**Appendix 1.**

**The Impact of Early Help Services in Derby City**

**April 2014-15.**

1. **Introduction.**

The Children and Young People’s Department in Derby City is committed to ensuring early help is available to vulnerable young people and their families in order to prevent them from requiring (more costly and socially damaging) higher tariff services in the future.

Derby has a comprehensive range of early help services available across the city, including Multi-Agency Teams (MAT’s), who are co-located with Social Work teams in an integrated locality based model and with whom they have forged close working relationships.

The MAT’s are complemented by Children’s Centre’s as part of the city’s broader early help offer. Children’s Centre’s provide services on both a universal and targeted basis in clusters of locality based centres across the city to families with children under the age of 5. Over the past 18 months, the focus of centres has been on work with more vulnerable families.

A further key element of the early help offer, is the Space@Connexions, which is a city centre based youth ‘one stop shop, which delivers careers and health advice, including sexual health services, drug and alcohol services and houses the Leaving Care Team.

This report aims to take an overview of the impact that early help services in Derby have had over the past 12 months by addressing areas impact can be either judged or measured against. There will be a narrative response to each of these areas in turn and the report will also contain a number of suggested actions to address challenges and areas for improvement raised within the body of this report.

The report needs to be read in the context of additional pressures that are currently being applied to children’s services across the country due to: a national rise in the number of initial contacts and referrals to children’s services, funding reductions, the impact of the toxic trio, adoption and permanence legislation and guidance, increasing population/changing demographics and inspection frameworks.

Locally, other pressures have included: a changing management structure, difficulty in recruitment and retention of experienced Social Work staff, increases in complex families, especially larger family units and migrant families from Eastern Europe. The BME population in Derby has increased from 15.7% in 2001 to 24.67% in 2011. Additionally, Derby has 3,300 more children under the age of 4 in 2011 than it did in 2001 and the city has experienced a higher than average population growth over the same period of time.

Furthermore, Derby has higher than national averages of children living in the most deprived wards and living in poverty.

1. **Early Help Performance Framework.**

In order to help demonstrate the impact of early help services, Derby has developed a performance framework in partnership with the City Council’s Performance and Information Team. This framework was developed in April 2014. The purpose of the framework is to develop a coordinated assessment of early help activity and support evaluations on the impact that it is having on associated services / measures (i.e. referrals to social care and the total number of looked after children).

Each of the measures is entered (onto the City Council’s performance framework, DORIS) by each of the MAT's with a summary being available by locality and then across the city. The first year of the framework (2014-15) involved setting baselines for each of the measures.

All MAT Managers received training on the use of DORIS in August 2014.

The first element of the performance framework focuses on how much early help do in specific areas of practice, i.e. the number of:

* New referrals through either a Vulnerable Children’s Meeting (VCM) or any other route

* Open cases

* Spider graphs completed
* ‘How was it for you’ surveys received
* Early Help Assessments completed

The second element of the framework will focus on how well early help deliver services, i.e. via the:

* Number of MAT cases with a completed assessment in place
* Number of cases re-opened within 3 months
* Number of people reporting that they were treated with respect (via ‘how was it for you’ surveys)
* Number of people reporting that workers listened to them (via ‘how was it for you’ surveys)
* Number of cases closed (with thereasons for closure)
* Number of referrals to other interventions

The last element of the framework is concerned with impact of services, via the:

* Number of spider graphs with an improving direction of travel
* Number of people reporting that they were helped with identified issues (via ‘how was it for you’ surveys)
* Child in need, child protection plan and looked after child rates

A number of the measures are collated to represent a percentage at locality / city level (i.e. percentage of spider graphs with an improving direction of travel, percentage of people reporting that they were treated with respect), which when collected annually, provides trend data on the impact of services.

The framework has been adapted following a review after the first year of data collection, as some inconsistencies with regard to data collection and recording had developed over the course of 2014-15. However, a number of the measures remained valid and the outcomes are recorded below.

