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About this Guidance

Flying Start is the Welsh Government targeted Early Years programme for families with children under 4 years of age in some of the most disadvantaged areas of Wales.

The core elements of the programme are drawn from a range of options that have been shown to influence positive outcomes for children and their families. These include:

- free quality, part-time childcare for 2-3 year olds;
- an enhanced health visiting service;
- parenting support; and
- support for speech, language and communication development.

This guidance should be read in conjunction with Welsh Government guidance relating to Flying Start, including the Flying Start Strategic Guidance and other specific guidance relating to the programme’s core elements. These can be found at:


The guidance will look at the following transition points for children within Flying Start:

- transition into the Flying Start programme;
- transition from home into Flying Start Childcare;
- transition from Flying Start Childcare into the Foundation Phase;
- transition from the Flying Start health visitor to school nurse; and
- transition out of Flying Start and signposting to other support i.e. Families First, and Integrated Family Support Services (IFSS).

Throughout this guidance the term ‘parent’ has been used as a short hand to include mothers, fathers, carers, foster carers, adopted parents, step-parents and grandparents.

Audience

This guidance has been written to support those working with children and families receiving Flying Start services and who have a responsibility for planning and managing the transitional stages outlined above.
1. Introduction

Transitions are key events or processes of change over the life course. It is the process of change, for example, that is experienced when children (and their families) move from one setting to another (e.g. from home to Flying Start childcare) or move from the responsibility of one health professional to another (e.g. health visitor to school nurse). It spans the length of time it takes children to make such a change (e.g. from pre-entry visits and settling in to when the child has become a fully established member of the new setting).

Prior to the 1990s, transitions research tended to focus on a ‘one-point’ event (e.g. first day at school), however transitions are now viewed, not as an event, but as a process that is shaped by social structures and processes and involve children, practitioners and parents together.

Researchers suggest that there are two types of transition situation: horizontal and vertical (Vogler et al., 2008; Firth et al., 2009). Horizontal transition refers to the less formal changes in children’s lives and routines that may occur on an everyday basis. This is where, for example, children move between different spheres of their lives (e.g. moving between formal and informal situations; such as going from home to the childcare setting each day, or playing outside informally with friends, to sitting on the mat for a formal activity with a member of childcare staff). In each case children will need to interpret what is required of them in every different situation. The childcare setting might, for example have different expectations of children in terms of routines and rules and what constitutes ‘acceptable’ behaviour than the child’s parents. Parents may not have set routines for their child, they might not expect their child to sit in any particular place to eat, or put toys away when they have finished playing with them.

Vertical transitions are transitions which constitute a major change to a child’s everyday routine, for example starting formal childcare or starting school for the first time. It is these vertical transitions which are the main focus of this guidance. However, horizontal transitional changes, also shape children’s experience of vertical transitions and may affect their well-being. This needs to be considered during the settling-in process when children are adjusting to what behaviour is expected of them in each different situation or for each activity and the associated rules (e.g. putting on an apron when painting, sharing toys when playing, sitting down to eat, where to hang coats etc). If a child is unsure of the rules or norms of the setting it may prevent them from accessing learning opportunities.

Research suggests that children’s experiences can be enhanced when staff actively support children to ‘fit in’ and are aware of the impact of their practices on how children and their parents become ‘inducted’ into a new environment. They can also keep in mind the way the child’s home environment may shape a child’s behaviour and the ease with which they adapt to every day activities and social interaction (Fabian and Dunlop, 2002; Vogler et al., 2008). Two studies looked at entry from home into early childhood settings as an experience of socialisation (cited in Fabian and Dunlop, 2007). The studies found that, after an initial period when the new children appeared to lack the necessary information about the rules and ways of doing things, they very quickly learned to participate in high levels of social interaction.
These studies suggest that time for socialisation is an important element in children’s integration into a new setting and this should be appropriately supported by adults, so that integration into the group is successfully achieved.

Before they reach the age of four, young children may have faced several transitional changes, in their personal circumstances, and transition from different carers or childcare providers. This period in a child’s life is acknowledged as a period of intense change for children, which can have implications for current and future well-being and outcomes (Vogler et al., 2008). During the transition to new settings children will be leaving their ‘comfort zone’ and facing the unknown: a new culture, place, people, roles and identity (Dunlop and Fabian, 2007).

Some children will be better at coping with change than others. Children may respond with confidence, but for many the experience of transition can be daunting and unsettling (Drake, 2006). All children are unique. They develop at varying rates and have a wide range of personal characteristics, skills, abilities, backgrounds and experiences. Some may find it difficult to adjust to new rules, routines and a new environment. Like adults, children often find transition and change stressful, which can have a significant impact upon their emotional well-being and ability to engage positively in learning and social interaction. It may also lead them to exhibiting challenging behaviours such as unintentional wetting or being clingy (O’Connor, 2006; Drake, 2006; Fabian and Dunlop, 2002; Welsh Government, 2008; Vogler et al., 2008).

Children’s ability to cope with change in the short and long term is likely to be affected by their first experiences of transition and the way it is handled. Children are likely to feel more confident about the transition into a new setting if changes happen gradually (O’Connor, 2006).

The voice of the child

Research acknowledges that even young children are active social learners who are capable of understanding and contributing their opinions on a range of issues affecting them (Fabian and Dunlop, 2002; Vogler et al, 2008). Young children are able to communicate their feelings and wishes from birth, initially through sounds, gestures, actions, and later through speech. General Comment 7 of the Committee on the Rights of the Child (cited in Vogler et al, 2008) emphasises this point:

“Research in the last decades has impressively confirmed that children from an early age are explorers with boundless curiosity and that they are judicious decision makers and social actors each with their own unique goals, interests and ways to communicate feelings and intentions” (page 5).

Children’s capacity to participate may be influenced by the level of adult support provided and the value and respect given to their perspectives. Children’s views, preferences and concerns can be captured by listening to their ideas and experiences as a part of daily routines and learning opportunities. This can be through observation, conversation, role play or through interpreting children’s drawings. The weight given to a young child’s views needs to be dependent on their level of understanding of an issue and the risk associated with the decision involved.
Research shows, however, that young children can be given an opportunity to participate in decisions that affect them in their daily lives (e.g. what play activity they want to do; whether to play inside or outside) and to express their concerns regarding vertical transitions (e.g. what snacks will be provided at the new setting; will my friends be moving with me?) (Bernard van Leer Foundation 2004; Vogler et al., 2008).

Close observation is a key factor in finding out what activities children enjoy and whether they are settling into their new environment. Children who exhibit behaviour that seems negative or challenging may be trying to communicate their frustrations, lack of understanding or fear in a new situation or environment. It is important therefore to take time to listen and observe children and find ways to help them express themselves (Essex County Council, 2012).

Effective transitions

Good practice emphasises the importance of transitions being managed and planned carefully with a consideration of children’s needs and respecting parents as partners in supporting children’s learning and transitions. Successful transitions are dependent on a commitment from all staff involved in the process to develop effective communication systems and information sharing protocols.

Transitions are of the highest quality when:

1. **Processes and procedures are supportive and inclusive**

   - transitions are made a priority and those managing Flying Start services and settings give special consideration to periods of transition and develop an ethos that encourages the gradual and supported integration of children and families;
   - transitions are seen as a process, not an event – transitions planning is rooted throughout practice and not only during a specific week or on a specific day;
   - sufficient time is allocated to plan for and ensure smooth transitions (e.g. for preparing staff/parents/children; for staff to access, read and take notice of all the information passed to them by parents, other professionals and previous settings; and time to share information and to identify and plan additional support for vulnerable families);
   - information is shared proactively and appropriately with and among partner organisations. Where this involves the sharing of personally identifiable information a WASPI compliant information sharing protocol should be developed and implemented;
   - Welsh Government Guidelines on safeguarding children are followed at all times and all Flying Start practitioners are able to recognise safeguarding issues and when and to whom to refer them to; and
   - a coherent pathway (route or journey) of support available for parents and children is clearly articulated.
2. The child and their family is placed at the centre of transitions planning

- children are placed at the centre of transitions planning and are treated as individuals, recognising their need to feel secure and confident at every stage of transition;
- it is recognised that some children will be more vulnerable than others at times of transition;
- the specific and additional needs of children and families are recognised and planned for;
- the needs of children and families from different ethnic, cultural and faith groups are respected;
- children are prepared for change – the child is more likely to feel secure and settle more easily into the new environment when they are familiar with people, places and routines (e.g. children are given a chance to meet staff and visit settings and take part in activities there); and
- supporting material (such as a One Page Profile or an ‘All About Me’ type information card) is provided to give a deeper insight into the child such as information about important adults in their life; best ways to support them; what they are learning to do and what distresses them.

3. Positive relationships are established, and all adults who are involved with the child and family work closely together

- all those working with children and families in Flying Start have a clear understanding of the transition process;
- all adults who are involved with the child and family work closely and ensure that effective and ongoing communication takes place;
- there is a clear procedure for sharing information about children and families;
- effective communication is developed across the Flying Start team (e.g. through team meetings, shared information systems and resources and joint training);
- effective communication and partnerships are developed with external agencies;
- parents are fully involved in the transition process and time is set aside to develop positive supportive relationships with parents and address any concerns they may have; and
- a variety of methods are used to communicate with parents e.g. home visits, face to face meetings; groups; open days, parties, outings, calendars, leaflets, newsletters and social media.

4. Environments are welcoming, accessible and non-stigmatising

- staff create a warm, non-judgemental and inclusive atmosphere in all settings and groups;
- staff adopt a strengths based approach to working with families;
- written information has a welcoming, friendly tone, is visually attractive, uses positive images and language and promotes the universality of the programme;
- all children and families using settings are valued and welcomed; and
• all settings promote equality of opportunity and promote a positive attitude to diversity.

5. There is continuity in a child’s care, development and learning

• there is continuity in children’s care, development and learning across the Flying Start programme e.g. consideration is given to a child’s holistic needs at every transition stage;
• Flying Start staff provide consistent messages about what support is available, when it is available and who is delivering it; and
• there is continuity when children and families move between the range of services and programmes with which they may engage.

2. Core Purpose

The core purpose of managing transitions effectively is to ensure that all Flying Start children and their parents will experience practical and emotional support through all transition stages to:

• facilitate continuity in their care;
• support progression in their development and learning;
• enhance their well-being; and
• ensure that they have a positive experience of change.

Transition should be a pro-active, planned process that is flexible enough for individual needs to be met. Effective transitions are largely governed by a commitment from all Flying Start practitioners to develop positive communication links and to share information sensitively and with care. Those managing transitional stages should take into account a child’s situation, development and needs.

Trusting and respectful relationships with parents are an integral part of the transition process and help facilitate the seamless transition of children.
3. Principles and Expectations

3.1 Commitment to the principles of the UNCRC

The Welsh Government is committed to the United Nations Convention on the Rights of the Child UNCRC\(^1\) as a basis for its policy with children and young people, as encapsulated in the Rights of Children and Young Persons (Wales) Measure 2011\(^2\). The UNCRC is an international agreement that promotes the human rights of children under the age of 18.

The UNCRC provides a framework for ensuring that children are supported and empowered to lead a happy, safe and fulfilled life. The core principles of the UNCRC are non-discrimination, a commitment to the best interests of the child; the right to life, survival and development and a consideration of the voice of the child.

Support for children through every stage of transition should reflect the rights of the child set out in the UNCRC:

- ensuring the child’s rights for basic care and survival (Articles 6 & 27);
- play and education (Articles 28, 29 & 31);
- protection from abuse, neglect and degrading treatment (Articles 19, 24 & 37); and
- a right to have a say in matters affecting them as their abilities develop (Article 12).

Being committed to children’s rights is about having a focus on the best interests of children, taking into account all the factors that may impact their well-being at every transition stage. It is also about offering inclusive and appropriate support, as well as ensuring that children are protected from harm and feel safe. When considering and planning for transitions children should be placed at the centre and seen as important and unique, with their own interests, skills and talents.

The UNCRC also recognises parent’s unique and important role. It contains a number of provisions relating specifically to parents (Articles 5, 14, 18, 27 and 29). It acknowledges that they may need support from the State in fulfilling their role.

Standard 8.1 of the National Minimum Standards for Regulated Childcare (Welsh Government 2012b) states that the registered person is responsible for ensuring that:

“Staff are aware of the United Nations Convention on the Rights of the Child and its implications for their work and their interaction with children.”


3.2 Information sharing

Sharing personal information effectively and appropriately underpins partnership and integrated working and service delivery. It is a key element in providing a holistic and seamless service to meet children’s needs and to support early identification of need or risk. Information sharing is critical if there are concerns that an unborn, child or young person may be at risk of suffering harm. This may be related to a safeguarding issue or a concern that the child is not developing or thriving as expected. Information sharing has a vital role to play at key transition points in a child’s life – for example when they move from the midwife to the health visitor to the school nurse or from home to childcare. Information sharing should be embedded as a core element of managing transitions effectively.

Information should be shared proactively and appropriately with and among partner organisations. Where this involves the sharing of personally identifiable information the Wales Accord on the Sharing of Personal Information (WASPI) should be used as the basis for regular multi-agency sharing. WASPI-compliant Information Sharing Protocols should be developed. The Wales Accord on the Sharing of Personal Information\(^3\) (WASPI) is being promoted by Welsh Government as the single framework for sharing personal information. It is a practical and tested approach to multi-agency sharing for all public service organisations. It aims to make sure public services, as well as appropriate third and private sector providers, share personal information about individuals legally, safely and with confidence. All main public sector organisations in Wales have signed up to WASPI and public service leaders have committed to using WASPI as a basis for sharing information.

All Flying Start practitioners should follow their organisational information sharing and record keeping protocols. In general, parents should be provided with information about why, what, how and with whom information will, or could be shared, although there may be times – for example, a safeguarding issue – where it is not possible or desirable to provide such information. Parents should be asked to provide consent for information to be shared about their children when their child joins the Flying Start programme and at other key transitions points such as when they start in the childcare setting. By developing information sharing protocols to support information sharing practices, practitioners can be confident about the types of information to be shared, how and when it will be shared, how parents will be told about the information to be shared, whether consent is required and who from, and how it can be obtained.

3.3 Safeguarding

Safeguarding children is a key priority for the Welsh Government. Welsh Government Procedures/Guidelines on safeguarding children should be followed at all times and all Flying Start practitioners should be able to recognise vulnerable children (including unborn), keep them safe from abuse and neglect and improve outcomes for them.

\(^3\) [http://www.waspi.org/](http://www.waspi.org/)
Safeguarding Children: Working Together Under the Children Act 2004 sets out how all agencies and professionals should work together to promote children’s welfare and protect them from harm. The All Wales Child Protection Procedures provide common standards to guide child protection practice for multi-agency professionals in Wales. They provide a framework within which individual child protection referrals, actions, decisions and plans are made and carried out.

The transitions process must ensure that the welfare of the child (including unborn) is paramount and promoted and safeguarded throughout the transfer of support from one health or early years education/childcare provider to another.

3.4 Welsh Language

The Welsh Government is committed to promoting and facilitating the use of the Welsh language. The Welsh Language (Wales) Measure 2011 gives the Welsh language official status in Wales and establishes the principle that the Welsh language should be treated no less favourably than the English language. When considering the transition of children from home into childcare parents must be actively given the offer of sending their child to a Welsh medium setting. Those managing transitional stages must ensure that a child’s Welsh language needs are considered.

3.5 Equality and diversity

When considering children’s transitions, services should:

- be inclusive and accessible;
- consider the specific and additional needs of all children;
- respect the needs of children and families from different ethnic, cultural and faith groups;
- be sensitive to the stresses family’s face in their lives; and
- engage families using a strength-based approach.

