Supporting Families in the Foundation Years
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Foreword

The first few years of a child's life are fundamentally important. Evidence tells us that they shape children's future development, and influence how well children do at school, their ongoing health and wellbeing and their achievements later in life. The Government is clear that all young children, whatever their background or current circumstances, deserve the best possible start in life and must be given the opportunity to fulfil their potential.

But this is not just about doing the best for individual children and families. A strong focus on the first few years of children’s lives leads to huge economic, social and emotional benefits later on, both for individuals and for society as a whole.

We are committed to making the best of the opportunities presented during pregnancy and the first five years of a child's life to set them on a course for success. The Government has already shown that commitment through our plans to increase the number of health visitors; to double the coverage of the Family Nurse Partnership programme; to provide 15 hours a week of free early years education for all three and four year olds; and our plans to extend this to the most disadvantaged two year-olds.

While all families benefit from help at some point, for some the need is more acute. We have spent the last year developing our understanding of what Government and others need to do. In that, we have been helped enormously by the reports from Professor Sir Michael Marmot, The Rt Hon Frank Field MP, Graham Allen MP, Dame Clare Tickell, and Professor Eileen Munro. It is now very clear that early help and intervention is crucial if we want to support families to get out of a cycle of poor outcomes that repeats itself over and over through the generations.

That means every service that families and young children come in to contact with being clear how they can best support child development, in the broadest sense, so that children reach school-age ready to take advantage of all the opportunities available to them. It also means putting parents and children at the heart of services while freeing up professionals to do what works and is best for their local community rather than focusing on central prescription.

In this document, we set out the Government’s plans for further reform and how all those who work with young children and their families can work most effectively to give them the support they need at the earliest opportunity. A wide range of experts
has been involved in the development of this document and it draws on what we
know parents and families want. We are grateful to everyone who has contributed
so far.

There is no more important or privileged role than supporting children and families
through these vital foundation years. This statement is only the beginning and we
look forward to working with you to make a difference.

Sarah Teather
Minister of State for Children
and Families

Anne Milton
Parliamentary Under Secretary of
State for Public Health
Executive summary

i. The foundation years are critically important for children and their families, and this document describes the Government’s vision for the system of services that supports them. It is for everyone who commissions, leads and delivers services for mothers and fathers during pregnancy and for very young children, to the age of five. It has been developed jointly by the Department for Education and the Department of Health, with advice from a range of experienced professionals.

ii. Our focus throughout is on children’s development, so that by the age of five children are ready to take full advantage of the next stage of learning and have laid down foundations for good health in adult life. The Government will promote child development and family health by: increasing the health visitor workforce so that the Healthy Child Programme is fully and consistently implemented to meet families’ needs; introducing a reformed and slimmer Early Years Foundation Stage from September 2012 with a greater focus on engagement with parents; retaining a national network of Sure Start Children’s Centres; addressing the social and economic differences between families by extending free early education to the most disadvantaged two year olds; revising the Code of Practice for early education to increase flexibility and reduce bureaucracy; and promoting quality and diversity across early education and childcare.

iii. Families are the most important influence in the early years. The Government will support mothers and fathers by: introducing new arrangements for more flexible parental leave; supporting the provision of flexible childcare so that parents can balance their working and family responsibilities; supporting the provision of online and helpline family-support services accessible to fathers and mothers; working with sector partners to increase take-up of parenting and relationship programmes (including by funding expert providers to provide relationship support to people who need it) as well as family learning; ensuring that Ofsted reports are easy for parents to find and as clear as possible; and exploring a range of options to enable parents and communities to have more say in the running of children’s centres.

iv. The Government wants to make the most of all opportunities for early intervention in the foundation years by: helping professionals to use all interactions with families as opportunities to identify any additional needs of both parents and other key family members and offer further help; requiring nurseries,
pre-schools and childminders to give parents a short written summary of their child’s progress around the age of two, and exploring options for bringing this together with the Healthy Child Programme health and development review at two to two-and-a-half into a single integrated review; supporting professionals with their role in early help; doubling the number of families benefiting from the Family Nurse Partnership; encouraging the provision and take-up of relationship support; and setting out a new core purpose for children’s centres, with early intervention at its heart.

v. A well-qualified and motivated workforce makes a real difference to the quality of support that expectant mothers and fathers and families with young children receive. Working closely with our partners, employers and sector bodies, the Government will: review how best to strengthen qualifications and career pathways in the foundation years; explore how to improve the gender balance of the early education and childcare workforce; continue to invest in graduate-level training in early education and childcare; make early years education professionals a central part of the remit of the new Teaching Agency; and support the development of strong system leadership.

vi. The Government is establishing a new relationship between central government, commissioners and providers. This will mean: encouraging partnerships between health and early years services, leading to stronger integrated working; clarifying how information-sharing in the foundation years can work better; a continuing important role for local authorities in addressing disadvantage and inequalities by securing sufficient early years provision and championing the needs of vulnerable children and families; clarifying how we measure outcomes in the early years; and promoting the development of an increasingly diverse sector with a strong role for private, voluntary, community and social enterprise organisations.
Section one: Introduction

1. This document is for all those who commission, lead and deliver services for mothers and fathers during pregnancy and for very young children to the age of five. The impact of these years on children’s opportunities and lives, and our wider society, has been described in a series of recent major reports from The Rt Hon Frank Field MP, Graham Allen MP, and Dame Clare Tickell. Professor Sir Michael Marmot’s review of health inequalities, the Green Paper Support and aspiration: a new approach to special educational needs and disability and Professor Eileen Munro’s review of child protection also make important contributions. The term ‘foundation years’ refers to the phase of life from pregnancy to age five, and its importance in underpinning later achievement and social and emotional wellbeing.

2. In Families in the Foundation Years, the Government sets out its vision for the services that should be on offer for parents, children and families. This document, Supporting Families in the Foundation Years, developed jointly by the Department for Education and the Department of Health, describes the system needed to make this a reality, building on what has already been achieved.

3. The proposals in Supporting Families in the Foundation Years have been developed with advice from a wide range of professionals with extensive experience and knowledge. This process of “co-production” ensures that policy is informed by those who best understand how to implement it. Supporting Families in the Foundation Years provides the Government’s response to the reviews led by Frank Field and Graham Allen so far as they apply to the foundation years; along with the ongoing consultation on a revised Early Years Foundation Stage (EYFS) framework it also responds to Dame Clare Tickell’s review of the EYFS. Below we describe the next steps as part of a genuinely shared endeavour:

- Section 2 explains the importance of the foundation years, the current system and the case for change, summarising the Government’s vision for the future of the foundation years;
- Section 3 describes why we are focusing on child development and explains what is needed for children to be ready for school;
Section 4 explains how we will put parents and families at the heart of services in the foundation years;

Section 5 sets out the importance of intervening early and the role of different services, working together, to ensure that children, their mothers and fathers, and other key carers receive early help where needed;

Section 6 explains how we will ensure there are skilled professionals and strong leadership across the sector;

Section 7 describes how the Government is establishing a new relationship with the sector which frees professionals to do what they believe is best;

Annexes: a detailed response to recommendations from Frank Field, Graham Allen and Dame Clare Tickell and an outline timetable for reform.

4. This document is only the beginning of a programme of reform. Throughout it we set out a series of issues that will be taken forward in further discussion with the sector. In some cases we will hold formal consultations but on any subject, at any time, we value your views. Later in the year a new interactive website developed by 4Children will enable a more sustained conversation.

5. Our focus on the foundation years and the proposals in this document are guided by the evidence from the recent reviews and are underpinned by the principles of the United Nations Convention on the Rights of the Child (UNCRC) in pursuit of a safe, happy and fulfilled childhood for all.
Section two: The Importance of the foundation years

Summary

The foundation years are vitally important both in their own right and for promoting future life chances. The moral argument is clear and the economic cost to society of failing children in the foundation years is becoming increasingly well understood. The last twenty years have brought much positive change, and there is a consensus that we should do more, by:

- ensuring that the focus of the foundation years is on child development,
- recognising that families are the most important influence on children in the foundation years;
- promoting effective and evidence-based early intervention;
- working with employers to continue to improve the quality of the workforce; and,
- establishing a new relationship between central government, commissioners and providers.

Why the foundation years matter

6. All children should be able to enjoy their childhood, in a supportive and nurturing environment, and be protected from harm. Children’s physical, emotional, language and cognitive development from pregnancy to age five are the foundations of the rest of their lives, influencing what and how they learn, their physical and mental health, friendships and relationships, and later vocations and careers.

7. Mothers and fathers are highly motivated to learn and care well for their children. While most do an excellent job some will need more support than others. This is why our focus must be on the factors that we know affect children’s development, particularly for children growing up in disadvantaged families who may not have the same level of support or benefit from the same opportunities as others. Their experiences in the foundation years can either embed disadvantage, or give them
the opportunity to break free from cycles of disadvantage and poverty to help build a stronger, fairer society.

8. The economic case for investing early points to long-term public and private benefits. Public benefits come from reduced health, welfare and criminal justice costs, and increased tax revenue. Private benefits include increases in individual fulfilment, choice, and earning potential.

9. Alongside this document we have published a pack setting out the key evidence behind our focus on the foundation years.

Key factors promoting children’s health and development during the foundation years:

- Children’s health is strongly influenced by what happens in the womb and the first two years of life, and the mother’s health and wellbeing and health behaviours in pregnancy, including smoking, nutrition and obesity. If clinical conditions are not treated early a child’s outcomes can be poorer and the condition more difficult to resolve. Birthweight, breastfeeding, passive smoking and immunisations are key influences on a child’s health status and their later life chances.

- The quality of the relationship between parents, the quality of care given to a baby, and the attachment that develops between infants and their parents are significantly linked to children and young people’s learning and educational attainment, social skills, self-efficacy and self-worth, behaviour, and mental and physical health.

- Good parental mental health is significantly associated with good child development outcomes, particularly social, behavioural and emotional development.

- The things that parents or carers do with children at home, like talking to, reading to, and playing with them, are key predictors of future development and readiness for school. The impact of the early home-learning environment on outcomes at age five has an effect over and above factors such socio-economic status, maternal education and family income.
High-quality early education is crucial to making a difference to children’s achievement, especially those from disadvantaged backgrounds, since the overwhelming majority of children who achieve a good level of development in the foundation years go on to achieve well in later stages of learning. Effective early support and intervention help reduce the need for special educational needs (SEN) provision later and the need for a SEN label.

The current context

10. Foundation years services are delivered by a diverse range of providers and professionals. The National Health Service (NHS) provides a vital universal service for families in the foundation years, through midwives, health visitors, general practitioners and other more specialist services. With almost half a million people in the workforce the early education and childcare sector is large and diverse, with vibrant private, voluntary and independent provision as well as maintained nurseries and schools.

The number of private, voluntary and maintained childcare providers 2009

11. Over the past two decades the early education and childcare sectors have been transformed, with an unprecedented expansion in the availability of childcare, the introduction of free early education for all three and four year olds, and the

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creation of a national network of Sure Start Children’s Centres. Workforce qualifications have been rising gradually, with support from employers, but the number of graduates remains low and many leaders are newly appointed. The number of men employed in the early education and childcare sectors also remains low.

12. There has been significant progress in both health and education outcomes. The infant mortality rate in England in 2009 was the lowest ever recorded, with reductions broadly shared across all social groups linked in part to improved standards of living and social circumstances, and better health and maternity care. The quality of early education and childcare services, as measured by Ofsted, has been steadily improving. Evidence about children’s development at the age of five as measured by the Early Years Foundation Stage Profile (EYFSP) also indicates a consistent upward trend. In 2010 an additional 30,000 children achieved a good level of development in the EYFSP results, an increase from 52 per cent in 2009 to 56 per cent in 2010.

13. A series of reviews over the last year have served to strengthen the arguments for investment and reform in the foundation years:

- Professor Sir Michael Marmot’s review of health inequalities\(^2\) gives priority to action in the early years. He stressed that giving every child the best start in life is crucial to reducing health inequalities across the life course. The foundations for virtually every aspect of human development – physical, intellectual and emotional – are laid in early childhood.

- Frank Field’s review\(^3\) of child poverty emphasises the importance of improving parenting and children’s early development as a means of ending the inter-generational transmission of child poverty. He points to the impact that high-quality early education for two year olds can have on later life chances, noting that known vocabulary at age five is the best predictor of whether children are able to escape poverty in later life.


Graham Allen’s first report[^4] sets out his vision for system reform and recommends “early intervention” places, a greater reliance on evidence-based programmes, and an early intervention foundation. In his second report[^5] he makes the case for using innovative financing to enable commissioners to invest in early intervention provision, including mechanisms such as payment by results.

Professor Eileen Munro’s review[^6] published in May 2011 provides a wide-ranging analysis of the current problems of the child protection system and offers a holistic set of proposals for reform. Professor Munro makes a clear argument for local and national agencies working together to take a system-wide approach. Her case is that early help for children and families does more to reduce abuse and neglect than reactive services.

Dame Clare Tickell’s review of the Early Years Foundation Stage (EYFS)[^7] signals that there was support for a coherent framework of early education but that it should be simplified and focus more clearly on three key areas of learning helping to improve children’s ‘school readiness’ and be more accessible to parents and carers. The Government is currently consulting on a revised EYFS.

14. Annex A provides a detailed response to the recommendations made by Frank Field, Graham Allen and Dame Clare Tickell. The Government’s response to Professor Munro’s review was published on 13 July.

The case for change

15. While significant progress has been made, there needs to be a new joint approach across foundation years services if the full benefits of government investment are to be realised. In the past there has been a lack of clarity about the objectives of foundation years policy, and too much central guidance and bureaucracy. We need to move away from this and instead look to the skills, expertise and leadership of those best placed to know what works.

16. First and foremost, we must be clear that the primary aim of the foundation years is promoting a child’s physical, emotional, cognitive and social development so that all children have a fair chance to succeed at school and in later life. High-quality provision at this age has a lasting impact on children’s chances. The free early education that is available to all three and four year olds is just that – education. Universal early education, like school, may help parents manage their childcare costs and working patterns but that is not its principal purpose.

17. There has often been insufficient focus on the central role of families in children’s earliest years, which has meant that mothers and fathers have not always received enough, or sufficiently timely, advice and support. We recognise that families are the most important influence of all in the foundation years and want to encourage improved advice and support to help with parenting.

18. Graham Allen’s work has shown the need for a more consistent approach to early intervention for the neediest families, including getting early extra support to disadvantaged children and their families. We need to promote effective, evidence-based early intervention so that families receive the right help as soon as possible. This requires strong partnerships between health visitors, GPs, maternity services, children’s centres and other services.

19. There has not been a sufficiently coherent framework for professional development and progression. Field, Allen, and Tickell all highlight the critical importance of continuing to improve the skills and qualification levels of the workforce. We need to work with employers on this and to support the development of confident leadership.

