

Children's Plan 0–7 Expert Group Report

department for
children, schools and families

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Introduction

Introduction

1. Every child deserves the best possible start in life, and the support to fulfil their potential. Support for a young child's development has a lasting impact in later years. Some children do not benefit from a good start and the consequences of this are visible throughout their lives. Before birth, through infancy and into early childhood children experience their most rapid physical, cognitive, social and emotional development. Families are the most significant influence on young children, but as they grow up they begin to develop social networks outside the family, as they attend early learning and care settings and then school. This report looks at services and policies that affect children aged 0-7 and their families in order to offer recommendations for the development of the Children's Plan for England.

Background

2. This report is submitted to the Secretary of State for Children, Schools and Families from the 0-7 Expert Group that was established in summer 2007. The evidence and discussions reported here are intended to inform the development of the Department's new Children's Plan.
3. The group was chaired by Jo Davidson, Group Director of Children and Young People's Services for Gloucestershire County Council and the Rt Hon Beverley Hughes MP, the Minister of State for Children, Young People and Families. Membership of the group included professionals and managers from health services, early years, Sure Start Children's Centres, schools, and children's social care; academics; and heads of national organisations serving and representing children and families. A full list of members is in Annex A.

The group's remit

4. The group's remit, shared with two other groups looking at services and policies affecting children aged 8-13 and 14-19 and their families, was to consider how the Department should best deliver its long-term objectives to:
 - secure the well-being and health of children and young people;
 - safeguard the young and vulnerable;
 - achieve world-class standards in education;
 - close the gap in educational achievement for children from disadvantaged backgrounds;
 - ensure young people are participating and achieving their potential to 18 and beyond; and
 - keep children and young people on the path to success.

5. The 0-7 expert group met four times between September and November 2007. They used the first meeting to prioritise issues for debate; the second meeting to explore the issues identified, informed by early feedback from the wider consultation; and the third meeting to set out the main points for their report. Members of all three expert groups met on 19 November to review collectively the points they wished to emphasise.
6. The group's discussions leading to the recommendations set out in this report took place in the context of the 2007 Comprehensive Spending Review and were guided by the national 'Time to Talk' consultation, which was also informing the development of the Children's Plan directly. This report outlines a range of activities that the group believes can make an important difference in the short term as well as some longer-term aspirations. The full terms of reference for the group are in Annex B.
7. The group agreed that it was important to build on the progress that had already been made, and believed that there were many examples of excellent existing policies and programmes. In particular the group acknowledged the progress that had been made through the Every Child Matters reforms; the development of Sure Start Children's Centres; the investment in a free entitlement to early learning and care for all three- and four-year-olds; and the improvement in school standards. In order to concentrate on developing ideas for improvement, the group did not spend time revisiting existing policy.
8. During discussion, a series of principles emerged that guided the debate and the formation of the recommendations covered in this report:
 - The importance of putting the child at the centre of policy and delivery, and as far as possible providing them with the personalised support they need in the context of a universal service.
 - Understanding the fundamental role of the family and the wider community for the young child, and the importance of services respecting and involving the child's family.
 - Using an opportunity model rather than a deficit model; casting children and families in a positive light, celebrating and recognising their positive potential.
 - Recognising that some of the most powerful changes in children's services would result from changes in the attitudes and approach of those working with young children and their families.

Key themes

9. Guided by the approach taken to the national consultation, the group discussed issues under four themes: enabling a positive childhood; supporting parents and families; the personalisation of services; and moving towards a more preventative culture of heading off problems rather than reacting to crises. Given the breadth of these themes, the group used their first meeting to identify key questions they wished to focus on. It would not have been possible for the group to consider the entire range of issues facing young children and their families.

10. The group agreed that securing a **positive childhood** required an effective response to the challenges that children face in the modern world. Key issues were: demonstrating how much we value our children; increasing access to play; giving more of a focus to social and emotional development; and taking care to support rather than disempower parents. The group emphasised the importance of a rounded view of positive childhood which takes account of harder-to-measure factors such as social skills and play alongside educational attainment. They agreed that it would be helpful for the Children's Plan to articulate the roles of different people and organisations in promoting positive childhoods.
11. The group agreed that all services need to do much more to involve **parents and families** with young children. The family – fathers as well as mothers, grandparents, and the extended family – are the most significant influence on young children. Family involvement in their child's development can greatly enhance children's attainment and well-being, but services can fail to capitalise on the benefits to children of involving their parents and family. The group considered how services could better take account of family and better engage the wider community, and what more can be done to help adults balance the responsibilities of work and parenthood.
12. The group focused on two elements of **personalisation**. First, the group emphasised the need for all families to have access to the support they needed. This required effective outreach to engage those families who find services hard to access. Second, the group focused on personalised learning both in early years' settings and in schools.
13. Under the heading of **prevention** the group considered how services can better support early identification of, and early intervention in, problems for children and families. They agreed that, for many parents and some professionals, the system is too complex and difficult to navigate. The group agreed that there was a need to improve the information about services which was provided to families, as well as to improve how services worked together so that they felt better co-ordinated to the family.
14. When the groups reviewed their discussions collectively they identified a number of common themes across the reports. They highlighted, in particular, the importance of clear roles for the different disciplines in the children's workforce and a clear role for the school.

The structure of this report

15. Chapter 1 is a review of evidence about children aged 0-7, their experiences and their outcomes. This draws from *Children and Young People Today: Evidence to support the development of the Children's Plan* published by the Department for Children, Schools and Families.
16. Chapters 2 to 5 focus on the four themes the group discussed, outlined above.
17. Chapter 6 pulls together the group's thinking on the implications for delivery of their recommendations, particularly in terms of resources, performance management and workforce.

18. The report reflects the collective view of the expert group rather than the views of any particular individuals. It was not possible to reflect all the points made in the group's discussions in this report. Throughout the process, however, the richness of the wide-ranging debate has helped to inform the Department's thinking. The main points the group agreed on are set out in bold throughout the report and these recommendations are summarised in Annex C. The group believes that a focus on these issues will contribute significantly to better outcomes for children and families and recommends that the Secretary of State consider these in the development of the national Children's Plan.

Chapter 1: Evidence

- 1.1 This chapter summarises the evidence presented to the group about young children and their outcomes. *Children and Young People Today: Evidence to support the development of the Children's Plan* published by the Department for Children, Schools and Families gives a more extensive account of evidence about children and young people.

Demography

- 1.2 There are 4.7 million children aged 0-7 and this is forecast to increase markedly over the next decade to 5.4 million¹. Nearly one in four births is to mothers who were born outside the UK².
- 1.3 In 2004 there were 7.4 million families containing 13.1 million dependent children³ in the UK⁴. **Most children live in couple families.** 66 per cent of children live with a married couple, 11 per cent with a cohabiting couple and 23 per cent with a single parent.

Economic well-being

- 1.4 **Almost all children live in families that have experienced rising prosperity over the last 10 years⁵ and the proportion of children living in relative poverty has fallen** by around 17 per cent since 1996/97⁶. Despite this progress, 2.8 million children⁷ (22 per cent of all children) are living in relative income poverty. Child poverty is more prevalent among ethnic minorities: although they make up 14 per cent of the total child population, they constitute 25 per cent of all children living in poverty.

Health

- 1.5 **Infant mortality rates have been consistently falling⁸ but are still relatively high in the UK;** in 2004, the UK had the sixth highest rate among 25 OECD nations.
- 1.6 **More mothers are breastfeeding their babies.** Between 1990 and 2005, this increased⁹ from 64 per cent to 77 per cent. However, only 64 per cent of mothers were still breastfeeding six weeks after birth.