Those making transitional arrangements should respect the diversity of families, accepting that family arrangements can be varied. Services should be welcoming and supportive and work in partnership with both mothers and fathers to build on their existing strengths and help them to identify their child’s support needs during the transition process. Services should recognise that there are certain children (e.g. disabled children and/or children with additional needs and those with complex family arrangements) who may find times of change very difficult and will need additional, flexible support. Practitioners should provide good role models that encourage positive attitudes and high expectations for all children regardless of their background and needs. Services must consider the specific requirements of families from different ethnic, cultural and faith groups and those with limited English skills. Positive images of diversity and difference should be included in learning and marketing materials, books, posters, pictures and play equipment.

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4. Transition into the Flying Start programme

All eligible families should be encouraged to access all four entitlements of the Flying Start programme. Flying Start services should be actively promoted to families in a positive, non-stigmatising way, so that they are aware of what is available locally and the benefits of participation, thus motivating them to take-up services.

The health visitor is usually the first contact parents have with Flying Start, although in many areas parents may also have access to a Flying Start midwife. Qualitative research focusing on the experiences of high need parents (Welsh Government 2013a) reported that most families found out about Flying Start services through their health visitor and that the health visitor set the tone for the family’s engagement with the services on offer. It also found that good relationships with health visitors seemed to be strongly correlated with take up of Flying Start services, and with parents’ positive experiences of the programme overall.

Some families may already have built up a relationship with their generic health visitor. To ensure a smooth transfer it may be beneficial (if proximity allows) for the Flying Start health visitor and the generic health visitor to meet the family jointly when care is transferred. This may help to maintain continuity and trust in the relationship built up between the family and the existing health visitor. This is particularly important for families considered to be vulnerable.

Health visitors and the wider health team have a key role in signposting parents to Flying Start services and encouraging take up. The National Evaluation of Flying Start (Welsh Government 2013a) found that

“Health visitors are instrumental in information provision as they not only give parents information about services, but persuade them about the benefits of taking them up and encourage the most reluctant to attend” (page 5)

The report identified the following reasons why some parents did not take up the full Flying Start offer:

- lack of information and/or encouragement, usually the result of a weak relationship with the health visitor;
- services not being tailored to their needs; and
- a negative experience of using one of the services.

Families’ impression of their first point of contact with a service or project often determines their view of the entire service and their willingness to engage (Moran, 2004). The skills and experience of Flying Start staff are also critical in making appropriate referrals and working with other agencies to ensure that families get the services they need.
Family engagement

Getting as full a picture as possible about the barriers families face when accessing services and their motivation for engagement can be critical in improving identification and signposting. Some parents are resistant to accessing services because of previous negative experiences or because they are concerned about the involvement of welfare services. They may also seem unwilling to accept that there is a problem or appear unmotivated to change (Moran, 2004; Welsh Government 2013a; Barrett, 2003).

Parents’ motivation to engage will be affected by their own history and experiences. Assessing a parents’ readiness to change may help to better focus the process of engaging parents in an intervention. Building up effective supportive relationships and motivating and empowering parents through the use of techniques such as motivational interviewing may also make parents more likely to engage. Please also refer to section 8.1.2 in the Flying Start parenting guidance. This provides further information on the readiness to change/Stages of Change model\(^5\).

Populations in some Flying Start areas are often quite transient, which may make it more difficult to be aware of a family’s movement into and out of a Flying Start area and early engagement may also be more difficult to achieve.

Some families may require persistent and proactive encouragement and support to take up services (Welsh Government 2013a). Reluctance to take up services may be overcome by building up effective supportive relationships. This is about treating parents as partners in their child’s learning, sharing information with them and showing them respect. Relationships with staff and the quality of inter-personal skills have been found to be a key factor in successful engagement of families (Barrett, 2003; Moran, 2004; Welsh Government 2013a). This appears to be the case irrespective of whether the staff have the same personal attributes as parents (e.g. gender or ethnic match). Working with vulnerable families, in particular, requires highly skilled practitioners who can both establish and maintain relationships with families who may be challenged and challenging.

The Family Partnership Model (formerly called the Parent Adviser Model) also suggests that the following qualities should complement the knowledge and expertise of those supporting parents (Davis and Meltzer, 2007):

- Attention/active listening;
- Prompting and exploration;
- Empathic responding;
- Summarising;
- Enabling change;
- Negotiating; and
- Problem solving

Providing practical support and short term improvements to a family’s circumstances can be important for building trust. Staff can, for example, work with other external agencies (such as Citizens Advice Bureau or Social Care) to help parents sort out

problems with debt, housing or other identified needs. Families may be more likely to engage if other parents in their community have recommended services.

If parents are provided with an opportunity to say what they need; provide feedback on the services they receive; identify local issues and contribute suggestions for service development, they may not only feel empowered but services are more likely to be relevant and useful to families.

To build up a recognisable Flying Start brand the Flying Start logo should be on marketing materials and on all correspondence with parents. It can be further enhanced by putting the Flying Start logo on staff uniforms. Consistency in marketing is crucial and research suggests it can improve the effectiveness of a campaign. Please see the Welsh Government’s ‘Design Guide’ which provides advice on marketing Flying Start.

A strengths-based, collaborative approach to engaging with families should be adopted that does not patronise parents, but accentuates their strengths. Parents’ interest in their child’s development or handling tantrums can be used as a hook to recommend Flying Start services such as Language and Play or parenting support sessions. For more information about practical strategies for the engagement of families please see section 8 of the Flying Start Parenting Guidance.

**Key Actions – marketing**

Ensure that services are widely advertised and marketed, so that families and Flying Start staff are aware of what is available:

- provide local GPs with Flying Start postcode areas so that they are able to refer families new to the area to the Flying Start health visitor. Make it clear to GP surgeries the purpose of Flying Start and that it is not only for vulnerable families;
- develop links with Birth and Deaths Registry who could provide each family registering a birth in a Flying Start postcode area with a Flying Start information pack and registration form;
- provide families with attractive, high quality, written information. This could be in the form of calendars, timetables, information sheets or booklets with details and timings of services;
- Ensure the Flying Start logo is on marketing materials and on all correspondence with parents;
- consider the reading level of parents. NIACE has a leaflet which gives advice on how to write written material that is easy to read. The leaflet includes a simple formula for calculating a “readability level” [www.niace.org.uk/current-work/readability](http://www.niace.org.uk/current-work/readability);
- Consider the use of positive language and images to attract more fathers (including non-resident, whenever possible). Welcome letters, for example, should specifically invite fathers to participate rather than using generic terms like ‘parent’;
- make sure health visitors are aware of what services are available to families and update them regularly (e.g. termly);
- recognise the role of Family Information Service in providing relevant information to parents about their entitlement to Flying Start; and
- utilise the promotional DVD produced by the Welsh Government.
Key Actions: when families enter Flying Start

Families’ transition into Flying Start could be at the antenatal stage; at birth or when families move into a Flying Start area at a later stage. At any of these three stages it is important to/for:

- generic community midwifery services to liaise with Flying Start midwives (where they exist) to complete the midwives’ family’s needs assessment early in the antenatal period;
- Flying Start health visitor to liaise with midwifery service to obtain data on projected deliveries for their area to facilitate antenatal contact;
- liaise with the generic midwifery service so that Flying Start health visitors or Flying Start midwives are alerted to new births in a timely manner;
- health visitors to make arrangements for antenatal contact;
- work with the Local Health Board to obtain the child’s health record;
- make arrangements for the handover from generic health visitor to Flying Start health visitor, where appropriate;
- complete an assessment of the family’s needs and put on file;
- ensure that forms and procedures are straightforward, in suitable language and easy to understand;
- be aware of the additional risks and needs of babies who have required neonatal special care, have rare genetic diseases, other health needs or physical, sensory or learning impairments to ensure coordination of services across specialist and Flying Start health visiting services;
- establish a partnership/multiagency approach to ensure that children and their families (who enter Flying Start at birth or at a later stage) get the appropriate help and support through a holistic approach. This is particularly important for children and families where there are additional or complex needs;
- ensure that parents with children with additional needs are aware that they are entitled to access all entitlements. Sufficient time should be devoted to multi agency planning to ensure that activities such as childcare, early language entitlements and parenting support are adapted to meet their needs;
- actively promote Welsh medium or bilingual child care to families in a positive way, so that they are aware of the benefits of bilingualism and of local services available to their child. ‘Cymraeg i Blant’ / Cymraeg for Kids offers free advice to parents on raising children in Welsh and English. The website has tips and resources for introducing two languages from day one: [http://cymraeg.llyw.cymru/learning/cymraegiblant/?lang=en](http://cymraeg.llyw.cymru/learning/cymraegiblant/?lang=en)
- complete relevant Flying Start forms with parents to facilitate sharing of information within the Flying Start context and with generic services;
- complete the data collection system used in the local authority (e.g. database, spreadsheet, PARIS) to track the progress of the child and family through services; and
- inform the family of complaints procedures in place.
Case study: Overcoming isolation and building confidence

Gwyneth

is a single parent and has five children. She has suffered from drug and alcohol addiction and has been depressed for most of her life. The most challenging aspect about being a parent for her is being stuck at home with the children and she often finds them difficult to manage. Gwyneth’s depression and low confidence means she is reluctant to leave the house, and before using Flying Start services had only walked down the street once in the seven years she had lived there.

When she was initially told about Flying Start she was reluctant to take up the services. However, though Gwyneth was initially nervous to accept a stranger into her home she received a total of three parenting programmes in the home (Handling Children’s Behaviour, Positive Parenting and Stepping Stones). These helped develop her confidence and when she began to drop her son off at childcare, she began meeting other parents.

“I’ve always known some of the parents because I’ve been in school or secondary school with them, but because of my confidence I’ve never spoken to them, whereas with the playgroup it does tie you back in and you start saying hi and bye. It kind of gets you out as a person and has a bit of a family atmosphere.”

She has since become close friends with one of the mothers after finding they both had similar backgrounds and Gwyneth now sees her regularly for some ‘adult talk’. She also commented that getting feedback from the staff at childcare has meant she has had to become more comfortable talking to strangers.

5. Pathway of support for families in Flying Start

A coherent pathway of support available for parents should be set out. This pathway of available provision should clearly articulate what support is available for families at each stage of a child’s development. Support (both targeted and universal) should be available to meet families’ needs at each stage of their child’s development. This, along with effective signposting to and between different Flying Start services and to external providers, should enable families to progress ‘seamlessly’ through services.

In some local authority areas in Wales a coherent pathway of support available for families has been set out. This articulates what support is available for families with universal needs, at each stage of a child’s development. The pathway includes the minimum entitlements offered to families under the four entitlements (e.g. core health visiting entitlement; parenting support offer; part-time childcare for 2-3 year olds and early language development). It includes relevant support offered by a range of Flying Start staff including midwives, health visitors, early years and family support workers, as well as by childcare staff. The ‘Review of parenting support for

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7 Names in case studies have been changed to protect identities.
8 Pathway of support is sometimes also referred to as “a map of progression routes of provision” or a “journey of support”.

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Flying Start’ Welsh Government, (2013d) identified this as best practice and referred to it as the ‘customer journey’.

The Welsh Government recognises that the pathway of support in each Flying Start area will differ to some extent, dependent on the staff employed and local approaches. All areas should develop a pathway or map of progression routes of provision.

The key aims of the pathway or map are to:

- clarify the routes of support available for parents eligible for Flying Start services and provide an outline of what parents can expect. This along with effective signposting to and between different Flying Start services, can help parents progress ‘seamlessly’ through services;
- raise the profile of Flying Start and what families can gain from accessing support;
- ensure that families are enabled to access a range of Flying Start support;
- let families know that all families in Flying Start areas are offered this support, thus reducing stigma;
- raise awareness with families and with professionals of the different services available;
- ensure that key staff working with families provide the same messages about what support is available, when it is available and who it is delivered by. This consistency increases the likelihood of positive and continued engagement with services;
- have a recognisable pathway of support to assist with information sharing and partnership working;
- make it clear when each entitlement can be accessed by parents thus making transitions planning easier; and
- help remind staff of the key periods when transitions are likely to occur, in order to ensure that the transition planning process begins early enough to facilitate a positive transition.

It may be helpful to produce parallel documents – one for parents and one for professionals. The document for professionals can additionally provide a time line indicating what actions and paperwork need to be completed by staff at each stage of a child’s development (e.g. reminding parents about their childcare eligibility and completion of the childcare funding form). A copy of the pathway document could also be kept on a child’s record to tick off what entitlements the family has taken up.

There is no one path or journey through services – different families follow different pathways between Flying Start services. Every child and family accessing Flying Start services is unique and the pathway of support should be flexible and be primarily a ‘sign post’ to give direction, focus and to aid transitions planning. Children and families with additional or specific needs may need additional support and specialist services to meet their needs. The universal pathway of support should be interlinked with the pathway of support for children with additional needs.
Please see Appendix B for an example of a pathway of support and the following link for an example of a pathway of support for parents:


5.1 Communication across the Flying Start team

Smooth transitions can only happen if Flying Start staff cooperate and communicate effectively with each other. This may be facilitated by the following:

- **team meetings** – these provide an opportunity to keep everyone updated. It can also give staff an opportunity to have an informal chat about the families they work with thus enabling practitioners to identify and raise concerns early. The frequency at which meetings are held and the focus of these meetings should be periodically reviewed to ensure that they remain relevant, effective and efficient;
- **a transition training** day could be organised. In one local authority the Link Teachers and the Foundation Phase Advisor, developed a training day on transitions as an opportunity to share information and strategies. This also facilitated transition processes between Flying Start settings and the Foundation Phase;
- providing the **Family Information Service** with up-to-date information about services available to support families in the area;
- **shared information systems** – some local authorities have invested in data and information systems e.g. PARIS, that enable health practitioners and Flying Start practitioners to access the same information. Some have developed their existing maternity systems to share information between maternity and health visiting services e.g. details of projected deliveries to plan antenatal contacts;
- **sharing resources across the local authority area** – in some areas practitioners can go to any local authority building within their area and have access to resources such as a telephone and a computer. This can help Flying Start practitioners to operate as a team without necessarily working in the same office or location;
- **joint training**; and
- **opportunities to shadow other members of the team** – this may help staff develop a better understanding of each other’s roles.

5.2 Ensuring a smooth transition between the Flying Start entitlements

Health visitors play a key role in supporting families’ smooth transition across and between the range of services and programmes with which they may engage. Health visitors can act as an advocate for the family (e.g. helping them to fill in application forms); as a key worker (e.g. coordinating appointments with health) and in encouraging parents to seek help to address any need (e.g. a mental health issue). Other professionals within the Flying Start programme should also play a part in supporting this and may also fulfil these roles.
It is important that all Flying Start staff are aware of what Flying Start support is available to families. The Family Information Service is a key resource providing up-to-date information to families, health visitors and other delivery partners about services available to support families in the area. Staff should also be aware of how to refer families to more specialist services, if required.

Some parents interviewed as part of the National Evaluation of Flying Start (Welsh Government, 2013a) described moving between services almost seamlessly, without them having to put effort into organising or applying for anything. Once parents have used one service, they are more likely to use others and become more comfortable with the idea of using Flying Start services overall. Please see the box on the next page for ideas to facilitate this.

Effective signposting of families relies on establishing trust and building a relationship with them. Getting as full a picture as possible about the barriers families face when accessing services and their motivations can be critical in improving identification and signposting. Anticipating what these barriers are likely to be and considering how these can be overcome when planning services can also be helpful (e.g. using venues in the parent’s locality; providing a crèche etc).