20. The current fiscal climate makes it vital that commissioners and professionals have the freedom and flexibility to deploy resources to gain maximum impact.
While local authorities and health services face tough decisions about priorities, these can be best made by those who understand the realities of implementation. We are establishing a strong relationship between central government, commissioners and providers, and at a local level, based on effective collaboration, targeting of resources, and strong systems of accountability.

The Government’s vision for Families in the Foundation Years

Expectant mothers will be supported through universal, high-quality maternity care from early pregnancy. Together with their partner, they will be helped to make choices and plans about their care by their midwife, GP, and health visitor. Mothers and fathers will have more choice about how to share their caring responsibilities, with more flexible parental leave, and options for flexible working.

All new parents will be supported in their transition to parenthood, through pregnancy and into the first months of life, in a way that responds to their individual preferences and needs. Support will come from families and friends, as part of routine healthcare by a trusted professional, through antenatal programmes such as Preparation for Birth and Beyond, and through the work of community groups and intensive preventative programmes such as Family Nurse Partnership for the most vulnerable.

Health visitors will provide expert preventative healthcare for parents and children until they are five. All families will have access to high-quality delivery of the Healthy Child Programme led by health visitors. Some families will have extra needs that may be predicted or emerge and health visitors will work with them to assess what the issues are and what is the best help. With more health visitors and new knowledge about the early years of life health visitors will either provide additional support themselves or refer to a specialist service where necessary. Health visitors will work closely with children’s centres and primary care to join up healthcare and child development.

Children’s centres, based in the community, will provide access to a range of integrated universal and targeted services to meet local need. They will coordinate and be part of a range of support for families, working with older children where it makes sense locally, giving them extra help when needed and bringing in professionals with specialist skills where necessary.
When a child is aged about two, nurseries, pre-schools and childminders will give parents a short summary of their child’s progress alongside the health-visitor-led Healthy Child Programme health and development review. This will help to identify any additional physical, social, emotional or communication needs the child may have, so that the right support can be put in place quickly.

All three and four-year olds will continue to be entitled to 15 hours of free early education per week for 38 weeks of the year, and this will be extended to children aged two from disadvantaged backgrounds. In future it will be easier for parents to take up their child’s full entitlement, and to choose the best quality early education from the diverse provision that is available.

A new Early Years Foundation Stage framework will help practitioners to get children more ready for all of the opportunities ahead of them, and for parents to better understand their child’s development. Continued regular inspections will help parents to be confident that their child will get the best early education and childcare whatever type of provision they choose.

Parents should have a good choice of primary schools in their area, and reception classes will consolidate and extend children’s learning before moving to key stage one. Children should start school healthy, happy, communicative, sociable, curious, active, and ready and equipped for the next phase of life and learning.

21. Health outcome measures have been set out in the NHS Outcomes Framework and the developing Public Health Outcomes Framework. They will support local partners to work together on common outcome goals to support health improvement; prevent ill health for example by increasing breastfeeding and reducing maternal smoking; reduce health inequalities; protect the population (for example through vaccination programmes) as well as improving life expectancy and preventing mortality. We plan to develop a further outcome measure linked to the Healthy Child Programme at age two to two-and-a half.

22. The proposals in this document build on the approach set out in the social mobility\(^8\) and child poverty strategies\(^9\) and have been developed in the broader

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\(^8\) HM Government (2011) *Opening Doors, Breaking Barriers: A Strategy for Social Mobility*

\(^9\) HM Government (2011) *A new approach to child poverty: Tackling the causes of disadvantage and transforming families lives*
context of the Government’s public service reform principles, recently set out in the Open Public Services White Paper.¹⁰

- Choice – wherever possible we will increase choice;

- Decentralisation – power should be decentralised to the lowest appropriate level;

- Diversity – public services should be open to a range of providers;

- Fairness – we will ensure fair access to public services; and,

- Accountability – public services should be accountable to users and to taxpayers.

¹⁰ HM Government (2011) Open Public Services White Paper. CM 8145
Section three: Focusing on child development

Summary

Our aim is to take a coherent approach to promoting child development in the foundation years so that by the age of five children are ready to take full advantage of the next stage of learning. Good parenting and strong child/parent attachments, the Healthy Child Programme and good quality early education and childcare are all essential. Working closely with partners, the Government will:

- increase the health visitor workforce by 4,200 by 2015 so that the Healthy Child Programme can be fully and consistently implemented across the country;

- introduce a reformed Early Years Foundation Stage from September 2012, offering a universal framework for integrated, play-based learning and care from birth to five. It will reduce bureaucracy and make it easier for practitioners and parents or carers to work together to provide the support that all children need to develop;

- maintain universal free early education for three and four year olds, and extend free early education to the most disadvantaged two year olds from 2013 to ensure they can access free early education earlier;

- revise the Code of Practice on free early education to reduce national prescription and enable more children to access their full entitlement;

- drive improvements in the quality of free early education, consulting on new eligibility criteria for providers, and promoting a strong emphasis on speech, language and communication as central to good provision; and,

- promote a diverse early education and childcare sector and work with it to develop a new covenant, setting out how the Department for Education, local authorities and early education providers will work together.
Why child development matters

23. In their first few years children learn to walk and run, to speak and communicate, to relate to others, to play, explore their own curiosity, and to enjoy learning through their play, as well as beginning to read and write and use numbers. These are key elements of ‘school readiness’. We do children no favours if they are not properly prepared for the transition into school and beyond reception to Year 1. By the age of five children should be ready to make the most of the wealth of opportunities available to them at their next stage of learning and development.

24. There is a growing body of published evidence about how children develop, how their brains grow, and how the quality of foundation years services can make such a difference to children’s life chances – and their future participation in our society. Findings from early childhood studies and neuroscience have shown that early life experiences are more important than previously thought, affecting health, behaviour and developmental outcomes for children and as they progress into adulthood. We also know more about what children need from adults and from their environment.

Healthy development: the Healthy Child Programme

25. The Healthy Child Programme from pregnancy to age five is the overarching framework for NHS foundation years provision, providing prevention and early intervention for children and their families. It combines preventative programmes for all children and families with additional support and early intervention in response to expressed need, to resolve problems early or prevent deterioration, and to predict need where there are known problems or risk factors, for example a child with a disability or family issues such as substance misuse or other complex problems.

26. The Government is acting to strengthen the Healthy Child Programme through its commitment to an extra 4,200 health visitors by 2015 – an increase of some 50 per cent. This expansion is intended to provide the capacity to lead comprehensive delivery of the Healthy Child Programme, through the health-visiting model set out in the Health Visitor Implementation Programme\(^{11}\). This indicates the support to be provided ranging from universal action with

\(^{11}\) DH (2011) *Health visitor implementation plan 2011-15: a call to action*
communities and families through to more targeted support. In addition the Government is doubling coverage of the Family Nurse Partnership over the same period.

27. Prevention and early intervention begin in pregnancy. All pregnant women have a midwife who will assess their health and social care needs by the twelfth week of pregnancy. The midwife is able to coordinate a woman’s care sensitively and will consider initiating a multi-agency needs assessment and sharing information with other agencies if needed. Through both midwifery and health visiting there is a particular focus on promoting positive parenting and good parent/child relationships from the outset, based on the recognition and value of the importance of prevention for all children and families.

28. GPs can often identify the need for both prevention and early intervention when they see a child or young person and/or their parents in the surgery or by receiving information from other health services. They can have a key role in helping family members access local early help services, working closely with other health professionals such as health visitors and other services including children’s centres.
29. Universal health services encompass prevention, a responsive service for all families and targeted help where needed. Specifically, the services offered by health visitors and others include promoting an understanding of families and children and their needs at community level and building social support networks for all families with young children; preparing all mothers and fathers for parenthood; and providing information, guidance and support to help them make healthy choices and with the next stage of their child’s development.

30. Not all families are able to benefit from this provision, particularly those among disadvantaged and hard to reach groups. Early help for vulnerable families needing additional support involves the health visitor working with these families using tools such as PREview.\textsuperscript{12} PREview comprises evidence-based materials based on an analysis of the factors which can be used to anticipate a child’s outcomes at age three and five plus, at population level. These include a tool to help commissioners plan preventive services in their area; and materials to help professionals to engage individual parents in thinking about how to achieve the best outcomes for their child. Support in these instances might include:

- providing extra support and guidance using evidence-based methods;
- referring families or individual family members to specialists, for example mental health services, speech and language and other therapists, domestic violence/anger management, or multi-agency support with alcohol abuse, and working with the specialist service to support the family or individual;
- providing evidence-based intensive programmes, for example structured home-visiting programmes which seek to engage with both parents, whether or not they live together, as well as other key carers;
- arranging access to support groups, for example parenting support groups provided in the local children’s centre;
- organising practical support, for example working with a childminder or nursery on the importance of play; and,

\textsuperscript{12} http://www.chimat.org.uk/preview
o delegating a small number of focused contacts to a team member and monitoring effectiveness.

31. Pressures on the health visitor workforce over recent years have meant that in practice too many health visitor services have been unable to provide a full universal preventative service or this range of targeted early intervention. The aim of the health visitor programme is to make a full service model consistently available so that, for example, all children and families benefit from the full programme of health and development reviews. The Family Nurse Partnership programme provides an intensive, structured home-visiting programme. It has one of the strongest evidence bases for improving the outcomes for the most vulnerable families.

Early education

32. Alongside good health, high quality early education is one of the most important determinants of every child’s life chances. While all children stand to benefit from early education; research has shown that children who have attended a high quality pre-school do better in reading and maths aged six than those who have not, and that this positive impact is still visible at eleven.13

33. The Government believes that no child should be denied access to a high quality early education because of their family circumstances. As such it is committed to retaining the universal free entitlement for all three and four year olds. This critical stage in a child’s education is every bit as important as later stages of schooling, and helps to ensure that children are able to make the transition to school successfully.

34. At the same time, there are particular benefits for children from disadvantaged backgrounds or with special educational needs (SEN) or disabilities for whom early identification and intervention are vital.14 Research shows that good nursery education can reduce the number of children ‘at risk’ of SEN from a third

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to one in five. When young children with less complex additional needs receive effective support, this can help to reduce the need for SEN help later in their school careers.

35. This evidence underpinned the Government’s decision to extend universal free early education to all three and four year olds to 15 hours per week for 38 weeks of the year from September 2010. 93 per cent of three year olds and 98 per cent of four year olds currently participate in free early education. Already 86 per cent of children who are accessing the free entitlement are doing so for over 13 hours per week.

36. The Government is committed to the universal entitlement remaining completely free to parents. Making parents pay “top-up” fees for their free entitlement would be an insurmountable financial barrier for many families, particularly the children who have the most to gain. As a Government committed to tackling social inequality and supporting the most disadvantaged families, we would not support this.

37. The free entitlement depends for its success on a diverse sector comprising registered childminders, as well as nurseries and pre-schools in the maintained, voluntary, private and independent sectors. The sector also supports working parents with their additional childcare needs. The Government is committed to working with the sector on three key priorities: to improve the quality of provision; to enhance children’s access to its services; and, to ensure the sector’s continued vibrancy and sustainability.

**The Early Years Foundation Stage**

38. Evidence is very clear that quality matters. In a diverse sector, the Early Years Foundation Stage (EYFS) gives parents confidence that, whichever provider they choose, they can be assured of a consistent quality experience for their child. It describes the things a good nursery, pre-school or childminder should be doing; what children should learn; and the levels of development that most children can be expected to reach at certain ages. The framework supports an integrated approach to learning and care, covering the period from birth to age five, with continuity for children as they move from the foundation years and into key stage one.
39. In her recent review of the EYFS, Dame Clare Tickell considered a wide range of views as well as recent evidence about how children learn and develop. Overall, Dame Clare concluded that the framework has had a positive impact, increasing professionalism and helping to raise standards. Ofsted evidence bears that out. Accordingly, the Government believes that a universal and coherent framework should be retained to enable the sector to sustain and build on that momentum.

![Graph](https://example.com/graph.png)

**Early Years Foundation Stage profile results 2006-2010**

40. However in its current form, many practitioners were concerned that the EYFS was too complex and burdensome, with too much time spent filling in forms. The Government has accepted Dame Clare’s advice that the framework should be simpler and clearer. On 6 July 2011 the Department for Education launched a consultation on a slimmed-down EYFS for introduction in September 2012.

41. Subject to consultation, the reformed EYFS will include:

- a stronger emphasis on the time practitioners spend interacting with children and encouraging more mothers and fathers to become involved in their child’s development, helping them understand how to enable their children to make good progress;

- a focus on early identification of children’s additional needs: we propose to require providers to give parents a written summary of their child’s progress when the child is two to three years old. This will enable better links between early years practitioners and other professionals, in

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15 DfE (2010) Early Years Foundation Stage Profile Attainment by Pupil Characteristics
particular health visitors, and allow parents to raise any concerns early rather than waiting until their child goes to reception class when crucial opportunities to provide extra support might already have been missed;

- a strong focus on the basic social, emotional, communication and language skills children need to do well at school. Three prime areas of learning will provide the foundations for children’s ability to learn and develop healthily: personal, social and emotional development; communication and language; and physical development. In addition, there will be four areas of learning where these skills are applied: literacy, mathematics, expressive arts and design and understanding the world;

- a significant reduction in burdens on practitioners – with the number of early learning goals children are assessed against at age five cut from 69 to 17, and the end of unnecessary bureaucracy including scrapping compulsory written risk assessments for every nursery trip or outing;

- a slimmer EYFS profile at age five giving better support for the transition from the reception to key stage one of the National Curriculum; and,

- clearer requirements on providers to help keep children safe.

42. Within the foundation years, the reception year, as children approach the transition to key stage one of the National Curriculum, is particularly crucial. By this stage children are in school and the proposed reforms to the EYFS will support primary teachers improve the transition to key stage one further, making the most of the opportunities offered by the substantial investment in this stage of school, including the leadership of a qualified teacher. In light of Dame Clare’s recommendation, DfE will consider further the question of the right ratio of staff to children in reception classes.
Early language

43. Recent research has shown that language development at age two is very strongly associated with later school readiness, with the early communication environment in the home providing the strongest influence on language at age two – stronger than social background.16

44. There is clear evidence that enabling children to develop their speech, language and communication skills at an early stage makes an enormous difference, and helps reduce the incidence of special educational needs. Children who start school as confident speakers with good language skills become successful learners and achieve in life. Vocabulary at age five is the best predictor of later social mobility for children from deprived backgrounds.17 Evidence from statutory assessments at age five shows that the lowest achievements are in early communication, language and literacy, with low income children behind their high income counterparts at school entry by 16 months in vocabulary.18 The Healthy Child Programme for children aged five to 19 also recommends that at school entry, there should be screening for communication disorders, offering an opportunity for early intervention at this stage.

