

<i>item:</i>	8
<i>report:</i>	CYP12/10

IMPLEMENTING THE EARLY YEARS FRAMEWORK IN HIGHLAND/ EARLY YEARS REVIEW

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Summary

This report details the progress towards delivering the Early Years framework in Highland.

1. Background

- 1.1 In December 2008 the Scottish Government and CoSLA published the Early Years Framework. The Early Years Framework was a new type of policy document – one which was developed jointly by local and national government, and to be implemented jointly over a 10 year period. The concordat between the Scottish Government and COSLA sets the context for this policy development, and this is the first major joint initiative taken forward as part of it, as a long term commitment.
- 1.2 CoSLA recognised there would be no additional funding to support the Framework, at least in the short term. The Framework itself stretches well beyond the current spending review. CoSLA has therefore endeavoured to ensure any actions in the Framework are flexible, and in the short term will be of relatively low cost – in effect laying the ground work for improvements in later years.
- 1.3 This welcome focus on the early years matched the requirements for the NHS detailed in Better Health, Better Care (2007) for the NHS to focus on activity in the early years to set children and young people on a trajectory that would sustain good health throughout their lives and address health inequalities and disadvantage in the early years.
- 1.4 Whilst the Scottish Government acknowledge the need to prioritise the early years and to build capacity in services, but it will also be looking at ways of joining up budgets and shifting resources from acute services to early intervention. The medium and longer term objectives to support health and well being in the early years and to break the cycle of disadvantage will likely require financial support over future spending reviews.

2. The Early Years Framework

- 2.1 The Framework seeks to maximise positive opportunities for children to get the best start in life. It seeks to address the needs of those children whose lives, opportunities and ambitions are being constrained by

Scotland's historic legacies of poverty, poor health, poor attainment and unemployment.

- 2.2 At the heart of the Framework is a desire to see investment in early years focused on building success and reducing the costs of failure. This will mean a shift from intervening only when a crisis happens, to prevention and early intervention. In turn, that will mean providing a supportive environment for children and the earliest possible identification of any is not about throwing new money at old problems, or narrow initiatives. It is about a fundamental shift in philosophy and approach that embraces the role of parents and communities and supports them with engaging, high quality services that meet their needs.
- 2.3 The Framework makes a compelling case for improving support to children and families in the early years. However, it recognises that there is no single programme or approach that can deliver the improved outcomes we seek. It will take a concerted and long term effort across a range of policies and services to achieve a transformation in outcomes.
- 2.4 The scale of change that will be needed to shift the focus from crisis management to prevention, early identification and early intervention will be considerable, but the rationale for doing so is indisputable. This approach fits well with the GIRFEC approach whereby children and families access help as required with a minimum of bureaucracy.
- 2.5 The Framework is divided into two sections. The first part of the document concentrates on the purpose, which is to deliver transformational change in outcomes for children. It also sets how partners – both local and national – should approach delivering this radical change. The message in the first part of the document is that no one action or series of actions will deliver the improvement in outcomes we want.
- 2.6 To avoid the ‘tick box’ approach, the Framework is clear that the actions are not ends in themselves and other efforts will be required over the next ten years.
- 2.7 The Framework set out ten broad areas which, taken together, are a model for delivering a cohesive approach to transformational change in outcomes. At the national level, Local and Scottish Government will work alongside partners on all 10 areas. Within Highland, we are working with our partners in the Joint Committee for Children and Young People
- 2.8 Ten Actions are:
 - A more coherent experience of early years services for children and families;

- A focus on building the capacity of children, families and communities to secure outcomes for themselves;
- Getting to the root causes of success, failure and inequality;
- A focus on engagement and empowerment of children, families and communities;
- Using the strength of universal services to deliver prevention and early intervention;
- Putting quality at the heart of service delivery;
- Services that meet the needs of children and families;
- Improving outcomes and children's quality of life through play;
- Simplifying and streamlining delivery; and
- More effective partnerships

3. Implementing the Early Years Framework in Highland

3.1 Within Highland we have an established record of working across early years services and the Framework provides a welcome impetus to this activity.

