CHILDREN & YOUNG PEOPLE'S SOCIAL CARE & SERVICES SCRUTINY PANEL 11 SEPTEMBER 2018 BRIEFING NOTE

SCHOOL READINESS TEAM

1. Outline the remit of the School Readiness Team (including staffing numbers, staff roles, the services covered by School Readiness, aims and objectives of the Team).

See attached team structure. The School Readiness team is made up of a number of functions which includes management of the Children's centre, the statutory duties of the Family Information Service, which involves working with all Private, Voluntary and Independent day care providers and Childminders to ensure they provide Good/Outstanding care of Middlesbrough children. There is an element of managing the funded childcare (A2YO and 30 hours entitlement) along with carrying out Safeguarding Audits, training for staff, etc. We have management of the two Council nurseries, Bright Stars and Stainsby and a small crèche team. We also work closely with Education and are part of the group responsible for delivering on the Early Years Strategy and Early Years Action plan (attached). The School Readiness Plan on a Page is also attached for information.

The aim of the School Readiness team is to work in a number of ways with families who have children aged 0-5 years, including:

- Helping children become ready for nursery and primary school
- Accessing good quality childcare, including free early education for two, three and four year olds, information can be found via the Family Information Service/Family Service Directory. www.middlesbrough.gov.uk/fsd
- Supporting childcare settings in terms of the quality and standard of their settings. Staff work closely with settings on their safeguarding, policies and procedures and we a qualified teacher who works with settings to increase their Ofsted rating

2. Information regarding the Children's Centres, including:-

a) Staffing numbers at the Centres and their roles. See attached structure: Lynn Blagg, Jenny James and Joanne Tickle are three of the SR ATM's who have line management responsibility for the Children's centre staff.

Response to b, c and d:

In 2015 the Council were successful with a Delivering Differently in Neighbourhoods bid which allowed us to look at how we could change our Children's centre offer to be more effective but have a reduced cost element to the Council. This resulted in the attached School Readiness model which was created with Health colleagues. In essence, there are a number of **universal services** which all families in Middlesbrough with children under 5 can attend:

- Baby Play
- Stay and Play
- Child health drop-in
- Pregnancy, birth and beyond programme
- Healthy exercise and nutrition in the really young (HENRY)
- 0-5 Family Links parenting programme

Services provided by partner agencies at the Children's centre sites:

- Midwifery programmes, eg. Early Bird clinics
- Physiotherapy drop-ins
- Speech and language interventions

Targeted elements:

- 6-8 week Health visitor check
- 1 year old Ages and Stages questionnaire (ASQ)
- 2 year, 3 months, Ages and Stages questionnaire (ASQ)

When the Health visitor carries out the above assessments they use the ASQ to score the child's development and if they fall within a certain level, the Health visitor will refer the family to us to work with that family on the child's identified development need. The Health visitor will then carry out a follow-up ASQ and at present 93.5% of those children's development needs have improved to the point where they only require universal services.

As part of the School Readiness model we also have a Literacy Pathway which is an integral part of delivery. This includes Book Start Story corner delivery and the Borrow-a-Book scheme which we run jointly with Libraries. Children's centre staff sign families up to the Library during universal Children's centre activities and families can exchange books during the sessions.

As part of the Delivering Differently in Neighbourhoods work, we created a new Children's centre model which means we have one Children's centre: Middlesbrough Children's centre which has seven outreach sites at Park End, Berwick Hills, North Ormesby, Thorntree, Hemlington, Martonside and West Middlesbrough. Abingdon Primary School run their Children's centre on our behalf. This enables us to have a small Children's centre team in each locality, but the reality is that they work right across the town to deliver services.

The 3.5 Family Practitioner's work with all pregnant teens/teenage parents in Middlesbrough. They ensure all pregnant teens and teenage parents have a My Family Plan in place and work closely with Health visiting colleagues to ensure that mum and baby do well. The School Readiness team will also bring their Work Readiness colleagues in when baby is one years old to engage mum into education, employment or training.

- b) What services are provided by each of the centres?
- c) Does each Centre provide the same services/do some differ? If so, who determines which services are provided by which centre and do those services ever rotate from centre to centre to allow them to be accessed by service users across the town?

- d) Are some services offered in particular centres because there is a prevalence of related issues? (eg high teen pregnancy rates, etc).
- e) How are the services advertised? Services are advertised via the FSD website, the Council website, Council's Face book and Twitter accounts, timetables for parents, some campaigns, for example our Mobile phone free zone campaign have been advertised on a number of Radio stations, TV stations, including a slot on the One Show. We regularly run Radio advertising campaigns for the funded childcare.
- f) Are all services free or do some incur a charge? All services are free.
- g) What is the level of take up for each service provided at each of the Centres? And, how many service users attend the Centres for each service on a voluntary basis and how many attend as a result of a referral for support? There are currently 9,431 0-5 year olds in Middlesbrough and we have 8,302 of those children registered with the Children's centres (88%).

The centre has four target groups:

A2YO: 1098 eligible A2YO's; 956 worked with in the last 12 months (87.1%) Pregnant Teens: 40 potential pregnant teens; 35 worked with in the last 12 months (95%)

Teen Mothers: 108 potential teen mothers; 104 worked with in the last 12 months (98.1%)

Nursery Readiness cohort: 197 potential cohort; 191 worked with in the last year (97%)

Universal Delivery

Families can attend any of the universal services outlined at 2a. Over the last year, we have had 57,331 individual visits/contacts. These are made up of a visit to one of our sites, or where staff have worked with families in their homes.

- h) How many referrals are made to each of the centres' for support services? Who makes the referrals? See 2g: referrals made from Health visitors for the Nursery Readiness cohort interventions.
- i) How are those families monitored? (eg once the support package comes to an end is progress followed up?) How many of those that have received help are re-referred back into the services?
- j) In terms of the pregnant teens/teen mum's, these will be worked with until the child is 5 years old. Families also receive support from a named Health visitor until a child turns 5 and goes to School, where they will then be supported by a School nurse. At some point in this time, mum will reach a point where accessing universal services is all the support she needs. At any point during this time, if the family's needs became more complex, we would link with Family Casework colleagues for them to work with the family on their needs.
- k) Are there any services that you would like to provide but are unable to due to a lack of funding or expertise in that area?

I think we have a very sound and robust delivery model. However we do struggle at times to make sure delivery takes place as scheduled due to limited staffing numbers.

Do centres refer cases between each other, for example if a particular support service is only offered by one centre and not another can the family/child be referred to the relevant centre? If so, how is this managed and monitored?

Cases are not referred between centre sites. The only cases we carry are pregnant teens/teen mothers and if one of those had to be escalated, it would be sent to our Family Casework team colleagues as it would be their role to carry out more complex work.

m) Do the centres ever provide specialised support from an external provider on an ad-hoc basis?

Family Practitioners will often bring in specialised support when working with pregnant teens/teen mothers. Staff often have discussions with parents, whether they are one of our target groups or accessing our universal offer who require specialised support from an external provider and they very often do engage those specialist services.

1. Any other information you consider to be relevant.