

EAST RENFREWSHIRE COUNCIL14 SEPTEMBER 2016Report by Chief Officer Health & Social Care PartnershipEARLY YEARS STRATEGY UPDATE**PURPOSE OF REPORT**

1. To provide an update on progress made in implementing the Early Years Strategy and to propose an action plan for implementation over the next two years.

RECOMMENDATION

2. The Council is asked to note the progress made to date and approve the action plan as set out in Appendix 1.

BACKGROUND

3. The Early Years Framework, published in 2008, called for transformational change through a coherent national agenda and underlined the importance of early intervention to improve outcomes for children and families. This was reinforced in 2011 by the Christie Commission with an emphasis on prioritising preventative expenditure.
4. The Children and Young People (Scotland) Act 2014, underlines the continued national focus on early intervention and prevention to give children the best start in life.
5. The Early Years Collaborative was launched in 2012 as a multi-agency, local, quality improvement programme. It was designed to deliver transformational change at a national scale, taking forward the vision and priorities of the Early Years Taskforce to make Scotland the best place in the world to grow up.
6. With its aspiration to make Scotland the 'best place in the world to grow up', the Scottish Government, through the Early Years Collaborative, set out clear intentions to improve the outcomes for all of Scotland's children. The Collaborative also set three stretch aims. These were:
 - To ensure that women experience positive pregnancies which result in the birth of more healthy babies as evidenced by a reduction of 15% in the rates of stillbirths (from 4.9 per 1,000 births in 2010 to 4.3 per 1,000 births in 2015) and infant mortality (from 3.7 per 1,000 live births in 2010 to 3.1 per 1,000 live births in 2015).
 - To ensure that 85% of all children within each Community Planning Partnership have reached all of the expected developmental milestones at the time of the child's 27-30 month child health review, by end-2016.
 - To ensure that 90% of all children within each Community Planning Partnership have reached all of the expected developmental milestones at the time the child starts primary school, by end-2017.

7. In response to this national focus on Early Years the Early Years Strategy was approved by Council in June 2013 and CHCP committee in August 2013. The strategy took into consideration the local context and prioritised the following key themes to support the achievement of the national outcomes:

- Pre-birth support
- Parenting and family support
- Working with communities
- Development of a family centre/community hub in Auchenback
- Organisational development

The detailed report below is organised under each of these priorities.

8. The Early Years Strategy contributes to the realisation of SOA1:

All children in East Renfrewshire experience a stable and secure start to their lives and are supported to succeed.

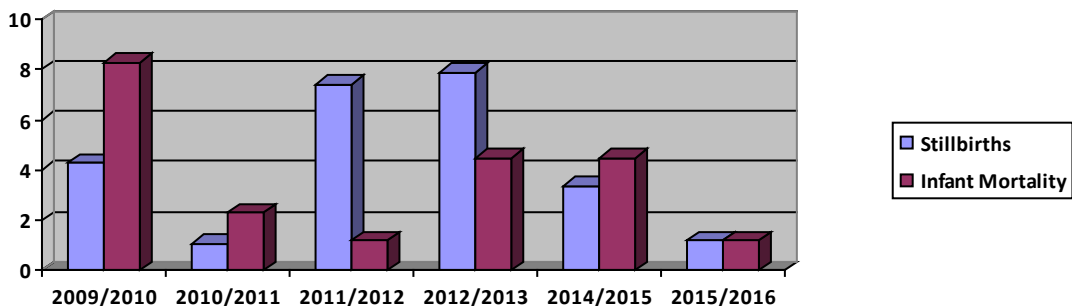
It includes a number of targets, progress against which is detailed in this report.

- Reduce rate of still births in East Renfrewshire to 3.1 by 2015.
- Reduce infant mortality in East Renfrewshire to 2.2 by 2015.
- 85% of children in East Renfrewshire reach their developmental milestones at their 30 month child health review by 2016.
- 90% of children in East Renfrewshire reach their developmental milestones by start of P1 by 2017.
- 80% of pregnant women in East Renfrewshire will have booked for antenatal care by 12th week of gestation by 2015 with a focus on delivering this in our most deprived communities
- 8% of women smoking at booking, 22% in our most deprived communities by 2015.
- 36.8 per cent of women are exclusive breastfeeding at 6-8 weeks, 29.3 per cent in our most deprived communities by 2015.
- 100 percentage of looked after 2 year olds take-up 600 hours nursery placement by 2014.