45. High-quality support for speech, language and communication skills is essential for both effective parenting and good early years provision. Early identification of these issues will be one of the benefits of the new report for parents at age two.

17 Blanden, J. (2006) Bucking the Trend – What enables those who are disadvantaged in childhood to succeed later in life?
The health visitor has an important role in identifying, at this age, those children who need extra support. Picking up any problems will mean that children can benefit from evidence-based programmes like Every Child a Talker and where necessary from the help of specialists such as speech and language therapists. The Every Child a Talker programme (ECaT) is being used very successfully to support nurseries in many areas and DfE is building on this by providing some central funding for the programme, and increasing its focus on the birth to age two range. We have invited bids from voluntary and community groups to deliver early language training based on ECaT approaches, working where possible with existing ECaT projects in local authorities, to begin in the summer.

46. As part of the reform of the EYFS we intend to make it clearer that providers must ensure that children have sufficient opportunities to learn and reach a good standard in the English language during the EYFS so that they are ready to benefit from the opportunities available to them when they begin key stage one.

**Issue for further discussion: English language**

- How children’s English language competence can most appropriately be assessed via the EYFS profile.

**Strengthening the quality criteria for free entitlement providers**

47. High-quality early education is a key factor in closing gaps in attainment and improving school readiness of the neediest children. However, we know that disadvantaged areas are still lagging behind more affluent areas in terms of the quality of provision. By September 2010 only 52 per cent of childminders and 63 per cent of other early education and childcare providers were good or outstanding in the most disadvantaged areas, compared with 71 per cent of childminders and 75 per cent of other providers in the least deprived areas.

![Ofsted ratings of early education and childcare services 2009](image)

48. For many children the free entitlement will be the only early education they receive, and they deserve a high-quality experience. We therefore intend to strengthen the quality criteria for free early education for three and four year olds from September 2012. As part of a wider review of the Code of Practice on the delivery of the free entitlement which will take place in the autumn, we will consult on introducing a basket of eligibility criteria that providers of free early education will need to meet in order to receive funding. Local authorities will continue to have flexibility to tailor these to local circumstances. Possible measures might include:

- the Ofsted inspection rating;
- internal local authority quality assurance systems;
- participation in a recognised quality-assurance scheme or improvement programme which includes ongoing professional development for staff;
- membership of a childminder network or equivalent; and,
- workforce qualifications.

49. Children from the most disadvantaged families are the least likely to be able to benefit from high-quality early education. We therefore propose to consult on whether the eligibility criteria for the two year old entitlement when it is introduced in September 2013 should be more rigorous than for the three and four year old entitlement.

**Issue for further discussion: eligibility criteria to deliver the free entitlement**

- Defining the basket of criteria that should be used to fund providers delivering the free entitlement.

**Improvement support for early education providers**

50. Children’s centres can play a valuable role in improving the quality of early education in their area, and their influence can be felt far beyond the centre. For example, many children’s centres have established and supported childminder networks, giving childminders the opportunity to get together for training and peer
support. Many children’s centres employ highly skilled graduate teachers who
demonstrate a strong leadership role across teaching and learning in the centre,
engaging in work with infants, toddlers and nursery children.

51. The voluntary and community sector also has an important role to play in
supporting providers across the sector to improve the quality of provision. DfE
has awarded grants to the Pre-School Learning Alliance, Early Education and to
the National Day Nurseries Association to help providers improve their offer for
children as part of preparations for the adoption of the Early Years Foundation
Stage and the expansion of the free entitlement for disadvantaged two year olds.

Improving access to early education

52. While 95 per cent of three and four year olds already access at least part of their
free entitlement, research shows children from disadvantaged families are less
likely to take up their free place. Parents from the most multiply disadvantaged
families are also more likely to have more negative views about the availability of
childcare locally.20

Take up of the free entitlement by area of deprivation 2007-2008

53. Improving the take-up of free early education and childcare requires ensuring that
mothers and fathers are aware of their entitlements, and have the information
available to them to make informed choices about which options are best for their
child. Proposals in this area are covered in section 4 of this paper. The

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Disadvantage Their Use of and Views on Childcare Provision, DCSF Research Report RR191
Government is committed to a range of measures designed to enhance children’s access to free early education, and also to ensure that parents who need it can access suitable childcare including at atypical hours.

**Free early education for disadvantaged two year olds**

54. Despite improvements in early education outcomes, there remains a stubborn achievement gap between the most disadvantaged children and their peers. For example, in 2009 only 35 per cent of children eligible for free school meals achieved a good level of development at age five, compared with 51 per cent nationally. Only 43 per cent of two year olds in the poorest 20 per cent of families experienced any form of early education or childcare, compared with 72 per cent in the most affluent 20 per cent.

55. Most local authorities already provide some free early education to the most disadvantaged two year olds. The evaluation of the pilot of free early education for disadvantaged two year olds found that for children who attended high-quality childcare settings, there was a positive impact on language ability and on parent-child relationships.

56. The Government is committed to extending this free provision to those two year olds who stand to gain most from it. Building on the pilot, the Government will create a new entitlement to free early education for 15 hours a week over 38 weeks a year for the most disadvantaged two year olds nationally from September 2013.

57. Health visitors and children’s centres will have an important role in identifying families and encouraging them to take up their free entitlement. This is especially important in relation to families of disabled children and those with more complex needs as they are less likely to access services or be confident that the services can meet their children’s need. The introduction of free early education for disadvantaged two year olds will be an important stepping stone for families, bringing many of them into contact often for the first time with nurseries, childminders and children’s centres. Involving parents actively in their child’s

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experience and helping them understand how they can support their children’s learning and development will be critical. The introduction of the two year old entitlement should also help children make the transition into the existing free entitlement and so increase take-up at three and four.

58. Trials are already underway in 18 local authorities to inform how the national entitlement should be introduced. These trials will help local authorities learn from each other about how best to address some of the challenges involved in delivering the entitlement, and the pilot local authorities will take a lead in disseminating the lessons from the trials. The Government will consult on the definition of disadvantage it will adopt for the new entitlement in the autumn.

Review of Code of Practice on the delivery of the free entitlement

59. Many providers and local authorities have told us that the current statutory guidance on the delivery of the free entitlement for three and four year olds – commonly referred to as the Code of Practice – is too long and prescriptive. The Government agrees, and DfE will consult in the autumn on a new Code of Practice covering the entitlements for three and four year olds. Our aim is to ensure that the Code does all it can to support children’s access to the free entitlement, particularly for disabled children; is clearly understood by local authorities and providers; and frees up local authorities, and in turn providers, from unnecessary and often burdensome red tape.

60. Enabling free early education to be accessed more flexibly supports child development by ensuring that more children are able to receive all their free hours. Currently 14 per cent aged three and four access less than their full entitlement. Research by the Daycare Trust earlier this year found that for many parents an extra hour at either end of the working day could make all the difference to managing their work commitments and family lives. DfE will therefore consult on making some small but significant changes to the free entitlement to enable the free hours to be used slightly earlier (from 7am rather than 8am) or slightly later (to 7pm rather than 6pm), but with a maximum of ten free hours per day; and to enable providers to offer the full 15 hour entitlement over two days rather than a minimum of three.

61. These changes do not mean that children will be permitted a free 12 hour day in nursery or with their childminder. That would not support their learning and
development, and the current maximum session length will remain at 10 hours. While providers would not be required to offer the free entitlement across the extended time-period they would be able to do so in response to demand from mothers and fathers. This will complement the work that some local authorities are doing to enable parents to “stretch” their children’s entitlement over more than 38 weeks a year which can help parents during the summer holidays.

**Review of local authorities’ childcare sufficiency assessment duty**

62. The availability of suitable early education and childcare is still an issue for some families, including families of disabled children. This relates not just to the free entitlement but to families’ wider childcare needs. Research suggests that there is a particular problem at atypical hours. It is vital for those families that, alongside the free entitlement, local authorities continue to fulfil their duty (under Section 6 of the Childcare Act 2006) to ensure that there is sufficient childcare locally to meet the needs of working parents. We want to improve the way in which local authorities keep parents informed about what they are doing to deliver this duty. We will bring forward proposals that local authorities should report annually on their Section 6 sufficiency duty, and in particular how they are supporting families of children with disabilities to access childcare.

63. At the same time, local authorities have told us that the requirement (under Section 11 of the Childcare Act 2006) to publish nationally prescribed sufficiency assessments every three years is too burdensome and detracts from the task of managing their local early education and childcare market and supporting families to find places. The Government considers that a local annual report would be a more effective and meaningful way of enabling parents to hold their local authority to account for their sufficiency duty. In tandem with this proposal, the Government has therefore also decided to consult on bringing forward legislation to repeal the Section 11 duty.

**Childminders**

64. Many parents value the combination of early education, personalised support and home environment that childminders are able to offer their children. Childminders are often able to respond more flexibly to the needs of some families to access early education and childcare provision at unusual hours. Supported by a DfE grant, the National Childminding Association (NCMA) is providing national
support to the development of peer support networks for childminders. These networks contribute to strengthening home-based childcare nationally so it is high quality, sustainable and focused on the needs of children.

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<th>Issues for further discussion: expanding access to free early education and childcare</th>
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<td>o What barriers need to be overcome to ensure that all disadvantaged two year olds can access a good quality early education place from 2013.</td>
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<td>o What changes to the Code of Practice would help improve access for children and reduce burdens for local authorities and providers.</td>
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<td>o How an annual report on what the local authority is doing to meet its Section 6 duty would work most effectively.</td>
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65. Parents are also able to come together to share the costs of nannies, who provide childcare in the child’s home. This can be a good way to secure flexible provision that suits the needs of individual families, for instance where they are looking for support at atypical hours. Local authorities and the voluntary sector have a role to play in supporting this sort of childcare, for example through community nanny schemes.

Reform of free early education funding

66. The success of the free entitlement depends on the commitment of providers across the sector. For many, the funding provided through the free entitlement forms an important part of their income. Around 60 per cent of parents accessing the free entitlement also purchase additional hours from their provider.

67. The Government has been listening carefully to the views of colleagues across the sector about how the free entitlement is working in practice, and in particular about how it is funded. We will continue to work with the sector to ensure that funding for the free entitlement is fair.

68. As a first step, from April 2011, the Government required all local authorities to operate the Early Years Single Funding Formula (EYSFF) for the first time. This was intended to ensure that funding was distributed by local authorities to providers in a clear and more transparent way.
The current review of the school funding system – which incorporates funding to local authorities for free early education for three and four year olds in all settings – provides an opportunity to take stock of how the EYSFF is operating. For example, the Government is keen to assess how the system of supplements introduced under the EYSFF is working, and whether it is succeeding in driving positive outcomes for children. Questions on the future of early years funding over the longer term are included in the current DfE consultation.

**A covenant with the early education and childcare sector**

The diversity of the early education and childcare sector is a source of strength; its ability to draw on the ideas of professionals from maintained, private, voluntary and independent providers has helped to stimulate its growth and culture of innovation. This in turn has improved outcomes for children. The Government is committed to promoting a diverse and vibrant early education sector and encouraging new forms of provision, such as mutuals and social enterprises, which are responsive to local community needs and offer parents enhanced choices.

As part of the co-production process, working with colleagues from local authorities and all parts of the early education and childcare sector, we want to develop some shared ambitions, which will help inform the sector’s future development, and underpin new ways of working between the Government, local authorities and providers. The aim is to foster a sector which in all its parts is:

- **Entrepreneurial** – an innovative sector that is constantly improving its professional practice, developing new solutions and that actively markets itself to all parents, including the most disadvantaged, and competes on the basis of its professionalism and the quality of service settings offer;

- **Sustainable** – providers in the maintained, private, voluntary and independent sectors with healthy business models, thriving, and able to invest in improving the quality of support for children and their families;

- **Socially responsible** – a sector with the interests of children and families at its heart and recognised for its contribution to supporting children with
additional needs and those from disadvantaged families as part of its core mission.

72. As part of the next stage of co-production we propose to work with local authorities and the representatives of providers of free early education to develop a new covenant, which will draw together these shared ambitions and new ways of working into a single, joint statement of intent. We envisage that the main areas it will cover will include:

- the involvement of sector partners in the policy-making process at an earlier stage;

- improving parents’ awareness and take-up of early education;

- the active pursuit of measures to promote greater efficiency in the sector, and reduce unnecessary regulatory burdens; and,

- the creation of the right conditions for small businesses and voluntary and community organisations in the sector to thrive.

**Issue for further discussion: early education and childcare covenant**

- Content of the covenant
Section four: Parents and families at the heart of services

Summary

Mothers and fathers play the most important part in raising a child. Warm and authoritative parenting is critical to children's social, emotional and intellectual development. Strong relationships between parents also make a big difference to children. Mothers and fathers should have choices about the way they share caring for their children and work. Grandparents and the wider family make a vital contribution too. Parents need help navigating the wealth of support currently available and easier access to support to strengthen their parenting skills. Families should be able to influence the services they receive.

Working closely with our partners, employers and sector bodies, the Government will:

- introduce new arrangements for more flexible family leave following the *Modern Workplaces* consultation;
- make sure that parents can access relationship support if they want it;
- support the provision of online and helpline family and relationship support services from organisations which families trust and encourage greater availability of high-quality parenting programmes;
- ensure that Ofsted reports on childcare provision are easy for parents to find and read;
- explore a range of options to enable parents and communities to have more say in the running of Sure Start Children’s Centres; and,
- make sure that those families who need it the most get extra support with the costs of childcare.
Why parents matter

73. Mothers and fathers play the most important part in raising children. The Millennium Cohort Study, for example, suggests that parents who combine high levels of parental warmth with high levels of supervision are more likely to have children at age five who are confident, autonomous and empathetic. Good parenting therefore reduces the risks that children experience poor behavioural outcomes, criminality and anti-social behaviour. Early parenting experiences are especially critical in the development of the child’s emotional regulatory system and a large proportion of adult mental health problems are thought to have their origins in early childhood. A poor parental relationship can be a significant barrier to good parenting. More parents split up in the first years after the birth of a child than at any other time.23 When the father is involved in the care of a child early on, couples are almost a third less likely to split up.24

74. Mothers and fathers are their children’s first and most important educators. From the moment of birth, the relationship between parents, between parents and their child, and the activities they do together affect later development, giving children the trust, attitude and skills which help them to learn and engage positively with the world. What happens in this home environment has more influence on future achievement than innate ability, material circumstances or the quality of pre-school and school provision. When fathers and mothers talk, play, read, paint, investigate numbers and shapes or sing with their children it has a positive effect on children’s later development. Mothers’ and fathers’ involvement in reading is the most important determinant of their child’s early language and literacy skills.25

75. The Department for Education (DfE) is helping the sector to lead a parenting campaign to raise greater awareness of the importance of high-quality parenting skills, building strong family relationships for children in the foundation years, and promoting the evidence around practice that supports parental engagement in their children’s learning.

