

## Sure Start children's centre summary self-evaluation form for a centre or group of centres

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### **Section A. Self-evaluation**

#### **Introduction**

This self-evaluation form is linked to the judgements that Ofsted will make at inspection. Its purpose is to:

- help you in your own self-evaluation
- be used as a basis for the inspection of your children's centre/s.

You do not need to complete this form if you have a different way of recording the self-evaluation for your children's centre/s. We will consider any evidence of self-evaluation that you wish us to consider.

Where a centre is part of a group of centres that share leadership and management and integrated services, and is recorded as such for inspection purposes on the Surestart-on database, you should consider only having one SEF for the group.

You should refer closely to the grade descriptors in the evaluation schedule when deciding on a grade; briefly listing your major reasons for deciding on this grade. You should include only the minimum amount of detail in support of your judgement; bullet points are quite acceptable. You do not need to include any detailed analysis or evidence.

Each question in this self-evaluation form starts by asking centres to grade aspects of their work on a four-point scale:

- Grade 1: outstanding
- Grade 2: good
- Grade 3: requires improvement
- Grade 4: inadequate.

<b>Access to services by young children and families</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Grade:		X		

Briefly list your main reasons for deciding on this grade for the centre or group of centres. Include the strengths of individual centres within a group and key areas for development. (Boxes will expand.)

**We know where most families living in the reach area are as a result of good partnership working.**

As of 1<sup>st</sup> April 2015:

- There are c1882 children under 5 in our cluster reach area (according to local authority data)
- We currently have the **very large majority of all children in the cluster - 84%** (1577 children) **registered**.
- Our registration target for 2015-16 is 90%.

Overall access to services:

- The **very large majority**, 82% (1537 children), **of all children have accessed the centre and/or early years services** in the past year (1/4/2014-31/03/2015).
- The **large majority** (70%) of these children have a **have accessed the centre and/or early years services three times or more** in the past year (1/4/2014-31/03/2015).
- We have met our overall reach target for 2015-15 set by the advisory board and LA which was for the majority of all children in our reach to be accessing children's centre services, with a specific focus on ensuring the large majority of children from our target groups access until their needs are met.
- We do not record access to all universal health services (midwifery and health visitor clinics) across the reach area unless they are co-delivered.

Our cluster wide targets have been agreed and set with partner agencies based on a thorough needs analysis and via advisory boards, and partnership planning meetings using profile data, centre Estart data and other local knowledge. – [see profile data analysis](#)

We have used these tools to identify our **target groups** and **target geographical areas for 2015-16:**

- Specific LSOA where there are **pockets of deprivation**, which have been identified by the staff and advisory board.

**Registration – most children living in the target area are registered**

LSOA & Level of Deprivation	Registration 1 <sup>st</sup> April 2015 % (no of children)
E01019927 (29 %)	83% (69) An increase of 5% since September 2014

74% of the children living in this target LSOA aged 0-3 during the period 1/4/14-31/3/15 accessed services.

### **2 year old children eligible for free early education**

In Spring term 2015 the large majority (78%) of eligible children took up their 2 year old funding in Honiton and Axe Valley (71%). Both centres have above-average take up for Devon.

Each term we contact all families identified as being eligible by the local authority and offer support for applications and to identify local placements for the children.

### **Children in greatest need – the large majority are accessing**

December 2014 figures from DCC evaluation team	Registered – 81%	Accessing – 73.3%
August 2014 figures from Health Visitors	Registered – 100%	Accessing – 90%

- We are being invited to all initial case conferences. Between April 2014 and March 2015 we attended 16 initial case conferences. 13 of these went on to engage in family support with the centre. One moved out of area and was referred to their local children’s centre by our team, one did not move forward into the child protection arena and attends an early years setting regularly and one moved out of county prior to the birth of their child.
- The greatest need data is reviewed and updated six monthly on Estart by the research and evaluation team at Devon County Council.

