

The Early Years and Childcare Service

Briefing and Networking Sessions

February 2020



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Agenda

- Welcome and Introductions
- Early Education Entitlements Delivery 2020/21
 - KCC Funding Rates
 - The Provider Agreement 'Review and Refresh'
 - Provision for children with SEND
- Children's Dental Care
- Integrated Review at Two
- Early Years and Childcare Provider Association
- Evaluation and close

Early Education Entitlements Delivery 2020/21

Alex Gamby, Head of Early Years and Childcare
Debbie Henderson, Sufficiency and Sustainability Manager
Sue Smith, Equality and Inclusion Manager



Early Education Entitlement Delivery

- Funding 2020/21
- Provider Agreement Review and Refresh
- Provision for Children with SEND

Funding 2020/21

In October 2019, Central Government announced its intention to increase the 2019-20 Local Authority Free Entitlement funding rates by 8p from April 2020 for both the three and four-year old and two-year olds.

Kent County Council (KCC) has taken the decision to pass on the full 8p to providers from April 2020 through an increase in the base rate paid to providers for both three and four-year old and two-year olds.

From April 2020, the base rates paid to providers will increase from £5.02 to £5.10 per hour for two-year olds, and from £4.00 to £4.08 per hour for three- and four-year olds. The supplementary rates and the process for application will remain unchanged from April 2020: Quality (qualified leader) 30p or 90p and Deprivation which is a range from 1p to £1.23.

Provider Agreement Review and Refresh

Proposed changes to existing Agreement dated October 2018

Reasons for changes

To add to and/or clarify wording to ensure:

Children's needs are being met

Providers are confident they are meeting children's needs within the statutory framework

KCC is commissioning The Education People to carry out its duties effectively and in accordance with statutory guidance



Overview of changes

Changes will be made under the following headings:

Consumables

Notice periods

Headcount and claiming funding

Exclusions

Compliance

Termination and withdrawal of funding

Places for children with SEN and off-rolling

Minor amendments

Minor text amendments will be added to the following paragraphs for clarity:

6.5 – add GDPR to end

6.6.1 – add a point that says ‘Providers are encouraged to ask all parents if they think they would meet the criteria to be eligible for FF2.’

6.6.3 and 6.7.1 – updating tables to reflect changing months for Easter

Minor amendments continued

6.6.7 – Add at the end of the paragraph ‘An application would need to be submitted in the normal way in order for MI to do this’

6.8.7 – Add ‘In line with the dates shown on page 7; Section 6.7.1. This will help avoid confusion in April

6.8.10 – change wording to ‘is on roll in the reception class of a state funded school’.

Provision for children with SEND

What are the issues?

- National context
- Local legal clarification
- Ways forward and solutions



Children with SEND: What are the issues?

Increase in number of parental complaints suggest that:

Settings say that they cannot meet the child's need and signpost families to other settings

Settings are excluding children or asking them to leave completely

Settings are considering 'capping' the number of children with SEND in their settings

Settings are not applying for, or using, additional funding streams appropriately



Children with SEND: National context

There is statutory guidance provided by the Department for Education for early education and childcare and the Special Educational Needs and Disability (SEND) Codes of Practice: 0 to 25 years. The legislation surrounding this is the Children and Families Act 2014 plus the Regulations under it and also the Childcare Acts of 2006 and 2016.

All 3 to 4-year old children in England can receive the universal 15 hours of childcare free regardless of whether they are SEN children. The provider must have arrangements in place to support children with special educational needs and/or disabilities (SEND). They must promote equality and inclusion, particularly for disadvantaged families, looked after children, children in need and children with special educational needs and disability.

Children with SEND: Local legal clarification

In relation to SEND children, a local authority has a duty to ensure that there are enough early year options for all families in the area who need it. Early years providers must follow the Early Years Foundation Stage (EYFS) framework which includes having arrangements and support for disabled/SEN and medical conditions.

