

Children in need in childcare

A survey of good practice

This small-scale survey identified some of the factors that contributed to good outcomes for children in need in a range of different types of early years and childcare settings.

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Executive summary

The aim of this small-scale survey was to identify the factors which contributed to high-quality provision and good outcomes for children in need in childcare settings.

Between October 2008 and April 2009, inspectors visited 20 day-care settings on non-domestic premises and five childminders in four local authorities. These 25 settings reflected the diversity of childcare provision in England, including private, voluntary and community management arrangements and two Sure Start children's centres. All had been judged to be good or outstanding at their previous Ofsted inspection and, during the period in which the survey took place, provided for children who needed additional support to promote their development and well-being.

The survey demonstrated that high-quality childcare settings made an important contribution to children in need by identifying their additional needs early on and by coordinating the appropriate support. The Common Assessment Framework provided an effective tool for assessment and for sharing information about the complex needs of some of the children seen in the survey.

An outstanding aspect of the provision made was the way that practitioners and others ensured that every child was able to participate fully and therefore to thrive and develop. Regular, careful observation, meticulous record-keeping and close collaboration with families, before and during the child's time at the setting, made a major contribution to this. Parents valued good communication by staff about what their children were doing and learning and how their needs were being met. Staff found creative ways to communicate with parents through pictures, message boards, email, printed cards and other media.

Approaches to planning were flexible and the children themselves were regularly involved in making decisions about activities. Small but carefully considered adaptations to resources and the environment were crucial in ensuring that children were able to take full advantage of what was offered. Focusing on inclusion not only benefited the children in need but also had a very positive effect on the other children. From an early age, they developed considerable sensitivity in supporting their peers and learning about difference.

A recurring strength in the settings visited was the high level of experience and relevant qualifications among the practitioners and their expertise in identifying and meeting children's varied needs. The close relationships they established with the children's families and the strong links with professionals from a range of other agencies meant that they were able to play their part in ensuring that the children in need received timely, coherent and well-coordinated support, both during their time in the settings and when moving to school or other provision.

The networks established between settings, the support of local authority development workers and the formal and informal training staff undertook ensured the effective development and dissemination of good practice. Strong organisation, leadership and management, and rigorous self-evaluation characterised the settings in the survey.

Key findings

- In all the different types of settings visited, close observation of children ensured that their needs were identified at an early stage and that older children's changing needs were understood well. As a result, children in need received prompt and appropriate support when they were being cared for.
- Close liaison with parents and relevant agencies, often with the settings visited taking the key coordinating role, and the efficient sharing of information ensured that the response to children's needs was coherent and coordinated, and that there was continuity in provision when the children moved between settings and to school.
- Regular assessment and review of children's needs, flexible planning and appropriate adaptations to resources and staffing ensured that every child was able to benefit from the provision.
- Rigorous self-evaluation contributed to effective support for the children in need in all the types of settings visited.
- A systematic focus on continuing professional development and the dissemination of effective practice, as well as the careful deployment of staff with relevant knowledge and skills, ensured that the support the children received was matched closely to their specific needs.

Recommendations

To improve the support given to children in need, all childcare providers and practitioners should:

- evaluate their own practice regularly to consider how well they support children identified as being 'in need'
- consider how they might make better use of information and communication technology to enhance children's learning and development and to communicate with parents and carers
- involve the children, young people and their families in planning and evaluating provision to meet children's needs
- keep resources under review to ensure they match the needs of the children cared for
- ensure that they liaise with other providers, professionals and representatives of organisations working to improve outcomes for children with different needs to share good practice.

To improve the support given to children in need, all children's trusts should:

- establish and promote opportunities for childcare practitioners and providers to share good practice and learn from:
 - experts in other settings and organisations supporting particular needs, through network meetings, electronic notice boards and exchange visits
 - practitioners and health professionals within children's services, through co-located provision, regular meetings, joint working and training.