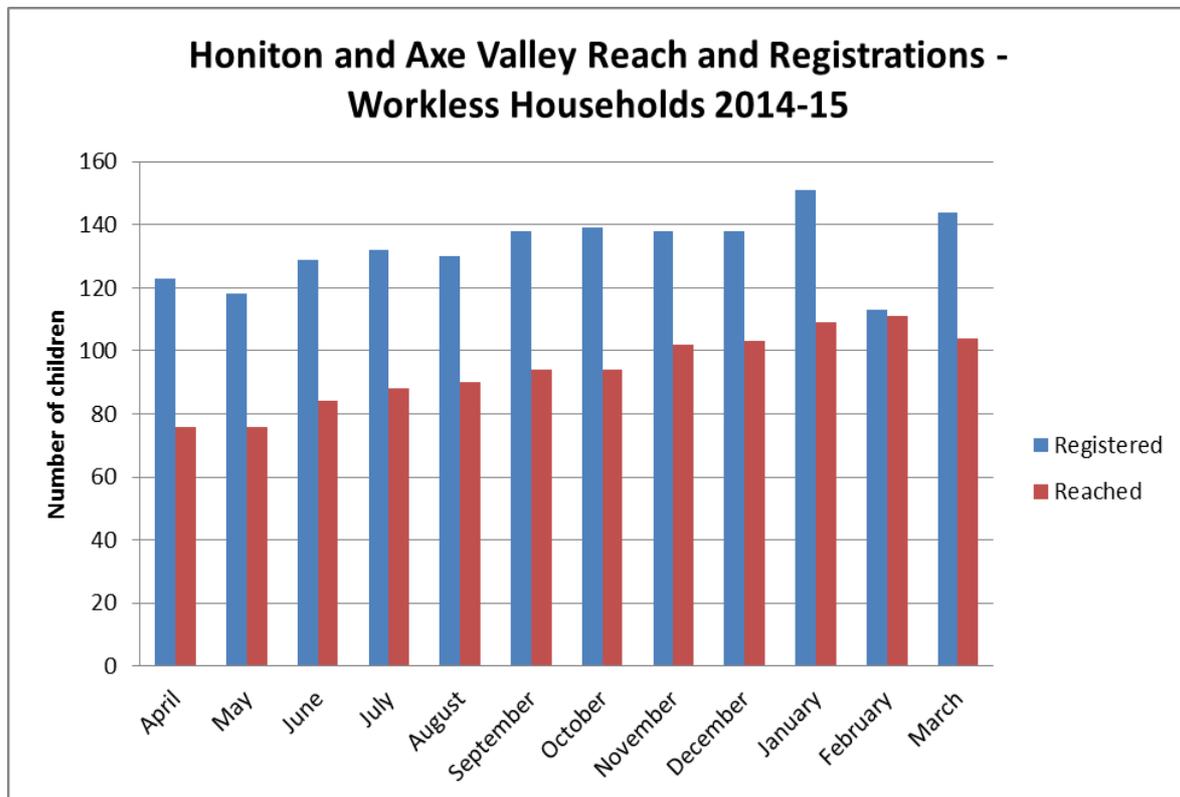
### **Families who have experienced Domestic Abuse (target group for 2014-15)**

- We know that we will not attain an accurate baseline for DV however, we now receive MARAC referrals (since June 2014).
- Between June 2014 and March 2015 we have received 17 MARACs (one of which was a second MARAC for the same family). Of these 16 families 13 are registered with the centre and seven engaged with family support and/or counselling services. One unregistered parent has subsequently moved out of area and we were engaged with the child protection case conference for this

family prior to their move.

- 10 parents attended the Pattern Changing course held at the Children’s Centre in the Autumn term 2014, of these four were parents who were directly referred by the centre and accessed the crèche service available

**Families in workless households (target group for 2014-15)**



There is an anomaly in the February registrations which we is a report run on a specific date. As the reach figures remain consistent with previous months we would assume the number registered also followed the same trend. Reach and registration of this target group showed an upward trend throughout the year.