25 National Literacy Trust
Family friendly

76. With funding from DfE the Family and Parenting Institute has launched a “Family Friendly” scheme to encourage organisations in the public, private and voluntary sectors to commit to put families (as both employees and customers) at the heart of their business. A number of high profile organisations have already signed up as members of the scheme.

Supporting shared parenting

77. From pregnancy onwards, all professionals should consider the needs and perspective of both parents. Government and the sector have a role to play in setting the right tone and expectation, and helping professionals to think about how better to engage fathers in all aspects of their child’s development and decisions affecting their child.

78. Most expectant mothers want their partners to be involved in their pregnancy and birth and in caring for their child. This desire to be involved is shared by most fathers-to-be. We therefore welcome the guide being produced by the Royal College of Midwives on how maternity services and all those involved in providing maternity care can best encourage the involvement of fathers throughout pregnancy and childbirth and into fatherhood and family life. This guide is expected to be available in the autumn.
79. The Government wants parental leave to be more flexible so that mothers and fathers develop positive patterns of shared caring from the start. On 16 May the Department for Business, Innovation and Skills launched a consultation, *Modern Workplaces*, which proposes changes to the current system of maternity, paternity and parental leave. The proposed system is:

- 18 weeks maternity leave and pay – in one continuous block around birth;
- two weeks of paternity leave and pay – in one continuous block around birth;
- four weeks of parental leave and pay exclusive to each parent to be taken in the first year; and,
- 30 weeks of additional parental leave available to either parent – of which 17 weeks would be paid and can be broken in blocks between parents.

80. Under the proposed new system parents would have a total of 58 weeks leave between them, an increase of four weeks on the current arrangements. The leave would also be more flexible than the current system. The Government is also exploring how flexible working options can be encouraged and has announced an intention to extend the right to request flexible working to all employees. We are currently consulting on the detail of this. In addition, the Government believes that there also needs to be a non-legislative approach that will show employers how to operate in a more flexible way. We are working with businesses to identify good practice, demonstrating how flexible working can be of benefit to both business and employees.

**Relationship support**

81. A strong relationship between parents makes a big difference to children's development. The risk of relationship breakdown is particularly high for some groups, such as teenage parents. Relationship breakdown can lead to fathers' disengagement from parenting, acrimonious relationships affecting the child or the isolation of single mothers.

82. A range of expert providers, including Relate, are being funded by DfE to provide relationship support to people who need it. This includes marriage preparation
courses, and counselling and mediation for couples who are experiencing difficulties. Where it is clear that a relationship cannot be preserved, information and advice is also available for both mothers and fathers on what to do next. In some areas relationship support sessions for new mothers and fathers are being trialled to help them manage the changes in their relationship that come with parenthood. DfE has commissioned an evaluation of relationship support interventions to ensure that in future commissioners can make evidence-based decisions about whether and how to invest in relationship support.

83. The Family Justice Review is currently considering what changes should be made to ensure that the system benefits all children and families involved with legal proceedings following family breakdown. The Review’s key underpinning principle is that the positive involvement of both parents post separation should be encouraged. It will report in autumn 2011.

84. The Government is also looking to radically reshape the child maintenance system to ensure that separating and separated parents are able to access the support they need to make their own family-based arrangements that put the needs of their children first.

85. We would like more families to be able to access expert support from organisations that they trust when they experience relationship difficulties. However there are currently waiting lists caused in part by a lack of suitable counselling space. DfE is making three rooms in their headquarters available on a trial basis to Relate to enable them to offer more counselling sessions for individuals and couples. Government has access to many spaces which could benefit similar organisations and we hope to see this happening in other buildings as well.
The wider family

86. Grandparents and the wider family play a valuable role in family life especially when caring for children or providing emotional support. Grandparents provide a high proportion of informal care, which is valued for the trust and the flexibility it provides. For instance, many parents also rely on informal networks for emergency cover at times of sickness. But while we recognise the service grandparents and other family members provide we believe paying for, or regulating, such childcare arrangements would be inappropriate.

Information and support for parents

87. Most mothers and fathers look first to family and friends for advice about parenting issues, and then to professionals and other trusted organisations, largely from the voluntary and community sector. From July 2011, DfE is funding 11 respected organisations to provide national family support services online and by telephone. These services provide support on a wide range of issues from behaviour or mental health problems to advice on benefits. The services also provide therapeutic sessions such as relationship counselling. This recognises that families can continue to need help and advice long after their children start school.

88. There is a huge range of information and advice available to mothers and fathers from pregnancy onwards particularly on the internet. However research\(^{26}\) shows that mothers and fathers often struggle to find specific advice when they need it. We are working with partners to explore ways of making this digital advice and information for parents much more accessible, at regular intervals during their child’s development.

89. In response to Dame Clare Tickell’s recommendation that the EYFS framework should be easy to access, understand and navigate DfE will prepare and publicise a summary document, tailored for parents. This will support discussions between parents and practitioners about children’s progress and help parents understand how best to support their child’s development.

90. We also want to make it easier for mothers and fathers to choose the best quality early education and childcare. So that parents see the level of quality that a

setting provides as soon as they visit, we believe that providers should display their Ofsted rating. Ofsted reports contain useful information about the quality of every early education and childcare provider and are available on its website. Ofsted will ensure that they are easy to find and easy to read.

91. Many websites offer hints and tips on what to look for when choosing early education and childcare, and local authorities have a duty to ensure that they make information available to parents about local providers. DfE has also provided a grant to the Daycare Trust to promote the development of Parent Champions to offer advice and information to their fellow parents locally. Disadvantaged families may need more support, and health visitors and children’s centres will have a role to play in helping them to access provision.

92. Ultimately, however, the early education and childcare sector is itself best placed to market its services to parents and carers. The Government is keen to work with providers and their representatives through the development of the new covenant (described in Section 3) to help improve parents’ awareness and take-up of early education.

Strengthening parenting skills

93. Mothers and fathers primarily learn how to parent from their own experience as children, and from family and friends. Professionals like health visitors, nursery teachers or childminders also help. This starts in pregnancy, including through antenatal groups offered by a wide-range of organisations such as doctors’ surgeries, hospitals, children’s centres, and charities. The best antenatal education helps prepare families for early parenthood as well as for childbirth.

94. The Department of Health has worked with voluntary sector organisations and professionals to develop a new programme of couple-focused antenatal support called Pregnancy, Birth and Beyond. It places a greater emphasis on child development, on the roles and experiences of both parents, on the emotional transition to parenthood, and on relationship issues than traditional models of antenatal education.

95. Where antenatal groups are offered to first-time parents most will take advantage of them. This is not the case for parenting programmes. A growing body of evidence shows us that good quality parenting programmes improve outcomes
for families across a broad age range and across the spectrum of need. As well as improving parental wellbeing, they can also reduce youth crime, antisocial and delinquent behaviour, child maltreatment, school failure and child and adolescent mental health problems in the longer term. We want local commissioners to choose proven parenting programmes to meet local needs, which is why we are continuing to support the Commissioning Toolkit developed by the National Academy for Parenting Research.

96. We know that parents find that participation in evidence-based parenting programmes can provide helpful support and advice to them in their role. Parenting programmes on television are popular and significant sums are spent on books and magazines about parenting, and there is a market for antenatal education. We want more mothers and fathers to be able to access high quality parenting programmes when they choose to do so. Parents who attend evidence-based parenting programmes (which include such elements as relationship support, co-parenting, child development and advice on how to support their children’s learning with simple activities in the home) find it can be life-changing – helping them to support their children’s good behaviour and communication skills, and to prevent problems developing later on. When both parents take part (separately or together) gains are greater and better maintained and each parent’s relationship with their child is enhanced.

28 www.commissioningtoolkit.org
Involving parents and communities in service provision

97. The Government believes that parents and families should be able to shape foundation years services so they meet local needs more effectively and support the local community as a whole. Maintained schools are already overseen by governing bodies which include parents and representatives of the local community. The best foundation years services already consult parents and have identified ways of effectively engaging with their communities and building support.

98. We want to build on these approaches to find ways to enable families and communities to have a stronger voice in the running of children’s centres so they can become genuine community hubs. Every children’s centre must already have an advisory board which acts as a critical friend but does not have a decision-making role. Working with partners DfE will explore what more could be done to encourage more parental and community involvement in children’s centres.

Issues for further discussion: parental involvement in children’s centres

- Understanding how children’s centres can maintaining effective engagement with families.
- Ways in which governance arrangements can be strengthened to help more families (particularly disadvantaged families and families of children with special educational needs and disabled children) have a say in how their children’s centre is run.
- Strategies to engage more men and fathers as volunteers.

99. DfE is committed to the engagement of voluntary and community sector organisations in running children’s centres. This is part of the Government's plans to enable mutuals, co-operatives, charities and social enterprises to have much greater involvement in the running of public services along with private sector providers. Currently the majority of children’s centres are managed in-house by local authorities but some contract with schools and voluntary and community organisations to run their children’s centres. Some areas also commission out particular services. If approved by Parliament the Localism Bill will give voluntary and community organisations, local authority employees and parish councils the ‘right to challenge’ local authorities to commission out services – including children’s centres.
100. Many voluntary and community sector organisations have great expertise in working with families in greatest need and have developed innovative approaches to engaging families and mobilising volunteers. Many local authorities can see the benefits and are commissioning out their children’s centres or services within them as part of wider strategies to improve efficiency and service provision. DfE has allocated a grant to 4Children to work with selected local authorities and children’s centres to identify and overcome potential barriers to voluntary and community sector organisations, including improving their business skills and developing delivery models so that they can successfully bid for services. Their findings and good practice will be shared and discussed with voluntary sector, local authority and children’s centre networks.

Vulnerable children and families

101. Some children and families have particular needs or circumstances which make them more vulnerable to poor outcomes. These groups include teenage mothers and young fathers, lone parents, some minority ethnic groups, children without adequate housing, disabled children and those with special educational needs, and looked after children. The evidence shows that child poverty, housing overcrowding, maternal obesity and smoking in pregnancy are key factors in explaining higher rates of infant mortality among disadvantaged groups compared to the whole population.\(^{29}\) Research also shows the factors in pregnancy and the pre-school years linked to poor child outcomes include parental drug and alcohol problems, domestic violence in the home, parental mental health problems and a poor home-learning environment. In addition, all families can face challenging times in life (such as bereavement or unemployment) and difficult social circumstances (such as poor housing and environment) which increase the risk of poor child outcomes. DfE is funding expert providers in the voluntary sector to deliver training to staff in children’s centres to help them recognise and respond effectively to families experiencing relationship difficulties and separation. All foundation years services have an important role in identifying and supporting those families experiencing or at risk of these problems.

102. Effective integrated working is key to meeting the Prime Minister’s commitment to turning around the lives of the most troubled families during the lifetime of this parliament. Community Budgets are an important part of this

\(^{29}\) DH (2007) Implementation Plan for Reducing Health Inequalities in Infant Mortality
approach to securing improvements in provision for families with multiple problems. Whether or not an area is operating Community Budgets, local commissioners and providers are responsible for assessing needs across the area. This should inform a local integrated offer of help and services which match the variety of needs of children and their families. This offer should have a clear underlying focus on promoting the development of all children, whatever their circumstances.

103. Health visitors, midwives, general practitioners, social workers and other professionals supporting families should be aware of their local children’s centres and the services and support they offer. Maximising these links including through effective referrals will help promote good health and wellbeing locally and address some of the differences between these families.

104. Children’s centres play an important role in helping all families access universal services, and providing a welcoming environment for many families in need of extra support. They ensure that families are referred to relevant targeted services such as parenting programmes, if necessary. Many children’s centres already support children from vulnerable families through outreach and family support. For example some children's centres host voluntary and community organisations supporting domestic violence victims, work closely with drug and alcohol charities or provide support within prison visitor centres or contact centres where non-resident fathers or mothers can spend time with their children. The Government is keen to build the evidence base for effective practice in this sort of outreach activity and that centres find ways of overcoming barriers that may get in the way of some groups of parents, for example teenage parents, accessing the services on offer.

105. Families with disabled children often suffer particular stresses and strains and their child’s needs may require support from more than one service. For these families local authorities and children’s centres can provide effective multi-agency support through the Early Support Programme approach which puts families at the centre of any discussion about their child so that their views are listened to and respected. DfE has invited voluntary and community sector and not for profit organisations to submit bids to maintain the existing Early Support resources, including training materials, and amend them in partnership with parents to extend their use to school-aged children.
106. In the Green Paper Support and Aspiration: A new approach to Special Educational Needs and Disability published in March 2011 the Government proposed introducing a new single “Education, Health and Care Plan” to replace the current statutory assessment and statement of special educational needs. This would bring together education, health and social care services to develop a single plan for supporting children with more complex needs from birth to age 25. By 2014 we also intend that all families whose child has an Education, Health and Care Plan will be entitled to a personal budget. This should give families greater control over the support that their child receives. Some local authorities will be developing and trialling these new approaches with their health partners from September 2011.

107. Armed Forces Families (whether or not they are in Service accommodation) can find it difficult to access good quality early years support and childcare due to their unique circumstances involving a far higher level of family mobility than the average civilian family. The Armed Forces covenant is a priority for this Government to ensure that those servicemen and women, who are playing a key role in protecting our interests and way of life, and their families, should not be disadvantaged. Recognising the specific needs of armed forces families when they return to this country from overseas or when moving between local authority areas, DfE is consulting on how to ensure that admissions for school age children can be geared to better support Service children seeking a place, often outside the normal admissions round. We have proposed as part of that consultation to allow reception classes, normally limited to 30 children per class, to exceed that limit where that would be as a result of an application from a Service family.

108. Looked after children and those on the edge of care are particularly vulnerable to having poor outcomes. Effective early intervention with their families can lead to some children being able to stay within the family home rather than be taken into care, be placed with other family members or to be able to return home to their family more quickly. In particular the Government is promoting specific programmes such as Family Group Conferences and Family Drug and Alcohol Courts, which have been evaluated as effective ways of enabling families to get the support they need so that these vulnerable children can live at home.

109. Targeting parental risk factors as well as child outcomes reduces the risk of problems being passed on to children as they grow up. Children with one or both parents who have mental health or substance misuse problems or where a
parent is in prison can be particularly vulnerable. For example, the children and families of offenders are often ‘invisible’ to services and are at risk of emotional and monetary problems, as well as intergenerational criminality, and may have difficulties accessing good quality early years support and childcare. Approximately 160,000 children are affected each year by parental imprisonment. They often have poorer outcomes than their peers. For example they have three times the risk of mental health problems and nearly two thirds of boys who have a parent in prison will go on to commit some kind of crime themselves.

