



Cabinet Report

Report of: Executive Director Children Young People and Families

Report to: Cabinet

Date: 15 April 2015

Subject: Early Years Best Start Strategy 2015-2017

Author of Report: Dawn Walton/Jackie Robinson

Key Decision: YES

Reason Key Decision:

Affects 2 or more wards

Summary: The Early Years Best Start Strategy sets out the City's ambitions for children and describes how we will reshape service delivery to ensure that all children have a great start in life. This is a joint strategy prepared by the LA with key partners, and builds on existing relationships with Schools, Health Services, GPs, Private, Voluntary, and Community and Faith sectors. It seeks to address inequalities for babies and young children in their early learning, health and well-being and to improve outcomes at the end of the early years foundation stage.

Reasons for Recommendations:

The experience and outcomes for very young children can be very different. Inequalities in early learning, early achievement, health and well-being has led to a gap in the overall attainment of children from disadvantaged homes compared to those more advantaged. The key protective factor to enable infants to reach their potential is the quality of the interactions they receive from their caregivers. We know that parents and carers want the best for their children; this is much harder when families are concentrating on making ends meet financially. In Sheffield we want to make it a priority to support parents/caregivers and make life easier for people from the earliest opportunity.

There is a need to respond to the increasing birth rates and the changing demographics across the City to ensure high quality flexible childcare at the time of need. This is one of the critical elements of the refreshed Tackling Poverty Strategy. High quality flexible childcare enables adults to learn and work and provides the best foundations for children to a future free from poverty. This strategy will be integral to the wider public health priority of encouraging good health, early learning and well-being from an early start as well as supporting the tackling poverty strategy.

It is necessary to build up local community capacity and resilience, develop active and vibrant partnerships to engage families in developing and delivering services to give all children in Sheffield a great start in life.

Recommendations:

That Cabinet approves this strategy

Background Papers: Draft Strategy attached

Category of Report: OPEN

If CLOSED add 'Not for publication because it contains exempt information under Paragraph (insert relevant paragraph number) of Schedule 12A of the Local Government Act 1972 (as amended).'

* Delete as appropriate

Statutory and Council Policy Checklist

Financial Implications
YES Cleared by: Liz Gough
Legal Implications
YES Cleared by: Nadine Wynter
Equality of Opportunity Implications
YES Cleared by: Bashir Khan
Tackling Health Inequalities Implications
YES/NO Cleared by:
Human Rights Implications
YES/NO Cleared by:
Environmental and Sustainability implications
YES/NO Cleared by:
Economic Impact
YES/NO Cleared by:
Community Safety Implications
YES/NO Cleared by:
Human Resources Implications
YES/NO Cleared by:
Property Implications
YES/NO Cleared by:
Area(s) Affected
All
Relevant Cabinet Portfolio Lead
Relevant Scrutiny Committee
Is the item a matter which is reserved for approval by the City Council?
YES/NO
Press Release
YES/NO

REPORT TO THE CABINET - EARLY YEARS BEST START STRATEGY 2015-2017

1.0 SUMMARY

- 1.1 The redesign of early years services began three years ago, where in 2012 an extensive consultation took place 'a call for views', which included gathering the views of a wide range of practitioners, managers and parents/carers. We listened to families and there was overwhelming support to deliver services which are accessible, flexible and available at the point of need. This has been an ongoing process and this strategy is the next stage which sets out the City's ambitions for children and describes how we will continue to reshape service delivery to ensure that all children under 5 have a great start in life. This is a joint strategy prepared by the LA with key partners and builds on existing relationships with Schools, Health Services, GPs, Private, Voluntary, and Community and Faith sectors. It seeks to address inequalities for babies and young children in their early learning, health and well-being and to improve outcomes at the end of the early year's foundation stage.
- 1.2 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. Through our engagement with families and the voluntary/community sectors we know there is the will, skills and understanding to drive and shape the delivery and design of an integrated early years' service to ensure the best start for Sheffield's children.
- 1.3 This strategy and its implementation will build on what's already been developed as part of an evolving process and long term approach to addressing the needs of families in a changing world.

2.0 WHAT DOES THIS MEAN FOR SHEFFIELD PEOPLE

- 2.1 It promotes joint accountability and joint responsibility between key delivery partners to ensure services for families with young children are accessible and available on a local level.
- 2.2 Supports family life and recognition of the important role that parents make to encourage healthy and resilient families. By having a good understanding of parent's needs, reviewing child's development, offering healthy living advice and immunisations this will ensure optimum health and wellbeing.
- 2.3 The Early Years Best Start teams will be integrated teams made up from all key partner organisations across the sector. They will be based in localities where parents can access advice, information, universal services and identify where specialist services are needed at the earliest possible stage.
- 2.4 Families and Communities will have greater involvement in influencing and determining local priorities and how services are delivered.