**Three and four year old access to early education is Good**

- In Autumn 2014 98% (216 children) of 3 and 4 year olds funded childcare places in Axe Valley. 177 4 year olds were in school reception classes. In Honiton, these rate was 96% (186 children). 179 4 year olds were in school reception classes.

– see 3-4 year old take up reports

In our last inspection it was identified that we needed to:

- Reach children who live in areas of least advantage
- Improve partnership working with social care colleagues
- Increase attendance rates for all families

We use:

- A tracking tool to monitor reach and registrations of all children with a focus on target groups - [see data monitoring sheets](#)
- A contact system for new vulnerable registrations to engage families in centre services and monitor their subsequent engagement - [see new registrations monitoring sheet](#)
- The development of social networking alongside more traditional methods of publicising events is having a positive impact on letting the community know what the centres can offer them across a geographical area with many isolated rural communities – [see our Facebook page](#).
- A bi-monthly Families Bulletin to promote new services and other organisations in the area who can support and provide services – [see Family Bulletin's](#)
- Regular partner meetings between our social care named lead and the centre's Family Support Coordinator to review joint cases
- Social care's representative on the Advisory Board to inform social worker's about centre services and feed information via the Partner's Bulletin (produced bi-monthly) – [see Partner's Bulletins](#)
- Social worker induction sessions at the centre to inform them about out work and ensure services are appropriate and accessible to families in greatest need

The Centre has a family support referral system in place shared with partners throughout the area. There are regular meetings with the health visiting team to identify families in greatest need and review referrals made to the centre.

We attend the **Early Years Provider Network** meetings to link with early years settings and have a termly **Early Years Information** session held at the centres which all early years providers and childminders are invited to attend. In Spring 2015 the feedback to the initial session on Let's Talk More strategies was overwhelming positive and we were able to also promote the Devon Early Help Strategy and DAF process to offer support to families. As a result of the work with settings we have seen an increase throughout the past year in referrals for family support from preschool settings. As a result of one of these sessions a Deputy Pre School manager has offered to volunteer on the strategic advisory board to represent early years settings.

Our Family Support Triage system ensures that **all families referred for family support receive contact within seven days** and an initial assessment of need within three weeks.

- [see family support flowchart](#)
- [see DAF staff training guide](#)

We review our group rationales termly to ensure they are linked to our target groups and geographical areas and that they will meet the needs of these families. These are informed by our ongoing monitoring and evaluation of groups, which includes observations, file audits and termly report cards.

- [see rationales, report cards, observations and group file audits](#)

Our further areas for development are:

- Establish additional formal partnership agreements with partners including Midwifery, and Social Care to agree local measures of joint impact and aim to identify specifically what each partner will jointly contribute to outcomes in the area. We now have a number of these already in place including with **JobCentre Plus, health, early years providers, learning communities and adult learning.**
- Continue to work with the local authority to share information on children accessing the 2 year old funding at point of headcount, so that additional support can be offered to these families in a timely manner.

<b>The quality and impact of practice and services</b>	1	2	3	4
Grade:		X		

Briefly list your main reasons for deciding on this grade for the centre or group of centres. Include the strengths of individual centres within a group and key areas for development.

A range of data are used to continuously evaluate, plan and re-scope services so that they link clearly to meeting local needs.

All our groups for children are planned according to the EYFS and include assessment, observation and evaluation to monitor effectiveness of outcomes and help children get ready for school. – [see rationales, report cards, observations and group file learning journeys](#)

We monitor the outcomes of our target groups via our report cards to ensure that the services provided have a positive impact on the children and families. We ensure that our target groups are engaged in the centre services appropriate to their needs via targeting at the beginning of the term and monitoring of their attendance.

The development and progression of children of families engaged in the family support service are monitored via learning journeys (which are shared with parents so that they understand and help to support learning) based on the EYFS when they attend centre groups and activities and by Family Star to show the progress and impact of our support.