In relation to data collected from the How Was It For You client evaluation forms across early help teams over 2014-15, the number collected was 160 and of this number, 127 told us that they felt that they were treated with respect by their worker, which is a 79.3% success rate.

129 told us that they felt listening to by their worker, which gives an 80.6% success rate and 128 told us that they were helped with identified issues by their worker, which provides an 80% success rate. This displays a positive feedback in relation to the way clients perceive their intervention form early help teams.

In addition to this, the key themes and issues that have been identified from the qualitative data that was collected as part of this client feedback told us that the main areas of intervention and support that clients found early help staff most helpful, were in relation to routines, strategies and parenting (which formed a collective element of thematic feedback) and confidence building. These two areas accounted for 23% and 20.5% of all positive feedback from clients respectively.

Other areas that saw high levels of positive feed-back were in relation to clients feeling that they were listened to by their worker and being given help with practical tasks such as housing, debt and attending appointments. The strength of relationships built with staff was also something that came through the analysis.

The two key areas where clients thought improvements could be made by early help staff were in relation to clients not always feeling that they had the opportunity to communicate their views

through other means such as written communication, particularly in circumstances where they either did not have either the confidence or skills to verbally communicate in a meeting or other formal environment. The other area for improvement was in the way staff sometimes feedback. It was felt that some feedback can make parents feel blamed for their child’s behaviour/situation.

It has to be added at this point that there was very little in terms of the amount of feedback that related to areas for improvement, which may in itself be an issue in terms of whether the approach being taken to gaining feedback from clients in early help is as robust as it needs to be in order to ensure we can gather intelligence that can help us to continually improve the services we offer.

The number or re-referrals back into a service often gives an indication on whether an intervention has been successful. Early help teams collect data on the number of re-referrals back into the service within three months of case closure. The number of cases where a client was re-referred across 2014-15, was 354 which accounted for 12.4% of the total number of cases that the early help teams worked with across the year.

Spider-graph is a distance travelled tool that is used at the start, review and end of interventions in order to help staff and clients identify distance travelled during an intervention and where positive changes have been made in their lives. The % of spider-graphs completed with an improving direction of travel over 2014-15, was 66%, which alongside the data form How Was It For You forms and case re-referral provides benchmarks for the first year of the early help performance framework, which helps to set targets for early help in 2015-16.

1. **Children’s Services Performance Data.**

The City Council’s Performance and Information team collect data that provides a quantifiable picture of the impact of early help services. The data below displays performance on a quarter by quarter basis over the past two years in several areas of practice, where early help is required to make a difference

* Number of early help/level 2 cases
* Number of child In need/level 3 cases
* Number of child protection plans
* Youth crime figures, i.e. numbers open to Youth Offending Service (YOS)
* Number of children in care
* Number of Early Help Assessments completed each quarter

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| --- | --- | --- |
|  | **2013-14** | **2014-15** |
|
| **Case Type** | **30/06/2013** | **30/09/2013** | **31/12/213** | **31/03/214** | **30/06/2014** | **30/09/2014** | **31/12/2014** | **31/03/2015** |
| Early Help/Level 2 Cases | 615 | 762 | 739 | 710 | 683 | 726 | 698 | 740 |
| CiN Cases | 815 | 875 | 831 | 943 | 923 | 923 | 1019 | 958 |
| Number of CP Plans | 188 | 200 | 263 | 300 | 327 | 329 | 324 | 324 |
| Children in Care | 462 | 462 | 458 | 445 | 459 | 459 | 448 | 475 |
| Numbers open to YOS | 140 | 148 | 161 | 178 | 165 |  183 |  152 |  125 |
| Escalated to Social Care | 31/274 | 44/331 | 36/292 | 51/245 | 51/273 | 53/369 | 18/206 | Awaiting data |
| Escalation % | 11.3% | 13.2% | 12.3% | 20.8% | 18.6% | 14.3% | 8.7% |  |
| CAF/EHAs completed | 135 | 94 | 159 | 168 | 187 | 206 | 254 | 282 |

