

## Gloucestershire Health and Wellbeing Board

<b>Report title</b>	<b>HWB Priority: Best Start in Life – Update Report</b>
<b>Item for decision or information?</b>	<b>Information and Decision</b>
<b>Sponsor</b>	<b>Sarah Scott, Director of Public Health</b>
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<b>Organisation</b>	<b>Gloucestershire County Council Children’s Services</b>
<p><b>1.0</b> At its meeting of 21 July, the Health and Wellbeing Board requested an update on progress against the seven priorities set out in the Health and Wellbeing Strategy. The purpose of this report is to update the Health and Wellbeing Board on progress with the priority – Best Start in Life.</p> <p><b>2.0</b> The focus on early year’s outcomes and supporting children to have the best start in life acknowledged that Gloucestershire’s performance needed to improve, particularly for the most vulnerable. It was also recognised that a whole system - cross sector approach would be needed in order to achieve significant change. A key measure in this respect is the percentage of children achieving a Good Level of Development (GLD) at the end of Reception year. In 2018-19 Gloucestershire’s performance was slightly above the national benchmark, having improved 2.7% over 2017-18 (source: PHE Fingertips). However, inequalities in outcomes by deprivation and gender remain and the aim is to improve overall performance and reduce inequalities, bringing these in line with our nearest statistical neighbours.</p> <p><b>3.0</b> There is currently a working group, drawn from a wide range of agencies working within the early year’s sector. Its focus was initially around school readiness but has necessarily broadened over time to explore the wider range of services and influencing factors which can impact upon early outcomes for children.</p> <p><b>4.0</b> The Improving Early Outcomes for Children Working Group is chaired by Beth Bennett-Britton (Public Health Consultant) and, prior to lockdown, was meeting on a quarterly basis. The group has worked effectively to share knowledge and good practice both within statutory services and with other external stakeholders such as the NSPCC. To date it has concentrated on the following areas:</p> <ul style="list-style-type: none"> <li>• Better awareness across agencies of what is happening in Gloucestershire to improve early outcomes for children, identifying links and shared working opportunities where appropriate</li> <li>• Better understanding of the EYFSP data and working with Reception teachers to improve the consistency of the data against the national benchmark to enable a more accurate picture of the Good Level of development (GLD) data in Gloucestershire to inform actions where required.</li> <li>• Developing a shared understanding (vision) for Reception Ready and Y1 Ready Children, Ready Families and Ready Settings and Schools and implementing actions to move towards the desired end state.</li> </ul>	

- Agreeing and considering priority opportunities for improvement, which are:
  - Adverse Childhood Experiences (ACEs)
  - Parenting interventions and support
  - Smoother transitions and better integration including the Integrated 2-2.5 year check
  - Dads – to include paternal mental health, male role models and use of partner friendly language  
continued work to support settings and parents to support child development in readiness for school and beyond

**5.0** Work streams that have run within the scope of the group include:

- Development of leaflets for [families](#) and [professionals](#) to facilitate a shared understanding of what we mean by 'school readiness' and how families can prepare their children for school.
- Improving the transition process from Early Years (EY) to statutory education.
- Development of an EYFS Quality and Improvement Advisor post in the EY team to focus on: 1) schools with lower than average numbers of pupils with a GLD at the end of reception and 2) GLD inequality gaps.
- Investigate the reasons behind the high/increasing number of requests for statutory assessments and plans for young children and the high/increasing number of exclusions for early years and primary aged children in order to address and improve the situation.
- Two DfE funded projects:
  - The Early Outcomes (EO) Project to identify and support children in Gloucester City who are at risk of or display early signs of atypical language development from the ante-natal period onwards, particularly 0-30 months, in order to intervene at the earliest opportunity to minimise the achievement gap by age.
  - The Professional Development Programme to provide access to literacy, language and numeracy training for selected EY practitioners to enable them to cascade this training within their settings. Practitioners in Gloucester, Cheltenham and FoD were selected to receive this training.
- Development of a pathway to identify and address early language and communications difficulties.
- Participation in the EYFS National Research Initiative. GCC's membership of this initiative enables free online resources to be offered to EY practitioners. Schools which have pupil cohorts with known vulnerabilities are targeted but the offer is open to all schools with reception classes.

