

Early Years Consultation

Frequently Asked Questions (FAQs)



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What are the key messages of the 2016 consultation?

1. £4.3m savings have been taken from the early years budgets after the 2015 consultation. This was agreed by elected members after a public consultation in late 2015.
2. The council plans a single management structure for early years. This is in line with other local authorities.
3. Disproportionate savings will come from management but this does not exclude front line staff.
4. There is a strong council commitment to keep 12 Children’s Centres.
5. We have to make savings on buildings.
6. There will be a baseline universal offer – we believe it will be enriched through partnership working.
7. There will be a re-focussed targeted offer, with greater investment in areas of local need.
8. Children’s Centre services will look different. We may not be able to run as many sessions and courses – but this is where the partnership working becomes important.
9. Have your say and help us find ways to do better with fewer resources.

Why is the council making these changes?

Due to an overall reduction in local authority funding the council has to save £4.3m out of the current £9.2m Early Years Budget.

This consolidation will help the Integrated Early Years Service maximise remaining resources by prioritising local delivery through greater investment in areas of local need and by working in collaboration with partners.

The alignment of these services will bring about a service that is ambitious for the children and families of Tower Hamlets and provides career satisfaction to the professionals that work with children and families from birth to five

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What does this mean for me?

It means that residents will be able to access a number of services all under one roof, instead of needing to visit different locations to access services for children from birth to five.

Some targeted services will be delivered differently.

Some staff may move their work location or decide to accept voluntary redundancy.

Will the council close my designated Children Centre?

No. None of the 12 current designated Children's Centres will be closed.

I have a local delivery site where I sometimes attend for some services. Will these still be available?

The council will not be able to afford all the existing delivery sites. Universal and targeted services will be accessible at all Children's Centres. The level of provision of targeted services will be in relation to local need. The public consultation will determine which delivery sites may remain open.

Which services will be affected?

Services in the 12 Children Centres will be redesigned. Universal services will remain. Targeted services will be delivered in response to need.

Due to the significant reduction in the commissioning budget, it is unlikely that the council can continue to operate the 11 community venues the service currently delivers from. These services will be accessible at Children's Centres.

As responses to the draft strategy were collected, it was suggested that the Local Authority Day Nursery service delivery could be commissioned externally. This option is dependent on the outcome of the consultation exercise.

How can I get involved with the process?

You can help shape the Integrated Early Years Service by completing the consultation document. This is available on the council consultation website

http://www.towerhamlets.gov.uk/ign/council_and_democracy/consultations/consultations.aspx

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There is also information on the Integrated Early Years Service website
http://www.towerhamlets.gov.uk/lgnl/education_and_learning/childcare_and_early_years_educ/childcare_and_early_years_educ.aspx

How can I get further details or speak to someone?

You can get further details by attending one of our events which will be held between 20th July and 20th August.

Staff from the Integrated Early Years Service at your local Children's Centre or on 0207 364 4142 will be happy to talk to you and answer your questions if they can't, they will make sure you are put in touch with someone who can help you.

What does "linking childcare more closely with Children's Centres" mean?

If the council directly runs childcare provision it is extremely expensive. This is because council employees are paid on council terms and conditions. In Tower Hamlets, early education and childcare businesses are of extremely high quality. At the moment, the council is assisting private early education and childcare businesses to open additional childcare places. Depending on local conditions, we are helping them find suitable buildings and if necessary supporting them with the process of development and refurbishment. We propose that in future, these new businesses should where possible be set up with close working links with the Children's Centres. We believe this will benefit all concerned. Parents will have access to high quality child care, businesses will have excellent support working in partnership with the Integrated Early Years Service.

What does "re-commissioning the Local Authority Day Nurseries" mean?

We have looked at how other councils run effective early education and childcare in relation to their other early years services. A number of them have commissioned external providers to run the day care element. The type of organisations commonly doing this are from the VCS or are a social enterprise, sometimes a private company.

As the new plans and structures for early years services must be developed by September 2016 and in place after a staff consultation in October 2016, it is most unlikely that all the legal processes required to transfer day nursery staff to new management could be successfully completed in time to make the required savings. This option would be costly, time-consuming and would not ensure the high quality service currently offered.

