

**Manchester City Council
Report for Information**

Report to: Children and Young People Scrutiny Committee - 4 March 2020

Subject: Early Years Service

Report of: Strategic Director of Children and Education Services

Summary

Further to the report submitted on the 4th September 2019 to the Children and Young People Scrutiny Committee, this report provides a further update on the strategic and operational priorities in relation to Early Years.

It can be seen that through the Early Years Quality Assurance arrangements in place we have continued to improve the quality of provision across the City ensuring that there is a strong early years sector supporting children to achieve the best possible outcomes.

In addition as outlined throughout the report a focus on the performance and outcomes in relation to the Early Years Delivery Model (EYDM) and the Healthy Child Programme has contributed to an increase in the uptake of developmental reviews at 9 months and 2 years and highlights good impact on child and family outcomes through our parenting and communication and language pathways.

Finally, whilst there remain challenges and areas for further development, an external peer review undertaken by the Local Government Association (LGA) validated the positive impact of Manchester's Early Years services and interventions. These subsequent findings and that of our self assessment will be used to contribute to our strategic ambition to collaborate and develop an even greater partnership between early years, help and health service so that together Manchester's children have the best start in life.

Recommendations

Scrutiny Committee members are invited to:

- 1) Consider the findings from the LGA Early Years Peer Review in October 2019
 - 2) Consider the Early Years quality assurance arrangements and identified actions to improve Good Level of Development.(GLD)
 - 3) Consider the progress and impact being achieved by the early years offer and delivery arrangements.
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Wards Affected: All

Manchester Strategy outcomes	Summary of the contribution to the strategy
A thriving and sustainable city: supporting a diverse and distinctive economy that creates jobs and opportunities	A strong Early Years sector will allow parents to continue in further education or employment opportunities. A good start in life is essential to enable our children and young people to achieve their full potential and contribute to the city.
A highly skilled city: world class and home grown talent sustaining the city's economic success	Improving educational outcomes is essential for young people to gain qualifications and contribute to Manchester's economic success.
A liveable and low carbon city: a destination of choice to live, visit, work	An outstanding Early Years system will be attractive for parents to choose to live and work in Manchester and will contribute to the city's success.
A connected city: world class infrastructure and connectivity to drive growth	Early Years services support families to be successful who are then able to deliver continuing growth in the City

Full details are in the body of the report, along with any implications for –

- Equal Opportunities Policy
- Risk Management
- Legal Considerations

Financial Consequences – Revenue

The Early Years Core offer is made up of £14.7m Council budget (this includes the Health Visitor contract of £10.3m) and a £1.8m contribution from the Dedicated School Grant.

Early Years resourcing requirement is contained within the budgets outlined above and there are no financial changes arising from this report.

Contact Officers:

Name: Paul Marshall
Position: Strategic Director of Children and Education Services
Telephone: 0161 234 3804
E-mail: p.marshall1@manchester.gov.uk

Name: Sean McKendrick
Position: Deputy Director Children's Services

Telephone: 0161 234 1961
E-mail: s.mckendrick@manchester.gov.uk

Name: Julie Heslop
Position: Strategic Head of Early Help
Telephone: 0161 234 3942
E-mail: Julie.heslop@manchester.gov.uk

Name: Nasreen King
Position: Early Years Strategic Lead
Telephone: 0161 234 1864
E-mail: n.king1@manchester.gov.uk

Name: Tracey Forster
Position: Lead Manager (Health Visiting, Vulnerable Baby & Child Health Services)
Telephone: 0161 946 9404
E-Mail: Tracey.Forster@mft.nhs.uk