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The data contained within the table outlines that there was an overall increase in early help case numbers over 2014-15 with an increase in case numbers from quarter one to quarter two, a slight decrease in quarter three (which also occurred in 2013-14) before a healthy increase in quarter four (this was not mirrored in 2013-14). The case load rose by 57 cases over the course of 2014-15 and there were an additional 21 cases worked by early help services over 2014-156 than in 2013-14. The number of cases over the period of the last two years open to early help services seems to confirm an upper limit case load of around750 - 800 cases. This data relates to Lead Professional (LP) cases only and does not account for cases where early help staff are involved with a family as part of a Team around the Family approach. This data will be collected through the early help performance framework in 2015-16.

Child in need cases reduced and then increased over the first 2 quarters of 2014-15 before they plateaued off to a consistent number in the last two quarters of 2014-15. The number of CIN cases

in quarter two of 2014-15 spiked to the highest rate (of CIN cases) over the past two years. The number of cases open under CiN in quarters 3 and 4 remain higher than at any other point during 2013-14.

This may relate to internal clarification (with Derby’s Children and Young People’s Department) that child in need cases can be held within early help teams so long as there has been a Single Assessment completed by a Qualified Social Worker in line with the statutory guidance contained within Working Together 2015. This may mean that cases are being more accurately identified as child in need rather than level 2 (emerging need) in line with the guidance contained within Derby Safeguarding Children Board's thresholds document. This, alongside the local pressures identified in the introduction of this report may account for the increased numbers of CIN cases over 2014-15.

The first X 2 quarters of 2014-15 saw continuing increases of children subject to child protection plans, particularly in quarter 1 of 2014-15. This was in line with both national trends and comparator Local Authorities. High profile Serious Case Reviews undoubtedly played a part in this increase, as have the number of Eastern European families who have moved into Derby (specifically locality 3) and who have been subject to child protection proceedings. These dual pressures are likely to have militated against some of the more positive impacts that early help services have had on child protection numbers. A further issue is that broader identification of vulnerable families (across a wider range of services) and increased local safeguarding knowledge can increase the need for higher tariff services, as more families in need of help at a higher levels of intervention are identified across the city.

The last X 2 quarters of 2014-15 have seen reductions in the numbers of children subject to child protection plans. It would be of benefit to interrogate and identify the numbers of children made subject to child protection plans over a discreet period of time who have been offered and accessed early help services in the past.

Furthermore, a cohort of children subject to child protection plans, (who have not received a prior early help intervention) should be audited to look at whether opportunities were missed for an early help offer that could have made a difference to that child/family later on in life.

Children in care numbers reduced over 2013-14 but have increased over the past 12 months in line with national trends. There was a particular spike in quarter 3 of 2014-15, which had been preceded by relatively stable numbers (gradually and slightly falling). As with child protection plans, it would be of benefit to interrogate the numbers of children placed in care over a period of

time (potentially December 2014, where there was a particular spike in admissions compared to discharges form care) who have accessed/been offered an early help service/s in the past. Furthermore, a cohort of cases of children in care (who have not received a prior early help

intervention) should be audited to look at whether opportunities were missed for an early help offer that could have made a potential difference to that child/family later on in life.

YOS numbers increased quarter on quarter throughout 2013-14 but have reduced significantly over the last 2 quarters of 2014-15. It would be difficult to attribute any of these reductions to the work undertaken in early help, without undertaking more in depth work to examine whether any of the cases worked with by the Youth Crime Prevention Officers (who are co-located in locality Multi-Agency Teams, MAT's) with those young people at risk of offending has actually led to preventing these young people from entering into the formal youth justice system.

The row of data pertaining to case escalation has two sets of numbers, the first is the number of cases that were escalated from early help services to Social Care, the second is the total number of cases that were closed in that quarter by early help services. These figures provide us with a percentage rate of case escalation on a quarterly basis, which is explored in the paragraph below.