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What do you mean by "Children's Centres working with schools"?

The Children's Centres already work with schools for play and learning, Every Tower Hamlets Child a Talker and Every Tower Hamlets Child a Mover. In future we would like to explore the possibility of offering Children's Centre services in partnership with more schools. Head teachers are already expressing interest in this idea.

Why can't the maintained nursery schools or a social enterprise run our Children's Centres?

As the new plans and structures for early years services must be developed by September 2016 and in place after a staff consultation in October 2016, it is most unlikely that all the legal processes required to transfer the staff to new management could be successfully completed in time to make the required savings. Last year, the council researched the possibility of alternative delivery models and whether they could deliver the necessary savings within the time frame. This option would not deliver best value within the required time frame.

Delivery models

There is a range of ways to deliver the birth to five services customarily offered through Children's Centres. Centres can be run by the council or can be commissioned externally after a full tender process. Using this route, it is possible to source the services and their local management through health, schools, private companies, charities, the Voluntary and Community Sector (VCS), as social enterprises or through other third sector organisations or private businesses.

Constraints

Note that the LA remains responsible for reach, quality and impact, irrespective of the delivery vehicle. The higher the number of Children's Centres that are commissioned out, the higher the central cost to the LA in terms of quality control and contract evaluation.

Commissioning an existing service outside the LA carries significant additional cost. Including management costs, this would mean a significant increase in central costs over and above the existing base budget. All Centre-based staff would need to be moved to the new provider under TUPE. Redundancy costs and pension costs would typically remain the responsibility of the council. Central staff responsible for quality and evaluation and contract management would still be required. With no direct control over service composition or delivery at Centre level, it would be extremely difficult for officers to effect improvement except during the re-commissioning window (usually every two to three years).

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The commissioning process can result in a range of providers running Centres. This may mean that the offer to families is unclear and inconsistent, and therefore inequitable.

Agency costs may be included to cover staff sickness as part of the bid from the bid from the external organisation. This results in an uplift in costs to the council of 15%.

Training for staff and consistency of performance management cannot be systematic with multiple providers. With a resulting factor of inequality of the standard and quality of service offered.

Benefits of central delivery

- Partnership working across LA directorates and teams creates significant economies of scale, allowing the LA to offer more services for the equivalent amount of money.
- Best value parameters can be met more easily and to a higher level.
- Central delivery allows the LA to ensure that the offer is well communicated to all parents and equitable across all Centres.
- If commissioning is focussed on specific services e.g. psychology, speech and language, contract management and evaluation is simpler and cheaper.
- Staff qualifications and availability can be managed much more effectively with a service managed across the borough. For example, in the case of staff sickness, staff can be re-located easily (with their agreement) to cover.
- Staff quality is higher in an LA run system because staff are paid on Tower Hamlets pay and conditions, rather than at the market rate for childcare or the third sector.
- Monitor and audit functions required by the contract and financial process is more cost-effective and easier where there are cohesive systems.
- Standardisation of measuring reach and impact ensures a cohesive overview across the borough
- Systematic approach to quality assurance across the children's centres remit ensures consistency of quality of what is delivered
- Consistency of safeguarding, Prevent and health and safety duties

Government research indicates that change of delivery vehicle does not affect costs, except that Children's Centres run by schools are significantly more expensive. The government indicates that a cost of around £500,000 per annum per Children's Centre provides good value for money.

Why can't we rent out our buildings to make income?

Shortly after the 2015 consultation we researched this option. Our Children's Centre buildings are suitable either for childcare businesses, VCS, third sector or use by social enterprises. Our

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building costs are too expensive for these types of organisation. Of the 42 buildings in current use, many are rented and so cannot generate income for us.

What is early intervention?