Identifying and defining need

Children 'in need'

1. This survey focused on outcomes for children in need and the provision made by the good and outstanding settings visited for this survey to promote their inclusion, development and welfare.
2. Although the phrase 'child in need' is used colloquially, practitioners¹ used the term accurately within the definition in the Children Act 1989.² Most of the settings visited had little experience of working with children in need of protection and applied the phrase more readily to children with a disability, serious illness, sensory impairment or developmental delay. The precise definition is set out in Section 17 of the Children Act. Briefly, it refers to children and young people who need support to promote their development and well-being.
3. The reasons for such support can vary considerably; there may be more than one reason. The 140 children in need in the settings visited included those with:
 - speech and language difficulties (the most common area of need)
 - behavioural difficulties (the second most common area and always associated with some other need)
 - sight and/or hearing impairment
 - Down's syndrome and some rare congenital disorders resulting in growth and developmental delay or medical need
 - complex medical conditions of which the most common were epilepsy and diabetes (often in association with another need)
 - life-limiting diseases

¹ 'Practitioner' in this report refers to a childminder, assistant or anyone working with children in a childcare setting.

² For further information, see: www.opsi.gov.uk/acts/acts1989/ukpga_19890041_en_1.

- difficulties with mobility and the need to use mobility aids and prosthetic limbs
- specific learning difficulties and delay in overall development
- autistic spectrum disorders (including Asperger's syndrome).

In addition, they included:

- children being supported in foster care placements or awaiting adoption
- children being supported through child protection plans³
- children from families which needed support with practical and parenting tasks in order to prevent family breakdown.

Early identification

4. Overall, the settings visited contributed effectively to identifying children's needs at an early stage. Although job titles and levels of responsibility reflected the differing organisational arrangements in the settings visited, each child had a key person who:
 - was the main contact with the child's family
 - gathered information from others in contact with the child
 - coordinated work for the child within the setting and with others
 - kept records of observations, evaluating them and telling others how the child was progressing
 - planned, and coordinated reviews of plans, for that child within the setting
 - contributed to plans and reviews by other agencies and professionals working with the child.
5. Noticing and understanding the significance of changes in a child's behaviour in many instances alerted staff to the need for additional support and prompted early intervention. Where necessary, the settings made prompt arrangements for health services, children's services and other professionals to be involved, in line with the procedures set by the Local Safeguarding Children Board.⁴
6. In some cases, as a child's needs emerged, the settings completed the Common Assessment Framework with the child's parents. The framework

³ A child protection plan assesses the likelihood of a child suffering harm and looks at ways that the child can be protected. For further information, see: www.dcsf.gov.uk/everychildmatters/_download/?id=1313.

⁴ Local safeguarding children boards are designed to help ensure that key agencies work effectively together to safeguard the children in an area. For further information, see: www.dcsf.gov.uk/everychildmatters/safeguardingandsocialcare/safeguardingchildren/localsafeguardingchildrenboards/lscb/.

provided an effective way of sharing information with other organisations to assess the needs of children and young people, particularly when they needed services from more than one agency or professional. Parents (and older children) took part in deciding what services were needed. In most of the cases seen, the settings took the lead role as the named key person, effectively reducing the duplication of effort and helping to ensure that parents did not have to deal with more than one agency at a time.⁵

Through the Common Assessment Framework, a community-managed day nursery initiated a referral for a child who had behavioural difficulties. The child's key person took the lead, liaising with the parents, the child's health visitor and the general practitioner while waiting for a further assessment for a possible diagnosis of attention deficit hyperactivity disorder. Through her links with the local Sure Start children's centre, the key person secured the help of a family support worker.

Focusing on outcomes

7. A major factor in the success of the settings visited was their sharp focus on securing the best outcomes for the children in their care. In the highly effective provision visited, there was a thorough understanding of the five outcome areas of the Every Child Matters agenda, as well as the areas of learning of the Early Years Foundation Stage.⁶ Knowledgeable practitioners communicated confidently with parents about their children's development and improved their understanding through helpful displays.

Staff in an independent day nursery added illustrations to posters about the Early Years Foundation Stage. Coloured thread linked the posters to photographs of the children involved in activities and to captions that explained what they were learning. The parents' interest was evident in their questions on 'post-it' notes. The staff said they enjoyed finding out the answers and posting their replies on the display, for example, following up questions about progress in outdoor play for children with

⁵ For further information on the Common Assessment Framework, see: www.dcsf.gov.uk/everychildmatters/strategy/deliveringservices1/caf/cafframework.

