

3

# Marner Children's Centre

Devas Street, London, E3 3LL

**Inspection dates** 

management

Previous inspection date		Not previously inspected	
	This inspection:	Requires improvement	3
Overall effectiveness	Previous inspection:	Not previously inspected	
Access to services by you	ng children and families	Requires improvement	3
The quality of practice an	d services	Requires improvement	3

30 31 July 2014

**Requires improvement** 

#### Summary of key findings for children and families

The effectiveness of leadership, governance and

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

- Most families with children under five years are registered at the centre, but only half of these take part in centre services regularly. This is because the centre does not collect, analyse and use information about the local area effectively enough.
- There are not enough weekly activities for all children under five at the children's centre. Therefore, not enough children get the opportunity to take part in good quality early years activities. Although staff carefully monitor the development of children at sessions, this information is not used to track children's progress over time. Also, parents are not currently involved in this process.
- Schools and early years providers are not fully involved with the children's centre and not enough eligible two-year-olds are taking up early years education. As a result, children, especially boys and those eligible for free school meals, do not do as well as they should. A clear focus by the local authority on increasing provision means that it is on track to ensure there are sufficient places by 2015.
- The centre works well with health professionals, however, because there is no service level agreement, health visitors do not always take an active role in the Common Assessment Framework.
- The centre works well with social services. However, there is no written protocol about who should do what. As a result, family support workers are not always clear about what they are allowed to do to support families in most need.
- There is a good range of agencies as well as local parents on the stakeholder group, but the members do not always attend meetings. As a result, they do not monitor the work of the children's centre closely enough or give robust and effective challenge or support to the community lead.

#### It has the following strengths:

- Most three-year-old children are taking part in early years education in local schools or early years provision. This is helping to improve their skills, knowledge and understanding by the end of the Early Years Foundation Stage.
- Family support workers give good, and in many cases outstanding, support to families they work with. One young parent said, 'I've got so much love for this centre. They've turned my life around.'
- Parents play a very active and influential part in shaping the services and activities offered.

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

■ Raise the educational achievement of all children from birth to five in the community the centre serves by:

increasing the number of families that take part in children's centre services increasing the range and frequency of early years educational activities making sure schools and early years providers work in partnership with the children's centre and locality early years teacher

making sure that children's development is carefully tracked and that parents are fully involved in this process

ensure that most two-year-old children who are eligible for free early education take up their place, by working with partners and parents to promote this entitlement.

■ Improve governance of the children's centre and partnerships with health and social care by ensuring that:

all key partners represented on the stakeholder group attend meetings regularly the stakeholder group gives robust challenge as well as support to the children's centre manager

that the centre collects, analyses and uses information about the reach area effectively to identify target groups and to monitor the difference services are making health visitors take a full part in the Common Assessment Framework there is a robust service level agreement with health services

there are agreed written protocols between the children's centre and social care so that family support workers are clear about precisely what their role is when working with vulnerable families.

# 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 of Her Majesty's Inspectors and one Additional Inspector.

The inspectors held meetings with the centre manager, the local authority, health visitors and midwives, the linked social worker, family support workers, members of the advisory board and parents.

The inspectors visited a range of activities, including stay and play, and the council offices to meet social care professionals.

They observed the centre's work and looked at a range of relevant documentation.

# **Inspection team**

Julie Winyard, Lead inspector Her Majesty's Inspector

Jane Burchall Her Majesty's Inspector

Phillida Schellekens Additional Inspector

# **Full report**

#### Information about the centre

Marner Children's Centre is situated in Tower Hamlets North East Locality in East London. The borough provides governance for the children's centre. Tower Hamlets has the highest rate of child poverty in London, and unemployment in the country. It is the second most disadvantaged borough in London and is the third most disadvantaged borough nationally. The Bromley-by-Bow ward, where the centre is situated, has lower than average income, employment and housing quality, with higher than average overcrowding and crime. The area has a growing population with high investment in new housing. Out of 1,045 children registered, around half are of Bangladeshi heritage. There is a small minority of families of Eastern European and Black African heritage and very few are White British.

The centre area has three primary schools, one local authority nursery and a range of private and voluntary sector day care providers. Many children in the area start early years provision with skills which are below those typical for their age. Communication and language and personal, social and emotional skills are the weakest areas. The centre focuses its work on families subject to a child protection plan, children with special educational needs and/or a disability, children looked after by the local authority and those children subject to the Common Assessment Framework.

The area also has close partnership work with the Bromley-by-Bow Centre, a voluntary sector organisation, and three health centres with GP practices, emergency walk-in provision, practice nurses and health visitors. Health issues that are prevalent in the local area include asthma, vascular conditions, depression, cancer, diabetes, rickets and tuberculosis. The issues are highlighted by local GPs and they report that there is a low take up of healthy living public health initiatives such as 'Five a Day', smoking cessation and physical exercise, and that this impacts on local health.

