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BEST case scenario

A case study of effective multi-agency working at
Malvin's Close Primary School, Blyth

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Resource

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Executive summary

The case study provides insights for school leaders wanting to establish collaborative working in a multi-agency context.

The headteacher at Malvin's Close Primary School, Blyth, provided vision, drive and energy both within her school and across the cluster of schools. The rationale for the whole initiative was carefully explained to staff. Ideas were invited on how to organise the system. Inclusive, participatory and democratic approaches to leadership were promoted. Mentoring for the newly appointed early intervention coordinator helped establish clear expectations and built confidence.

The Blyth cluster of schools collaborated to establish their own Behaviour Educational Support Team (BEST) and received support and expertise from the local authority and heads of service.

An early intervention coordinator became a key player in the success of the initiative. Her background in paediatric nursing gave her valuable experience beyond education. This breadth of work was felt to be critical to the ease with which she could engage the team. Her knowledge and language enabled her to communicate freely with the various professionals and with her own colleagues. The early intervention coordinator was a single point of contact and acted as a link between teachers and the team.

Some of the multi-agency professionals worked for BEST and the remaining time within their substantive roles. They were co-located in a former school and an ex-headteacher from the cluster was appointed as the team leader. BEST added to the school's overall capacity not only through the skills and expertise it brought but also by being willing to support the development of the school's staff.

All stakeholders were fully involved. Parents' sensitivity over intervention involving their own children was handled very carefully through face-to-face meetings with the early intervention coordinator and headteacher. Governors played an active role in the initiative through the appointment of a 'well-being' governor, and they were informed of developments through termly reporting.

The school monitored the impact on pupils as part of its assessment processes. This was supplemented by BEST as it monitored the impact of its work on pupils and families across the cluster. It has observed a noticeable improvement in outcomes for pupils especially with regard to pupil confidence, attitudes and effort.

The local authority has adopted the Blyth model of good practice and consulted with BEST and the schools on the implementation of the new Children's Early Intervention Team (CEIT).

**“We want to be
the best – we want
the best for
our pupils.
We don't sit back.
We strive to
overcome barriers.”**
(assistant headteacher)

Introduction

The advent of integrated children's services has created a pressing need for effective multi-agency working. This case study illustrates what can be achieved through outstanding leadership, collaboration and enterprise. The study focuses on one school and how it contributed to and implemented a local initiative.

Malvin's Close is a larger than average size primary school serving an area of above average social disadvantage in Blyth, a small seaside town in south east Northumberland.

What was the stimulus for change?

Malvin's Close has a number of pupils with specific emotional and behaviour problems. This is very often a reflection of their chaotic and complex family circumstances. The school was convinced that early intervention that was integrated and coordinated across services and with parents would help secure improved outcomes for these pupils.

In 2003, Blyth was designated a special priority area and the 12 schools in the cluster received a three-year grant for this work. The schools had a track record of collaborative working built on trusting relationships. The headteachers opted to pool their grants and establish a multi-agency team of their own. The Blyth cluster of schools included three middle schools, one high school, six first schools, a Catholic first school and Catholic middle school. Together they collaborated to establish their own Behaviour Educational Support Team (BEST).¹

The local authority and heads of service gave their full support and provided expertise in matters such as the appointment of staff, terms and conditions and qualifications.

This case study illustrates what can be achieved through outstanding leadership, collaboration and enterprise.

¹ BESTs have been established across the country. They work in partnership with schools within the framework of Inclusion Support Services. They are multi-disciplinary teams working with children, young people, their families, schools and other services promoting emotional well-being, positive mental health, behaviour and school attendance in children and young people.

Who were the leaders?

Headteacher

The headteacher at Malvin's Close was particularly enthusiastic about the initiative. She had a clear vision of effective provision that she shared with others. Her energetic leadership ensured commitment from all stakeholders.

Early intervention coordinator

A special role was created at the school to lead and coordinate the BEST work. This was an important factor in ensuring effective early intervention. The coordinator had been a paediatric nurse and this experience beyond education gave her a broader understanding of other services. This helped her engage with the various other professionals in BEST and with her own colleagues. As a main scale teacher she also had a 'lateral' rapport with teachers and she quickly gained their trust and support. Every teacher had some form of responsibility in the school; this was a natural extension of the school's system. Her role differed from other schools where the coordinator tended to be the special educational needs coordinator (SENCO).