If a child is 3 or 4 years old and receives free childcare and is in receipt of Disability Living Allowance, the parent can apply for the provider to receive funding through the Disability Access Fund.

Again if the provider has opted to deliver 30 hours free childcare; has available space in its setting and is open all day, then they must take on a child with SEND.



Ways forward and solutions

Be fully prepared for children before they arrive

Access all available support, training and funding

Refer to other multiagency colleagues and complete any requests for information regarding Statutory Assessment

Discussion

How can we come together to ensure :

Children's needs are being met, including those with SEND

Providers are confident they are meeting children's needs within the statutory framework

KCC is commissioning The Education People to carry out its duties effectively and in accordance with statutory guidance

Children's Oral Health

Javeriah Mahmood
Oral Health and Epidemiology Dentist
June Willis-Lake
Strategic Dental Director, Governance

KCC Early Years Workshop Presentation – Feb 2020

Working Together to Improve Children's Oral Health



What is Oral Health?

What do we mean by Oral Health? Why is it so important?

- Oral health is defined as a **standard** of the oral and related tissue which enables an individual to **eat, speak** and **socialise** without active disease, pain, discomfort or embarrassment and which contributes to general well-being.
- In addition to pain and discomfort poor oral health can result in **disruption of family life, loss of sleep, time of work /school, loss of self-esteem** and **limited food choices**.

(Defined by the World Health Organisation (WHO))





7,926 children under 5 admitted into **hospital** for dental extractions



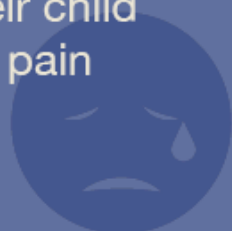
Research about extractions in children in North West hospitals found that **26%** had missed days from school because of dental pain and infection



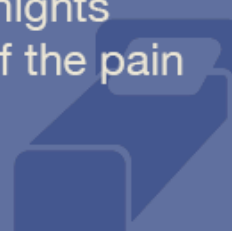
An average of **3 days** of school were missed due to dental problems



67% of parents reported their child had been in pain



38% of children had sleepless nights because of the pain



Many days of work were potentially lost as **41%** of parents/carers were employed



News

UK | World | Politics | Science | Education | Health | Brexit | Royals | Investigations | Matt | More

News

UK 'oral health crisis': 170 youngsters a day have teeth extracted as sugar blamed for epidemic



Save 15



MORE STORIES

- 1 Why are Remainers so happy? Right now, Britain is on course for a no-deal Brexit
- 2 Why the dastardly Remainer plot to steal Brexit from the people is doomed
- 3 Who could replace Theresa May as the next Tory leader and Prime Minister? All the potential...
- 4 Unai Emery is gambling his reputation on sacrificing two of Arsenal's top talents
- 5 She may survive her confidence vote, but Mrs May is still ill-equipped to be Prime Minister



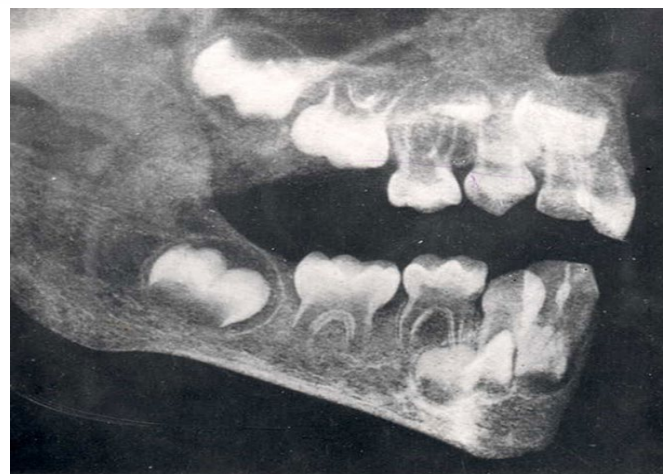
Dental Caries (Tooth Decay)