In the Integrated Early Years Service we share the Early Intervention Foundation's vision - for every baby, child and young person to realise their potential and have a strong bedrock on which to build happy and successful lives. We work closely with the group developing the Council's approaches to Early Help. Children's Centres and early years settings including schools are often the first place a parent will attend. It is our first opportunity to offer any help and support that may be needed. It is important that we liaise with Social Care, the Health and Child and Adolescent Mental Health Service to ensure that when needed, parents and their child(ren) are referred promptly to the correct specialist services.

Our purpose across the Integrated Early Years Service is to improve children and young people's life chances and strengthen their resilience and capabilities as early as possible. There is a much greater impact from intervening before problems become more difficult to reverse. It is also much cheaper.

We already effectively tackle the inter-generational cycle of disadvantage and support the next generation to raise strong families of their own by intervening early from conception to young adulthood, creating a positive cycle of relationships and behaviour. We will be able to do it more effectively as an integrated service.

By increasing the focus on effective early help and intervention, we aim to not only support children and their families, but also create a stronger positive impact on wider society and benefit the economy as a whole.

What is Early Help?

Early Help supports the widespread recognition that it is better to identify and deal with problems early rather than respond when difficulties have become acute and then demand action. This will always be less effective and more expensive than intervening early.

Although research shows that the most impact can be made during a child's early years, Early Help is not just for very young children, as problems may occur at any point throughout childhood and adolescence. Early Help starts with early years and ought to be delivered through Children's Centres. The definition is: "...providing support as soon as a problem emerges, at any point in a child's life, from the foundation years through to the teenage years.' (Working Together 2013).

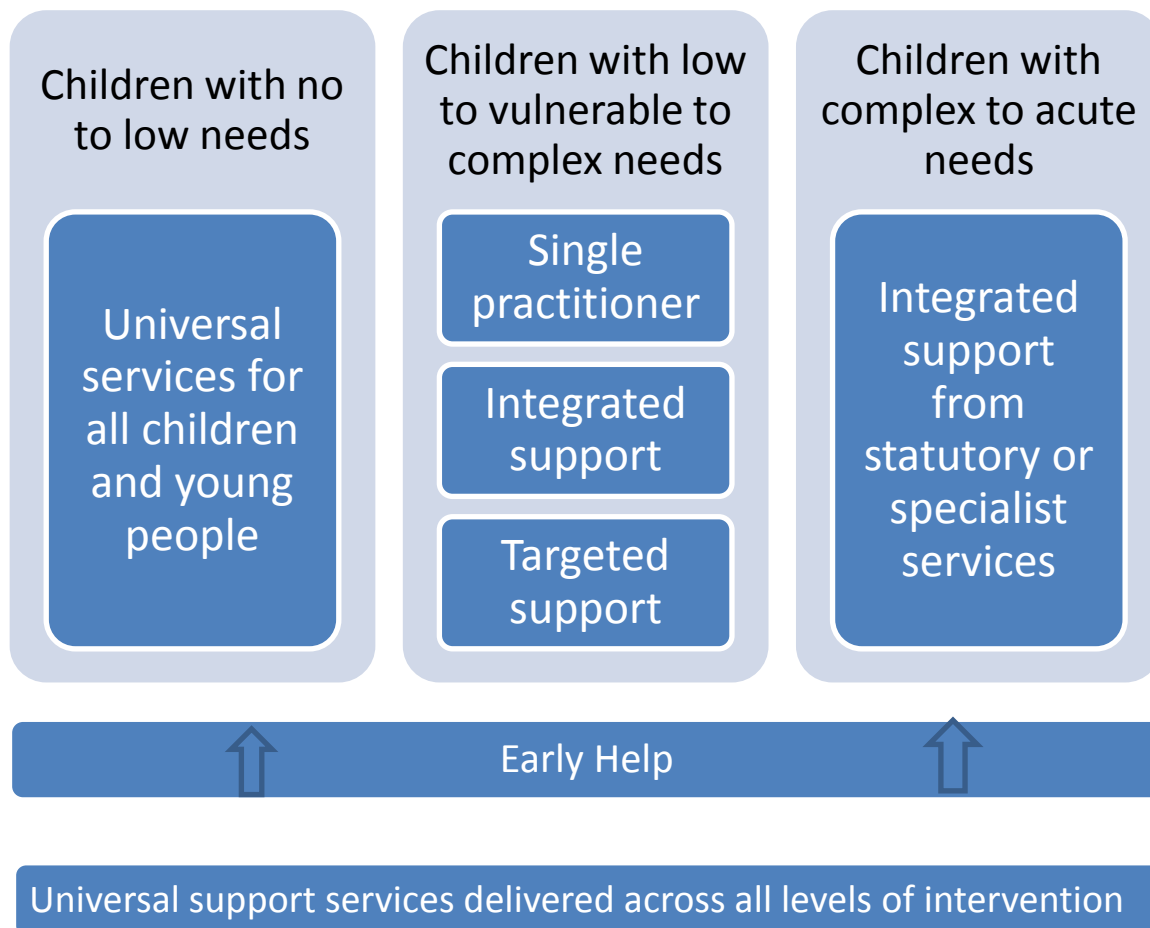
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The most effective way of preventing problems occurring is by building resilience and reducing risk factors via universal and Early Help services. And before that you must have high quality EYFS provision focussed on resilience.

