

Final Report:

Review of Trafford MBC

Children's Centre Services 2012

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Introduction

1. This report sets out the context, main findings and key recommendations of the independent review of children's centre services undertaken between September and November 2012.

1.1. This report is supplemented by appendix 1 – 'National Best Practice in Children's Centres', which was developed as part of the review, and appendix 2 – 'Trafford data analysis of children's centre performance'.

Executive Summary

- Trafford is a high performing local authority in terms of children's centre key performance indicators. However, this very positive picture masks some inequalities in outcomes for some children and families.
- Registration and engagement rates of children and families, including target groups, are generally lower than those seen nationally in centres judged to be good or outstanding by Ofsted.

In line with national changes, Trafford MBC CYPS should target children's centre services further to meet the needs of more disadvantaged children and families by:

- Merging / clustering children's centres and related resources to focus even more on targeted early intervention and to align more closely with area based services and locality hubs.
- Clarifying children's centre worker roles so that outreach and family support work is more clearly defined and the roles are distinct from each other.
- Developing a locality based team approach to outreach (engagement of target families) and family support.
- Strengthening governance and performance management / service improvement arrangements so that targets are more focused on improving outcomes for those families who are disadvantaged, and in line with the Government's stated core purpose of children's centres. Amalgamate advisory boards to align with the proposed cluster model.
- Improving the use of data and implementing a consistent approach to evidencing impact so that self evaluation is more robust and needs / gaps are identified and met at a local level.

2. The national context in which children's centres operate changed in April 2012, when HM Government stated that:
 - 2.1. 'The core purpose of Sure Start Children's Centres is to improve outcomes for young children and their families, **with a particular focus on the most disadvantaged, so children are equipped for life and ready for school, no matter what their background or family circumstances.**'
 - 2.2. 'Children's centres should focus on **reducing inequalities** in child development and school readiness and support improvements in:
 - 2.2.1. parenting aspirations, self esteem and parenting skills;
 - 2.2.2. child and family health and life chances.'
 - 2.3. 'Evidence shows that development during the early years of a child's life lays an essential foundation for progress throughout life. Parenting and the home learning environment, health and economic wellbeing all have an impact on child development.'
 - 2.4. '**Local authorities should assess the strengths and need across the area to inform the local commissioning of services.**'
 - 2.4.1. 'This joint approach involves sharing data and assessing strengths and need across the local community to identify gaps and opportunities. This would inform a local, integrated offer of access to services through each children's centre, which ensures funding and resources are aimed at those in greatest need.'
 - 2.4.2. It will require children's centre leaders to assess what services already exist locally and decide what evidence suggests about which additional services are needed to improve outcomes for all parts of the local community but particularly for those with the greatest needs.'
3. In September 2012, Trafford CYPS initiated a project to review its current children's centre services.
 - 3.1. The review was undertaken between September and November 2012 by a team of reviewers with expertise and knowledge in commissioning, inspecting and delivering children's centre services nationally:
 - **Michael Blakey**, Children's Centre Inspector
 - **Nicola Jackson**, Former Commissioner of Children's Centres

- **Gemma Roberts**, Former Children's Centre Officer
- **Ryan Edgeler**, Young Consultant and Former Children's Centre user
- **Maegan Whiteley**, Participatory Research Specialist
- **Hazel Plant**, Data Analyst.

3.2. A children's centre steering group established by Trafford MBC oversaw the review.

3.3. The review was undertaken in five stages.

3.3.1. **Phase 1a** – data collection and analysis.

- Desk based research including an analysis of self evaluation documentation, development plans and published Ofsted reports for each of the children's centres.
- Desk based analysis of a wide range of data on reach, engagement and impact of services in Trafford. This included analysing data for each Super Output Area covered by each children's centre (appendix 2).

3.3.2. **Phase 1b** – national best practice review.

- Best practice review of a wide range of research into the effectiveness of children's centres. Reports on children's centres judged to be outstanding by Ofsted across England were reviewed (appendix 1).

3.3.3. **Phase 2** – stakeholder workshops and surveys.

- Street based parent consultations and parent workshops / attending 'Stay & Play' and 'Baby Club' activities.
- Stakeholder and staff workshops.
- Stakeholder (n=42) and staff (n=90) surveys.

3.3.4. **Phase 3** – analysis of stakeholder and staff feedback.

3.3.5. **Phase 4** – centre visits and future service models & recommendations. Each children's centre was visited by a reviewer to help the review team to understand the geographical setting of each centre. No further evaluation of the services delivered or outcomes achieved were undertaken during these visits.

3.3.6. **Phase 5** – Stakeholder and staff workshops to share good practice.

