

DUDLEY HEALTH AND WELLBEING BOARD

| | |
|--------------------------------|---|
| DATE | 14 th September 2023 |
| TITLE OF REPORT | Improving school readiness in Dudley |
| Organisation and Author | <ul style="list-style-type: none"> • Sal Thirlway, Service Director for Education, SEND and Family Solutions • Angela Cartwright, Head of Service - Consultant in Children & Young People's Public Health |
| Purpose | <p>This report is to:</p> <ol style="list-style-type: none"> Brief the Board on Dudley's school readiness inequalities, and what is currently being done to tackle this problem. To explore barriers, challenges and system solutions to improving school readiness - for discussion by the Board. To seek the Board's approval of the 2023-24 action plan (Appendix 1), and a set of reportable impact measures/KPIs for school readiness and monitoring arrangements (Appendix 2 and 3). |
| Background | <ul style="list-style-type: none"> • On 8 June 2023, Dudley's Health and Wellbeing Board (H&WBB) agreed to select 'Improving School Readiness' as one of its four priority goals for inclusion within Dudley's Joint Health, Wellbeing and Inequalities Strategy 2023-28. • Dudley's place-based Health and Care Partnership has also prioritised 'Improving School Readiness' as part of the Black Country Joint Forward Plan. |
| Key Points | <ul style="list-style-type: none"> • Disadvantage starts before birth and accumulates throughout life. The current socioeconomic landscape is characterised by an increasing cost of living, declining public budgets, and persistent health inequalities in Dudley Borough. • Now more than ever, we need to invest wisely. Tackling inequality in the <i>very youngest</i> will help prevent the gap from widening into older childhood and later in life, and ultimately lead to improved life outcomes for Dudley's children. • One of the strongest predictors of wellbeing in early years is the mental health and wellbeing of the mother or caregiver and parenting has a bigger influence on a child's life chances in the early years than education, wealth or class. It is key we work to optimise opportunities for parents to be the best they can be. • We need to focus on children being 'ready to learn' in the earliest years, as well as being 'ready for school' to develop those dispositions for learning. This requires a whole-system approach that maximises the benefits of services working together better and involving families and communities at every stage - from conception |

| | |
|--|---|
| | <p>to reception. We need: 'ready families', 'ready services', 'ready communities', 'ready children' in Dudley all which contribute to children being ready for school success.</p> <ul style="list-style-type: none"> • In Dudley Borough, good levels of development (GLD) at 2-2.5 years and at the end of reception are persistently lower than regional and national averages. • All four Black Country areas perform poorly compared to other West Midlands areas for GLD at 2-2.5yrs and end of reception. • Children in Dudley's more deprived areas begin to fall behind their peers between 12 months and 2 years, particularly in communication, and then remain behind at reception age. • There is evidence that poor school readiness negatively impacts on future life prospects including earning, mental health and wellbeing - becoming a causative factor of intergenerational poverty and poor attainment. • Brain development starts antenatally, therefore acting earlier in a child's life has a measurable impact. Improving Ages and Stages Questionnaire (ASQ) performance domains (communication, fine and gross motor skills, problem solving and personal-social) at 9-12 months of age, particularly in areas of high deprivation, must be a key outcome for all partners in the maternity and early years system. • Whilst it is important to improve outcomes for all infants, children and young people in Dudley, we need to focus proportionately on those experiencing the poorest outcomes. • We are at the beginning of a journey of early years whole-system transformation in Dudley, and the Family Hubs and Start for Life programme has provided an important launch pad for change. |
| <p>Emerging issues for discussion</p> | <ul style="list-style-type: none"> • Dudley Borough's local maternity and early years system is under strain and experiencing workforce shortages. • There are identified gaps in <u>very</u> early help for families in the earliest years. • Parents say maternity and early years staff are too busy to provide quality interactions, and that staff morale is low. They have reported a lack of early opportunities to learn more about being a parent and supporting their child's development. • Parents value peer support group opportunities to help promote their own wellbeing and socialize with their infants. However, lack of local provision, accessible information and cost are prohibitive. • A pressing need for proportionate investments/service allocation - based on place-based need and inequitable early years outcomes. |

| | |
|--|---|
| | <ul style="list-style-type: none"> • Duplication of governance and reporting arrangements relating to the maternity and early years agenda, both at Dudley Borough and Black Country levels. • An Early Years Needs Assessment completed in March 2023, which includes strategic recommendations which need to be advanced. • A need for a multi-agency conception to reception strategy for Dudley that harnesses whole-system leadership and a shared focus on the planning and delivery of maternity and early years services for better outcomes. • The key role and contribution of education in helping to develop early years strategic priorities, plans and interventions for Dudley. • A complex commissioning landscape in Dudley that has hampered advances in joint commissioning and pooled budgets. • A deep dive of commissioning for speech, language and communications is required to ensure best use of scarce financial and human resources. • The Family Hubs & Start for Life Programme is making an important contribution to school readiness, but programme funding ends on 31 March 2025. • Integrated Start for Life teams within Family Hubs require time and a “test and learn” approach and require commitment extending beyond 31 March 2025. • Lack of data sharing and intelligence processes and systems in Dudley Borough is a barrier to fully achieving integrated working across maternity and the early years. • Further investment in skills development of an integrated, multi-agency conception to reception workforce is needed, supported by an early year’s workforce competency framework. • Dudley’s Start for Life one-click platform needs further co-production and refinement to effectively communicate Dudley’s support assets, but parents report a preference for social media as a way of seeking local information. |
| <p>Key asks of the Board/wider system</p> | <ul style="list-style-type: none"> • To secure commitment from across all health partners (commissioners and providers), education providers inclusive of early years, statutory school age provision and post-16-yrs provision, local authority and wider partners to develop a whole-system ‘conception to reception’ strategic framework, priority workstreams and multi-year (up to 10 years) action plan for Dudley. • H&WBB members to nominate relevant leads, with decision making abilities, to join a senior level working group to begin to shape the above work. |