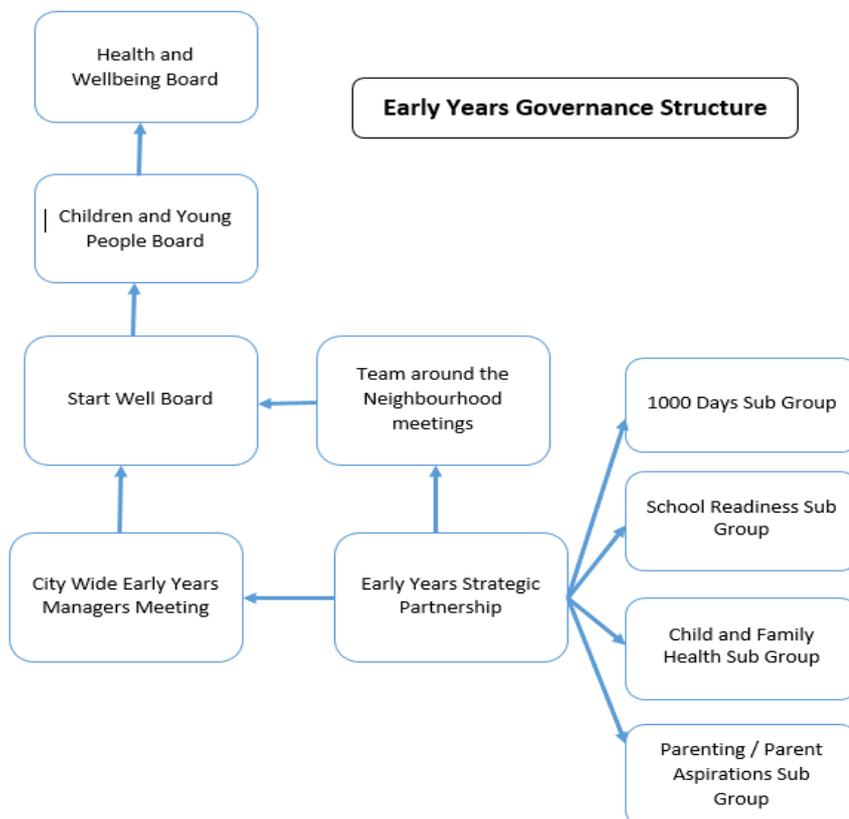
1.0 Introduction

- 1.1 Further to the report presented to the Children and Young People Scrutiny Committee in September 2019, this report will provide an update on the strategic priorities for Early Years, and will summarise the performance and outcomes in relation to the Early Years Delivery Model, the Healthy Child Programme and our quality assurance arrangements. The report also includes an overview of the recent LGA Peer Review of Early Years and identifies how we are utilising the Greater Manchester Early Outcomes Fund (GAME OF) to further develop and progress the early years communication and language pathway.

2.0 Background and Context

- 2.1 In September 2019, we reported to Children and Young People's Scrutiny Committee on the strategic priorities for Early Years with a focus on the first 1,000 days, the development of the Start Well Strategy and the developing work on locality working and our collaboration with the Local Care Organisation. Since September, progression of these priorities has continued at pace with the Start Well Partnership leading the work in relation to 1,000 days and there is now a clear articulation of the contribution of the early years offer linked to place and neighbourhoods.
- 2.2 Our strategic priorities for early years continue to be driven via the Start Well Partnership. It was agreed at a board meeting in November 2019 that the City would benefit from a clear articulation of our Start Well priorities with the aim of developing a strategy that outlines the priorities for the City's approach towards Start Well and 1001 days. A task and finish group is in place and will develop a Start Well Strategy by June 2020. Parental and community participation are being planned in April and May to inform the priorities and focused campaigns.
- 2.3 To strengthen our response in the first 1,000 days we are developing a risk stratification approach to ensure that not only we have broader reach, but that we also target, from the initial analysis, children who are highlighted as being at risk of not achieving a lower good level of development (GLD). Greater Manchester Combined Authorities(GMCA) have acquired funding to secure time from a co-production expert who will work with Manchester to ensure our risk stratification approach is effective for both residents and practitioners.
- 2.4 A redesign of the Early Years Services is underway and will involve moving to a neighbourhood and community based offer of Early Years by October 2020. This is being achieved through a more integrated, place based delivery with clear links and pathways to Early Help, Health Visiting and Social Work services. This approach supports the aligned work being undertaken in partnership with Manchester's Local Care Organisation (MLCO) to develop the 'integration' of services to ensure there is multi-agency 'think family' approach and a strong focus on effective delivery. Our collective focus and objective is to deliver improved outcomes and to close the gap in relation to a good level of development.

- 2.5 To support this work a specific task and finish group has been established to develop further the collaboration and partnership working between MCC and MLCO Services. This group will report at the end of February on the progress and new ways of working being tested to improve outcomes for children and families. Further details are included in the 'Improving Children's Outcomes through collaboration and working in partnership in a locality' presentation to the Children and Young People Scrutiny Committee.
- 2.6 Our aspiration is for the Early Years service to work across neighbourhoods to deliver a collaborative offer alongside Early Help Services. As part of this work a conceptual model has been developed taking a "Thrive like approach" so that families experience smooth transition through the types and levels of support they require throughout their family journey i.e. a moving away from having thresholds, and thinking whole family. As part of this work we have revisited the locality and neighbourhood governance arrangements and the current Sure Start Advisory Boards are reforming into Start Well partnership groups to ensure connectivity with the locality and to drive the four sub groups of the partnership board.
- 2.7 The diagram below illustrates the proposed governance arrangements across the neighbourhoods and how these link to our priorities.