REPORT

Pre-birth support

9. Detailed in table 1 below is the data surrounding the rates of stillbirths and infant mortality in East Renfrewshire Council. The national targets were set at 4.3% for stillbirths and 3.1% for infant mortality. This translated to East Renfrewshire targets of 3.1% and 2.2% respectively. In 2015/2016 East Renfrewshire Council recorded a rate of 1.2% for the rate of stillbirths and infant mortality, well ahead of the national targets.



10. The numbers surrounding this particular topic are so small, mortality rates per 1,000 population fluctuate substantially from year to year, and from the chart above, no clear trends are apparent. However this encouraging picture must be considered alongside the very effective pre-birth support in place to ensure that women in East Renfrewshire experience positive pregnancies, which result in the birth of more healthy babies.
11. In 2015/2016 East Renfrewshire Council had the lowest level of teenage pregnancies across mainland Scotland for the 6th consecutive year.
12. Postponing pregnancy work takes place across our services with vulnerable young women. This includes a school parenting programme that has been developed by a group of young parents in collaboration with Young Persons Services. This training was piloted in Eastwood High School and feedback from participants evidenced that it had changed their attitudes towards parenting and had allowed them to develop new skills which would support them as future parents. The programme has now been scaled up and is delivered in St Luke's High School. In 2016/2017 this will be extended further to Woodfarm High School and Barrhead High School.
13. We have actively encouraged early registration with midwives and the latest figures show that in East Renfrewshire we have met, and in some deciles exceeded our target of 80% of women living in deciles 1-5 (as described by Scottish Index of Multiple Deprivation), booking in by 12 weeks of pregnancy.
14. Our local smoking cessation programmes are targeted to areas of deprivation. In East Renfrewshire our overall rates for smoking at booking are low at 6.7% which is below the 8% target; however in our most deprived communities this rises to 27.5 % which is above the target of 22%. There is a clear link between smoking in pregnancy and social disadvantage; the greater the disadvantage, the higher the smoking prevalence. There is a need to reduce smoking in pregnancy for all women, with a focus on the needs of those who experience social disadvantage. Evidence suggests that while women know that tobacco use is damaging their health, for many smoking is a means of coping with poverty, disadvantage and lack of control over other aspects of life. Reducing smoking in pregnancy is a continued priority for East Renfrewshire.
15. East Renfrewshire Family Nurse Partnership (FNP) has had a significant role to play in working with young mums to be, partners/dads and families, and evidence has shown breastfeeding rates improving within this group. One year on, mums on the FNP programme have demonstrated 100% engagement and we are using this information to analyse feeding patterns in these mums and babies, with a view to providing a peer support model to others.
16. We continue to improve links with Maternity Services to identify vulnerable pregnant women at the earliest stages. We co-delivered 'Little Bumps', a 20 week pre-natal support programme for young parents with community maternity services which ensured that these young parents had increased knowledge and understanding about the importance of attachment, brain development and how to care for their new babies.
17. Breastfeeding is an area which continues to require targeted attention and budget has been approved for this through the Early Years Change Fund. To date we have focused on a range of approaches such as, normalising of breastfeeding, promoting breastfeeding acceptability in public places, offering support to mums who choose to breastfeed and increasing the support available to babies and families who live in our more deprived areas, for example through the Barrhead Baby Café. We have tested

breastfeeding peer support models with limited success. In East Renfrewshire staff in nurseries and family centres, as well as Customer First staff, have participated fully in training and support in line with Family Friendly Accreditation which has led to an increase in the number of Breastfeeding Friendly Establishments.