⁶ The Early Years Foundation Stage identifies six areas of learning: personal, social and emotional development; communication, language and literacy; problem solving, reasoning and numeracy; knowledge and understanding of the world; creative development; and physical development. Every Child Matters sets out the Government's approach to the well-being of children and young children from birth to the age of 19. The aim of the programme is to give all children the support they need to be healthy, stay safe, enjoy and achieve, make a positive contribution and achieve economic well-being. For further information, see: www.everychildmatters.gov.uk/.

mobility disabilities, or about communication with other children for a deaf child who used Makaton.⁷

8. The wide range of activities in the settings visited benefited children in need significantly and promoted their inclusion, as in this example from a sessional childcare scheme for children with learning and communication difficulties.

The staff focused on stimulating the children's imagination and language development by providing them with a variety of experiences. During the visit, the children were being introduced to a new inflatable boat. The staff helped them to explore the boat and to develop their physical skills by crawling, climbing, pushing and stretching. They also talked and used signing to help the children communicate new ideas. To avoid any anxiety that these new experiences might cause, the boat was furnished with a range of toys with which the children were already familiar.

Inclusion

9. The survey took place during the first eight months of the implementation of the Early Years Foundation Stage framework.⁸ This places considerable emphasis on ensuring that 'all children, irrespective of ethnicity, culture or religion, home language, family background, learning difficulties or disabilities, gender or ability ... have the opportunity to experience a challenging and enjoyable programme of learning and development'. Managers and other staff in the settings visited welcomed these principles and felt that they accorded well with their own approach and attitudes to inclusion. In most cases, this commitment was supported by clear policies and procedures. Some highlighted the child-centred flexibility of the framework, promoting equal access and inclusion in areas such as communication.

A pre-school setting achieved excellent outcomes in communication, language and literacy for children at all levels. Two staff were trained to improve the skills of oral communication for specific groups of up to six children. The key to success was working with the diverse abilities of the children. The group included two very able children who acted as role models and children whose skills were at an earlier stage of development. A member of staff was trained to record the outcomes in a wide range of activities. The setting noted the improvement in confident speaking for the children who had been the focus of this work.

⁷ Makaton uses signs and symbols to teach communication, language and literacy skills to people with communication and learning difficulties. For further information, see: www.makaton.org/about/about.htm.

⁸ The Early Years Foundation Stage became the statutory framework for all schools and early years providers from September 2008. It brought together statutory guidance which, previously, had given separate advice for children aged from birth to three, those aged from three to five and those in day care or being cared for by childminders.

Staff in a holiday scheme for disabled children aged from four to 16 years, said that because the children had recently been involved in organising the space in the premises, they felt a sense of belonging and used all the available areas confidently. The daily procedures for assessing the needs of those attending ensured that the children with additional mobility needs, sensory and learning needs had appropriate support to take part in all the activities they chose.

10. The support needed for a child to take part in activities with other children was often minimal. Those with complex behavioural needs, autism and physical developmental delay associated with Down's syndrome, for example, were routinely included in activities with little alteration to the planning or methods for the group as a whole. Skilled, experienced practitioners made judicious decisions about the level of support that each child needed, as in these examples.

A day-care setting had built up considerable expertise in helping children with special educational needs and/or disabilities. During the inspector's visit, a two-year-old child who had physical and learning difficulties associated with Down's syndrome took full part in a dance routine. His key person was highly experienced and knew when to step back and allow the child to concentrate on jumping and stretching to the music.

A four-year-old child who experienced difficulties on the autistic spectrum attended a rural day nursery. He needed a structured environment and the opportunity for repetition, but he took part in activities on an equal footing with other children. The owner/manager, who was qualified in working with children with special needs, said, 'Although the child works in the solitude he needs, our approach is inherently inclusive. Every child chooses whether to work alone or in a group. This child is no different. Sometimes he works alongside other children, but this is his choice.'

11. The positive steps to include children in need benefited all children through fostering positive attitudes to difference and diversity. For instance, a four-year-old child who had complex medical needs attended a privately managed pre-school setting. A senior team member said:

She has been in the group for nearly 18 months. We have done as much as we can to make the layout of activities accessible for her. All the children are so helpful and used to making space if she wants to pass in her wheelchair. It's great to see very young children waiting turns, encouraging her to take part. If she is having a bad day and is perhaps low in energy, the other children seem to sense this and make allowances, which is very good for their growing emotional awareness.