Our needs analysis tells us that we have two priority outcomes:

**Increase the number of children achieving a good level of development at the end of the EYFS in the areas of: LIT Reading and Writing and MAT Numbers,** because our data shows us these are the two weakest areas of the EYFS for children across the cluster in September 2014. However, each of these specific areas still

demonstrate most of the children achieving a good level of development in these areas in September 2014:

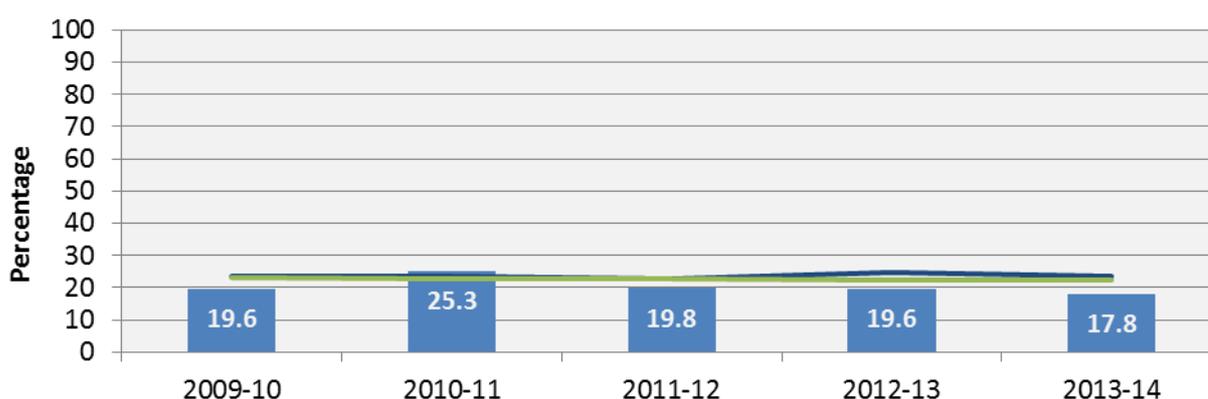
	<b>09 LIT Reading</b>	<b>10 LIT Writing</b>	<b>11 MAT numbers</b>
Honiton	82%	79%	85%
Axe Valley	87%	80%	86%
Devon	79%	73%	81%
National	74%	67%	74%

**Children identified in groups and by partners as needing speech and language / communication support demonstrate an improvement following centre intervention**, because information from speech and language screening locally at the two year check shows this is a focus area. Referrals to speech and language therapists do not reflect this need, however local early years settings also tell us that children are joining them at preschool age with delayed speech and language ability. The EYFS data in this area is good overall by the end of the EYFS largely due to the support of these settings offered to children during their time spent at preschool.

In 2014-15 our priority outcomes were to:

- a. **reduce rates of obesity and overweight children at reception age.** Latest data shows an annual 2% reduction in these rates and both centres are now below Devon and England averages:

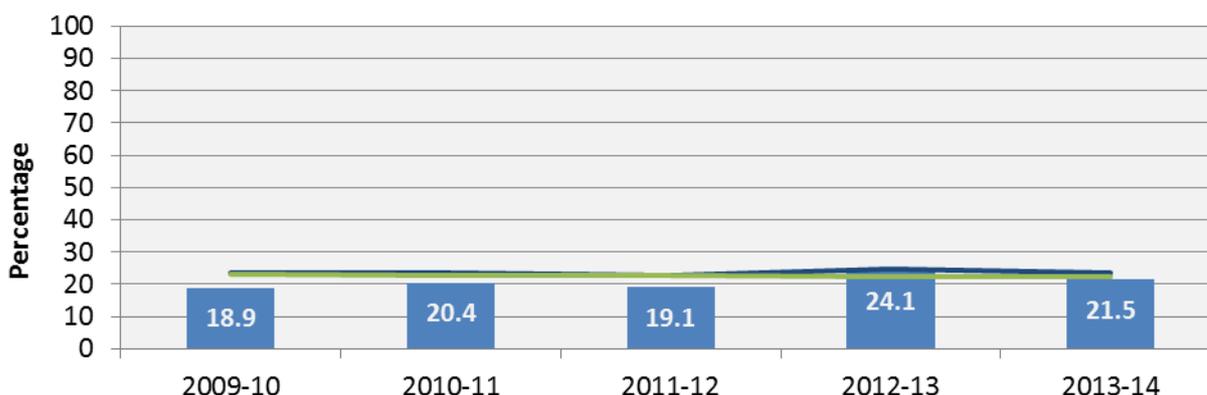
**Honiton Children's Centre**  
Percentage of children in reception year classified as overweight or very overweight (obese)