Importance for Children



Most common reason
for children to be
hospitalised



Nearly a quarter of 5 year
olds have tooth decay

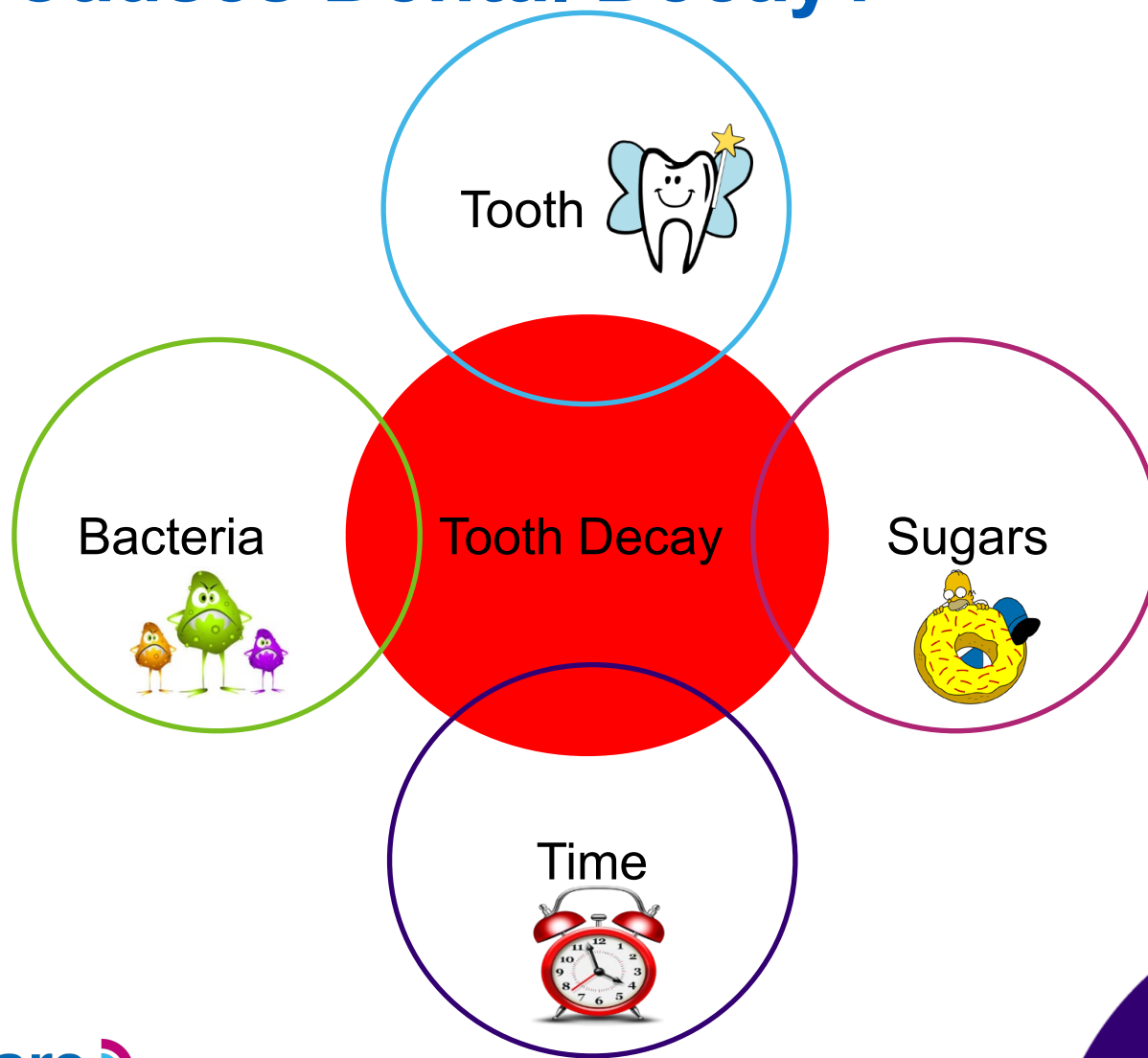




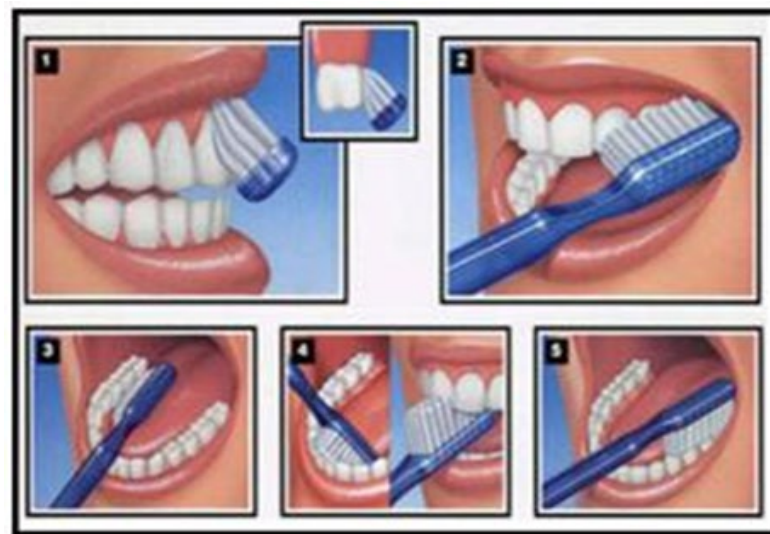
Tooth Decay is Preventable!



What Causes Dental Decay?



Brushing



- Brush twice a day –at night and one other time in the day
- Brushing starts as soon as teeth erupt
- Supervise until at least age 8
- Clean teeth and gums



Toothpaste



Over 1000 ppm of Fluoride
Spit don't rinse

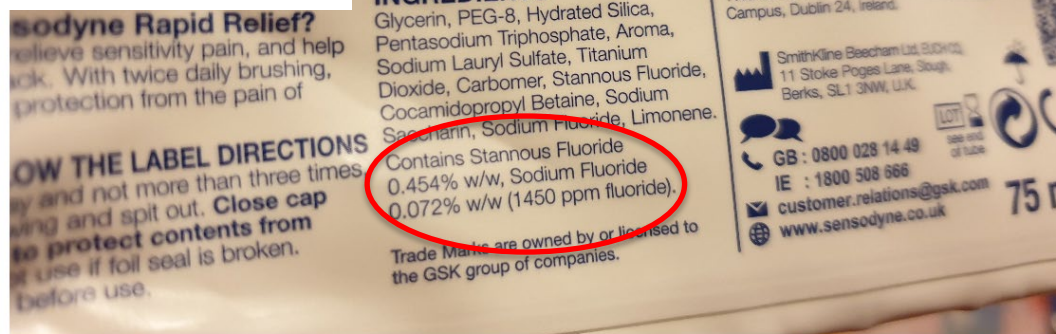


Where to look for fluoride content in a toothpaste package



1350-1500ppm

Fluoride
Sodium fluoride
Stannous fluoride



SUGAR OVERLOAD

BOOST JUICE
BLUEBERRY BLAST
LOW FAT SMOOTHIE
ORIGINAL SIZE
610ML



22 TSP
PER SERVING

3 1/2 TSP
PER 100ML

COCA COLA
600ML



16 TSP
PER SERVING

2 1/2 TSP
PER 100ML

GATORADE
BLUE BOLT
600ML



9 TSP
PER SERVING

1 1/2 TSP
PER 100ML

LIPTON
ICE TEA
PEACH
500ML



8 1/2 TSP
PER SERVING

1 1/2 TSP
PER 100ML

RED BULL
ORIGINAL
473ML



13 TSP
PER SERVING

2 1/2 TSP
PER 100ML



22g=5.5tsp



19g=8tsp



35g=8tsp





we care

NHS

Kent Community Health

NHS Foundation Trust



Diet Advice

Eatwell Guide

Check the label on packaged foods

Each serving (150g) contains

Energy 1046kJ 250kcal	Fat 3.0g	Saturated 1.3g	Sugars 34g	Salt 0.9g
13%	LOW	LOW	HIGH	MED
	4%	7%	38%	15%

of an adult's reference intake
Typical values (as sold) per 100g: 697kJ / 167kcal