- Provision of Reducing Parental Conflict Training for professionals.
- Work to increase the take up of childcare provision for eligible 2 year olds

**6.0** Unfortunately the Improving Early Outcomes for Children Working Group has not been able to meet since lockdown due to the participation of key members in local Covid response arrangements and its impact on the provider sector for education and early years. However, a considerable body of work has been progressed, including :

- A family leaflet was distributed in hard copy to those who have a child starting school this September. It is intended that this will be repeated for next year's cohort.
- A Getting Ready for School [website](#) has been set up
- The Health Visiting Team developed and ran school readiness hubs for families with pre-school children.
- The group have looked at the impact of Adverse Childhood Experiences (ACEs) on children's wellbeing and life changes and have taken steps to ensure that their work is aligned with the Action for ACES programme, e.g. use of trauma informed approaches.
- Online ACES training has been developed and launched and early childhood trauma training for EY practitioners has been commissioned as part of the EO project (delivery of this is currently on hold).
- As part of the development of the communication pathway we have commissioned ECAT training for EY practitioners across the county settings (currently on hold)
- A transition process with good practice guidance, including content relating to children with additional needs, has been developed and launched.
- The Early Outcomes project was delivered across Gloucester City. Although a small project that took some time to get going, the analysis showed some positive feedback and impact. We are now working with a range of partners and agencies to roll out the delivery of the parent/baby and toddler groups across the county. We commissioned music providers to deliver sessions for parents and children aged 0-5 with a focus on using music to improve parent/child engagement and communication. Further music sessions will be delivered as part of the county wide groups once established.
- A range of practitioner in the PEEP model of parent/child support, this helps practitioners to support parents to support their child's development, particularly in relation to their speech, language and communication development
- The Professional Development programme is ongoing, although training is currently on hold due to the current pandemic.

- The percentage of eligible 2 year olds taking up a childcare place now matches the national average but remains below comparator authorities. We developed and circulated postcards to eligible families, worked with EY providers, social care and Health Visitor teams to promote this. We aim to plan further promotional events in the autumn term.
- A review of EY SEN inclusion funding has been completed and a new process developed to provide additional resource to support emerging needs at the earliest opportunity, thereby contributing to school readiness and minimising risk of needs escalating and continuing throughout the school years and beyond.

**7.0** Working under the Child Friendly Gloucestershire (CFG) Initiative there has also been a sub-group which has been looking at the pre-birth to 5 years cohort. The membership of that group is drawn from the faith, voluntary and commercial sectors and also includes representatives from the Improving Early Outcomes for Children Working Group. An initial discussion with both groups has evidenced support for merging these into a single group, working as part of the Child Friendly Gloucestershire Initiative. This will ensure good cross-sector representation and clarity around which group is driving forward with the Best Start in Life priority for the Health and Wellbeing Board.

**8.0** It is acknowledged that as the groups merge there will be a need to develop a dedicated action plan within the context of the Child Friendly County Initiative, which sets out a vision for all children and young people in the county. It will also include the development of a quality assurance and data dashboard to ensure that the Health and Wellbeing Board is provided with evidence of impact as the basis for future service development and delivery activity. The merged group will need support resources to enable it to function effectively and discussions are ongoing on how this can be best achieved.

**Recommendations to the Board:**

**1.0** The Health and Wellbeing Board is asked to note the report and agree to merge the Improving Early Outcomes for Children Working Group and the 0-5 years sub-group, that has been meeting under the auspices of the Child Friendly Gloucestershire Initiative, into a single multi-agency group.

**Financial/Resource Implications:**

There are no direct financial implications from this report.

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**10 September 2020**