| | |
|--|---|
| | <ul style="list-style-type: none"> • To support a review to streamline governance and reporting arrangements relating to the maternity and early years agenda. • To agree the 2023-24 action plan for school readiness (see Appendix 1) • To agree a set of shared school readiness impact measures KPIs for whole-system monitoring (Appendix 2) • View a place-based School Readiness Inequalities Monitoring Dashboard for Family Hubs (Appendix 3). |
| Contribution to H&WBB key goals | Direct contribution to 'Improving School Readiness' goal and communication of this commitment and responsibility to respective Service Leads. |
| Contribution to Dudley Vision 2030 | <p>Direct contribution to:</p> <ul style="list-style-type: none"> • Dudley being a place of healthy, resilient, safe communities with high aspirations and the ability to shape their own future and the 2030 goal of Improved health outcomes and higher wellbeing. • A strong collaborative partnership approach, working innovatively to improve outcome in the earliest years. • High aspirations for all, focusing on the most vulnerable. • Developing and sustaining a skilled workforce who are responsive to families, children in their earliest years. |

Contact officer details:

Jacqueline Carolan, Service Manager - Integrated Early Years

Sophy Forman-Lynch, Public Health Manager, First 1001 Days

1. Background

1.1 What is school readiness?

School readiness is a measure of how prepared a child is to succeed in school cognitively, socially and emotionally. Good Level of Development (GLD) is used to assess school readiness.

Children are defined as having reached a GLD at the end of the Early Years Foundation Stage if they achieved at least the expected level in the early learning goals in the prime areas of learning (personal, social and emotional development, physical development and communication and language) and in the specific areas of mathematics and literacy.

School readiness and a readiness to learn are crucial to a child's lifelong development. For those who struggle to achieve a GLD, this can have a detrimental impact on future educational attainment and their life chances into adulthood.

Securing school readiness starts from conception. The Marmot Review 'Fair Society, Healthy Lives' (2010) states: "*Giving every child the best start in life is crucial for securing health and reducing health inequalities across the life course. The foundations for virtually every aspect of human development – physical, intellectual and emotional – are laid in early childhood. What happens during these early years, starting in the womb, has life-long effects on many aspects of health and wellbeing – from obesity, heart disease and mental health, to educational attainment and economic status*".

1.2 What affects school readiness?

There are numerous wider determinants that affect children's ability to learn in the earliest years and to get ready for school, these include poverty, housing and homelessness, family breakdown, neglect, domestic violence and substance misuse (see Appendix 4 for Overview of wider School Readiness indicators).

Things that we know help to improve school readiness include:



1.3 The picture in Dudley

Good levels of development in Dudley Borough for children at 2-2.5 years and at the end of Reception have consistently been below the regional and national averages over recent years.

Findings from Dudley Borough's March 2023 [Early Years Needs Assessment](#) show that children in more deprived areas begin to fall behind their peers in GLD at some point between 12 months and 2 years (particularly in communication) and then remain behind at reception age (and beyond). This is particularly notable in Dudley Central township.

In 2021/22, 37.7% of children screened at 2-2.5-yrs did not achieve a good level of development - significantly higher than most statistical neighbours (rank 6th lowest out of 7), national (18.8%) and West Midlands (20.7%) rates.

In the same year, 38.1% (1,415) of Dudley's children did not reach a good level of development by the end of reception (36.3% West Midlands, 34.8% England).

There are notable inequalities in GLD at reception amongst specific groups:

- Children on free school meals (44.5%) have significantly worse GLD compared to those not eligible for FSM (65.9%) - a percentage point difference of 17.4% that is higher compared to West Midlands (13.2%) and England (16.1%).
- Children with a special education support (SEN) including those with a SEN statement/EHCP (19.2%) achieve significantly lower GLD compared to those without SEN (68%) - a percentage point difference of 48.8%. This is lower than West Midlands (50.7%) and England (52.2%) rated.
- Boys (54.8%) GLD is significantly lower than girls in Dudley Borough (69.7%), with a higher percentage point difference of 14.9% - compared to West Midlands (13.6%) and England (13.2%).
- Children with Asian ethnicity (54.9%) perform poorly compared to their White British counterparts in Dudley Borough (63.6%). This is a notably higher percentage point difference (8.7%) compared to West Midlands (0.9%) and England (1.4%).

Too many children in Dudley Borough have their speech, language and communication (SLC) needs missed:

- In 2021-22, 25% of children at reception did not achieve GLD for SLC, this is worse than West Midland (22.4%) and England (20.5%) averages.
- This increased to a third in Dudley Central (29.1%) and North Dudley (27.6%).
- 22.4% of children aged 2-2.5yrs do not achieve a GLD for communication, compared to 14.7% in the West Midlands, and 13.5% in England.

Following Covid-19, Dudley has seen an increase in the complexity of needs amongst young children and their families. Primary schools report that children entering reception are less prepared to learn, socialise and communication. There are also more children with emerging SEN and development needs, and a reported increase in requests for education health and care needs assessments and the allocation of education health and care plans in early years. In addition, local families are struggling with socio-economic challenges linked to increased costs and inflation.