Choose foods lower in fat, salt and sugars

Use the Eatwell Guide to help you get a balance of healthier and more sustainable food. It shows how much of what you eat overall should come from each food group.



Water, lower fat milk, sugar-free drinks including tea and coffee all count.

Limit fruit juice and/or smoothies to a total of 150ml a day.



Eat less often and in small amounts

Per day 2000kcal 2500kcal = ALL FOOD + ALL DRINKS

Source: Public Health England in association with the Welsh government, Food Standards Scotland and the Food Standards Agency in Northern Ireland

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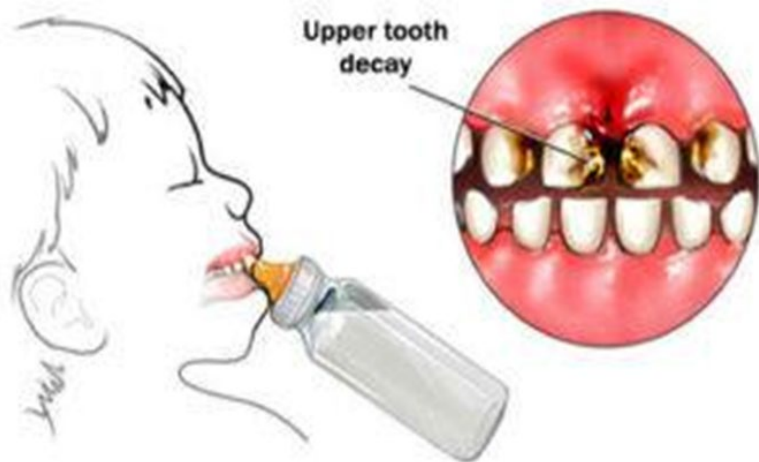
Preventing Dental Decay

- Brush twice daily
- Increase fluoride
- Reduce sugar
- Visit dentist regularly - Recommended by Public Health England that **all children** should visit a dentist **by the age of 1**



Bottle Caries

- 'Bin the bottle' by age 1
- Never dip dummies in sugar/honey
- Introduce sip cups from 6 months



Regular dental visits

- NHS dental visits are free for children until age 18
- Brush as soon as first tooth erupts (about 6 months old)
- Dental checks as soon as first tooth erupts



Breastfeeding

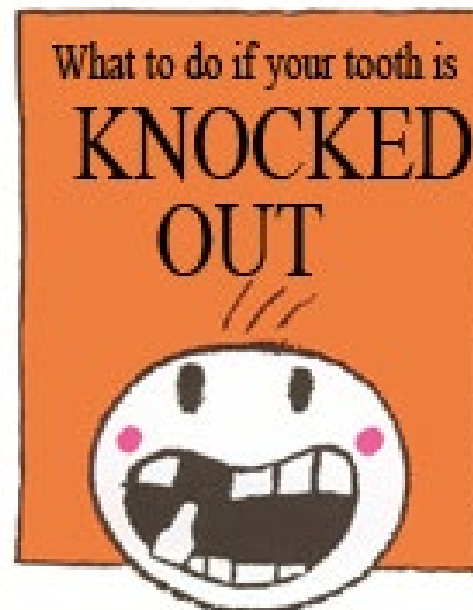
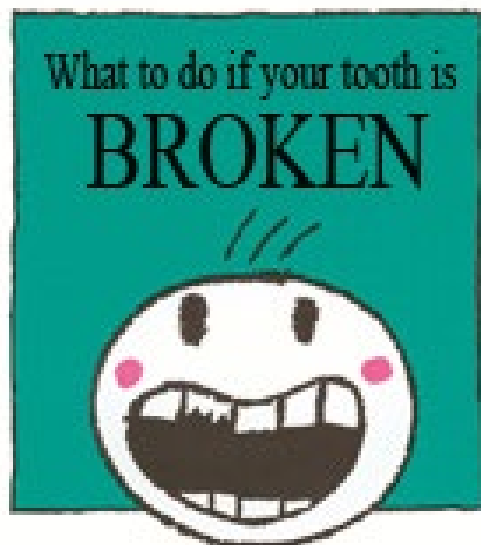
- Breastfeeding up to 12 months is associated with reduced caries risk and also helps with development of the teeth and prevents malocclusion