3.4. This report is structured around the proposed new inspection judgements that will apply to all inspections of children's centres¹:

¹ Refer to current consultation at www.ofsted.gov.uk

- access to services by young children and their families
- the quality and impact of practice and services
- the effectiveness of leadership, governance and management
 - This report uses Ofsted terminology when expressing proportions as words:

Proportion	Description
97-100%	Vast/overwhelming majority or almost all
80-96%	Very large majority, most
65-79%	Large majority
51-64%	Majority
35-49%	Minority
20-34%	Small minority
4-19%	Very small minority, few
0-3%	Almost no/very few

Main Findings

4. Overall, Trafford MBC is a high performing local authority. However, although there are several positives messages in respect to Trafford’s children’s centres there are also areas for improvement in producing the best outcomes for children and families².

4.1. In terms of the key children’s centre performance indicators³:

- 4.1.1. (NI72) – The achievement of children at the end of the Early Years Foundation Stage has been well above the national average over the last three years.
- 4.1.2. (NI92) – The gap between the lowest achieving children and their peers has been narrower than the national average over the last three years.
- 4.1.3. (NI55) – Obesity rates of children in Reception are falling and are now well below the national average.
- 4.1.4. (NI53) – Breastfeeding rates at 6-8 weeks are above the national average.
- 4.1.5. However, when data is analysed at a Super Output Area (SOA) level some inequalities become evident. For example, in 2010/11, NI72 overall was above the national average at Broadheath and Dunham Children’s Centre. However in

² Appendix 2

³ These are the key indicators that inspectors must take account of. However, data on the number of children living in workless households and those taking up working tax credits is not included here because the data is deemed to be too old to draw conclusions from. Data on hospital admissions is included in appendix 2.

the 20% most deprived SOA in that reach area, the percentage of children achieving NI72 has fallen consistently: from 69.2% in 2008/09 to 46% in 2010/11, which is well below the national and Trafford average⁴.

- 4.2. Registration and attendance rates are considerably higher at Partington and Carrington Children's Centre than other children's centres in Trafford. This demonstrates the effectiveness of 'Partington Pathway' at increasing registrations, and strengthening links with health services. However, registration and attendance rates are generally lower across Trafford MBC than those of children's centres judged to be good or better by Ofsted nationally. Target groups are not always engaged and increasing the participation of these children and families should remain a priority.
- 4.3. Centres often have strong partnerships with a range of other services, for example, Speech and Language Therapy, CAMHS and TEDS, but the recording of these sessions with families is not always accurately done by children's centres. As a result a consistent approach to recording attendance at any service accessed at the children's centre, and ensuring that all families are registered, will help to identify areas for development and the sharing of good practice and resource within Trafford.
- 4.4. Staff and stakeholders generally hold positive views about the impact of children's centres:
 - 4.4.1. Over 75% of respondents to the staff survey reported that they felt that children's centres were good or excellent at improving outcomes.
 - 4.4.2. Over 85% of stakeholders stated that children's centres are good or excellent at improving outcomes.
 - 4.4.3. 95% of stakeholders stated that children's centres are good or excellent at helping families to stay safe.
- 4.5. To date, eight Trafford children's centres have been inspected by Ofsted (see below).
 - 4.5.1. All have been judged to be satisfactory or good.

⁴ Appendix 2

4.5.2. None have been judged to be outstanding, although there are examples in neighbouring local authorities – for example, Longsight Children’s Centre and Martenscroft Children’s Centre in Manchester.

4.5.3. Many of the recommendations in Trafford inspection reports are similar to those found in other inspection reports in similar authorities. However, some other urban local authorities have made faster progress in reshaping services to meet the Core Purpose.

4.5.4.

Pre Sept 2011	Overall Effectiveness	Capacity for sustained improvement
Broomwood & Timperley	Good	Good
Flixton & Woodsend	Satisfactory	Satisfactory
Partington & Carrington	Good	Good
Stretford	Good	Good
Post Sept 2011	Overall Effectiveness	Capacity for sustained improvement
Davyhulme	Satisfactory	Satisfactory
Firwood	Satisfactory	Good
Old Trafford	Good	Good
Sale West	Good	Good

4.5.5. Although some services are evaluated well, there is no consistent approach to evidencing the impact of services across children’s centres. Without this focus and rigour of evaluation it is more difficult for centres and Trafford MBC to work out what works well and which services / interactions have the greatest impact.

4.5.5.1. However, there is some good practice in Trafford. For example Report Cards are used well to demonstrate the impact of Curriculum Vitae workshops at Firwood Children’s Centre.