The role at Malvin's Close was holistic as it included attendance, behaviour and mental health.

Governors

Governors play an active role at the school and a 'well-being' governor was appointed to provide support and challenge to the initiative. The full governing body was able to monitor and evaluate progress at their termly meetings.

BEST leader

BEST was co-located in a disused school and an ex-headteacher from the cluster was appointed as the team leader. This was a part-time role funded through the pooled grant.

The profile of BEST was agreed among the collaborative group of headteachers. Panels of stakeholders from the contributing schools were formed to interview and make the appointments.

Key roles in the team were:

- senior specialist educational psychologist
- educational welfare officer
- behaviour support teacher
- health worker
- speech and language therapist
- police officer
- parent worker

Every teacher had some form of responsibility in the school; this was a natural extension of the school's system.

Some of the professionals worked part-time for BEST and the remaining time within their substantive roles. This had a number of benefits including the convenience of having conditions of service, performance management and payroll handled through their existing services. The senior specialist educational psychologist experienced no tension between her role in the team and her substantive role. If anything she found the two roles were complementary. She received professional and line management supervision from a psychologist within her own organisation.

What leadership styles, skills and competences were needed?

Democratic and authoritative

A democratic style of school leadership gave staff a sense of ownership and inclusion. All were consulted on the planning for the new role and the systems and protocols that would be needed to ensure the initiative would be successful. Both the headteacher and the coordinator had a clear vision of what could be achieved and they articulated this with passion to all stakeholders at various staff and governor meetings, through dialogue with colleague headteachers and in brochures for parents.

Both the headteacher and the coordinator had a clear vision of what could be achieved.

Pace-setting and coaching

Initially the headteacher modelled the role for the early intervention coordinator. This helped clarify methodology, procedures and expectations and meant that the new appointment began with confidence. This was sustained through a coaching relationship ensuring the continued success of the initiative.

Empathy and respect

The new coordinator was empathetic, knowledgeable and had good judgement. She cared about the development of the whole child and had a good understanding of the *Every Child Matters* (ECM) outcomes. She had the trust and respect of staff and conducted her work in a well-organised, professional and friendly manner. She had one afternoon dedicated to her BEST work and she used this time very effectively. As a leader she set high expectations and monitored and evaluated progress of the interventions.

Team building

The BEST leader worked with the multi-agency team, building awareness of each other's services and systems and creating a team spirit. Agreeing a common set of protocols such as recording information was devised in the first few months of the establishment of the team. For most of the professionals it was the first time that they had worked together. The team leader also established positive relationships with the schools through regular contact, usually at headteacher meetings.

How was commitment secured?

Parents were informed about the new system through leaflets and brochures. Parents' sensitivity over intervention involving their own children was handled carefully over meetings with their child's class teacher and headteacher. The school felt that confidence and reassurance began to spread to other parents via word of mouth.

Governor and staff meetings reflected the school's inclusive culture. Attitudes and relationships were productive, positive and welcoming and teachers were happy to adopt new ideas: "There was a shared and equal commitment as everyone had confidence in the system. They knew that referrals would be dealt with."
(assistant headteacher)

What were the levers for effective practice?

Through collaborative working, the school and the senior specialist educational psychologist identified five levers to ensure effective practice: good communication, professional conversations, knowledge development, effective systems and engaging parents.

Good communication

The coordinator engaged easily with the community, supporting individual children and families in her drive to reduce barriers and secure improved outcomes for children. The school encouraged parents to discuss issues that arose and in doing so helped them feel valued and listened to.

An important part of the programme was to ensure that pupils had appropriate targets to aim for. The professionals involved ensured that pupils and staff were aware of these targets.

Members of staff knew what was involved and what was expected of them. Information was shared and dealt with promptly. This was important within the school and between the school and BEST.

Professional conversations

Prior to this initiative any outside agency work was coordinated through the headteacher or SENCO. Teachers had a limited experience of working with outside agencies and were unsure of what they could offer. The opportunity to work with and across a range of agencies helped change their perceptions. Professional conversations helped build trust and confidence and improved self-esteem for both school staff and members of BEST.