18. Infant feeding practice is changing around the world and breastfeeding rates are falling. Within East Renfrewshire, we are struggling to improve local rates as are many other partnerships across Scotland. The new Universal Pathway enables our Children and Families Health staff to ensure that messages are consistently delivered with increased engagement at key points such as the 32 week home visit. Whilst better sustainability of breastfeeding rates are demonstrated in our more affluent areas, the biggest area of concern is in relation to the 6-8 week figure for our deprived areas which has dropped from 12.3% to 8.9%. This highlights the significant inequality in breastfeeding outcomes for those living in our poorest areas in comparison to our most affluent. A plan is in place to target support to those living in deciles 1 and 2 as described by Scottish Index of Multiple Deprivation.
19. NHSGGC data from June 2014 - June 2015 recorded that 84% of children within East Renfrewshire had 'no concerns' recorded at their 30 month developmental milestones assessment. It should be noted that data is gathered for the following developmental areas: behaviour, attention and speech, language and communication. Health Visiting colleagues report on-going issues around data collection within NHSGGC, however East Renfrewshire was the only local area to improve full completion of data from 25.6% in year one to 62.2% in year two. This encouraging picture indicates that East Renfrewshire is on target to achieve the national figure of 85% by June 2016.
20. Table 1 below details the percentage of children with 'newly suspected' developmental concerns as identified at the 30 month check.

Table 1

| HSCP (Total no. of assessments) | Behaviour | Attention | Speech, language & Communication |
|---|------------------|------------------|---|
| East Renfrewshire (952) | 7.2% (69) | 2.7% (26) | 10.1% (96) |

The recommended pathways for behaviour and communication concerns are request for assistance from Speech and Language and/or Parenting support. Table 2 below shows the requests made for each support between July 2014 and June 2015.

Table 2

| HSCP (Total no. of assessments) | Speech & Language Therapy | Parenting |
|---|--|------------------|
| East Renfrewshire (952) | 6.5% (65) | 12.5% (119) |

Parenting and family support

21. East Renfrewshire Council's Parenting Strategy provided a blueprint for all services to work together to ensure East Renfrewshire's children and young people grow up in nurturing homes and communities where adults in their lives have a clear understanding of their needs and how to support these.
22. In parenting and family support there has been a great deal of progress with some key successes. We have encouraged peer support which has led to the development of a number of new groups and approaches – from 'Let's Play' where parents are now co-delivering workshops, through to the dads and toddler group in Auchinback.
23. Let's Play is a programme that helps parents to improve how they engage, communicate and play with their children. Research tells us that parental engagement is encouraged when they feel like true partners with professionals. This has also been highlighted through our own community engagement. Let's Play adopts a respectful approach which recognises that we can learn from each other. Parents and members of the community feel listened to and share their local knowledge in order to successfully implement the programme in their specific local area. On-going evaluation is built into the programme's continuous development as it is scaled up to different communities and delivered by different practitioners, working alongside different parents. Parents who participated report increased confidence in supporting their child's development through play and increased knowledge of how interactive play promotes their child's development.
 - *I found out about more places to play around where I live. I only used to use one play park. Now I've seen the other three and the kids really enjoy them.*
 - *In the last few months my son's behaviour has been much better because I've made more time for him and I've been less stressed*

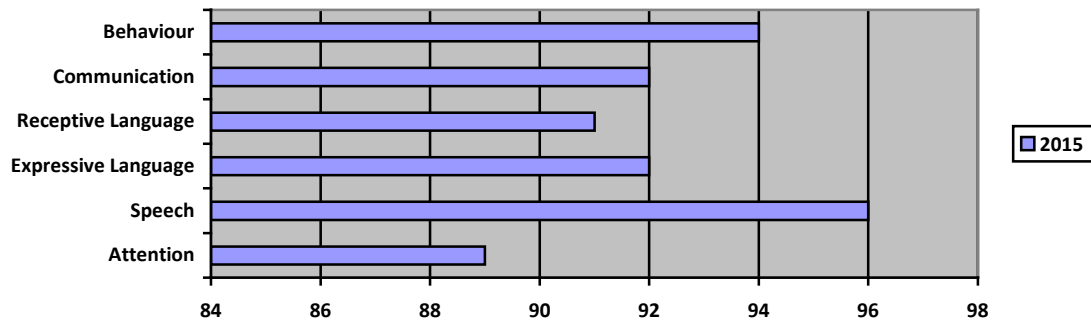
The children also responded positively to the opportunity:

