

Inspection report for Sutton Children's Centre

Local authority	St. Helens
Inspection number	384143
Inspection dates	19–20 October 2011
Reporting inspector	Linda McLarty HMI

Centre leader	Mrs Christina Kennedy
Date of previous inspection	Not applicable
Centre address	Ellamsbridge Road Sutton St Helens Merseyside WA9 3PY
Telephone number	01744 822160
Fax number	Not applicable
Email address	christina.kennedy@sthk.nhs.uk

Linked school if applicable	Not applicable
Linked early years and childcare, if applicable	EY336389 Sure Start Phoenix Children's Centre

The inspection of this Sure Start Children's Centre was carried out under Part 3A of the Childcare Act 2006 as inserted by section 199 of the Apprenticeships, Skills, Children and Learning Act 2009.

Template published: September 2011

Report Published: November 2011

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Piccadilly Gate
Store Street
Manchester
M1 2WD

T: 0300 123 1231
Textphone: 0161 618 8524
E: enquiries@ofsted.gov.uk
W: www.ofsted.gov.uk

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Introduction

The inspection addresses the centre's contribution to:

- facilitating access to early childhood services by parents, prospective parents and young children
- maximising the benefit of those services to parents, prospective parents and young children
- improving the well-being of young children.

The report is made to the local authority and a copy is sent to the children's centre. The local authority may send the report to such persons it considers appropriate and must arrange for an action plan to be produced in relation to the findings in this report.

This inspection was carried out by one of Her Majesty's Inspectors and an early years inspector. The inspectors held meetings with the head of centre, staff, service users, partner representatives and senior officers from Bridgewater Community Health Care (NHS) Trust and the local authority. They observed the centre's work and looked at a range of relevant documentation.

Information about the centre

Bridgewater Community Health Care (NHS) Trust is commissioned by the local authority to provide strategic governance and services at this Phase two children's centre. Although the setting has been operating since 2006, there has been major restructuring in the authority in the last year, resulting in the loss or redeployment of 50% of all staff and resources. The Bridgewater Trust has, since May 2009, been commissioned to provide the full core offer for the Parr Children's Centre and Sutton Children's Centre. There was a further and significant restructure of both centres in July 2011 and since then Sutton Children's Centre has operated with new management and a new staff team, which works across both Parr and Sutton children's centres. The population in the reach area is 97.2% White British, with only 2.8% of residents from black or minority ethnic heritages, although there is now a growing Polish community. The centre's catchment area is also home to two Traveller sites.

The head of centre is also responsible for managing Parr Children's Centre and centre staff work across the two locations. There are 1,021 children under five years of age in the reach area, and of the 932 registered with the centre, 254 are actively engaged with the centre's services. Unemployment in the reach area is high, with 416 families in receipt of benefits.

Children in the centre's catchment area enter early years provision with knowledge, skills and understanding that are well below those typical for their age, particularly in communication and social skills. Particular challenges facing the St Helens area are the high

incidence of teenage pregnancy, although the rate fell from 57% in 2008 to 37% in 2009. Low initiation rates for breastfeeding and childhood immunisation, high infant mortality, and domestic violence are also problems in the reach area. The on-site day-care provision, Sure Start Phoenix Children's Centre, provides respite childcare places for 34 children from birth to five years old and the inspection report on that provision is available from our website www.ofsted.gov.uk

Inspection judgements

Grades: 1 is outstanding, 2 is good, 3 is satisfactory, and 4 is inadequate

Overall effectiveness

The effectiveness of the children's centre in meeting the needs of and improving outcomes for families

3

Capacity for sustained improvement

The centre's capacity for sustained improvement, including the quality of its leadership and management

3

Main findings

Sutton Children's Centre provides satisfactory support to families in its catchment area. This is commendable in the light of the major service restructure which has resulted in significant cuts and redeployment of staff. The new leadership team has strong support, and good information from the local authority and from Bridgewater Trust. As a result, staff know the profile of the area well. The head of centre is setting up robust systems to ensure that the centre's provision is firmly targeted where it is most needed, and to monitor the impact of provision on outcomes for the target groups, the most vulnerable and those traditionally hardest-to-reach. It is too early to see the impact of these systems yet.