1 Government Actuary Department, 2006-based principal projection

2 Health Statistics Quarterly 31

3 Dependent children are defined as those aged under 16, or aged 16-18 in full-time education and never married

4 ONS, Labour Force Survey, spring 2004

5 ONS, Social Trends 37, 2007

6 DWP, Family Resource Survey 2004-5

7 DWP, Family Resource Survey 2004-5

8 ONS, Health Statistics Quarterly 35, autumn 2007

9 Incidence of breastfeeding is defined as the proportion of babies who were breastfed initially

- 1.7 **Obesity in children has risen by almost 50 per cent** in England since 1997. But physical activity rates are improving. Between 1997 and 2002 the proportion of boys aged 2-10 with low levels of physical activity fell from 37 per cent to 26 per cent, and for girls it fell from 44 per cent to 20 per cent¹⁰.
- 1.8 **The evidence on changes in mental health in Great Britain is mixed.** The incidence of mental disorders for children aged 5-10 is not significantly different between 1999 (8.2 per cent) and 2004 (7.7 per cent)¹¹. However, the proportion of young people with hyperactivity or emotional problems has increased¹².

Attainment

- 1.9 Foundation Stage Profile (FSP) data¹³ has shown over the past four years an apparent decline in the proportion of children reaching a good level of development at the end of the Foundation Stage (age 5) although some of this is likely to be due to assessment and moderation issues (the FSP was only introduced in 2003). 2007 figures showed a slight overall increase, although the gap between the attainment of children in the most deprived areas and children elsewhere stayed the same.
- 1.10 **Since 1997 there has been an increase in the proportion of children at the end of Key Stage 1 reaching the expected level (level 2) or above. Since 2000 the level has been relatively stable**¹⁴. The proportions achieving this level in 2006 in reading, writing and maths were 84 per cent, 80 per cent and 90 per cent respectively.¹⁵ The proportion of pupils currently progressing two national curriculum levels between Key Stages 1 and 2 is 81 per cent in English and 73 per cent in maths. The gap in performance at Key Stage 1 between pupils claiming free school meals and others has remained stable in recent years.

Safety

- 1.11 According to survey data, children feel safe from being hurt by other people¹⁶. **A small minority of children is at risk of abuse and neglect.** At 31 March 2007, there were 27,900 children and young people on the Child Protection Register¹⁷.
- 1.12 In 2006, **the number of children aged 0-15 killed or seriously injured in road accidents had fallen by 52 per cent** compared to a 1994-98 baseline. Deaths from injury have fallen from 11 deaths per 100,000 children in 1981 to 4 deaths per 100,000 children in 2001.

10 *Statistics on Obesity, Physical Activity and Diet, England 2006*, www.ic.nhs.uk

11 Green et al., *Mental Health of Children and Young People 2004, 2005*

12 Bradshaw and Mayhew, *The Well-being of Children in the UK, 2005*, p149 Originally from Collishaw et al., 2004

13 DCSF, 2007 (unpublished)

14 Until 2003, KS1 scores were based on test data, just as for KS2. In 2004 some schools piloted teacher assessment of scores only, and in 2005 all schools moved onto a teacher assessment (TA) system

15 DCSF, SFR 26/2007, National Curriculum Assessments at Key Stage 1 in England 2007

16 OFSTED, TellUs2 Survey 2007

17 DCSF, Referrals, assessments and children and young people who are the subject of a child protection plan or are on child protection registers. England, year ending 31 March 2007.

Children receiving additional support

- 1.13 In February 2005, there were 88,700 children aged 0-7 receiving help from social care services and there were 17,700 children aged 0-7 in care at 31 March 2006.
- 1.14 There are an estimated 570,000 children with disabilities aged 0-18¹⁸ in England, of whom 100,000 have complex care needs.
- 1.15 61,280 (or 1.5 per cent of) pupils across maintained primary schools in England had statements of special educational needs (SEN). There are also an additional 727,700 pupils (17.7 per cent) with identified SEN but without statements¹⁹.

18 DWP, Family Resource Survey 2004-5

19 Statistical First Release *Special Educational Needs in England: January 2007*

Chapter 2: Positive childhood

- 2.1 Children's experiences between the ages of 0 and 7 set the foundations for their future. Children's brains develop faster in the first two years than at any other stage and they learn more quickly. The quality and stability of the child's early relationships with parents or other close carers underpin their later social and emotional health, and their ability to relate to others. As children develop, their needs broaden and opportunities to meet and play together with other children in a range of settings become important. Such opportunities allow children to develop the self-confidence, self-control, social and practical skills necessary for later success, and help them to get the best from more formal education from age 5.
- 2.2 Parents remain the most important influence on their children's attitudes and values, as well as their early experiences. Support for parents, families and communities to ensure that all children have the best possible start in life is therefore essential for good development. While overall levels of achievement have increased markedly in recent years, the gaps in achievement between disadvantaged children and their peers, which become apparent at an early age, remain stubbornly visible at every stage.
- 2.3 Parents of children growing up in the twenty-first century face a changing context which poses some particular challenges. How to ensure these do not prevent every child from having a positive childhood is the subject of this chapter. The group made some general recommendations about how to address these challenges, but their discussions on positive childhood also informed the more specific recommendations in the following chapters of this report.
- 2.4 Evidence of the changing context includes:
- a. Relationships: most children still grow up in couple families, and parents manage to spend more time with their children than in the past (one major study estimates it is an average of 99 minutes per day compared with 25 minutes in 1975²⁰.) Nearly a third of children will experience family breakdown. Divorces are more likely to happen when children are young – the age group most affected is between the ages of 5 and 9.
 - b. Play and public space: space to play safely is a key indicator for children and parents of a positive childhood, although some adults are intolerant of children playing in public space. Research²¹ has shown that nearly two-thirds of parents are worried about letting their children play outside, and one-third of children never play outside. Parents are afraid for their children's safety when they are playing out; in one study²² 'stranger danger' was reported to be the biggest worry of parents, followed by danger from traffic. Most respondents thought that their neighbourhood was unsafe for children.

20 Gershunny, *Utility of Time Use Data and The Future Foundation*, 2004; *The Changing face of Parenting*, 2006

21 See *Staying safe: a consultation document*, DCSF, 2007

22 McNeish and Roberts, *Playing It Safe, Today's children at play*, Ilford: Barnado's, 1995

- c. Media and technology: children have more access to mobile phones and the internet at younger ages. Children are also more exposed to advertising, and are more likely to begin to make product purchases and define their aspirations in terms of specific 'brands' at a younger age.

2.5 Group members identified the following as key issues:

- how to develop consensus on the importance of a good childhood and engage the widest possible alliance, to demonstrate how much we value our children and want to ensure they all have the best possible experiences and opportunities;
- the need to tackle some of the real and perceived barriers to children's play;
- the need for a greater focus on children's social and emotional development, especially at early ages; and
- the importance of helping parents and families as far as possible to secure a good childhood for their children, rather than seeking to displace their role. This point is explored in the next chapter on parents and families.

A good childhood as a unifying force

2.6 The group recommends **(i) building a consensus around a view of positive childhood which accords equal emphasis to educational attainment and harder-to-measure outcomes, in particular enjoyment and social and emotional well-being.**

2.7 It was important that the range of professionals and volunteers working with children and families understood this wider concept of a positive childhood, and that they held high expectations across the range of outcomes for every child. It can be hard for professionals to challenge a family and community which have low expectations for their children's future. It is even harder where professionals spend much of their careers in such areas and communities, and can come to see low expectations as the norm.

2.8 The group recommends that **(ii) service managers ensure that their staff hold high aspirations for all children, sharing best practice and gaining inspiration from those groups and individuals who have overcome disadvantaged backgrounds to succeed.**

2.9 As well as parents, those working in schools, the health service and other services for children and families, a wide range of other people have a role in promoting a positive childhood. This includes voluntary and community groups, those working in services such as housing or planning, business and the media.