3.2 The publication of the Framework prompted a review of the coordination of work across the early years in Highland. This led to the establishment of the Highland Early Years Strategy Group, the purpose of which is to have oversight of the development of the early year's agenda, and implementation of the Early Years Framework for the integrated children's service partners of the Joint Committee for Children and Young People in Highland.

3.3 The strategy group which has representatives from the local authority (social work, education, childcare and early education) from NHS Highland and from the voluntary & private sector has looked very carefully at the ten actions within the Early Years Framework and to avoid duplication within some of the actions has used these to form seven key improvement objectives. These improvement objectives have been embedded into *For Highland's Children 3*.

3.4 The Seven Actions are:

- Develop an Implementation plan for the Early Years Framework and embed within the community planning processes.
- Develop a balanced range of accessible and adaptable family support, childcare & early years' services. (*include wrap around target as a delivery strategy*)
- Develop capacity within universal services and promote early intervention to ensure that children and families get the help they need, when they need it
- Ensure a competent qualified staff group, promoting the development of an integrated workforce.
- Review the provision of and ensure the development of a quality, comprehensive family information service.
- Improve accessibility & quality of children's play

- Build on and embed joint partnership working between the public, voluntary and private sectors across Highland.
- 3.5 The Early Years Strategy group works with the Early Years Framework Implementation Group. Their role is to support agencies and partners in the delivery and implementation of the Early Years Framework across Highland. They also provide valuable information to the Strategy group about day to day operational issues.
- 3.6 The Strategy group is currently detailing existing activity across early years services, focusing on the service actions relating to each of the improvement objectives. Priorities for the next 2 years will be identified as a result of this exercise. Self evaluation quality indicators are to be embedded in the actions.
- 3.7 The improvement objectives along with the service actions will be included on the FHC3 website. These detail wide ranging activity across early years services and will support further joint working and collaboration on key priorities and tasks.

4. Progress to date

- 4.1 The Early Years framework sets out its actions into short term, medium term and long term priorities.
- 4.2 Significant progress has been made in achieving some key elements of both the short and medium term actions below are some good practice examples:-

- Role of the Link Health Visitor

In many areas in Highland, Health Visitors and pre-school education centres, and sometimes baby and toddler groups, have a long history of working together. Every pre-school education centre in Highland has a link Health Visitor with whom they can work, in line with the recommendations of Health for All Children 41 (commonly known as 'Hall 4'), the core UK programme of surveillance and screening to protect and enhance children's health and wellbeing. The programme is designed to deliver a universal service, while ensuring that those children most in need are able to receive support as soon as possible.

In 2008/9, the GIRFEC and Early Years Working Group now known as the Early Years Implementation Group worked with the early years and the health visiting service to review the role and function of the link health visitor. This involved:

- The development of a short briefing to all Highland Health Visitors and pre-school education centres on the role of the link health visitor.
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- Health Visitors also received with their briefing an extract of the 'Planning & Assessment' guidance used by all pre-school education centres in Highland. This was produced following requests from Health Visitors that they would like to have more information about the observation and assessment processes used in centres
- From queries raised with the Childcare & Early Education Service and the Care & Learning Alliance (CALA), it appeared that there was still uncertainty among some practitioners about the status and purpose of the link relationship. In order to assess the level of uncertainty and what assistance might help practitioners, a survey was devised to gather more detailed evidence

The key findings evidenced the following;

- Almost two-thirds (65%) of respondents met once a term or more often, indicating that the majority of those surveyed had an active link
- In addition to regular planned visits, 28 respondents noted that contact was made more frequently if the need arose
- Most (74%) respondents had received the Briefing mailed out in December 2007, which summarised the main roles and responsibilities of link Health Visitors and pre-schools in joint working. 15% were 'not sure' if they had received the Briefing and 11% said they had not.
- A large majority (84%) of respondents said they were clear about the purpose of their link relationship in supporting children. 12% were 'unsure' and 4% did not reply.
- Practitioners were asked to say how well they thought their relationship was operating. Over two-thirds (67%) of pre-schools and most Health Visitors (94%) regarded it as working 'well' or 'very well'
- Almost all respondents gave examples of the ways in which they worked together. These included:
 - sharing child protection concerns and taking action;
 - having a confidential 'sounding board' and source of advice;
 - working with children and families to address children's developmental or behavioural difficulties;
 - supporting parents who were experiencing problems;
 - referring to specialists;
 - preparing for children entering pre-school
 - joint health promotion work.