- *I liked it when mummy and daddy played with me*
 - *I showed mummy how to hit the nails*
24. We have successfully introduced the Psychology of Parenting Project (PoPP) which was developed with NHS Education for Scotland (NES) to improve access to evidence based parenting programmes. We have secured funding and professional support from NES which enabled the training of 23 practitioners from Health, Social Work, Education and Young Person Services in Incredible Years and Triple P parenting programmes. To date 98 families have benefitted from attending PoPP classes with 42% completing the Positive Parenting programme and 58% completing Incredible Years, these retention rates are excellent and have been recognised as the most successful nationally. It also demonstrates the quality of the programme as well as the commitment of the parents and staff within East Renfrewshire.
 25. Since completing the PoPP programme, a significant number of parents have approached staff in Early Years Establishments with a request to form peer support groups, as a continuous support and follow up to their training.

26. These programmes are offered to all parents/carers whose 3 and 4 year old children are demonstrating challenging behaviour, for example at the 30 month developmental milestones assessment. A discussion with a Health Visitor, Child Development Officer, Family First worker or another PoPP practitioner will identify if the parents are eligible to a place on one of the programmes available. At present there is only qualitative data about the impact of the programmes on the children themselves, however we are developing an Early Years Database which would allow us to track progress from the 30 month assessment to the Primary One developmental assessment. Our first cohort of 4 year old children will be assessed in P1 this year.
27. As part of our focus on prevention and early intervention, a Discovery Team, made up of practitioners from all services, was formed to track parents' journeys and experiences of working with services. Data gathered indicated that if parents received a little bit of the right help then their journeys could have been different and less reliable on statutory services, thus more cost efficient to the Council.
28. Our Family First test in Auchenback was established as a result of this data. The Family First post holders tested different ways of working by building sustained positive relationships with families and actively linking families with services, communities and third sector partners. 91 families have benefitted from this flexible model of support which helps parents to identify and solve their own problems, building their capacity and guiding them until they can independently achieve their aspirations. Regular contact between Family First workers and families using mobile phone texts and calls helps to maintain on-going dialogue and relationships, ensuring that parents follow through with their plans to attend appointments, fill in forms and maintain agreed routines. Parents report that they feel more self-sufficient and independent and less likely to seek, or require, the support of Social Services.
29. Our evidence shows that families have been supported to engage with a range of services which has had a positive impact on family life, for example, linking with the money advice and rights team has helped them to maximise their income. Parents have been supported to engage with mental health services, leading to increased confidence, engaging with local parenting groups and thereby developing a network of peers within communities which had previously been out of reach. As a result children have benefitted from more consistent parenting which included enhanced bedtime routines leading to the health benefits associated with better sleep. Other families have needed help with managing money, dealing with housing arrears, children's behaviour and health; through motivational interviewing the family first workers have supported parents to generate a plan to identify strengths and help address such needs. In some cases this had resulted in reducing referrals to social work, eviction being avoided and parenting support being accessed. The support from Family First workers has also improved efficiency for a range of council departments by reducing the number of missed appointments, reducing instances of aggressive behaviour from angry customers and reducing the number of families requiring an allocated social worker.
30. All East Renfrewshire children's developmental progress is assessed at the start of Primary One. The following components are assessed: Attention, Speech, Expressive Language, Receptive Language, Communication, Gross Motor Skills, Fine Motor Skills and Behaviour. In 2015, 74% of children in Primary One reached their developmental milestones. An increase from 53% from 2013. Figures for 2016 are not available at present.

31. Chart 2 below highlights the performance of P 1 pupils against the same components assessed at the 30 month assessment.

Chart 2



32. Considering the data in chart 2, 92% of P1 pupils achieved their developmental milestones in the 6 components detailed above. This suggests that we are ahead of the national target of 90% of all children in each Community Planning Partnership reaching all of the expected development milestones at the time the child starts P1, by the end of 2017.
33. Evidence suggests that children are not reaching the same percentage level in gross and fine motor skills. Targeted intervention programmes are in place in Early Years Establishments to support the development of these essential skills.

