

## Open Report on behalf of Heather Sandy, Executive Director - Children's Services

Report to: Children and Young People Scrutiny Committee

Date: **02 December 2022** 

Subject: Covid Impact and Response to Early Childhood Developmental

Outcomes

## **Summary:**

This report provides an update on the impact of the pandemic on young children's learning and development and identifies the current communication and language development and social skills in young children.

The report also provides progress data to help benchmark where we are in Lincolnshire compared to regional and national statistics.

The report details the approaches being used by the Early Years and Health Visiting services to support improved outcomes for children in Lincolnshire. It is recommended that the Committee supports these approaches.

### **Actions Required:**

The Children and Young People Scrutiny Committee is asked to

- 1. review the content of the report.
- 2. support the approaches being used by the Early Years and Health Visiting services to support improved outcomes for children in Lincolnshire.

### 1. Background

### Impact of Covid and Restrictions on Quality and Outcomes

Education recovery in early years providers: spring 2022 - GOV.UK (www.gov.uk)

This Ofsted briefing, within the link above, draws on inspection evidence gathered in the spring 2022 term and discussions with early years inspectors about the ongoing implications of the pandemic on children.

The pandemic has continued to affect children's communication and language development, and many providers noticed delays in their speech and language progress. Providers are making more referrals for external help than before the pandemic and are waiting longer for this specialist help. To compensate, providers were making sure that children were learning in an environment rich with language, with a focus on extending vocabulary and practising speech.

The negative impact on children's personal, social, and emotional development has also continued, with many children lacking confidence in group activities. Some older children, who would not normally have been upset when being dropped off by their parents, were still unsettled after a period of attending settings regularly. Consequently, providers were focusing on helping children to express how they feel and had made more opportunities for children to socialise in larger groups as restrictions lifted.

Staff shortages were affecting the quality of teaching and implementation of catch-up strategies. Having fewer staff on site could also result in behaviour management issues. In most providers, managers have had to step in to cover staff shortages. Newly qualified staff have had less work experience and so have more limited knowledge and skills.

Historical research through The Effective Provision of Preschool Project (EPPE) 2004 identified that the observed quality of pre-school centres is related to better intellectual/cognitive and social/behavioural development in children and that disadvantaged children and boys in particular can benefit significantly from good quality preschool experiences.

## **Early Years Foundation Stage Profile Outcomes**

The Early Years Foundation Stage Profile (EYFSP) summarises and describes children's attainment at the end of the EYFS (at the end of the child's reception year in school). It is based on ongoing observation and assessment in the three prime and four specific areas of learning and the three learning characteristics.

A completed EYFS Profile consists of the attainment of each child assessed in relation to the 17 Early Learning Goals (ELG) descriptors together with a short narrative describing the child's three learning characteristics. For each ELG, practitioners must judge whether a child is meeting the development expected at the end of the reception year (expected) or not yet reaching this level (emerging).

In addition, the EYFS Profile provides an accurate national data set relating to levels of children's development at the end of the EYFS. The Department for Education (DfE) uses this to monitor changes in levels of children's development and the readiness for the next phase in their education both nationally and locally. Children with a Good Level of Development (GLD) are those achieving at least the expected level in all the following areas of learning: communication and language; physical development; personal, social and emotional development; literacy; and mathematics – the first 12 Goals.

All areas of learning within the EYFS are important and to reflect this, the GLD measure is supported by a measure of the average of the cohort's total point score across all the ELGs. This ensures that the attainment of all children across all ELGs is captured.

Early years foundation stage profile handbook 2022 (publishing.service.gov.uk)

## **Health Visiting Service**

Source: Gov.uk: Guidance Health Visiting and School Nursing Service Delivery Model<sup>1</sup>

# National context and background

Covid-19 restrictions have impacted provision of 0 to 19 services, including the need for virtual contacts or pausing of some services. Developmental delays, issues relating to perinatal mental health, safeguarding concerns or detection of any early warning signs of vulnerability may require stronger risk management processes and case load assessment to prioritise those families with higher needs. It is recommended that commissioners and providers consider development of a recovery plan in partnership with other agencies to support multi-agency support, monitoring, and evaluation. Recovery planning should consider vulnerability in prioritisation, including:

- children and young people who may be at high risk for clinical reasons
- those with formal or legal support in place
- those at higher risk due to wider determinants of health and other factors that can lead to poor outcomes

# **Workforce**

The Health Visitor (HV) shortage and recruitment challenge is a national issue and there is growing evidence that in some parts of the UK some new parents have very little or no contact with a Health Visitor.<sup>2</sup> This is not the case in Lincolnshire, but we are also facing increasing challenges around recruitment.

