

# The Brookfield Centre

Swinton Brookfield Primary School, Lime Grove, Swinton, Mexborough, S64 8TQ

**Inspection date** 10–11 July 2013

<b>Overall effectiveness</b>	<b>This inspection:</b> Previous inspection:	<b>Requires improvement</b>	<b>3</b>
		Not previously inspected	
Access to services by young children and families		Requires improvement	3
The quality of practice and services		Requires improvement	3
The effectiveness of leadership, governance and management		Requires improvement	3

## Summary of key findings for children and families

### This is a centre that requires improvement. It is not good because:

- Participation and engagement rates from the majority of families within the reach area are rising slowly, however the centre is not doing enough to attract families from all target groups, such as fathers and minority ethnic groups.
- Data sharing between the local authority, health partners and centre is not robust or made readily available. This means the centre is unable to have an up-to-date or accurate picture of its community in order to meet the needs of vulnerable families. Additionally, health-specific targets are difficult to achieve because information is not shared on a regular basis.
- Centre staff are not proactive enough in supporting and giving advice to adults about courses and training in order to find employment. Crèche facilities are unsustainable and, without this provision being consistently in place, adults are unable to access further training effectively.

### This centre has the following strengths:

- The two recently appointed heads of centre are dynamic and passionate about delivering a high quality service. They have a realistic view of the centre and are committed to driving it forward to meet the needs of families.
- The centre and its partners work closely together to help some of the most vulnerable families, particularly those with low self-esteem, depression and those at risk of domestic violence. Families report that, with the support of the centre and partners, they feel stronger and able to cope.
- Activities that are run for children and parents, such as 'Tots and Toddlers' and 'Mini Movers' are well attended and staff have a good knowledge of the Early Years Foundation Stage. These sessions are effectively run and provide useful pathways for parents to get advice and access to services.

### Information about this inspection

The inspection of this children's centre was carried out under Part 3A of the Childcare Act 2006 as amended by the Apprenticeships, Skills, Children and Learning Act 2009.

This inspection was carried out by two additional inspectors.

The inspectors held meetings with one of the acting heads of centre, centre staff, representatives from the local authority and from partner organisations in health, education, children's social care services, adult education, the Chair and members of the advisory board. There were discussions with parent volunteers and users of the centre. Parents' evaluations of activities were looked at by the team.

The inspectors visited all the rooms in the centre, a 'Tots and Toddler' session in the crèche room and the outdoor area.

They observed the centre's work, and looked at a range of relevant documentation such as the centre's evaluation of its effectiveness and its development planning.

### Inspection team

Emily Wheeldon	Additional Inspector, Lead Inspector
Joan Cawdron	Additional Inspector

## Full report

### Information about the centre

The Brookfield Centre was designated in 2009. It is a stand-alone, phase two centre set within the grounds of Swinton Brookfield Primary School. The centre is managed by the governing body of the school on behalf of Rotherham Borough Council. An advisory board supports the centre and has a Chair who is from the governing body. The centre is run by two acting heads of centre who are also lead teachers for the authority and work on a job-share basis. The centre provides the full core purpose and has a multi-agency base within the same building. The range of services comprises: health services, social care, family play sessions, parenting programmes, a work club, adult education and outreach services. Many take place in community venues and local schools.

There are 871 children aged under five years within the area, of whom 636 live within areas identified as among the top 30% most deprived in the country. There are significant issues related to high unemployment, dependency on benefits, depression, substance misuse, domestic violence, other crime and low levels of literacy and numeracy. The majority of families are White British and a small proportion belong to minority ethnic groups. There are high numbers of lone parents, and a few families with disabled children or parents. Children's skills on entry to early years provision are well-below expectations for their age.

The centre is linked to Swinton Brookfield Primary School. Its most recent inspection report can be found on our website: [www.ofsted.gov.uk](http://www.ofsted.gov.uk).

### What does the centre need to do to improve further?

- Work with the local authority and health partners to improve the sharing of data.
- Ensure that the large majority of families from target groups access services by, in particular, increasing participation rates for children from minority ethnic groups and fathers.
- Ensure centre staff are more proactive in supporting adults to access further training by:
  - improving access to adult learning and training
  - providing additional guidance and support for finding work
  - developing further, and sustaining, crèche facilities when adult training is being delivered.

## Inspection judgements

### Access to services by young children and families

Requires improvement

- Relevant data are not always shared effectively between the local authority, health partners and the centre. This means that the centre does not have an accurate enough picture of the community to target its work on increasing access for those most in need. For example, precise information about the number of local disabled children is unknown. Information about health-related targets is also difficult to get hold of and so the centre cannot realistically evaluate or measure the impact it is having on the lives of families.
- The centre and its partners do good work with the families they know about, however, this is not the large majority within the area. Outreach workers and lead teachers design sessions to attract different target groups, such as forest activities for fathers, however, not enough are accessing these, especially among minority ethnic groups and fathers.
- Children and families access a range of services when they participate in groups or are in regular contact with the centre. Good quality stay-and-play and baby clinic sessions are well attended, with

centre staff and health visitors at hand to support families who need advice. For example, they give advice about parenting skills and developing children's communication and language skills. Centre staff and health visitors are effective in identifying areas for concern so referrals can be made at an early stage.