The numbers of cases that have escalated to Social Care from early help over the past 2 years displayed an up and down pattern over 2013-14, although the general trend was upwards in terms of escalations. However, the percentage of cases that have needed to escalate over the past three quarters have reduced quarter on quarter, which is very positive and displays emerging evidence of a potential direct impact of early help work helping to reduce the number of families at risk of escalating to a point that they require a tier 3 or 4 intervention. At the time of writing this report, we are currently waiting on data for quarter 4 of 2014-15 due to a change over in database in children’s services in Derby.

The number of Early Help Assessments being completed has increased every quarter over 2014-15, which displays a greater recognition of emerging needs being identified by partner agencies and universal services, allied to a clear referral pathway into locality teams to meet these needs. The number has increased by over 100 over the course of 2014-15 and displays the successful partnership approach that has been adopted in the city to the use of a single assessment format and process to identify and address the needs of children and families with emerging needs. However, what we do not have a clear picture about in the city presently, is the quality of these assessments.

Overall, the picture presents some positive areas and areas for further work in relation to the impact of early help services. However, there are both national and local pressures that impact on services and can militate against the impact that early help services can have. Additionally, the cases being referred for early help have seen an increase in complexity, as highlighted by the increased number of level 3 and child protection plan cases being managed. This can divert resources away from early help to more complex needs, thereby potentially diluting some of the

impact early help services can have. It is also the case that early help interventions can take time for the impact of intervention to be seen with a family and therefore, longer term and on-going evaluation is required to truly understand the impact of early help services.

1. **Review of the Early Help Assessment.**

As of 7.4.15, the Early Help Assessment (EHA) had been used in Derby city for 12 months. A multi-agency, city and county review of the EHA has taken place in order to ensure that the document remained fit for purpose and that any changes that were needed to the document set were made. A four week consultation period took place in the city and county between 20.2.15 and 20.3.15. The consultation questions were agreed by a city/county multi-agency task and finish group, who also reviewed the feedback from consultation questionnaires, the consultation questions are attached in appendix 1.

Derby received 61 consultation responses from practitioners from a range of agencies (health were particularly well represented in this feedback) and 3 child/parent responses. The feedback received through the consultation process was very positive, with agencies immediately starting to use EHA since its launch in April 2014. There was a discussion about whether there had been enough consultation to take forward the review and any amendments. However, it was agreed that no further consultation was needed.

Key issues that were identified in the review process related to formatting issues, which were mainly linked to how the EHA documentation is used within the Derby Children’s Services IT system and should be addressed when the new IT system ‘Liquid Logic‘, is rolled out (this occurred on 27.4.15). In respect of the multi-agency forms, the main issue highlighted was the lack of spell check function, which had previously been looked into. However IT were not able to identify a way of overcoming this other than removing the password protect which was added originally to ensure that the forms remained consistent.

There was some confusion highlighted in the consultation regarding the use of the early help pre-assessment checklist. There was a debate about whether this form should be in use or not. It was decided that it did serve a useful function and minor amendments were added in the checklist form and EHA guidance notes to try and rectify this issue.

There was also some confusion over some of the multi-agency processes available in Derby i.e. Vulnerable Children’s Meetings. These issues were not part of the remit of the review and plan to be addressed via revision of the Vulnerable Children’s Meeting Terms of Reference, which will be presented to practitioners from partner agencies in locality briefing events in spring 2015.

Feedback requested further clarity over what assessment tools are available and how they should be incorporated into the EHA. Amendments are to be made to the form and the guidance document and future work was agreed to develop a menu of assessment tools.

The changes completed were signed off by the Safeguarding Board’s Policy and Procedures sub group on 22.4.15 and disseminated across partner agencies in the city and county by Policy and Procedures sub group members.