### Activities to promote a seamless service:

- parents are signposted from the services that they have already used to other Flying Start services;
- staff providing a service for families at one stage of their child’s development notify or encourage parents to get involved in activities at the next stage. This can also be described as “passing the baton”;
- children bring letters home from the Flying Start childcare setting about other groups families can join;
- childcare staff recommend activities that are running at the time, or parenting support staff offer parents the opportunity to engage in a parenting intervention for the next stage of their child’s development; and
- co-locating services so that parents are familiar with what is available at the next stage of a child’s development e.g. a midwifery clinic can be run at the same time and from the same venue as baby massage; the health visitor’s clinic can take place at the same time as a stay and play session.
**Examples of ‘seamless’ working:**

The National Evaluation of Flying Start (Welsh Government, 2013a) identified the following as examples of ‘seamless’ working:

- running Language and Play sessions at the same time as child care sessions;
- GP referrals to the health visitor when parents mentioned something that the health visitor could provide support with (e.g. child behavioural issues);
- health visitors organising in home play support and/or parenting programmes;
- health visitors attending parenting programmes and drop-in groups such as Stay and Play so that parents see a familiar face, which allows them to feel more at ease. (This also allows the health visitor to catch up with parents on an informal basis);
- health visitors dropping in on child care settings to check up on children’s progress – allowing the health visitor to offer any specific support that might be needed; and
- groups of Flying Start staff (for example health visitor and child care staff) working together to solve problems with child health or behaviour.

**Case Study: Multi-agency approach to transitions**

Monthly and termly multi-agency quality assurance meetings occur in all the ‘children’s centres’ where health visitors, the childcare manager, a speech and language therapist representative, parenting and other agencies, where appropriate, meet to share relevant information. This ensures that a holistic approach is adopted. There is also close communication with the Flying Start midwives.

An Early Language Development Pathway and Parenting Pathway further enhance natural transition pathways.

Health visitors are co-located with the childcare managers at the childcare setting which are predominately within an education setting. This helps with the communication needed for transition into the childcare setting and from there into the Foundation Phase.

Transition meetings are held between the child’s keyworker and a member of staff in the Foundation Phase setting. A minimum of four transition visits is planned in the co–located settings. The Foundation Phase teacher also plans a series of visits to the Flying Start setting on a regular basis, for example, to share stories or during song and rhyme time.

A joint transitions training day has been organised by the Link Teachers and the Foundation Phase Advisor. It is an opportunity to share information and strategies to ensure transition processes between Flying Start settings and the Foundation Phase are smooth and a joined up approach is strengthened. The implementation of strategies to encourage greater consistency has followed the initial training with Transition Toolkits and transition books now evident in many settings.
In accordance with the ‘Attendance Guidance’, there are clear protocols to adhere to if a child is absent, whereby different pathways are followed, depending on whether the child is CP, CIN etc. This guidance adopts a holistic multi-agency approach to ensuring positive attitudes towards attendance from the very start.

6. Transition from home into Flying Start childcare

The Flying Start childcare setting should have a policy for transitions, outlining how children’s personal, social and emotional development will be supported during the settling in process. There should be a clear welcome procedure which includes the collection of essential information from parents about their child’s concerns, needs, likes and development. The key worker, or other relevant member of staff, should be aware of the child’s emotional and practical needs before they start in the setting and monitor the success of the transition process.

The childcare setting should have a clear policy to underpin the transition process. Please see Appendix D for an example of a policy. The policy should consider the following:

6.1 Support for the child

Research suggests that, like adults, children often find transition and change stressful, which can have a significant impact upon their emotional well-being and ability to engage positively in learning and social interaction (O’Connor, 2006; Drake, 2006; Welsh Government, 2008). Some children entering a childcare setting may be overwhelmed by the size of the building, unfamiliar routines and bigger groups of children and adults than they are used to experiencing. In addition, it may be their first experience of a prolonged separation from their parent. Children should be seen as active participants in the transitions process. Staff should take time to listen to children, observe them and ask them about their concerns.

Some children may attend more than one setting. For these children, practitioners must ensure effective continuity and progression by sharing information with each other and with parents.

Ideally the opportunities provided to children in the childcare setting should build on what children have experienced in the home and while attending groups such as Parent and Toddlers and ‘Ti a Fi’.

Please also see the case studies at the end of this chapter for further information.

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9 Some children may also be transferring from another childcare setting into a Flying Start childcare setting or after moving house. The principles of good practice should apply at whatever stage children enter the setting. Settings should aim to offer the same transition experience regardless.
All Flying Start childcare settings must be registered and regulated by the Care and Social Services Inspectorate Wales (CSSIW). All registered persons must have regard to the National Minimum Standards for Regulated Childcare. These are National Minimum Standards for registration and in order to provide quality childcare, the Welsh Government expects that Flying Start childcare settings will exceed these basic standards.

Key activities recommended to support children during transition:

- make contact with families and arrange visits for the child and family on an informal basis, as and when required;
- give children an opportunity to participate in a range of activities when they visit;
- tell the child when the parent will return using a familiar event as a reference e.g. after snack time. Words like 'later' are vague and unhelpful;
- encourage the child to bring a familiar item in from home e.g. toy, blanket;
- ensure that the child has access to their familiar item from home whenever they need it;
- take time to understand the words and behaviours children may use at home to indicate specific requests (e.g. family word for toilet etc.);
- for children with additional needs get as much information as possible about the child’s condition (including relevant reports from specialist services) and advice from the parent about techniques that work with the child;
- encourage flexibility – allow a settling in period according to the needs of the child. Parent/carers can be encouraged to stay to enable their child to settle;
- where possible, stagger intake times and dates of entry for new children, to give both new and existing children the opportunity to familiarise themselves with a new situation;
- give children space to observe activities before joining in, and while they are settling in, do not overwhelm them with too many activities and resources;
- prepare pegs/boxes in advance for the new intake of children;
- ensure that the layout and structure of the routine is consistent;
- make a visual timetable of photographs of the daily routine – so children can see their routine from arrival to parents collecting them;
- be welcoming and open; and
- support, observe and get to know the children.

National Minimum Standards for Regulated Childcare

10

All Flying Start childcare settings must be registered and regulated by the Care and Social Services Inspectorate Wales (CSSIW). All registered persons must have regard to the National Minimum Standards for Regulated Childcare. These are National Minimum Standards for registration and in order to provide quality childcare, the Welsh Government expects that Flying Start childcare settings will exceed these basic standards.

This section relates to the following National Minimum Standards for Regulated Childcare:

**Standard 3: Assessment**

Outcome: All children have their needs and preferences identified and their parents know how these will be met.

The registered person is responsible for ensuring that:

- Each child’s needs and preferences are identified as far as practicable before they are placed or attend (Standard 3.1).
- Parents and children are encouraged to visit the childcare provision before the child starts attending to make sure that their needs are clearly identified. (Standard 3.2).
- Parents are asked specifically about their child’s preferences, needs and abilities, and for any other information they need to share to ensure the best possible care for the child (Standard 3.3).

**Standard 8: Nurture and well-being**

Outcome: Children feel secure, happy and comfortable with their carers and in their environment, and their rights are respected.

The registered person is responsible for ensuring that:

- The settling-in process and separation from parents or carers minimise distress and anxiety (Standard 8.5).

**6.2 Promoting equality**

The Equality Act 2010 aims to ensure the barriers are removed and that there is equality for the following groups with ‘protected characteristics’:

- Age (as an employer – but not applicable to children in the setting);
- Disability;
- Sex;
- Gender reassignment;
- Race;
- Pregnancy and maternity;
- Religion or belief; and
- Sexual orientation.

All childcare settings should have an equality policy in place which considers the impact of activities in the childcare setting on children and their families and whether they might disadvantage families with protected characteristics. Everyone in the setting should be valued and treated with equal respect and the needs of each individual should be addressed. All parents and children, whatever their background and additional needs, should feel welcomed.
National Minimum Standards for Regulated Childcare

All Flying Start childcare settings must be registered and regulated by the Care and Social Services Inspectorate Wales. All registered persons must have regard to the National Minimum Standards for Regulated Childcare. These are National Minimum Standards for registration and in order to provide quality childcare, the Welsh Government expects that Flying Start childcare settings will exceed these basic standards.

This section relates to the following National Minimum Standards for Regulated Childcare:

**Standard 4: Meeting individual needs**

Outcome: Each child’s individual needs, including any special educational needs and disabilities, are planned for and provided for.

The registered person is responsible for ensuring that:

- They can demonstrate that they can meet the assessed needs of children placed with them (Standard 4.1).
- They (or their staff) have the skills and experience needed to plan for and meet a child’s individual needs and preferences (Standard 4.2).
- The needs and preferences of each child (including those from minority ethnic communities) in relation to their home language(s), intended medium of education (e.g. Welsh or English) and their social, cultural and religious practices are understood and catered for (Standard 4.3).
- Appropriate action is taken when special needs are identified, and the welfare and development of the child is promoted in partnership with the parents and other relevant parties (Standard 4.4).
- The current Code of Practice for Special Educational Needs (or Additional Learning Needs) for Wales is followed. Where appropriate, a child’s particular needs are met through the provision of special equipment (Standard 4.5).
- In group settings, a written policy statement consistent with current legislation and guidance about special needs is in place. This should cover both special educational needs and disabilities and must be available to parents (Standard 4.6).
- Staffing arrangements are designed to meet the needs of individual children who attend and have special or additional needs (Standard 4.7).
- The physical environment is, as far as is reasonable, suitable for disabled children (Standard 4.8).
- Disabled children and those with special educational needs have access alongside their peers to the facilities, activities and play opportunities provided in order to promote their welfare and development (Standard 4.9).
- Parents are consulted about any special services and equipment for the children being cared for. Where a possible need for specialist help is...
identified, parents are informed so that they may take appropriate steps to get advice or treatment (Standard 4.10).

- The privacy of all children when intimate care is being provided is respected (Standard 4.11).

**Standard 16: Equal opportunities**

**Outcome:** All children are treated with equal concern and respect.

The registered person is responsible for ensuring that:

- Equality of opportunity and anti-discriminatory practice is promoted in the setting (Standard 16.1).
- There is an equal opportunities policy, which is consistent with current legislation and guidance and is regularly reviewed. All staff and volunteers understand and implement this policy and it is available to parents (Standard 16.2).
- All children and adults are treated with equal concern and the registered person complies with relevant anti-discriminatory legislation and good practice in all areas, including employment, training, admission to day care and access to the resources, activities and facilities available (Standard 16.3).

**6.3 Children in transient families**

Populations in Flying Start areas are often quite transient, which means families may move at short notice or without warning. Children and families who move more frequently include armed forces families, homeless families, asylum seekers and refugees, Gypsy and Traveller families and families experiencing domestic abuse.

Some of these families may be at risk of living in poor housing conditions (such as overcrowding, poor physical housing conditions and having a lack of suitable play areas). These conditions may also put stress on the family and strain family relationships.

Children in asylum seeking families are often in families where neither parent speaks English or Welsh. In addition, due to the trauma they have experienced, parents may have mental health problems. Their lack of English or Welsh may present a barrier to them finding out about local services, including access to the Flying Start programme.

Families may have moved away from their previous support networks, losing previously available support and making the family feel isolated. Families that move frequently may find it difficult to access the services they need and may need help with this. Encouragement to attend groups such as parenting support and language and play may help reduce families’ isolation and help them to build up new support networks.

Some children may have experienced emotional trauma and loss or have challenging home conditions. They may also have experienced frequent moves in their life and will be coping with another change as they settle into the childcare
Whatever the circumstances, practitioners need to be particularly sensitive to the needs of children likely to be vulnerable during transition. Children should be given extra attention and support to help them cope with new surroundings and support them to trust unfamiliar adults.

The transient nature of some children’s lives means that the key professionals working with them may have changed regularly, which has consequences for the quality of these relationships. This may increase the risk that concerns about a child’s well-being are overlooked. Some families in which children are harmed may also intentionally move home frequently to avoid contact with concerned agencies. All Flying Start practitioners should be able to recognise safeguarding issues and when and to whom to refer them. Welsh Government Guidelines on safeguarding children should be followed at all times. Safeguarding Children: Working Together Under the Children Act 2004 sets out how all agencies and professionals should work together to promote children’s welfare and protect them from harm.

**6.4 Minority ethnic children**

Even if staff know a lot about different ethnic backgrounds, cultures and religions, it is still important to build up knowledge of individual children and their families. Most families will not be offended if respectful questions are asked to gain an understanding of the child’s background. They may appreciate the effort that is being made to ensure that their child settles well. This may include questions about how to pronounce and spell the child’s name; what languages are spoken at home; what the child calls their parents; what are the child’s favourite foods and how they eat at home. This can help plan the support needs of the child during transition and ensure that children’s names are spelt and pronounced correctly.

Even if there are no children from varied religious or ethnic backgrounds in the childcare setting consideration should be given to having resources like clothing, cooking utensils, dual language books and artwork that positively reflect cultural diversity. Childcare staff should use factual, positive language when describing or introducing resources from all cultures. They should encourage children to play with them and model their use, rather than just leaving them lying around. Notices such as a ‘welcome’ banner could be conveyed in a range of scripts and languages.

Allow extra time to talk to parents who have English as an additional language. When asking others for help with translation, parent’s wishes should be respected. They may not want a stranger or another parent translating information about their child. Access to interpretation services may be considered to ensure that language does not become a barrier to families’ participation. Low literacy skills may also create a significant barrier to participation for some families. Where possible it is best to communicate verbally, which will also allow parents to ask questions of service providers.
6.5 Disabled children and/or children with additional learning needs

All early years providers (Equality Act 2010):

- have a duty not to discriminate against disabled children in both education and day care provision;
- must not treat disabled children less favourably; and
- must make reasonable adjustments to avoid putting disabled children at a substantial disadvantage compared to children who are not disabled.

For families with children with additional needs, change can be stressful. Particular consideration needs to be given to how transitions are managed for the child and family. With parental consent, health visitors should notify childcare settings about the additional needs of children as early as possible so that the setting can plan effectively to meet those needs and to prepare a plan for transitions. Any documentation should be passed on as early as possible, preferably with a face-to-face meeting, which includes parents and adopts a person centred approach.

When children with additional needs come into a Flying Start childcare setting, staff should be sensitive to the needs of the child to ensure that they have the support they require and that parents are comfortable with the arrangements made. Families may be concerned about how their child will settle and whether the nature of their child's needs will be understood. They may require more visits and opportunities to get to know staff than other children. If a child is receiving support from other professionals, parents should be asked for permission to work with these agencies to ensure strategies and support are in place before the child starts. Ideally copies of reports from these specialist services should also be available.

It may be necessary to modify or adapt activities and the environment to ensure that disabled children and/or children with an additional learning need can access the provision. There should be a flexible approach to activities in the setting, so that all children can join in. Staff should be prepared to try out new approaches and new ways of working that may support all children, including those with additional needs. Where necessary additional targeted and individualised support should be provided (e.g. by developing an Early Identification Plan). Ideas and advice should be sought from a range of professionals including health visitors, speech and language therapists, educational psychologists and the advisory teacher. This can range from informal advice and suggestions to more formal input and referral to more specialist services.

The graduated approach, as described in the Special Educational Needs Code of Practice for Wales\(^\text{12}\) (Welsh Government, 2004), should be firmly based within the setting. This approach recognises that there is a continuum of additional learning needs and that children should be provided with differentiated learning opportunities depending on their needs. Where necessary, the setting should involve increasing specialist expertise to support children with the difficulties that they may be experiencing.

If children with a significant or complex health care need (e.g. tracheostomy, nasogastric tube for feeding, epilepsy) are going to enter the childcare setting the following must be put in place prior to the child starting:

- liaison with health colleagues;
- training for childcare setting staff;
- a health care plan (e.g. outlining normal procedure and what to do in an emergency) written by health and signed off by health, parents and the setting.

If there are concerns about the progress and development of a child in the setting, this should be discussed with the parents and permission sought to seek further advice from other sources of support e.g. health visitor, early years inclusion team, educational psychologist, speech and language therapist or paediatrician. The setting should make sure that parents are as involved as possible with their child’s learning and should be kept informed about how the setting is seeking to meet their child’s needs.