- 2.8 There is a strong focus via the Start Well Partnership Board on fully understanding school readiness and outcomes being achieved in relation to 'a good level of development' (GLD) which currently remains at 66% ; adrift of the national average at 71.8%. The Start Well Board has agreed a risk stratification approach to target GLD specifically in relation to key areas of literacy and numeracy. Writing is a key area as in some settings there is insufficient focus on writing with a consequent 8% gap between communication and literacy. The board will oversee specific targets and actions to improve GLD that will link into the school cluster arrangements.
- 2.9 The early years strategy recognises the importance of school readiness and as such there are robust quality assurance arrangements in place that have improved the quality of provision across the City. This is evident in that 96% of settings are judged to be good or better. The 2019 Childcare Sufficiency Assessment reveals that Manchester has sufficient childcare to meet the needs of both working families and vulnerable children entitled to free early learning and childcare. Currently, 79% of 2 year olds and 90% of 3 year olds are taking up their free entitlement offer in a setting or school.
- 2.10 The Early Years Delivery Model (EYDM) forms part of a wider early years offer delivered through Sure Start Children's Centres. The model makes use of an 8 stage framework supporting work to increase school readiness by increasing the effectiveness of universal and targeted early years services. The robust use of evidence based assessments and interventions that support speech and language and parenting show evidence of improved outcomes for families and children. This is reported in more detail in section 6 and 7 of this report and demonstrates the impact being achieved from the Healthy Child Programme and pathways.
- 2.11 The first 5 stages of the model are predicated on the Healthy Child Programme delivered by the Health Visiting Service and have been rolled out across the City. The model takes a system wide approach and involves partnership working between midwives, health visitors, nursery nurses, early years practitioners and other services such as speech and language therapists and the Child and Parents Service (CAPS). The planned work through the Early Outcomes Fund(EOF) outlined later in this report will focus on closer collaboration with schools and settings which will help to inform the development of stages 6-8 of the model.
- 2.12 This work will involve building on the current communication and language pathway to introduce an approach that will focus on literacy outcomes. The early years workforce will be trained to deliver a programme called Raising Early Achievement in Literacy (REAL) which will involve working closely with parents and will impact positively on the home learning environment. Stages 5 and 6 of the current delivery model are being targeted to strengthen joint working across this key transition and to inform learning to embed stages 7 and 8.

3.0 LGA Early Years Peer Review

3.1 A Local Government Association (LGA) peer review of Early Years Services was completed between the 8th October and the 11th October 2019. The overall outcome was very positive with partnership working, our approach, and the strength and diversity of the early years offered highly commended by the review team. Areas for further consideration were highlighted including our joint commissioning arrangements and ensuring consistency in relation to parental and community engagement and the sharing of learning from pilots.

3.2 Scope and Focus of the Peer Review

3.3 Manchester identified three primary areas of focus for the peer review that were agreed at the beginning of the scoping process; this was via a partnership workshop and self-assessment completed using the Early Years, Speech, Language and Communication Maturity Matrix. Our key areas of focus were :

- Have we got the right integration and partnership arrangements to improve early years outcomes and school readiness?
- How well embedded and effective is the speech, language and communication pathway?
- How effective is our current approach to parental and community engagement?

3.4 These areas of focus align to the LGA challenge themes: Partnership and Strategy; Services and Interventions and Community Ownership, as well as incorporating aspects of commissioning, partnership, leadership and information and data.

3.5 Main Findings

3.6 Partnership and Strategy

3.7 Early Years services in Manchester were confirmed as being good and provide a sound basis to achieve improved outcomes for children and families.

3.8 The peer support team recognised that there was senior level commitment from the Politicians, Officers and Partners, to deliver high quality early years services. This was evident through the commitment to invest in and maintain our early years provision across the city. It was noted that our delivery has a strong alignment to Greater Manchester priorities, plans and innovation whilst focusing on the needs and diversity of children and families living in Manchester.

3.9 The team was impressed by the passion and commitment displayed by the wide range of early years practitioners seen during the peer challenge. There were many pockets of good practice, but practitioners commented that there was insufficient sharing of practice across the different localities.

3.10 The team observed different commissioning approaches and intentions across the Council, Health and Education and felt it was difficult to understand how these aligned. The Early Years service commissions early intervention services, including WellComm which has led to improved outcomes for many children. However, data shows an increase in children referred for specialist speech and language services and it was felt that the commissioning process should be strengthened system wide to ensure better alignment and to reflect commissioning needs across the partnership.

3.11 Services and Interventions

3.12 The strong priority and commitment to speech, language and communication across the partnership at all levels was recognised along with the clear investment in early intervention. This is evidenced by the retention of 30 Sure Start centres which were recognised as strength in the City. The Peer team felt the focus on early intervention and universal service provision had enabled services to be targeted to children who require additional support.

