

Lancashire Early Years Strategy

3rd March 2020



Early Years Strategy - Plan on a page

Integrated Care System (ICS)

Health & Wellbeing Board

CHILDREN, YOUNG PEOPLE & FAMILIES PARTNERSHIP BOARD

Best Start in Life Strategic Group

VISION:

Children, young people and their families are safe, healthy and achieve their full potential.

INTEGRATED EARLY YEARS STRATEGY - KEY PRIORITY AREAS

Best start in life School readiness

Improve health and wellbeing

Reduce health inequalities

OBJECTIVES

To ensure better maternal and child outcomes throughout pregnancy, birth and beyond To ensure children families and communities are school ready and schools ready for children

To ensure improved health and wellbeing outcomes through the Healthy child programme framework

To target inequalities and improve health and wellbeing outcomes in priority areas

OUTCOMES AND PERFORMANCE

- Reduce Infant Mortality
- Reduce Low birth weight of term babies 37 weeks
- Reduce smoking status at time of delivery
- Reduce under 18s conception rate

- Increase % of reception children achieving CLL and a GLD to national norms
- Increase the % of disadvantaged reception children achieving CLL and a GLD to national norms

- Improve oral health
- Reduce hospital admissions caused by unintentional and deliberate injuries in children (aged 0-4)
- Reduce childhood obesity in reception
- Early identification of children with SEND

- To achieve a measurable improvement in areas of greatest need
- Ensure a targeted approach to reducing inequalities in areas highlighted as priority

KEY ACTIONS

- Develop Infant Mortality Action Plan
- Deliver Better births Action Plan
- Deliver 1001 critical days action plan
- Develop pathways to support early detection of speech delay
- Implementation of a Lancashire speech, language and communication plan
- Promote Home Learning Environment
- Develop parenting Strategy

- Develop an Integrated care pathway
- Delivery of high impact areas
- An integrated workforce development plan
- Ensure all families receive mandated developmental reviews

- Ensure a clear reporting and governance structure
- Develop a Lancashire outcomes framework for CYP
- Develop a performance dashboard

Strategy Into Action – School Readiness

PRIORITY

OBJECTIVES

OUTCOMES

KEY ACTIONS

SCHOOL READINESS To ensure children families and communities are school ready and schools ready for children

 Increase % of reception children achieving CLL and a GLD to national norms

 Increase the % of disadvantaged reception children achieving CLL and a GLD to national norms

- Develop pathways to support early detection of speech delay
- Implementation of a Lancashire speech, language and communication plan
- Promote Home Learning Environment
- Develop parenting Strategy

Safeguarding, Leadership, Evidence Base-Practice, Accountability



Our Key Priority Areas

- We will improve outcomes for our babies, children, young people and families.
- We will focus on **prevention and evidence-based practice** in order to improve the environment, reduce inequalities and build resilience.
- We will provide children and young people with **high quality education** and **learning opportunities** so children and young people achieve **their full potential** in education, learning and future employment.
- We will support children, young people and their parents to make **healthy lifestyle choices** and to build strong families, friendships and healthy relationships.
- We will prevent the need for children to become looked after through **Early Help**, so children and young people **feel safe from harm** through universal and targeted services.
- We will support parents and families to **influence decision-making** and bring about positive change for themselves and their children



Our Outcomes

- We want to reduce infant mortality by ensuring we focus on conception, birth and healthy pregnancies across the social gradient
- We want to **increase school readiness** at the end of the reception year (with a focus on closing the word gap).
- We want to reduce inequalities in health through the provision of mandated universal and targeted services.
- We want to ensure a broader focus on reducing child poverty and inequalities, and their impact across the social gradient.



Demographics

- As at the ONS Mid-Year Population Estimate for 2018, there are a total of 1,210,053 people living in Lancashire.
- Of these, there are **81,508** children aged between new-born and five years old.
- This represents **6.7%** of the total population.
- There is a slightly higher number of boys at a count of 41,707 (51%) compared to girls at a count of 39,801 or 49%.
- Preston has the highest number with 10,952 boys and girls compared to Ribble Valley with the lowest numbers at 3,157 boys and girls.
- Trend line analysis over the five to six years leading up to 2018 shows the numbers of children born each year has been **gradually decreasing**.