Parents of children with an additional need may not yet have identified or accepted that things might be different for their child. It is important, therefore, to adopt a sensitive and sympathetic approach. The following are suggested strategies for raising concerns with parents (Cardiff Early Years Inclusion Team):

- try to remain positive and clear in what is communicated;
- do not use labels or diagnostic terms;
- do not compare to other children;
- expect an emotional response;
- plan and prepare for the conversation with notes and evidence;
- discuss what you are going to do next – a plan; and
- don’t make any promises or have unrealistic expectations.

Research commissioned by Mudiad Meithrin (Menter a Busnes, 2012) identified the following as barriers to inclusion:

- environmental – aspects of the physical environment that may disadvantage a child with additional needs;
- attitudinal – attitudes that prevent children with additional needs being included in activities (this may be due to a lack of knowledge about the implications of the child’s particular condition and being overprotective due to a lack of confidence); and
- organisational – policies or practices that are not inclusive.

The research also identified the following enablers to inclusion of children with additional learning needs:

- good background information about the child and his/her needs (which is vital if staff are to meet those needs);
• a support pack put in place for the child which includes relevant information e.g. the development/play plan, suitable activities and information about the condition;
• home-Setting Link book completed regularly by staff and parents;
• ensuring that parents are not isolated either through lack of confidence or by remarks made by other parents;
• good resources and specialist equipment;
• reasonable adjustments made in the setting e.g. colour options, layout adapted;
• good one-to-one support where appropriate but ensuring that the child is encouraged to get involved with setting activities and with other children;
• training of staff to improve their confidence in nurturing children’s development and to help them settle into the setting (this could include training in general inclusion; training and information about specific conditions and visits to other settings and specialist schools with expertise in working with children with additional needs);
• all staff in the setting being aware of the needs of children in the setting so that if one member of staff is absent, other staff members are able to support and include the child;
• staff developing interpersonal skills to help build up positive relationships with parents and deal sensitively with their concerns;
• sharing best practice;
• availability and input of specialists such as speech and language therapists and health professionals; and
• monitoring and observation to measure developmental progress.

6.5.1 Person Centred Approach

Person-centred practice

The term ‘person-centred practice’ (PCP) commonly refers to the way in which the people receiving services or support are key to and involved in the development and planning of those services. Person centred planning explores what is important to a person and then acts on it to develop a set of clear and agreed actions that have been discussed by the person involved, parents or carers if appropriate, and the various professionals who will deliver the services. Most importantly, it is a set of principles, not a set of forms, to shape how someone’s needs are assessed and provided for.

Keeping the person at the centre of the process is paramount to the success of PCP and for Early Years children the views of both the child and the family should be considered as the person at the centre of the process.

These fit within the overarching principles of inclusion and equality, which are key to public services. They can provide a powerful method of listening to the viewpoints of people to enable them to plan ahead and establish their needs, and for partners to provide the required support or intervention. These person-centred approaches can help to develop strong partnership working between people and any health, education, social care, statutory and voluntary sector professionals involved in supporting them.
What is a person-centred approach?

Person-centred approaches focus on four main areas of thinking:

- **What is important TO the person?**

  This includes the elements that make the child an individual – their hobbies, interests, preferences. In short, the things that make them comfortable, happy and content.

  This section is particularly important for building relationships with the child and the family to aid a smooth transition into a new setting.

- **What is important FOR the person?**

  This is the support that a child requires to keep them healthy, safe and learning effectively. This can include medication, developing a healthy lifestyle, and access to learning. It can also be asked as ‘How best can we support them?’

  It is important to take note of particular ways that a child may manage stress or conflict and the ways in which they have learnt to communicate and how as practitioners we can support this in the setting e.g. a child who taps their thigh may indicate they have wet themselves.

  *Getting the right balance between what is important to and for the person is crucial.*

- **What is working at the moment?**

  If something is working it needs to be maintained and built upon. It is also worth finding out what worked well in the past, if this can work with some of the current support. This forms the basis from which to move forward positively.

- **What is NOT working at the moment?**

  If something is not working, this provides the basis for any plan to change. Why isn’t the support working? What can be done to improve or change it? Did it work before – if so, why isn’t it working now? These all form part of the discussion.

  *Both need to be considered from the perspective of all those involved, and together form the basis of any plan for further action.*

This forms a key part of an overall approach to finding and addressing issues that will enable a child to achieve their potential and finding ways to overcome any barriers or potential barriers that may be in place.
One Page Profiles and ‘All About Me’ s Information Cards

One Page Profiles/‘All About Me’ type information cards are the starting point for person centred planning. They are created by the child with parents and other professionals involved. They give a positive snapshot of the child’s life using the key areas as listed above. They can be updated as necessary and represent the child at any age or stage. Please see section 6.7.2 for more information. Appendix C provides an example of a one-page profile and templates of ‘All About Me’ type information cards.

The ‘All About Me’ type information cards have been developed by Flying Start teams in consultation with nursery teachers, preschool childcare staff, advisory staff and development officers to ensure the information is relevant to all parties and not excessive.

6.5.2 Schemes or services to support children with additional needs

In each local authority area there are likely to be schemes or services running to provide additional support for children with additional needs. The following are examples of schemes that may be running:

- Referral Schemes run in some local authority areas. They provide one to one support to children with additional needs in the childcare setting. The service may also support providers with training and additional resources where appropriate. These are operated by Wales Pre-school Providers Association, Mudiad Meithrin or by the local authority;
- Portage services also run in some local authority areas, this could be hosted by either education or health. Portage is a home-visiting educational service for preschool children who have additional support needs. Portage services aim to work with a child’s developmental needs to develop their strengths and build their confidence. It also aims to build parent’s confidence in their parenting skills; and
- each local authority will also have disability specific projects and services provided through the disability element of Families First.

The childcare setting and/or health visitor should investigate what support is available to support the child and their family.

Transitions for children with additional learning needs are of the highest quality when:

1. Processes and procedures are supportive and inclusive

   - the current Code of Practice for Special Educational Needs (or Additional Learning Needs) for Wales is followed (Standard 4.5 of the National Minimum Standards for Regulated Childcare);

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13 www.portage.org.uk
• a written policy statement consistent with current legislation and guidance about additional learning needs is in place (Standard 4.6 of the National Minimum Standards for Regulated Childcare); and
• sufficient time is allocated to plan for and ensure smooth transitions (e.g. for preparing staff/parents/children; for staff to access, read and share information and to put together a support plan (e.g. development play plan).

2. The child is placed at the centre of transitions planning

• children are placed at the centre of transitions planning, treating children as individuals and recognising their need to feel secure and confident at every stage of transition;
• children are prepared for change – the child is more likely to feel secure and settle more easily into the new environment when they are familiar with people, places and routines (e.g. children are given a chance to meet staff and visit settings and take part in activities there). Children with additional needs may need more frequent visits;
• supporting material (such as a One Page Profile or an ‘All About Me’ type information card) provide a deeper insight into the child such as information about important adults in their life; best ways to support them; what they are learning to do and what distresses them; and
• the childcare setting and/or health visitor investigate what support is available to support the child and family (e.g. referral schemes; Portage or other services).

3. Positive relationships are established and all adults who are involved with the child work closely together

• with parental consent health visitors notify the childcare setting about the additional learning needs of children as early as possible so that the setting can plan effectively to meet those needs;
• all adults who are involved with the child and family work closely and ensure that effective and ongoing communication takes place and there is good background information about the child;
• there is a clear procedure for sharing information about children and families;
• parents are fully involved in the transition process and time is set aside to develop positive supportive relationships with parents and address any particular concerns they may have;
• a sensitive and sympathetic approach is adopted with parents if concerns are raised about their child’s progress and development;
• parents are kept informed about how the setting is seeking to meet their child’s needs;
• staff are provided with training to improve their confidence in nurturing children’s development and learning (this could include specific training and information about specific conditions);
• one-to-one support is provided where appropriate but ensuring that children are encouraged to join in with activities with their peers; and
• further advice is sought from specialists such as speech and language therapists and health professionals, where appropriate. This should be discussed with parents and their permission sought.

4. Environments are welcoming, accessible and non-stigmatising

• staff create a warm, non-judgemental and inclusive atmosphere in the setting;
• staff adopt a strengths based approach to working with children and their families;
• all settings promote equality of opportunity and promote a positive attitude from staff, parents and children to children with additional needs;
• reasonable adjustments are made to the setting (e.g. colour options, layout adapted);
• resources and specialist equipment are provided, where appropriate; and
• a graduated approach is adopted which recognises that there is a continuum of additional learning needs and that children should be provided with differentiated learning opportunities.

Supporting Documents and Contacts:

When your child has additional needs: Information for families: This guide, produced by Contact a Family, provides basic information on a range of topics which may be useful to parents with a disabled child.


Understanding your child’s behaviour: Information for families: This guide, produced by Contact a Family, provides practical advice to parents who are worried about their child’s behaviour. The child may have a recognised impairment, be in the process of getting a diagnosis, or may have an additional need.

http://www.cafamily.org.uk/parent-guide-behaviour

Face 2 Face Cymru: Face 2 Face offers a one-to-one befriending service for parents discovering their child is disabled. Every Face 2 Face befriender is a mother or father of a disabled child.


Autism: A Guide for Parents and Carers Following Diagnosis, produced by Cwm Taf Health Board provides practical information and advice to parents including on common issues such as diet, sleep, toileting, play and body awareness (behaviour and boundaries).

http://www.asdinfowales.co.uk/resource/Autism-English-download.pdf
6.6. Developmental Progression Assessment in Flying Start

All Flying Start children should have their developmental progression assessed at 15 and 27 months of age. The assessment should normally be undertaken by a Flying Start Health Visitor. Where appropriate, the Flying Start Health Visitor can choose to delegate the assessment to the Flying Start health workforce skill mix. Such delegation should only occur when there are no prior or current concerns about the child’s development. Where there are, the developmental progression assessment should always be undertaken by a Flying Start Health Visitor.

If the 15 and 27 month assessments are undertaken by the Flying Start health workforce skill mix, the results should be shared with the Flying Start Health Visitor who should record the results of the assessment in the child’s record.

15 Month Development Review

The Flying Start Health Visitor should review with parents/carers their child’s development at 15 months of age. The assessment outcomes should be used to identify any developmental delays and provide appropriate support and interventions.

Where a potential delay or concern in the child’s development is identified, the Schedule of Growing Skills (SoGS) assessment should be undertaken by the Flying Start Health Visitor and the child’s development reviewed again at 18 months of age.

Any issues which arose at the 15 month development assessment should be followed-up by the Flying Start Health Visitor at 18 months. A discussion should take place with parents/carers about any concerns and additional support needed in order to assist families to help their child reach their full potential.

27 Month Development Review

The Flying Start Health Visitor should review with the parents/carers their child’s development at 27 months of age.

Where a potential delay or concern in the child’s development is identified, the SoGS assessment should be undertaken. Where there is a concern raised about the child’s development or a delay identified appropriate referrals for additional support within the Programme or to external specialist provision should be made.

Formal arrangements should be put in place for the results of the SoGS assessment to be shared with the childcare setting and it should inform the Child Development Plan. Where the child is identified as having additional needs, a joint plan to address those needs should be put into place and will be taken forward either jointly or separately (depending on the need identified) by both the Health visitor and / or the childcare setting. (Please see also section 6.5)

It is important that parents are:

• present when the SoGs assessment is carried out;
• informed of the results and what these mean;
• involved in the planning of activities for their children;
• advised on how to support their child’s learning within the home environment; and
• encouraged to involve additional professionals, where their child is identified as having additional learning needs.

6.7. The engagement of parents

6.7.1 Encouraging take-up

Every effort should be made to ensure that all parents with eligible children are offered, and encouraged to take up the Flying Start childcare provision. Welsh medium or bilingual childcare should be actively promoted to families in a positive way, so that they are aware of the benefits of bilingualism. Parents often find out about the childcare entitlement through their health visitor or from other Flying Start professionals (including speech and language therapists, parenting support staff or language and play providers), as well as through the childcare settings and the Flying Start childcare team (Welsh Government 2013a). The Family Information Service also has a role in providing relevant information to parents about their entitlement to Flying Start childcare.

The language used in marketing materials should emphasise parents’ entitlement to funded high quality childcare, and the developmental benefits to their child. The following are activities that have also been used to encourage the take-up of the childcare entitlement:

• at age two when every Flying Start child is provided with an additional book bag the health visitor uses the opportunity to encourage parents to engage with the books and promote the benefits of childcare to parents;
• postcards sent out to all parents promoting childcare to relevant families; and
• getting ready for childcare parties or discos.

Even if parents know about their entitlement they do not necessarily take it up. Research suggests that parents may feel guilty about leaving their child in childcare; they may feel anxious about their child picking up infections and may be worried about what their child is doing in their absence. Positive feelings about the potential benefits of childcare are often balanced against feelings of apprehension, guilt and doubt about whether they were doing the right thing (Fabian and Dunlop, 2002).

The National Evaluation of Flying Start (Welsh Government, 2013a) identified the key role of health visitors as being critical in terms of encouraging parents to take up the childcare offer, often helping parents to fill in the forms. The evaluation also found that some parents had been reluctant to send their children to childcare as they were at home all day, and felt it was unnecessary. Parents had been persuaded to take up the childcare offer when they were provided with clear explanations from the health visitor of the benefits to their child of taking it up.

14 Mudiad Meithrin have information about the advantages of Welsh medium education and the benefits of children being bilingual. http://www.meithrin.co.uk/what-parents-have-to-say/
15 Please see also section 4.
Some parents may require sustained and proactive encouragement and support to take up services (Welsh Government 2013a). Parental reluctance to take up services may be overcome by building up effective supportive relationships.Parents may also be more likely to take up childcare and other Flying Start services if other parents in their community have recommended it. All Flying Start staff should be aware of the benefits of taking up the childcare offer and be able to communicate these to parents. They should also be able to explain the setting’s values, the principles behind good quality childcare and how their child will learn through play.

Reluctant parents should still be encouraged to attend other activities organised by Flying Start e.g. parenting support, language and play sessions, early language groups, stay and play sessions etc.

6.7.2 Communicating with parents

For many parents their child starting childcare may be an anxious and emotional time. They may have had no experience of education since they were at school themselves and may be unsure about what happens in an early years setting or what to expect in terms of the environment and activities. These feelings of uncertainty may make it more difficult for parents to help prepare their child for this transition.

Parents with a child with additional needs may be particularly anxious about their child starting in childcare. They may be anxious that their child will be laughed at by other children and excluded; that the child will be frightened; that the child would not be able to communicate their needs and that their needs might not be met (Menter a Busnes, 2012).

Communicating with parents, including fathers, is a very important element of ensuring a smooth transition into childcare. Real partnerships should be developed between parents and staff in supporting the transition process. Children may communicate their concerns around attending childcare. This might be through verbal cues and non-verbal actions and behaviours that may suggest they are anxious. Parents will also be aware of any other events happening in the child’s life that may impact on their smooth transition, such as a house move, new baby or parental separation. Parents who have a child who has additional learning needs can be an invaluable source of information about the needs of their child; techniques to use with the child; how early signs of distress can be spotted and the most appropriate ways of comforting them. It is important to listen to parents, acknowledge their concerns and value their intimate knowledge of their child’s needs, likes, routines and development.

Please see Section 8 of “Parenting in Wales: Guidance on engagement and support”¹⁶ for more information and strategies for working with the following groups of parents:

- minority ethnic parents;

• young parents;
• fathers;
• disabled parents;
• parents with a disabled child and/or with additional learning needs;
• foster and kinship carers;
• families with a parent in prison;
• parenting adopted children;
• parents with mental health needs; and
• parents affected by domestic abuse.