Source: Devon County Council Public Health Team (National Child Measurement

Data Notes: Data is collected during each academic year and published the

**Axe Valley Children's Centre**  
**Percentage of children in reception year classified as overweight or very overweight (obese)**



Source: Devon County Council Public Health Team (National Child Measurement

Data Notes: Data is collected during each academic year and published the

- b. **narrow the gap between those receiving free school meals and their peers in Honiton, and increase the number of children achieving a good level of development at the end of the EYFS with a focus on *Communication and Managing Behaviour and Feelings*.** September 2014 data shows the gap in Honiton had **narrowed from 20% in 2013 to 8% in 2014**. The gap in Axe Valley was 13% in 2014, with both centres being below the Devon average of 21% gap.

Those children achieving an **overall good level of development** at the end of the EYFS increased in both areas between 2013 and 2014:

	2013	2014
Honiton	68%	78%
Axe Valley	63%	
Devon	64%	68%

In both of our **priority areas of development there was an increase in the number of children achieving a good level of development** and both are above the Devon average for 2014:

	2013 2+ Communication and Language	2014 2+ Communication and Language	2013 2+ PSED	2014 2+ PSED
Honiton	87%	92%	85%	95%
Axe Valley	83%	88%	86%	93%
Devon	82%	84%	85%	86%

### Breastfeeding

- 2013-14 breastfeeding rates at six-to-eight weeks across the group (49.8%) are just above national rates. The centre has commissioned Healthy Babies UK to support breastfeeding within the reach area via peer-supporters and a breastfeeding

practitioner in each weekly baby group, of which there are three.

We deliver services to meet the core purpose. The centre promotes health and wellbeing, school readiness and parenting skills through strengthened partnerships with Health teams, Early Years providers and specific organisations such as the Axminster wellbeing centre and Homestart. This supports our direct delivery of services which has a themed rolling programme which include focus weeks to enhance families' active lifestyles, home safety and healthy eating. – [see service plan and centre timetables](#)

In our last inspection it was identified that we needed to:  
“provide a wider range of activities that promotes early learning and development, both in the centre and in the local community”

We now:

- use report cards, Estart information on use of services and feedback from partners and parents to develop future services - [see report cards and planning meeting minutes and timetable](#)
- use group rationales to focus our group services on the most vulnerable families and target attendance – [see group rationales](#)
- use a ‘Plan, Do, Review’ cycle within groups each week which uses child observations to inform the planning of the next session following the principles of the EYFS.
- track individual children as a sample cohort using learning journeys – [see group folders and EYFS tracking spreadsheet](#)
- offer opportunities in every group for parents to engage in their child’s learning through the use of Wow moments and learning journeys completed in partnership with centre outreach workers – [see learning journeys file](#)
- offer a wider variety of partnership groups across the area to diversify the services on offer to families, and have invited local groups to use the centre buildings where they are offering services to under 5s

In our last inspection it was identified that we needed to:  
“promote and provide a wider range of adult learning courses”

We now:

- plan our services in partnership with Learn Devon and Jobcentre Plus to ensure they meet the needs of families in our area
- track adults engaging in training and adult learning courses on our adult tracker
- offer adult learning and training information packs to all families who are identified as eligible for 2gether funding and are on a low income, or express an interest in improving their employability skills
- Liaise with local training providers to ensure our training information packs are updated termly and include all courses available at the centre, and through other organisations including St Loyes Family Action programme

We continue to offer a programme of adult learning delivered by Learn Devon for families to gain a Maths qualification in the centres. We support this programme with a crèche as this was identified by families as a barrier to attending training. The crèche provides additional support and tracking of the children’s progress via observations and learning

journeys.