12. The contribution to learning was illustrated well by the sensitivity shown by children in a day-care setting. When a four-year-old who had behavioural difficulties was trying to open a gate during an imaginative chasing game, the other children said, 'We need to hold his hand' and 'Don't go out of the game; this way, this way.' The staff watched but did not need to intervene; the children managed their own behaviour confidently and kept each other safe. Similarly, a childminder caring for an eight-year-old autistic child observed:

Since I have cared for him, the other children understand that we are all different and need different things in life. He is fully part of the group.

13. The Early Years Foundation Stage framework does not apply to most children of compulsory school age.⁹ However, the settings in the survey which were attended also by older children used the early years principles as a reference point. In many instances, this provided excellent continuity of approach.

Knowing the children well

14. Section 3 of the Early Years Foundation Stage framework sets out what minimum information settings should gather about the children in their care. However, in most of the settings visited for this survey, their documentation went well beyond these requirements. In all the settings, staff took great care to understand and learn about the particular needs of each child. They gathered the views of parents systematically, as well as information from other agencies and professionals who had contact with the children and their families.
15. The induction of all children was of high quality in the settings surveyed. It included a settling-in period, visits to the child's home, observations by practitioners, questionnaires and interviews with parents. This careful practice was of particular benefit to children in need. From the beginning, a comprehensive induction helped settings to identify the additional support each child and the child's parents might need. Close contact during the settling-in period contributed to trust between the settings and families and sensitivity to their circumstances. For example, the manager of a full day-care setting said:

We have a comprehensive exchange of information with parents or carers through our questionnaires before any child comes to settle in. A key person visits the child's home once, twice or more during the child's settling-in period. Parents may stay with their children as long as they want. While the parent is on site with us, we take the opportunity to carry on the conversation and to refine the information about the child. Recently, a mother and I had the chance to discuss the nutritionist's

⁹ The Early Years Foundation Stage applies to children up to the 31 August of the school year in which they become five and therefore applies to some children of compulsory school age.

report for her child (who has a metabolic condition) and staff now understand her diet very well.

A childminder explained that she set up two induction days for parents to stay with their child and go over the child's needs and routines. She added the information to the basic details on the child's registration form.

16. Outstanding observation and evaluation skills were at the heart of the best practice seen in the survey. In the best settings, assessment of children's progress was a continuous process. Practitioners established routines that allowed time for systematic, unhurried observations. Many practitioners had a detailed understanding of how children learnt and made progress that enabled them to recognise children's changing needs. Often, but not always, they had gained this knowledge through formal study leading to qualifications. In many of the settings, practitioners regularly updated their training on special needs, child protection or a particular need such as hearing impairment. Their fresh knowledge was applied to observations in the setting.
17. All the settings visited assessed children's language and communication needs comprehensively. Practitioners used a wide range of techniques and non-verbal interaction to ensure that being at an early stage of learning to speak English did not mask a child's underlying communication difficulties. One practitioner said:

We see children using these resources every day. Even when a child is speaking a language other than English or is not talking while they play, by observing how the child plays with the car on the mat or uses the construction straws, for instance, we can tell a lot about the development of their thinking.

A coordinated approach to sharing information

18. The settings visited had very effective systems for gathering information on children. For the children with the most severe and complex needs, information from the parents, and from health, education and social care services, was drawn together, whether the needs were known when they were admitted or identified by the setting. Key practitioners and special educational needs coordinators in some childcare settings worked with parents and with other agencies and professionals.

At a privately run pre-school playgroup on school premises, the key person ensured that up-to-date information about a child whose speech was delayed was handed over during a gradual settling-in period to school. The school staff commented on how detailed this information was and how useful they had found it in planning their own work with that child.

19. Parents interviewed during the survey said they greatly valued the coordination as it had improved their understanding of their child's needs and what would work for them. In some cases, the impact of a coordinated approach had been immediate, such as when therapists and specialists worked with children and families in the settings, thus reducing the number of appointments for parents at different venues.

A childminder recognised that a child in her care, who had recently arrived in the country and was new to speaking English, had additional speech and language needs. With the parents' involvement, the childminder worked, in her own home, with the child's speech and language therapist.