2.10 The group recommends that the **(iii) Children's Plan identify and articulate the roles of all concerned in promoting a positive childhood, to generate a sense of shared responsibility and a debate about what should be done to address the challenge.**

Play and public space

- 2.11 The group noted the importance to children's development of outdoor and unstructured play. This is an essential part of growing up, allowing young children increasingly to test out their curiosity and sense of initiative; to develop and deal with relationships; to take managed risks and learn the consequences of their action; and to grow in independence and self-confidence.
- 2.12 Members heard from the consultation that many children and parents felt there was a lack of suitable public places to play, such as well-maintained parks where young children and families could feel safe. Group members thought that the perceived shortage of accessible play spaces, and their poor maintenance, gave a very negative message to children and their families about how they were valued by society.
- 2.13 Members felt the shortage was more acute in areas of deprivation. This included urban areas where playing fields may have been used for housing, and there were few gardens or open spaces close to homes. Those living in disadvantaged communities, whether urban or rural, find it hard to afford the cost of access to commercial leisure activities. The group noted the need to ensure that disabled children have easy access to play space given evidence that they find this difficult. In these cases and areas, securing more open and accessible play spaces should be given greater priority and increased investment across housing, planning, leisure and recreation services.
- 2.14 Ensuring that such open spaces were seen as safe places for young children to play required a sense of local ownership. Infrequent patrols by police and community support officers would not give parents the necessary confidence to allow young children to play outside, even close to home and in the company of older siblings. The group felt that community and voluntary organisations could be encouraged and helped to promote genuine local ownership which would be more effective than any Government action.
- 2.15 The group recommends **(iv) greater public investment in open spaces suitable for children's play, including in disadvantaged communities and for disabled children, and that the Government consider ways to encourage greater involvement from voluntary and community organisations in maintaining and keeping them safe.**
- 2.16 The main focus of the group's discussions was on unstructured play as this was perceived to be most under threat, but the group also wished to stress the value of more structured play, with input from a skilled adult, as part of the child's early learning and development. This was felt to be a strong aspect of the Early Years Foundation Stage with its focus on 'sustained shared thinking' – encouraging the early years' practitioner to be aware of and respond to the child's interests and understanding as they play together, developing an idea or skill.

Social and emotional skills

- 2.17 Social and emotional skills are extremely important in every child's development. Learning to form lasting relationships, and manage anger and conflict, are essential parts of growing up and preparing for the opportunities and challenges of adult life.
- 2.18 The group also identified strong social and emotional skills as important in giving children the resilience to cope with the challenges they would meet in childhood. For example, family structures are more dynamic and prone to change than in the past, with nearly one-third of children experiencing family breakdown.
- 2.19 The group noted the well-received Social and Emotional Aspects of Learning programme being rolled out in all primary and secondary schools, helping to support positive relationships. They felt that the Early Years Foundation Stage was helpful in promoting a rounded view of a positive childhood, including a strong focus on personal, social and emotional development. They thought, however, that this rounded view was less evident when children started school and literacy and numeracy took precedence in Key Stage 1. The group felt that individual and easily measurable skills were more highly valued in schools, rather than the skills such as oral communication and team-working, which were important in childhood as well as preparation for adult life and work.
- 2.20 Overall, the group recommends **(v) a stronger and more consistent emphasis on the development of social and emotional skills for children, through the 0-7 phase and beyond.**

Chapter 3: Parents and families

- 3.1 The behaviours and values of their parents and families have the most significant influence on outcomes for young children. The quality of the home learning environment has five times more impact on a child's educational attainment at age 7 than the quality of the school, and this is independent of income and parents' education²³. Good parenting can reduce the negative impact of factors such as poor housing, poor health and poor schooling. Parents' aspirations for their children may reflect their own experiences. For example, parents from socio-economic group C to E or those with lower levels of qualifications are more likely to expect their children to 'peak' at GCSE than those from socio-economic groups A and B or those with higher qualifications²⁴. Particular focus should be given to the progress of children in public care, given the gap between their educational attainment and that of other children²⁵.
- 3.2 Services for young children should aim to complement parents and not aim to substitute for them. Those committed to securing better outcomes for young children and their families are not yet consistent in recognising that a central objective should be to give every mother and father the opportunity to provide the best possible home environment, and to encourage parents to hold high aspirations for their child. Those leading, managing, providing and commissioning services should seek every opportunity to build the capacity and confidence of mothers and fathers, which will have a much more fundamental impact than a short-term intervention. Where practitioners recognise the importance of supporting and involving parents they are not always confident about how to do so effectively.
- 3.3 In order to deliver services for young children that build on the contribution of parents, practitioners, service managers and commissioners need to listen to children, parents and families and ensure that their views are valued. In their experience, members thought that parents and families were not sufficiently or consistently involved in or listened to by these services, and that parents, particularly fathers, sometimes felt excluded by services.
- 3.4 The group heard evidence that while both mothers and fathers are spending, on average, more time with their children than in the past, parents want to spend even more time with their children. The group recognised that there were particular challenges for parents in balancing work and parenthood. Some parents have difficulties taking time off work to accompany their child to appointments, or attend important events at their child's school or club.

23 Desforges, C et al, *The Impact of Parental Involvement, Parental Support and Family Education on Pupil Achievements and Adjustment: A Literature Review*, 2003

24 Page, B *Creating a High Aspiration Culture for Children in the UK*, MORI/Sutton Trust, 2006

25 DCSF, *Children and Young People Today: Evidence to support the development of the Children's Plan*, p55, 2007

Background

- 3.5 Recognition of the central role of parents and the need to support and listen to all mothers and fathers, and help them to balance competing pressures, feature strongly in recent policy development. The group noted some particular examples of existing good policy and practice in this area, including:
- parenting classes, family support and other services for families provided in Sure Start Children's Centres and in extended schools;
 - the National Academy for Parenting Practitioners, which will help practitioners improve their engagement with mothers and fathers by providing training and development;
 - increased access to childcare, including the free entitlement to early learning and care for every 3- and 4-year-old (and the pilot for 2-year-olds) helping to provide a quality pre-school experience for young children as well as supporting working parents;
 - the recently announced extension to 15 hours a week of the free entitlement to early learning and care for 3- and 4-year-olds, with increased flexibility for families about how this is used;
 - increased statutory entitlements to maternity, paternity and parental leave helping to support mothers and fathers in caring for young children. The group also thought that the transferability of maternity leave may help, but had concerns about up-take and that it might be hard for employers to administer; and
 - the review of extending the right to request flexible working, announced during the lifetime of this group.

Services supporting and involving the family

- 3.6 Building on these positive developments the group felt that the areas for further development were:
- much greater involvement of fathers as well as mothers from before birth, with a better use of the antenatal period to set the foundations for successful parenting; and
 - commissioners and service providers thinking more broadly about the role of the extended family, and building services to complement traditional sources of advice and support rather than appearing to offer alternatives to them.

Fathers and the period around birth

- 3.7 The group was impressed by evidence about the importance of fathers in the antenatal and immediately postnatal period, including the father's influence on breastfeeding, smoking cessation, postnatal mental health, and the mother's experience of giving birth. While fathers could play a crucial role in supporting mothers emotionally during pregnancy, they sometimes found it difficult to discuss their role in the child's life before birth and the group felt that fathers were largely ignored by antenatal and postnatal health services. This was particularly true for young fathers, fathers from minority ethnic groups and fathers in vulnerable families.