Financial support and improving parent prospects

110. There is financial support towards the costs of raising children in the form of Child Benefit and the Child Tax Credit for lower income families. For some families, Government provides financial assistance through the childcare element of the Working Tax Credit. For teenage parents in education or work based learning the Care to Learn scheme provides help with childcare costs.

111. From 2013 Government will be introducing the Universal Credit, a single system of means-tested support for working-age people which will make it easier for families to access the financial assistance they need and help them move into work. Discussions with stakeholders on support for childcare costs after Working Tax Credit are ongoing and we expect to be able to provide further information during the passage of the Welfare Reform Bill. Employers may also offer workplace nurseries which are free of tax and National Insurance when used towards the cost of childcare, or childcare vouchers or directly-contracted childcare, where relief on both tax and National Insurance is limited. This can represent a significant saving for working parents, especially as both parents can receive vouchers where their employers offer this benefit.

112. It is also important to acknowledge the role that affordable and flexible childcare plays in supporting parents to return to and remain in the workplace. This is particularly important for families unable to rely on informal childcare networks. The link between reducing child poverty and parental employment is strong. The risk of relative poverty for a child in a workless household is 53 per cent, this falls to seven per cent for households in which all adults work.\textsuperscript{30}

113. Many children’s centres work closely with JobCentre Plus and other agencies to help families out of poverty and worklessness. They can help families to access a range of work-focused services in their community including benefits advice, adult and community learning, careers advice, volunteering opportunities, and employment support.

114. In addition to children’s centres signposting vulnerable families to appropriate support services, the Government is committed to giving people the opportunity to increase their skills levels. This can help parents engage in their children's learning, improve their own employability and enhance the quality of family life. Many people need help and guidance to develop their skills and then progress to sustainable employment. That is why we are reforming the skills landscape and freeing up providers to be able to reach out to those who have complex needs and are furthest away from the labour market. This includes meeting learners' needs through informal non-accredited adult-learning, fully funded pre-employment training for those on active benefits, fee remission for low-qualified 19-24 year olds for their first qualifications at levels two and three from 2012/13, as well as literacy and numeracy and foundation learning for those who need it.
Section five: Intervening early

Summary

The case for early intervention is clear. Reviews conducted by Professor Sir Michael Marmot, The Rt Hon Frank Field MP, Graham Allen, MP, Dame Clare Tickell and Professor Eileen Munro have all reinforced the importance of early intervention in the foundation years. The Special Educational Needs and Disability Green Paper emphasises the difference early identification and intervention can make for children with special educational needs and disabilities and their families. We want to make the most of all opportunities for early intervention in the foundation years by:

- helping professionals to use all interactions with families as opportunities to identify additional needs and offer further help. Health visitors and GPs, early years staff and teachers all have a role to play;

- introducing a new requirement on nurseries, pre-schools and childminders to give parents a short written summary of their child's progress around the age of two. Over time the Government intends to explore options for bringing this together with the Healthy Child Programme review at age two to two-and-a-half into a single integrated review;

- supporting professionals with their role in early help as part of the new arrangements following the Munro review of child protection;

- encouraging evidence-based parenting programmes, and doubling the number of families benefiting from the Family Nurse Partnership; and,

- setting out a new core purpose for Sure Start Children’s Centres, with early intervention at its heart. Family support and outreach services working with health visitors have an important role and we will identify an outreach system leader to develop the professional identity of outreach and family-support practitioners.
Why early intervention matters

115. There is a wide consensus that the foundation years are a critical period for a truly preventative approach. For example, in *Early Intervention: The Next Steps* Graham Allen made a compelling case for investing in policies and programmes which promote early intervention, particularly in the foundation years. Mr Allen argues that:

> “Building their essential social and emotional capabilities means children are less likely to adopt antisocial or violent behaviour throughout life. It means fewer disruptive toddlers, fewer unmanageable school children, fewer young people engaging in crime and antisocial behaviour. Early intervention can forestall the physical and mental health problems that commonly perpetuate a cycle of dysfunction”. 31

116. What happens in pregnancy and the first few years of life gives children a lasting legacy because they are growing rapidly and particularly susceptible to physical, environmental and psychological harm. After the age of three it becomes much more difficult to make changes in both a child’s development and in parental behaviour. Interventions under the Healthy Child Programme can help prevent problems in these crucial first few years.

117. On 11 July 2011 the UK-wide Chief Medical Officers published new physical activity guidelines for all, including for the foundation years. The guidelines provide advice on the volume, duration, frequency and type of physical activity required across the lifecourse to achieve general health benefits. It is aimed at the NHS, local authorities and a range of other organisations designing services to promote physical activity. It is intended for professionals, practitioners and policy-makers concerned with formulating and implementing policies and programmes that use the promotion of physical activity, sport, exercise and active travel to achieve health gains.

118. In her review, Professor Munro makes the case that early help for children and families does more to reduce abuse and neglect than reactive services. Child abuse and maltreatment can have a severe and lasting impact on children’s physical and emotional wellbeing and their ability to achieve and thrive. Early identification of the risk factors in families which can lead to adverse outcomes in

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31 Allen MP, G. (2011)
young children is particularly important to prevent serious harm in the short and long term.

119. The Special Educational Needs (SEN) and Disability Green Paper’s focus on the importance of early identification and intervention recognised that early intervention may enable more young people to lead successful and independent adult lives and avoid the SEN label later for those with less severe needs.

Making the most of all opportunities for early identification

120. Every interaction between families and professionals provides an opportunity to identify and begin to meet additional needs. Midwives, health visitors, general practitioners and dentists, children’s centres, outreach and family support practitioners, speech and language therapists, teachers and other professionals all have a part to play. For example, a GP or dentist may notice signs of an underlying condition, or of neglect, during a routine appointment. Ensuring that professionals are alert to such opportunities is as important as putting in place specific mechanisms for early identification over the course of the foundation
121. Starting nursery or going to a childminder gives a further opportunity to identify any additional needs a child may have. Staff trained in the Early Years Foundation Stage (EYFS) will understand children’s expected levels of development and should give regular feedback to parents on their children’s progress, highlighting any concerns. As Frank Field suggested, the free entitlement for disadvantaged two-year olds will provide a new opportunity for earlier identification of additional needs in children from the poorest families, as well as for involving parents in their children’s learning and offering extra help.

122. Building on the proposal (outlined in paragraph 41) to require all nurseries, and childminders to give mothers and fathers a short written summary of their child’s progress at around the age of two, from September 2012, we intend to explore options for bringing this together with the Healthy Child Programme review at two to two-and-a-half into a single integrated review from 2015 when the planned increase in health visitor numbers should make this possible. Health Visitor Early Implementer Sites are expected to have arrangements in place to deliver the Healthy Child Programme, including the review for all children aged two to two-and-a-half, and will therefore be well-placed to test the integrated review. We propose that, following discussion with expert advisers on the Healthy Child Programme and Early Years Foundation Stage, five sites are asked to begin to help develop and test new models from October 2011.

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<th>Issues for further discussion: review at age two to two-and-a-half</th>
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<td>o Establishing what information is necessary to inform the review.</td>
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<td>o Understanding which children might be at risk of being missed and how their families could be reached.</td>
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<td>o Understanding what data might need to be gathered locally to support the commissioning of services.</td>
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123. The proposals in the SEN and Disability Green Paper to improve the quality of early identification and intervention, with radical reform to the statutory assessment system and the introduction of a single plan for supporting children with more complex needs, will involve close working between services and
families. Early identification and appropriate intervention are particularly important for children with high incidence SEN, like communication difficulties, because research indicates that there is a critical ‘window’ before the age of five when intervention is most effective. As we take forward work on an integrated review we will consider carefully how this relates to the integrated Education, Health and Care Plan.

Sharing responsibility for early help

124. Good early intervention in the foundation years relies on genuine integrated working. Through the development of joint health and wellbeing strategies and local commissioning frameworks for health care, social care and public health services, the proposed new Health and Wellbeing Boards (discussed further in section 7) and their members will be able to promote the commissioning of services that improve local outcomes.

125. The Early Intervention Grant (EIG) provides a substantial funding stream for early intervention and preventative services. It gives local authorities greater flexibility and autonomy over how they spend it in order to meet local needs. In parallel, community budgets offer a further means of bringing together funding streams to focus on particular problems. Initially, these focused on the needs of families with multiple problems but increasingly local authorities have been considering how to expand the remit to cover preventative action. Graham Allen has been working with 27 local authorities from across England to explore the potential for early intervention budgets, and a further expansion of community budgets over the next two years has recently been announced. We are exploring how to extend the package of support offered to areas developing community budgets for families with multiple problems to improve early intervention, including on financial flexibilities.

Evidence-based early intervention

126. Graham Allen has conducted a thorough analysis of evidence-based programmes in his two reports, and argues powerfully that in a tight fiscal climate, it makes sense to use programmes which are most effective, and are proven to deliver results. The Government agrees that evidence-based programmes and practice are an important element of good early intervention, particularly when supported by outreach or screening to identify those who need the programmes
most. Section 4 has already looked at the role of evidence-based parenting programmes and DfE is encouraging their use by children’s centres and other early years settings.

127. Evidence underpinning the Family Nurse Partnership (FNP) is particularly strong. It is based on more than 30 years of US research and early evaluation findings in England suggesting positive outcomes for vulnerable children when they finish the programme at two years. The Government is doubling the number of places on the FNP to 13,000 by 2015, so that more vulnerable first-time teenage mothers and young fathers can benefit from this intensive support from early pregnancy until the child is two. It offers intensive and structured home-visiting, delivered by specially trained nurses. FNP uses in-depth methods to work with both young mothers and fathers, on attachment and relationships and psychological preparation for parenthood. Family nurses build supportive relationships with families and guide first-time teenage parents so they can adopt healthier lifestyles for themselves and learn to care well for their babies and plan their own futures. This complements universal services provided by midwives and health visitors.

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<th>Issues for further discussion: evidence-based early intervention</th>
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<td>meant by evidence-based programmes, and what the standard</td>
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<td>for using them should be.</td>
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<td>o How best to support greater use of evidence-based interventions in children’s centres.</td>
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Children’s centres and early intervention

128. The Government wants to retain a vibrant network of high-quality children’s centres which work closely with health visitors and other professionals and are accessible to all families but focused on those in greatest need. Local authorities are required by law to ensure there are sufficient children’s centres to meet local need, so far as is reasonably practicable; and to consult on changes – this is about ensuring children’s centres maintain a physical presence in communities with clear management and governance arrangements, but also that a sufficient range of services is provided to address need among local families.

129. While it is right for local authorities to consider how children’s centre provision can be made more efficient, it is important that changes are planned in consultation with local communities, including other foundation years providers such as nurseries. DfE will consult on revised statutory guidance on children’s centres later this year. We want the statutory guidance to be less prescriptive and more focused on the core purpose of children’s centres and the outcomes they are seeking to achieve, enabling greater flexibility about how to deliver sufficient children’s centres while remaining focused on parent and community needs.

130. Children’s centres have a crucial role to offer early help to families with young children, particularly those in greatest need, as envisaged by Professor Eileen Munro. Their unique value lies in their ability to integrate universal and targeted services, working across a spectrum of need (including families with multiple problems and children who may not meet social care thresholds), so those services are greater than the sum of their parts. We should be ambitious about the role they play in collaborative working and in early intervention, and how they can use their resources more effectively to improve outcomes.

131. DfE has worked with children’s centre leaders to co-produce a jointly agreed discussion document, which:

- sets out the core purpose of children’s centres as being to improve outcomes for young children and their families with a particular focus on the most disadvantaged, so that children are equipped for life and ready for school, no matter what their background or family circumstances;
explains the approaches that successful children’s centres adopt in
delivering that core purpose; and,

sets out the principles that sector leaders have developed to underpin the
core purpose.

132. The core purpose is intended to move beyond the concept of a full core offer
which all children’s centres were required to deliver as the network was being
established. The concept of a full core offer played an important role in the early
stages but many in the sector have said it doesn’t necessarily leave room for
local innovation. Children’s centres are already starting to move beyond the
original core offer of services and the core purpose should enable greater
flexibility for local authorities and children’s centres to commission services based
on an assessment of local need.

Issues for further discussion: children’s centre core purpose

- Confirming the draft core purpose.
- Refining the description of the approaches that successful children’s centres
  adopt in delivering the core purpose.
- Developing and sharing a body of good practice on how the best children’s
  centres improve outcomes for the families with greatest needs.

133. It is important that children’s centres have robust systems in place to ensure
families are able to access early support before they reach the thresholds of
social care. The Health Visitor Implementation Plan sets out the role of the
“named health visitor” in children’s centres. To help build confidence in children’s
centres to manage risk and take appropriate child protection action where
necessary the Government also believes that children’s centres should have
access to a “named social worker”. DfE will work with children’s centre leaders,
local authorities and practitioners in the social care sector to articulate what this
role would look like in practice.

Issues for further discussion: named social workers

- Understanding what the most effective ways are in which social workers and
  children’s centres can work together.
- How far the idea of a “named social worker” would achieve this.
Family support

134. Mothers and fathers with young children are likely to feel under pressure at times for many different reasons. The transition to parenthood brings particular stresses for parents and whilst some will cope alone or together or with help from family, friends and the community some will need additional help.

135. The term ‘family support’ is used to encompass the range of services with the aim of strengthening families and promoting the wellbeing of children. Family support includes evidence-based parenting programmes, relationship support services and universal services. It is most often used to describe personalised help given to families who are experiencing a range of stresses, for example, unsuitable housing, stress or depression, difficulty with their children’s behaviour and strained relationships. Support can include practical help, signposting for information, advocacy, access to further information, or help to make decisions and changes. It can be informal or therapeutic, reactive when parents are struggling or anticipatory – preventing problems arising in the first place.

136. Family support is delivered by a range of agencies including children’s centres, health-visiting services and voluntary agencies. Workers need to be highly skilled and should receive regular, effective supervision. For families with highly complex issues, specialist family support programmes such as the Family Intervention Project and the Family Nurse Partnership programme are appropriate.

137. To support the development of strong practice in family support and outreach work the Government will identify an outreach system leader. They will work alongside the Children’s Centre Leaders Reference Group at a national level, to develop the evidence base for outreach and family support; build on previous work on job roles to develop greater professional identity; and consider whether there is a role for national standards for outreach. This will also support our focus on multi-agency working, helping to identify barriers and solutions to effective join-up between professionals, in particular health visitors.