Six Key Recommendations

5. This section outlines the key overarching recommendations from the review.
 - 5.1. In line with national changes, target children's centre services further to meet the needs of local families whose circumstances may make them more vulnerable:
 - 5.1.1. Trafford children's centres and resources need to focus even more on early intervention and to align more closely with area based services.
 - 5.1.2. Clarify children's centre worker roles so that outreach and family support work is more clearly defined and the roles are distinct from each other. Provide role specific training on engaging families and using data effectively.
 - 5.1.3. Develop a locality based team approach to outreach (engagement of target families) and family support.
 - 5.2. Increase registration and engagement rates, particularly of vulnerable groups. Ensure that all children and their parents are registered and that their attendance is accurately recorded. Streamline registration forms. Use live birth data and register families, whenever possible, at the point at which they register births.
 - 5.3. Strengthen links with health services, particularly health visitors and midwives, so that registration rates (and engagement rates) of target groups increase in all centres.
 - 5.4. Strengthen governance and performance management / service improvement arrangements so that targets are more focused on improving outcomes for those families who are disadvantaged, and in line with the Government's stated core purpose of children's centres.
 - 5.4.1. There is a need to strengthen the structures, systems and processes to provide Quality Assurance and professional challenge to leadership and management.
 - 5.5. Improve the use of data and implement a more consistent approach to evidencing impact so that self-evaluation is more robust and needs / gaps are identified and met.
 - 5.6. Promote children's centres well through a wide range of services, social media and through highly effective targeted outreach work.

Access to services by young children and their families

6. Partington and Carrington Children’s Centre has significantly increased the rate at which it registers children so that the large majority of children living in the reach area are now registered. However, this trend is not typical in Trafford (Table 1). Overall, a minority, or small minority, of children are registered with children’s centre services in nine out of sixteen children’s centres. Examples of good practice can be taken from centres in Brighton and Hove who typically register the vast majority of children through effective health led arrangements. It is critical that children’s centres are in contact with the families living in their reach areas so that services can be appropriately targeted for those most in need.

6.1. Overall engagement rates are typically low, with the exception of Partington and Carrington children’s centre, which is a significant outlier. Overall, less than a third (27.8%) of children living in Trafford accessed a children’s centre service at any children’s centre in 2011/2012.

Registration Rates 2011/12								Engagement Rates 2011/12										
	Almost no/very few	Very small minority, few	Small minority	Minority	Majority	Large majority	Very large majority, most	Vast/overwhelming majority or almost all		Almost no/very few	Very small minority, few	Small minority	Minority	Majority	Large majority	Very large majority, most	Vast/overwhelming majority or almost all	
Old Trafford									Old Trafford									
Broomwood and Timperley									Broomwood and Timperley									
Hale Barn									Hale Barn									
Broadheath and Dunham									Broadheath and Dunham									
Hale and Bowdon									Hale and Bowdon									
Partington and Carrington									Partington and Carrington									
Sale Moor									Sale Moor									
Sale Central									Sale Central									
Ashton upon Mersey									Ashton Upon Mersey									
Sale West									Sale West									
Firswood									Firswood									
Stretford									Stretford									
Urmston									Urmston									
Flixton and Woodsend									Flixton and Woodsend									
Davyhulme									Davyhulme									
Lostock and Gorse Hill									Lostock and Gorse Hill									

Table 1 – Registration and engagement rates 2011/12

6.2. Engagement of target groups appears to be low overall as seen in the 2011/12 data:

- 3% of fathers accessed a children's centre
- 8% of teenage mothers accessed a children's centre
- 15% of lone parents accessed a children's centre
- 13% of children from BME backgrounds accessed a children's centre
- 23% of children with disabilities accessed a children's centre
- However, attendance is not always recorded and this will distort the data. For example, TEDS is delivered at children's centres but the attendance of children and families is not recorded by the centre.

6.3. Ofsted inspections have identified registration and engagement rates as areas for improvement:

6.3.1. 'Increase the number of local children and families registered with the centre' and 'Increase the registrations of children aged under two years of age' – Partington and Carrington.

6.3.2. 'Increase the level of engagement of children and families from across the reach area, including those in target groups, particularly teenage mothers, lone parents and fathers' – Davyhulme.

6.3.3. 'Ensure the Primary Care Trust speeds the process to overcome barriers to sharing relevant data about the location and number of children in the area' – Firswood.

6.4. Parental views support the Ofsted recommendations above. Typically, parents who do not access children's centres say: 'if you don't approach them to find out what's going on they won't approach you.' Also, parents who access services delivered by partners at children's centres often say: 'they didn't tell us anything else that is going on at the centre.'

The quality and impact of practice and services

7. Parents that access children's centre services generally say that staff develop positive relationships with them.

7.1. The generic children's centre worker role can limit the work staff do with the most vulnerable families because the role is too broad and lacks focus. Staff strongly agree with this view:

7.1.1. 'Staff having specific roles such as: family support; groups and courses; registrations and promotions.'