3.0 OUTCOME AND SUSTAINABILITY

3.1 The delivery model will provide all families with a programme of support tailored to meet their needs. It will combine the Healthy Child Programme and the Early Years Foundation Stage (EYFS) framework and follows the tiered approach based on the National Health Visitor Plan 'a call for action' which is outlined below :

- Community Universal Services - all parents and carers will have access to a range of universal services across health and early education
- Universal Plus (Targeted Services) – additional services will be available to families for a specific y time to support with breastfeeding, parenting, behaviour or disability.
- Universal Partnership plus (Specialist Services) – these will be available to vulnerable families to provide ongoing support with, for example safeguarding issues, mental health, complex needs.

3.2 This strategy is critical to the successful delivery of the refreshed tackling poverty strategy. High quality childcare, sensitive and responsive interactions with the primary care-giver, a high quality home learning environment and reduced health and education inequalities are all identified as essential components in the tackling poverty strategy. Parents and carers who are out of work or in low paid insecure work require flexible, affordable childcare in suitable and available locations and when they need it in order to gain skills to work. Being able to take up Free Early Learning (FEL) also reduces the burden on household budgets.

3.3 Educational attainment is the single biggest factor that can protect children from the perpetuation of intergenerational poverty. We must reduce the educational inequalities and narrow the gap at the end of the foundation stage to give our children the best chance of a future free from poverty.

3.4 Household income has a demonstrable impact on parenting capacity and style and the quality of the home learning environment. This in turn has an impact on children's outcomes

3.5 As part of this evolving strategy and in order to ensure long term sustainability of early years services it is the intention to keep under review the organisation of children's centre areas. This will build on the current model of merging and clustering children's centres areas within localities to best meet the needs of communities and ensure efficient use of buildings and resources.

To extend services to families and provide support to the whole family it is the intention to review the organisation of children's centres, with a view of transforming

centres into early help family hubs providing a range of services.

We will build on the current model of merging and clustering children’s centres areas to focus resources into providing the right services at the right time for the right people.

3.6 Health indicators and impact of effective early years services are set out in this table :

Key Indicator	Impact of effective early years services
Under 18 conceptions	Can be reduced, e.g. 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 improved through antenatal work with mothers to support quitting smoking
Breastfeeding (prevalence at 6-8 weeks)	Can be reduced through antenatal support and by early identification and responsiveness to a mother’s concerns
Vaccination coverage	Can be improved by outreach to parents who take up vaccination
Tooth decay in children aged 5 and under	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’s Centres and Best Start Early Years teams
Flexible accessible childcare (no of provisions registered)	Improve accessibility to flexible childcare available at point of need. Include toddler groups and childminding
School readiness/EYFS	High quality provision and effective 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 be made available to all sectors
Proportion of children eligible for free school meals	Reduce number of children living in poverty and improve families ability to increase household income through access to training and employment

4.0 VISION, AIMS AND GOVERNANCE

Vision and Aims

- 4.1 Our ambition is that all children, young people and families in Sheffield achieve their full potential by raising expectations and attainment and enabling enriching experiences.

Our vision is that all children young people and families are:-

- Happy, healthy, safe and strong
- Ready for school and for life

- 4.2 We recognise that the future is dependent on families building strong relationships, feeling supported and living within caring and health promoting communities. This is also dependant on key agencies working together with shared principles and shared outcomes.

- 4.3 The voice of children and their parents need to have the greatest influence on service delivery and our commitments outlined below are the key factors that this strategy is based on;

1. To empower parents, families and carers to be strong, effective and independent

2a. To provide accessible integrated, flexible and high quality effective early learning and childcare for all children, where and when families need it.

2b. To narrow the attainment gap especially for children in the most deprived areas.

3. To improve early intervention and prevention and early identification for vulnerable children and families.

4. To improve access and coordination of health and wellbeing initiatives for children and families

5a. To engage families in local communities to influence and play a positive role in shaping activities and services.

5b. To develop peer support programmes with volunteers to increase social mobility and access to training and employment.

6. To support organisations across the sector including childminders to work together to ensure the early years workforce has the knowledge, skills and support that will enable children to reach their full potential.