20. Staff in a nursery described excellent and longstanding working relationships with professionals in the area. The parents of the pre-school children appreciated having access to the physiotherapist and social care workers when the childcare was located in a Sure Start children's centre.
21. From the information exchanged when the child was settling in, parents continued to be involved.

In a private day nursery, children's developmental records were available for parents to see in addition to the regular consultation meetings. The parents could add their own observations at any time. Staff exchanged books and resources with families and invited them to involve themselves whenever possible and to bring their specialist skills, interests and culture into the nursery.

22. Practitioners understood the need for children to develop within a culture of positive relationships and that these relationships did not focus on one person only. Teamwork between practitioners was a significant feature of the work of the settings, as in this example.

In a weekly pre-school session for children with speech and language difficulties, practitioners were drawn from different health, care and play disciplines. They organised a system for staff to record any significant events in a notebook for each child, including the child's comments. The staff discussed the notes at the end of the session. Key persons wrote an evaluative summary, with pointers for next steps for each child.

23. As well as working with the parents and staff within the setting, key practitioners and special education needs coordinators collaborated closely with other agencies. They did this through informal networks as well as through the formal provision of detailed, evaluative information for statutory assessments and other monitoring activities. This regular exchange of information resulted in a consistent approach and continuity of care for the children concerned.
24. Childminders and staff in the settings visited valued their work with specialists as this ensured that they were continually learning about new aspects of child

development and welfare, and about practice in other agencies. Staff in settings that were co-located with other services gained an increasing understanding of the vital part played in the development of a child by family support workers, social workers and occupational therapists. Local networking also enabled the settings to form constructive relationships with schools, health visitors, social care workers, and health and medical professionals. In addition, practitioners and parents benefited from increased acceptance and understanding of the threshold criteria that children and families needed to meet in the locality to have access to a range of services.

Planning and provision in settings

25. All the settings visited drew up short- and long-term plans that took account of children's general welfare and development, as well as their specific needs. The planning was clear but flexible. In all cases, the children had a considerable say in the activities to be provided, were able to choose some activities in which they wanted to be involved each session and what part they wanted to play in them. Staff talked to the children or used pictures and signing so that they could express their preferences.

A holiday play scheme canvassed children's ideas for future activities and monitored their uptake. A senior manager of the organisation explained that asking for their ideas contributed greatly to children's self-esteem and built a sense of belonging. Planning ahead with the few children with disabilities and sensory impairments who attended encouraged them to return during future holidays. It also provided the children and their families with continuity of care.

26. In the best examples, a range of professionals and the parents also contributed to plans and reviews. To develop and refine their planning further, all the settings visited worked with local area early years and childcare advisers and with area special educational needs coordinators where they existed.
27. The records kept by the settings visited were of a very high quality and reflected the guidance in the Early Years Foundation Stage framework. The records seen gave details of children's needs across all areas of children's development and used appropriate measurement scales to show how they were progressing. The excellent examples seen were richly illustrated from detailed observations. Evaluative notes set out what needed to be done next. Several settings had also built on these principles in developing records for older children. In all cases, there was a clear focus on assessing children's development in relation to the areas of learning and the Every Child Matters outcomes.
28. In all types of settings, records were enlivened by photographs to capture events and to illustrate children's achievements. Many staff used digital media confidently and had developed the skills of children as young as two, as well as

those with special educational needs and/or disabilities, so that they could make their own contributions to their records.

29. The settings visited were committed to keeping parents fully informed of their children's progress. The following comment from the parent of a child who had specific learning difficulties was typical:

I love the notice board she [the childminder] has made to tell me what activities they are doing and what they are eating. I get a very clear report from her each day and this makes me totally confident in her.

30. Good account was taken of families' circumstances to ensure that they all received the information they needed, as in these examples.

A private day nursery welcomed parents on arrival and departure and gave them time to discuss their child's day. A pocket-sized card allowed staff to note key events of the day succinctly for children of all ages and abilities. Staff rigorously kept to the routine of completing the card, ready for it to be given to parents. A working parent of a deaf child said, 'Staff always remember to give me my child's card. When I am pushed for time after work, I don't have time to stay and discuss in detail but I always like to know what he has done.'

A pre-school playgroup, part of a children's centre in an area of deprivation, found that parents' levels of literacy were low and that they did not readily take in the information from plain, typed report sheets.