Teething

- When a baby is teething it can help to give them something hard to chew on such as a teething ring, a crust of bread or a peeled carrot, however it is important to avoid rusks because almost all contain sugar
- For babies over 4 months of age, sugar free teething gel can be rubbed on the gum.



Dental Trauma



Variety of resources available

- Games
- Charts and stickers
- Colours and sounds
- Apps for phones or tablets



Evidence Base

- Delivering Better Oral Health Toolkit
- Public Health England 'Children's Oral Health Improvement Programme 2016-2020'
- Child Smile Scotland



Fewer general anaesthetics for tooth decay



Fewer sleepless nights



Fewer missed school days and days off work for parents



Less pain from tooth decay



Reductions in the numbers of children with tooth decay



A reduction in the oral health gap for disadvantaged families

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Thank you for listening!
Any questions?



Integrated Review at Two

Alex Gamby
Sue Smith



Responding to the local SEND Inspection

Kent's approach to an Integrated Review at 2



The Kent SEND WSOA – Action 9.5

Action

Integrate the two-to two-and-a half-year check between health visitors and early years settings to embed the ‘tell it once’ culture.

Key milestone

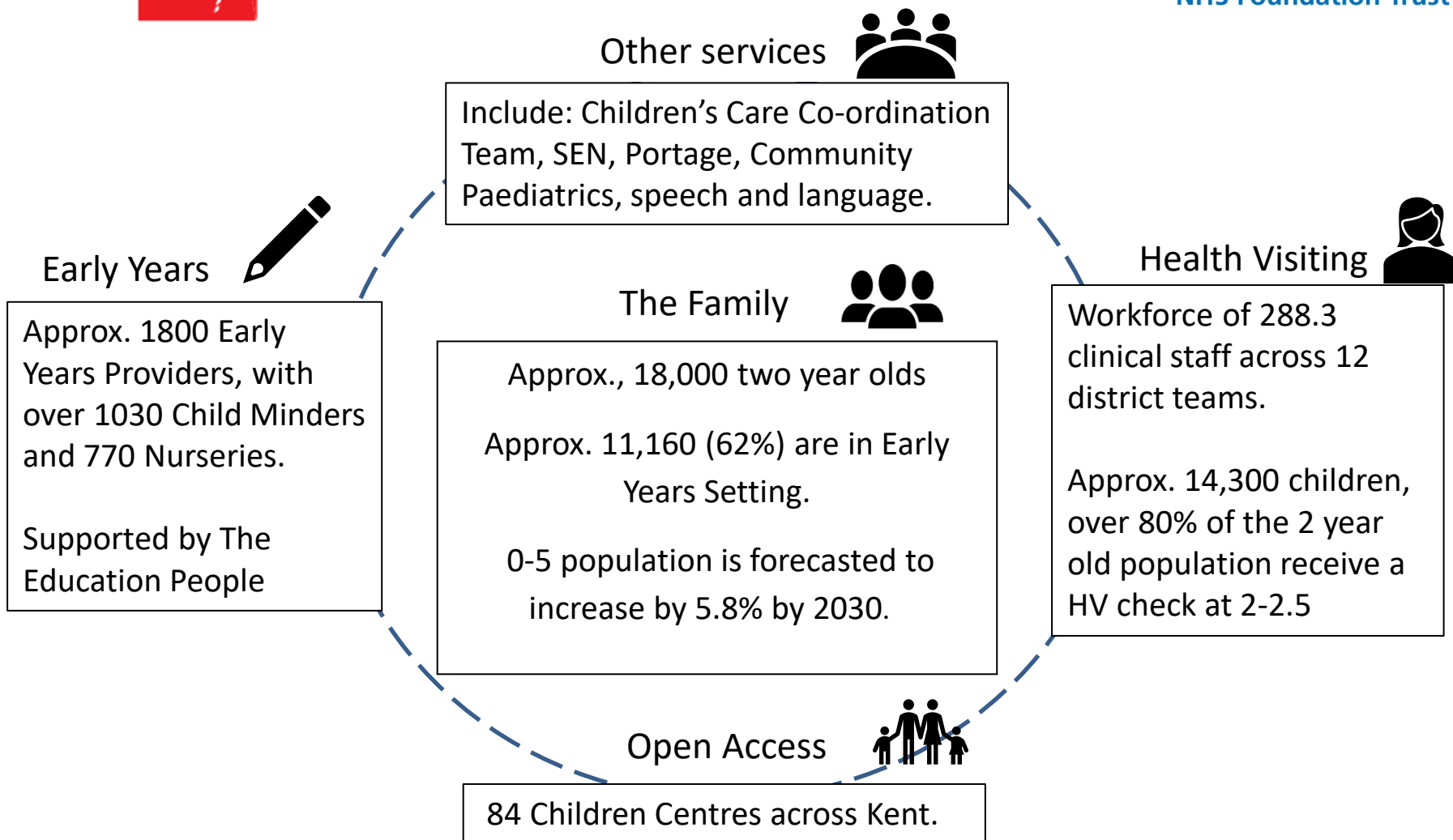
Implement a consistent model for integrated reviews (October 2020).

Statutory Responsibilities and National Guidance

- The Early Years Foundation Stage Framework - progress check at age 2
- The Healthy Child Programme - universal mandated developmental review at 2-2½ years
- July 2011 – Government commitment to explore options for integrating reviews
- November 2014 – 3 models piloted in five areas across the UK. 2 of the models proved viable.
- March 2015 - The National Children's Bureau (NBC) document

“No one approach more universally beneficial than the other” DfE 2014

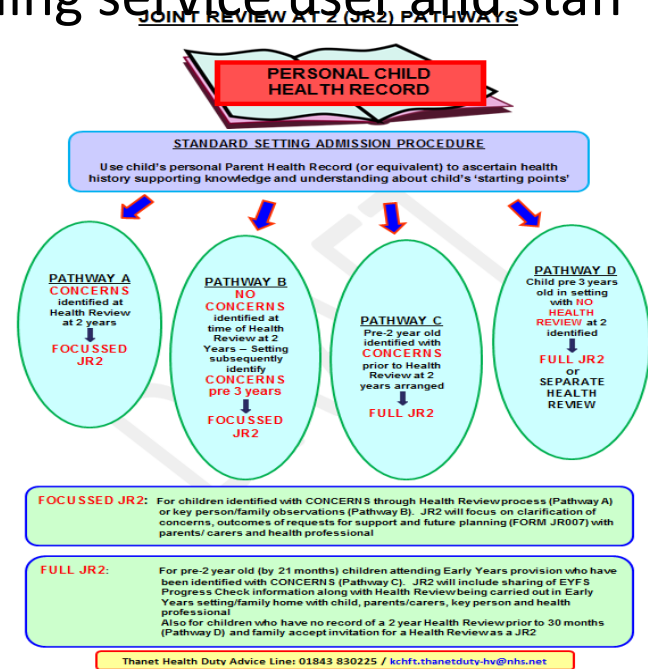
“Local areas will need to identify the best way to conduct the integrated reviews dependent on their geography, population needs and workforce mix.” NCB 2015





The Thanet Pilot

- March 2016 - Phase 1 - universal offer of integrated reviews
- September 2016 - Phase 2 - targeted offer
- August 2017 – Phase 2 Evaluation including service user and staff feedback.
- It was not viable to roll the model on a Kent wide basis due to practical and resource challenges – the work therefore halted
- A process was agreed to improve universal communication between services.