 **5. External Reports on Early Help.**

OFSTED's Early Help: Whose Responsibility? report in 2015 has provided a challenge to Local Authorities with regards to improving practice within early help. Some of the key challenges and recommendations from this report are outlined below:

* Opportunities to provide early help for children and their families were missed by all statutory partners with a responsibility for this.
* Many assessments were ineffective because they failed to sufficiently analyse or focus on what the child and family needed.
* Professionals did not always identify or meet the individual needs of children within a family.
* Early help plans did not focus sufficiently on the child, often lacked clear objectives, failed to specify what needed to change and were not regularly or robustly reviewed.
* Management oversight of early help was often underdeveloped and failed to identify or rectify weaknesses in the work being undertaken.
* When children were referred to social care services because there were concerns about their welfare, the service or referrer often did not consider or follow through the need for early help. As a result, nothing was put in place to prevent the child’s circumstances from deteriorating. This led to further referrals for statutory social care support.
* Too often, feedback on referrals was neither sought nor offered.
* Partner agencies did not fully evaluate the impact and effectiveness of their early help services.
* The planning of local services did not sufficiently recognise or address the needs of children living with parental substance misuse, mental ill health or domestic abuse.
* LSCBs were not effectively overseeing or challenging partner agencies with regard to effective early help.

The **recommendations** that OFSTED make in their report for Local Authorities are highlighted below:

* Improve the quality and consistency of assessment and plans by:
* promoting the use of evidence- and research-informed assessment practice
* improving the quality of analysis in assessments
* ensuring that assessments reflect the views and experience of the child and family
* Ensuring plans are regularly reviewed and that these reviews evaluate the child’s and family’s progress
* making the purpose clearer and improving the intended outcome
* Provide professional supervision to all staff delivering early help and ensure that their work receives regular management oversight, particularly in respect of decisions about whether families need more formal help.
* Ensure that all early help professionals have access to effective training.
* Ensure that children’s needs for early help arising from parental substance misuse, mental ill health and domestic abuse are addressed in commissioning plans.
* Ensure that when a child is referred to local authority children’s social care the referrer is consistently given good-quality feedback about the outcome of the referral
* Establish effective processes for evaluating the overall impact of early help. The report recommends that LSCB’s should:
* Critically evaluate the effectiveness of early help and publish these findings in the LSCB annual report
* Monitor the quality of early help assessment, planning and management oversight through effective audit arrangements
* Develop and monitor local quality standards to ensure that early help professionals have access to effective supervision and management oversight
* Evaluate the effectiveness of the LSCB threshold document to ensure that it is understood and used appropriately by all partner agencies and that children and families are helped effectively as a result
* Monitor and evaluate whether children’s emerging needs are appropriately met elsewhere when referrals to children’s social care do not meet the locally agreed threshold for statutory intervention
* Ensure that all professionals working with families receive effective early help training.

The Local Authority’s responses to the recommendations highlighted above are contained within the actions section of this report.

1. **Case Audit Themes and Issues.**

Every month, senior managers across the Children and Young People’s Department complete case file audits on specific areas of practice. A focus on early help cases is part if this cyclical audit process and between 1.4.14 – 31.3.15, a possible 86 audits should have been completed on early help cases. 52 of the audits were completed, resulting in a 60% completion rate. This under-performance is being robustly tackled by the senior management team in the Children and Young People's Department.

Over this period, there was an audit of early help work in over 11’s teams, which took place in May 2014. In August 2014, the audit activity focused on cases worked by under 11s teams.

In October 2014, the case audit focus was on Child Sexual Exploitation (CSE), which involved cases from across early help. In March 2015, there was a second audit of early help work in under 11’s teams. The information contained below provides an overview of the key findings from these audits.

**Over 11’s Audit Findings.**

This sample featured a range of different situations, including family breakdown, non-school attendance, substance misuse, and one case with no recourse to public funds, where the family had been supported for two years. The quality of work observed was variable – with some examples described as excellent and others where the work lacked focus and was ineffective, the majority were described as satisfactory.

