

# Tameside - Hyde

c/o Hyde Flowery Children's Centre, Old Road, Hyde, Cheshire, SK14 4SQ

Inspection dates	25-26 September 2014
Previous inspection date	Not previously inspected

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

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

#### This children's centre group requires improvement. It is not good because:

- Only a majority, rather than a large majority, of families that the centre has identified as in most need of its services and support participate regularly in group-led activities in the area.
- Too few two-year-old children take up their entitlement to funded nursery education places.
- The group has not made sufficient improvement to health outcomes related to sustaining breastfeeding beyond six-to-eight weeks, obesity in Reception-age children and maternal smoking at delivery.
- Adults, particularly the unemployed, do not have enough opportunities to improve their economic stability and well-being.
- The advisory board does not currently offer enough challenge to the leadership of the group.
- Too few parents are active members of the advisory board.

#### This children's centre group has the following strengths:

- Inequalities are reducing for children from the reach area as the gap in achievement is closing.
- There is a welcoming atmosphere at activities and families say they feel safe and secure.
- Most three- and four-year-olds receive their entitlement to free early years education.
- Priorities set out in the group's action plan are correct, measurable and easy to check.
- Individual support provided by staff is highly valued by families. This good support provided for families in challenging circumstances helps them to improve the quality of their lives.
- Arrangements to safeguard families are robust.
- Leaders, governance and managers have worked effectively during an extended period of change across Tameside to improve the quality of practice and services and the group's overall effectiveness since it was established. Overall, partnership work is well established.

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

- Improve access to services by:
  - increasing the number of children and families who are most in need and who use services regularly
  - ensuring that a greater proportion of eligible two-year-olds take up their entitlement to funded nursery education places.
- In partnership with health colleagues, improve the impact of work to increase the numbers of mothers who continue to breastfeed their babies at six-to-eight weeks, reduce levels of smoking during pregnancy and rates of obesity in children of Reception age.
- Extend opportunities for more adults, particularly the unemployed, to enhance their economic stability by:
  - increasing the promotion of, and participation rates in, volunteering, parenting courses and adult learning programmes including English, mathematics and information and communication technology (ICT) to aid progression into further education and employment
  - developing further procedures to check how well adults make progress when they access courses or programmes, particularly when signposted to partner agencies, and use data gathered to help plan future services.
- Improve the impact of leadership, governance and management by:
  - re-establishing the challenging role of the advisory board
  - raising participation levels of parents in the work of the advisory board.

#### Information about this inspection

The inspection of this children's centre group was carried out under Part 3A of the Childcare Act 2006 as amended by the Apprenticeships, Skills, Children and Learning Act 2009. The centres that form part of this children's centre group are Hyde Flowery Children's Centre and Newton Children's Centre.

This inspection was carried out by three additional inspectors.

The inspectors held meetings and had discussions with the interim manager of the group, key partners, centre staff, members of the advisory board, parents and representatives from the local authority. The inspectors visited both centres within the group.

They observed the centres' work, and looked at a range of relevant documentation.

#### **Inspection team**

Jane Hughes, Lead inspector	Additional inspector
Tara Street	Additional inspector
Emily Wheeldon	Additional inspector

#### **Full report**

#### Information about the group

Tameside-Hyde Children's Centre group operates across two centres – Hyde Flowery Children's Centre and Newton Children's Centre. These are located half a mile apart. The staff team rotate across four centres. They are led by a group manager. The group offers a range of services which include: health services, family support, 'stay and play' sessions, baby groups and support for children most in need. Commissioned services are offered by Action 4 Children.

The staff team comprises early years workers and family intervention workers. There is administrative support at Hyde Flowery. Tameside local authority is responsible for the strategic direction and day-to-day running of the group. The group shares an advisory board. Childcare within the Hyde Flowery building is run by an external provider, Children 4 Most. The group is part of the Tameside Early Help Team. The team works with targeted families and young people from pre-birth to 19 years. There is a single point of referral, The Hub, which is responsible for taking referrals from other agencies such as health, schools, general practitioners and mental health.