Knowledge development

BEST added to the school's overall capacity for improvement not only through the skills and expertise it brought but also by being willing to support the development of the school's staff, for example, training on attendance systems and setting up nurture groups. All schools across the cluster were able to benefit from

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(assistant headteacher)**

this. This professional development was reciprocal as members of the team began to gain insights into learning and this helped them engage more easily with teachers.

Effective systems

Systems at Malvin's Close

The early intervention coordinator at Malvin's Close was a single point of contact and acted as a link between teachers and BEST. Members of the team would also meet directly with class teachers to discuss matters arising from their engagement with specific individuals.

Referrals were made once per term but occasionally immediate referrals had to be made. However, there were no random requests for intervention. Teachers completed forms that provided essential information and the early intervention coordinator dealt with them as required. A deliberate attempt was made to minimise paperwork as the team was sensitive to teacher workload. Dialogue with colleagues took place through meetings after school. Regular meetings also took place with the headteacher as this usually provided important background context to the cases. Feedback sheets were given to class teachers and parents to ensure that a record of the intervention was kept.

Dialogue with colleagues took place through meetings after school.

Systems at BEST

BEST was originally governed by a steering group of headteachers but became largely self-directing. It believed it met the demands made on it from across the cluster. The team met every week to decide on its priorities. Decisions were made according to needs. A new leader (0.5 full time or equivalent, FTE) replaced the original consultant headteacher and continued to coordinate the referrals from schools and agree the level of intervention.

Some schools engaged with the team more than others for a variety of reasons, each devising its own internal systems.

Engaging parents

The parent support worker helped provide insights into pupils' lives as they had more time to build relationships with parents. A counselling service known as Place2Be² visited the school and also helped support pupils and engage parents.

² Place2Be is a charity working inside schools to improve the emotional well-being of children, their families and the whole school community. Place2Be's Blyth hub was founded in 2006 with an initial cluster of six schools (www.theplace2be.org.uk).

What challenges were faced and how were these overcome?

The demand on time for all staff presented a particular challenge but especially creating time for class teachers to meet with professionals from BEST. The coordinator helped overcome this by taking the teacher's class or relaying messages.

Different disciplines and expectations among the members of BEST created some discomfort and indecision at first. Through team building activities, dialogue and a focus on real work such as recording systems and protocols, positive relationships quickly developed.

Some parents were hard to engage and this proved to be frustrating for both the school and BEST. The parent support worker liaised with the early intervention coordinator at Malvin's Close to play an important role in developing constructive relationships and this helped overcome this particular barrier.

How successful was the initiative?

The school monitored the impact of the intervention as part of its normal assessment processes:

"One boy showed great improvements both academically and socially. He could not read or write when he started at Malvin's Close in Year 3 but after the programme of intervention – when he left at the end of Year 4 he had achieved a Level 2C." (assistant headteacher)

BEST also analysed data from an evaluation of the effects of the integrated early intervention across the whole collaborative. The data was collected through a questionnaire to schools after each period of intervention. From September 2008 to December 2009, the most significant impact was observed in pupil confidence, attitude and effort. There were also significant effects on pupil behaviour, both in class and in the playground and with regard to pupil friendships. Impact on health, attainment and attendance were less marked and there were no observed effects on punctuality (see Appendix 1).

The views of parents were also sought. These results also showed that the most significant effects of the intervention had been perceived in terms of their child's confidence, attitudes and friendships. Parents also felt that there had been improvements in their child's behaviour at home (see Appendix 2).

Professionals in the team became more open, more aware and ready to share information. Relationships between schools and BEST were positive and constructive over the five years of the initiative.

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(assistant headteacher)**

How was effective practice sustained?

In 2009 the grant expired but BEST continued in a new form. The local authority extended the Blyth model across the county and renamed it the Children's Early Intervention Team (CEIT). There will eventually be five CEITs in Northumberland: one in the north, one in the west, one in the south east (Blyth) and two in the central area.

The local authority funds this and as a result has more control of developments. It has adopted the Blyth model of good practice and consulted with BEST and schools on its implementation across the county.

The team now consists of:

- senior specialist educational psychologist
- speech and language therapist
- police officer
- behaviour support teacher
- behaviour support worker
- educational welfare officer
- inclusion support workers
- parent support partner

Succession is straightforward at Malvin's Close because the role and systems are established and members of staff support them. This has recently been tested as the original coordinator at the school has taken maternity leave. Her replacement has many similar qualities; she is hard working, has the respect of staff and is organised. She, too, has experience beyond education; her background is in psychology.