Universal services - delivered in Tower Hamlets through Children's Centres - are essentially a broad set of support which aims to increase the protective factors and decrease the risk factors facing children, young people and families. Universal services are a complex mix of individual, family and community offers which combine to keep individuals safe and well, and include mechanisms for addressing any problems or concerns. The first step is to tackle these informally and quickly, without the need for more specialist support. This is where the cost savings accrue – if you get it right.



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The diagram above describes the Early Help pathway and the span covered by Early Help. Universal services are available for all children and young people. Targeted support is provided usually by a single practitioner¹ to children with 'low to vulnerable' needs.

Targeted integrated support is provided using Early Help Assessment processes to children with 'vulnerable to complex' needs. Specialist services are delivered to children with 'complex to acute' needs. Early Help is mainly linked to the targeted support but can span across the higher end of universal and lower end of specialist services.

Public services often refer to universal or open access services, which are available to all, and which can provide advice, guidance and low level support to families when they need it. This is usually about single issue problems and can often be resolved through information, talking to someone or attending a training course or open access programme. There is usually no referral route. There may be information collected on numbers attending or accessing courses or programmes, and data on wider population outcomes are measured e.g. public health programmes, such as immunisation.

What are universal services?

Examples of universal services include:

- Development checks carried out by health visitors, midwives and all EYFS staff in private, voluntary and independent and maintained settings;
- Healthy child clinics provided by health visitors;
- Healthy Early Years and Healthy Schools programmes;
- Open access groups including 'Stay and Play' in Children's Centres;
- Free early education places for 3 and 4 year olds;
- Schools;
- The management of low level attendance or behavioural issues and a curriculum that develops confident individuals who are able to live safe, healthy and fulfilling lives;
- Open access youth provision such as youth clubs or wider activity such as leisure centres and libraries;
- Immunisation and screening and weight management programmes by school nurses.

Early Help is about putting in place actions to address an issue that has been identified related to an individual child and its family as soon as possible to stop things getting worse. Early Help is about stopping problems escalating. It relies on early identification of difficulties and early action which is targeted and evaluated. It can involve intensive intervention or lighter touch

¹ This practitioner could be a child minder, an early years staff member, a teacher, a support assistant in a school – or be a member of one of the professional groups engaged in the EHH.

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support, and is usually based on a clear support plan, with identified actions, responsibilities and outcomes, which is then regularly reviewed and updated as necessary.

Early intervention is therefore a form of targeted activity, with a specific action being put in place to address a specific issue or combination of issues. To be cost-effective, it has to form part of a continuum of activity in supporting families.

What are Early Help services?

Examples of Early Help services include:

- Free early learning places for disadvantaged two year olds;
- Targeted support by Children's Centres and health visitors including extra help with post-natal depression, parenting, healthy diet, and the Family Nurse Partnership for teenage parents;
- Targeted support by youth services e.g. coaching and mentoring via one to one and group support;
- Targeted support by schools e.g. for a learning mentor to support issues emerging via vulnerable pupil register;
- Targeted support by community and voluntary sector organisations e.g. advice and guidance regarding housing support;
- Family support services e.g. practical support provided by family coaches or home school liaison workers.
- The idea of universal and Early Help ought to be a very simple one: by working together with children and families we can prevent issues occurring and deal with them more effectively when they do.