Issues for further discussion: family support and outreach services

- Defining good practice in family support and outreach.
- Understanding what effective supervision for family support and outreach looks like.
o How the sector can continue to build confidence and professional identity for these roles.

o What sorts of training do outreach and family support practitioners need to give them appropriate skills for their work.

o How family support and outreach services can best engage with fathers as well as mothers and with other key carers – including those who do not live or live full time with the child.
Section six: Skilled professionals

Summary

A well-qualified and properly skilled workforce makes a real difference to the quality of support that expectant parents and families with young children receive. This workforce is diverse and includes midwives, health visitors and GPs, Sure Start children’s centre leaders, nursery and playgroup staff, childminders and teachers, as well as other professionals such as social workers, foster carers, family and young people support workers, speech and language therapists or special educational needs coordinators and community children’s nurses.

Working closely with our partners, employers and sector bodies, the Government will:

- review how best to strengthen qualifications and career pathways for workers supporting families in the foundation years. The aims of the review are to promote progression in the labour market and into higher level education and training;
- continue to invest in graduate-level training in early education, childcare and social care;
- make early years education professionals a central part of the remit of the new Teaching Agency; and,
- support the sector in developing system leadership, including through funding ten ‘Early Years Teaching Centres’, testing an extension of the specialist leader of education role for the foundation years, and reviewing the National Professional Qualification in Integrated Centre Leadership.

Why professionals matter

138. Whatever their specialism, practitioners in the foundation years have a common commitment to children’s healthy growth and development and working with their families. Making this goal a reality requires motivated, qualified, and confident leaders and professionals across health, early years and social care committed to working closely together in the interests of children and families.
139. Workers need to be highly skilled and should receive regular, effective supervision. While families must have the freedom to manage their own lives, it is critical that the workforce has the skills to offer evidence-based interventions, including parenting programmes, where appropriate. Disadvantaged and vulnerable families and families of disabled children and children with special educational needs in particular deserve well-qualified and trained workers to support them through their difficulties. Specialist family support and outreach staff should be graduate-led. Whether they are volunteers or professionals, their training should equip them to understand the principles of effective parenting so that this can underpin the way they work with all parents.

140. While there are significant differences in the training and regulation of different professional groups, and some of these are considered separately in this section, commissioners, employers and leaders all need to focus on succession planning, the diversity of their workforce and on workforce development, within the context of making work in the foundation years a career of choice.

141. Wherever appropriate, post-qualification training should be multidisciplinary and strengthen the shared knowledge base of professionals supporting children and families and promoting good communication and teamwork.

Health workforce

142. Health professionals are the universal first point of contact for families during pregnancy and the first years of life. Their training and experience means they understand how to work effectively with the whole family. They are ideally placed to identify, act on and provide support for problems as soon as they arise, drawing in, where necessary, support from other services. They are a wide-ranging workforce, including midwives, health visitors and GPs, specialists such as paediatricians and obstetricians and speech and language therapists and community children’s nurses to ensure that the needs of ill and disabled children are met. School nurses are also a vital element of the public health nursing and children’s service workforce; school nurses are responsible for the Healthy Child Programme for children aged five to nineteen and are an important health resource for older children and young people children and families. Health visitors focus on children from birth to five and their families, whilst school nurses work with and support school-aged children from reception onwards.
143. Health professionals have all undergone a period of initial clinical training comprising theory and practice to meet the standards of the relevant professional regulator to enter the specific profession, for example the Nursing and Midwifery Council for nurses and midwives including health visitors and school nurses. Once on the professional register and entitled to practice in the UK, health professionals are required to undertake continuous professional education to remain registered.

144. The future arrangements for the education and development of the healthcare workforce are set out in Liberating the NHS: developing the healthcare workforce. There is a consensus that high-quality education and training is critical for patient care. To achieve this, healthcare employers should have more accountability and responsibility for planning and developing their workforce. There should also be strong professional leadership working to clear national standards, as well as a more collaborative multi-professional and multidisciplinary approach to workforce planning. The Department of Health (DH) is now working with health and care partners toward the publication of detailed proposals in the autumn.

145. Education for the Healthy Child Programme is a key part of effective delivery and an e-learning course was launched earlier this year covering child development, behaviour and positive parenting. It was written by a multi-professional team, designed for all healthcare professionals working with pregnant women and families with young children. The e-learning programme is designed for health visitors to use with their teams and the wider early years workforce. DH and DfE are exploring ways to help them do this.
Early education and childcare workforce

146. High-quality pre-school programmes lead to stronger and more enduring effects on outcomes, especially for disadvantaged children, boys and children with special educational needs.\textsuperscript{32} Recent years have seen substantial improvement in the skills of the early education and childcare workforce, as Dame Clare Tickell recently acknowledged. More people working with young children have level three or graduate qualifications and Ofsted evidence points to increased quality. All who work in the sector have a role as teachers, in the sense that children’s learning and development are fostered by well-judged interventions and a focus on the pedagogy of child development.

147. In the consultation on reform of the Early Years Foundation Stage, the Government has made clear its view that teaching in the early years should be focused on improving children’s ‘school readiness’, guiding the development of children’s cognitive, behavioural, physical and emotional capabilities, so that children can take full advantage of the learning opportunities available to them in school.

148. The Government agrees with Dame Clare’s view that each area of learning and development must be delivered through planned, purposeful play and through both adult-led and child-initiated activity. There should be a fluid interchange between activities initiated by children, and activities led or guided by adults. In planning and guiding children’s activities, effective practitioners will be guided by the different ways that children learn. Three characteristics of effective teaching and learning are:

- playing and exploring – children investigate and experience things, and ‘have a go’;

- active learning – children keep on trying if they encounter difficulties, and enjoy achievements; and,

\textsuperscript{32} Siraj-Blatchford, I. et al. (2011), \textit{Performing against the odds: developmental trajectories of children in the EPPSE 3-16 study}, Department for Education, Research Report DFE-RR128
creating and thinking critically – children have and develop their own ideas, make links between ideas, and develop strategies for doing things.

Professionalisation

149. The quality of what commissioners and providers offer children and families depends on the quality and effectiveness of their staff. Strong evidence on the impact of higher-skilled staff shows the value to employers of recruiting and retaining high-calibre graduates capable of guiding curriculum delivery and wider leadership and management practice. DfE will support development in the early education and child care sectors by:

- funding the Early Years Professional Status (EYPS) and the New Leaders in Early Years programmes to encourage the very best graduates to sign up to be leaders in the early years sector – such programmes are highly valued by those who have taken part and by the sector more widely, helping to bring in different skills and boost the professionalism, status and confidence of graduate leaders in and those joining the sector;

- working with the sector to explore how we might encourage a greater involvement of business in the early years – for example through the sponsorship of graduate training and supporting efforts to raise the status of employment in the foundation years. The new EYPS tender document
is asking potential providers to consider alternative sources of funding or sponsorship;

- making early years workers a central part of the remit of the new workforce agency – the Teaching Agency – which will be operational from April 2012, supporting the Government’s drive for a better qualified early years workforce; and,

- establishing the National College as the new Leadership Agency, to have responsibility for the National Professional Qualification in Integrated Centre Leadership (NPQICL) and elements of system leadership, in order to effectively deploy the best leaders to drive service improvement.

Quality

150. Employers have primary responsibility for the quality and effectiveness of their staff. Employers have in the past said the number of qualifications is confusing and needs rationalising to ensure they are fit for purpose and that they support career development as well as workforce mobility. A lot of work in recent years, led by the Children’s Workforce Development Council (CWDC), has gone into simplifying, reforming and rationalising qualifications relevant to those working in the early education and childcare sector. A new Level 2 Certificate and Level 3 Diploma for the Children and Young People’s Workforce have been introduced. These sit alongside a sector-endorsed foundation degree, the EYPS programme and a number of early-years-related degrees.

151. Nevertheless, questions remain about the quality and breadth of qualifications. In order to support employers, and working closely with them, the Government will review how best to strengthen qualifications and career pathways in the foundation years, both for people new to the early education and childcare sector and for those already employed, promoting progression into the labour market and into higher level education and training routes. The Foundation Years Qualifications Review will in particular consider:

- the content of early years training courses, testing their strength and quality;
o how best to build on the work to date to develop qualifications to meet the needs of all learners. This includes young people undertaking full-time college courses and those who have worked in the early years for a long time who wish to evidence their expertise and progress along a structure of qualifications;

o how to ensure that new entry qualifications are of a high standard and meet the needs of employers, and offer sufficient scope for progression within the sector; and,

o options for helping newer qualifications acquire the equivalent status and currency of the National Nursery Examination Board (NNEB) qualification.

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<td>o Ensuring that qualifications fit with the needs of the workforce and employers, and support career pathways.</td>
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152. Early education and childcare practitioners should be respected as professionals for the part they play in improving outcomes for children. The Early Years Professional Status was introduced just five years ago. There is already growing evidence of the positive impact that EYPS can have on the skills, status and on-going professional development of early years practitioners33, and hence on young children’s learning. However, EYPS is not yet recognised as a professional equivalent to qualified teacher status. We have, therefore, asked the CWDC to commence a review of EYPS standards which will sit alongside the review of qualifications.

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<td>o How the standards help to spread leadership practice.</td>
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153. We also want to tackle, as we set out in our plans for Government, the gender imbalance in the sector and make early education and childcare a viable career choice for all. DfE is exploring with the sector how to promote careers in the foundation years, and how programmes such as the National Citizen Service and apprenticeships might give young men and women an insight into the sector.

33 CWDC (20110) First National Survey of Practitioners with EYPS
Issue for further discussion: promoting careers in the foundation years

- How to encourage men and other under represented groups to take up employment in the sector.

Leadership

154. Increasingly the sector will look to lead its own improvement, relying on strong leaders who can work together to bring challenge and support to drive improvement and innovation. Children's centre leaders, along with other leaders across the foundation years in nurseries and nursery schools, have a transformational role to play as system leaders, sharing expertise with others who work with families to secure consistently high-quality provision and better outcomes.

155. DfE is funding Pen Green Research Centre to set up a national network of 10 Early Years Teaching Centres from 2011 to 2013. The centres will work to raise standards and improve children’s outcomes across foundation years settings within each centre’s reach area. The centres will offer professional development to governors and early years educators and promote local learning networks and opportunities for leadership development. Evaluative research from these ten centres will be shared widely to plan next steps.

156. In *The Importance of Teaching: the Schools White Paper* the Government committed to developing a national network of Teaching Schools to lead the training and professional development of teachers and head teachers, and increase the number of National, Local and Specialist Leaders of Education – head teachers and middle leaders from excellent schools who commit to working to support other schools. Building on these developments the National College will establish a programme of work across the foundation years. This will include:

- a programme to designate and support, initially on a trial basis, a cadre of outstanding children’s centre leaders with the experience and capacity to lead outside their own centres drawing on learning from Early Years Teaching Centres. The existing children’s centre leader network will be used to deploy outstanding leaders to facilitate local support networks and events across a range of settings, to help drive improvement;
o testing an extension of the Specialist Leader of Education role for the foundation years. This will include making the most of the expertise of qualified teachers and early years professionals in children’s centres and maintained nursery schools and classes to support high quality early education across foundation years providers; and,

o building on an existing review of the NPQICL to ensure it continues to meet the needs of children’s centres and of other early years leaders, and learning from the review of the National Professional Qualification in Headship (NPQH) testing of whether a modular programme design will provide greater flexibility for leaders at a range of levels.

<table>
<thead>
<tr>
<th>Issues for further discussion: system leadership</th>
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<tr>
<td>o The most effective ways for leaders to collaborate and share best practice and bring about improvement locally.</td>
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<tr>
<td>o The support leaders in the foundation years need to develop self-sustaining improvement systems.</td>
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157. As increasing numbers of children’s centre leaders complete NPQICL, we are keen to ensure that all children’s centres benefit from highly-qualified leadership. Our expectation is that, over time, all existing, new and aspirant children’s centre leaders should undertake NPQICL (or an equivalent qualification such as NPQH). DfE will work closely with National College to consider how all children’s centres leaders can have access to the qualification in due course.
Section seven: A strong relationship with the sector

Summary

The Government will continue to work with the foundation years sector, so that professionals and commissioners can contribute at an early stage of the policy development process. This will mean:

- encouraging partnerships between health, social care and early years services, leading to stronger integrated working;
- clarifying how information-sharing in the foundation years can work better;
- a clear role for local authorities in securing early years provision and championing the needs of vulnerable children and families;
- promoting the development of an increasingly diverse sector with a strong role for private, voluntary, community and social enterprise organisations; and,
- greater clarity about how we measure outcomes in the early years, including through payment by results for Sure Start Children’s Centres.

158. As well as being informed by a range of national and international research, the development of Supporting Families in the Foundation Years has benefited from consultation with people from local authorities and the health service, private, voluntary and independent childcare providers, children’s centres and schools. This process of co-production signals a new approach by Government to working with the professionals and organisations which make up the foundation years sector. We want to continue to work in this way in the future, so that practitioners, leaders and commissioners can contribute at an early stage in the policy development and implementation process.

159. Government will work in partnership with the sector to promote innovation and collaborative ways of working. We believe that government should focus on setting the overall policy and statutory framework and standards within which
providers of services operate. There will be greater freedom for professionals, with less bureaucracy and more flexibility for local areas to design services to meet the needs of families and improve outcomes for children.

160. These developments take place in the context of wider public service reform, including planned reforms to the NHS and public health, set out in the White Papers ‘Equity and Excellence : Liberating the NHS’, and ‘Healthy Lives, Healthy People’. Following the recent listening exercise led by the NHS Future Forum, the Government has set out the ways in which it will build on the support expressed for the principles of the NHS changes and strengthen its proposals for putting those principles into practice, and has brought forward amendments to the Health Bill currently before Parliament. The Government is committed to listening and engaging on the detail of these proposals. Accordingly, the further work promised in this document will explore the implications of the NHS and public health reforms and the opportunities they offer.

**Integrated working**

161. We know that, in order to meet the needs of very young children and families, it is essential that there are strong working partnerships between health professionals, children’s centres, childminders, nurseries and schools. Children’s trust arrangements in local areas have been influential in bringing together local services and there are some excellent local examples of professionals working together to develop integrated services for families.

162. The creation of the Health and Wellbeing Boards proposed in the NHS and public health reforms will, in future, play an important part in ensuring that the health needs of all young children are being met. Subject to legislation they will bring together locally elected councillors with the key commissioners in an area, including representatives of clinical commissioning groups, directors of public health, children’s services, adult education services and adult social services, and a representative of local HealthWatch. Health and Wellbeing Boards will assess local needs (through the joint strategic needs assessment) and develop a shared strategy (in the form of a new joint health and wellbeing strategy) to address them, providing a strategic framework for commissioning local services, including children’s services. The Boards offer an opportunity to maximise the scope for integrating health and children’s services and for local government and
the NHS to drive improvements in the health and wellbeing of their local population.