All outcomes are at least satisfactory, and procedures to ensure families are safe and safeguarded are good, with effective systems in place to risk assess activities and outreach work. Staff are alert to indicators that families may need the additional support which is provided through regular use of the Common Assessment Framework process.

Although the local authority has set specific targets, the centre's own development plan does not yet incorporate these. The centre's current targets are not precise enough, and lack measureable success criteria. This makes it difficult for the centre's leaders to evaluate the impact of its work and for the advisory board and accountable bodies to hold the centre to account. The new leader is aware of this but, understandably, continuity of provision following the major restructure was the initial priority. This necessitated retraining staff for new roles so that they could swiftly become effective, and embedding systems to monitor provision to ensure it was meeting the needs of the target groups. Although registration is

high at 92%, only 36% of these families are accessing centre services, and strategic and local leadership teams recognise that this is too low.

Provision has reduced significantly since the recent changes, but the leadership team is proactively trying to find creative ways to work more 'smartly', including by extending outreach work to engage those known to be reluctant to access services on site. The centre is utilising its very positive and committed group of volunteers well, although it is recognised that resources to train such volunteers are limited. Families comment about their disappointment with the recent loss of the café. This limits the centre's ability to provide cheap, healthy food and also its ability to encourage members of the wider community to use the centre. The overall programme of activities available in the building offers insufficient choice. The centre, although attractive and well-resourced, is under-used, although good use is made of the on-site respite crèche which is seen as 'a lifeline'. The more limited programme of on-site activities and a reduced staffing team limits the care, guidance and support which can be offered to residents who visit the centre for help.

Strategic governance is strong, but there is a lack of clarity about roles and responsibilities in the advisory board, and some members need training to support their role and enable them to challenge and hold the centre to account for its work. The centre has been assessed as meeting the Care Quality Commission's 16 core standards, and this forms part of the accountability arrangements for the head of centre. However, at present, the performance management arrangements for the rest of the staff team are not fully aligned to the priorities in the development plan.

Given the minority of families accessing services, the major reorganisation of service delivery and the satisfactory outcomes, provision and leadership and management, the centre's capacity to improve is satisfactory.

What does the centre need to do to improve further?

Recommendations for further improvement

- Increase the proportion of residents in the reach area who access services, particularly those from target groups.
- Increase the range of services, activities and opportunities that are provided to meet the needs of the families in the reach area, particularly those from the target groups, the most vulnerable and those hardest-to-reach, by utilising partners' contributions to service delivery and making the most of the building.
- Set measurable targets with clear success criteria to enable the accountable bodies and the advisory board to hold the centre to account for its work, and to enable evaluation to be based on measurable evidence of impact.
- Enhance the ability of the advisory board to challenge, support and hold the centre to account by clarifying roles and responsibilities and by training members to support this role where necessary.

How good are outcomes for families?

Partnership programmes to encourage healthy eating have improved health outcomes. Data show that in the reach area obesity rates in Reception Year have reduced from 12.9% in 2008–09 to 10% in 2010–11, and the percentage of overweight children has reduced from 17.6% to 12.5% over the same period, although both remain above the national averages. The immunisation rates for whooping cough at over 90% are high, and attest to productive partnerships with local GPs. Breast feeding initiation rates have improved to 45% in the first quarter of 2011, although this remains well below the national average of 74.6%. The local target for sustaining breast feeding at 6–8 weeks is 23%, well below the national average of 50%, but historically this area has been resistant to breast feeding. The centre has reached 20% in the first quarter of 2011. Oral health is poor in the area, and there was insufficient evidence of promoting this in the centre. Although the café is greatly missed, the space is made available to volunteers, who regularly encourage local parents to bring a picnic lunch for a volunteer-run play session.