A One Page Profile or ‘All About Me’ Type Information Card should be produced which encourages parents and relevant professionals working with the child to be part of the process, to give a range of information about their child. This can also provide reassurance to parents that important information about their child will be available to all staff in the setting. It is considered good practice for this to be written in the first person and based on a Person Centred Approach (see section 6.4.2) and linked with the Early Identification Plan, action or play plan. The following information can be provided:

• great things about me;
• my family;
• what is important to me;
• the best way to support me;
• what I am learning to do;
• things that upset me;
• a photo of the child (with parental consent); and
• names of those professionals working with the child (if appropriate).

Appendix C provides an example of a One Page Profile and templates of ‘All About Me’ type information cards.

Parents should be asked to complete an information sharing consent form and the childcare setting should collect the following information at point of entry:

• home language;
• home circumstances (including religion and what is important to the family);
• who will collect the child on particular days;
• care needs (including medication requirements, toileting and how the child shows anxiety and distress and what soothes them);
• dietary needs (including allergies);
• emergency contacts; and
• any other professionals who are involved with the child and their family.

Staff should welcome parents into the childcare setting and show them that they are valued as the children’s first educators and carers. To build parents’ confidence, staff should ensure that parents are aware of the aims of the setting and be given opportunities to see how practitioners relate to and work with their child.
Some parents may not wish to be actively involved in activities in the childcare setting. This lack of involvement may not necessarily be due to a lack of interest in their child. It may be because they lack confidence or awareness of their important role. It is important therefore to include parents, develop their confidence and encourage their input in as many ways as possible.

To emulate good practice it is expected that the following actions, to forge home to child care setting links, will be considered:

- hold an induction or open day for parents and children to show them around the setting;
- use a welcome pack, to provide parents with valuable information about the child care setting, significant adults, routines; staff:child ratios and what snacks and activities will be on offer. This could include photographs of the setting (including areas such as the toilet and the outdoor play area); key toys and resources; key workers and children engaged in the activities available at the setting. On the back of the photographs the setting could also put explanations and suggestions of topics for parents to talk about with their children. This will help the child develop a sense of familiarity;
- ensure information provided to parents is attractive, high quality and written in a straightforward manner that is easy to understand. Any information provided to parents should consider the needs of parents with low literacy levels. NIACE (www.niace.org.uk/current-work/readability) has a leaflet which gives advice on how to write material that is easy to read;
- encourage parents to make, with their children, their own badge for their peg or other dedicated personal space, possibly during an informal visit to the child care setting;
- provide parents with information about the process of induction and all the practical details, for example whether they will be allowed to stay for the first few sessions. This will help parents to prepare their child;
- provide parents with opportunities to visit the setting and meet staff prior to them starting child care. Parents could be invited to come in to the setting and join in with story time or singing rhymes and they could be invited to a family trip or a craft session;
- after the first few sessions parents can be given feedback to reassure them (e.g. phone call, text, chat at the end of the session, photograph, diary);
- provide a worry box for parents to share any anxieties;
- have a notice board where a daily timetable of activities is posted;
- have a hand-out or newsletter which gives details of what children are learning and suggests what parents can do at home to support this;
- give parents a written daily diary of their child’s activities;
- produce an end of term/year activity book recording the child’s progress; and
- invite parents to share their experience of the transitions process. Ask them informally or give out a questionnaire. Use this information to review the transitions process and implications for future transitions.
Supporting documents and contacts:

‘Cymraeg i Blant’ / Cymraeg for Kids’ offers free advice to parents on raising children in Welsh and English. The website has tips and resources for introducing two languages from day one.

http://cymraeg.llyw.cymru/learning/cymraegiblant/?lang=en

Good practice guidance on ‘Early Home Learning Matters’ can be downloaded from this website:

Learning and Play – giving your child the best start
This booklet for parents produced by the Family and Parenting Institute (now Family Lives) explains why play and time with parents can give very young children a really good start when they go to school. It includes practical tips and ideas.

The Literacy Trust ‘Their Words for Life’ website has advice and resources for parents to help their children develop vital communication and literacy skills.
http://www.wordsforlife.org.uk/

I CAN is a children’s communication charity which provides, information, advice, resources and assistance to parents and professionals to support children’s communication needs. I CAN also has a Help Enquiry Service, online via the Talking Point website and in person through their multi-disciplinary speech and language assessments for children.
Tel: 020 7843 2544 or email: help@ican.org.uk
http://www.ican.org.uk/

The Peers Early Education Partnership (PEEP) has developed Learning Together materials to support parents and practitioners. There is information and ideas for things parents can do at home for babies to four-year-olds. Please visit the Peers Early Education Partnership website for more information
http://www.peep.org.uk/section.asp?id=30&cachefixer=cf17225978334996

The Welsh Government have set up 2 Facebook pages ‘Education begins at home’ in Welsh and English which provide parents and carers with tips and links to websites which can help them support their children to learn within their home environment.

6.7.3 Promoting attendance

To promote a child’s continued attendance and facilitate parental involvement in settings, staff should keep parents fully informed about the way their child is settling in and about their daily activities. Ideally, the child’s key worker should provide verbal feedback to parents at the end of each session. A settling in diary could also be produced; recording information about happy moments, times when the child was distressed and any strategies that helped soothed him/her.
Parents may also value written comments about the way their child is settling in and information about what their child enjoys doing during the day. The National Evaluation of Flying Start (Welsh Government, 2013a) found that simply having friendly chats with setting staff every day seemed to engage parents the most. The parents said that these informal interactions helped them trust staff and although termly written updates were appreciated it was the daily contact and information that made parents feel closer to their child’s experience. This resonates with research on user perceptions of services which consistently shows that the extent to which families feel they can ‘trust’ staff contributes to their motivation to attend regularly (Moran et al, 2004).

A smooth transition from home to childcare may help promote improved attendance. The importance of regular attendance should be stressed and parents encouraged to commit to this. Staff should follow up promptly on poor attendance e.g. by phoning or texting parents; ascertaining reasons for absence; sensitively addressing any issues and, if appropriate, carrying out home visits.

<table>
<thead>
<tr>
<th>To emulate good practice it is expected that the following actions, to promote regular attendance, will be considered:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• having a clear point of contact with a staff member (e.g. key worker) who works closely with their child;</td>
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<tr>
<td>• emphasising the value placed on the parents' role as primary educators of their child and how much they know about them;</td>
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<tr>
<td>• open days and special activity sessions where parents/carers come in and do activities with their children;</td>
</tr>
<tr>
<td>• keeping parents fully informed about the way their child is settling in and about their daily activities (face to face communication helps to break down barriers and build confidence between practitioners and families);</td>
</tr>
<tr>
<td>• producing a settling in diary;</td>
</tr>
<tr>
<td>• following up promptly on poor attendance;</td>
</tr>
<tr>
<td>• developing an attendance policy for child care and standardising non-attendance procedures between settings (please see and example at Appendix E);</td>
</tr>
<tr>
<td>• have clear protocols to adhere to if a child is absent, whereby different pathways are followed, depending on whether the child is Child Protection, Child in Need etc;</td>
</tr>
<tr>
<td>• using a management information system to help monitor attendance;</td>
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<tr>
<td>• providing an attendance champion at each setting;</td>
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<td>• employing a child care liaison/engagement officer;</td>
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<tr>
<td>• sending reminder texts to parents and/or a ‘Wish you were here’ postcard;</td>
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<tr>
<td>• holding language and play sessions at Flying Start settings where parents can be encouraged to be partners in their child’s learning process. These can also provide good opportunities for other messages to be given to parents. e.g. promotion of Welsh medium books, the importance of talking and reading to their child and “healthy eating” messages;</td>
</tr>
<tr>
<td>• using Facebook.* Parents can be invited to ‘like’ the Flying Start page and then receive automatic updates from it; and</td>
</tr>
</tbody>
</table>

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* Using Facebook is not recommended for this context.
• looking at what additional support may be available for vulnerable families to support the child’s attendance at childcare.

* Please refer to your local authority’s social media guidance/policy.

**National Minimum Standards for Regulated Childcare**

All Flying Start childcare settings must be registered and regulated by the Care and Social Services Inspectorate Wales. All registered persons must have regard to the National Minimum Standards for Regulated Childcare. These are National Minimum Standards for registration and in order to provide quality childcare, the Welsh Government expects that Flying Start childcare settings will exceed these basic standards.

This section relates to the following National Minimum Standards for Regulated Childcare:

*Standard 6: Working in partnership with parents*

Outcome: Parents are kept fully involved in and informed about their child’s activities, achievement and progress.

The registered person is responsible for ensuring that:

- They and their staff work in partnership with parents to meet the needs of the children, both individually and as a group (Standard 6.1).
- Parents’ primary responsibility for their children is recognised and respected (Standard 6.2).
- Parents are kept fully informed about routines and childcare practices (Standard 6.3).
- Policies and procedures are available to all parents (Standard 6.4).
- In a day care setting, information is given to parents, that includes the role of parents, including any expectations that parents participate on the management committee or as volunteers. Any volunteers and committee members are given full information and guidance on their roles and responsibilities (Standard 6.5).
- The policy about privacy and confidentiality will be made available. Any requests by third parties for information will be discussed with parents and information only shared with their consent. An exception can be made where there is a requirement to report concerns about the welfare of safety of the child, for example in relation to child protection (Standard 6.6).
- If a child is identified as a child in need (Section 17 of the Children Act 1989) the registered person, with parents’ permission, gives appropriate information to referring agencies (Standard 6.7).
- Details of what their child has achieved during the day, including any significant event or change in behaviour, are shared with parents (Standard 6.8).

• Records are kept containing details about the child and notes on his/her progress. Parents have access to all written records about their children (except as provided in NMS 6.10 below) (Standard 6.9).

• Regular information is provided for parents about activities provided, for example, through wall displays, photographs and examples of children’s work (Standard 6.10).

6.8. Home Visits

If possible and practical home visits can be carried out before children start at a setting. Home visits are considered a good opportunity to begin building a relationship between parents, practitioners and children; and the process of sharing information. Children (and parents) often feel more relaxed in their own home, which can aid relationship building and trust. Parents may also appreciate having time to talk on a one-to-one basis. Observing a child in their own home environment can also help to explain certain behaviour patterns and interests. It also provides an opportunity to see what learning activities are already taking place in the home and who else might be able to support home learning (e.g. fathers, grandparents, older siblings, other relatives).

Home visits should be treated with sensitivity. It should be made clear to parents that they are under no obligation to accept a visit and that the purpose of the visit is to get to know them and their child, not to inspect their home. The home visit can provide a good opportunity for parents and children to get to know Flying Start staff and find out more about the setting, routines, procedures and activities. The home visit can also be an opportunity to gather admissions information, and to jointly consider the best approach to settling the child into the childcare setting. This may help to alleviate pressure on the parents at their first visit to the setting.

Staff should adhere to their setting or authority’s health and safety procedures for home visits. For example, staff may not wish to visit homes alone. Visits can take place when Flying Start childcare settings are on half term breaks and could be undertaken by the childcare manager, child’s key worker, family support workers or other relevant Flying Start staff such as transitions workers.

6.9. The role of childcare staff

Staff should be given sufficient time and resources to prepare for all aspects of transition, including for accessing, reading and sharing information about children. Staff should be aware of those children who may be vulnerable and/or have additional learning needs and liaise with other professionals who may be involved with particular children.

6.9.1 The role of the key worker

The key worker system has an important role to play in ensuring a smooth transition for children. If possible, parents and children should have an opportunity to meet the child’s key worker when they visit the childcare setting. The role of the key worker should be clearly explained to parents. The key worker should be aware of the child’s emotional and practical needs before they start in the setting and they should
monitor the success of the transition process, in consultation with the parents and other staff.

6.9.2 The role of Flying Start Advisory Teacher/Early Years Advisor/Transitions worker

Flying Start advisory teachers should work closely with childcare staff, health visitors and parents to ensure that the transition from home into childcare is smooth. The advisory teacher should work closely with parents and health visitors to ensure that a comprehensive profile is established for all Flying Start children who are starting in a setting. The Flying Start Advisory Teacher may also take a role in some of the following activities, where appropriate:

- supporting settings to self-evaluate, including on their transition arrangements;
- delivering information sessions to new parents and children and inform them about their childcare entitlements in the setting;
- undertaking a home visit in conjunction with a key worker from the childcare setting (if applicable);
- arranging visits for parents and children to the childcare setting;
- liaising with health visitors regarding any concerns or issues with a particular child and discussing progress and next steps;
- in partnership with the health visitor and childcare setting ensuring the care or play plan for children with additional needs, is in place;
- ensuring all childcare staff understand the "key worker" role and take responsibility for assessing and planning for each child on an individual basis;
- working with the Flying Start Health Team and families to aid smooth transition from home to childcare settings; and
- liaising with specialist staff such as Additional Educational Needs Advisors, Portage and Educational Psychologists.

6.10. Joint working

The setting should build productive relationships with the Flying Start health visitor and any other relevant professionals such as speech and language therapists, who can provide additional information about children, who may be vulnerable at the time of transition.

The childcare umbrella organisations in Wales (National Day Nurseries Association (Wales); Wales Pre-school Providers Association (WPPA); Mudiad Meithrin; Clybiau Plant Cymru Kids' Clubs and the Professional Association for Childcare and Early Years (PACEY) may also offer advice around the transition process.

Settings can also build relationships with providers running groups such as ‘Parent and Toddler’ and ‘Ti a Fi’. When in close geographical proximity, settings could arrange for children to visit so as to become familiar with the staff and the layout of the setting.

Health visitors can also drop in on childcare settings to check on a child’s progress. This enables the health visitor to stay in tune with the child’s development, allowing the health visitor to offer any specific support that might be needed.
Case Study 1: Standard transition arrangements

All children eligible for a Flying Start childcare place are signposted by the health visitors to their local settings. The health visitors discuss individual children’s needs with childcare staff before the children enter and the results of the first developmental progression assessment (and where applicable, screening outcomes of the SoGS assessment) are shared.

The settings then make contact with the families to introduce themselves and to make arrangements for the parents/carers and children to visit. During the visits the parents/carers complete the setting’s registration forms and they are introduced to the children’s key workers. Prior to the children starting childcare, arrangements are made for the parents/carers and children to visit for short periods of time to familiarise themselves with the layout of the setting and to get to know the staff. On entry, because they already know the staff, parents/carers are comfortable about approaching them with any concerns and the children are happy to separate from their carer.

Case Study 2: Encouraging take-up

The Flying Start health visitor encouraged the parent to take up the childcare offer. The health visitor and the family’s support worker accompanied the parent and child during the initial visit to the Flying Start childcare setting. During the visit, arrangements were made for both the parent and child to spend some time at the setting before the child actually started.

However, the parent and child did not visit the setting on the dates agreed. The setting leader informed the health visitor of the family’s non-attendance and she, in turn, made another visit to the home. Again arrangements were made for the parent and child to visit the setting.

The parent and child visited the setting following the health visitor’s second visit and were introduced to the child’s key worker. The key worker helped the parent to complete the setting’s registration form and the parent was given an opportunity to discuss the child’s likes, dislikes and interests as well as any medical and dietary requirements.

Until both the child and his parent were comfortable about being in the setting, the parent stayed with him during the whole visit. Gradually, the parent spent less and less time at the setting until the child was confident enough to stay on his own.

All contact with the family was then made through the child’s key worker, who gave the parent regular updates about the child’s activities, progress and development at the end of each session.
Case study 3: Child with additional needs

The Early Years Inclusion Team received a phone call from a Flying Start health visitor who had recently been to see a new family on her caseload with a little girl named Megan. Megan had been diagnosed with a very rare degenerative genetic condition. The child had significant learning difficulties, and was fitted with a tracheostomy and a nasal gastric tube. The health visitor was concerned about how she would access her Flying Start childcare placement.

A multi-agency meeting was organised by the Early Years Inclusion Team Leader and held the next day with representatives from health and education. A plan was put into place which involved all staff members being trained to deal with the child’s health needs. A risk assessment and health care plan was written and agreed. Funding for additional support was agreed for Megan to be able access the childcare placement.