Why are you extending the service from birth to 11?

The extension from 5 to 11 will be for children and families who wish to use the richer range of services after the transformation is complete. The types of services available are those listed under early help and early intervention.

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Why are you extending the service from birth to 25?

The council has responsibilities in relation to children with special educational needs up until the age of 25. The research indicates that where this provision is strong, the support through Children's Centres can make a significant difference to these children.

What is the targeted offer from Children's Centres at the moment?

a) Family Support Work

In the last two quarters of 2014/15 (Sept 2014 to Feb 2015) the family support team supported 436 families, 269 of them at tier 2 level, providing intensive support for some of our vulnerable families so as to avoid statutory social care involvement. The family support workers also supported 74 tier 3 cases where statutory involvement by social care was already on going. The children's centres completed 209 Common Assessment Forms last year which was the highest in the whole of the local authority including the schools. In general the Common Assessment Form scores showed a positive impact for families.

There are eight Community Development Officers across the borough. Their role is to support parents:

- To be active citizens within the community through volunteering, parent forum, being involved in community projects
- To access advice and information related to benefits and training that will develop skills and qualifications to improve their economic stability and chances of employment
- 571 carers have been supported on a 1-1 basis through pathways to employment

Of these cases:

- 36% were from workless households
- 39% were on low income
- 27% were lone parent
- 40% were receiving out of work benefits

Parents/carers could have stated more than one of the above options.

Outcomes for those accessing pathways to employment:

- 56 parents/carers gained employment
- 58 volunteered directly with the children's centre

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- 188 accessed training provided by the children's centre to support the journey to employment
- 937 referrals were made to external organisations such as benefits advice, employment agencies, external training
- 333 parents/carers were involved in the parent forums and locality stakeholder groups, of these 72 were also being supported through the pathways to employment programme.

b) Family Nurse partnership

Family nurses use programme materials and methods to enable young mothers (and fathers) improve:

- Pregnancy outcomes, so that their baby has the best start in life
- Their child's health and development by developing their parenting knowledge and skills
- Parents' economic self-sufficiency, by helping them to achieve their aspirations (such as employment or returning to education)

Family nurses do this by supporting young mothers and fathers to enable them to:

- Build positive relationships with their baby and understand their baby's needs
- Make the lifestyle choices that will give their child the best possible start in life
- Build their self-efficacy (belief and ability to plan and achieve their goals)
- Build positive relationships with others, modelled by building a positive relationship with the family nurse.

c) Health Visitors

Health Visitors are now based in Children's Centres². The Health Visiting Service works across a number of stakeholders, settings and organisations to lead delivery of the Healthy Child Programme 0-5, a prevention and early help and intervention public health programme that lies at the heart of the universal service for children and families and aims to support parents at this crucial stage of life, promote child development, improve child health outcomes and ensure that families at risk are identified at the earliest opportunity.

This includes safeguarding children, reducing violence against women and girls and working to promote health and development in the '6 high impact areas' for early years³:

- Transition to parenthood and the early weeks
- Maternal mental health (perinatal depression)
- Breastfeeding (initiation and duration)
- Healthy weight, healthy nutrition and physical activity
- Managing minor illness and reducing hospital attendance and admission
- Health, wellbeing and development of the child age 2 – 2.5 year old review (integrated review) and support to be 'ready for school'.

² Mobilisation of the contract took place on 01.04.16.

³ <https://www.gov.uk/government/publications/commissioning-of-public-health-services-for-children>

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The service is led by Health Visitors and supported by skilled teams with a range of expertise: nursery nurses, family health advisors, and health visiting assistants. Health Visitors are qualified nurses or midwives who have an additional diploma or degree in specialist community public health nursing enabling them to practice autonomously and exercise professional judgement to improve outcomes for children and families. In Tower Hamlets Health Visitors are also supported by bilingual support from within the Health Visitor teams.