- Early intervention is key to the centre's work. Priority is given to referring families on for specialist services or individual support if staff have concerns about the safety or well-being of any child or family member. The centre refers children for further assessment if they have disabilities or delays in learning and development. They complete a Common Assessment Framework (CAF) plan which is universal across all the services so that needs are identified and targeted support can be put in place.
- Links with local schools and private providers are strong, and staff have a good knowledge about two- year funding. They effectively signpost and enable disadvantaged families to access good quality early years provision for two-year-olds. Good support is given to practitioners to complete progress check reports for children aged two. Health partners and parents are fully involved in the process so support can be provided when there are concerns relating to a child's development.

### The quality of practice and services

Requires improvement

- Centre staff are vigilant; they pick up and log any concerns from groups. However, they do not record much detail about children's progress in their learning and so have limited information about the level of children's skills when they join Nursery and Reception classes.
- Appropriate support is in place within the centre for children with low communication and language skills. For example, staff model good quality interactions with children in 'share-a-story' workshops. However, data show that only a small proportion of children are making better-than-expected progress from their individual starting points in their communication and language skills or meeting the expected levels of development when starting school.
- Various methods to promote breastfeeding are in place. Examples include information on display boards, breastfeeding peer support, breast-pump loans and support from health partners. While breastfeeding rates at initiation are increasing year on year, the percentage of babies being breastfed at six-to-eight weeks fluctuates and is still well below the national average.
- The centre and its partners give great support, to individuals and through specialist groups and programmes, to those families identified as most in need. This includes, for example, those at risk of domestic violence or those whose children have autism. Comments such as, 'I felt ashamed. I didn't realise the impact it had on my children. I have learnt so much from this course,' confirm that the centre's work is helping to improve families' well-being and reduce inequalities.
- A small number of adult learners attend and complete literacy and numeracy courses, although evaluations and tracking are basic. There are systems in place for adults to seek guidance and support about finding work through a job-vacancy board and an information kiosk in the reception area. However, reliance on these systems alone to do the job and give advice to adults, is not sufficient.
- Centre staff rely heavily on adult-learning partners to support adults in further education. Volunteers and centre staff sometimes run a crèche facility when adult courses are on but its operation is dependent upon adequate staffing levels, and budgets are tight. This creates a barrier for some adults who want to attend further training.

### The effectiveness of leadership, governance and management

Requires improvement

- The centre does not have a wholly accurate analysis of the needs of targeted families in the community because it does not routinely get the data it needs to monitor and measure whether its work is effective. Therefore, the centre can only rely on a 'best-fit' approach rather than a robust analysis of needs. The targets set by the local authority do not always provide sufficient challenge. While the centre meets some of these targets, there is still a long way to go and it is not yet engaging the large majority of families in greatest need.
- The two acting heads of centre, who have been in post for a short period of time, are very dedicated

to their work, and lines of responsibility are very clear. Centre staff work cohesively and targets are shared so everyone knows what needs to be put in place to secure improvement. Despite the lack of data, members of the advisory board know the centre's strengths and areas in need of improvement, understand how performance management is used to enhance the centre's services and are fully committed to closing the gap and improving outcomes for children and families.

- Arrangements to promote safeguarding are effective and centre staff and partners implement procedures consistently well. The needs of children subject to child protection plans and children in need are met and CAF plans are effective in securing support early on for families. Preventative work from family support workers and outreach workers is successful in improving outcomes for families.
- Parents contribute their views to the centre. Through their representation on the parent forum and the advisory board, they inform the centre about areas to improve. For instance, they suggest practical ways, such as advertising activities on social websites, to encourage families to attend.
- Resources are prioritised well to meet the needs of newly established groups of families who are most in need. Financial monitoring procedures are in place to ensure that the centre operates within the budget allowed. Family support workers use local community groups and businesses well to obtain additional funding to support family groups.

**What inspection judgements mean**

<b>Grade</b>	<b>Judgement</b>	<b>Description</b>
Grade 1	Outstanding	Practice consistently reflects the highest aspirations for children and their families and as a result inequalities are reducing rapidly and gaps are closing.
Grade 2	Good	Practice enables most children and their families to access good quality services that improve children's wellbeing and achieve the stated outcomes for families.
Grade 3	Requires improvement	Performance is not as good as it might reasonably be expected to be in one or more key areas.
Grade 4	Inadequate	The needs of children and families in its area are not being met and/or the leaders and managers are not providing sufficient challenge to bring about improvement to the quality of services.

**Select details**

<b>Unique reference number</b>	23162
<b>Local authority</b>	Rotherham
<b>Inspection number</b>	421514
<b>Managed by</b>	The governing body of Brookfield Swinton Primary School on behalf of Rotherham Borough Council
<b>Approximate number of children under five in the reach area</b>	871
<b>Centre leader</b>	Lynsey Hadfield / Angela Woodward
<b>Date of previous inspection</b>	Not previously inspected
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