

Inspection report for Parr Children's Centre

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Linked school if applicable	Not applicable
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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.

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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.

An inspection of the registered early years/childcare provision was carried out at the same time as the inspection of the centre under Section 49 of the Childcare Act 2006. The report of this inspection is available on our website www.ofsted.gov.uk.

This inspection was carried out by one of Her Majesty's Inspectors and one early years inspector.

The inspectors held meetings with parents, management, centre staff, partner agencies and representatives of the Bridgewater Trust and representatives of the local authority. They observed the centre's work, both in the centre and in the community and looked at a range of relevant documentation.

Information about the centre

Parr Children's Centre is a purpose-built Phase 1 centre delivering the full core offer. It is co-located with a Primary Care Trust (PCT) Health Centre which delivers General Practitioner (GP) and community health services. It is accountable to Bridgewater Community Health Care (NHS) Trust: Halton and St Helens Division. Situated in a former mining community with historically entrenched health and social inequalities, it comprises nine super output areas, all but one of which are in the 10% most deprived communities nationally. Some of these areas are in the top 1% of deprivation. In the St. Helens borough, almost half of all looked after children come from Parr and its neighbouring ward, Sutton. The centre management and staff work across Parr and Sutton Children's Centres, and due to recent restructuring, the staffing team has reduced by 50%. Other challenges faced by the reach area families are high levels of depression and low self-esteem, and many families are reluctant to contact professionals.

There are 999 children under five years of age in the centre's reach area and of these, 99% are registered with the children's centre, and of these, 65% are actively engaged with centre services. Almost half (459) of all children aged under five years live in households

dependent upon workless benefits. An additional 14% of the community receive working tax credit. In the Parr reach area, 27% of families are lone parent families.

The local population is 97.8% White British, with Asian and Chinese families making up the largest minority groups and also a small but growing number of families of Eastern European origin. A small Traveller community has now settled into permanent accommodation in the locality. Just over 30% of families in the reach area are particularly vulnerable and require targeted support. Children enter early years provision with much lower levels of skill, knowledge and understanding than those seen nationally, particularly in communication, language and literacy, and social and emotional development.

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

Parr Children's Centre staff have secured high levels of trust, acceptance and respect among local families. 'You feel a real sense of community within the centre', say parents, who describe it as 'a family'. The centre has served its reach area well in recent years and can demonstrate that the good provision offered up until very recently has resulted in good outcomes for local families. It is currently providing a satisfactory service. This is because the recent restructuring, which resulted in significant service and staffing reductions, limits the centre leadership's capacity to sustain or build on the good provision which resulted in these good outcomes. Despite the centre leadership's strong vision and ability to inspire the team and maintain staff morale, the demands of the day-to-day operational work of running two centres with significantly reduced resources are such that the leadership and staff team are over-stretched. The centre leadership has insufficient protected time to monitor the impact of the centre's provision, or the work of partner agencies, particularly on their priority groups.

Partnership working is strongest with the on-site health visiting team, but variable with other agencies, who are often unable to provide timely evidence of the impact of their work. Evaluation is not based upon enough measurable evidence of impact, particularly on the priority groups.

A 50% reduction in staff has reduced the amount of services and activities on offer in recent months. Staff now, understandably, focus their efforts and resources to the most vulnerable families. However, this limits many of the universal and some of the targeted services which were, until recently, provided in the centre. For example, the MATCH (Men and their children) group, baby massage and the popular café are no longer in operation, although plans are in place to reopen the café.

A major strength of this centre is that both strategic and operational centre leadership already know the areas for improvement arising from the impact of recent changes, and are proactive in trying to find ways of working more 'smartly' to address these. For example, leadership at all levels acknowledges that the centre leadership role needs clarification if it is to sustain and build on existing good outcomes. Leaders know the centre is not given sufficient measurable targets against which they, the Bridgewater Trust or the advisory board can measure its progress. It knows that the advisory board, although very supportive, is not offering enough challenge or holding the centre to account sufficiently for its work.