2. What we are doing to improve school readiness

2.1 Family Hubs & Start for Life

- In April 2022, Dudley Borough was pre-selected as one of 75 local authorities to receive national [Family Hubs & Start for Life](#) funding. Dudley has been allocated £3.87m over three-years. Current funding ends on 31 March 2025.
- All funded Start for Life workstreams directly contribute to improving school readiness: **(a)** Parent and Infant Emotional Wellbeing and relationships, **(b)** Infant feeding, **(c)** Parenting Education and Support, **(d)** Early Language & Home Learning Environment, **(e)** a published Start for Life offer, and **(f)** co-production with parents to inform pathways, priorities, planning and service improvements.
- As part of FH&SfL work, Dudley has completed an up-to-date early year needs assessment and whole-system mapping of the maternity and early years landscape using a variety of evidence-based sector-led improvements tools (details published [here](#)).

2.2 Developing an Integrated SfL Model of Support

- As part of the Family Hub & Start for Life programme an integrated Start for Life team model is being developed (through a ‘test and learn’ approach). This includes the following core services: Midwifery, Health visiting, Family Nurse Partnership, the Integrated Early Years Service, Early Help, Family Hub Managers, Parenting Coordinators, and a new integrated cadre of Family Hub Practitioners.
- Family Hub Practitioners have been recruited to explicitly fill an identified gap in very early family support and evidence-based interventions. They will contribute to improving school readiness outcomes.
- At a place-based level, each Family Hub integrated team will regularly assess local needs and report against a set of priority outcomes based within an agreed Monitoring Dashboard. ‘Ready to learn’ and ‘School Readiness’ outcome measures will be key to monitoring inequalities in local families and will inform responsive service provision and design (see Appendix 3).
- We are working to strengthen the integrated 2-2.5 yr. review process, whereby those children at greatest risk of poorer school readiness receive a more comprehensive integrated assessment and evidence-based interventions.

2.3 Early Language and Home Learning Environment

- In June 2022, Dudley became a member of the national DfE funded *Early Years SEND Partnership*. As part of this, Dudley has received advisory support from Speech & Language UK, undertaken a series of four action learning sets with local stakeholders, and joined a national learning network to promote a whole-system approach to speech, language and communication (SLC).
- Under the banner of the Family Hubs & Start for Life Programme, an Early Language & Home Learning Environment working group was established (from Sept 2022). This is a multi-agency working group, with an agreed theory of change and vision, a mission statement and a plan of action.

- We have made a commitment to embed Speech & Language Therapy (SaLT) expertise within our integrated Family Hub teams to ensure: (a) skills development of Family Hub teams, (b) quality early triage, and (c) delivery of evidence based SLC interventions. This will be done through a ‘Coach, Consult, Co-work’ approach. We will take learning from good practice areas such as the [Stockport’s ‘Start Well’ programme](#).
- We have completed a whole-system mapping exercise of Dudley’s speech, language and communication pathways and identified gaps and the need for a stronger universal offer and *earlier* SLC engagement with families. We need grow joint commissioning arrangements and pool budgets to strengthen Dudley’s whole-system SLC pathway and fill gaps.
- We are currently rolling out the [WellComm assessment tool](#) across Dudley’s early years system to improve universal SLC screening consistency, increase earlier identification, and take action (using the Big Book of Ideas) to tackle emerging SLC needs. The tool was launched in March 2023, and needs to be use as early as possible – at 9-12 months and 2-2.5yrs reviews.
- We Are developing a Home Learning Environment graduated model. This includes (a) the universal roll-out of Dudley STaRT messages (Sing, Talk & Read Together) from the antenatal period onwards, and (b) an evidence-based [Making it Real](#) intervention for targeted infants and families at greater risk of poorer school readiness outcomes.
- We have developed whole-system activities to market and increase uptake of the 2yr-old education offer including improved direct contact with families not taking up the offer, stay & play promotional sessions in targeted communities and harnessing proactive support from health, early help and social care colleagues.
- An ‘*early years transition day*’ event took place in June 2023, with over 60 school staff members. The focus was on getting children ready to transition into school, in respond to the post-Covid challenges reported by primary schools.

2.4 Parenting and Strengthening Parent-Infant Relationships

- As part of FH & SfL funding, Dudley is introducing two new evidence-based interventions to strengthen parent-infant relationships and parental confidence: [Triple P for Babies programme](#) and [Video Interactive Guidance](#). In addition, public health investments have been made to commission and roll-out the [HENRY](#) parenting programme. These interventions contribute to infants being ready to learn and then ready for school.
- FH & SfL investments have been made to advance **infant feeding transformation** across Dudley’s Family Hub Network - to help improve rates and promote earlier bonding, ‘mental representations’ (visualizing the unborn baby), and communication between mum and baby from the antenatal period. Breastfeeding has numerous health benefits for both mother and baby including improved child health, cognitive development and mother-infant bonding.

2.5 Improving Information Sharing and Co-production

- The launch of a [Dudley Start for Life platform](#) and published offer, was a requirement of FH & SfL funding by 31 March 2023. This one-click platform needs further testing, co-production and refinement. However, there is a need to

develop social media approaches to sharing information, as local parents have reported that this works better for them than websites.

- The recent creation of ‘*Dudley Family Voices*’. This includes a FH & SfL Parents & Carers panel and a developing suite of engagement approaches. DFV provides important co-production potential for early language and home learning environment messaging, marketing and intervention offers.