Megan was able to start the next week and has made progress in the setting. Megan’s mother was very anxious at first about Megan’s placement as she had always been told that she would need to go to special school and it was a dream come true for her to then move on to attend her local nursery with her siblings.

Megan’s mother was also put in touch with another family in the area whose daughter had the same very rare condition.

Case study 4: Child with additional needs

The setting received a phone call from Flying Start to inform them that a child on the waiting list had additional needs and required a 1:1 support worker for which funding has been arranged. Her needs were explained and the leader was informed of the professionals already involved with the child.

The playgroup leader informed her line manager that they need an extra member of staff as currently they have one member of staff for every 4 children, therefore they would not be able to use an existing member of staff to carry out the 1:1 support. The recruitment of the 1:1 support worker took approximately three months.

During this process the setting contacted the parent and arranged for them to visit the setting. Discussion with the child’s parents took place relating to the child’s individual needs and the necessary paperwork was prepared and shared with the parents. A risk assessment and initial assessment was recorded to aid forward planning. The parents were able to signpost the setting to a website where they could research their child’s condition. The parents were assured that they would be contacted as soon as a 1:1 support worker was available for their child. When the support worker was ready to start, the parents were invited to visit the setting again and meet the key/support worker. The child started shortly after this and a settling in process was arranged with the parents until the child was confident to stay on her own with the support worker.

18 Names in case studies have been changed to protect identities.
Case study 5: Encouraging regular attendance

During the registration meeting, parents are given an opportunity to talk to the staff privately about their child’s likes and dislikes, medical and dietary needs and any concerns they may have about the transition or the provision at the setting. Parents are also given a pack which includes information about the setting. Arrangements are made for the parents and the child to spend some time at the setting before the child actually starts. This helps them to familiarise themselves with the layout of the setting, the learning environment and the routines as well as giving them the opportunity to meet other parents and children.

Key workers meet their designated children on entry to each session and spend some time with them every day. They also report back to parents at the end of each session and inform them about their children’s activities, progress and development during the session. If the children are distressed on arrival, then their key worker contacts the parents during the session to reassure them when their children have settled well.

Health visitors visit settings every half-term to discuss the progress made by the children and to talk about any issues arising. Parents are also invited to attend a coffee morning, which is held every half-term, where they are introduced to the Language and Play staff who provide an activity for them and talk about the sessions which they can provide.

A “Childcare Forum” is held termly for Flying Start teachers and childcare staff, to discuss any concerns or issues such as ways of improving attendance within settings.

This strategy has helped to ensure that children attend the settings regularly, which has had a positive impact on the development of their speech and language and personal and social skills. It has also helped children to develop confidence and independence and a positive attachment to the staff. The children are also better prepared to move on to the next stage in their care and education when it is time to transfer to the Foundation Phase.
7. Transition from Flying Start childcare into the Foundation Phase

The Flying Start childcare setting should have a policy for the transition of children to the Foundation Phase, outlining how children and their parents will be supported; how staff at both settings will work together and how information will be shared to ensure continuity of learning and care.

It is a statutory duty for a local authority to provide a free, part time, good quality education place the term following a child’s third birthday, should the parent want this. Part time is a minimum of 10 hours per week for around the same number of weeks as in a school year. The place can be in either a maintained school or a non maintained setting19 (that is approved by the local authority, registered with CSSIW and subject to regular Estyn inspections). How this provision is planned and delivered is a matter for the local authority. They should take into account the needs of the individual child and their parents and the level of provision they already have in place.

It is not a statutory requirement for a child to start compulsory education until they are 5. It is only a statutory duty for local authorities to offer and provide an early education place for 3 and 4 year-olds, but parents have a choice on whether to take it up. The Family Information Service can advise on what Foundation Phase early education places the local authority offer.

As stated in “Building a Brighter Future: Early Years and Childcare Plan” (Welsh Government, 2012) transition from Flying Start to the Foundation Phase is an important time for children and their families.

The way that Flying Start and Foundation Phase settings and the key professionals within those settings work together is critical. Feedback from Foundation Phase lead officers within local authorities suggests where transitions are well managed children settle into the Foundation Phase setting more readily.

In some cases one childcare setting may feed into many different Foundation Phase settings or one Foundation Phase setting may receive children from many childcare settings. Although this creates a challenge for childcare staff in liaising with multiple settings every effort should be made to consider the needs of single children moving to other settings. This would include assisting parents to arrange visits to the new setting, helping them prepare their child for the move and for staff to share information about the child to the new setting (preferably in person or on the telephone).

An attempt should also be made to gather as much information as possible about the various Foundation Phase settings the children will transfer to. This might include photos of the settings and information about whether it is maintained or non-maintained; the staff at the setting; the age range of the children at the setting;

19 The non-maintained sector comprises regulated provision including child-minding, full day-care, sessional care, crèches etc.
staff ratios; where the toilets are situated; the type of learning opportunities provided; some of the rules at the setting (e.g. are children expected to wear different shoes inside and outside, are children expected to sit down to eat etc).

The Flying Start childcare setting should have a clear policy for transitions, which should consider the following:

7.1 Support for children during transition

For many children, leaving the childcare setting and starting in a new Foundation Phase setting can be a daunting and unsettling experience. Children may feel sad about leaving their current setting and leaving their key worker and their friends if they are not transferring with them. A scrap book can provide a lasting reminder and memento of the child’s time at the setting. This could include photos of their friends, key workers, and favourite activities.

In areas where Flying Start childcare settings are in close proximity or co-located with Foundation Phase settings, the transitions process can be supported by sharing resources such as allotments, gardens or forest schools. To help children familiarise themselves with their new surroundings they should be given the opportunity to join in with circle time or other suitable activities. The Foundation Phase teacher could also be invited into the childcare setting to share stories or song and rhyme time.

In areas where settings are not co-located children should have the opportunity to visit the Foundation Phase setting or attend taster sessions with childcare staff (if possible) and/or with their parents. This helps them become familiar with the new environment before beginning the Foundation Phase. In some areas children will also have informal visits to Foundation Phase settings with their parents and may also meet staff when they attend planned events such as concerts, sports days and fundraising events.

Individual profiles (see section 7.6) provide relevant information to Foundation Phase settings regarding a child’s needs and skills, thus enabling schools to prepare for a child’s next steps in learning and address any needs identified.

7.2 Support for the transition of children with additional learning needs

When children with additional learning needs transfer from Flying Start into the Foundation Phase (or specialist school setting) a great deal of work may be required to ensure that they have the support they need and that parents are comfortable with the arrangements.

For families with children with additional needs, change may be particularly stressful and the transitions process should be given particular consideration. Families may be concerned about how their child will settle and whether the nature of their child’s needs will be understood. They may require more visits and opportunities to visit the setting and get to know staff than other children. It may be helpful to provide children (especially useful for children with speech, language and communication needs and children on the autism spectrum) with photos of the setting, including pictures of staff, the toilets and the front entrance.
With parental consent, the childcare setting or other relevant Flying Start staff should notify the Foundation Phase school/setting about the additional needs of children as early as possible so that they can plan effectively to meet those needs. Any documentation should be passed on as early as possible, preferably with a face-to-face meeting, which includes parents. A One Page Profile or an ‘All About Me’ type information card can be written with the child/parents and professionals which can be sent to the receiving Foundation Phase setting. Please see section 6.7.2 for further information. Appendix C provides an example of a One Page Profile and templates of ‘All About Me’ type information cards.

To achieve a smooth transition, practitioners should ensure that the receiving setting/school is aware of the child’s progress and his/her future developmental needs. This should include information about the particular strategies that have worked in the childcare setting and the equipment and activities used. Information should be provided to the Foundation Phase setting well in advance if adaptations or specialist equipment will be needed.

Ideally regular meetings should be held between the Advisory teacher, Special Educational Needs Co-ordinator (SENCO) and teacher (or Foundation Phase setting leader). Ideally, other relevant professionals involved with the child’s care should be invited to discuss the child’s requirements and support needs.

The following are examples of ways in which Flying Start areas are ensuring that the needs of children with additional learning needs are met:

- support for the transition of children with additional learning needs is planned through a multi-agency Inclusion Panel attended by the Flying Start Educational Psychologist;
- a Flying Start Additional Support Form, signed by the Flying Start health visitor, is submitted to the nursery provider with parental consent;
- a Special Needs health visitor links with childcare providers and the central team in advance of children with complex needs accessing their Foundation Phase place; and
- the Flying Start advisory teacher and Flying Start playgroup leader meet with the SENCO and other staff of the school/setting regularly.

### 7.3 Foundation Phase Profile

The Foundation Phase Profile (FPP) is an assessment tool for 3 to 7 year old children to provide schools and settings with a consistent approach that aligns assessment at the beginning and the end of the Foundation Phase. The FPP became statutory from September 2015 and assesses children’s abilities and development in four Areas of Learning (AoLs). These are:

- Personal and social development, well being and cultural diversity (PSDWCD);
- Language, literacy and communication skills (LLC);
- Mathematical development (MD); and
- Physical development (PD).
The FPP is to be expanded for use in Flying Start to enable the baseline of children on transition into Flying Start childcare and the assessment of progress at the age of 3. The FPP assessment at the age of three, along with the 27 month developmental progression assessment, and where applicable the SoGS assessment, will help strengthen transition from Flying Start settings into the Foundation Phase.

Expansion of the FPP is required to make it fit-for-purpose to allow use with children at the age of two as they enter Flying Start childcare settings.

7.4 Support for parents

Working with parents is a very important aspect of ensuring a smooth transition from Flying Start childcare into the Foundation Phase:

“Parents/carers are the most constant adults in a child’s life. They are able to ease the transition process for the child, providing they are kept well informed about the process as the child progresses from home through Foundation Phase settings” (Welsh Government, 2008, page 24).

Parents will be able to inform staff of any concerns their children may have and any family circumstances that may impact on their child’s smooth transition, such as a house move, new baby or parental separation. It is important to listen to parents, acknowledge their concerns and offer reassurance about the transition process.

To help to prepare their child parents should be provided with:

- information about admission forms and requirements, including submission dates and assistance to complete admissions forms (on paper or on-line) (Support to complete admissions forms could come from childcare staff, family support workers or other relevant Flying Start staff);
- an opportunity to ask questions throughout the transition process;
- information about the process of induction and all the practical details;
- information about what their role will be in the process;
- opportunities to visit the Foundation Phase setting and meet staff;
- information about language and play and number and play groups or parenting programmes like the Incredible Years School Readiness programme taking place in the local area; and
- information about relevant family support organisations or activities in the area.

Ideally Flying Start staff should:

- work with local authority admissions teams to ensure parents complete paperwork correctly and in sufficient time to allocate places appropriately.
- be familiar with Foundation Phase admission forms and requirements, including submission dates.

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20 The Incredible Years School Readiness programme is designed to promote children's school readiness by developing key social and emotional skills and developing language and reading skills. Parents attend four sessions explore how they can support children’s play as a learning activity and effective ways of introducing children to books. Parents learn through discussion, vignettes, role play and activities with their children at home [www.centreforearlyinterventionwales.co.uk](http://www.centreforearlyinterventionwales.co.uk)
Staff should let parents know that Welsh medium or bilingual education is available to all parents who wish it for their children\(^{21}\).

In addition Flying Start and Foundation Phase settings may consider organising joint trips and activities for parents and children such as concerts, sports days and fundraising events.

### 7.5 The role of the Flying Start Advisory Teacher/Early Years Advisor

In order to smooth the transition between Flying Start and the Foundation Phase, childcare provision in Flying Start settings is expected to reflect a similar philosophy and pedagogy to the Foundation Phase\(^{22}\). Flying Start Advisory Teachers should assist with maintaining the high quality provision required for the Flying Start programme and work closely with childcare settings to achieve this.

Flying Start Advisory Teachers work closely with childcare staff and Foundation Phase settings to ensure that transition is smooth. The Advisory Teacher should work closely with Foundation Phase practitioners and Flying Start childcare staff to ensure that a comprehensive profile is established for all Flying Start children who are moving on to the Foundation Phase. The Flying Start Advisory Teacher might also take a leading role in:

- facilitating transition meetings and network opportunities with Flying Start and Foundation Phase staff;
- arranging visits for parents;
- ensuring that all settings complete appropriate paperwork and that this is delivered to the receiving setting;
- discussing the needs of individual children;
- liaising with specialist staff such as Additional Educational Needs (AEN) Advisors, Portage and Educational Psychologists;
- keeping up to date with Foundation Phase practice and guidance in order to support the transition process from childcare to the Foundation Phase;
- keeping abreast of any Foundation Phase setting issues which may affect the Flying Start intake, for example the availability of nursery places in receiving Foundation Phase settings/schools; and
- maintaining links with Foundation Phase settings, for example by checking whether children have settled well and whether any further information about them is required.

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\(^{21}\) Mudiad Meithrin have information about the advantages of Welsh medium education and the benefits of children being bilingual: [http://www.meithrin.co.uk/what-parents-have-to-say/](http://www.meithrin.co.uk/what-parents-have-to-say/)

\(^{22}\) For further information please see “Foundation Phase Framework (Revised 2015)”. This document sets out the requirements for the Foundation Phase for 3 to 7-year-olds in Wales. [http://wales.gov.uk/topics/educationandskills/earlyyearshome/foundation_phase/foundationphasepractitioners/frameworkchildlearning/?lang=en](http://wales.gov.uk/topics/educationandskills/earlyyearshome/foundation_phase/foundationphasepractitioners/frameworkchildlearning/?lang=en)
7.6 Individual profiles

Information transferred about children in an individual profile must be carefully considered in order to provide information to support progression. Any information shared must respect issues of confidentiality and data sharing protocols. This should include some or all of the following types of information:

- child’s personal details (e.g. name and date of birth);
- contact details;
- Flying Start setting attended and leader’s name;
- information that would help the receiving setting e.g. how the child settled into the Flying Start setting, how they engaged and attendance;
- developmental progression assessment results undertaken at 15 and 27 months (and where completed, SoG results23);
- FPP assessment results;
- name of health visitor;
- any additional learning needs and support;
- additional learning needs paperwork (for example reports from health staff, speech and language therapist, paediatrician);
- details of other agencies involved;
- short comments on child’s progress and their likes and dislikes;
- ethnicity; and
- home language.

The individual profile should be completed by the childcare setting leader, with input from the key worker and with support from the Advisory Teacher. The individual profile should be:

- shared with parents, with the opportunity to add information they feel is relevant. (Parental consent to share this information must be obtained. If it is not possible to gain parental consent, and there is significant information that should be passed on, the child’s Flying Start health visitor should be consulted); and
- passed onto the Foundation Phase setting before the end of term by the setting leader or Advisory Teacher. Ideally the pack should be handed over in a face-to-face meeting, which provides an opportunity for a discussion about the child, as this is a very effective way of information sharing.

7.7 Transition meetings

Opportunities for meeting and engaging in dialogue with colleagues across the sectors should be encouraged in order to get to know children and make effective use of transfer information. Where appropriate, the transition process will be facilitated by meetings between relevant professionals including health visitors, childcare providers, advisory teachers and special needs health visitors. These can take the form of informal meetings; formal meetings or multi-agency planning groups.

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23 Some Foundation Phase settings may not be familiar with SoG results and may need advice on how to interpret the results.
This is also an opportunity to discuss the individual profile that is produced for each child.

Case study 1: Early referral for a child with additional learning needs and well planned transition from the childcare setting into the Foundation Phase

Initial planning for Mohammed started from a ‘Team around the Child’ meeting hosted by health where the Transition Worker recommended that a referral to Flying Start multi agency group would be appropriate given Mohammed’s complex needs. Mohammed, then two, was due to be adopted into a family in the Cardiff area and to attend a Flying Start setting.