As public health practitioners, health visitors also contribute to health needs analysis using tools such as the Early Years Profile⁴. They also work alongside other professionals and agencies including maternity services early years practitioners, voluntary organisations, peer supporters, Family Nurse Partnerships, GPs and primary and secondary care providers as well as children's centres and early years staff to ensure a holistic service focused on improving health outcomes, reducing inequalities at individual, family and community level. In Tower Hamlets this would include other early years public health services include the UNICEF Baby Friendly programme, breastfeeding support workers, the child and family weight management service, healthy eating and active play programme and the pilot parent and infant wellbeing programme.

Key multi-agency groups with responsibility for different aspects of maternal, early years and child health in Tower Hamlets include:

- Tower Hamlets Health and Wellbeing Board
- Children and Families Partnership Board (and the Maternity, Early Years and Childhood Commissioning and Delivery Group), the Clinical Commissioning Group, the Children and Young People Programme Board
- CCG Maternity Programme Board
- Maternity and Early Years Health Improvement Group
- Reducing violence against women and girls forum

d) Employment

Individual support for families related to employability and financial stability:

- Digital inclusion;
- Training and skills;
- Information and advice on benefits;
- People who have no recourse to public funds;
- Job searches;
- Employability support;
- Improved access for all residents to support on the journey to employment;
- Improved systems to identify individual needs on the above;
- Welfare reform sessions delivered across the borough;

⁴ This is different from the EYFSP.

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- Employment fairs in each locality on a quarterly basis;
- Co-location of services, overall reductions in estate costs;
- Using one data system creates a more effective mechanism for tracking progress and ensuring early help and intervention /appropriate support to be put in place;
- Employment officer/Community Development Officer based in housing options team to ensure that residents attending a meeting with housing have access to support related to employment. Single point of access;
- Mapping English for speakers of other language, literacy and numeracy provision across the borough and all organisations.

e) Health services

Individual support for families' health related behaviours:

- Breastfeeding
- Family diet, Healthy Start initiative, weaning
- Smoking, alcohol, substance misuse

Health promoting sessions including:

- Active play
- Weaning and healthy eating;
- Potty training;
- Parenting;
- First aid/minor ailments.

Early detection of – and action to address: -

- Developmental delay;
- Ill health;
- Concerns about safety;
- Maternal mental health issues;
- Attachment issues.

Wider support:

- Literacy /numeracy;
- Benefits advice;
- Employment support.

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What is the targeted offer from the Integrated Early Years Service with regards to inclusion at the moment?

The Early Years Inclusion Team provides services to support early intervention for children aged birth to 5 years with additional needs including disabled children and children with special educational needs (SEND). The team consists of 3 services; the Area Inclusion Coordinators who provide inclusion support and advice to early years settings, the Portage Intervention Service providing home learning and support in focus groups in specific Children's Centres and the Early Intervention Support Worker who helps parent to access services and day care. They work with children, families and early years practitioners in the following ways:

a) Early intervention (Early Help) and inclusion

- Ensuring children with additional needs/SEND access early intervention and early help which is crucial to their future development and school readiness
- Advice and planning to support families in accessing services and childcare for children with additional needs/SEND
- Portage intervention to support parents in implementing interventions through home visiting and focus groups in Children's Centres
- Advice and planning with early years setting's Inclusion Coordinators to ensure early intervention and early help for children with additional needs/SEND
- Support for practitioners to develop skills in early identification, planning and review
- Coordination of information provided through the Two Year Old Funding to facilitate transition planning for children identified with additional needs/SEND
- Advice to support parents and practitioners in implementing appropriate interventions to meet children's needs

b) Person centred approach which places the child and family at the heart of identification and planning

- Valuing the child and family's views, experience and knowledge in order to effectively meet children's needs. This also supports home learning through discussion and planning with parents
- Training, modelling and advice to support practitioners in embedding Person centred planning for children with additional needs/SEND

c) Integrated services (working in partnership with other services such as Speech and Language Therapists and Health Visitors)