3. Local Barriers and Challenges to Improving School Readiness

- Dudley Borough’s local maternity and early years **system is under strain**, with **workforce shortages** in key services such as midwifery and health visiting, and a drop in early years provision due to financial viability difficulties. This problem is mirrored across the Black Country and West Midlands. When services are under strain, they tend to revert to silo working, which risks poorer communication between partners, duplication of effort and missed opportunities for support.
- Dudley Borough’s early years education provision has not recovered from the impact of Covid-19 (i.e., after staff were furloughed or made redundant). Salaries are historically low in the early years sector, and many staff found alternative work in other sectors after Covid-19 and have not returned to the early years. Nursery settings are struggling to recruit well qualified staff and new entrants to the workforce have a lower level of expertise. Since January 2023, there has been a **net loss of early years providers** in Dudley Borough, including the closure of five nurseries/preschools.
- The minimal legacy of children centre functions in Dudley Borough, and capacity limitations of the Health Visiting service, have resulted in **identified gaps in very early support** and interventions for families in the earliest years.
- In 2022, **some engagement work with parents** in the First 1001 Days was undertaken by Brierley Hill Baby Bank in DY1 and DY2 areas. Parents reported that maternity and early years staff were too busy to provide quality interactions, and that staff morale seemed low. They said they **lacked opportunities to learn more about being a parent** and how to help their infant’s development and progress - starting in pregnancy. Fathers felt marginalised from discussions about their infants.
- Loneliness was a common experience and parents talked about the value of **peer support groups** to help promote their wellbeing and to socialize their infants. However, there were **not enough of these groups** in Dudley Borough (especially ones that appealed to dads), they were not easy to find, and most had a cost that discouraged access when money was reported to be increasingly tight for families.
- Early (Jan-March 2023) ‘*Growing up in Dudley*’ research findings suggested new parents find it **difficult, frustrating or overwhelming to locate the information** they need about local services and support offers in the First 1001 Days.
- The term ‘proportionate universalism’, coined in the ‘Fair Society, Healthy Lives’ Marmot review (2010) refers to the resourcing and delivering of universal services at a scale and intensity proportionate to the degree of need. There is a pressing need in Dudley for **proportionate investments and service allocation** - based on progressive universalism – where services are planned and delivered

in a continuum of support **according to place-based need** and inequitable early childhood outcomes.

- Dudley lacks a multi-agency strategy that harnesses whole-system leadership and provides a shared focus for the planning and delivery of maternity and early years services. The Early Intervention Foundation (EIF) **maturity matrix recommends a strategy that takes account of evidence and up to date population needs**. It should cover child development from the antenatal period onwards, and spans universal, targeted and specialist support for families.
- There are several strategies, delivery plans, reporting and governance arrangements in Dudley relating to maternity and early years that overlap and potentially duplicate. These **need** to be brought together under an **overarching ‘conception to reception’ strategic framework, priority workstreams and multi-year action plan** that ensures whole-system commitment, sustainability, adequate resourcing, accountability and quick decision making at the highest leadership levels.
- An **Early Years Needs Assessment**, completed in March 2023, includes a **number of strategic recommendations** that need to be advanced through the above proposed ‘conception to reception’ strategic framework and forward plan, and through the Black Country Integrated Care Board ([see pg. 13](#)).
- Early years stakeholders are keen for **education to be actively involved** in the development of early years strategic priorities, plans and interventions in Dudley.
- Dudley has a **complicated commissioning landscape**, which has hampered advances in joint commissioning and pooled budgets. There is a need to map the commissioning landscape, funding and interdependencies, to jointly address pathways. Note: The FH&SfL guidance encourages areas to develop a joint-commissioning plan between the local authority and other partners, such as health commissioners, for the services accessed through the Family Hubs.
- More specifically, a deep dive of **commissioning for speech, language and communications (SLC)** is needed to **consider some redistribution of resource** to fill identified early intervention gaps. We need to further clarify the position of the ICB in SLC commissioning, planning and investment needs at a place-based level.
- All elements of the Family Hubs & Start for Life Programme make an important contribution to school readiness and support early educational recovery post-Covid. However, programme funding ends on 31 March 2025, and there is an **urgent need to agree the FH&SfL priorities that must be sustain, and how to fund these as a shared system**.
- There is a need to **secure senior-level, whole-system commitment to maintaining and further developing integrated Start for Life teams** across Dudley’s Family Hub Network. The FH&SfL programme encourages the creation of capacity through new workforce models that incorporate skill mix and facilitate closer working across professions. However, there is no blueprint to integrated working, so a “test and learn” approach is needed over a longer period (extending beyond 31 March 2025) to develop a sustainable model for Dudley.
- There is a need to look at integrated data systems across maternity and early years and **strengthen information sharing across Family Hubs and**

integrated SfL teams - so families do not have to tell their story more than once. It is crucial that any advances made in integration and sharing of information are sustained beyond the FH/SfL funding period (31 March 2025). **Note:** it is imperative that this work aligns with the work being undertaken by the Black Country ICB to develop a One Health Care Shared Record System – to avoid any duplication.

- The Family Hubs' integrated Start for Life teams should be well gather and interpret data on need and uptake of services at a township level - to inform demand management and services planning. However, some existing electronic records have **data capture gaps** for Start for Life workstreams that need to be resolved.
- There is a need for further investment in the skills development of an integrated, multi-agency conception to reception workforce, supported by an **early years workforce competency framework**. We need to learn from places, such as [Greater Manchester](#) and its FH & SfL funded local authorities, that are more advanced in this journey of whole-system early years workforce development.
- Dudley's **Start for Life one-click platform needs further co-production** and refinement, but parents report a preference for social media as a way of seeking local information. There is a need to work in co-production with the DFVs to undertake some user testing of the Start for Life webpages to identify information gaps and areas for improvements. Migration of the Start for Life webpages onto the Dudley Community Information Directory is being considered to improve information access to softer communication assets and support.