- 3.8 The time before and immediately after the birth of the child offered a real opportunity to engage with both mothers and fathers so as to encourage parent-child interaction and the parents' mutual support for each other's roles. Mothers and fathers often feel particularly close at this time, although a new baby can put stress on family relationships and some children are cared for by single parents. It can also be a difficult time for mothers, with the risk of postnatal depression, concerns about the impact on other children and the sense of loneliness that the stay-at-home carer can have when their partner and peers are at work.
- 3.9 Members noted the debate on joint birth registration, and felt that measures to increase joint registration would encourage paternal responsibility as well as help to establish the father's status in relation to the child. Both should lead to better child outcomes. Birth registration can also be an opportunity to provide initial information for parents on other services, registration offices located in Sure Start Children's Centres could be particularly effective in this respect.
- 3.10 In the experience of the group, fathers often felt as though they were treated as visitors when they attended appointments with antenatal and maternity services. Those services viewed the mother as the client and were primarily concerned with maternal and foetal health. The group wanted to see a shift in the culture of antenatal services to include fathers as central partners, and to address social and emotional as well as health needs. They felt it was important to give mothers and fathers good information in the antenatal period, including information on local services and how to contact them.
- 3.11 The group recommends that **(vi) children's services, in particular health and maternity services, deliver antenatal education which provides relevant and high-quality information and guidance on parenting in its broadest sense for both mothers and fathers, recognising their shared responsibilities but also their different roles and needs.**
- 3.12 The group recognised that providing additional services for mothers and fathers around the time of birth could place an additional strain on already tight resources. However, the group noted that midwifery was in a process of change in the light of *Maternity Matters*²⁶, making better use of maternity support workers. There might also be a role for other professionals such as outreach workers in Sure Start Children's Centres. The group judged that investment in this period would be repaid in the medium term by reduced family problems.
- 3.13 Members mentioned research findings that fathers sometimes feel out of place in early years' settings, such as Sure Start Children's Centres where maternity services are increasingly based, because not only users but the workforce are overwhelmingly female. The group felt there was a need for a change in all services for children from before birth and beyond, to establish a culture which meant that the contribution of fathers was taken into account and built upon. Practitioners needed to listen to and respect fathers' involvement, and help to promote their role in the child's life. This was an issue well beyond the age of 7, affecting schools and other settings throughout the child's life.

26 *Maternity Matters: Choice, access and continuity of care in a safe service* (Department of Health, April 2007)

The wider family

- 3.14 The group noted that, as well as involving both mothers and fathers, services needed to understand and take account of the significant influence of grandparents and other members of the extended family and community. Parents often turned to their own mothers for health advice; childcare in the early years was often shared with grandparents, uncles and aunts, and others in the family group.
- 3.15 Some ethnic groups have particularly strong extended family ties and expect a wide range of family members to be involved in caring for young children. The group recognised the importance of the support network provided by the extended family for the young child, and for parents.
- 3.16 Group members emphasised the role of the local community in supporting families, particularly in disadvantaged areas, and thought that community development work in early Sure Start local programmes had helped to encourage this.
- 3.17 In the light of these points, the group recommends that **(vii) local authorities work together with partners to ensure that services in Sure Start Children's Centres, health settings, extended schools and early' years settings involve and listen to fathers as well as mothers, and understand and build on the role of the extended family and local community.**
- 3.18 The group agreed that working with and engaging the family was a skilled job which required appropriate training, including training on how to identify needs and access services swiftly and taking account of how to access specialist services when necessary. Effective involvement required detailed knowledge of local cultures and community values, and services would need to adopt different approaches for engaging those with different family and caring roles. But the ability to harness these powerful influences in a positive way should multiply the effectiveness of local programmes, and ensure that children were better supported at home as well as in formal childcare settings.

Balancing work and parenthood

- 3.19 Work not only provides a way out of poverty for a family, but also promotes confidence and self-esteem in the adult with positive consequences for the child²⁷. Research²⁸ shows that even controlling for a number of other factors, including socio-economic circumstances, young people who had ever lived in a workless household were less likely to obtain five or more A*-C GCSEs. The experience of living in a workless household was also shown, for those in couple families, to be associated with having a negative attitude to education, to exclusion from school, and to being unhappy and having low self-esteem.

27 John Micklewright and Kitty Stewart, *Is the Well-Being of Children Converging in the European Union?*

28 Cusworth, *The impact of parental employment and unemployment on children and young people*, D.Phil Thesis, University of Nottingham, 2006

- 3.20 Improvements in parental leave and flexible working, as well as the benefits system, have been designed to allow more parents to make choices about whether to return to work when their children are young. The group felt it was important to give parents as much choice as possible about childcare. In the very early years many parents want the option of caring for their child at home, whether the father or mother spends the majority of time in the caring role or it is equally shared. Messages which promote formal childcare in order to give parents confidence in its use should not downplay the value of good parental care. But parents also need a clear message that from age 3, children's development is promoted by high quality group activities outside the home.
- 3.21 The choices are complex and the group felt parents needed help to explore the short- and long-term options, and draw up their own plan as a family for how to share and balance the responsibilities of work and parenthood during the first years of their child's life. Balancing these responsibilities is potentially more complicated for the parents of disabled children. For unemployed parents, this plan might include training and a route into work.
- 3.22 The group thought that flexible working was particularly important, and that employers should be willing to explore a range of options when parents used the right to request flexible working. The recently announced review of these rights will make this even more important for employers. Options could include additional leave, annualised hours, and job-share arrangements. Employers should encourage flexibility as a way of attracting and retaining good staff. This will mean developing and sharing ways of tackling the specific issues which emerge. For example in the manufacturing industry there were often minimum numbers required for health and safety purposes and shift-working may be necessary.
- 3.23 The group felt that it should be easier and more acceptable for both parents to work in ways that allowed close involvement in their child's life. Currently it is far less likely that fathers will request flexible working. As increasing numbers of women become the major wage earners, it is important that any barriers to fathers being able to work flexibly are addressed.
- 3.24 The group recommends that the **(viii) Government work more closely with business leaders to make sure the business case for flexible working is widely understood by employers, using exemplars of excellent practice to help promote this change.**

School facilities and service opening times

- 3.25 The group thought that there was scope for services for young children, including health services, to be available at times which better suited working parents, such as after working hours. School premises could be used for this purpose, being open to offer local 'after hours' access to a full range of services.
- 3.26 Extended services in schools were thought to be a valuable way of giving parents easy access to opportunities and support, but the group also felt that school buildings and land were not yet seen as a community asset to meet the full range of local needs. They would like to see this built more clearly into the vision for the role of schools as well as future work on extended schools and Building Schools for the Future, so that the maximum possible value was secured from this major capital investment. This might include tele-working space for parents to use to work close to home, which could be especially useful on days when they needed to attend appointments or events with their child.

3.27 Extended opening hours, and greater use of school premises for early and late appointments, are likely to require changed working patterns for professionals in the children's workforce, many of whom are themselves parents. The implications of this for the cost of services, the work-life balance of professional staff and the childcare support necessary to support different working patterns would need to be carefully managed.

Chapter 4: Personalisation

4.1 Personalised services are those which: take account of an individual's or family's starting point; identify their aspirations, ambitions and needs; and secure progress and success through a tailored package of opportunities and support. Chapter 3 has already identified a number of ways in which services could be better designed to meet the needs of parents and families. But they also need to take specific account of the barriers to access in individual cases. Many families do not use services from which they and their children would benefit – as a result of practical barriers to access, a sense of suspicion or stigma associated with services, or because families simply do not know about them.

Background

4.2 The group cited some examples of existing good practice and policy in personalised learning and other personalised services, drawn from their experience as practitioners and managers:

- outreach provided by health visitors and outreach workers in Sure Start Children's Centres identifying unmet needs and helping families access relevant services;
- early years' practice tailored to the needs of the individual child, whose progress and learning goals are identified and monitored by a key worker;
- excellent personalised learning in some schools, supported by school staff working with other services to secure a package of personal support to address a child's learning needs; and
- some good examples of flexibility in providing the free entitlement to early learning and care so that more children can access it.

4.3 Building on these foundations, the group identified the need for further progress in two areas: outreach and personalised learning.