As a cluster we:

- have clearly defined and separated roles for outreach workers and family support workers – [see staffing structure](#)
- have a rolling Solihull parenting programme across the cluster co-delivered with the health visiting team.
- have clear systems for referrals and allocations - [see family support flow chart](#)
- assess families using the outcomes star and Devon Assessment Framework (formerly CAF)
- have a dedicated Targeted Families support work within the family support team (from June 2014) who offers specific support within the Targeted Families Programme.
- use a tracking system for family support – [see family support tracking spreadsheet](#)
- ensure all family case files are regularly audited and discussed at supervision, with decisions being recorded to ensure safeguarding of families – [see MOSAIC](#)

### Volunteering

We currently have a team of volunteer breastfeeding peer supporters who co-deliver breastfeeding cafes, three volunteer counsellors and a small team of volunteers who support services such as the adult learning crèche and Twins and More in Honiton - [see volunteering file](#)

To improve the quality of practice and services:

- Outreach staff will attend planning and evaluation training to review the existing centre paperwork and ensure this is fit for purpose and used appropriately in all services
- Family support staff will attend centre training on assessing families and SMART action planning to support them in the embedding of the MOSAIC system and assessment analysis
- The whole staff team will attend BFI Management training in September 2015 to ensure consistency of breastfeeding support offered by the centre

<b>The effectiveness of leadership and governance</b>	1	2	3	4
Grade:		X		

Briefly list your main reasons for deciding on this grade for the centre or group of centres. Include the strengths of individual centres within a group and key areas for development.

The two centres are managed by The Children’s Society on behalf of Devon County Council and comprise of three buildings; two in Honiton and one in Seaton. There is one senior leadership team (SLT) across the group of children’s centres comprising of a Centre Leader, Family Support Co-ordinator,

Services and Outreach Co-ordinator, Programme Manager and Admin Manager. The SLT and centre staff team have monthly meetings. The family support team and outreach teams also have 'team' meetings monthly to review their practice specific roles together - [see SLT minutes, meeting minutes and budget 'snapshots'](#)

### **Use of evidence and robust data within performance and outcome measures**

- Target setting is firmly rooted in robust data analysis and is integral to our action planning with clear links to the local authority priorities.
- The Advisory Board has undertaken training to ensure members have clarity around the Core Purpose of centres, understand and use data and have the knowledge and confidence to perform their support and challenge role effectively.
- Our Advisory Board comprises of key partners and effectively challenges and support the centre by review of data, finances and services. The chair of the advisory board is actively involved ensuring the data presented in evidenced, for example centre meetings to review learning observations and the tracking cycle of children in June 2015.  
– [see Advisory Board minutes](#)

### **Challenge provided by local authority / TCS**

- Leaders have established a clear service plan moderated by the Local Authority. – [see Service Plan](#)
- Programme Manager attends Children's Centre Manager meetings, with the Centre Leader attending the Locality Children's Centre Meetings chaired by the Local Authority and which have a strong focus on performance and accountability – [see minutes](#)
- The Children's Society provides a wide range of support to the centre including staff training.

### **Effectiveness of strategic partnerships**

- Partnership working at the centre is good and formal working agreements are in place for the majority of key partners to ensure this work continues. [see partnership agreements](#)
- The Children's Centre is part of the Community Safety Partnership Board: this enables our engagement in wider community partnerships and information sharing to support needs analysis and service provision – [see minutes](#).