Centre staff are actively engaging with a large majority of the population, many of whom have gone on to employment, education and training. By increasing individual opportunity and choice, the centre is enhancing the economic security of families and of the wider community.

What does the centre need to do to improve further?

Recommendations for further improvement

- The local authority and accountable body to clarify the roles and responsibilities of the centre leadership to ensure sufficient management capacity to fulfil the oversight, leadership and management aspects of the role, to enable the existing good provision and good outcomes to be maintained.
- The local authority and accountable body to work with the centre to set measurable targets against which progress can be demonstrated and the centre held to account.
- Increase the advisory board's understanding of its roles and responsibilities to enable it to challenge and hold the centre to account more for its work.
- Increase the level of integrated working with partner agencies and encourage them to provide measurable evidence of the impact of their contribution to the centre's work, especially with regard to priority groups.
- Improve evaluation by ensuring that it is based upon measurable evidence of impact, particularly relating to the priority groups.

How good are outcomes for families?

Good joint-working with health partners has promoted healthy lifestyles well. Immunisation rates across the borough are high at over 95%, although as yet, data are not available at centre level. Childhood obesity in Reception class decreased by 5% from 38% to 33% in the period from 2009 to 2011 in Parr, although this is still well above the national average of 9.8%. The breast feeding initiation rate increased by 2% last year in Parr, although initiation and continuation rates remain stubbornly well-below average, despite intense support over the last few years. The centre leader and health partners swiftly devised a plan to increase the percentage of mothers sustaining breastfeeding and this is already demonstrating good progress towards their local target of 25%. By the second quarter of this year they had already attained 21%, an impressive rise from the 7.5% of 2010. However, although encouraging, this remains well below the national average of 50%.

Many mothers proudly told inspectors how researching and publishing the 'Feeding the family' recipe book strengthened their self-esteem and improved their knowledge of how to provide cheap, nutritious food.

Effective procedures are in place to work with partner agencies to ensure that the actions and services provided achieve good outcomes for children, through a shared understanding of the use of the Common Assessment Framework and the roles and responsibilities of each agency. Centre staff support 30% of all families in their area who have complex and multiple needs, including 20 looked after children and 31 children subject to child protection plans. Case studies and files provide convincing evidence of support being well matched to need, and regularly reviewed to monitor its continuing effectiveness. Safety in the home is enhanced by the provision of home-safety equipment and the advice and guidance provided by the community fire service, who visit every family referred to them by the centre.

The care offered in the on-site respite session is of good quality, with some outstanding learning experiences. However, the centre is currently only offering one half-day session each week, with places prioritised on the basis of need, and parents really miss this service and the respite it gives them. 'When I use the group it is the only time I have for myself. I know that he is well cared for thank you' wrote one parent, reflecting the views of many. However, families now say there is not enough going on at the centre and they sometimes have to travel elsewhere for the sessions which, until recently, were provided at Parr. Achievement, as demonstrated by Early Years Foundation Profile scores, shows a fluctuating picture, with a slight dip recently, but the Children's Centre Educator has analysed the results carefully to pinpoint the aspects of learning which need particular support. The progress of every child deemed to be vulnerable for any reason is tracked, and data show good progress from very low starting points for these 78 children. Since 2009, that gap between the lowest achieving 20% of children and their peers has narrowed 8.6%, from 48.1 to 39.5%.

Children's behaviour is good, and many parents have attended evidence-based parenting courses. Parents are keen volunteers and loyal advocates for the centre, and enjoy contributing to the governance, 'I felt I had no one, now being a parent rep makes me have a whole new family.' Parental views are gathered regularly, but not analysed systematically to draw conclusions to inform improvement planning and service provision.

In the last three years the lone parent adviser who works from the centre has helped 150 centre parents into employment and 110 Parr parents into relevant training, and the centre's literacy and numeracy courses have helped 62 parents to gain accredited qualifications. However, the local college is not able to maintain the same level of course delivery this year. Debt counselling and ongoing budgeting advice from agencies such as Stonham are also helping many families towards greater economic security.