Hyde Flowery was designated in 2006. The centre shares a site with Flowery Field Primary School. Hyde Flowery Children's Centre is situated in an area of mixed socio-economic circumstances. One of its lower super output areas is one of the 5% areas of highest deprivation in the country and another is in one of the 10% areas. There are 2018 children under five years living in the reach area. Most residents in the reach area are of White British heritage. Here, 15.2% of families live in workless households.

Newton Children's Centre was also designated in 2006. Following consultation, it is not resourced on a full-time basis. It is located in a former shop building. Newton Children's Centre serves an area of mixed socio-economic circumstances, between the 10.01% and 75% most deprived in the country. There are 453 children under five years in the reach. Most residents are of White British heritage. Within the Newton reach, 14% of households are workless.

The group has identified those in need of its services and support as being teenage parents, children living with domestic abuse, and families from the Black and minority ethnic communities.

The majority of childcare provision is through local childminders and early years providers. Children from the reach generally enter early years provision with skills, knowledge and abilities which are below those typical for their age, particularly their communication and language skills. The primary schools and early years settings in the locality were not part of this inspection, as they are inspected separately. These reports are available on the Ofsted website at www.ofsted.gov.uk.

#### **Inspection judgements**

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

#### **Requires improvement**

Some families and children who are most in need of support do not benefit from the key services available, because the group actively engages only the majority of its families and children who are most in need, and not the large majority. The leadership has an overview of which strategies are working well to engage families most in need in group activities, including families who may be less likely to attend. The quality of data collected is improving continually, so that health professionals, nurseries and schools working alongside the group's staff are able to direct families more accurately to just the right type of support and activities to meet their individual needs.

- Although the proportion of eligible two-year-olds taking advantage of free early education has been higher historically, currently only 45% take up their free entitlement. This means that too few of these children are beginning to learn the skills they require for future success, particularly in terms of their communication and language.
- In contrast, almost all three- and four-year-old children take up their free places across the locality. This is contributing to the increasing proportion of children who reach a good level of development by the end of the Early Years Foundation Stage.
- Health and early years professionals work very well together to ensure referrals to the group, including for those who are expecting children. This strong partnership work ensures that those who are most in need of help and support receive these as appropriate. This is leading to fewer inequalities across the locality; families are able to access the services they particularly need.
- The group provides an appropriate balance of activities open to all and also a range of services for the families most in need with whom they work closely. 'Stay and Play', 'Baby Babble' and 'Rhyme Time' are all popular.
- Outreach work is effective in supporting families in target groups. Families such as those from Black and minority ethnic groups, or those who are experiencing domestic violence, or who are teenage parents, are helped to access and sustain their involvement with services.
- There is a varied range of resources and services for disabled children and those with special educational needs to enjoy. For instance, portage workers support children when they first attend new activities so that they get the most out of the experience. Parents are appreciative of this service and that their children do not feel out of place and are fully included.

#### The quality of practice and services

#### **Requires improvement**

- Staff are positive role models for families. They bring good quality knowledge and experience which they share with families. For instance, they use effective advice and guidance to develop children's communication skills through sessions such as 'Baby Babble'.
- Teenage parents, members of Black and minority ethnic groups and families affected by domestic violence are identified by staff and receive good levels of support which improve their life chances and well-being effectively.
- The majority of the group's resources are used for specific work with identified families. Even so, some sessions are still open to all and are popular with families. For example, families who attend 'Stay and Play' sessions are able to see what else is on offer at the centres and how this might help them.
- There are appropriate links with local primary schools and early years providers to share information and develop good practice. For example, staff share information with parents about activities being held in different settings so that they and their children can make the most of all local learning opportunities. Children's readiness to learn continues to improve as a result.
- Staff provide good individual support for families in most need. Detailed records include evidence of the progress made by families as a result of this support, such as helping parents to establish and maintain orderly households. Such good practice increases their self-esteem and gives these families sufficient confidence to become outgoing, active members of the community.
- Early years intervention workers are very knowledgeable and demonstrate good levels of professional expertise. They carefully identify, plan and provide support for families most in need. As a result, parents enjoy a range of opportunities through one-to-one support in the home to extend their parenting skills and knowledge and how to deal with domestic violence, which considerably improves family life.
- Partnership work with health colleagues is not showing enough improvement in increasing the numbers of mothers who continue to breastfeed at six-to-eight weeks. Only 33% sustain breastfeeding beyond this time. Similarly too many mothers, approximately one in five, continue to smoke during pregnancy up to the point of delivery. The rates of obesity in children of Reception age are too high.
- Although there are planned initiatives in place, currently there are not enough courses in adult education and training or volunteering opportunities to help parents to improve their parenting