Promoting effective outreach

4.4 Outreach for families with young children has become an established part of children's services. Sure Start Children's Centres' use of outreach and home-visiting practitioners has been instrumental in building trust in children's services among some of the most vulnerable and disadvantaged families. There are now over 1,600 Sure Start Children's Centres in England which help to bring together and provide services for families with young children. This integrated model of delivering services encourages parents to access a greater range of services.

- 4.5 The group agreed that there was an important role for dedicated outreach workers, but also recognised that services with an existing extensive reach among families with young children often play an important role in helping to connect families with further services. This applied in particular to health visitors, who see all families with very young children.
- 4.6 The recent review of the role of health visitors, *Facing the Future*, included discussion on whether they should be located in Sure Start Children's Centres. The group supported this where possible, although this may be more difficult in sparsely populated areas. The group felt that it was important for health visitors to be able to make the most of the links with other co-located services, and to feel part of the team, but also to maintain their own professional links and supervision. The best way to achieve these goals was for health visitors in Sure Start Children's Centres to be seconded in from the health service, and not employed separately.
- 4.7 The teams working in many Sure Start Children's Centres also include people from the voluntary and community sector. Like health visitors, voluntary and community sector workers are often well placed to build trust with parents. The voluntary sector may also have greater flexibility to respond to parents' needs quickly and cost-effectively. The group noted that there are some challenges for the public and voluntary sectors working together, because of the different cultures, and terms and conditions of employment.
- 4.8 The group discussed the role of dedicated outreach workers and their relationship with the range of other professionals also working with families and young children. Outreach workers have many different names, such as family support workers, home liaison workers, and link workers, and come from many different backgrounds. They do not always have a very clear job description and purpose.
- 4.9 It is important for the outreach workers themselves, and their professional colleagues, to be clear about their role and purpose if they are to secure positive outcomes for children and families. There is a tension to be managed between a narrow focus on ensuring parents access specific services such as childcare or parenting classes, and the need to identify and broker responses to wider issues. These issues, such as adult mental health, parental conflict advice, what to do if the father is not living with the family, or housing concerns, may go well beyond children's services, but may be the major barriers to positive outcomes for the whole family.
- 4.10 The group agreed that it was important for outreach workers to be clear with parents about the purpose of their visit and the range of solutions they might be able to offer. It was important not to raise unreasonable expectations that they could solve every problem. But outreach workers, like all those who work with parents, need to know how to access support if there are issues that they cannot deal with themselves.
- 4.11 The group agreed that outreach workers required good information on which families were not making use of particular services, and help with tackling the specific barriers to access. This included greater willingness on the part of other professionals to engage effectively with parents, or the use of different language to describe what was on offer. The group gave a particular example of the need for outreach in relation to the free entitlement to early learning and care. Some ethnic and faith groups do not see the need for formal childcare

outside the home, but do wish their children to benefit from educational activities in the run up to school.

- 4.12 In the light of their discussions and the evidence, the group considered that there was a need to clarify the complicated outreach picture, and recommends that **(ix) the Government review the current range of roles and identify a core purpose for dedicated outreach workers (in the context of the range of professionals working with young children) as a step towards clarifying the necessary skills and suitable training programmes.**

Personalised learning: a seamless learning experience

- 4.13 Research from the longitudinal Effective Provision of Pre-School Education Project is unequivocal that good outcomes for children, and particularly for disadvantaged children, are directly related to the quality of early years' provision and the involvement of trained early years' teachers (this research pre-dated the introduction of Early Years' Professionals). High quality early years' provision has all the hallmarks of personalisation – starting from a full understanding of individual achievement and focused on encouraging the next steps in each child's development.
- 4.14 For some children the transition from the Foundation Stage to Key Stage 1, or the transfer from a non-school setting to a school, can involve a sharp change to a more formal and structured education environment. Personalisation should mean that pedagogic approaches are matched to the child's needs – including the needs of children with disabilities – and not the setting. This should allow a more seamless approach to learning from 0-7. Some group members thought that the first stage of learning should be defined as 0-7, and that this would help to minimise the disjunction between the Early Years Foundation Stage and Key Stage 1.
- 4.15 The group also noted the importance of continuity across the day and week for children attending more than one early years' setting outside the home. The increased flexibility of the free entitlement to early learning and care for 3- and 4-year-olds may increase the number of children being cared for in more than one setting. The group thought it was important for providers and practitioners to work together, share information, and use the structure provided by the Early Years Foundation Stage to provide a seamless and personalised experience for children. This would mean (for example) that childminders could build on the activities children had experienced in a group setting.
- 4.16 Minimising the disruption to children's learning caused by movement between settings, transfer from early years' settings to schools, and transition from reception classes into Key Stage 1, required effective practice across the early years' workforce. This included those teaching the early stages of the National Curriculum. Joint training and shared activity in (for example) assessment and tracking could help to secure improvements in the use and sharing of data and the development of a shared understanding about high expectations.
- 4.17 There is a wide range of teaching and non-teaching staff involved with children aged 0-7 in school and non-school settings with different training, qualifications, pay and conditions.

- 4.18 The group agreed there was a need for **(x) more clarity at national level about the long-term relationship between school and non-school-based professionals. This applied in particular to the relationship between the Early Years' Professionals and Qualified Teachers.**
- 4.19 In early years' settings, qualifications of staff are the strongest predictor of outcomes for children. Currently staff in private and voluntary early years' settings have lower levels of qualifications than those in schools and Sure Start Children's Centres. Local authorities have funding (in future through the Graduate Leader Fund) to increase the number of graduate leaders in early years' settings, as well as (in their Quality and Inclusion Grant) to support wider staff development. Local authorities are being required to review their funding for the free offer across schools and other settings to move to a common approach.
- 4.20 The group recommends that **(xi) local authorities make better use of the full package of early years' funding and support to drive up quality in early years' settings, and in particular to increase the numbers of well-qualified leaders and staff in these settings.**

Personalised learning: tracking and planning for children's progress

- 4.21 To ensure that children's learning is personalised, professionals need consistently to track the progress of every child's learning and development in early years' settings and schools. This will allow staff to ensure each child has the right opportunities at the right time, and to provide early intervention and support if they are at risk of falling behind.

Focus on the individual child

- 4.22 The group thought that the best teachers and early years' workers focused on priorities and goals for the individual child on a daily or weekly basis. These staff would have a plan for individual children, and make use of support staff effectively to avoid concentrating only on children in the middle. This would allow more personalised support to all children including those with special needs. For children in care, this would need to feature in their personal education plan.
- 4.23 The group recommends that **(xii) professionals in all settings are encouraged through guidance and best practice to plan for the individual child and have high aspirations for every child's progress.**
- 4.24 This would involve a cultural change amongst professionals – teachers and other early years' staff – as well as new skills to collate and interrogate data, track progress of individual children, and develop tailored action in response to the assessment of individual children's needs. It would depend fundamentally on teachers and other professionals having the highest expectations of all children, not just those from particular backgrounds.

Comparing the performance of groups

- 4.25 Early years' settings may be unwilling to make use of data to compare the progress of individuals or groups of children because of worries about labelling children, especially at an age when their development is so rapid.

- 4.26 However, the group felt such comparisons could be powerful drivers of improvement, and recommends that **(xiii) local authorities, setting, and school leaders and service managers should be given the tools to encourage them to make comparisons between individuals and groups of children and the rest of the cohort. They should ask why different children are making different progress in particular areas, and plan action to address the issues identified.**

Settings working together

- 4.27 To secure the greater personalisation described above, schools and early years' settings will need to work together, and with colleagues in the health services, to share information and expertise. More sophisticated analysis and use of data may pose a particular challenge for smaller settings and schools. They may have less capacity to do the underpinning analysis, particularly small playgroups that are likely to have minimal non-contact time and less access to IT.