Assessments and plans were more a concern, whilst networking with partner agencies was seen as strength. Of concern was the number of escalations and S47s which were seen as poor or missing, with procedures not followed e.g. no written social care assessment – there was a tendency to treat these somewhat informally although no examples were found of children remaining unsafe, i.e. children were visited and concerns were followed up, the issue was that a Section 47 Single Assessment was not always completed. The threshold in general had been applied correctly although several auditors commented that a more detailed assessment (early help or social care) was required. This area of work is going to be the focus of a Safeguarding Audit Visit (SAV) in May 2015.

**Under 11’s Audit Findings.**

Strengths were notable in the direct aspects of the work – engagement, focus, level of intervention. In most measures, on average around a third were deemed good and a half satisfactory. There were some good examples of work demonstrably making a difference for children, and some effective multi-agency and partnership work. Some positive comments were made about the consistency in worker and methods, good use of assessment tools and positive multiagency working, and largely, outcomes were satisfactory or good.

However auditors do comment the quality of work undertaken was variable, with other examples of drift, and momentum being lost. There was more concern about poor or missing assessments, plans missing or not SMART, reviews not taking place & limited user feedback – all of which may contribute to drift. There were also comments about a need for better engagement, more contact, and more account of children’s wishes and feelings.

**CSE Audit Findings.**

Poor completion rates of audits meant only ten cases were audited. The work overall in these cases was satisfactory or good, and in general a little better than other early help or social care work. The scores indicate that risk analysis, reviewing and indirect work are real strengths in these cases, and auditors commented on co-ordinated efforts in care planning and creating SMART goals. The speed of cases being picked up, on the whole, seemed positive, and decision making was recorded as a strength.

Although not particularly indicated from the ratings provided, auditors commented on the quality of 1-1 work and on-going engagement with the young people; particularly in the form of face to face meetings. However, auditors observed poor recording in some cases, with some elements missing or not having been completed in a timely manner e.g. chronology, case summary and assessments. Finally, the requirement for more frequent supervision and supporting management oversight was mentioned by the auditors in three cases; two of which were seen to not have had supervisions in an appropriate timeframe. The findings can be found summarised in the table on the next page of this report.

 **Under 11’s Audit Findings (March 2015).**

This audit has only just been completed and not all responses have been received back as yet, with 9 out of a possible 21 having been returned to the Quality Assurance Team by the time of this report being completed. However, the data, so far received is represented visually in the table below the CSE tabulated findings.

Early help case guidance was issued in April 2015 across all localities in the city and this will be used to address inconsistencies in practice that have been identified through the audit process over 2014-15. Audits that take will take place on early help over 2015-16, will help to identify the impact of the case guidance on frontline practice and help us to 'close the loop' on improvement goals.

1. **Not in Education, Employment and Training (NEET).**

The NEET strategy has been in place for 18 months and in that time it has made a positive impact locally on key measures and outcomes pertaining to the NEET agenda, such as reducing the NEET figure for the city to 5.9% and the unknown destination figure to 3.4% by March 2015.

Raising the Participation Age (RPA) data has also seen improvements over the past 6 months and Derby has enjoyed the highest in year improvement in relation to RPA data when compared against neighbouring authorities, comparator authorities and the national average.

A great deal of work has been undertaken under the strategy to achieve these outcomes, such as the development of information sharing agreements with Staffordshire and Nottinghamshire Local Authorities, returning a NEET Performance Coordinator role to the Space@Connexions, recruiting an apprentice to lead on tracking work, developing a social media approach to tracking, implementing a consistent system of identifying year 11 pupils vulnerable to NEET and tracking them post year 11, allocating a Connexions Personal Advisor to each of the key vulnerable (to NEET) groups in the city.

The aim of the refreshed NEET strategy for 2015-16 is to build on these successes of the 2014-15 strategy by continuing to reduce numbers of NEET young people to below 5.5% by April 2016, maintain numbers of unknown destination's below 5%, ensure appropriate provision to meet the needs of NEET groups, starting with a bespoke programme for teenage parents/pregnancy, ensure we understand the NEET cohort through 6 monthly deep dive analysis of the NEET cohort and ensure the performance framework that supports this strategy is reviewed on a bi-monthly basis in line with NEET steering group meetings, there is an on-going need to continue to maintain focus on key vulnerable to NEET groups in the city via allocated/specialist worker roles and to enhance the multi-partner ownership of achieving the key aims of this strategy.