### **Effectiveness of self evaluation systems**

- Self evaluation takes place constantly: using report cards, session evaluation and planning forms, parent forums, registration and access monitoring spread sheets to ensure we continue to focus our services appropriately, that target groups are attending and monitor their impact – [see report cards, parent forum summaries, group folders and registration and access spread sheet](#)

### **Staff qualifications and development**

In our last inspection it was identified that we needed to:

“set up a training programme to improve staff’s understanding of early learning and development, planning next steps for children, early reading and school readiness”

- We have recruited new outreach workers with experience of the Early Years Foundation Stage
- We have offered further training and shadowing opportunities at other children’s centres to staff to develop their skills in this area
- We have trained outreach staff in early communication, speech and language and appointed an Early Language Lead Practitioner for the cluster

Regular staff supervision and performance management, including annual appraisals, is used to continually drive improvements within the centre – [see training audit, supervision audit and staff personnel files](#)

### **Effectiveness of policies, procedures and practices**

- We have clear policies and procedures in place to ensure that the culture of safeguarding is embedded in the centres including robust recruitment procedures. – [see policies file and DBS central record](#)
- The centre uses the MASH to submit safeguarding enquiries and responds to enquiries from the MASH for additional information following the procedures from the Devon Safeguarding Children Board. We use this information to engage some of the most vulnerable families in our area. – [see MASH Flowchart and MASH referral forms](#)

### **Effectiveness of monitoring target groups**

- Leaders know if families who would most benefit from using services are accessing them – [see registration and access spread sheet and cluster targets document](#)

### **Effective use of resources**

- Centre programme has been designed with staff and partners, using needs analysis to ensure services meet need and resources are deployed accordingly
- Parents are involved in designing centre services and decision making through Parent Forums, parents satisfaction surveys and group evaluations
- We engage parents in governance and improvement of the Children’s Centre through pop up Parent Forums in groups, Facebook and informal feedback on centre specific questions during focus weeks. Parents are also influencing services by being supported by the centre to set up parent led services such as breastfeeding cafes through the offering of peer supporter training – to be delivered in Autumn 2015. This is in addition to parent feedback in sessions captured in evaluations – [see Parent Voice file, parent satisfaction surveys and report cards](#)
- Quarterly returns are provided for both the Advisory Board and the Local Authority, showing financial position to date, and year end forecast – [see quarterly returns](#)

**To improve in this area:**

- We are in the process of finalising formal partnership agreements with Midwifery and Social Care. These will ensure there are no barriers to information sharing or access to the services families need.
- We will be looking at ways to gather feedback from parents who do not access our centre services through community events and social media throughout 2015.

Overall effectiveness	1	2	3	4
Grade:		X		

Briefly list your main reasons for deciding on this grade for the centre or group of centres. Include the strengths of individual centres within a group and key areas for development.

**Access to services by young children and families**

- Registration rates are good and we currently have the **very large majority of all children in the cluster - 84%** (1577 children) **registered**.
- The **very large majority, 82%** (1537 children), **of all children have accessed the centre and/or early years services** in the past year (1/4/2014-31/03/2015).
- The **large majority (70%)** of these children have a **have accessed the centre and/or early years services three times or more** in the past year (1/4/2014-31/03/2015).

**The quality and impact of practice and services**

- The quality of what we offer is improving and increasingly well located to enable extended reach for the families who most need support. Our tracking systems demonstrate the measurable impact of services for families.
- Partnership working at the centre is good and formal working agreements are embedded with partner agencies.

**The effectiveness of leadership and governance**

- Leaders know precisely what is required to drive the centre's effectiveness. The strategic advisory board ensure governance is effective and provide a support and challenge role to the centre and monitor the performance of the leadership team
- The centre service plan drives continuous evaluation and improvements in the centre services, and ensure the centre is able to evidence the difference it is making to families in the local area

## Section B. Factual information about your children's centre/s

This section should include:

### Information about the area/locality (centre or group of centres to be inspected)

Include information on the name and number of centres in the group or locality; if appropriate, list separately the numbers of children under five years living in each of the centre's reach areas.

State the level of the offer made by each of the centre/s.

Axe Valley and Honiton Children's Centres are a group of two centres covering an area of 152 square miles in East Devon run by The Children's Society on behalf of the local authority.