The main concerns identified were possible attachment issues and mobility in relation to his cerebral palsy. As his time at the setting came to an end the transition worker began the process of managing the transition from setting into the Foundation Phase nursery. A series of home visits were completed by the transition worker to get to know the family and Mohammed. An ‘All About Me’ type information card was written with the family and sent to the setting prior to Mohammed starting. Staff at the setting shared information that they had with the nursery.

On advice from the transition worker, several visits were arranged for staff from the childcare setting to go to the nursery with Mohammed for him to become familiar with staff and the layout of the setting. The Manual Handling Outreach worker accompanied the Transition Worker and Mohammed on their second visit to recommend adaptations/modifications that may be needed for Mohammed to navigate the nursery using his walker at ease. The Transition Worker then accompanied Mohammed for his first three sessions into his new setting.

Mohammed has continued to progress and thrive in his current setting and feedback from his parents was that the transition process was fundamental to this smooth start for both them and Mohammed.

Case study 2: Staggered entry into the Foundation Phase

There is a staggered entry system for all children who transfer from Flying Start settings into Foundation Phase. The children begin by attending the Foundation Phase settings for short periods of time, which are then gradually lengthened until they attend for their statutory entitlement of a free part-time (minimum of 10 hours a week) Foundation Phase place. The amount of time they spend at the settings during the first few visits is agreed following discussions between the parents, the Flying Start staff, Foundation Phase staff and each child’s key worker.

Although it takes some of the children time to mix and play with the older children, the feedback from parents suggests that they are very happy with this system. They stated that their children were excited about starting at the Foundation Phase setting because they already knew the staff and were familiar with the layout of the room.

24 Names in case studies have been changed to protect identities.
Impact of the strategy:

- the Flying Start settings and the Foundation Phase setting work closely together and share expertise as well as equipment and resources which improves the quality of provision;
- the strategy allows for a seamless transition from one type of setting to another;
- children are happy to move into the Foundation Phase and quickly gain a sense of belonging because of the visits they have made;
- it allows Foundation Phase practitioners to observe the children in their daily activities, which helps them to prepare appropriately for them when they transfer;
- it encourages settings and schools to work together for the benefit of the children and their parents/carers;
- it helps parents/carers to get to know the staff of both the Flying Start and Foundation Phase settings and schools very early on and they are encouraged to discuss their children’s needs with them;
- parents are more confident about discussing their children with the practitioners; and
- the feedback received from the Foundation Phase setting is positive as the staff are aware of the children’s needs before they start and have a clear starting point for them.

**Case Study 3: Co-located settings**

A Flying Start setting is situated in the grounds of a local primary school, along with the Foundation Phase provision. The setting has its own room but shares the entrance and toilet area with the Foundation Phase class.

In order to ensure a smooth transition from one setting to another, the staff of both settings decided to work closely together to prepare the cohort of children for transfer into the Foundation Phase.

Children from the Flying Start setting began to join the older group for activities such as singing, story time and circle time and were invited to attend concerts and other events.

They also began to share play times so that the younger children became familiar with playing outside with their older peers. Occasionally, the leaders also exchanged groups so that the younger children got to know the staff of the Foundation Phase setting.

Parents and children from the Flying Start setting were also invited into the Foundation Phase class to familiarise themselves with the environment and to ask questions and to talk about their children’s development and needs.

On entry to the Foundation Phase, the new children settled well and most were happy to be separated from their parents from the very first day.
8. Transition from the Flying Start health visitor to the school nurse

The close relationship between health visitors and the school nurse in providing support to families is recognised in the ‘Framework for a School Nursing Service for Wales’ (Welsh Government, 2009). School nurses ‘will continue to work closely with health visitors providing a continuous service to children and young people from birth to adulthood.’ They are required to work in partnership with health visitors, ‘to enable the transition of children into school settings, identifying and working with those families who may have additional needs in this process, within a multi-disciplinary response when appropriate.’

Differing local arrangements (‘transfer of care protocols’) are in place regarding the transfer of health information from health visitors to the school nurse. Generally responsibility, and as appropriate/necessary, the child’s health record passes from health visitors to the school nurse in the September when the child starts full time education or when they turn 5.

There is a difference in timings between the health visiting element of the Flying Start programme and generic health visiting services. It is recognised that transferring children to the generic health visiting team, following the child’s fourth birthday (when Flying Start activity ends), then to the school nurse a few months later, is time consuming, compromises continuity and is not in the best interests of the child or family.

Generally the Flying Start health visitor has completed many of their core functions; such as key developmental checks, assessments and early preventative support by the child’s fourth birthday. In most cases, children who have turned four will remain the ‘responsibility’ of the Flying Start health visitor until the handover to the school nurse at age five (or often when they start school in the September). These children are not counted within the caseloads for monitoring purposes and generally will not require significant input from the health visitor.

The Welsh Government recognises that four to five year olds who have previously been supported by the Flying Start programme are being retained by Flying Start health visitors on their caseload, rather than being transferred to generic health visiting services. While it is acceptable to do so, it is not a requirement of the programme and any four to five year olds who are retained should not be taken into account by the local authority when assessing Flying Start health visitor’s caseloads.
Any child and its family that is considered ‘high need’; or where there are additional health needs or concerns of safeguarding that require intensive health visiting services, after the child’s fourth birthday continue to receive support from the Flying Start health visitor. With children where there are safeguarding concerns, communication continues between agencies and the links between professionals working with the family are maintained.

**Transfer of records**

Flying Start health visitors should assess which children within their caseload need special consideration when responsibility, and if appropriate/necessary, the child’s health records are passed over (e.g. children where there are safeguarding issues and those children with a complex or additional health need). There are varying arrangements in place in different areas for the transfer of health records for these children. In line with Local Health Board policies the Flying Start health visitor should ensure that the school nurse and other relevant agencies/professionals are aware of any vulnerable children when their health records are forwarded.

**The Healthy Child Wales / Plentyn iach Cymru (HCW/PIC) Programme**

One of the key recommendations of the Vision for Health Visiting Services (Welsh Government, 2013c) was to develop a standardised evidence based approach to child health promotion and developmental checks across Wales. The HCW/PIC programme will reflect a systematic, Wales wide and evidence based approach to child health surveillance and screening which will aim to improve health outcomes and reduce inequalities across Wales. The Programme is now being implemented to provide a universal core service to promote health and well-being for all children in all Health Board areas. This includes screening, immunisation, health and development reviews, supplemented by advice around health, safeguarding, well being and parenting.

A key element of the HCW/PIC Programme will be to clarify and standardise information sharing between professionals and families at times of transition, especially between Primary care services (GPs, Midwifery, Health Visiting and School Nursing) and Flying Start Services. Information systems, including the electronic child health record being developed via the CYPRIS system, and Wales wide Red Book, will support the information needs of the child and family, the Programme and Flying Start, as well as enable data to be shared between professionals and agencies.
9. Transition out of Flying Start and signposting to other support

Parents interviewed as part of the National Evaluation of Flying Start (Welsh Government, 2013a) described different experiences of signposting to external agencies. In some cases signposting opportunities had been missed which meant parents had not taken up many services.

The evaluation (Welsh Government, 2013a; 2013b) also found that effective engagement with Flying Start services led families to better and faster assessment of need, early identification of issues and more effective referral to other support such as specialist health services, housing, benefit help, employment and training support.

This signposting can take place whilst families are part of the Flying Start service and also as a progression when eligibility ends. When Flying Start eligibility ends families should be signposted to on-going support, learning, volunteering or employment opportunities or other services and activities in the area. Flying Start should link with Families First, the Supporting People Programme, the Integrated Family Support Service and other family support services provided by the local authority, Local Health Board and by the Third Sector at a local level, to support families’ access to services and provide a more integrated response to meeting their needs.

Family Information Services should have an up to date picture of services in their locality and should be the first port of call for information on services for families. Relevant staff should be informed of what services are available when signposting families including knowledge of how they operate, what they have to offer and referral routes and criteria. It may be helpful to provide staff with one or two sheets about relevant projects and services.

Families consent should be obtained prior to referral. It should be explained to them the reasons for the referral and the referral process and their consent should be gained. It may be possible with some projects and services for families to self-refer.

Consistent transition between Flying Start and other services may be enhanced by the following:

- being aware of the key contacts within relevant agencies;
- developing effective partnership links with relevant agencies and within the community;
- being knowledgeable and well informed about the roles and functions of other professionals;
- standardised referral forms which professionals complete with the family when making a referral to another service;
- clear referral pathways;
- transitions and other multiagency meetings and learning sets between relevant professionals;
- co-locating services and staff;
- cross-programme training and staff induction programmes;
- sharing facilities, resources and personnel across the local authority area;
- co-delivery (for example Flying Start and Families First staff co-facilitating parenting programmes); and
- shared information and record keeping systems and information sharing protocols.

9.1 Safeguarding

Welsh Government Guidelines on safeguarding children should be followed at all times and all Flying Start practitioners should be able to recognise safeguarding issues and when and to whom to refer them to. Safeguarding Children: Working Together Under the Children Act 2004 sets out how all agencies and professionals should work together to promote children’s welfare and protect them from harm. Information is also contained in the All Wales Child Protection Procedures which should also act as an important point of reference.

9.2 Other key Welsh Government programmes

Family Information Services

Family Information Services (FIS) are the first point of contact for advice and information on local services for families and carers. FIS are found in each local authority in Wales. They offer free help and support to anyone bringing up children. They can put parents in touch with experts who will provide friendly advice on a range of topics and issues, such as childcare, health care, training advice, leisure services etc.


Families First

Families First is designed to improve outcomes for children, young people and families. It emphasises prevention and early intervention for families, particularly those living in poverty. Families First aims to improve the design and delivery of the services local authority areas provide to families. In particular, it aims to improve families’ experiences through offering support that meets the needs of whole families, rather than individuals within families, and by providing a means of coordinating the support families receive from different agencies.
**Referral:** Families can be referred or signposted to one of the projects or services funded through the Families First programme (as appropriate). It may also be appropriate to refer families with more complex needs into the Team around the Family that oversees and coordinates the interventions families receive.


**Integrated family support services (IFSS)**

The work of the IFSS is described in detail in the Child and Family (Wales) Measure 2010 and associated regulations. IFSS has been available across Wales since 2014.

A local authority may refer a family to an integrated family support team where substance misuse is the main concern. Families who experience such difficulties might be at risk of having their children placed into care or having their names put on the Child Protection Register. Families where substance misuse has led to a referral to the IFS team may also display other causes for concern such as domestic abuse or mental health issues. Where this is the case IFS teams will also address these other issues. IFS work with families to help them to make positive changes, so that any concerns are lessened and children can stay safely at home.

IFS teams provide targeted support and help connect children and adult services, focusing on the family as a unit.

**Referral:** Families may only be referred to the IFSS through the local authority’s children’s service following an assessment under the Assessment Framework.

http://wales.gov.uk/topics/health/socialcare/working/ifst/?lang=en

**Supporting People Programme**

The Supporting People Programme was launched across the UK in 2003 and helps vulnerable people gain and retain independence by remaining in their own homes and by providing a range of housing related support services.

The programme supports more than 70,000 people each year to live as independently as they can. It aims to prevent problems by providing help as early as possible. It supports households fleeing domestic violence, families, older people, people threatened with or getting over a period of homelessness as well as people with mental health needs, substance misuse needs or a learning disability.

**Referral:** Families can self refer if they are aware of the programme and the various projects funded through it. There is a Supporting People team in each local authority area.

http://wales.gov.uk/topics/housing-and-regeneration/services-and-support/supporting-people/?lang=en
9.3 Other sources of advice and information

Advice and information about employment, housing, debt, benefits and other legal and financial matters

CareersWales / Gyrfa Cymru deliver independent and impartial careers information, advice and guidance to young people and adults: face-to-face; over the telephone; and online
Tel: 0800 028 4844
http://www.careerswales.com/en/contact-us/contact-us/ (Eng)
http://www.careerswales.com/cy/cysylltu-a-ni/cysylltu-a-ni/ (Cymraeg)

Job Centre Plus for information about finding a job or making a benefits claim. The website includes a benefits calculator. Telephone: 0345 606 0234, Textphone: 0345 605 5255, Welsh language: 0345 606 7890 (Monday to Friday, 8am to 6pm).
https://www.gov.uk/contact-jobcentre-plus

Citizens Advice Bureaux offer free, confidential, impartial and independent advice from over 3,500 locations. Advice may be given face-to-face or by phone. Most bureaux can arrange home visits and some also provide email advice. A growing number are piloting the use of text, online chat and webcams.

http://www.adviceguide.org.uk/wales/about_this_site/get_advice.htm

Money made clear Wales provides information about the advice and guidance available to people living in Wales, as well as information about benefits, loans, affordable credit and savings.

http://www.moneymadeclearwales.org/

Wales Illegal Money Lending Unit (funded by the National Trading Standards Board) operates a 24 hour hotline on: 0300 123 3311 or Email: imlu@cardiff.gov.uk

The Money Advice Service helps people manage their money through a free and impartial advice service. It is an independent service, set up by the UK government. The website has advice on debt and borrowing, benefits, budgeting and managing money etc. There are also free printed guides giving clear, unbiased information and advice, which may be downloaded.

https://www.moneyadviseservice.org.uk/en/static/about-us (English)
https://www.moneyadviseservice.org.uk/cy/corporate/amdanom-ni (Cymraeg)

Credit Unions Wales has information about credit unions including where they are available. Call the information line on 0845 872 3467 to find your local credit union or visit the website:
http://creditunionsofwales.co.uk/en/find-my-credit-union.html (English)
http://creditunionsofwales.co.uk/cy/fy-undeb-credyd.html (Cymraeg)
Shelter Cymru provides advice and information on a range of issues relating to housing, homelessness, eviction and debt. Their housing law caseworkers run advice surgeries all over Wales. https://sheltercymru.org.uk/get-advice/advice-near-you/

Support line: 0845 075 5005

Drugs and Alcohol advice

DAN 24/7 (an independent bilingual Welsh Government funded web site) has confidential, accurate, and up-to-date information about different types of drugs and sources of help and support. It also has a range of leaflets which will be sent out, free of charge, to anyone living in Wales. The free confidential Drug Helpline and Alcohol Helpline is open 24 hours a day, 365 days of the year and is run by fully trained operators. Freephone: 0808 808 2234 or text DAN to: 81066 http://dan247.org.uk/ (Eng) http://dan247.org.uk/Default_Wales.asp (Cymraeg)

Adfam provides support and advice for families affected by drugs and alcohol http://www.adfam.org.uk/families

Advice and Information about emotional well-being

C.A.L.L. Helpline 0800 132 737 (24 hour service) – Community Advice and Listening Line – Mental Health Helpline for Wales (or text ‘help’ to text 81066)

Samaritans on 08457 90 90 90 (24 hour service), Email jo@samaritans.org http://www.samaritans.org/

Relationship Advice

One Plus One – Couple Connection is a website where parents can find out how to manage their relationship effectively. The site is designed to help couples work through changes in their relationship together through the use of self-assessment tools, blogs and forums. http://thecoupleconnection.net/

The Listening Room is a free live chat service also provided by One Plus One, which offers one-to-one support to anyone needing somewhere to offload concerns they might have about their relationship. The service has a team of ‘helpers’ who are trained counsellors on-hand to listen and act as a sounding board and help people to find solutions to their relationship problems themselves. It is not a counselling session or mediation service. http://thecoupleconnection.net/pages/thelisteningroom-whatisthis

Splitting Up? Put Kids First are webpages provided by One Plus One which aim to help parents work out arrangements for their children as early into a break-up as possible. www.splittingup-putkidsfirst.org.uk
Relate also offers advice, relationship counselling, sex therapy, workshops, mediation, consultations and support face-to-face, by phone and through their website. [https://www.relate.org.uk/](https://www.relate.org.uk/)

Domestic Abuse

The Welsh Government funds the All Wales Domestic Abuse and Sexual Violence Helpline which provides a 24 hour, 365 days per year service. The helpline provides advice and support for victims and professionals on all areas of abuse. The helpline can be contacted on 0808 80 10 800 or at [http://livefearfree.gov.wales/?skip=1&lang=en](http://livefearfree.gov.wales/?skip=1&lang=en)

There are also sources of external support which can be accessed for those who perpetrate domestic abuse. Respect, the support service for perpetrators of domestic abuse can be contacted on 0808 8024040 or at [http://respect.uk.net/](http://respect.uk.net/)

Women's Aid is a national domestic violence charity. Contact: Tel: 08082000 247 or Tel: 0117 944 44 11 (general enquiries only) Email: helpline@womensaid.org.uk, [https://www.womensaid.org.uk/about-us/contact/](https://www.womensaid.org.uk/about-us/contact/)

Bawso provides secure accommodation and support to Black and Ethnic Minority women and children in Wales who are at risk of or suffering domestic abuse. Contact: Tel: 029 20644 633; 24 hour helpline: 08007318147; Email: Info@bawso.org.uk; [http://www.bawso.org.uk/contact-us/](http://www.bawso.org.uk/contact-us/)

Advice for prisoner’s families

Children of Prisoners – maintaining family ties
This guide, produced by the Social Care Institute for Excellence SCIE, provides information about resources and research for anyone who works indirectly or directly with families with a parent in prison. [http://www.scie.org.uk/publications/guides/guide22/](http://www.scie.org.uk/publications/guides/guide22/)

Information Hub on Offenders’ families with children for Professionals (i-HOP) is a searchable directory of information, run by Barnardo’s in partnership with POPS (Partners of Prisoners and Families Support Group). It provides information about resources, research, policy, support service details, practice examples and training programmes to support professionals working with children and families of offenders, including frontline staff, strategic managers and commissioners. [http://www.i-hop.org.uk/](http://www.i-hop.org.uk/)

What shall I tell the children?
Partners of Prisoners and Families Support Group (POPS) Helpline:
Offenders' Family Helpline: 0808 808 2003 (Line open: weekdays 9am-8pm and weekends 10am-3pm)
http://www.partnersofprisoners.co.uk/

The Prison Service Website contains information on keeping in contact with someone in prison; visiting someone in prison and getting help with travel costs to prison.