DHWP JHWIS Goal - Action Plan (2023-24)

| JHWIS goal: | Improving School Readiness | Year: | 2023-24 |
|--------------------|---|--------------|----------------|
| DHWP leads: | Angela Cartwright, Head of Service - Consultant in Public Health, Children & Young Peoples Public Health Sal Thirlway, Service Director of Education, SEND & Family Solutions | | |
| Outcome(s): | <p>Improved school readiness, resulting in the longer-term goal of increased attainment and attendance:</p> <ul style="list-style-type: none"> • Children across Dudley will achieve a good level of development at the end of reception that is at least similar, if not higher, than the average for the West Midlands. • <i>While it has been improving, Dudley has consistently had a lower percentage (62% in 21/22) of children that are achieving a good level of development at the end of reception compared to the West Midlands (64%) and England averages (65%).</i> • <i>The gap between children on free school meals who have a good level of development at the end of reception and those who are not eligible for free school meals will have narrowed.</i> • <i>Only 45% of Dudley children on free school meals were school ready in 21/22 compared to 66% of children who were not eligible for free school meals.</i> | | |

1. KEY ACTIONS TO CONTRIBUTE TOWARDS GOAL

| Issue | Proposed actions | Owner(s) | Ask of DHWB |
|--|---|----------|--|
| LONG TERM GAINS: Impacting on the “causes of the causes” — the wider determinants of health | | | |
| Interventions done to families rather than with families | Strengthen co-production approaches with families in the earliest years. | AC | Recognise and support ‘Dudley Family Voices’ as a new co-production asset. |
| Silo working, linked to a strained system | Advance integrated or joint commissioning, with investment informed by proportionate universalism. | ST | Support this approach and identify lead commissioners to be involved. |
| MEDIUM TERM GAINS: | | | |
| Need to grow system collaboration and ownership around school readiness | Co-produce a high profile “conception to reception” strategic framework with priority workstreams that help to sets out a robust whole-system vision and 10 years forward plan for Dudley. Priority workstreams to include: <ul style="list-style-type: none"> • Workforce capacity and development • Commissioning & proportionate investment • Integrated provision (including information sharing) • Sustainability of priority FH&SfL investments | ST | Support development of the strategic framework, priority workstreams and forward plan Work with FAFE on exploring new opportunities for workforce development |
| Absence of early year's workforce | Use learning from Family Hubs / Start for Life to develop whole systems approaches to workforce development | AC | HWB members support this approach |

| | | | |
|---|---|----|--|
| competency framework | across early years system, including development of a competency framework. | | |
| Need for smarter communication of school readiness messages to the public | Develop a marketing and communications plan and co-produce approaches to deliver key school readiness messages - including use of community volunteers and champions. | AC | HWB members support this approach and Mar-Comms plan |
| FH & SfL programme funding ends 31 March 2025 | Costing of FH&SfL priority investments and interventions that need to be sustained beyond 31 March 2025, and consider how these could be funded by shared system. | ST | Review findings and facilitate pooled funding across the system |
| SHORT TERM GAINS: | | | |
| Needs whole system approach to improve outcomes | Identify leaders/partners from across the system to be part of a senior-level working group to kick-start the development of a “conception to reception” strategic framework with priority workstreams that help to sets out a robust whole-system vision and multi-year (up to 10 years) action plan for Dudley. | ST | HWB members to nominate leads in their areas with decision making abilities. |
| Ensure system ownership of the programme | Map and review whole-system governance and accountability arrangements for early years (conception to reception period) and wider CYP. Present recommendations to develop/rationalise multiagency governance structure for school readiness. | ST | HWB members to review recommendations and support any proposed governance arrangements |