Social disadvantage and poverty across Lancashire

- 1 in 3 (32%) of our children aged up to five years old live in the top fifth of the most deprived areas nationally.
- A third of our very young children are living in our poorest neighbourhoods and communities (Burnley, Hyndburn, Pendle, Preston and West Lancashire).
- If we look at the top 40% most deprived areas nationally, we can see that just over half (51.8%) of our very young children are living in the country's poorest areas.



Children with Special Educational Needs and Disability (SEND)

- Additionally, children with disabilities are less likely to achieve a good level
 of development (GLD) at the end of the EYFS, more likely to be excluded
 from school, achieve on average half a grade lower at GCSE than their peers
 with similar levels of prior level of attainment, and are less likely to gain
 employment.
- In 2018 **150 children (4.7%)** in Lancashire accessing 2 year offer funded early education were identified as having SEND
- In 2018 **1570 children (5.8%)** in Lancashire accessing 3/4 year offer universal funded education were identified as having SEND with 270 (3.1%) children with SEND accessing the extended offer.
- Although there has been a slight improvement, fewer children with SEND in Lancashire achieve GLD compared to the national average



1. Why is School Readiness a priority?

- "School readiness" is defined by Public Health England as: "Children defined as having reached a good level of development at the end of the EYFS as a percentage of all eligible children."
- Children from poorer backgrounds are more at risk of poorer development and the evidence shows that differences by social background emerge early in life, as we've already mentioned.
- There is increasing concern about the numbers of children starting school with poor speech, language and communication skills with unacceptable differences in outcomes in different areas of the country.
- Disparities in early language development are recognisable in the second year of life and have an impact by the time children enter school. Around two-fifths of disadvantaged five-year-olds do not meet the expected literacy standard for their age.



2. Where are we now?

- Nationally, 28% of children leave reception without the literacy skills they require in order to thrive and succeed (**HM Government, 2018**).
- In Lancashire the number of our children achieving a good level of development (GLD)by the end of reception has been increasing over the last five years, although it dropped by 0.3% this year and is below national average.
- However, it had not been increasing as quickly as it has for England and had remained relatively static for the last three years, only rising 0.3%.
- For the year 2017/18, 9,796 (69.5%) of children achieved a GLD and 4,300 (30.5%) children did not achieve a GLD of development by the end of reception.
- At 2017/18, 29.2% or 4,116 of Lancashire children did not achieve the expected goals. If we are to halve this figure, then we need to see a development gain in approximately 2,000 more children born over the next decade to 2028 (based on the reception age population as at 17/18).
- In 2018/19 there has been a reduction of 0.3% compared to last year, with 69.2% of children achieving a good level of development.



2. Where are we now? (Continued)

- In Lancashire, **70.8%** of all children achieve the expected level of development for communication and language and literacy (combined) compared to **72.6%** of all children nationally.
- In Lancashire, the gap for all children is **2.6% below** the national average for all children that achieve at least the expected level of development for communication and language and literacy (combined).
- 12.8% fewer boys, compared to girls achieve the expected standard in communication and language early learning goals.
- Children born pre-term before 37 weeks of gestation are at increased risk of experiencing difficulties with speech, language and communication. Based on data from the Office for National Statistics in 2017, 8% of live births in Lancashire were pre-term (born before 37 weeks).
- In financial year 2017/18, 99.1% of children who received a development review at two to twoand-a-half years of age in Lancashire had their development reviewed using the Ages and Stages Questionnaire (ASQ-3) compared 90.2% of children nationally.
- There is also disparity across the County in relation to GLD outcomes where for some children on free school meals (FSM), there has been a 3 year trend that is below national.