7.1.2. 'Specialists in different roles, rather than everyone doing a bit of something when they have the time. We have to wear too many hats.'

7.1.3. 'A focused outreach team.'

7.1.4. 'At present I feel that children's centre workers are spread too thinly and there should be more specific roles.'

7.1.5. 'More specific roles for children's centre workers, for example family support workers and community engagement workers.'

8. Most staff believe that the data they receive is useful in helping them to carry out their role effectively.

8.1. However, data provided by the LA are not always provided in a timely manner to children's centres. Sometimes this data is not analysed sufficiently well or explained to staff so they can use it to inform development plans and to target services to those most in need.

8.2. Targets which are set by the authority and centre managers are often based on registrations and do not include engagement targets. It is important to focus on both.

8.3. Centre based development targets are not always specific enough – i.e. not broken down to Super Output Areas or taking into account narrowing the gap in outcomes between different groups. Data is not always provided to centres at SOA level, even when it is available. For example, EYFS NI72.

8.4. Staff and stakeholders views confirm the judgements made in a number of inspections of children's centres. Ofsted recommendations include:

8.4.1. 'Improve the analysis and quality of information gathered at centre level' – Firswood.

8.4.2. 'Make more effective collection and use of data to identify gaps, plan provision and evaluate its impact on outcomes for users' – Stretford.

8.4.3. 'Introduce rigour into the way in which the centre evaluates the impact of its work on improving the outcomes for children and families' – Flixton and Woodsend.

8.4.4. 'Continue, with the support of the council, to develop ways of evaluating the impact of the services provided' – Broomwood and Timperley.

The effectiveness of leadership, governance and management

9. There is no consistent approach to evidencing the impact of services and staff and different centres have therefore developed several approaches to measuring the impact of the services they deliver. Without this evidence and robust tracking it is more difficult for advisory boards to support and challenge leadership and management.

9.1. Staff generally support this view, for example: 'There is an incredible amount of data but it is often conflicting and is distributed at different times, in different formats with a lack of analysis. This poses problems for centres and their boards in understanding and using the data to plan more effectively and also impacts on the performance management processes in place (e.g. quarterly reviews). It is important to note that some data which is essential cannot currently be accessed (e.g. referrals from live births for automatic registration).'

9.2. Another member of staff, attending a review workshop stated:

Different places of recording information / different systems in place. People work in a variety of ways which may show difficult when people work across centres.

10. Recommendations from Ofsted inspections include:

10.1. 'Strengthen self evaluation by:

10.1.1. developing further strategies to evaluate and demonstrate impact;
and

10.1.2. with the local authority, improve information and data which demonstrates the proportions of relevant groups in touch with the centre and those who are not currently accessing the centres services.'

10.2. 'Strengthen the role of the advisory board in providing support to the centre and guiding its improvement planning' – Woodsend.

10.3. 'Develop the work of the advisory board so that they are able to provide more challenge to the centre by setting more specific and realistic targets for improvement' – Broomwood and Timperley.

11. Findings of the review support these Ofsted recommendations. There is significant duplication in the work of current advisory boards and leadership and management activity including the production of development plans and self evaluation documentation. Staff views support this approach:

• Amalgamate centres so only need 1 SEF / improvement etc.
parents forum / advisory board.

12. Governance would be improved by:

12.1. Amalgamating self-evaluation documents and development plans to avoid duplication, particularly if centres are closely linked by management or geography for example.

12.2. Quality assuring the work of children's centres in a more robust way. Strengthening structures so that the quality assurance function becomes an independent performance improvement function, or an internal 'at arm's length' function.

12.3. Providing effective supervision for all staff, particularly those delivering front line services, and setting individual targets linked to development plans.

12.4. Providing 'data packs' to children's centres on a quarterly or six monthly basis and supporting children's centres to analyse these well.

12.5. Providing staff training to ensure that all staff become skilled in quality assurance, measuring impact and self-evaluation.

Closing remarks

The review team would like to thank all those parents, staff and stakeholders who took part in this review.

We had a wealth of evidence available to us and through a process of synthesis and triangulation we have identified the key things that we believe will help make the biggest difference to the lives of vulnerable children and families. We have listened to many people and looked at evidence from around England about outstanding practice. Our recommendations are therefore founded on evidence of what works well.

Remaining focused on improving the lives of the most vulnerable – those that are often 'hidden' in the overwhelmingly positive picture in Trafford – is the most important thing that we can all do going forwards.

We recognise that there are significant changes ahead in Trafford and wish you well over the coming months.