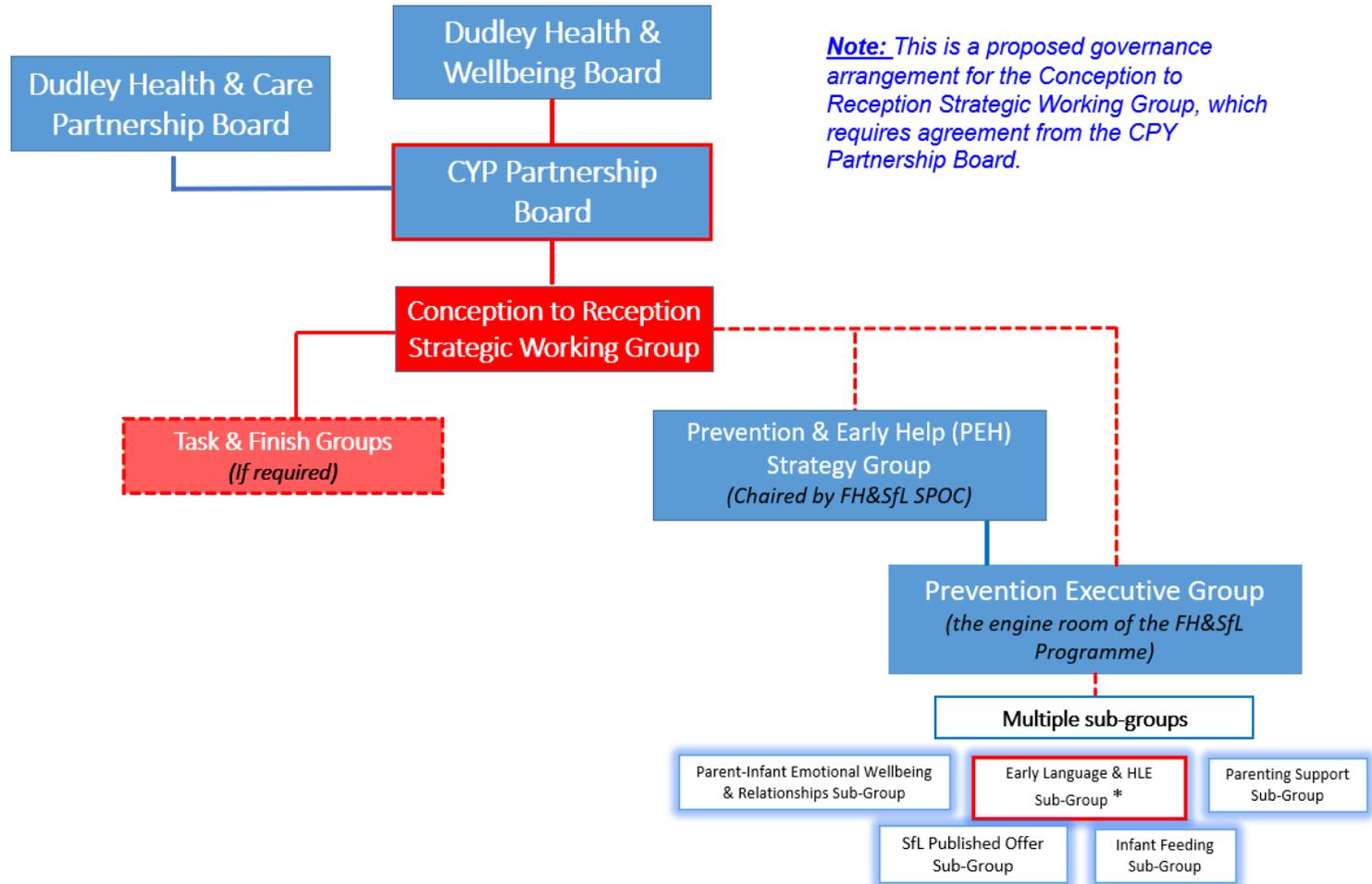
2. APPROACH TO REDUCING HEALTH INEQUALITIES

| Outline | Ask of DHWB |
|---|--|
| Approach to reducing health inequalities in the most deprived areas | |
| <p>Shifting of resource allocation to most deprived communities, using proportionate universalism.</p> <p>Improved libraries offer for conception to reception.</p> <p>Specific targeting and tailoring of SLC social marketing to communities in most need.</p> | <p>HWBB to champion key public messaging</p> |
| Approach to reducing health inequalities for groups with disproportionately poor health | |
| <p>Focused activity on infants and families eligible for free school meals</p> <p>Focus activities on families from ethnic minority backgrounds.</p> <p>Utilise early years transformation and system-change to improve inclusion in early years settings.</p> <p>Preterm baby / neonatal pathway, to ensure effective pre and post discharge support.</p> <p>Strategic commitment and a culture shift toward 'father inclusive practice' within all commissioned conception to reception services.</p> | |

3. MILESTONES

| Milestone (2023-24) | Date to be achieved |
|--|-------------------------------|
| Nominations received for senior leads to join a school readiness working group | September 2023 |
| A senior-level working group established to kick-start the development of a “conception to reception” strategic framework with priority workstreams that help to sets out a robust whole-system vision and multi-year (up to 10 years) action plan for Dudley. | By November 2023 |
| Agreed structure, processes and actions for advancing ‘conception to reception’ priority workstreams | By November 2023 |
| Support mapping of governance arrangements for maternity, early years and CYP (as part of Child Friendly Dudley review process) and a set of recommendations for consideration by CYP Partnership Board/HWBB | By December 2023 |
| Share early findings/recommendations from the ‘conception to reception’ priority workstreams with the CYP Partnership Board/HWBB | By March 2024 |
| Whole system ‘reception to conception’ multi-year (up to 10 years) action plan for Dudley | By June 2024 |
| Maintain Family Hub & Start for Life ‘Early Language & Home Learning Environment; actions and milestones (as specified in the FH&SfL Delivery Plan) | Ongoing (up to 31 March 2025) |

4. Governance diagram



* This is an operational group

5. Key stakeholders (Agreed Working Group members)

Note: Whole-system, multi-agency representation to be secured / agreed with the HWBB

| Name | Job title | Organisation |
|--|---|--------------|
| Sal Thirlway | Service Director, Education, SEND and Family Solutions | DMBC |
| Sarah Dougan | Interim Head of Service, Maternity, Children and Young People | DMBC |
| <i>Additional members to be added.....</i> | | |
| | | |
| | | |

6. HIGH-LEVEL RISKS AND ISSUES

| Risk or issue | Mitigation | RAG rating |
|--|---|------------|
| Workforce shortages in maternity, health visiting and early years services. | Support from FAFE regarding opportunities for skills mix and new workforce | Red |
| Sustaining Family Hubs and Start for Life investments, priorities and interventions once funding ends on 31 March 2025 | Present costings for priorities that need to be sustained beyond 31 March 2025 to CYP Partnership Board / HWBB for shared whole-system solutions / pooled funding | Red |
| Need multi-agency senior-level ownership for this whole-system agenda. | Request support and nominations from HWBB | Green |