3.13 There is more to do and the analysis of data is beginning to highlight where resources should be focused. Accordingly the review team suggested that there are opportunities to strengthen the analysis of data and intelligence to further improve the outcomes for children. This would enable achievements to be more fully recognised within the early years community at locality level.

3.14 Community Ownership

3.15 There was strong and creative evidence of engagement with parents at a local level with active parent forums; parents as volunteers; groups that involve extended families and engagement with fathers.

3.16 Good engagement of parents has resulted in parents being involved in volunteering and eventually into employment and supporting other parents. The review team highlighted that the challenge is to ensure there is an overview across communities to ensure there are equitable and consistent opportunities for engagement.

3.17 There was recognition of diversity but there is a lack of a consistent strategy for engaging black and minority ethnic organisations and local community groups including those who may present as newly arriving in Manchester.

3.18 The findings from the review have been shared widely with all stakeholders and are informing future service priorities and planning. An action plan has been developed incorporating the areas outlined by the peer review team. This plan has been shared with partners ensuring a joined up approach and progress and impact will be monitored by the Start Well Partnership Board.

4.0 Overview of Early Years Quality Assurance Arrangements

4.1 Early Years OFSTED outcomes

- 4.2 Good progress has been maintained in relation to settings; in January 2020 96% of early years settings are good or better and 88% of childminders are good or better. Published inspections of settings and childminders that have taken place under the new Education inspection framework show that settings previously rated as “outstanding” now have a reduced grade of “good”. Settings with a previous grade of “requires improvement” or lower show improving grades with most achieving a “good” outcome. To support settings in preparation for OFSTED inspections the Early Years Quality Assurance team have re-drafted Quality Assessment Framework documentation, taking into account key changes in the OFSTED handbook. The Quality Assurance team has also offered additional readiness for inspection training events and bespoke support if needed.
- 4.3 Another change under the new framework is the Ofsted judgement of out of school provision which is rated as having ‘met or not met’. However, the inspection report produced is still detailed and gives recommendations on how the establishment can improve further. Out of school provision performs strongly across the city with 100% good or above, of which 37% were outstanding.
- 4.4 Currently, nurseries who are located in MCC tendered sites are facing significant cost pressures. Increased budget pressure linked to business rates, living wage changes and building maintenance costs have all reduced the amount of money available to invest in learning environments. This is coupled with a reduction in 2, 4 and 4 years old in a number of localities has made some sites unsustainable.
- 4.5 This is an area of concern and resolving this has political support of the executive member and a resource has been identified in the budget to assist with this issue. Furthermore a review is underway to look at the lease arrangements, building site surveys and reviewing the procurement arrangements for all tendered day care sites across the city. A report on all arrangements will be produced by the end of April 2020.
- 4.6 Good Level of Development (GLD) Outcomes
- 4.7 In 2019 ‘good level of development’ outcomes decreased by one percentage point ; this is the number of children achieving a good level of development. This means that Manchester’s gap in comparison to national performance has widened to six percentage points.
- 4.8 There are 12 areas that make up GLD and writing is the element which, for at least the past two years, has the fewest pupils achieving the expected standard. All of these measures saw a decrease in the percentage of pupils achieving the expected standard. The greatest decrease being in Numbers

(1.3 percentage points) and Listening & Attention and Writing (1.2 percentage points).

- 4.9 There are several pilot projects underway to develop practical ways to close the GLD gap. The work with schools in relation to Early Outcomes Fund (EOF) has targeted 9 schools with low literacy outcomes at the end of reception. Martenscroft Maintained Nursery, is leading a pilot project 'moving forward with literacy' with the aim of generating closer working between schools, looking at literacy rich environments and the development of early reading strategies including the development motor skills for writing.
- 4.10 Finally we are trying to support Early Years settings with the identification of special educational Needs and disability (SEND) and how children can be supported more effectively when a need is identified. Working with the National Association of Special Education Needs, we have trained 42 nursery practitioners in SEND to Level 3. This will enable practitioners to identify children with communication and language difficulties and other SEND traits for earlier intervention. Funding has been provided by the local authority and feedback has been very positive. The intention is to continue this offer for 40 Manchester nursery practitioners every year.