Respondents were also invited to make other comments and a number of people did so. Health Visitors mainly noted the importance of their link with pre-schools and its opportunities for regular discussion about children's progress. Pre-school respondents highlighted that their relationship with their Health

Visitor worked well and was valued but that more time was required.

The conclusions drawn from the survey were that children and families are being supported by this relationship in a variety of ways, ranging from situations where there are serious concerns about a child's welfare, to requests for service, joint working to tackle problems and more general health promotion activities. Pre-school practitioners value highly the advice of Health Visitors and view them as an important source of support and information. Health Visitors recognise the detailed knowledge that pre-school staff possess about each child and family and children's developmental stages. Issues identified in the survey were included in an action plan delivered by the Implementation group.

- Nutrition in the Early Years

Nutrition in pregnancy and in the first weeks, months and years of life is of vital importance for the mother, unborn child and as the infant grows and develops both in terms of weight but also in terms of enjoying food and a wide range of tastes.

A programme of work, undertaken across services to support the nutrition of women of child bearing age and children under the age of five in disadvantaged circumstances has resulted in the following outputs:

- The development of community based peer support for breast feeding across Highland communities
- The development of infant feeding best practice pathways
- Support for achieving Baby Friendly status for NHS maternity units across Highland
- The development of best practice healthy weight guidance for pregnant women, infants and toddlers.
- The related development of training to support the use of the guidance
- Work to increase the uptake of vitamins for children who are entitled to the Healthy Start benefit
- Work to increase the uptake and purchase of healthier foods for those accessing Healthy Start benefits.

- Facilitated Toddler Groups

The National review of the Single Outcome Agreement recognised that although the Early Years Framework was not fully developed at the time that the first round Single Outcome Agreements were finalised, the reports received from some Local Authorities including Highland did highlight action being taken in pursuit of the ambitions identified in the Framework.

The Toddler Facilitated Groups In Highland supported by Family First is highlighted in the Scottish Government's Review of the Single Outcome Agreement 2008 as a good practice case study.

Family First, under the CALA umbrella work with vulnerable families, to run a service that makes use of “Toddler Facilitators” to support parents and young children within their communities and to make services provided by the public authorities more accessible to families who need them. An example of an effective service initiative is where parent and toddler groups have been supported by Toddler Facilitators who are employed through Family First, which was set up to support vulnerable families with young children and is funded by Social Work Services.

The support has been essential to ensure groups operate in areas where the traditional parent led committee models have been problematic to set up in the first place and very difficult to sustain in the medium to long term.

In practice this helps to ensure that toddler groups are provided in areas where there are higher numbers of vulnerable families. In one area that had no provision for support in parenting and health matters the toddler facilitator took this on board and now supports the group on a fortnightly basis.

The group now provides parenting support, allows access to programmes such as baby massage and ease of access for parents to services such as the Oral Hygienist. Opportunity for early support and intervention is enhanced through improved access to universal service provision.

In areas where Polish is the first language of parents and their children the Toddler Facilitator can call upon the services of a Polish bi-lingual worker employed by CALA and this worker is able to explain routines e.g. setting up, snack, etc and also help the parents with story time, singing and general encouragement to participate.

Having Parent and Toddler groups that are supported by the Toddler Facilitator ensures that initiatives and programmes delivered by Health or Education, Culture and Sport are promoted to parents who may otherwise not have access. These include Play@Home, Bookstart, Top Tots, Weaning Fayres and breast feeding support amongst others

- Medium to Long term priorities
Work towards setting out a Parenting Support Framework, endorsed by JCCYP in October 2009, is underway. A multi-agency Reference Group to steer the work has been established and has met twice to date. Consultations with parents and agencies are being undertaken to gather information about current provision and gaps and views on what actions are seen as priorities for inclusion in the Framework

The Scottish Government are no longer able to make significant alterations to the existing Childcare Information Service until 2013. The existing service provided in Highland currently only provides detailed information about available childcare provision and not the wider family support service identified as a need in the Framework. We will work with the database provided via Scottish Government and work towards this system providing good quality information on available family support and signpost parents to agencies and websites that will be of benefit.