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- Implementing the Two Year Old Integrated Review between families, health and early years practitioners to ensure early identification, intervention and early help for children with additional needs/SEND
- Liaison with health services, Educational Psychology Service, advisory teachers, social care and the voluntary sector to support coordination of services for children with additional needs/SEND
- Coordination and planning for children's transitions through a Person centred approach to ensure school readiness -
- Contributing to the improvement of ICT system to facilitate information sharing across services

For further information on the Early Years Inclusion Team see:

http://www.towerhamlets.gov.uk/ignl/education_and_learning/childcare_and_early_years_educ/Early_Years_Inclusion.aspx

Did the Council close Queen Mary Day Nursery?

Services at Queen Mary Day Nursery were suspended temporarily. Recently, the landlord has requested repossession of the building. This uncertainty means we cannot currently offer places on this site. However, there are sufficient free childcare places in the area for parents who wish to use them. These places are all of good or better quality.

Why is the Council increasing rents for voluntary sector early years services?

The Council is reviewing rents paid by occupants of Council owned buildings. A small number of these individuals and organisations provide services birth to five. As very similar groups also occupy Council buildings and pay a reasonable agreed rent, taking into account the cost base of private childcare, it is important that the Council ensures there is equity in terms of the rent required.

Why can't you use the commissioning budget to support the Children's Centres?

The Early Years Service has no commissioning budget. The Children's Centres commissioning budget has been reduced by 81% 2011-16. The services currently commissioned are for educational psychology support and speech and language support.

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What is “hub and spoke”?

The hub and spoke model for Children’s Centres is used in inner-city areas like Tower Hamlets. When Children’s Centres were originally set up it was not always possible to locate all services on one site. Sometimes called “virtual” Children’s Centres, the hub and spoke model clusters services in a geographical area for convenience of delivery and attendance. This means that a Children’s Centre may consist of several separate sites.

Is this the same as “a Children’s Centre operating as a hub”?

No. This is the approach described in Tower Hamlets Together (Early Years Vanguard). Many of our Children’s Centres already work closely with surrounding schools and childcare businesses. We want to extend this approach and make it consistent across the borough. We also want to include better partnership working with health professional and employment advisers.

What is the Early Years Vanguard?

Tower Hamlets Together (previously known as ‘Vanguard’)

Tower Hamlets Together (THT) is a partnership of local health and social care organisations with an ambition to improve the health and wellbeing of people living in Tower Hamlets by working more closely together to improve the health and wellbeing of local communities by providing services in a more coordinated way to reduce duplication and improve the overall experience and outcomes for the patients who need them.. The organisations involved are:

- Barts Health NHS Trust
- East London NHS Foundation Trust
- Tower Hamlets GP Care Group
- Tower Hamlets Council
- Tower Hamlets Clinical Commissioning Group (CCG)

There are three high level strands to the THT programme:

- Improving services for children and young people
- Improving services for adults, particularly those with a long-term health condition or who are vulnerable to illness

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- A focus on prevention and supporting people to lead a healthy life

1. Improving the health and wellbeing of children and young people

We believe that every child should have the best possible start in life. By focusing on prevention and providing access to high quality, better coordinated services, we aim to improve physical, social, emotional and cognitive development, improve life-long health and wellbeing and mitigate the effects of deprivation.

Under this programme there are four 'pillars'

- **Integrated early years services** – developing children's centres as hubs with a focus on improving emotional health and wellbeing, nutrition (oral health and healthy weight), self care (minor ailments) and early identification of developmental delays and additional needs
- **Children with complex needs** – this includes The Bridge 'Virtual ward', transition - extension to under 18 year olds and modelling the impact on children with moderate risk to enable self care
- **Specialist Children's Community Health Services transformation** – collocation of services in a Children's Resource Centre, Ages and stages model and Primary service provider model (Buurtzorg)
- **Model innovation** - further development of the model in 2017/18 – includes further integration with acute care (A&E outreach, PRAC, rapid access), Delivery of health care in schools, Alignment with EPCT CHS model, Hospital at Home CCNT and Pathways with voluntary sector