5.0 Early Outcomes Fund

- 5.1 In 2019, the Greater Manchester Combined Authority (GMCA) was successful in an application to the Department of Education (DfE) for funding to support the scale up and implementation of the Speech, Language and Communication Pathway of their Early Years Delivery Model over 12 months (2019/2020).
- 5.2 The priorities for Manchester were identified following the completion of a locality baseline evaluation which highlighted the need to improve children's literacy outcomes. The raising early achievement in literacy (REAL) intervention will be introduced as part of our communication and language pathway and will involve :
- Increasing the engagement of schools offering sequenced interventions delivered through the communication, language and literacy pathway.
 - Make better use of intelligence to target support to schools with the greatest numbers of children not achieving a GLD.
 - Support schools with improving the quality of the home learning environment and parental engagement.
 - Target 2 year olds who are not accessing provision to receive an intervention.
- 5.3 This approach promotes closer collaborative working with schools and settings. The pathway will increase its reach and will target those children who are not accessing services and are at risk of not achieving a GLD. The funding will

also support a workforce development programme that builds on the communication and language pathway but also incorporates the REAL approach which supports practitioners to develop skills that support children to achieve positive outcomes in literacy and improves the home learning environment.

6.0 Performance and outcomes for the Healthy Child Programme and the Early Years Delivery Model (EYDM)

6.1 The Healthy Child Programme

6.2 The offer of a New Birth Visit, Maternal Mental Health Assessment and Developmental Assessments which include the completion of the Ages and Stages Questionnaire (ASQ3) at 6-8 weeks, 9 months and 2 years is made to 100% of eligible children resident in Manchester and is delivered via a home visit or clinic appointment by the Manchester Health Visiting (HV) Service.

6.3 The table below details the uptake of the Developmental Assessments up to 2019-20 Q2

Healthy Child Programme: Contacts	Description	Q1 2018 -19	Q2 2018 -19	Q3 2018 -19	Q4 2018 -19	Q1 2019 -20	Q2 2019 -20	England 2018-19 annual data
6-8wk (GM only) Health Developmental Assessment (HDA)	Contact with every baby between 6-8wk to assess development and identify needs including an ASQ,	89%	90%	91%	89%	90%	92%	N/A
9 month Health Development Assessment (HDA) received by 12 months of age	Appointment for every child at 9m old to assess development and identify needs including ASQ,. Reported as uptake achieved by 12m old	59%	69%	67%	68%	69%	76%	76.7%
9 month Health Development Assessment (HDA) received by 15 months of age	Appointment for every child at 9m old to assess development and identify needs including ASQ,. Reported as uptake achieved by 15m old	60%	63%	71%	69%	71%	76%	82.3%
2 year Health Developmental Assessment (HDA)	Appointment for every child at 2yrs old, to assess development and identify needs including an ASQ. Reported as uptake by 2.5yrs.	56%	62%	68%	66%	67%	72%	77.6%

6.4 The following points to note:

- The take up of the 9 month reviews, offered by Health Visitor teams completed by the time children reach 12 months was 76% in Quarter 2. This shows an increase of 7% from Quarter 1 2019/20 and a 17% increase respectively from Quarter 1 2018/19.
- The take up of reviews for 2 year olds, offered by Health Visitor teams, measured when they reach 30 months, was 72% in Quarter 2; a 16% increase since Quarter 1 2018/19.
- The take up of the 9 month review is now 0.7% below the England average whilst for the 2 Year review there is a 5.6% gap.
- The Health Visiting service will offer a flexible approach for Health Developmental Assessments which will include home visits or clinic appointments. All Health Visitor Teams follow a 'missed appointment algorithm' when children are not brought for a clinic appointment which includes ringing the parent, checking addresses and offering a new appointment / home visit. This ensures there are multiple approaches in place to ensure children are reviewed.
- The Health Visiting Service continues to ensure publicity posters are displayed in Children's Centres, GP Practices and Community Clinics etc, with contact details for local Health Visitor Teams, to support awareness raising. Collaboration with GP's is being strengthened to ensure that professionals are promoting the uptake of the developmental review at key points of contact.
- Use of social media e.g. Health Visitor Facebook page and directorate Twitter is now being used to champion / promote attendance of development checks. The Directorate has posted over 100 Tweets and there are now close to 200 followers. The Health Visitor Facebook page is now up and running and the 9 month and 2 year posters have been posted on their facebook page.
- Health Visitor recruitment continues to be difficult due to a national shortage of trained Health Visitors to fill vacant posts. The service has been working closely with commissioners and Manchester Metropolitan University / Health Education England with a full cohort of experienced nurses entering Health Visitor training in October 2019.

6.5 Health Visitor (HV) Service

- 6.6 The HV service continue to experience staffing pressures that impact on performance. Caseloads across teams are weighted according to ward deprivation data between 1:250 in the most deprived areas and 1:350 in the least deprived areas. Other areas in Greater Manchester, operate at 1:150 to 1:400 Health Visitor caseload ratio.