Health Visiting workforce @ 13/10/22

	Funded	In post	Vacancies	% Vacancy	
	posts	FTE*	FTE	rate	
HV FTE	101.00	84	17	16.83%	
FHW**	29.1	27.83	1.27	4.36%	

<sup>\*</sup> Full Time Equivalent

<sup>\*\*</sup> Family Health Worker

<sup>&</sup>lt;sup>1</sup>https://www.gov.uk/government/publications/commissioning-of-public-health-services-for-children/health-visiting-and-school-nursing-service-delivery-model

<sup>&</sup>lt;sup>2</sup>https://inews.co.uk/news/health/health-visitor-shortage-vulnerable-uk-postcode-lottery-specialists-rising-demand-1484655

# **Workload Pressures**

The impact of increased health need and demand for support has compounded existing workforce pressures.

There are currently 43,00 children under the age of six registered with the Health Visiting Service; approximately 35,000 are under five and entitled to receive the five mandated contacts set out in the Healthy Child Programme. In any year, approximately 8,000 children receive one of these contacts

- Antenatal from 28 weeks
- Primary birth (new baby) 10-14 days
- 6–8-week review
- 8–12-month review
- 24-36 months review

In addition to this, based on the assessment and identification of need a child/family may be in receipt of an 'individual need offer.' The impact of the Covid pandemic has resulted in a significant increase in demand for advice and support, notably around parental mental health, parental conflict and stress, growth, speech and language and behaviour concerns.

These reflect the delivery of evidence-based pathway and care programmes and involve an average of six additional contacts. Other contacts related to safeguarding also take place at case conference and core groups. Data tells us that the average number of individual contacts with families by the Health Visiting Service in any one 12-month period is around 70,000.

During the pandemic, the service worked to Government guidance on prioritisation of community services<sup>3</sup>, (updated June 2020) essentially 'pause and continue' guidance that, as above, required the service to stratify caseloads and prioritise for contact. The service did deliver over and above the minimum guidelines to ensure that all children assessed as vulnerable received their mandated reviews/contacts and this continues to be the case. The most recent guidance<sup>4</sup> indicates that services should now 'continue or continue with prioritised waiting lists'. There is no expectation that pre-pandemic levels of service will be fully restored at this stage, but services are expected to have a recovery plan that ensures our most vulnerable children and families are prioritised, which Lincolnshire has in place and is monitored monthly.

<sup>&</sup>lt;sup>3</sup>https://www.england.nhs.uk/coronavirus/documents/c0552-restoration-of-community-health-services-guidance-cyp-with-note-31-july/#Covid restoration

<sup>&</sup>lt;sup>4</sup>Coronavirus » Community health services prioritisation framework (england.nhs.uk)

# Did not attend (DNA)

The service has also been impacted by the number of parents/carers who do not attend appointments despite the introduction of text reminders shortly before the appointment date. Some parents do call to cancel/re-arrange but this is often quite late which means it is not always possible to fill the appointment slot. A sample of data taken in June 2022 showed that 246.25 hours were 'lost', equivalent to 6.65 FTE staff, due to non-attendance at appointments. This is compounded by having to re-book so in effect doubling up on each lost contact. The service is currently looking at ways to address this.

#### 2. Conclusion

# **Acronyms for Early Learning Goals:**

**COM – Communication and Language** 

LAU - Listening, Attention and Understanding

Spe – Speaking

**PSE – Personal, Social and Emotional** 

SR – Self Regulation

MS – Managing Self

**BR** - Building Relationships

**PHY - Physical** 

GMS - Gross Motor Skills

FMS – Fine Motor Skills

Lit - Literacy

Com – Comprehension

WRe – Word Reading

Wri - Writing

MAT – Mathematics

Num – Number

NP – Numerical Patterns

## Analysis of 2022 unvalidated data

a. There was a national drop in outcomes for the EYFS Profile Good Level of Development (GLD). The national average is 65.2%; Lincolnshire is 64.2%. Whilst Lincolnshire sits below National, this year's data shows that the gap has narrowed.

			2022
	2019	2022	V
GLD	Validated	NCER	2019
National	71.80%	65.20%	-6.6%
East Midlands	70.30%	64.60%	-5.7%
Lincolnshire	69.60%	64.20%	-5.5%

2022 % ACHIEVED EXPECTED	СОМ				
2022 % ACHIEVED EXPECTED	LAU Spe				
NCER National	82.1%	82.5%			
DfE Region - East Midlands	82.0%	82.5%			
Lincolnshire	82.5%	83.3%			

b. The first 12 goals under the five areas of learning come under the GLD. There is a key interest in Communication and Language, and Personal, Social and Emotional Development. Lincolnshire's gap areas include Self-Regulation, Writing and Numeracy.