Headline Impact Measures for School Readiness

A set of impact measures have been developed for reporting to the Health & Wellbeing Board. These measures include some existing KPI commitments (*see * and ** below*)

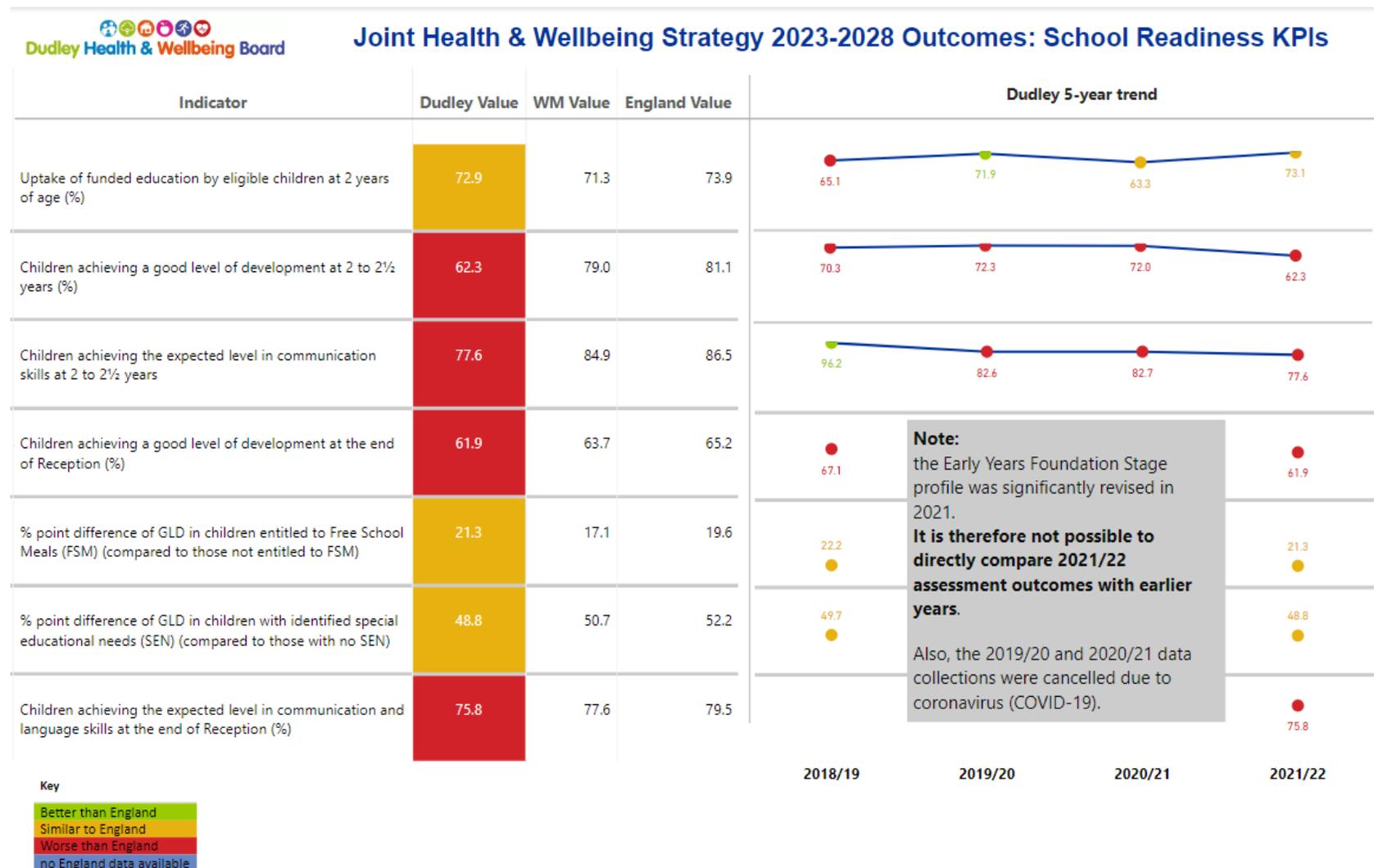
- Every child screened with WellComm by 2.5yrs of age (by 2025)
- Overall GLD in reception in line with or better than West Midland rate (by 2028) *
- Communication & Language GLD at reception in line with or better than England rate (by 2028) *
- Increase uptake in 2-year-old offer to a consistent 85 - 90 % (by 2028)
- At least 95 % of early years settings will consistently be rate 'Good/Outstanding' (Benchmark: Spring 2023 - Dudley 93%, WM 95%, England 96%) (by 2028)
- All *targeted** children are offered graduated HLE intervention, and 70% offered 'Making it Real' intervention complete the programme (by 2025) **
- 3% increase breastfeeding initiation and breastfeeding rates at 6-8 weeks (by 2028) *
- 50% increase in parents accessing evidence-based parenting programmes (by March 25) **
- Annual 10% increase in parents-infants receiving dyadic interventions (from 2024) **

* *Existing outcome measure within Dudley's Place-Based Delivery Plan (part of the NHS Black Country Joint Forward Plan, 2023-28)*

** *Existing outcome measure within Dudley's Family Hubs & Start for Life Delivery Plan 2022/3 - 2024/5 (agreed by DfE).*

Appendix 3: School Readiness Inequalities Monitoring Dashboard

Note: These indicators will be added to the Family Hubs place-based monitoring dashboard for regular review