Honiton Children's Centre, a phase two centre, has a reach of 919 children aged 0-4 living in 18 LSOAs, one of which is in the 30% most deprived in the country.

Axe Valley Children's Centre, a phase three centre, has a reach of 963 children aged 0-4 living in 19 Lower Super Output Areas (LSOAs) all are in the 70% least deprived in the country.

Most children in the area start early year provision with skills broadly in line with those typical for their age.

The group meets the full core purpose by offering a range of services such as parenting programmes, stay and play groups, family support, adult learning in partnership with local providers and working in partnership with health to deliver health services, for example, baby clinic from the centres.

The group is run by The Children's Society on behalf of the local authority. One team covers the cluster. A strategic advisory board is responsible for the governance of the group supported by bi-monthly operational groups in each centre area.

### Governance, leadership and management arrangements

Please outline the governance arrangements – standalone, group or merger (include whether advisory boards are separate or shared).

Please outline the leadership and management arrangements (for example a group or locality manager or leader).

Please outline whether the centre/s is/are managed on behalf of the local authority by a school or other third party organisation.

Honiton and Axe Valley Children's Centre operate as a group of children's centre and have one leadership team, comprising of a Programme Manager, Centre Leader,

Admin Manager, Family Support Co-ordinator and Services and Outreach Co-ordinator. The Programme Manager is shared between Exmouth Children's Centres, Honiton and Axe Valley children's centres and other Devon projects.

A strategic Advisory Board covers both children's centres alternating meetings between centres. - see [Advisory Board minutes](#)

The Children's Society manage the Centres, tendered out from Devon, on 5 year contract until March 2017.

Staffing for the group consists of two teams covering family support, with a specific targeted families support worker, and outreach led by a senior leadership team and supported by admin assistants. – see [staffing chart](#)

We also have a team of volunteer breastfeeding peer supporters who co-deliver breastfeeding cafes, two volunteer counsellors and a small team of volunteers who support services such as Bumps to Buddies, Stay and Plays across both centres and Twins and More in Honiton.

## Context

Include a description of the geographical area served by the centre/s or area/locality; levels of deprivation; ethnicity of the area.

**Axe Valley** comprises of two towns, Seaton and Axminster, as well as the rural villages surrounding these towns. 963 0-4s live in the Axe Valley reach area. Of these, 17% live in poverty (2013). 12% of children were eligible for free school meals (2014). Although the reach area for Axe Valley Children's Centre covers a relatively affluent area, there are pockets of disadvantage.

**Honiton** comprises the main town and 12 urban and rural parishes. 919 0-4s live in the Honiton reach area. Of these, 13% live in poverty (2013). 8% of children were eligible for free school meals (2014). Although Honiton is a relatively affluent area as with Axe Valley there are pockets of disadvantage. The majority of these children and families live in the Honiton town LSOA's E01019927 which is IMD ranked at 29%.

Across the cluster English as a first language has decreased slightly from 96.85% in 2013 to 96.51% in 2014 for the cluster, broadly in line with the Devon average of 96.8% in 2014.

There are 7 Children's Centres serving East Devon: Honiton and Axe Valley (The Children's Society), Exmouth 1 & 2 (The Children's Society), Clyst Vale, Ottery-St-Mary and Sidmouth (Action for Children).

## The needs of children and their families

Describe the significant target groups identified by the centre/s as in most need of support, such as workless households; teenage mothers.

Our target groups for 2015-16 are –

- A. Children living in the most deprived area, specifically:  
E01019927 Honiton (Streamer's Meadow)      IMD 2010 29%
- B. Families who have children eligible for 2gether funding (and therefore will be from low income families)
- C. Children in greatest need
- D. Families in need of early help – to focus on those families at Devon's Level 2 threshold criteria who could benefit from a DAF, Family support, De-escalation from a CIN/CP or CIC plan

- see [cluster target document](#)

## Any other relevant information

Please provide information of any particular features of the centre/s or area/locality. Note any significant changes since any previous inspection, such as changes to group/cluster arrangements/mergers, etc.