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	2
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	2
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	2
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.	2

How good is the provision?

2

The range of services and activities, including outreach services, meet the needs of users satisfactorily. The centre building is not used as much now for group activities as in the recent past, but as rooms became available, they were swiftly offered for supervised contact sessions. In the last year, 2065 contact visits have taken place, which helps maintain the bonds between children and their birth families.

The centre has registered the overwhelming majority of its local families and the large majority of these are actively engaged with centre services. The support, guidance and protection provided through the inter-agency work and intensive outreach by the early intervention team frequently prevents concerns escalating. Referrals come from a variety of sources and careful assessment of the family's needs is a priority for the centre.

Adults have benefited greatly from courses ranging from awareness-raising sessions, leading to personal development courses, and to accredited qualifications. The good provision in

private and voluntary settings used by the centre is accelerating children's progress from very low starting points, and helping to prepare them well for school. Although the number of respite crèche sessions has reduced, staff supported 39% of families with home-based play, development and parenting in the last year.

Strong relationships enable families to approach the centre with confidence, particularly during times of crisis, and discussion and case studies attest to high levels of care, guidance and support for families, including those who meet the social care thresholds of need. The co-location of health services in the centre greatly enhances the joined-up support offered. The centre is currently supporting 48 out of 59 of Parr teenage parents or parents-to-be. The centre regularly directs adults to appropriate sources of support, but lacks the capacity to consistently follow up the impact of this signposting.

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	2
The quality of care, guidance and support offered to families, including those in target groups.	2

How effective are the leadership and management?

3

The needs in Parr are significant and the centre leadership is often involved in the fine detail of operational work and not sufficiently free to carry out oversight functions. These include monitoring the impact of partner agencies' contribution to the centre's work and ensuring that evaluation is accurately based upon measureable evidence of impact, especially for the target groups. Plans are already in place to address this.

Governance and accountability arrangements are defined in the service level agreement between the local authority and the Bridgewater Community Health Care Trust. The Care Quality Commission's 16 standards are used to gauge the effectiveness of the centre's work. The head of centre's performance management is aligned to these standards, all of which have been fully met. As yet, too few of the outcome targets set for the centre are precise enough, or have sufficiently measurable success criteria. This limits how well the centre, the strategic leadership and the advisory board are able to measure its progress towards the key performance indicators. Professional supervision arrangements for staff are aligned to improvement planning so that all staff are held accountable for the centre's work. The dedicated staff team has built durable relationships with families using the centre. Strategic and operational leadership acknowledges that the advisory board is not yet fulfilling the challenge, and holding to account aspects of its role.

The centre offers good value for money because the strong provision available until recently has delivered good outcomes for Parr families. Although there is a reduction in the delivery

of services on site, staff are focusing their attention on outreach in the homes of families identified as being most vulnerable. Staff say that they ‘...can’t be in two places at once’ and although they regret the reduction of group work in the centre, outreach work is targeting resources where they are needed most.

Safeguarding is a strength, with good and improving case file recording systems, which evidence that the early intervention team is working well with multi-agency partners to offer differentiated support to those most at risk. Systematic recording of all contacts shows that centre staff apply the lessons learnt from recent serious case reviews, and vulnerable adults and children in the Parr area, including those experiencing domestic abuse, are protected well. Staff are trained to the appropriate level to support their responsibilities and vetting systems are robust.

Although 88% of the Parr area is defined as within the top 10% of deprivation nationally, so that most residents are economically vulnerable, the strategic and centre leadership acknowledges that it is not yet able to demonstrate what difference the centre is making to its specific priority groups. Language line translation services are used when required, and the centre is currently supporting parents of children with disabilities to re-form a support group. The progress of all children with additional needs is diligently tracked, and these children have priority of access to respite crèche places and to funded provision in local childcare.