Working with Communities

34. The Early Years Strategy describes developing 'a sense of place' with regards to the community of Auchenback. Previous community engagement in this area was too wide with a lack of focus or purpose; a more structured and focussed approach to developing an understanding of the area was required. With a focus on SOA1: *All children in East Renfrewshire Council experience a stable and secure start to their lives and are supported to succeed*, it was agreed that our future engagement required us to develop an understanding of what it is like to be a parent in Auchenback.
35. Working on the assumption that all parents want to do a good job, the Early Years Planning Group identified 5 key themes that they felt may create barriers to parents parenting.
- Environment and Safety.
 - Play (how to interact with their children).
 - Health and Additional Support Needs.
 - Financial Inclusion (employability).
 - Bonding with your baby (attachment).
36. In July 2015, with the support of the Community Planning Team engagement/training sessions were delivered to colleagues from education, health, social work and the third sector.
37. An engagement target of 25% of families in Auchenback (110 families) was exceeded, resulting in officers having a clearer understanding of the needs of the community and therefore how to plan, support and deliver services for children and families in the area.

38. Data from the engagement exercise was used to devise the Early Years Action Plan.

Development of a Family Centre/Community Hub in Auchenback

39. The designs for the new building have been received enthusiastically by the community in Arthurlie Family Centre. In addition to the increased provision for children aged 0-3 the shared community space and gardens have been welcomed. The community engagement exercise clearly emphasised that people want facilities and resources on their doorstep and we will continue to ensure there is on-going active engagement over the coming year in determining the use of the community hub. We are also in the process of co-producing services with the community that can be relocated to the new building when it opens.

- Work starts on site - End October 2016
- Contract completion date - End September 2017
- Nursery fit-out complete - Mid October 2017
- Building Opens - End October 2017

Organisational Development

40. An Early Years Action Plan has been developed by the Early Years Planning group to take control and drive improvements that support the delivery of SOA Outcome 1.
41. This work has been integrated into our core children's planning arrangements and is reflected in our Integrated Children's Services Plan, Parenting Strategy and Early Learning and Childcare Strategy.
42. We will continue to move towards greater collaboration between services, simplifying and streamlining systems and processes to reduce duplication and provide greater value for the public purse.
43. An extensive audit of Early Years Projects and activities has been undertaken by the Children's Improvement Collaborative Key Change Group. The appointment of a new data analyst has supported the work of this group. This exercise has led to a more evidence based approach which includes plans to scale up the successful multi-agency approaches like Family First, Let's Play and PoPP which reach more families and communities, and abandon projects where there is no data or evidence of improvement.

Next steps

44. The Children's Improvement Collaborative Key Change Group will provide the leadership system to support quality improvement across Early Years and will continue to lead in the implementation of the Early Years Action Plan (Appendix 1).
45. This plan brings together key elements of the Early Learning and Childcare Strategy, Parenting Strategy and Early Years Collaborative work. Data from the Auchenback Community Engagement has also been included. In addition, further engagement with tenants in the Auchenback community by staff in Housing Services has identified key outcomes for the plan.

FINANCE AND EFFICIENCY

46. The Early Years Change Fund is the primary source of funding for the implementation of the Early Years Strategy. In March 2016 approval was given to continue this fund for the next two years to protect the Council's collective investment in prevention.
47. The collaborative approaches promoted through the Early Years Strategy are reducing duplication, modernising how we work and increasing efficiency across all partners.
48. Any other financial and efficiency matters related to the Early Years Strategy will be met from individual department's devolved budgets.

CONSULTATION

49. Extensive consultation with the community in Auchenback has been undertaken since 2013 and shaped the ongoing work outlined in the Early Years Prevention and Community Engagement Action Plan. Online questionnaires, focus groups and one to one interviews facilitated by Family First Workers and Housing Officers were used to gather residents' views on themes relating to Play, Attachment, Health, Money, Safety and access to services.

PARTNERSHIP WORKING

50. The Children's Improvement Collaborative Key Change Group is the main mechanism for driving forward the Early Years Strategy. Many of the key stakeholders who are part of this group have been working closely together since 2013 building a strong inter-disciplinary early years team committed to improving outcomes for children and families within East Renfrewshire. The group continues to grow to include third sector partners.

