAT fully implemented by December 2018
Interschool Moderation and Peer School Cluster Meetings	<ul style="list-style-type: none"> <li>• Improvement in Good Level of Development at the end of Foundation Stage</li> <li>• Improved accuracy in assessing children at the end of Foundation Stage</li> </ul>	September 2019

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