In relation to community capacity building we will continue to promote the effective work of the Childcare and Family Resource Partnerships who have close working links with key stakeholders in the childcare & Family support sector. Their relationship with the Strategy Group is essential in identifying gaps and successes in provision.

9. Evaluations

9.1 The GIRFEC model is described as being fundamental to the implementation of the Framework

9.2 The recent evaluation of getting it right for every child in Highland undertaken by Bob Stradling and Morag MacNeil, from the GIRFEC Evaluation Team at the University of Edinburgh identified a number of challenges facing Highland before acting as a pathfinder for GIRFEC including "...There also needed to be a significant drive towards greater connectivity between the universal and targeted services which gave equal emphasis to prevention and early identification of unmet need"

9.3 In relation to five questions posed by the evaluation team, the following provide evidence of how GIRFEC is embedding into Early Years practice.

- *Are the new processes and practices - often referred to as the GIRFEC practice model working as intended*

"The input from the child's Named Person is proving to be critical in facilitating the transition from single- to multi-agency support"

"Emerging evidence that children's needs are being identified at an earlier stage and when they are younger and signs that this is having impact on young children's development".

"Fewer referrals to social work for general support. Gradual shift to more children with needs being held within universal services".

- *Are the new processes and practice leading to improved outcomes for children and young people?*

“Since the introduction of the *Getting it right* approach there are signs emerging of a shift in practice towards a more holistic solution-focused approach combined with more holistic thinking about outcomes for children and families. This kind of shift is gradual and was not evidenced in all of the records and plans that we examined. Nevertheless it was apparent in many of them”.

“The assessment focuses on the impact that the concerns and unmet needs are having on the child’s development and well-being and are likely to have in the future if not addressed. This in turn clarifies what the intended outcomes should be.

The child’s planning meeting had been solution-focused rather than re-iterating the problems surrounding the child.”

“The intended outcomes fully reflected that holistic assessment and each was assigned a realistic timescale for measuring progress”.

- *Has the cultural shift from output-led to outcome led-thinking happened?*

“For the 0-5s there is good evidence of a greater emphasis on early identification and addressing the concerns by midwives (if the concern is about the mother) or health visitors. That is seen as part of their role within HALL4 anyway. School nurses taking this on board as well”

- *Are there signs that more children’s needs are being met within universal services?*

“There are signs of progress here but it is variable. Within health there is no doubt that health visitors are taking this on board....”

9.4 As can be seen throughout this report consultation is embedded into service delivery the regulated childcare sector have to regularly consult with service users in order to assess whether the service meets the needs of it’s users as a requirement of registration. The Care Commission also surveys parents in relation to their views.

9.5 As a service we need to work more closely with colleagues from the Highland Children’s forum, and will seek advice and guidance from them in identifying any gaps in processes, we will make use of their toolkit to further explore whether services on offer meet expectations and provide positive outcomes for children .

10. Equalities Impact Assessment

- 10.1 There are two stages to an Equalities Impact Assessment (EQIA). Stage 1 is an initial screening to assess for relevance. Stage 2 is a full EQIA.
- 10.2 An initial screening EQIA has been conducted on policies, functions, procedures and practices (collectively referred to as “policies”) for Pre-School Services.
- 10.3 The Initial Screening indicates that Pre-School Service policies show that there are:
- No concerns or evidence that policies have an adverse impact on any particular group regarding **Race**.
 - Currently there are leaflets for enrolment in English and Gaelic and website information in Polish.
- 10.4 There remain to be concerns regarding **Disability**. There is evidence of good practice and a high attention given to all our duties but it is recognised that practice varies, particularly regarding the use and availability of additional support. A paper seeking to begin to address this issue was taken to the Joint Committee in March 2009. A full EQIA may be required regarding Disability.
- 10.5 There are concerns regarding **Gender**. The single issue identified concerns the very low proportion of males are employed in Early Years work. This is a long established pattern with no indication that it will change in the immediate future. It is therefore suggested that a full EQIA may be required regarding Gender.

Recommendations

The Joint Committee is asked to note progress made towards implementing the Early Years Framework which provides a welcome impetus and focus to early years activity across Highland

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