To improve the work with parents, the playgroup raised funds for attractive binders in which they mounted samples of work, short written observations and photographs. Captions explained the child's progress in the Early Years Foundation Stage, resulting in a highly professional booklet that parents were keen to look at.

The parent of a child who had complex medical needs regularly reviewed and added to the folder, with the help of the child's key worker, and used it in reviews with the child's hospital consultant.

31. The survey also found settings using email and digital media to communicate with parents. For instance, a pre-school playgroup began to email updates and newsletters to some parents who returned their comments on their child's report via email. The setting found that this brought a higher response rate than when it used printed reports. Emails were copied to social workers, if required, for their care records.

A childminder caring for a child who had developmental delay used email extensively to exchange information with the parents. If there had been any significant event during the day that she felt she had missed when

she spoke to the parents when they collected the child, she sent an email during the evening. She said, 'Sometimes I email the parents at work during the day if I need a quick response to a question. Email means the parent can reply privately, which is better than a telephone. We find this is very good for consistency of care as his needs are quite changeable.'

In a privately owned day nursery, part of a small chain of provision, the staff used hand-held digital media devices extensively to look up records of children's progress. The information was routinely updated through networked laptop computers in the setting. The devices were also used for quick access to the setting's plans and policies. Staff used the devices to carry information with them on outings and when attending reviews for a child who was subject to a child protection plan.

32. Practitioners shared these records with a range of professionals and passed them on to schools and new settings if a child moved on, promoting continuity of care for vulnerable children. For example, an outstanding day nursery introduced a learning journey file for each child. This contained observations by staff, well supported with photographs and comment from parents and the children. The files went with the children when they moved on to school.

Working flexibly

33. The settings visited were highly effective at adapting their activities, routines, resources, care practice and teaching methods to the needs of individual children.
34. In some cases, additional staff were recruited to take particular responsibility for the inclusion of children in need. However, in many cases, quite small changes improved the range of activities that children could undertake and their engagement with them. For instance, a childminder noticed that a child on the autistic spectrum was distracted by a tree outside the window. She put blinds at the window and, when she needed the child to focus on tasks, she closed them to remove the distraction but opened them at other times to enable the child to look out. In another case, a full day-care nursery, realising that a visually impaired child could see better in natural light, considered which activities needed better light and arranged the furniture nearer the windows when necessary.
35. The following provide further illustrations of simple changes made to resources and the environment:

A privately run nursery was working to improve the routines of the day to in order to make the best use of child-directed activities. The practitioners introduced a folder of 'What next?' picture prompts to help a three-year-old child who suffered from global delay to move between activities. Because he had very little speech, this helped him to indicate his needs.

A day nursery setting used the colours and images preferred by a child who had learning difficulties to promote his interest in activities. He particularly liked the colour pink, so he was given a pink apron for messy play and a pink towel for hand-drying. This extended the established practice of using children's preferred colours and images to label personal belongings and coat hooks.

36. Small changes made to teaching and care also helped to meet the needs of individual children. In a pre-school playgroup, for example, the key person for a child who had epilepsy and general developmental delay constantly adjusted the time spent on activities to suit the child's changing energy levels.
37. The changes made to benefit individual children in need also had a positive impact on other children.

A pre-school playgroup had traditionally provided activities which focused on making an article, such as a model or painting, which a child could finish and take home. The staff found that by shifting the emphasis away from objects that the children could take away with them to the processes of making and doing, children of all abilities and needs participated more often and for a longer time. All the children also benefited from being able to revisit and refine their work. As a result, they learnt more about what creativity involves than they had they had done previously. The products they eventually made were of a better quality than they had been in the past.

A child using a wheelchair enrolled at a privately owned day nursery. Since the premises were shared, major changes could not be made to enlarge the small courtyard which was used daily for active play, growing plants and checking the weather. However, the wheelchair took up space.

Previously, activities had been divided into indoor and outdoor sessions for the whole group. Now the setting moved to a free-flow programme. This enabled children, including the child in the wheelchair, to choose whether they played indoors or outdoors at different times. Without much adult management of their time, most of the children chose to be indoors and outdoors at some point during the session. As a result, the courtyard rarely became crowded.