Chapter 5: Prevention

- 5.1 When parents and professionals are able to take action early to head off problems rather than react to crises, they are able to promote better outcomes for children, and professionals are able to make better use of their resources.
- 5.2 Mothers and fathers will often be best placed to identify any problems early and solve them quickly. As discussed in earlier chapters, they not only make a significant contribution to good outcomes for their child, but their influence can also mitigate negative factors.
- 5.3 In order to recognise early signs of a problem, parents need to be confident in their understanding of what constitutes normal development. To address any concerns quickly they need to understand the contribution that different services can make to a solution and be able to access these services easily. The group heard from the consultation that many parents find children's services complex, and find it difficult to identify where to go for support.
- 5.4 Some children and families have more complex needs, including some children with disabilities, and will require support from a range of professionals. Parents reported that to access more than one service they had to answer the same set of questions or repeat a similar registration process. In order to offer fast and well-co-ordinated support, professionals working in those different services will have to have a solid understanding of each other's roles and how they can work together to promote better outcomes for the child and their family.
- 5.5 The group agreed that they wanted to achieve a situation where:
- parents can deal confidently with the challenges of parenthood, and head off any problems early;
 - parents understand the range of normal development and know when an emerging concern is important enough to be shared;
 - parents have easy access to services that can help them when they identify a problem; and
 - professionals from different services understand each other's roles and are able to work together to deliver co-ordinated support
- 5.6 Crucial to this vision is a highly skilled workforce, working under strong leadership to respond quickly to referrals, assess effectively across the whole range of needs and jointly commission the support which children and families need to put them back on the road to success. This will enable resources to be redeployed from responding to crises towards prevention and early intervention. These issues are dealt with in the following chapter. This chapter focuses on how to secure and capitalise on more effective parental engagement, and to ensure that parents and professionals are well informed about the full range of opportunities and assistance available locally.

Background

- 5.7 The group acknowledged the progress that children's services have made in the context of Every Child Matters to improve information for parents, to develop a more preventative system and to move to earlier and more joined up interventions.
- 5.8 The group cited some examples of particular programmes and frameworks during the course of their discussion that, in their view, supported professionals to take a more effective preventative approach, including:
- the Common Assessment Framework, helping better to identify all a child's needs at an early stage;
 - the Early Support Programme, helping to co-ordinate support for young children with disabilities and their families; and
 - budget-holding lead professional pilots, allowing professionals to respond more flexibly to children and families with a higher level of need, developing simple and effective solutions more quickly than through conventional referral routes

Good parenting

- 5.9 Mothers and fathers have a key role in identifying early signs of a problem and knowing how to address it. They can play this role from before birth, and Chapter 3 stresses the importance of engaging parents before birth and supporting mothers and fathers to establish positive attachment to their children in the first months of the child's life. The group recognised the importance of parents being confident in their parenting skills, and able to head off emerging problems rather than having to cope with crises.
- 5.10 The group knew from their experiences that some mothers and fathers benefited greatly from planned programmes helping them to understand how best to support their child. The group discussed examples of programmes that they felt were effective in this context, in particular health-led parenting support programmes and structured home-visiting schemes focused on the child's learning. They recognised that some mothers and fathers would need this kind of advice on a systematic basis. But there was evidence that most parents felt at some stage that they would like support in their role, and the group felt that many would benefit from more occasional parenting support, which they felt was not currently on offer.
- 5.11 The group recommends that **(xiv) local authorities offer a wider range of parenting support on a more flexible, accessible and attractive basis, ensuring this reaches the most vulnerable groups including the families of disabled children.**
- 5.12 Although parents are normally the first people to identify and address problems for their child, a small minority of parents put their child at risk of significant harm. In these cases children's services will need to take a planned and well-co-ordinated approach to involving the parent appropriately.

Parents' understanding of their child's development

- 5.13 The group felt that parent-held child development records were often a good way to promote parents' understanding of what constitutes normal development, and discussed the Personal Child Health Record, or 'red book' as a particularly effective example. Parents really valued this record, and it was very rarely lost. The format put the parent in control of the information and promoted parental engagement in, and understanding of, their child's development. It also helped explain the range of normal development so that parents could identify early signs of any problems.
- 5.14 The group understood that the red book was often only used in the early years of a child's life, and considered that it would remain helpful over a longer period. The group felt that there would be value in consolidating this with other sources of information on a child's development, and in particular the rich information on different aspects of a child's development currently summarised at age 5 in the Foundation Stage Profile as well as information on a child's special educational needs or disability.
- 5.15 The group recommends that **(xv) the Government explore options for further use of parent-held child development records, including extending the use of the Personal Child Health Record, and options for sharing information with parents in a more integrated format.**

Making it easier for mothers and fathers to find the right service

- 5.16 Where parents identify a concern, they need to understand how different children's services can help and know how to contact them. As noted above, the group heard from the consultation that many parents find children's services complicated, and may find it difficult to find the right service.
- 5.17 Based on their experience of delivering services for parents, the group thought that they were not always clear about the roles of different professionals working with young children and how different professionals could help. In particular, the group thought that parents of children with disabilities could be confused by a very large number of professionals potentially involved in supporting them and their child.
- 5.18 The group stressed the importance of accessible, reliable and up-to-date information co-ordinated by local authorities. Under the Childcare Act local authorities have an extended duty to provide parents with comprehensive information on local services for children and families. The group discussed the role of web-based service directories for parents. Some families rarely use the internet, but the group thought that web-based information would be useful for the many families that use the web regularly. The group felt that such information would be easier to maintain and update than hard copy information.
- 5.19 The group recommends that **(xvi) the Government encourages local authorities, in meeting their new duties, to produce clearer information for parents about services for young children.**

5.20 As discussed in the chapter on personalisation, families often use existing relationships with practitioners they trust to help them find the right service. The group acknowledged that these existing arrangements, in particular when formalised through the lead professional or key worker role, help families to access the services they need. The person playing this role clearly needs to be skilled in engaging with families, and have a good knowledge of local services, but could be from a range of different professional backgrounds.

Professionals understanding each other's roles

- 5.21 Professionals from different services often need to work together to intervene early in a problem facing a child and their family. Even when they are in contact with all the right services, parents are sometimes frustrated that the professionals do not talk to each other enough, or know enough about the range of problems facing them and their child. The group felt that insufficient information on children was shared between professionals.
- 5.22 Professionals working with young children and families often play similar (potentially overlapping) roles, with the same families. But they may be grounded in unique professional disciplines which can provide specific expertise, and the group felt it was important to understand and value these distinctions while developing a service which was more streamlined and integrated from the point of view of the child and family.
- 5.23 Some of the wider issues affecting cross-agency and multi-professional working are discussed in the next chapter. But the group agreed that one simple barrier was that professionals did not always know or understand enough about other local children's services. Even if they did know a service existed they might not be confident about its precise remit, or know who to contact to discuss an issue or seek help. Where they had established personal contacts, these could founder when staff moved on.
- 5.24 The group therefore agreed to recommend that **(xvii) local authorities work with their partners to maintain comprehensive local directories of children's services for professional use which are regularly updated, identify all staff and their respective roles, and are clear about how to get in touch.**
- 5.25 The group acknowledged the Government's plans for ContactPoint, an electronic directory of basic information on all children and young people. This will be a quick and effective way for practitioners to find out who else is working with the same child, making it easier for practitioners to share more detailed information if that was appropriate, and to co-ordinate their support. The group felt that parent-held records, as discussed above, would also be a simple and effective way to promote information sharing.
- 5.26 However, based on their experience of delivering services for young children and families, the group felt that current barriers to information sharing included serious misconceptions about the law governing data protection, as well as anxieties about working with others who may not share similar professional codes. As a result, some professionals are wary of sharing information unless there are very compelling reasons to do so, such as when children are at risk of significant harm.