IMPLICATIONS OF THE PROPOSALS

51. The implications of the Early Years Strategy are wide-reaching; improving the way that services work together, increasing community engagement in the development of services and aligning budgets and resources to support the shift to prevention and early intervention.
52. Further work, as outlined in the Action Plan accompanying this report, indicated that we will be working with families and communities to design services with them to ensure their specific needs are met. This is in line with the Council's vision: *to be a modern ambitious council, which works to create a fairer future with all and with the HSCP vision "Working together with the people of East Renfrewshire to improve lives" by*
 - *Valuing what matters to people*
 - *Building capacity with individuals and communities*
 - *Focusing on outcomes, not services*

CONCLUSIONS

53. There has been good progress with the targets set out in the Early Years Strategy as approved by Council in 2013.
54. The attached Early Years Prevention and Community Engagement Action Plan sets out the Early Years Strategy for East Renfrewshire 2016-2020. It shows how we will work in partnership to deliver on SOA Outcome 1 “All children in East Renfrewshire experience a stable and secure start to their lives and are supported to succeed”.
55. The place based approach focusing on the community of Auchenback will continue as we develop the Auchenback Community hub.
56. This maintains our focus on prevention and early intervention as we work with our communities to deliver improvements that meet their needs learning from our successes and failures to roll out approaches with other communities in East Renfrewshire.

RECOMMENDATION

57. The Council is asked to note the progress made to date and approve the action plan as set out in Appendix 1.

REPORT AUTHORS

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BACKGROUND PAPERS

East Renfrewshire Early Years Strategy 2013-2018 <http://www.eastrenfrewshire.gov.uk/CHttpHandler.ashx?id=9508>

East Renfrewshire Early Learning and Childcare Strategy 2016-2020
<http://www.eastrenfrewshire.gov.uk/CHttpHandler.ashx?id=16472&p=0>

East Renfrewshire Parenting Strategy
<http://www.eastrenfrewshire.gov.uk/CHttpHandler.ashx?id=8332>

Early Years Change Fund Proposed Spend 2016/17 and 2017/18

Foundations for life: What works to support parent child interaction in the Early Years, Early Intervention Foundation, July 2016

KEY WORDS

A report setting out progress to date in the implementation of the Council's Early Years Strategy.
Early, Years, Intervention, Prevention, Community Engagement, Children, Place

Population Outcome
The outcome we want is....

Intermediate Outcome
We will know we are making good steps along the way WHEN....

Our contribution
So we need to ...

Critical Activities
By.....

SOA 1 All children in East Renfrewshire experience a stable and secure start to their lives and are supported to succeed.

Parents provide a safe, healthy and nurturing environment for their families

Critical Indicators

1. % of parents responding positively about their engagement across services
2. Increase the number of families being supported by Family First Workers to achieve early resolution of difficulties and build capacity to solve problems
4. Reduce the number of parents not completing targeted parenting programmes
3. Increase the % of parents/carers offered income maximisation at first point of contact

Targeted interventions to increase the confidence of parents most in need of support

Accessible and effective support for families to reduce the impact of financial pressures on their children

Improving our parental engagement to ensure we:

- hear the views of those families most in need of support
- see parents as experts in their own lives
- empower parents to play an active part in their community by building on their strengths

Extending the Family First Workers to more communities of need, identified through data analysis, providing advice and support to families reducing parental stressors

Delivering effective parenting programmes that help families who need support including:

- PoPP
- Mellow Bumps/Babies
- Family Nurse Partnership
- Introduce groups for parents of children aged 0-8 & 8-16

Improving signposting to income maximisation service for families to ensure they receive their entitlement to state benefits and tax credits.

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Critical Indicators

1. Increase the number of parent networks
2. Increase the number of parents co-creating and delivering attachment/play projects in Barrhead & Neilston
3. % of Family Centred Approaches accreditation at Gold level in Early Learning and Childcare settings
6. % of parents respond positively about their engagement with services
4. Reduce in number of families reporting condensation within the home
5. Increase the safe places to play in the Auchenback Community

Engaged Communities and increased opportunities for involving parents

Establishing community networks and assets that support children's play and develop parental skills through Lets Play and self-sustaining parent groups

Supporting staff to work towards gold family centre accreditation by building a robust quality assurance package which ensures that parents benefit from the best model of practice

Delivering workforce training across services on engaging and connecting with families so that parents feel valued and respected

Improving communication and information sharing so that parents know what's on in their community

Addressing the housing and environmental issues raised in our community engagement work in Auchenback

Reducing condensation and dampness in homes

Developing safer places to play, at home and in the community:

- Scale up Lets Play
- Introduce Street Play
- Campaign for Road Safety
- Reduce anti-social behaviours of 8-16yr olds in the community
- Promote family use of local space

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Parents provide a safe, healthy and nurturing environment for their families

Critical Indicators

1. % of secondary pupils participating in parenting programmes as part of HWB curriculum
2. Decrease the number of first time mothers under 19yrs

3. % of children under 5yrs being a library member

Engaged Communities and increased opportunities for involving parents (cont.)