2022 %	CO	M		PSE		PH	ΙΥ		LIT		M	AT
ACHIEVED EXPECTED	LAU	Spe	SR	MS	BR	GMS	FMS	Com	WRe	Wri	Num	NP
National	82.1	82.5	85.1	87.0	88.5	92.1	85.8	80.3	74.7	69.5	77.8	77.2
Regional	82.0	82.5	85.0	86.9	88.6	91.9	85.8	79.6	73.9	68.7	77.2	76.5
Lincs	82.5	83.3	85.0	87.2	88.7	92.9	86.8	80.5	74.8	68.3	77.6	75.8

Lincolnshire outcomes are above National and Regional in most goals, particularly the prime areas of learning and the goals linked to reading. Lincolnshire is below National in the following goals: Self-Regulation, Writing and both Mathematical goals.

# Improving educational outcomes for children

Early Years and Child Care (EYCC) colleagues are working closely with the Teaching School Hub to share data and research so that bespoke support can be offered to reception classes in schools focussing on key areas such as early language and skills. EYCC is also working with the regional Maths Hub who will be providing advice and guidance at upcoming transition networks with schools and Early Years settings on improving children's outcomes in maths. EYCC is also working closely with the DfE and local providers on the Stronger Practice Programmes outlined below. Data is shared and analysed with the locality Early Years teams in the Autumn term so they can focus on the needs of their own areas. EYCC is now part of the group looking at the Social, Emotional and Mental Health (SEMH) Strategy so the dip in outcomes for Lincolnshire's Self-Regulation outcomes will be shared with that team.

#### **Early Years Entitlements**

Evidence shows that attending high quality early education has a lasting impact on social and behavioural outcomes of young children. The Government funded Early Years Entitlements for 2-, 3- and 4-year-olds to make childcare more accessible and affordable for families and enables them to access training, work or increase their working hours if they choose.

Take-up of the Early Years Entitlements continues to improve following the pandemic. There is a reduction in the number of families eligible for the 2-year-old entitlement nationally, however the number of children accessing provision continues to be maintained in Lincolnshire, showing a steady growth in attendance. The 3- and 4-year-old numbers are increasing within the county and compares favourably to the national average.

#### 2-Year-Old Entitlement

Term	Number of Children Accessing Two Year Old Hours	Number of Children Eligible (DWP data)	% Of Children Accessing
Summer 2021	1,755	2,339	75%
Summer 2022	1,746	2,161	81%
Comparison	-9	-178	+6%

#### 3- & 4-Year-Old Entitlement

Term	Number of Children Accessing Three & Four Year Old Hours	Number of Children Accessing Extended Hours	% Of Children Accessing Extended Hours	
Summer 2021	11,447	5,492	47.98%	
Summer 2022	11,155	5,638	50.54%	
Comparison	+292 (+2.6%)	+146 (+2.6%)	+5.3%	

## **Outreach and improving attendance**

There is a national strategy, Changing Lives Through Childcare, for increasing access to childcare and ensuring this is affordable for families. We know the benefits of childcare and the importance of early intervention. A suite of marketing materials and information is being disseminated throughout Lincolnshire to inform families of the Government offers available to support them to access childcare. An outreach programme is being delivered to engage with professionals to ensure parents are encouraged to access childcare provision as early as possible. The early years and childcare service is reviewing the patterns of children's attendance in Early Years Education (EYE) funded education places. This will be compared to previous data to identify if this has an impact on children's learning and any subsequent attendance in school. This will be monitored and reported following audits with childcare providers and additional support will be given where less hours are being consistently accessed by children in early years provision, to encourage this further.

### **Children's Centres**

Registrations are at 100%. Attendance at Lincolnshire Children's Centres has significantly increased since Covid restrictions were removed. Quarter 1 attendance this year is 62.72% which is an increase of 9.62% compared to this time last year. Our commissioned Early Years provider continues to offer pre-Covid delivery with sessions proving popular to families. Families are being encouraged to drop into centres to utilise resources and access the support available.

#### **Immunisations**

Lincolnshire childhood immunisations at two years and preschool currently fall below the 95% required for herd immunity.

## **Early Years Education Recovery and Stronger Practice Programmes**

The Government has announced a package of measures to support children's educational recovery in the early years:

# <u>Early-Years-Education-Recovery-Programme-Fact-Sheet.pdf</u> (foundationyears.org.uk)

- We know that the earliest years are the most crucial stage of child development, that early education supports children's social and emotional development, and lays the foundation for lifelong learning.
- The Covid-19 pandemic has exacerbated the outcomes gap and set back children's learning and development particularly in language and maths and impacted those from disadvantaged backgrounds hardest.
- Improving training for early years practitioners is one of the key levers for driving up quality in early education settings.