Critical Success Factors





Key constraints and challenges

- The Health Visiting Service capacity – (clinical vacancies 16.5%)
- Early Years staffing recruitment and ratio requirements
- Additional complexities for childminders
- Delivery of the review in session time
- Parent and carer availability during session time
- Additional funding has not been allocated to the project
- National policy and statutory obligations
- Impact on children centre usage/ accommodation
- Over ambitious timescales within the WSA and the need to build in time to codesign the approach
- Rolling out on a Kent wide basis while maintaining business as usual



Recommended Option

- Universally, a consistent process is put in place to improve relationships and communication
- Where needs are identified, a conversation will take place and a pathway agreed. This will result in either:
 - a) an integrated review (meeting) or
 - b) an intervention / referrals

If concerns remain following an intervention an integrated review (meeting) will take place.

- Where a child is in a setting pre 2 years old and needs are identified a integrated review will be offered.



Recommended option - Impact/ benefits

- Consistent process universally – reinforced by early years admissions processes
- Prevents children “falling through the gaps”
- Improves early identification of children with concerns, including those which may previously have been missed.
- Tailored approach to meet individual need including intervention
- Joint follow up
- Separate pathway for those in setting pre 2 with concerns – families access support more quickly
- Existing support will also be considered and, where appropriate, Health Visiting or Early Years involvement in the team around the Family.
- Two-way dialogue between services and family involvement



Recommended option pathways

You attend the
HV and EYs
review

You have an EY
review but not
an HV review
Needs identified

You have an EY
review but not
an HV review
Universal

You have an HV
review but not
an EYs review
Needs identified

You have an HV
review but not
an EYs review
Universal

You were in
setting before 24
months with
needs identified



Recommendations – Immediate Actions make a difference now (Universal and Countywide)

- Promote all HCP reviews at EYs settings and Children's Centre
- Joint communications to EY Settings and HV staff
- Encourage use of PCHR by HVs, EYs and parents
- Explore resources required to support communications
- Amend process for EYs admissions to request a copy of the PCHR
- Details of district HV teams shared with EY setting and updated quarterly
- Encourage use of district HV duty line by EY settings
- HV to record the interventions delivered and success rate

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Thoughts and feedback



What can you do now

- Look at red book on admission
- Request that parents share information in the red book on a regular basis, particularly at age of two if child has been in setting from a baby
- Use contact details shared by HV to check if 2-year check has taken place
- Signpost families to 2-year HV check if this has not taken place
- Use contact details to discuss concerns about a child, with parental permission, if child is very young or EYLIFT process is not the most appropriate course of action

Early Years and Childcare Provider Association

Area Representatives from the Association

Course Evaluation – Don't Forget!

- Please take 5 minutes to complete your evaluation form
- You can access the link now via your mobile phone/tablet:
<https://cpdonline.theeducationpeople.org> and then log into your account
- Click on 'My CPD Online' and 'Events Due Attend & Unauthorised Bookings'
- From here you will be able to locate this event and then click on 'Enter Evaluation'
- Alternatively please log into your account, using the e-mail link which you will receive from CPD online as soon as the register of attendance has been processed
- You will be able to download your certificate of attendance once you have completed the evaluation **and** the signed register has been processed by the Training & Development Administration team
- **IMPORTANT** – Did you sign in? All delegates **must sign the register** and ensure that their school/setting and contact details are completed and up to date.

Thank you and have a safe journey home.



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