- 5.27 ContactPoint will not, on its own, address these concerns. In order for practitioners to feel confident about information sharing and integrated working, there was a need for fundamental changes to workforce knowledge, culture and practice. Some of these issues are dealt with in the next chapter.
- 5.28 The group recommends that **(xviii) local organisations work together to promote a common understanding of information sharing and to challenge misconceptions and build confidence through dialogue between services and joint-training.**

Chapter 6: Making change happen

- 6.1 This chapter considers the cross-cutting delivery issues which will need to be addressed to make a reality of the reforms already in hand and the further changes the group would like to see.
- 6.2 More effective support for children and families will require sustained and reconfigured investment across the full range of services. The group wanted to stress the need for a long-term shift from later and more expensive interventions to investment in prevention. Throughout their discussions the group had in mind the fundamental system changes which were now in train as part of the Every Child Matters reforms. While there had been considerable progress in setting the vision for more integrated governance, planning, funding and commissioning of children's services, they felt challenges remained in making these processes genuinely joined up within Children's Trusts. It was also important to secure the necessary changes to the culture and behaviour of front line staff to transform the experiences of children and families.
- 6.3 Focusing on outcomes in making investment decisions, in commissioning and in managing performance, was the most powerful way to ensure that services were better aligned and that professionals worked more effectively together to address the issues affecting children and families. None of the outcomes is the responsibility of a single service or agency, and so the outcomes focus drives joint needs assessment and joint planning of effective interventions. For the individual child or family, a discussion about the best way to achieve improved outcomes, and a sense of joint ownership of the package of support, could lead to innovative solutions which crossed conventional boundaries.

Investment in prevention

- 6.4 The group appreciated the increased investment by Government over the past decade, which had helped to make a positive difference to the lives of young children and their families, and should have a lasting impact. They agreed that the providers and commissioners of services needed to continue to deploy resources effectively and efficiently to secure overall improvements, and also to focus explicitly on narrowing inequalities in outcomes.
- 6.5 The group agreed that resources invested in heading off problems at an early age and stage, rather than dealing with more acute problems later, were likely to secure better value for money and promote better overall outcomes for children and families. They recognised that it was hard to make these trade-offs in practice. Children and families with existing acute needs could not be ignored while services shifted resources into prevention. Resources invested in prevention by one organisation may lead to long-term savings elsewhere – for example, better identification of children with behaviour problems in the early years might lead to savings for the Youth Justice System a long way down the track.

- 6.6 There was increasing evidence of the value for money of investing in preventative work, and some good examples emerging where the shift of resources 'upstream' could lead to short-term savings, such as working with families to prevent family breakdown rather than coping with its consequences. Children's Trusts offered the forum for widening out these debates across services so that benefits could be secured and resources progressively transferred to prevention and early intervention.
- 6.7 Group members felt there was a need to support these local debates and recommends **(xix) developing nationally a strong evidence-based case for investment in preventative work with children and families, especially in the earliest years when intervention can make a lasting difference.**

Joint budgeting and commissioning

- 6.8 The group heard evidence that Children's Trusts found it easier to respond to the challenges of prevention and integrated working where they had senior posts in common, in particular across local authorities and Primary Care Trusts. This could support better resource allocation across boundaries, leading in some cases to formal budget pooling. It could also lead to the creation of joint data sets so that all partners had a shared view of the issues they faced in discharging their duties to work together to promote good outcomes for children, and could track progress. This joint understanding could in turn lead to better and more integrated working at the front line.
- 6.9 The group recommends that **(xx) the Government actively to encourage local authorities and Primary Care Trusts to introduce joint commissioning posts for children's services which could help to drive changed approaches throughout these organisations from senior teams to front line professionals.**

More differentiated performance management

- 6.10 The group were strongly in favour of access to specialist services through universal services, to encourage easy access without stigma. They also supported differentiation within universal services to offer greater personalisation.
- 6.11 The group thought that performance management in universal services may make it difficult to secure effectively differentiated approaches. Where there was a clear measure of desired outcomes (as in schools) this should encourage all children to be given the support they needed, but threshold measures which could be met by a percentage of children achieving a certain level could lead to an overemphasis on children close to the borderline, rather than supporting all those who might need extra help.
- 6.12 Where it was hard to measure outcomes, in places such as Sure Start Children's Centres, or for health visitors, there might be an excessive reliance on counting contacts made or children seen, which would limit the ability of staff to give additional attention to those who needed the most help and make it hard to measure impact.

- 6.13 The group felt that some of these issues could be resolved by developing better performance management indicators. But there was also a link to the previous issue of resource allocation; managers and staff needed to take an informed view of when it was best to secure the necessary differentiation through speedy referral to a more specialist service, or when moving investment into the universal service might secure better outcomes.
- 6.14 Overall the group recommends that **(xxi) resource allocation arrangements and performance management frameworks should be designed to enable professionals in universal services to strike the right balance between providing targeted support and referring on to specialist services.**

Towards a more integrated workforce

- 6.15 Previous chapters have identified the wide range of professionals working with young children. Midwives, health visitors and GPs are the main universal services for families with very young children, and Sure Start Children's Centres and, later, schools become the universal services as children grow. If children and families are to receive the help and support they need, close links between these universal and specialist services need to be based on a clear and shared understanding of the ways in which children develop, and of the respective and complementary roles of all who seek to support them.
- 6.16 The group felt it was important to understand and value all the unique professional disciplines involved, as each has a distinctive contribution in promoting good outcomes for children. As discussed in the personalisation chapter, they were also keen to see emerging roles such as outreach workers more clearly defined, so that they could be seen alongside and linked to others. And at the fourth meeting, members from all three groups emphasised the importance of clear roles in a complex children's workforce.
- 6.17 The distinctive roles of different professionals should be the basis for creating effective multi-professional teams with complementary skills and parity of esteem. But they were also rooted in long established professional cultures which may need to change to support effective joint working in such teams.
- 6.18 The group felt that work to challenge inter-professional cultural barriers and stereotypes was essential if children and families are to get the right support. One way to address this was through a commonly understood and explicit set of core competencies for all those working within the children's workforce – including teachers. Shared initial training and professional development could promote understanding of the skills common to all people working with young children and families, and also help define and discuss the differences.
- 6.19 The Children's Workforce Development Council and the Training and Development Agency for Schools are both committed to promoting the use and understanding of the core competencies across the children's workforce.
- 6.20 The group recommends that this should be further encouraged through the Children's Workforce Strategy Action Plan now in preparation, and supported by **(xxii) local efforts to share training and professional development across all services and across the private, voluntary and independent sectors.**

6.21 The group agreed that a focus on these elements of: continued investment in early years and prevention; locally shared senior posts; an approach that allows differentiated universal services and access to specialist services through universal services; and a shared understanding of the common competencies of the children's workforce, would help to deliver the changes recommended in earlier chapters.

Annex A: Terms of reference

Remit

There will be three expert groups (ages 0-7, 8-13, and 14-19) whose remit will be to look at services and policies affecting children, young people and families and to make recommendations to the Secretary of State on how best to deliver his long-term objectives²⁹ to:

- improve the health and well-being of children and young people;
- safeguard the young and vulnerable;
- close the gap in educational achievement between those from disadvantaged backgrounds and their peers;
- 'raise our game' on raising standards;
- increase post-16 participation and attainment; and
- increase the number of children and young people on the path to success.

The focus will be on Every Child Matters and schools standards, renewing our determination to reach those children and young people who are still not achieving better outcomes and intervening early to prevent problems developing. Each group will also need to work within the constraints of the Department's spending review settlement, and should focus on how available resources can be most effectively deployed using our policy levers and breaking down barriers to effective co-ordination and co-operation.

Each group will draw on evidence, research and views from delivery partners, children, parents and families to provide recommendations to the Secretary of State for Children, Schools and Families on the development of the Children's Plan. The groups will generate and agree the key issues on which to engage using four central themes:

- Positive childhood
- Parents and families
- Personalisation
- Prevention

²⁹ Please note that this wording has now been updated.