- skills, or their English, mathematics and computer skills. This limits their progress towards paid work and their ability to support their children's learning.
- The systems to track adults' progress towards learning and employment, particularly when signposted to partner agencies, do not provide clear evidence of the centre group's impact on increasing economic well-being.
- Relatively few parents are supported to become volunteers. However, the benefits for those who do volunteer are positive. Case studies show that some go on to further education, training or gain employment.
- Parents are generally appreciative of the services and support provided. They confirm they could always ask for help and advice, especially in times of crisis. Case studies show that targeted intervention, prevention and early help have good results on individual children and families. Case files are of a high standard and demonstrate regular sharing of information between professionals.
- Children in most need of the group's support make good progress, given their low starting points. Observations, planning and assessments are recorded for those who attend regularly. Children who receive additional funding catch up with their peers, so that the achievement gap is narrowing by the end of Reception Year.
- The care, guidance and support for disabled children and those with special educational needs is effective. Early identification of needs ensure that children and families receive good quality support.

## The effectiveness of leadership, governance and management

#### **Requires improvement**

- Leadership has been disrupted over the past year due to changes in the group's staff team and because of uncertainty resulting from the reorganisation of Tameside services. This turbulence has led to the advisory board meeting infrequently and so providing less challenge to group leaders. Similarly, although parents are involved in some decision-making regarding the group's improvement, parent members have not been as active as they were previously.
- Partners across agencies and organisations are encouraged to join the advisory board. Parents are invited, although their membership ebbs and flows, often reflecting personal circumstances. Through the group's self-evaluation documents and action plans, members can identify what is working well for local families, as well as what needs to improve in order to reduce inequalities. They see what data indicate and so have a view of the quality of practice and services.
- Self-evaluation is accurate and informs the group's priorities, setting challenging targets for improvement. The needs of the key groups targeted for support have high priority.
- Local authority officers have a secure knowledge of what the group does well and what needs to improve further. There are clear targets to help the group manager and staff to assess the impact of their work and of services across the reach. As a result, the gap in skills is closing for children and families and inequalities are reducing.
- Overall, partnership work is a key strength and important to the success of the group. Joint working is commonplace as agencies share skills and expertise to ensure that local needs are met in the most efficient way.
- Safeguarding is given the highest priority in all aspects of the group's work. There are well-established procedures to vet staff and to ensure that everyone is involved in ongoing training, appropriate to their professional needs. Staff are deployed well across the group to make the most efficient use of their time and expertise, performance is managed well and professional supervision is comprehensive. Risk assessments are in place.
- Looked-after children, children in need, those supported with a child protection plan and families supported through the Common Assessment Framework (CAF) process do well. This is because they receive expert support and nurture to help them to overcome barriers to success, to reduce inequalities and so flourish. Resources are of a good standard and are valued by families.

### 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.

#### Children's centre group details

**Unique reference number** 80608

**Local authority** Tameside

**Inspection number** 447609

Managed by The local authority

**Approximate number of children under** 2471

five in the reach area

**Group manager** Fran Halpin

Date of previous inspection Not previously inspected

Telephone number 0161 351 9664

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#### This group consists of the following children's centres:

- 80608 Hyde Flowery Children's Centre
- 22135 Newton Children's Centre

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