4.4 Governance

- 4.5 The Children's Health and Well Being Board is a sub group of the Sheffield's Health and Well Being Board and its role is to provide a strong and effective partnership which improves the commissioning and delivery of services across the NHS and the council, leading in turn to improve health and wellbeing of the people of Sheffield.
- 4.6 The Early Prevention and Intervention service is responsible for early year's services and be responsible for the transfer of commissioning arrangements for Health Visitors and the Family Nurse Partnership (FNP). These staff will remain with Sheffield Children's Hospital Foundation Trust.
- 4.7 The aim is to promote integrated working, by locality based Early Years Best Start teams which will be made up of practitioners and managers from the statutory, voluntary and community organisations within the sector. These teams will be skilled, experienced and will consist of practitioners with expertise in both children and adult's Health and Well-Being, Parenting, Early Learning, Inclusion and Safeguarding.
- 4.8 In Sheffield we will be developing local community partnership forums in each children centre area. The LA has a statutory responsibility to provide children centre services which are accessible, flexible and meets family's needs through from pregnancy to the end of reception.
- 4.9 Children centres are inspected by Ofsted and accountability lies with the LA. These local community partnership forums will support the statutory responsibilities and have a significant role to play in determining local priorities and engaging the community.

5.0 COMMUNICATION AND CONSULTATION

- 5.1 We have been developing this strategy over the last 18 months. Following a Cabinet report in February 2013 which approved the redesign of early year's services and a number of recommendations in order to streamline management, administration and prioritise early intervention services and family support services that are flexible, accessible and high quality. This has been an ongoing process, and follows a journey from as early as 2012 when an extensive consultation took place 'a call for views' followed by a number of changes to service redesign and staffing structures.
- 5.2 This strategy reflects the progress made and outcomes of those changes. Further consultation is continuing to take place which has focused on the six key priorities in the strategy. The strategy has been circulated to early year's managers, practitioners in health, local authority and voluntary and community sectors, and the wider sector with interests in children's services for their comments and contributions. Feedback has been sought from presentations at Elected Member's task groups, Primary Heads meetings, CCG and a range of community forums.

- 5.3 This strategy has been developed in partnership with the voluntary, community and private sector and is supported by our key partners in the CCG and the City Wide Learning Board.
- 5.4 There are no contractual implications for this strategy. Future services may be commissioned as a result of the strategy consultation.

6.0 FINANCIAL IMPLICATIONS

- 6.1 There are no financial implications directly arising from this report

7.0 HR IMPLICATIONS

- 7.1 The strategy relates to integrated working and sharing of resources at a local level. This will have no implications for TUPE. The strategy is intended to encourage joint working between statutory and voluntary sector organisations. There are no HR implications arising from this report.

8.0 LEGAL IMPLICATIONS

- 8.1 Sheffield City Council has a statutory duty under section 3 of the Childcare Act 2006 to make arrangements to secure that early childhood services in their area are provided in an integrated manner which is calculated to facilitate access to those services, and maximise the benefit of those services to parents, prospective parents and young children. The Council is also required to take steps to identify parents or prospective parents who would otherwise be unlikely to take advantage of early childhood services that may be of benefit to them and their young children, and to encourage those parents or prospective parents to take advantage of those services.
- 8.2 The Council also has a statutory duty under section 6 of the Childcare Act 2006 to secure sufficient childcare for parents in their area who require childcare in order to enable them to take up or remain in work, or to undertake education or training. The ability of councils to meet this duty is governed by the resources available to it – with the legislation framing sufficiency in terms of what is “reasonably practicable” within the funding available. In addition, section 7 of the Childcare Act 2006 places a duty on the Council to secure sufficient free early years provision for eligible children.
- 8.3 The Council must also have due regard to the statutory guidance for local authorities on the provision of early education and childcare, the statutory SEND code of practice: 0 to 25 years as well as the Public Sector Equality Duty and accompanying guidance.

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9.0 ALTERNATIVE OPTIONS CONSIDERED

- 9.1 To continue with existing service delivery without a joint coherent strategy. This alternative would be unacceptable as there are inequalities in early learning, achievement and health and a need to narrow the attainment gap for children at the foundation stage.

10.0 REASONS FOR RECOMMENDATIONS

- 10.1 The experience and outcomes for very young children can be very different. Inequalities in early learning, early achievement, health and well-being has led to a gap in the overall attainment of children from disadvantaged homes compared to those more advantaged. The key protective factor to enable infants to reach their potential is the quality of the interactions they receive from their caregivers. We know that parents and carers want the best for their children; this is much harder when families are concentrating on making ends meet financially. In Sheffield we want to make it a priority to support parents/caregivers and make life easier for people from the earliest opportunity.
- 10.2 There is a need to respond to the increasing birth rates and the changing demographics across the City to ensure high quality flexible childcare at the time of need. This is one of the critical elements of the refreshed Tackling Poverty Strategy. High quality flexible childcare enables adults to learn and work and provides the best foundations for children to a future free from poverty. This strategy will be integral to the wider public health priority of encouraging good health, early learning and well-being from an early start as well as supporting the tackling poverty strategy.
- 10.3 It is necessary to build up local community capacity and resilience, develop active and vibrant partnerships to engage families in developing and delivering services to give all children in Sheffield a great start in life.

11.0 RECOMMENDATIONS

11.1 That Cabinet approves this strategy

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