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What are the implications for school leadership?

The following factors might be considered in seeking to promote an integrated service response to secure effective early childhood interventions:

- Provide a clear rationale for an integrated approach to early intervention.
- Work collaboratively with local schools.
- Co-locate the integrated service team.
- Take responsibility for the appointment of the multi-agency professionals in the team.
- Liaise with local authority personnel and headteachers of services.
- Ensure that the early intervention coordinator appointment acts as a single point of contact in the school.
- Ensure the early intervention coordinator has experience and training in at least one other service (some form of work based study or shadowing might be helpful).

Promote inclusive, participatory and democratic approaches to leadership.

Leadership skills

- Communicate transparently within and across schools and ensure sensitive, open and honest communication with parents.
- Promote inclusive, participatory and democratic approaches to leadership.
- Provide opportunities for cross-service professional development.
- Actively involve governors and create the key role of 'well-being' governor.
- Mentor and model the role for the newly appointed early intervention coordinator.
- Appoint an effective team leader to the multi-agency team.
- Monitor and evaluate the impact of the interventions and align this to school improvement.

Conclusion

The headteacher demonstrated decisive and courageous leadership. She believed that early intervention coordinated across a range of agencies would secure improved outcomes for pupils. There is evidence to show that pupils have benefited significantly from this approach.

Inclusive and collaborative leadership helped secure commitment and support across the school and between the school and the multi-agency team.

The role of the in-school coordinator was pivotal to the success of the initiative. Her effectiveness was enhanced due to her broader professional experience and training. Her empathy and good organisation fostered positive, trusting relationships and referrals were dealt with promptly. Staff awareness and involvement from the beginning ensured wide support and commitment. Professional dialogue and good communication at all levels created a clear understanding and helped narrow the gaps between the different professional backgrounds.

All stakeholders contributed to the success of the initiative. Governors were able to support and monitor progress and impact through the appointment of a well-being governor. Parents began to engage more with the school through sensitive communication and encouragement.

Collaboration across the cluster of schools generated the capacity and funding to create a bespoke multi-agency team that was of benefit to all. This was led effectively to ensure a coordinated integrated response to referrals.

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Appendix 1: Summary of school CEIT evaluation results

September 2008–December 2009	Sample size	Significance
Significant effect of CEIT intervention on effort	32	5.00
Significant effect of CEIT intervention on attendance	32	2.27
Significant effect of CEIT intervention on attitude	31	5.63
Significant effect of CEIT intervention on attainment	31	3.00
Significant effect of CEIT intervention on behaviour in class	31	4.89
Significant effect of CEIT intervention on behaviour in playground	31	4.92
Significant effect of CEIT intervention on friendships	30	4.11
Significant effect of CEIT intervention on confidence	32	6.54
Significant effect of CEIT intervention on health/hygiene	33	2.50
No significant effect of CEIT intervention on punctuality	31	1.87
No significant effect of CEIT intervention on behaviour at home	23	1.80

Notes

Questionnaires were used at the beginning and again at the end of the period of intervention to measure improvement against a range of indicators.

Significance values less than 2.04 could be assumed to be due to chance.

High significance values indicate considerable improvement, for example, the impact of the intervention on pupil confidence was found to be highly significant (6.54).

Appendix 2: Summary of parental CEIT evaluation results

September 2008–December 2009	Sample size	Significance
Significant effect of CEIT intervention on attitude (<i>towards family, authority</i>)	19	3.85
Significant effect of CEIT intervention on organisation (<i>of equipment, school things etc</i>)	18	3.05
Significant effect of CEIT intervention on behaviour at home	19	4.00
Significant effect of CEIT intervention on friendships (<i>social relationships</i>)	20	4.32
Significant effect of CEIT intervention on confidence (<i>self-esteem</i>)	20	5.34
Significant effect of CEIT intervention on talking	20	2.13
No significant effect of CEIT intervention on attendance (<i>at school</i>)	20	1.39
No significant effect of CEIT intervention on health/hygiene	20	1.17
No significant effect of CEIT intervention on appearance	20	1.80

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