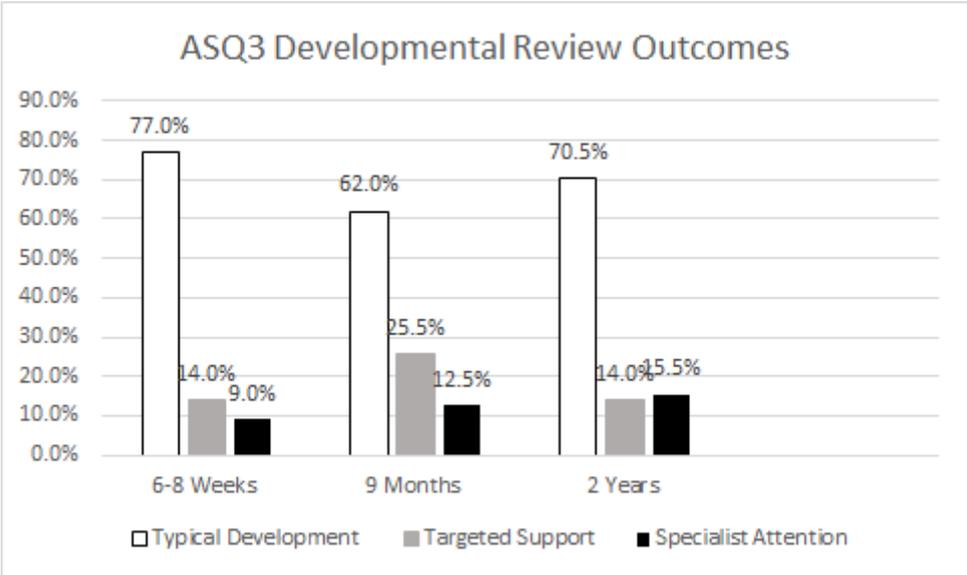
6.7 A review of provision has been undertaken by Population, Health and Well-Being and options to address capacity issues have been identified. In response, £100,000 funding has been secured in 2019/20 from Manchester Health and Care Commissioning to provide seven additional Health Visitor training places but further investment is needed, to fill existing vacancies and begin to increase the current establishment of posts. Training, recruitment and retention of health visitors in Manchester remains a priority.

7.0 Ages and Stages (ASQ3) Results

7.1 Data from 1st April 2019 – 30th Sept 2019 has highlighted the following outcomes based on the ASQ assessments:

- At 6-8 weeks 77% of children show typical development in all areas of learning; 14% require targeted support and 9% specialist attention.
- At 9 months 62% of children are developing typically in all areas of learning whilst 25.5% require targeted attention and 12.5% specialist attention.
- At 2 years 70.5% of children show typical development in all areas of learning; 14% require targeted support and 15.5% specialist attention.

7.2 Please see table below demonstrating the above results:



7.3 In summary ASQ data collated shows that the greatest area of need for children across the various stages are:

- 6-8 weeks communication skills
- 9 months gross motor skills
- 2 Years communication skills and personal / social development

8.0 Communication and Language Pathway

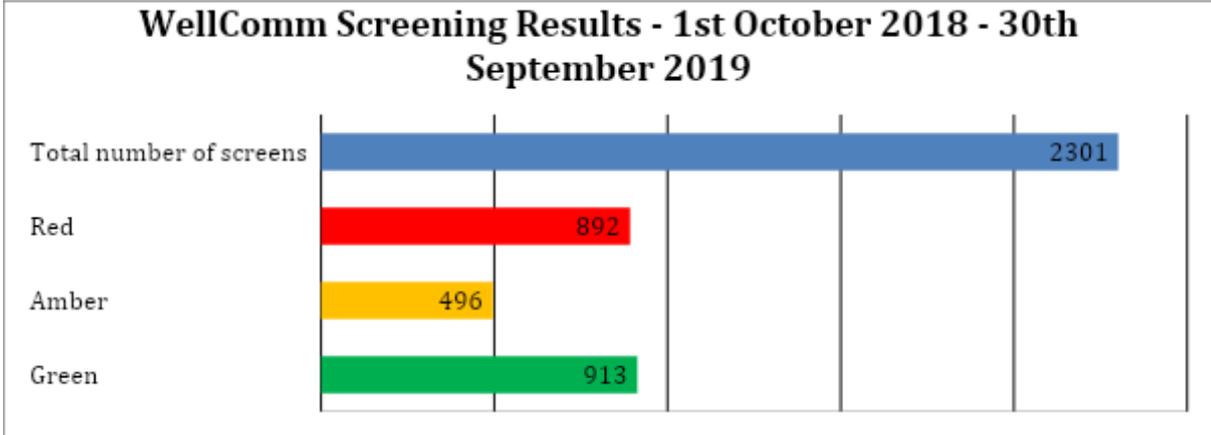
8.1 WellComm Screen Activity

8.2 The Early Years Communication and Language pathway supports language development for young children at risk of language delay and includes delivery of a standardised language screening tool known as WellComm. Where there is a suspected language delay a Wellcomm screen is completed.