Joint Health & Wellbeing Strategy 2023-2028: School Readiness Overview

Joint Health & Wellbeing Strategy 2023-2028 Outcomes: School Readiness Overview

| Outcome | Period | Dudley Value | Dudley Count | WM Value | England Value |
|---|-----------------|--------------|--------------|----------|---------------|
| Overarching | | | | | |
| Children achieving a good level of development at the end of Reception (%) | 2021/22 | 61.9 | 2296 | 63.7 | 65.2 |
| Children achieving the expected level in communication and language skills at the end of Reception (%) | 2021/22 | 75.8 | 2814 | 77.6 | 79.5 |
| Children with free school meal status achieving a good level of development at the end of Reception (%) | 2021/22 | 44.5 | 310 | 50.5 | 49.1 |
| Factors relating to the child | | | | | |
| Smoking status at time of delivery (%) | 2021/22 | 9.4 | 313 | 9.8 | 9.1 |
| Low birth weight of live babies, five year pooled (%) | 2016 - 20 | 7.9 | 1417 | | 6.8 |
| Breastfeeding prevalence at 6-8 weeks after birth (%) | 2021/22 | 43.4 | 1513 | | 49.2 |
| A&E attendances (0-4 years)(Rate per 1,000) | 2021/22 | 1061.9 | 19175 | 827.4 | 762.8 |
| Children achieving a good level of development at 2 to 2½ years (%) | 2021/22 | 62.3 | 1899 | 79.0 | 81.1 |
| Children achieving the expected level in communication skills at 2 to 2½ years | 2021/22 | 77.6 | 2368 | 84.9 | 86.5 |
| Reception: Overweight (including obesity), 3-years data combined (%) | 2019/20 - 21/22 | 25.3 | 2375 | 23.9 | 22.6 |
| Special educational needs (Reception year) (%) | 2022 | 12.2 | 455 | 1.4 | 10.7 |
| Received DTaP/IPV booster and at least 2 doses of an MMR vaccine between the ages of 1 and 5 | 2021/22 | 25.3 | 969 | | 80.6 |
| 5 year olds with experience of visually obvious dental decay (%) | 2021/22 | 17.3 | | 23.8 | 23.7 |
| Family factors relevant to school readiness | | | | | |
| Under 18s conception rate / 1,000 | 2021 | 17.3 | 95 | 15.2 | 13.1 |
| Looked after children under 5 (rate per 10,000 population) | 2017/18 | 44.3 | 86 | 39.4 | 34.9 |
| Children in relative low income families (under 16s) (%) | 2021/22 | 27.1 | 16477 | 27.0 | 19.9 |
| Households with dependent children owed a duty under the Homelessness Reduction Act (rate per 1,000) | 2020/21 | 8.2 | 312 | 11.8 | 11.6 |
| Factors relating to the system | | | | | |
| Children receiving a 12-month review (%) | 2021/22 | 93.2 | 3411 | 88.4 | 82.0 |
| Children aged 2-2½yrs receiving ASQ-3 as part of the Healthy Child Programme or integrated review (%) | 2021/22 | 100.0 | 3050 | 92.6 | 90.3 |
| Uptake of funded education by eligible children at 2 years of age (%) | 2022/23 | 72.9 | 827 | 71.3 | 73.9 |
| Free school meals: % uptake among all pupils (Primary school age) | 2023 | 20.8 | 5944 | 23.1 | 19.3 |

Key

| |
|---------------------------|
| Better than England |
| Similar to England |
| Worse than England |
| no England data available |

Joint Health & Wellbeing Strategy 2023-2028 Outcomes: School Readiness

| Outcome | Community Forum Area | | | | | Dudley Value |
|---|----------------------|--------------|---------------|-----------|-------------|--------------|
| | Dudley Central | Dudley North | Brierley Hill | Halesowen | Stourbridge | |
| Overarching | | | | | | |
| Children achieving a good level of development at the end of Reception (%) | 55.9 | 62.4 | 60.7 | 70.4 | 61.0 | 61.9 |
| Children with free school meal status achieving a good level of development at the end of Reception (%) | 41.3 | 44.0 | 50.3 | 45.0 | 35.4 | 44.5 |
| Factors relating to the child | | | | | | |
| Low birth weight of live babies, five year pooled (%) | 8.9 | 7.8 | 7.4 | 8.1 | 6.5 | 7.9 |
| Reception: Overweight (including obesity), 3-years data combined (%) | 26.5 | 30.6 | 23.6 | 22.8 | 23.5 | 25.3 |
| Special educational needs (Reception year) (%) | 14.3 | 11.3 | 13.2 | 10.9 | 11.7 | 12.2 |
| Family factors relevant to school readiness | | | | | | |
| Children in relative low income families (under 16s) (%) | 35.1 | 24.5 | 24.1 | 23.7 | 20.6 | 27.1 |
| Factors relating to the system | | | | | | |
| Free school meals: % uptake among all pupils (Primary school age) | 20.5 | 14.1 | 15.1 | 15.2 | 13.6 | 20.8 |

| Outcome | Primary Care Network | | | | | Dudley Value |
|--|----------------------|---------------|---------------------------|-------------------------------|-----------------------------------|--------------|
| | Dudley & Netherton | Brierley Hill | Sedgley, Coseley & Gornal | Stourbridge, Wollescote & Lye | Halesowen Kingswinford & Wordsley | |
| Factors relating to the child | | | | | | |
| Received DTaP/IPV booster and at least 2 doses of an MMR vaccine between the ages of 1 and 5 | 8.4 | 22.2 | 6.7 | 70.1 | 37.6 | 25.3 |

Key

- Better than Dudley
- Similar to Dudley
- Worse than Dudley