### **Inspection judgements**

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

#### **Requires improvement**

- All families in the community the centre serves are registered at the children's centre, thanks to health visitors who help families complete the form at the new birth visit. However, because there is no specific section for parents to sign saying they give consent for the children's centre to contact them, this has caused some confusion. As a result, the community lead has waited for families to be referred to the centre by other agencies. Although those families most in need have been supported, not all families have had the opportunity to access the centre's good quality activities.
- Those adults who take part in courses arranged by the children's centre do well and many move on to further or higher education or get jobs. However, the number of adults who enrol on courses is low given the size of the population in the area. Also, the children's centre does not track parents who they signpost to other providers; therefore, they do not know how well these parents achieve.
- There is no up-to-date local information about the health of families who live in the children's centre area. The information for Tower Hamlets indicates that the large majority of mothers breast feed their babies after birth, with the majority continuing with this for up six to eight weeks. However, the number of children who start school overweight is above the national average. The only local information, which comes directly from general practitioners (GPs), indicates that most children are given the recommended immunisations before they start school.
- The children's centre has achieved good results through the early help it gives to families. This means that when families go through a difficult time they get good support to keep themselves and their children safe.

#### The quality of practice and services

#### **Requires improvement**

■ Family support workers give very high quality support to families. They care deeply about parents

with young children in the area and do everything in their power to keep children and families together and safe. They carry out very detailed assessments using the Common Assessment Framework. This means they understand precisely what the problems are and make sure they give the right kind of help to get families back on their feet. Parents speak very highly of the excellent quality support they receive. One parent explained how she did not want to be helped, at first, but the quiet, friendly approach of the family support worker won her confidence. However, family support workers are not always clear about the type of work they can do with families subject to a child protection or child in need plan.

- The locality social worker gives good support to the family support manager and workers. As a result, the quality of assessments is consistently good. She carries out robust audits of these assessments and gives helpful feedback to workers, which result in improvement. This work is at an early stage of being carried out so not all assessments have been audited.
- The courses the children's centre puts on for families are of good quality, including those for children with special educational needs and/or disabilities. The locality teacher works effectively with play workers, helping them to show parents how to play with their children. This means that those children who come to the activities are much better prepared to start nursery at age three. An assistant headteacher at a local school says that she can tell which children have taken part in the activities. When they come to nursery, children settle quickly and make good progress with their learning. Although activities have good outcomes, parents say there are not enough of them and they often cannot continue to attend in school holidays. This is because the local authority does not allow older brothers and sisters to take part in centre activities.
- There is a good range of targeted courses, for example parenting and healthy eating. One parent who completed the healthy eating course has been inspired to take further courses so she can help teach the course to other parents. There are good opportunities for parents to volunteer at the centre.
- There is good quality support for young parents due to good partnership work with the midwife.
- There is good partnership working between children's centre staff and providers of education and training in the area, for example the job centre and agencies who give advice. However, only a small number of parents take up the offer. Those who have attended enjoy the courses and value the practical help they get in completing job applications and preparing for interviews.

# The effectiveness of leadership, governance and management

#### **Requires improvement**

- The children's centre has good information about new births in the area, but it does not check or use this information effectively enough to determine what the range of needs is in the area. As a result, courses and activities are not always tailored well enough for particular groups, for example two-year-olds who are eligible for early education.
- Self-evaluation is over optimistic, based on a relatively small number of families being supported. The centre development plan identifies some additional groups that the centre will focus on, but there is no clear reason why these groups have been chosen.
- The centre has good relationships with health and social care professionals. However, because there is no formal agreement with health services and no written protocol with social care, the partnership working on the ground is not always effective.
- The stakeholder group has good parent representation, but key professionals do not always attend meetings. As a result, there is not sufficient challenge to the centre about how resources are targeted or in-depth questioning of self-evaluation or development planning.
- The local authority gives a good level of challenge. It knows the strengths of the centre and where improvements should be made. Its strategy of having a teacher and social worker attached to the centre is proving very effective. The locality social worker role has been in place for just over two and a half years and this has had a good impact on the quality and consistency of the centre's practice. Family support workers are well trained and supervised. The role of locality teacher is at the early stages of bringing about required improvements to children's achievement in the Early

Years Foundation Stage.

- Parents make a very strong contribution to deciding what activities the centre offers. This is because the local authority is determined that they are a key partner in making sure local needs are met. For example, parents have requested more activities for all families with children aged from birth to three and, as a result, the autumn programme has increased the number of activities available.
- Parents say they feel very safe at the centre and are happy to leave their children in the crèche when they take part in parenting and other courses. This is because of the good relationships centre workers have with families and because of the robust safeguarding procedures and risk assessments the centre has put in place. The centre also helps to raise awareness about, and prevent, female genital mutilation. All safeguarding procedures, including the single central register, meet requirements.

# What inspection judgements mean

Grade	Judgement	Description
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.

## **Centre details**

**Unique reference number** 20460

**Local authority** Tower Hamlets

**Inspection number** 451553

Managed by The local authority

**Approximate number of children** 1,045

under five in the reach area

Centre Manager Margy Creber

**Date of previous inspection**Not previously inspected

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