The Early Years Education Recovery Programme includes a Stronger Practice Programme, comprising three elements:

- Universally accessible online training to upskill practitioners and improve their knowledge of child development, so they are better able to support the development of children in their care. (NB: once published this will be universally available on the Help for Early Years Providers website <u>Help for early years</u> providers - Department for Education)
- 2. Experts and Mentors Programme of Sector Led Support: For those settings in need of most support, access to mentoring support for early years practitioners to help strengthen children's learning and development, along with bespoke whole-setting and leadership support, again targeted at settings most in need. Lincolnshire was able to identify 15 Early Years settings including school based Early Years and share this with the programme delivery lead Penn Green. Lincolnshire EYCC is working in close collaboration with the Area Lead for Lincolnshire (Amy Stancer St Giles) to share practice and ensure the programme complements current support provided by Lincolnshire County Council and builds the quality through sector led opportunities.
- 3. Early Years Stronger Practice Hubs: Early Years innovation programme to provide opportunities for settings to explore innovative practice, help grow the evidence-base and facilitate cross-sector sharing. On 11 August, the DfE Programme partner NCB hosted a Webinar for Local Authorities which confirmed that the purpose of the hubs is to provide advice, share good practice and offer evidence based professional development for Early Years Practitioners. There will be 18 hubs across the country approximately two hubs per regional area.

# Restoration of the Healthy Child Programme (HCP) Mandated Contacts

# **Operations**

- The Health Visiting Service has a recovery and restoration plan in place which is subject to monthly review. This includes a mutual aid plan to support areas where vacancies are highest (currently Lincoln and West Lindsey), or maternity leave and sickness and absence is impacting. The travel time involved for colleagues in the other localities can be significant therefore contacts are triaged with some delivered virtually.
- Use of relief/bank health visitors we have a small number of part-time Health Visitors employed on a relief basis currently supporting the service where need is greatest.
- The Children's Health Single Point of Access (SPA) is operational Monday-Friday, 9am-5pm and is accessible on one telephone number by parents and professionals who can request contact or telephone advice from a Health Visitor. It is supported by a central duty team of Health Visitors who triage all calls for urgency with a 24-hour maximum wait for a call back guaranteed.

#### Workforce development

# Expansion of the Family Health Worker (FHW) role

- FHWs support delivery of the HCP. They hold an appropriate qualification e.g., Diploma in Childcare and Education or NNEB BTEC Diploma in Early Years Care and education/NVQ Level 3 or equivalent in a relevant field and have the skills to assess children's development and refer to other professionals when necessary. Following a successful pilot programme, all FHWs have been trained and competency assessed to deliver the 'universal' i.e.,' 'non-priority' caseload of children due an 8–12-month review. FHWs work under the supervision of a Health Visitor who is responsible for reviewing the child's records prior to delegating the contact.
- The utilisation of skill-mix in this way is not new or innovative; skill-mix ratio of HV-skill-mix in Lincolnshire is low in comparison to other areas. The high number of historical health visitor vacancies presented an opportunity to convert vacancies to create 10 additional FHWs. These are now in post and by the end of September will have completed their training and competency assessments which will allow the service to fully restore delivery of the 8–12-month review.
- The service is reviewing other skill-mix opportunities e.g., further increasing the FHW roles and introducing a Children's Registered Nurse role as well as looking to the wider Early Years workforce as part of the Family Hub development.

## Action in response to DNA

 Although the introduction of text reminders has reduced the number of parents failing to attend, the DNA rate remains high. The service is currently reviewing the appointment process to see if it can be improved e.g. contacting parents in person but in view of the number of appointments sent each month, this would require significant business support hours. However, the service is reviewing if this is feasible in the areas where the rates of non-attendance are higher. We are not at the stage where online booking is possible but other options such as overbooking clinics particularly in the areas where the DNA rates are highest is under consideration.

## **Family Hubs and Start for Life Programme**

Lincolnshire have been selected as one of 75 Local Authorities to benefit from the Government's Family Hub Programme. Family Hubs were championed in the Government's 2019 manifesto, and the Programme is hosted by the Department for Education (DfE) and Department for Health and Social Care (DHSC).

The Programme stems from clear evidence that identifying risks early and preventing problems from escalating means better long-term outcomes for children and their families. It aims to address this by providing a focus on the first 1001 days in a child's life; as well as ensuring all families can access universal services and advice and guidance in a welcoming local 'hub'.

#### 3. Consultation

## a) Risks and Impact Analysis

The Local Authority recognises the impact that the pandemic has had on the development of young children. The Early Years and Childcare Support Service and Health Visitor Service will continue to offer support and recovery programmes to the sector, families and children.

# 4. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

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