Child Poverty by district - Children in low income families (under 16s)*, 2016

Local authority District name	Percentage of children in low income families (under 16s), 2016	Percentage of 0-5 year olds, MYE 2018	IDACI national Quintile (2019)
Burnley	21.4%	8.1%	1
Hyndburn	20.1%	8.0%	1
Preston	17.9%	7.8%	2
Pendle	16.3%	8.2%	2
Rossendale	16.0%	7.0%	2
Lancashire-12	15.1%	6.7%	2
Lancaster	14.9%	6.3%	2
Wyre	15.5%	5.4%	3
West Lancashire	13.7%	6.0%	3
Fylde	11.7%	5.1%	4
Chorley	11.2%	6.7%	4
South Ribble	10.2%	6.6%	4
Ribble Valley	5.9%	5.3%	5

Burnley and Hyndburn in quintile 1 nationally for IDACI 2019. Quintile 1 = 20% most deprived LSOAs



3. Where do we want to be?

- We want to target our combined efforts to reach those prospective new mothers and families living in our most deprived communities.
- We want to address the gaps we see in development, with a focus on boys, those in receipt of free school meals and children with additional needs.
- We want to focus on closing the Word Gap and improve child communications outcomes.
- We would do this through children's speech, language and communication in the home learning environment (HLE), early education environment and through early identification and intervention.
- We want to work in partnership to achieve the very best start for our youngest children, in delivering the EYFS statutory framework for children between birth and age five, with fidelity and consistency.
- We want to ensure we deliver on the free entitlements for two, three and four year-olds, both the universal entitlement and the extended entitlement which secures sufficient childcare for working parents, provides information advice and assistance to parents and provides information, advice and training to childcare providers
- We want to ensure all children take up their funded hours in a high-quality setting.
- We want to ensure we deliver a range of projects to strengthen workforce development.
- We want to deliver targeted intervention for parents who have concerns about their child's behaviour.
 Lancashire

County

4. How will we get there?

- We will ensure a shared understanding of "school readiness" within early years services, schools and partners across Lancashire
- We will ensure better information for mothers, parents and carers on where to access support and advice.
- We will ensure partners and education settings understand and respond to the development gaps through "warranted variation" so that we target resources to where they are most needed
- We will ensure the two-year-old funding take-up is improved and benefits disadvantaged children and families*
- We will ensure the home learning environment is encouraged through every contact, through good information, resources and tools.
- We will improve pathways to support early detection of, and access to support and therapy for speech delay through the implementation of a Lancashire speech, language and communication strategy and plan. Detection is no good without access to support and therapy.

County

4. How will we get there?

- We will ensure affordable and high-quality childcare and early years education for children from disadvantaged communities.
- We will support the provision of free or low-cost alternative activities and communitybased support for families and parent/s of very young children as part of an assetbased community development approach.
- We will ensure the quality of provision in early years settings and schools will be supported to ensure that children are supported to make maximum progress from their starting points
- We will ensure we promote children's own wellbeing and resilience
- We will ensure there is appropriate follow up of children who have been identified with additional needs through the ASQ assessments prior to starting Early Years and school.



5. Governance

- Reducing inequalities requires a partnership approach, maximising resources and commitment to deliver the Early Years strategy and plan
- School readiness is part of a broader approach to the Early Years
 Strategy
- Governance for this has been agreed sits under the CYP and Families
 Partnership Board
- A Best Start in Life has been identified as a key strategic group who will oversee the implementation and report into the CYP Board and various other boards as appropriate
- Outcomes, performance and risks will be fed into the CYPF Partnership Board and others where appropriate



6. How will we measure?

- Performance will be measured against the strategic outcomes identified in the Early Years Strategy
- This will benchmark against the NHS, Public Health and Health and social Care Outcomes frameworks which will provide all the indicators and the most recent data that is recorded
- We will be ambitious in setting **our targets** so that we improve health outcomes overall but using public health intelligence to target areas identified as deprived or achieving below the regional and national average outcomes.
- The service will be monitored against the **outcomes** highlighted for children, young people and families and will be submitted quarterly or when appropriate demonstrating activity against these outcome areas



Any Questions?