Over the next 12 months a range of activity is planned to help achieve some of these key aims of the strategy, these include local community events aimed to engage young people who are NEET and have previously told us they do not want help, encourage schools to take a more systematic and robust approach to tracking former pupils, encourage schools to nominate NEET champions who will be trained by the Local Authority and develop a plan to ensure more care leavers take up city council apprenticeship opportunities.

The next 12 months will present challenges but the work outlined within this report on last year’s achievements alongside the actions, performance measures and joined up approach to NEET now being demonstrated in the city will help Derby to continue its improving performance story against NEET.

1. **Children’s Centres.**

Children’s centres have a central part to play in the city’s early help offer. The core purpose of centres is to narrow the gap for the most disadvantaged children and families by having a focus on:

* Child Development and School Readiness
* Parenting aspirations and parenting skills
* Child and family health services

The work of centres is therefore now more heavily leaned towards an outreach Family Visitor service to those families that local data tell us are more vulnerable, i.e. those with parental drug and alcohol use/mental health, domestic violence issues. However, centres continue to deliver groups that meet children and families with more universal needs as well as delivering more targeted groups.

Centres are divided into locality clusters that operate in line with the locality MAT and social care teams and are independently inspected by OFSTED on that basis. During 2014-15, X 3 sets of locality centres were inspected, with all 3 having an outcome of ‘requires improvement’. There were common themes to some of the rationale for these judgements, which mainly pertained to the lack of systematic and strategic data centres had access to in order to inform both delivery but more specifically tracking of progress.

Whilst there were areas for improvement, the quality of direct work and safeguarding practice was judged to be of a good quality standard and the inspection teams were impressed with several areas of operational practice, such as:

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| * Well written policies and procedures that were followed and understood by staff and managers.
* Work with partners to identify, prioritise and work with families who are most in need of support.
* Families receiving relevant and timely support and guidance.
* The majority of new families continuing to use the services three months after they had registered.
* Staff working hard to find two-year-old children who were entitled to a funded nursery education place.

Children's centres across the city will also, as of September 2014 have in place a new database that will address some of the data shortfalls outlined by OFSTED, by significantly reducing the need for manual collection of data by staff in centres that informs planning of services and tracking of progress.  |

The key areas for improvement for all 3 localities outlined in the OFSTED inspection reports are outlined below:

* Improve and embed systems for the assessment and tracking of children’s developmental progress, and ensure this information is used consistently across all activities to better inform next steps to nursery and early year’s provision.
* Ensure adults are fully aware of, and engage with, the range of learning and volunteering opportunities within the centres to further enhance their skills and job prospects and increase the number of adults that take up further learning and development opportunities
* With the support of the local authority, ensure local data about those families who have young children with disabilities are gathered and analysed so that the centre can meet their needs appropriately.
* Develop the record of the annual performance meeting with the local authority so that senior managers and the advisory board have more detailed information to monitor and challenge the group against
* Increasing parental membership of the advisory board and the sub groups.
* Improve the quality and availability of data from the local authority and partners so that the group can more effectively monitor the impact of its work and engagement with target groups over time.
* Sharpen the development plan targets to speed up work to: reduce health inequalities,

Improve the outcomes for children at the end of the Early Years Foundation Stage, including closing the achievement gap

* The local authority should: increase the number of places available for two-year-old children eligible for a funded nursery education place and work to increase the number of families taking up free nursery education places for three and four year-old children.

Each set of locality centres developed their own internal inspection action plan off the back of the feedback from OFSTED and these feed into a city wide action plan that has a focus on developing

systems to address the key issue of systematic data to inform planning and tracking of progress, which has been devised by the early help strategic lead for centres across the city (Fiona Colton).