38. Practitioners used information technology flexibly to enhance the range of opportunities for children with different needs. A pre-school playgroup, for instance, introduced an interactive whiteboard with software suitable for a child who had general developmental delay. This immediately increased the range of activities in which he could participate.

39. Photographs, uploaded on to computers, also provided a stimulus for children's language development and enhanced their confidence.

A childminder who did not have much garden space made sure that she took a digital camera on outings to the park. She encouraged the child in her care, who had limited speech development, to take pictures. These were then uploaded to a computer so that the child could access them when he wanted to tell his parents about his experiences.

In a private day nursery, staff used a laptop to show children with learning difficulties pictures of themselves succeeding in different activities. They grew in confidence as a result. The pictures, taken by the staff, were also shown to parents and other professionals who worked with the children.

Organisation, leadership and management

40. A common factor in the settings visited was the high quality of the organisation, leadership and management. Through detailed planning, thoughtful deployment of resources and continuing professional development, providers and practitioners ensured that children in need received proper support, were able to participate fully and made good progress in their development and well-being.
41. Rigorous self-evaluation was central to success. Using formal and informal feedback, staff reviewed the quality of their provision for the most vulnerable children and identified ways in which they could improve it. In most cases, the settings identified broad areas for improvement. In some cases, however, they had translated the areas for improvement into specific objectives, for example to provide children whose mobility was limited with better access to outdoor areas or to refine the procedures for reporting on children with specific medical conditions. Local authority development workers made a valuable contribution to evaluation by challenging the settings' analyses and by providing advice on how to prioritise areas or where to find support for implementing changes.

A community pre-school playgroup located in a classroom of a school had access to a fenced-off outdoor area in the playground. However, this was through sets of swing-doors. The management group considered the needs of a child who had epilepsy and difficulties with mobility. Raising funds to create direct access to the outdoor area from the classroom had been a long-term objective. It was decided to give greater priority to this and to raise additional funds so that the work could be done during the next school holiday.

42. The childcare settings visited, almost all of them working within wider structures and partnerships, had very good quality assurance systems to ensure

that their plans for children in need were effective. Childminders in networks benefited from support from special educational needs and child protection coordinators in their local area. In larger organisations, such as chains of privately owned provision, senior managers provided additional scrutiny and made suggestions for activities and materials. Practitioners and managers frequently consulted colleagues in wider networks to make sure the plans were suitable.

43. Inspectors found exemplary risk assessment procedures to promote the safeguarding of children in need. In some instances, funding was secured to put right weaknesses that had been identified in previous inspections and to help settings improve. There were some good examples of settings securing funding, through competition, to improve resources such as spaces for outdoor play.

Knowledge, qualifications and professional development

44. A recurrent strength in the childcare settings visited, was the large number of practitioners, including childminders, who had a degree in early years and childcare, or in child development, or had a management qualification gained in a related sector. Many of them were also highly experienced and the settings placed considerable emphasis on sharing good practice. Several practitioners said that the opportunities to learn more about how to meet particular needs, through teamwork in their organisations or on courses and in support groups in their area, had been the most important contribution to their professional development. Their membership of professional networks or organisations that adhered to a particular approach to child development provided further opportunities for development. Many of the settings were also represented in local children's partnerships and were involved in consultations on good practice.
45. Many of the improvement plans seen during the survey placed particular emphasis on enabling staff to become more skilled in working with children who had a range of needs or a specific need such as delayed development in language and communication. In many instances, staff had developed their understanding, for example of adoption procedures or Down's syndrome, through personal experience. This was a typical example.

A child who had a rare medical condition had to be fed through a nasal-gastric tube. Looking at the child's hours of attendance and her own staffing rota, the manager of the private nursery realised that the key worker and two others would have to be trained to feed the child. One member of staff already knew what to do, having observed a cousin tube-feeding her child. The manager arranged for all three staff to attend free training from the local primary care trust.

46. Practitioners in these settings took full advantage of the basic and advanced child protection training courses from the local safeguarding children boards. They also had good access to courses for coordinators for special educational needs. Many practitioners, particularly childminders, took opportunities to improve their knowledge and skills by attending such courses at weekends and in the evenings.
47. The most successful settings ensured that staff were employed in such a way that their knowledge, skills and understanding could be used to best effect to support children's particular needs.