Improving parenting elements of the health and wellbeing curriculum in secondary schools

Targeted youth work on postponing pregnancy

Complete self-assessment tool against Pregnancy and parenthood in Young People Strategy to ensure priority actions for partnership

Analysing data regarding attendance at groups and sessions

Supporting parents of children with ASN to use community facilities

Testing approaches to support inclusion



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Parents provide a safe, healthy and nurturing environment for their families

Critical Indicators

1. % of families engaging with early years settings and health visitors to support the development of their children and their home learning environment
2. % uptake of 600hrs for all eligible 2yr olds
3. Increase the number of parents of 2yr olds taking up training or employment opportunities
4. Increase provision for 2yr olds in Barrhead at Arthurlie Family Centre in Auchenback Community Hub
5. Increase the number of male Child Development Officers

Increase in activities which support prevention and early intervention, improve outcomes and reduce inequalities

Supporting parents to improve the quality of the home learning environment through:

- Play visits
- Bookbug (testing approaches to reaching the families who need it most)
- Play, Talk, Read
- Play@Home
- Read, Write, Count

Promoting and publicising the entitlement of 600 hours free early learning and childcare to all eligible 2, 3 and 4 year olds

Working in partnership with universal health visiting services, Family First and Social Work to identify all eligible 2yr olds and optimise uptake

Working with partners to encourage the parents of 2yr old children to access training and/or employment

Developing the early year's workforce to ensure positive male role models for fathers and young boys

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Our children are healthy, active and included

Critical Indicators

1. Reduce % rate of still births
2. Reduce % of infant mortality
3. Reduce % of pregnant women smoking at booking in our most deprived communities
4. Increase % of pregnant women booking for antenatal care by 12th week gestation with a focus on our most deprived communities
5. Increase the % of women exclusive breastfeeding at 6-8 weeks in our most deprived communities

Improve maternal health and wellbeing

Reviewing the local data and developing a communication plan to improve antenatal booking rates

Reviewing local data around smoking in pregnancy and scoping out an improvement test of change

Implementing breastfeeding test of change with a focus on inequalities

Improving uptake of breastfeeding support groups including Baby Café in Barrhead

Reviewing current weaning support locally and agree revised plan of action

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Our children are healthy, active and included

Critical Indicators

1. % of children in East Renfrewshire reach their developmental milestones at their 30th month child health review
2. % of children in East Renfrewshire reach their developmental milestones by start of P1

Children receive high quality early learning and childcare.

Continuing to work with our partners across services to review existing supports covering issues such as:

- Child development and physical health
- Importance of play experiences for young children
- Parenting capacity and family matters

Working with our Health Visiting services to develop and enhanced pathway for children and families from 30 month assessment to the enrolment at an early learning and childcare setting

Providing professional learning for staff working in early years on child development, play based pedagogy and learner's experiences

Supporting parents to improve the quality of the home learning environment

Analysing the results of the expected developmental outcomes to identify strengths and areas where support is required in improving practices.

Developing physical literacy for children in early learning and childcare settings

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Critical Indicators

1. Increase % of children achieve the average raw score or above in Literacy
2. Increase % of children achieve the average raw score or above in Numeracy
3. % of early years settings being validated for 'Promoting and Nurturing Early Communication
4. Reduce % of dental decay in P1 in in our most deprived communities

Children receive high quality early learning and childcare.

Supporting and challenging establishments to ensure consistent and effective approaches to developing early literacy and English skills and early numeracy and mathematics skills

Developing a tracking tool for early learning and childcare establishments which will allow us to gather data on progress and development and target appropriate interventions.

Introducing a validated self evaluation framework to promote the development of early communication and language

Reviewing the local data around dental decay and scoping out an improvement test of change

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