In recent years 426 items of safety equipment have been distributed to families in the reach area. Although this is helping families improve home safety, there is no measurable impact data to show the effect on reducing emergency hospital admissions. The centre receives valuable data about alcohol-related emergency hospital admissions, broken down to gender at centre level. This, and information about domestic violence incidents, helps staff reach out to the victims and offer support, which is monitored carefully to ensure continuing usefulness. Very positive, respectful relationships are being built up which encourage parents to share their needs and sometimes parents self-refer for services such as the Common Assessment Framework processes. The centre monitors partnership support for the three looked-after children and twenty children on child protection plans in the reach area. Staff are building strong relationships with their health and social care partners to galvanise support for those who need it most. They are currently directly supporting 28% of all of the cases in the reach area where targeted support for children with additional needs is required.

Early Years Foundation Stage Profile scores have risen 15.1% in the last three years for communication, language and literacy and personal, social and emotional development. Although this exceeded the local target, it remains well below national levels, and data indicate that the gap between the lowest achieving 20% of children and their peers is widening, from 25.8% in 2009 to 40.2% in 2011. The newly appointed early years educator has detailed knowledge of the quality of early years education across all sectors in the area, and is analysing the reasons for the widening gap, in order to target support where it will have most impact upon raising achievement for all. Targeted speech and language support programmes are in place to further raise achievement and reduce inequalities. Adult achievement is currently limited by the changes to provision although take-up of courses has historically been low.

Attendance figures and parents' views are collated and analysed to gauge if the courses continue to meet the needs of parents and carers. Parents successfully requested a

dedicated breast-feeding room to be available at all times and for a notice board to advertise their activities. Parental contribution to shaping provision is more limited than in past years because of budgetary constraints, and is further restricted by the lack of training of advisory board members to support their role. Behaviour of children at the centre is good.

Increased self-confidence and raised self-esteem has empowered volunteers to run some activities and they are enthusiastic advocates for the centre. There is limited evidence to show the proportions of residents encouraged into greater economic security, with only 67 attendees from 2009–2011 attending family learning courses. The centre does not offer literacy and numeracy classes but, despite shrinking provision, can demonstrate that it has supported 3 parents into work and between 10 and 15 adults into college in the last year.

These are the grades for the outcomes for families:

The extent to which children, including those from target groups, are physically, mentally and emotionally healthy and families have healthy lifestyles	3
The extent to which children are safe and protected, their welfare concerns are identified and appropriate steps taken to address them	2
The extent to which all children and parents, including those from target groups, enjoy and achieve educationally and in their personal and social development	3
The extent to which children engage in positive behaviour and develop positive relationships, and parents, including those from target groups, contribute to decision-making and governance of the centre	3
The extent to which children are developing skills for the future and parents, including those from target groups, are developing economic stability and independence including access to training and employment.	3

How good is the provision?

3

The newly implemented monitoring systems are already demonstrating how many of those registered from the target groups are accessing services. For example, 6/10 children with disabilities, 15/30 minority ethnic families, 4/6 Traveller families and 40/144 lone parents from the area attend the centre. The leadership team intends to use this information to inform its improvement planning and to reshape services to meet the needs of the most disadvantaged. However, it is acknowledged that the range of provision has diminished since the recent restructure. Parents told inspectors how much they missed some of the activities, but comments made include, 'This is the friendliest of all the centres'. Partnerships are increasingly brokered to meet the deficits in provision; however, it is too soon to see the impact of these initiatives. Health partners said, 'We could not do our jobs without the centre's input.' Assessment, for example, using the Common Assessment Framework is utilised diligently to identify need and swiftly marshal multi-agency support.