- 8.3 During the 12 month period (1/10/18 – 30/9/19)
- 2,301 children in total received a WellComm screen, of the children screened
 - 892 children scored amber and
 - 496 children scored red.
 - 913 children scored green

8.4 This indicates that 60% of all children screened showed a delay in their language skills; those children scoring amber are offered group therapy sessions and those scoring red are referred to the NHS specialist service. Children who scored green are signposted to universal provision.

8.5 The table below demonstrates the above results:



8.6 WellComm Reviews

8.7 The WellComm review takes place 3 months post intervention and assesses whether children who score as red (requiring specialist support), amber (requiring targeted intervention from the EYDM) or green (universal support) post intervention. All children have previously been assessed as amber or red at the point of referral. Review information demonstrated at 3 months post intervention:

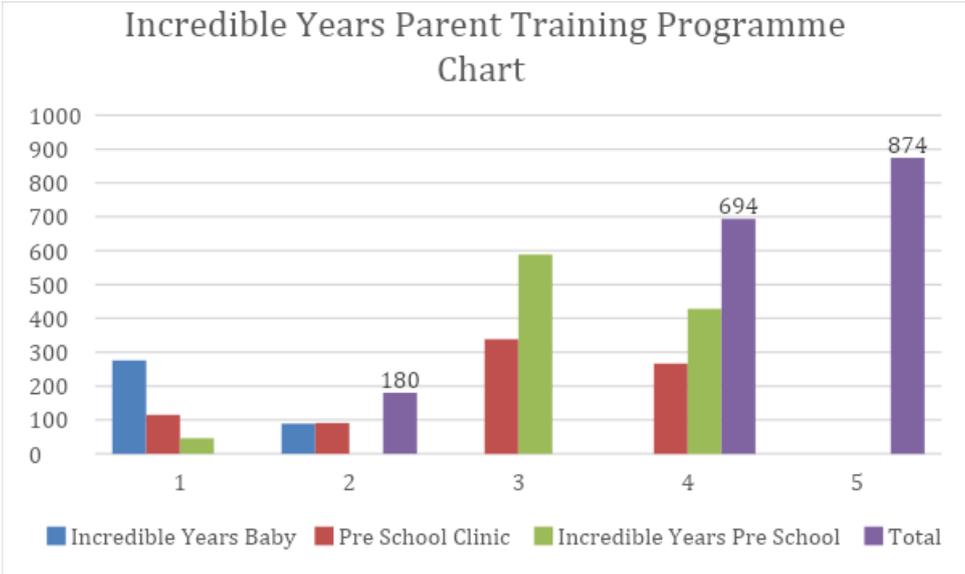
- 37% of Children were sign posted to universal services.
- 22% of Children continued in the intervention.
- 41 % of Children were referred to specialist services.

- 8.8 Following the review, children who continued to be assessed as having amber needs were offered further support from the Communication and Language Pathway.
- 8.9 In addition to WellComm activities, parents are given the opportunity to attend Parent Child Interaction (PCI) groups to increase their understanding of language development and communication strategies which support their child’s communication development. Pre and post questionnaires show a 92% increase in positive language strategies used by parents to encourage speech and language development during interactions with their children.
- 8.10 The early identification of children has led to a rise in the number of referrals to specialist services. The current pathway has been amended so that all children that score red up to the age of 18 months are now offered interventions through the pathway. These children are reviewed in line with the intervention and will only be referred to specialist services if their score remains red. A review is being undertaken with partners of the current commissioning arrangements, this is taking a system wide approach and will inform future delivery arrangements .

9.0 Parenting Pathway

9.1 The Children and Parenting Service (CAPS) is a multi-agency, early intervention service delivering high quality, evidence based interventions to Manchester’s most vulnerable children and their families. All CAPS interventions are delivered to targeted families with clinically significant problems such as poor attachment, child conduct, parental depression, parental anxiety or lack of confidence and risk of harm or neglect. There is overwhelming evidence that failing to tackle these problems early on in preschool leads to poorer life chances.

9.2 Take up of Incredible Years (IY) Parent Training Programme, Webster-Stratton (Parent Survival Courses in Manchester)



9.3 From October 2018 – Sept 2019 Children and Parents Service has reported on the delivery of interventions to 874 children from birth to 5 years.

- CAPS was scaled up effectively from 2014 to ensure that by the end of 2019 20% of the pre school population approx. 7,800 had benefited from receiving a CAPS evidence based intervention.
- There was over 70% retention rates on parenting courses.
- Higher levels of increased parenting confidence and mental health were reported post intervention.