163. *Healthy Lives, Healthy People: Update and Way Forward* published on 14 July 2011 responds to the messages from recent consultations, describes progress in developing the new public health system, and sets out issues where there will be further engagement over coming months on policy and implementation solutions. We shall make the links from this work to the co-production work on the foundation years.

**Sharing Information**

164. Effective and appropriate information-sharing underpins good integrated working and is important for promoting good outcomes for children and families, as well as protecting them from significant harm. It helps commissioners to design early intervention programmes that reach those families that need help the most.

165. Effective information-sharing between children’s centres and their health partners promotes a shared understanding of local assessment and referral procedures and helps with good decision making. Sharing birth and maternal data makes a real difference to local planning. There are many examples where health agencies, working alongside children’s centres, have developed ways of doing so with the informed consent of families. However, in some areas it has proved more difficult to reach agreement on information-sharing. This is a priority for helping to make local services more effective, particularly for vulnerable families. We will therefore work with partners to promote good practice and overcome barriers through all our networks.

**Issue for further discussion: sharing information**

- How to best promote the spread of good practice on information-sharing.
Local authority role

166. The role of the local authority is changing as reforms of the school system and health services come into effect. For families in the foundation years, there will be three core features of the local authority role:

- securing a range of high-quality early years provision for children and families from a diverse set of providers: local authorities will increasingly move to a more strategic commissioning role, working to stimulate a local market of private, voluntary and independent providers to secure high quality provision for all children and families, particularly the most disadvantaged, and to challenge services to improve;

- enabling families to make informed choices and exercise greater control over services: local authorities will set out the local offer of provision and publish data, to help families make choices about what is right for them and exercise greater control over the services that their family receives; and,

- strategic planning of services to meet local needs and champion the most vulnerable children and families: this means working with local partners through local children’s trust arrangements, including the voluntary and community sector and in future through the proposed Health and Wellbeing Boards, to ensure services offer choice and contribute to narrowing gaps in outcomes.
Voluntary and community sector role

167. The voluntary and community sector (VCS) has a strong track record in the foundation years, developing innovative services with strong engagement of children, families and communities. Nurseries, pre-schools and children's centres as well as family support and more specialist services are increasingly run by voluntary and community organisations. The voluntary sector has great potential to play a leading role in future and the Government is committed to enabling VCS organisations to participate actively in policy making and implementation. The Department for Education's strategic partner for the early years (the consortium of organisations led by 4Children) provides an important forum for such communication while the Department's £5million grant funding for VCS organisations supports quality and evidence-based practice.

168. Through the work of the Association of Chief Executives of Voluntary Sector Organisations (ACEVO) Early Years Taskforce, we have learnt more about some of the difficulties with current commissioning processes and the barriers to voluntary and community sector engagement. We will be working collaboratively with local authorities and VCS representatives to address these and find ways of encouraging greater involvement of voluntary and community organisations in providing childcare and in children's centres.

Private sector role

169. The private sector plays a significant role in the foundation years, particularly in the delivery of early education and childcare. Around 20,000 private sector providers participate in the free entitlement. The overwhelming majority of private day nurseries are small businesses – businesses operating just one or two settings make up 80 per cent of the market. Most of the 60,000 registered childminders across the country are self-employed. The flexible service that many private sector providers and childminders are able to offer means that they are well-placed to take advantage of new developments like the extension of free early education to disadvantaged two year-olds. There are many good examples where public and private sector providers have worked together to deliver improved services to families. The Government is keen to promote more partnerships of this sort.
Accountability

170. Assessment plays an important part in helping parents and practitioners understand children’s needs and plan activities to meet them. Early years providers are required to assess children’s progress on an on-going basis (and the new Early Years Foundation Stage will also introduce a progress review and report to parents at around age two). Reception class teachers assess children at the end of the school year in which they turn five, using the Early Years Foundation Stage Profile (EYFSP). The revised framework would require assessment against 17 goals, in place of the current 69. EYFSP data is and will continue to be collected by local authorities and published by central Government. DfE will use this as a measure of whether our policies are working.

171. Inspection plays a vital role in ensuring that quality standards are upheld and that young children are kept safe. We have, however, listened to those who have told us that the current arrangements for inspecting early years and childcare provision can distract practitioners from the core of their role of interacting with children. As we slim down the EYFS we will also consider a lighter-touch inspection framework, which reduces bureaucracy, is targeted on the weakest providers and allows the strongest practitioners to innovate and lead. Inspection will also continue to be an important part of the accountability framework for children’s centres, and Ofsted will consider options for future arrangements which fit better with the new vision and purpose for children’s centres.

172. At a national level progress in improving school readiness will be tracked through the EYFSP, the definition of the indicator is expected to be agreed in the autumn. We are also looking to develop a further outcome measure linked to the Healthy Child Programme review at age two to two-and-a-half. Progress on breaking cycles of intergenerational disadvantage and improving children’s life chances will also be tracked through the indicators set out in Chapter three of the Child Poverty Strategy.

Payment by results for children’s centres

173. We need to improve data and evidence of impact for children’s centres, so that clear outcome measures can be set. Payment by results can provide a way of rewarding local authorities and children’s centres for their contribution to
improving outcomes for children and families, particularly those in greatest need. Over the next two years, up to 30 local authorities will have the opportunity to trial children’s centre payment by results. The first nine trial areas have been selected and announced alongside this document. Further trial areas will be selected over the summer. The trials will generate an evidence base which will inform wider roll out of payment by results from 2013-14.

174. The Government recognises the challenges inherent in this type of work – whilst payment by results has a strong theoretical basis, it has not been widely used in children’s services to date. The Government is taking development forward in partnership with local authorities and the foundation years sector.

**Issues for further discussion: payment by results**

- Determining what measures of child development and school readiness might be suitable for payment by results, particularly for children’s centre providers.
- Finding ways to measure meaningfully the crucial early intervention and outreach role of children’s centres.

175. To support transparency, local authorities are now required to provide information about their expenditure on children’s centres, including information about the proportion of funding spent through voluntary and community sector providers; and the proportion spent on management costs. The Department for Education will publish information on planned local authority expenditure on children’s centres in 2011-12, early in autumn 2011. Local authorities may also wish to make local data available to families and communities. Together with payment by results this will serve to improve local accountability.

176. The Government will continue to support the evaluation of children’s centres in England being undertaken by the National Centre for Social Research, The University of Oxford and Frontier Economics. The evaluation will produce evidence about the benefits, impact and effectiveness of different models.

**Next steps**

177. The Government will maintain its commitment to working with the sector as we move forward. The co-production steering group, working groups and others, such as the Children’s Centre Leaders Network and the Health Visitor Stakeholder Forum, will continue to provide forums for the sector to be involved
in policy development and implementation. We will work with DfE’s strategic partner to build a more cohesive sector able to lead and improve itself. The strategic partner will work collaboratively with sector organisations and providers, supported by two way communication, to co-ordinate and signpost information, resources and support. This will include:

- a new online gateway to information, resources and specialist organisations: policy updates and information, regular insight surveys to identify trends and priorities for the sector;
- best and innovative practice sharing to support service improvement; and
- policy development and collaboration.

178. A timetable for implementation of the reforms set out in this document is at Annex B.
Annex A: Response to recent reviews

The Rt. Hon. Frank Field MP and Graham Allen MP published significant reports on poverty and life chances and on early intervention, and Dame Clare Tickell recently published a review of the Early Years Foundation Stage (the EYFS). The Government welcomed these reports at the time of publication. Supporting Families in the Foundation Years responds to those of their recommendations that deal partly or wholly with the foundation years and should be read alongside the revised draft EYFS, issued for consultation on 6 July, which is an important part of the Government’s response to the Tickell review. In addition, the Government response to Professor Eileen Munro’s report on the child protection system was published 13 July 2011.

The following table details the Field, Allen and Tickell recommendations relevant to this document. It should be read alongside the text of the full reports to which it refers.

<table>
<thead>
<tr>
<th>Issue</th>
<th>Recommendations</th>
<th>Response</th>
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<tr>
<td>Status of the early years</td>
<td>The Review recommends that government, national and local, should give greater prominence to the earliest years in life, from pregnancy to age five, adopting the term ‘Foundation Years’. (Frank Field, rec. 1)</td>
<td>The Government agrees with the analysis of the importance of the foundation years, and we have adopted this term for our publication.</td>
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<td>I recommend that the United Kingdom should adopt the concept of the foundation years from 0 to 5 (including pregnancy), and give it at least the same status and recognition as primary or secondary stages. Its prime objective should be to produce high levels of ‘school readiness’ for all children regardless of family income. (Graham Allen 1, rec. 7)</td>
<td>The Government is committed to increasing the proportion of children who are ‘school ready’ when they complete their foundation years. The revised draft Early Years Foundation Stage Framework (the EYFS) aims to make this a reality.</td>
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<td>I recommend that the Department of Health and the Department for Education should work together with other partners and interests to produce within 18 months a seamless Foundation Years Plan from pregnancy to 5 years of age, which should be widely understood and disseminated in order to make the 0–5 foundation years a reality. I recommend that this Plan is endorsed by Parliament. (Graham Allen 1, rec. 9)</td>
<td>Supporting Families in the Foundation Years is a joint publication between DfE and DH, recognising that, as Graham Allen says, coherent integrated services are essential.</td>
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<td>Funding</td>
<td>The Review recommends that the Government gradually moves funding to the early years, and that this funding is weighted toward the most disadvantaged children as we build the evidence base of effective programmes. The Fairness Premium, introduced in the 2010 Spending Review, should begin in pregnancy. (Frank Field, rec. 2)</td>
<td>The Government recognises the overwhelming case for investing in early intervention where it can improve the life chances of children and also ensure better value for public expenditure. Through the Spending Review, the Government has demonstrated its commitment to the foundation</td>
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**Increased funding should be targeted at those factors we know matter most in the early years:** high quality and consistent support for parents during pregnancy, and in the early years, support for better parenting; support for a good home learning environment; and, high quality childcare. (Frank Field, rec. 4)

I recommend that we should exploit the potential for massive savings in public expenditure through an Early Intervention approach. (Graham Allen 1, rec. 6)

I recommend an essential shift to a primary prevention which offers substantial social and financial benefits. (Graham Allen 1, rec. 4)

**Support for parents**

I recommend that, building on the anticipated cross-government consultation paper for a system of flexible parental leave which enables parents to take more of their entitlement, the Government should form a broad-based cross-party group to explore over the long term what is the appropriate level of maternity and paternity support for all parents and babies in light of international evidence and resources available. (Graham Allen 1, rec. 11)

I recommend that the success of Family Nurse Partnership should be taken further, with the aspiration that every vulnerable first-time young mother who meets the criteria and wants to join Family Nurse Partnership should be able to access it, and that discussions should take place with all relevant interests on how to ensure sustained local commissioning, leadership and finance. (Graham Allen 1, rec. 12)

Parental leave is an important part of ensuring that children are given the best start in life. A consultation on reforms to parental leave was launched in May 2011.

In view of the robust US evidence base for the FNP, and promising evaluation in England, the Government has committed to double by 2015 the number of places available on the programme nationally, from just over 6,000 to at least 13,000.

**Supporting practitioners to work with parents**

I recommend that the Government …ensures that all practitioners continue to have access to the necessary resources needed to support the incorporation of effective parental engagement into their practice. (Clare Tickell 2.20)

Children do better at school if their mothers and fathers are engaged with their development from birth. All settings should be able to help parents understand how they can support their child’s learning and development.

The revised draft EYFS guides practitioners’ engagement with parents, requiring on-going
### Parenting skills

| This Review recommends that [the Behavioural Insight Team] leads, along with key Departments, an examination of how parenting and nurturing skills can be promoted throughout society. (Frank Field, rec. 16) |
| The Department for Education should continue to publish and promote clear evidence on what is successful in encouraging parental engagement in their children’s learning. (Frank Field, rec. 19) |
| I recommend a new National Parenting Campaign as the Crown Jewel of the Big Society project... I recommend the creation of a broad-based alliance of interested groups, charities and foundations to ensure that the |

| Evidence shows that good quality parenting skills and high levels of engagement are essential to enable children to fulfil their potential. DfE asked the Institute of Education to review the evidence around practice that supports parental engagement in their children’s learning and their report will be published in September 2011. DfE will continue to collaborate with partners to make such evidence widely available. |
| A new programme of couple-focused antenatal |

The new ‘Foundation Years’ website, developed by 4Children, will provide advice and guidance for practitioners on working effectively with parents as partners in their child’s learning.

We will work with training providers and others, including awarding bodies, to ensure that relevant standards, where appropriate, cover practitioners’ competence in working with parents to support children’s learning.

We will Track and monitor progress on breaking cycles of intergenerational disadvantage and improving children’s life chances as set out in chapter three of the Child Poverty Strategy.

dialogue about children’s development, and also a new summary of their child’s progress at around age two (see below). The draft revised EYFS also requires providers to share information with parents about how the EYFS is being delivered in the setting their child attends. We will prepare and publicise a summary EYFS document, tailored for parents which will support this dialogue.
public, parents, health professionals and, especially, newly pregnant women are aware of the importance of developing social and emotional capability in the first years of life, and understand the best ways of encouraging good later outcomes for their children.  (Graham Allen 1, rec. 17)

support called Preparation for Birth and Beyond will help parents to understand child development in pregnancy and the first months of life. We also want more mothers and fathers to be able to access high-quality parenting programmes when they choose to do so.

We are working in partnership with two of our strategic partners, Barnardo’s and 4Children, to promote greater awareness of the importance of high quality parenting skills and building strong family relationships for children in the foundation years. Barnardo’s and 4Children are driving forward a sector-led parenting campaign, working with a range of organisations to raise awareness amongst professionals and parents.