There are some good quality, purposeful learning opportunities provided, such as a session on preventing cot death observed during the inspection. It was appropriately focused on reducing the high incidence of infant mortality in St Helens and supporting teenage and lone

parents. Some very valuable work is going on at the Traveller sites to enhance the parents' understanding of productive play. Stimulating respite provision is a strength, and early education outcomes are monitored well. However, the leadership team acknowledges that at present, insufficient numbers are accessing outreach and on-site services and activities, including adult learning and development opportunities. The new monitoring systems are focused on ensuring that provision meets individual learning and development needs for a greater proportion of local families.

The staff team is currently over-stretched, with too few staff to ensure sufficient reception cover or to protect management time. Rightly, the emphasis is on outreach to the hardest-to-reach and most vulnerable, but there is not enough staff consistently on site to ensure that care, guidance and support is better than satisfactory, other than for those users experiencing crisis. Signposting is not fully followed up to gauge effectiveness; for example, although 27 users were directed to smoking cessation advice, the centre has no evidence of the impact of this.

These are the grades for the quality of provision:

The extent to which the range of services, activities and opportunities meet the needs of families, including those in target groups	3
The extent to which the centre promotes purposeful learning, development and enjoyment for all families, including those in target groups	3
The quality of care, guidance and support offered to families, including those in target groups.	3

How effective are the leadership and management?

3

Governance and day-to-day management arrangements are satisfactory although the advisory board is not yet fully challenging or holding the centre to account. The improved accountability and monitoring arrangements for the new team and the reshaped provision are not yet fully in place and improvement targets lack precision. The local authority provides an impressive amount of information about the make-up of the reach area, and increasingly detailed information at centre level about progress towards key performance indicators. This is used by the head of centre and the committed staff team to focus upon meeting the needs of the most disadvantaged and the historically hardest-to-reach. However, incompatibility between the local authority's E-start information management system and the health authority's case management system, which is only available at Parr Children's Centre, hampers the exchange and use of information.

Systems to ensure that evaluation is firmly based on evidence of impact are still developing, and the head of centre is extremely realistic about the strengths and weaknesses of the centre and what improvement actions need to be taken. The staff team knows they need to improve the range of provision and increase take-up of services. With changes to resources,

the embedding of new staff teams and the satisfactory outcomes and provision, the centre currently offers satisfactory value for money.

The centre is meeting its equality and diversity duties satisfactorily, although the achievement gap is widening. Support for parents and children with disabilities is monitored well. Leaders and managers know the profile of the groups in the reach area well but reduced provision and an over-stretched staff team limits the centre's ability to demonstrate how they meet the needs of all of the target groups such as the growing Polish community. However, early intervention monitoring and case study tracking shows that the centre is significantly improving outcomes for families in crisis or facing challenging circumstances.

Robust safeguarding arrangements with Criminal Record Bureau checks are in place for staff and centre partners. Early identification and intervention, through sound multi-agency cooperation, is supporting those families experiencing mental or emotional health challenges, domestic violence, or whose children are subject to a child protection plan or who are in care. The centre is used frequently to maintain family bonds in supervised contact visits for temporarily separated families.

Partnership working is affected by the borough-wide reorganisation, and many redeployed staff are not yet fully making up the deficit in provision. The local authority and Bridgewater Trust are still finalising the service level agreement. The impact of partnerships on outcomes at the current time is satisfactory. The head of centre is diligently establishing systems to enable the impact of the partners' contribution to the centre's work to be monitored and evaluated more rigorously, and aims to increase the level of integrated working. The partnership with parents is strong, with many durable, productive relationships based upon mutual respect. Outreach is engaging some hard-to-reach families but budgetary constraints currently limit the extent to which the views of parents and carers influence provision.