Notes

Between October 2008 and April 2009, inspectors visited 20 day-care settings on non-domestic premises and five childminders in four local authorities. The settings, in urban and rural areas, included childminders, independent nursery schools, day-care nurseries, sessional pre-school groups, before- and after-school play schemes, and holiday activity schemes. They reflected the diversity of childcare provision in England, including private, voluntary and community management arrangements. Two of the settings were managed by Sure Start local children's centre partnerships and four used a Steiner or Montessori curriculum. Two of the settings provided childcare exclusively for children with special educational needs and/or disabilities.

The settings had been judged to be good or outstanding at their previous Ofsted inspection and provided for children defined as 'in need' during the period in which the survey took place.

During the visits, inspectors met around 140 children and young people recognised as being in need, ranging in age from a few months old to 16 years, from a variety of ethnic, religious and linguistic backgrounds. Nearly all of them were receiving services from health or children's services at the time of the survey; some had been assessed and were waiting for services. The inspectors observed them taking part in activities, talked to them and examined resources. They also held discussions with providers, practitioners, parents and professional staff. In some cases, they considered correspondence, as well as scrutinising records of the children's progress and achievement.

Further evidence was gathered from good practice seen during inspections of the Early Years Foundation Stage from November 2008 to March 2009. Inspectors also held a small number of telephone interviews with providers and local authority representatives. The latter had responsibility in their areas for supporting children in need and ensuring the quality of childcare.

Further information

Ofsted publications

Early years self-evaluation form and guidance:

www.ofsted.gov.uk/Ofsted-home/Forms-and-guidance/Browse-all-by/Care-and-local-services/Childcare/Early-Years-Foundation-Stage.

Equalities in action (080272), Ofsted, 2010; www.ofsted.gov.uk/publications/080272.

A glossary of terms is included in the *Framework for the regulation of those on the Early Years and Childcare Registers* (080024), Ofsted, 2008; updated 2009; www.ofsted.gov.uk/publications/080024.

Publications by others

The DCSF's Inclusion Development Programme has produced a series of publications giving guidance on supporting children with special educational needs. Details of these can be found at:

<http://nationalstrategies.standards.dcsf.gov.uk/search/inclusion/results/nav%3A46335>.

Websites

Leading to excellence: a review of childcare and early education 2005–08 with a focus on organisation, leadership and management, Ofsted, 2008; www.ofsted.gov.uk/Ofsted-home/Leading-to-excellence.

The Early Years Foundation Stage framework. Setting the standards for learning, development and care for children from birth to five (00261-2008), DCSF, 2008; <http://publications.teachernet.gov.uk/default.aspx?PageFunction=productdetails&PageMode=publications&ProductId=DCSF-00261-2008>.

Every Child Matters:

www.dcsf.gov.uk/everychildmatters/about/aims/aims/.

The basis of the legal definition of 'children in need' is in the Children Act 1989:

www.opsi.gov.uk/acts/acts1989.

Annex: Settings visited for this survey

Day-care setting on non-domestic premises	Local authority
Coppice Park Nursery	North Yorkshire
First Steps Nursery at New Park School	North Yorkshire
Fir Trees Kindergarten	East Riding of Yorkshire
Fulham South Children's Centre	Hammersmith and Fulham
Hackness and District Under Fives	North Yorkshire
Hamilton Community College	Leicester
Jitterbugs Day Nursery	North Yorkshire
Laurel Way Playgroup	Barnet
Little Oaks Montessori Nursery School	East Sussex
Mountfield Playgroup	Newcastle upon Tyne
Oak Tree Kindergarten Ltd (Ashcroft Road)	Luton
Playhouse Day Nursery	Ealing
Seymour House Day Nursery School (Broomfield Road)	Essex
Snap Hertfordshire Limited	Hertfordshire
The Village Montessori Nursery School	West Berkshire
Tracks (Autism)	Hertfordshire
University of East London	Newham
West Thames College Nursery	Hounslow
Wishing Well Day Nursery	East Riding of Yorkshire
Zebedee Pre-school	Essex

Childminder	Local authority
Childminder 1	Brent
Childminder 2	Brent
Childminder 3	Enfield
Childminder 4	Hertfordshire
Childminder 5	North Yorkshire