9.4 Outcomes for Parents and Children

Eyberg Child Behaviour Inventory, before intervention 201 children out of 349 were in clinical ranges for conduct disorder behaviour problems. Within one month 132 children moved from clinical to non-clinical ranges on a standardised measure of child behaviour problems. This represents 66% of the cohort; by three months 100% of children moved to non-clinical ranges.

Beck Depression Inventory, before intervention 158 parents out of 328 were deemed in clinical range. 112 (71%) parents moved from clinical to non-clinical ranges on a standardised measure of clinical depression.

Karitane Parenting Self Confidence Scale, before intervention 72 parents were clinically low in parenting confidence; 54 parents (75%) moved from clinical to non-clinical ranges on parenting confidence.

10.0 Planned Evaluation of the Early Years Delivery Model

- 10.1 The Early Years delivery model has been embedded for almost five years which means we have data from interventions that show a positive impact on families and children. We are now in a position to start using the data to track outcomes for children and to evaluate the implementation and effectiveness of the model.
- 10.2 The evaluation will take place in three phases and will be completed towards the end of 2020 and will track a cohort of children who have progressed through the entirety of the EYDM for their full first five years. Following this, we have plans in place to undertake a longitudinal evaluation to understand the impact of the EYDM on children as they progress past the five year point and on through school and beyond.

11.0 Summary of Key Early Years Outcomes

- 11.1 The LGA Early Years Peer Review highlighted that Manchester delivers high quality early years services that demonstrate good impact on child and family outcomes. Following the peer review we have worked with partners to implement an action plan that focuses on key areas such language, literacy and numeracy to improve our 'good level of development'. A targeted approach of working with schools and settings which focused on these key

areas will help to close the gap for children identified as requiring this additional support.

- 11.2 Our early years model is an evidence based practice model which utilises research and learning to inform delivery and development. This means we are continually developing our approach and delivery. We are incorporating risk stratification to enable a targeted approach to improve outcomes for children at risk of not being school ready; this will include co- production with practitioners and parents
- 11.3 Our focus on the 1,000 days has gained momentum and is being driven by the Start Well Partnership Board with broad membership and a clear focus on delivering the Start Well priorities. The development of a Sure Start Strategy 2020- 2023 is underway and will be presented to the Children's Board in July followed by a launch event later in the year.
- 11.4 Partnership work across midwifery, health visiting, early years and early help services are being strengthened by testing out greater collaboration in relation to achieving Smoke Free Families; a significant factor in reducing infant mortality. The learning from this thematic focus will then inform and influence integrated working at a neighbourhood level. The accompanying presentation 'Improving Children's Outcomes through collaboration and working in partnership in a locality' provides more detailed information regarding the pilot.

12.0 Forward Plan and Priorities

- 12.1 The Early Years Service is progressing plans to move to a neighbourhood delivery model and this will strengthen collaboration between Manchester Local Care Organisation, Early Years and Early Help Services. We are focusing on developing a shared language, assessment and workforce development including use of the 'thrive approach', adverse childhood experiences (ACES) and brief advice.
- 12.2 We will work with wider partners to progress and address the areas for consideration identified through the LGA Peer review.
- 12.3 We will ensure that targeted approaches supporting school readiness are implemented and the learning and impact is shared across early years services.
- 12.4 The service will continue to work with a range of partners to increase the uptake of services, provision and interventions to ensure that the needs of vulnerable children are identified and supported at the earliest opportunity. We will strengthen our collaborative approaches with schools and settings to embed stages 6-8 of the model.

13.0 Conclusion

- 13.1 The redesign of Early Years services and the move to a neighbourhood delivery model will ensure better alignment with other services such as Adult

Social Care and Health Visiting services who have already aligned their services to this geographical footprint . The benefits of bringing services together across these localities will have a positive impact on families as this will reduce duplication and support collaborative working at a local level.

- 13.2 The strengthened focus on the first 1000 days and risk stratification approach will enable the earlier identification of children at risk of not achieving a GLD and by working with families in thrive way families will be supported to access seamless services and a range of interventions that support a whole family approach to school readiness.
- 13.3 This will be underpinned by the EYDM and a strong Early Years sector, children will continue to have access to a universal pathway and high quality provision. We have evidence we are achieving good impact on child and family outcomes through our communication and language and parenting pathways. However, challenges still remain to deliver year on year improvements and actions have been identified to achieve this.

14.0 Recommendations

- 1) Consider the findings from the LGA Early Years Peer Review in October 2019
- 2) Consider the Early Years quality assurance arrangements and identified actions to improve GLD.
- 3) Consider the progress made in increasing the uptake of the 9 month and 2 year developmental reviews and impact being achieved by the early years offer and delivery arrangements.