These are the grades for leadership and management:

The extent to which governance, accountability, professional supervision and day-to-day management arrangements are clear and understood	3
The effectiveness of evaluation and its use in setting ambitious targets which secure improvement in outcomes	3
The extent to which resources are used and managed efficiently and effectively to meet the needs of families, including those in target groups	3
The extent to which equality is promoted and diversity celebrated, illegal or unlawful discrimination is tackled and the centre fulfils its statutory duties	3
The effectiveness of the centre's policy, procedures and work with key agencies in safeguarding children and, where applicable, vulnerable adults	2

The extent to which partnerships with other agencies ensure the integrated delivery of the range of services provided by the centre to meet its core purpose	3
The extent to which the centre supports and encourages families in the reach area to engage with services and uses their views to develop the range of provision.	3

Any other information used to inform the judgements made during this inspection

None

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Summary for centre users

We inspected the Sutton Children's Centre on 19 and 20 October 2011. We judged the centre as satisfactory overall.

We enjoyed the visit to the centre, which is a welcoming, safe building with some really good resources, especially in the respite crèche. It was delightful to see children enjoying and learning in a stimulating environment full of resources worth exploring. Even the youngest relished painting with glue, glitter and coloured sand or learning about textures when they squeezed play dough. It was good to find out that the centre is used so often for contact visits, helping to keep families close during times of separation.

We would like to thank those of you who spared the time to speak with us and we very much appreciated your willingness to share your views about the centre, as this helped us to see how staff are meeting your needs and those of the other residents in the area. You told us that the centre could do more to advertise what it offers, to attract more residents, and to have more going on in the centre. We agree, and we have asked the centre to increase the number of residents who actually use the services. We have also asked the centre and its partners to increase the amount of services, activities and opportunities on offer, so that when more people come, there will be enough going on to meet their needs. We know you are doing your part by telling your neighbours what the centre can do for them, and this is greatly valued by the staff.

You told us of the major changes recently, and we could see that the management and staff are really trying hard to keep services and activities going. The reorganisation saw many staff moved to different posts with the centre's partners. Once they are retrained for these

posts, they should still be available to support you. We agreed with you that big cuts in services, such as losing the on-site café, is reducing the centre's ability to attract new residents and provide cheap, healthy meals to different groups. The management are trying to find new ways to reintroduce this service; meanwhile, well done to the volunteers who are planning and running activities such as the picnics. Inspectors agreed that at present, the building could be used more.

The centre struggles to measure the difference it is making, as the management have not yet set precise enough targets which makes it difficult for staff to measure what progress the centre is making. This also limits how well the advisory board, the Bridgewater Trust and local authority can challenge and check on the centre's work. We have asked the centre to set itself clear targets and to find ways of measuring how well those targets are being met. However, thanks to some very good information from the local authority, the centre can show that it knows the area well, including which groups have specific needs. This is a good start to finding out exactly what the needs are, then planning a programme to meet those needs, and putting systems in place to check what difference the centre's work is making to you and your families. We have also asked the centre to ensure that the advisory board gets training for those members who are less familiar with what an advisory board does. This will also help them to support, challenge and check on the results of the centre's efforts.

Inspectors were impressed with the new team. Even though it is too early to see the result of the systems being put into place, we are optimistic that they will improve how well the centre works with partners, including how accurately the centre can measure the impact of the partners' contribution.

We could see that the staff are doing a good job in keeping your families safe and protected, especially those of you going through hard times and needing some extra help and support. For example, residents experiencing domestic violence are helped swiftly by the centre and its partners, and the centre keeps checking to see that they are making a positive difference in these circumstances.

The centre is starting to get some very useful information. For example, staff know what difference they are making to the skills, knowledge and understanding children have by the time they get to school. These are improving, but the gap between the children who struggle the hardest to reach a satisfactory standard, and the other children, is getting wider instead of narrowing. The centre is working hard to find out why this is happening so that it can try to remedy this.

Inspectors were impressed with the commitment of the volunteers, many of whom told us how much their confidence has improved and how they feel less alone as a result of their involvement with the centre.

We wish you all the very best for the future.

The full report is available from your centre or on our website www.ofsted.gov.uk.