### Early years inspection reform

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<td>Ofsted ratings for childcare and schools in disadvantaged areas compared with more affluent areas should be included as one of the Department for Education’s indicators in its Business Plan and government policy should aim to close the gap. Ofsted should continue to report on schools and childcare settings’ engagement with parents. (Frank Field, rec. 15)</td>
<td>The DfE’s business plan has indicators based on narrowing the gap in achievement at age five between children on free school meals and their peers; and between the lowest performing 20 per cent of children and their peers. This is because not all disadvantaged children live, or attend early education, in disadvantaged areas. Ofsted outsourced inspection of registered early years provision in September 2010. The training and capacity of early years inspectors is now the responsibility of the relevant contractors. The quality of training is a priority for Ofsted, and contractors have key performance indicators relating to the competence and training of inspectors, which are rigorously monitored by Ofsted.</td>
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<td>I recommend that Ofsted reviews the training, capacity and capability of the current early years outsourced inspectorate and existing guidance to inspectors. (Clare Tickell 5.20)</td>
<td>The DfE’s business plan has indicators based on narrowing the gap in achievement at age five between children on free school meals and their peers; and between the lowest performing 20 per cent of children and their peers. This is because not all disadvantaged children live, or attend early education, in disadvantaged areas. Ofsted outsourced inspection of registered early years provision in September 2010. The training and capacity of early years inspectors is now the responsibility of the relevant contractors. The quality of training is a priority for Ofsted, and contractors have key performance indicators relating to the competence and training of inspectors, which are rigorously monitored by Ofsted.</td>
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Additional Information/ guidance

Practitioners have told me how helpful they find the non-statutory guidance on ongoing, formative assessment, Development Matters, in...
tracking children’s learning and development from birth through to reception. I therefore recommend that this is retained but is reviewed and slimmed-down, and is aligned with my proposed new areas of learning. (Clare Tickell 3.40)

I recommend the development of a high-quality and interactive online version of the revised EYFS, with clear navigation to help people find what they are looking for. (Clare Tickell 2.18)

I recommend that Ofsted and local authorities work together to produce clear, consistent information for early years providers and communicate this effectively to all practitioners. (Clare Tickell 5.19)

I recommend that, as with Ofsted, local authorities avoid creating burdens for practitioners by asking them to collect unnecessary data and information, and to keep paperwork that is not required by the EYFS. Instead, they should find other ways of testing the strength of practitioners’ ability to support children’s development. (Clare Tickell 5.21)

We will be working with our strategic partner, 4Children, to ensure their interactive online website provides easily-navigable information for practitioners, and parents, relating to the EYFS.

Ofsted is committed to producing guidance that avoids the use of jargon, or technical language. Most of its short additional guidance on the Early Years Foundation Stage (which will be reviewed in light of the new EYFS) already holds the crystal mark.

Ofsted will continue to disseminate information through link inspectors for local authorities, and regular meetings with the Association of Directors of Children’s Services. When Ofsted develops its new inspection framework to inspect against a revised Early Years Foundation Stage it will consult with and disseminate its guidance to local authorities.

The draft revised Early Years Foundation Stage Framework seeks to reduce unnecessary paperwork by setting out requirements more clearly.

### Assessment in the foundation years

| Assessment in the foundation years | Existing local data should be made available to parents and used anonymously to enable the creation of Local Life Chances Indicators which can be compared with the national measure. In order to make this local data as useful as possible, information collected by health visitors during the age two health check, which this Review recommends should be mandatory, and information collected as part of the Early Years Foundation Stage (following the results of Dame Clare Tickell’s review) should be as similar as possible to the information used to create the national measure. In order to make this local data as useful as possible, information collected by health visitors during the age two health check, which this Review recommends should be mandatory, and information collected as part of the Early Years Foundation Stage (following the results of Dame Clare Tickell’s review) should be as similar as possible to the information used to create the |

In the child poverty strategy published in April 2011 we accepted Frank Field’s recommendation of an indicator of life chances or school readiness at a national level and that how this is defined would draw on the recommendations of Dame Clare Tickell’s Review. This was also reflected in the social mobility strategy published at the same time.
I recommend that all children should have regular assessment of their development from birth up to and including 5, focusing on social and emotional development, so that they can be put on the path to 'school readiness' which many – not least from low-income households – would benefit from. Accountability is confused and divided, policy is incomplete and there is an unnecessary separation between the Healthy Child Programme reviews and the Early Years Foundation Stage assessments. (Graham Allen 1, rec. 15)

We are proposing that the measure of school readiness can be based on the Early Years Foundation Stage Profile (EYFSP) – the statutory assessment of children's development which takes place at the end of the academic year in which the child turns five. We have proposed (for consultation) a revised EYFSP (to be implemented from September 2012) based on Dame Clare’s recommendations. The revised draft Framework slims down the EYFSP, requiring progress to be measured against 17 early learning goals, replacing the current 69. We will ensure, as far as possible, that we can assess changes in overall levels of 'school readiness' between the old and the new profiles.

We are also introducing a new requirement (in the revised draft EYFS) on all providers of early education to give parents a summary of their child’s progress when the child is aged between 24 and 36 months. This builds on the Tickell recommendations and will help ensure early identification of any development delay, or additional needs a child might have, and will inform support from providers, parents and other practitioners, to address those needs. Over time, as health visitor capacity increases, we will increase the coverage and quality of the Healthy Child Programme reviews in the foundation years. We are exploring the feasibility of a single integrated (early years and health) development review for children at around age two.

We are also looking to develop a further outcome measure linked to the Healthy Child Programme at age two to two-and-a-half.
| Evidence-based programmes and services | Local Authorities should ensure use of services which have a strong evidence base, and that new services are robustly evaluated. Central Government should make a long term commitment to enable and support the bringing together of evidence around interventions. (Frank Field, rec. 14)  
I recommend that future expansion of Early Intervention programmes should favour those which combine strong evidence bases with impact on crucial stages in the development of social and emotional bedrock in children, and that the present national network of children’s centres should use such approaches, including evidence-based evaluation systems, to identify and meet the needs of vulnerable children and families. (Graham Allen 1, rec. 13)  
I recommend that the 19 ‘top programmes’ identified in my report should be supported and expanded to demonstrate our commitment to Early Intervention. (Graham Allen 1, rec. 20)  
I recommend that a growing number of excellent well-regarded programmes should be assisted in joining the list as proven programmes able to help our children the most. (Graham Allen 1, rec. 21) | Evidence-based services and programmes are a crucial part of early intervention and of helping all children to develop the necessary social and emotional skills. We will evaluate existing programmes to identify promising practice.  
The Government is working with partners to establish a broad definition of evidence-based early intervention programmes. It is for local areas to decide which programmes suit the needs of their community and we want authorities to have the scope to use programmes which can be proven to be effective. We also recognise that any list of the most effective programmes will change over time so should be kept under review. |
| Foundation years workforce | The strategy should include a commitment that all disadvantaged children should have access to affordable full-time, graduate-led childcare from age two. (Frank Field, rec. 6)  
The Department for Education, in conjunction with Children’s Centres, should develop a model for professional development in early years settings, looking to increase graduate-led pre-school provision, which mirrors the model for schools. The Department should also continue to look for ways to encourage good teachers and early years professionals to teach in schools and work in Children’s Centres in deprived areas, through schemes such as Teach First and New Leaders in Early Years. (Frank Field, rec. 12)  
I recommend that we improve workforce capability of those working with | The Government is committed to extending the free entitlement to the most disadvantaged two year olds nationally from September 2013. Evidence shows us that early education has the biggest impact when it is high-quality, and that the quality of the workforce is the most important factor.  
The Government is continuing to fund both the New Leaders in Early Years and the Early Years Professional Status (EYPS) programmes.  
Children’s Workforce Development Council (CWDC) will continue to deliver the EYPS programme in 2011-12, and we anticipate that around 2000 new |
We will work with the workforce matters co-production group, and the wider sector, to understand how best to promote a minimum level three qualification, linking with EYFS requirements. We will also explore with the sector the possible role of the 0–5s. We should:

- increase graduate-led, or even postgraduate, pre-school leadership;
- ensure that all early years settings employ someone with Early Years Professional Status (EYPS) on site; and
- establish a Workforce Development strategy led by the Departments for Education and Health with input from across government, to ensure that we are developing for the future enough suitably qualified candidates who wish to work with the 0–5s.

In the interim, I recommend that all key professionals are made aware of the importance of building on the social and emotional capabilities of babies and children, and of promoting and supporting good parenting, through refocused training initially and then as an integral part of continuing professional development. I would like to see some refocused training and development work starting in 2011/12 with roll-out from 2012/13. (Graham Allen 1, rec. 16)

I recommend that the Government consider how the best-performing settings could help to support introduction of the known model of Teaching Schools to the early years. (Clare Tickell 5.8)

I recommend that the Government retain a focus on the need to upskill the workforce, to commit to promoting a minimum level 3 qualification and to maintain the ambitions for a graduate led sector (Clare Tickell 5.4)

I recommend that the Government review the content of early years training courses to test the strength and quality of these qualifications. (Clare Tickell 5.6)

I recommend that the Government build on existing work to draw together a progression structure for qualifications, linking these to leadership qualifications and identifying clear career pathways for practitioners. (Clare Tickell 5.12)

I recommend that the Government ensures that new entry qualifications are of a high standard and, once introduced, reviews whether they

EYPs will start their training in the next financial year.

We have allocated grant funding to Pen Green Research Centre to set up a national network of ten ‘Early Years Teaching Centres’ from 2011 to 2013, to raise standards and improve children's outcomes. We will work closely with Pen Green to ensure learning from these centres is shared widely.

Some primary schools with nurseries and nursery schools have already expressed an interest in the Teaching Schools pilot being developed by the National College – these applications are currently under consideration and we will be working with the College to look at how this can be developed for the early years. We will support the sector in developing system leadership, including through funding for ten ‘Early Years Teaching Centres’, which will test an extension of the specialist leader of education role for the foundation years, and reviewing the National Professional Qualification in Integrated Centre Leadership.

A new workforce agency – The Teaching Agency – will be operational from April 2012 and will have responsibility for early years workers including supporting the Government’s drive for a more highly qualified early years workforce and an increase in graduate leadership.

We will work with the workforce matters co-production group, and the wider sector, to understand how best to promote a minimum level three qualification, linking with EYFS requirements. We will also explore with the sector the possible role...
| **Sure Start Children’s Centres** | **Sure Start Children’s Centres should re-focus on their original purpose and identify, reach and provide targeted help to the most disadvantaged families. New Sure Start contracts should include conditions that reward Centres for reaching out effectively and improving the outcomes of the most disadvantaged children. (Frank Field, rec. 8)**  
I support the proposal in the Schools White Paper that the remit of the National College for Leadership of Schools and Children’s Services should be extended to provide training for children’s centre leaders, and recommend that this should include training on social and emotional development and evidence-based Early Intervention approaches. (Graham Allen 1, rec. 13) | **We are committed to refocusing children’s centres on their core purpose. DfE has launched a core purpose discussion document for comment.  
We will shortly be piloting a payment by results scheme for children’s centres, which will look at how we might reward improvements in the outcomes of disadvantaged children. The first nine areas to pilot payment by results have been announced alongside this document.  
We will work closely with the National College to** |
Local Authorities should open up the commissioning of Children’s Centres, or services within them, to service providers from all sectors to allow any sector, or combination of sectors, to bid for contracts. They should ensure services within Children’s Centres do not replicate existing provision from private, voluntary and independent groups but should signpost to those groups, or share Centres’ space. (Frank Field, rec. 9)

Local Authorities should aim to make Children’s Centres a hub of the local community. They should maintain some universal services so that Centres are welcoming, inclusive, socially mixed and non-stigmatising, but aim to target services towards those who can benefit from them most. They should look at how they could site birth registrations in Centres, provide naming ceremonies, child benefit forms and other benefit advice. Children’s Centres should ensure all new parents are encouraged to take advantage of a parenting course. Midwives and health visitors should work closely with Centres and ensure a consistency of service is provided, with continuity between the more medical pre birth services and increasingly educational post natal work. Children’s Centres should seek to include parents’ representation on their governance and decision making bodies. (Frank Field, rec. 10)

Consider how all children’s centre leaders can have access to the qualification in due course.

We are developing proposals to open up the commissioning of children’s centres. The Localism Bill will enable organisations and communities to challenge local authorities to put delivery out to tender and we are exploring other options for bringing in more private and voluntary providers, including employee mutuals.

We want more organisations with a track record of working with families – including those in greatest need – to run children’s centres and deliver services through children’s centres.

We want to increase opportunities for parents and local communities to influence the services they receive. Working with partners and stakeholders, we will explore a range of governance options in children’s centres, including the role of advisory boards, to see what approaches could best encourage this.

I recommend the establishment of an independent Early Intervention Foundation to support local people, communities and agencies, with initial emphasis on the 15 Early Intervention Places. (Graham Allen 1, rec.24)

Government continues to support the joint working between the local Early Intervention Places and Community Budget areas which has arisen since the first Report. I further recommend that central and local government players agree how existing Community Budget areas should focus on Early Intervention alongside their work on families with multiple problems as soon as possible. The 27 Early Intervention Places that are not yet Community Budget areas should become part of this work at the earliest opportunity, and all Community Budget areas should be

The Government has welcomed Graham Allen’s call for an independent foundation to champion early intervention and challenge public service providers and Government. Such a foundation has an important role to play. We welcome this proposal as a way of engaging the key partners in this agenda.

Supporting Families in the Foundation Years sets out an ambition that this work should closely link with Community Budgets focused on Families with Multiple Problems, to encourage local authorities to work not only with the most challenging families, but
encouraged to focus on Early Intervention as a priority. (Graham Allen 2, rec. 7).

I recommend that ministers take a positive leader role on the independent early Intervention Foundation in encouraging local areas and philanthropic and private investors to continue their exploration of setting up a Foundation to complement, from the outside, the work that is beginning inside Whitehall. (Graham Allen 2, rec. 8)

I recommend once the business case is fully worked up, the creation of a £20million endowment to sustain an independent Early Intervention Foundation and that the Prime Minister issues a cold challenge to external funders from the private, charitable and local government sectors that if they create an Early Intervention Foundation to drive progress, government will support them with co-funding. (Graham Allen 2, rec. 9).

also to support families earlier to reduce the numbers of families reaching that crisis point. This links closely to Professor Munro’s vision.
Annex B: Timetable to implementation

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<tr>
<td><strong>Sure Start</strong></td>
<td><strong>Payment by results trials</strong></td>
<td><strong>Extra 4,200 health visitors and expansion of Family Nurse Programme by 2015</strong></td>
<td><strong>Healthwatch England established</strong></td>
<td><strong>Public Health England established</strong></td>
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<td><strong>Health</strong></td>
<td><strong>Health visiting taskforce launched</strong></td>
<td><strong>Development and testing of integrated review begins</strong></td>
<td><strong>New EYFS requirements in place</strong></td>
<td><strong>2yr old progress summaries in place</strong></td>
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<td><strong>Early Education and Childcare</strong></td>
<td><strong>Code of Practice consultation</strong></td>
<td><strong>New EYFS in place</strong></td>
<td><strong>New Code of Practice in place</strong></td>
<td><strong>2yr old entitlement begins</strong></td>
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<td><strong>Special Educational Needs</strong></td>
<td><strong>SEN Green Paper pilots</strong></td>
<td><strong>Review of EYPS standards</strong></td>
<td><strong>National Standards for Children’s Centre Leaders and NPQICL review</strong></td>
<td><strong>New EYPS standards implemented</strong></td>
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<td><strong>Workforce</strong></td>
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<td><strong>Qualifications Review</strong></td>
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* Subject to legislation