Partner agencies’ ability to obtain and use data to evaluate their services is variable. Some partners are still developing their understanding of their role in supporting and developing integrated provision, and often lack capacity to evidence the impact of their work because of recent cuts to their own services. Those who do have impact data sometimes do not share this information with the centre leadership, which limits how well the centre leadership evaluates their services and monitors take-up. This limits how well the centre can target its services at those most in need in the community. The on-site health visitors describe the centre staff as ‘...completing the circle’, offering universal and targeted support following the health visitors’ initial assessments of need. The information-sharing protocols which currently restrict the level of detailed information-sharing between health services and the centre are being reviewed at strategic level.

User views are gathered systematically, but the staff have insufficient time to effectively analyse the collated feedback and use it to inform evaluation and shape 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 secures 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	2
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

The inspection of the on-site respite day care, Halton and St Helens PCT Parr Children's Centre, was taken into account when making the judgements for this inspection. The full report can be found at www.ofsted.gov.uk

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Summary for centre users.

We inspected the Parr Children's Centre on 23 and 24 November 2011. We judged the centre as satisfactory overall.

Thank you so much for coming into the centre for the hot-pot lunch and sharing your views with inspectors, we appreciate this very much. We also read many of your written comments about the impact the centre has made on your lives, and your opinions helped the inspectors reach their judgements. It is easy to see why you enjoy coming, and why you trust the staff team so much, and we agree, this is, 'A nice clean place to come and play and be with the children and be messy...' Some of you said that staff accompany those of you who feel a little nervous about coming to a new place. For example, one parent wrote '... I was introduced to the centre by a befriender...once I got involved at the centre I enjoyed it so much I wanted to take part in more courses and activities. You feel a real sense of community within the centre.' We thoroughly enjoyed reading the 'Feeding the family' book some of you researched and wrote, and can see that the centre is helping many families in

Parr to live healthier and safer lives. When you are going through particularly hard times, the centre staff use their influence with their many partners to make sure you get the help you need quickly. We were very moved by what you told us, and by what you wrote, which helped us to see how much this centre has changed your lives in the recent past.

However, we agree with many of you that staffing cuts in the last year are making it difficult for the centre to offer the same range of services. The staff themselves regret that they '...can't be in two places at once' and feel very stretched trying to visit as many of you in your homes as they can, while also trying to run group sessions at Parr and its sister centre in Sutton. The centre leadership is also over-stretched, and does not get enough time to spend on some specific management and leadership tasks.

We have asked the local authority and the Bridgewater Community Health Care Trust to ensure that the leadership is given enough time to lead the work of the centre, such as time to assess what difference the centre staff and their many partners are making to families in Parr. We want the centre to be set clear targets by which the leadership, the advisory board and the Bridgewater Trust can measure how well they are doing. We have asked the partners of the children's centre to give the centre their evidence of what difference they are making to the centre's work. This will also help the leadership know exactly what is working, and what could be improved. We feel the leadership needs more time to make sure that it analyses all the results of its frequent consultations with you, so that it can use this information to plan how to make things even better for you. We also feel that, although the advisory board is very supportive, it needs to challenge and ask the right questions to find out how well the centre is doing, to make sure it is doing the right things, and in the right way. We have asked the local authority and Bridgewater Trust to improve these areas.

We really enjoyed watching your children learn by playing with the lovely resources in the respite crèche, but were sorry to find out that since the recent staffing cuts, this service, like many other groups in the centre, does not run as often as parents want it to. We can see that the centre has really helped your children, and yourselves, to enjoy learning, and that many adults gained some really useful qualifications. We were impressed by how many of you have been helped into employment. However, we are concerned that the centre cannot maintain the range of activities and services that have helped you so much in the past. This is why we have judged that despite the good outcomes, which are a result of services and activities which were available until very recently, we think the centre is now satisfactory rather than good.

Thank you once again for your input into this inspection, we are very grateful and wish you the very best for the future.

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