Membership

The groups will be chaired jointly by leading professionals and Ministers as follows:

0-7 group:

- Jo Davidson, Group Director of Children and Young People's Services for Gloucestershire County Council
- Rt Hon Beverley Hughes MP, Minister of State for Children, Young People and Families

8-13 group:

- Sir Alan Steer, Headteacher, Seven Kings High School, London Borough of Redbridge
- Lord Adonis, Parliamentary Under Secretary of State for Schools and Learners
- Kevin Brennan MP, Parliamentary Under Secretary of State for Children, Young People and Families

14-19 group:

- Jackie Fisher, Chief Executive and Principal, Newcastle College
- Jim Knight MP, Minister of State for Schools and Learners

Wider membership is at the discretion of the Secretary of State and selection is based on professional experience, expertise, status and personal qualities. Members have been invited in their personal capacity to join the groups and it is not appropriate for deputies to attend meetings. We have sought to ensure that there is ethnic, gender and geographical balance, and also to achieve a mix of professions across the groups.

Working arrangements

The group and its members will:

- consider the evidence, research and consultation findings;
- collect views of peers and users through regional, local and sector-based consultation;
- act as champions in generating a national debate;
- give particular regard to hearing the views of young people, e.g. through the Youth Parliament, the DCSF Children's Board, the Office of the Children's Commissioner;
- report and make recommendations on the delivery of services to children and families to the Secretary of State in autumn 2007; and
- act as ambassadors for the recommendations and promote the delivery of the Children's Plan.

The groups will meet at least three times to:

1. Consider the range of issues relating to their age band and prioritise them to feed into the wider public consultation; commission any initial research analysis.
2. Review any research commissioned at the first meeting; receive any feedback on the consultation questions from the public events; start shaping their reports.

3. Focus on the results of the consultation and commission the secretariat to draft their final report drawing on the emerging consultation responses.

DCSF will provide the secretariat and analytical support to each group. The secretariats will work closely together to ensure cross-fertilisation of ideas and that cross-cutting ideas are picked up so that we have a full picture of how the world should work for children and young people.

The groups will want to contribute to, and draw on, the work of the National Council for Educational Excellence.

Confidentiality

Minutes, papers and advice may be covered by Freedom of Information (FOI) exemptions as they relate to formulation and development of government policy and/or free and frank provision of advice and exchange of views for the purposes of deliberation. However, we may wish to provide a public forum via the DCSF website on which to publish factual papers and the final group reports (which will be in the public domain).

To maintain trust between members, members are expected to treat group discussions in confidence and not report externally. Members are asked to clear lines with the Secretariat before talking to the media about the group and its business.

Annex B: Members of the Children's Plan 0–7 Expert Group

Co-chairs

Jo Davidson, Group Director of Children and Young People's Services for Gloucestershire County Council

Rt. Hon Beverley Hughes MP, Minister of State for Children, Young People and Families

Members

Steve Alexander, Chief Executive, Pre-school Learning Alliance

Bernadette Duffy, Head of Thomas Coram Children's Centre, Camden

Professor Alan Emond, Community Paediatrician and chair of the British Association of Community Child Health

Jayne Faulkner, Childcare Partnership Manager, Jobcentre Plus

Duncan Fisher, Chief Executive, Fathers Direct

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Cllr Les Lawrence, Chair, Local Government Association Children and Young People Board

Christine Lenehan, Council for Disabled Children

Linda Mark, Parental Involvement Officer, Sure Start Carlisle South Children's Centre

Paul Nixon, Assistant Director of Children's Social Care, North Yorkshire

Caroline Parker, Head of Early Years, Brighton and Hove City Council

Dame Gillian Pugh, Visiting Professor at Institute of Education and Chair of National Children's Bureau

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Sarah Steel, Managing Director, the Old Station Nursery

Clare Tickell, Chief Executive, NCH

Caroline Waters, Director of People and Policy, BT

Lisa White, Director of Communications and Participation, 11 MILLION – led by the Children's Commissioner for England

Professor Howard Williamson, Chair of Youth Justice Board Prevention and Inclusion Committee

Caroline Whybrow, Specialist teacher, Southway Primary

Annex C: Summary of recommendations

In summary the group believes that attention in the following areas would make a significant contribution to achieving the Department's objectives for children and families, and recommends:

Positive childhood

- i. building a consensus around a view of positive childhood which accords equal emphasis to educational attainment and harder-to-measure outcomes, in particular enjoyment and social and emotional well-being;
- ii. service managers ensure that their staff hold high aspirations for all children, sharing best practice and gaining inspiration from those groups and individuals who have overcome disadvantaged backgrounds to succeed;
- iii. Children's Plan identify and articulate the roles of all concerned in promoting a positive childhood, to generate a sense of shared responsibility and a debate about what should be done to address the challenge;
- iv. greater public investment in open spaces suitable for children's play, including in disadvantaged communities and for disabled children, and that the Government consider ways to encourage greater involvement from voluntary and community organisations in maintaining and keeping them safe;
- v. a stronger and more consistent emphasis on the development of social and emotional skills for children, through the 0-7 phase and beyond.

Parents and families

- vi. children's services, in particular health and maternity services, deliver antenatal education which provides relevant and high-quality information and guidance on parenting in its broadest sense for both mothers and fathers, recognising their shared responsibilities but also their different roles and needs;
- vii. local authorities work together with partners to ensure that services in Sure Start Children's Centres, health settings, extended schools and early years' settings involve and listen to fathers as well as mothers, and understand and build on the role of the extended family and local community;

- viii. Government work more closely with business leaders to make sure the business case for flexible working is widely understood by employers, using exemplars of excellent practice to help promote this change.

Personalisation

- ix. the Government review the current range of roles and identify a core purpose for dedicated outreach workers (in the context of the range of professionals working with young children) as a step towards clarifying the necessary skills and suitable training programmes;
- x. more clarity at national level about the long-term relationship between school and non-school-based professionals. This applied in particular to the relationship between the Early Years Professionals and Qualified Teachers;
- xi. local authorities make better use of the full package of early years' funding and support to drive up quality in early years' settings, and in particular to increase the numbers of well-qualified leaders and staff in these settings;
- xii. professionals in all settings are encouraged through guidance and best practice to plan for the individual child and have high aspirations for every child's progress;
- xiii. local authorities, setting, and school leaders and service managers should be given the tools to encourage them to make comparisons between individuals and groups of children and the rest of the cohort. They should ask why different children are making different progress in particular areas, and plan action to address the issues identified.

Prevention

- xiv. local authorities offer a wider range of parenting support on a more flexible, accessible and attractive basis, ensuring this reaches the most vulnerable groups including the families of disabled children;
- xv. the Government explore options for further use of parent-held child development records, including extending the use of the Personal Child Health Record, and options for sharing information with parents in a more integrated format;
- xvi. the Government encourages local authorities, in meeting their new duties, to produce clearer information for parents about services for young children;
- xvii. local authorities work with their partners to maintain comprehensive local directories of children's services for professional use which are regularly updated, identify all staff and their respective roles, and are clear about how to get in touch;
- xviii. local organisations work together to promote a common understanding of information sharing and to challenge misconceptions and build confidence through dialogue between services and joint-training.

Making change happen

- xix. developing nationally a strong evidence-based case for investment in preventative work with children and families, especially in the earliest years when intervention can make a lasting difference.
- xx. the Government actively to encourage local authorities and Primary Care Trusts to introduce joint commissioning posts for children's services which could help to drive changed approaches throughout these organisations from senior teams to front line professionals.
- xxi. resource allocation arrangements and performance management frameworks should be designed to enable professionals in universal services to strike the right balance between providing targeted support and referring on to specialist services.
- xxii. local efforts to share training and professional development across all services and across the private, voluntary and independent sectors.

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