Action for Prisoners' Families publish a range of books, booklets and DVDs covering key issues faced by prisoners' families. Resources are available for families themselves and for practitioners.
http://www.familylives.org.uk/about/our-services/action-for-prisoners-and-offenders-families/

Prisoners Advice and Care Trust (PACT) provides information and advice to families affected by imprisonment, including on visiting family in prison, kinship care, research and links to organisations and resources.
http://www.prisonadvice.org.uk/

Case study: Helping very high need families through referrals

Vanessa is a lone parent who has five children including two year old twins. She left her partner while pregnant due to domestic abuse. Vanessa has spina bifida so is often in a lot of pain, has mobility issues and now has a cyst on her spine as a result of her last pregnancy, for which she is waiting for an operation.

Vanessa has received a huge amount of support from Flying Start services, including very frequent health visitor visits, in home Language and Play and Baby Massage. This has been extremely helpful, but Vanessa’s needs are so high that numerous referrals to other services have been necessary, all of which have hugely improved the family’s quality of life.

The first referral Vanessa received was to a course with Women’s Aid which educates women about violence and the different forms it can take and also provided counselling for the older children who had been exposed to violence. She was also referred to a special eight week parenting course about teenagers’ behaviour, run by Action for Children. Her 12 year old son started using violence towards her which she feared was a result of growing up around her ex-partner and asked the health visitor for advice. The referral was made quickly and she joined the course within a week of discussing it with the health visitor.

Flying Start has also helped meet Vanessa’s housing needs. Her previous council house was up a steep hill and difficult to walk to with a pushchair given her mobility issues. She requested to be moved but was placed at the bottom of the council

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26 Names in case studies have been changed to protect identities.
house waiting list which surprised her health visitor who then wrote to the council explaining how much the hill was affecting her health. Consequently Vanessa was moved to the top of the list and moved shortly afterwards.

As a single mum living on benefits, Vanessa was terrified about how she was going to be able to buy everything she needed for the twins and this was compounded when she missed the deadline to apply for a Sure Start Maternity Grant. Vanessa’s health visitor subsequently gave her information about a charity fund who arranged for the health visitor and Women’s Aid to purchase high chairs and a travel cot for her.

In addition to the above, Flying Start has helped Vanessa plan for her future. Her health visitor took her to a college to sign up for a computing course and has put her in touch with the Job Centre because she is keen to get a job. After Vanessa had the twins she was referred to the charity Home Start so she could have some company to help with her depression and household tasks. Her Home Start worker has made a real difference, helped her turn things around and come to terms with her past relationship. When she was first referred she ‘had nothing to live for’ but is now waiting to be put on their training scheme to become a Home Start worker herself so she can help other women who have suffered domestic violence. As soon as the health visitor mentioned it someone from Home Start got in touch straight away.
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Kirklees Council (2013) “Kirklees guidance for transitions in the Early Years”  
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http://www.leics.gov.uk/index/education/childcare/early_years_service/mind_the_gap.htm

Menter a Busnes (2012) “Inclusion in the early years for children with additional needs”, A research project commissioned by Mudiad Meithrin and supported by the Welsh Government


Norfolk County Council, Early Years Transitions


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http://www.suffolklearning.co.uk/suffolklearning_images/users/early_years_team_cyp//eycguidanceforpromotingequality.pdf


Welsh Government (2013a) ‘Flying Start qualitative research with high need families’ Social Research Number: 64/2013

Welsh Government (2013c) “A Vision for Health Visiting in Wales”
http://wales.gov.uk/topics/health/publications/health/reports/healthvisiting/?lang=en

Appendix A - Glossary of terms

**Attachment** theory proposes that the quality of care provided to the child, (e.g. sensitivity and responsiveness) leads to a ‘secure’ (optimal) or ‘insecure’ (non-optimal) attachment. The security of this bond, (attachment security) is determined by the ability of the parent or primary carer to sensitively and appropriately respond to their child’s bids for attention.

**Diversity**\(^{27}\) is about recognising and valuing difference. Difference includes age, gender, ethnicity, disability, sexuality, and religion. It also includes different shapes and structures of families.

**Domestic abuse** is defined as:

- physical;
- sexual;
- psychological;
- emotional; and
- financial.

Domestic abuse means abuse where the victim of it, is, or has been, “associated” with the abuser. The term association is broad and includes several relationships including marriage, civil partnerships, living together, being related, being engaged, being intimate partners or parents.

**Early intervention** refers to: universal preventative provision (such as universal health care and early education) to families with children in the early stages of life; targeted provision early and as soon as possible when a child or young person and/or their family first begins to experience difficulties or display problematic behaviour; and targeted programmes or initiatives, which are provided to children/young people, families or specific groups or communities who have characteristics that evidence suggests makes them more likely to be at greater risk of poor outcomes.

**Family support** is a term generally used loosely to refer to a wide range of family-centred services across the child and family sector. There is a vast array of services termed “family support” which can range from parenting support, benefits advice, relationship counselling, information and advice services and more therapeutic interventions.

**Inclusion** is the process of identifying and breaking down barriers to participation and learning.

**Neglect**\(^{28}\) means a failure to meet a person’s basic physical, emotional, social or psychological needs, which is likely to result in an impairment of the person’s well-

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\(^{28}\) As defined in the Social Services and Well-being (Wales) Act 2014.
being (for example, an impairment of the person’s health or, in the case of a child, an impairment of the child’s development).

**Parenting** is an activity undertaken by those bringing up children and includes mothers, fathers, foster carers, adopted parents, step-parents and grandparents.

**Parenting Support** is the provision of services and support, which aim to: increase parenting skills; improve parent–child relationships; improve parents' understanding, attitudes and behaviour and increase parents' confidence in order to promote the social, physical and emotional well being of children.

**Person-centred practice**
The term ‘person-centred practice’ (PCP) commonly refers to the way in which the people receiving services or support are key to and involved in the development and planning of those services. Person centred planning explores what is important to a person and then acts on it to develop a set of clear and agreed actions that have been discussed by the person involved, parents or carers if appropriate, and the various professionals who will deliver the services.

A **Strength-based approach** occurs when key workers place a positive emphasis on resilience, protective factors and strengths. This has the effect of: communicating a sense of hope; establishing expectations for success within an individual's capacities; promoting empowerment and independence and setting in motion forces for improvement.

**Transitions** are key events or processes of change over the life course. It is the process of change, for example, that is experienced when children (and their families) move from one setting to another (e.g. from home to Flying Start child care) or move from the responsibility of one health professional to another (e.g. health visitor to school nurse). It spans the length of time it takes children to make such a change (e.g. from pre-entry visits and settling in to when the child has become a fully established member of the new setting).

**Vulnerable families** refers to families vulnerable to developing parenting difficulties or those at risk of being unable to protect and care adequately for their children. Families may be at increased risk due to adverse circumstances such as poverty, unemployment, bereavement, alcohol or substance misuse, mental or physical health issues; domestic abuse or due to a lack of a support network. It also refers to families whose minority status or situation makes them vulnerable to discrimination or isolation (for example minority ethnic families, refugee or asylum seeking families, single parent families or young parents).

**Well-being** is a positive physical, social and mental state; it is not just the absence of pain, discomfort and incapacity. It requires that basic needs are met, that

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29 Children’s Workforce Development Council (2011) “Providing intense support for families with multiple and complex needs – Full learner resource” Children’s Workforce Development Council.


individuals have a sense of purpose, that they feel able to achieve important personal goals and participate in society. It is enhanced by conditions that include supportive personal relationships, strong and inclusive communities, good health, financial and personal security, rewarding employment and a healthy and attractive environment.
## Appendix B - Example of map of progression routes of provision and organisations for delivery

<table>
<thead>
<tr>
<th>Approximate Age of Child</th>
<th>Universal Flying Start Programmes</th>
<th>Delivered by</th>
<th>Additional Targeted Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>Antenatal</td>
<td>Generic midwife notification to Flying Start Health Visitor</td>
<td>Generic midwife</td>
<td></td>
</tr>
<tr>
<td>Antenatal Roadshow / group</td>
<td>Health Outreach Team</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Healthy Start Scheme</td>
<td>Health Outreach Team</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Healthy Pregnancy</td>
<td>Health Outreach Team</td>
<td></td>
<td>Maternity Grant</td>
</tr>
<tr>
<td>Scolar antenatal programme (delivered universally)</td>
<td>Family Support Worker &amp; Health Visitor</td>
<td></td>
<td>Targeted Family Links Antenatal Parenting Programme – 10 weeks</td>
</tr>
<tr>
<td>Antenatal visit</td>
<td>Health Visitor</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Birth to 9 months</td>
<td>Health Visitor and Family Support Worker</td>
<td></td>
<td>Flying Start outreach / intensive support programme</td>
</tr>
<tr>
<td>Birth visit and baby safety pack</td>
<td>Health Visitor</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family Assessment Tool</td>
<td>Health Visitor</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Breastfeeding support and peer support groups</td>
<td>Health Visitor / Health Outreach Team</td>
<td></td>
<td>Brazilon / NBOS</td>
</tr>
<tr>
<td>Baby massage programme</td>
<td>Health Nursery Nurses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Paediatric First Aid for parents</td>
<td>Health Outreach Team</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Weaning Party</td>
<td>Health Visitor / Health Outreach Team</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Home safety assessment and toddler safety pack</td>
<td>Health Visitor / Health Outreach Team</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Baby Yoga</td>
<td>Health Outreach Team</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Immunisations</td>
<td>Health Visitor / Band 5 Nurse</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family Foods</td>
<td>Health Outreach Team</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Incredible Years Baby Programme</td>
<td>Flying Start Family Support Workers / Health team in Baby Club</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Schedule of Growing Skills assessment</td>
<td>Health Visitor</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bookstart Bag</td>
<td>Health Visitor</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Get Cooking Group</td>
<td>Health Outreach Team</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HENRY Programme</td>
<td>Health Outreach Team</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e-learning nutrition course</td>
<td>Health Outreach Team</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Top Tots programme</td>
<td>Health Outreach Team</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18mth Wellcomm 5S screening tool</td>
<td>Nursery nurses / SLT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PAFT referrals</td>
<td>Family Support Worker</td>
<td></td>
<td>PAFT programme in the home for additional focus on speech and language if Red</td>
</tr>
<tr>
<td>Pop in and play termly programme</td>
<td>Creative Play / Home Start</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Language and play programme</td>
<td>Language and Play Team</td>
<td></td>
<td>Chatterbox group for amber and reds</td>
</tr>
<tr>
<td>Family Lives modules on specific parenting topics</td>
<td>Flying Start Family Support Workers, Right from the Start, Action for Children</td>
<td></td>
<td>Family equals Parent Nurturing Programme</td>
</tr>
<tr>
<td>SLT</td>
<td>Flying Start SLT</td>
<td></td>
<td>Hannan SLT programme</td>
</tr>
<tr>
<td>21-23 months</td>
<td>Flying Start Childcare</td>
<td></td>
<td>Flying Start Family Support Workers, Right from the Start, Action for Children</td>
</tr>
<tr>
<td>2 years</td>
<td>Flying Start Childcare settings and Cyhoedd Melfin</td>
<td></td>
<td>Super Shelby support in childcare</td>
</tr>
<tr>
<td>Parent Forum</td>
<td>Caerphilly Parent Network</td>
<td></td>
<td>Targeted language plans in setting</td>
</tr>
<tr>
<td>3 years</td>
<td>Training Courses</td>
<td>Ystrad Mynach college, Community Education, etc</td>
<td></td>
</tr>
<tr>
<td>Schedule of Growing Skills assessment (exit from childcare)</td>
<td>Health Visitor and Childcare Team together</td>
<td></td>
<td>Maintained and non-maintained providers</td>
</tr>
<tr>
<td>Early Years Education</td>
<td>Flying Start Family Support Workers, Right from the Start, Action for Children</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 years</td>
<td>Community Partnership groups</td>
<td>Community First</td>
<td></td>
</tr>
<tr>
<td>PTA groups</td>
<td>Local Primary Schools</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Transition to School Nurse</td>
<td>Health Visitor and School Nurse</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Provided by Caerphilly Flying Start*
My name is [Name] and I am [Age] years old.

- My Family

- What is important to me?

- Things that may upset me

- I am learning...

Great Things about ME

The best way to support me...

Created by the Early Years Inclusion Team, Cardiff Education Service
My name is Sam and I am 3 years old.

What is important to me?
- My brother Jim is my best friend.
- My Mum, Dad and my Nanna and Bamp.
- I love playing outside and lots of physical activities.
- I love books and puzzles and playing with my cars and Fireman Sam trucks and I love trains.
- I like food a lot!
- I like playing with the sand and water.
- I like Mickey Mouse, Peppa Pig and Thomas the tank engine.

My Family
I live with my Mum and Dad and my big brother Jim. We have 5 cats called Charlie, Ginger, Bella, Abby and Mark.

I am learning to...
- Play simple games.
- Slow down, take my time and notice other people who might be in the way.
- Share things.
- Be brave when my Mum leaves me at nursery.
- Recognise my colours.

Things that may upset me
- Being separated from my Mum.
- Not being able to have what I want!
- I may get upset if I think that I am not going home and will need reassurance that Mum will pick me up.
- I am sensitive to other peoples moods and may get upset if others are.

Great Things About ME!
- I have a fantastic imagination.
- I am very loving and affectionate.
- I always try hard.

The best way to support me is...
- I wear splints on my feet and ankles. These are very important to help me walk.
- Remind me if the floor level is about to change.
- I may not notice objects in the way on the floor so please try to keep the walkways clear.
- I am more wobbly on my feet if I am tired or am about to be poorly. I will also dribble more if I am about to be poorly.
- I will need to be reminded that there are other children who might want to play with the same things as me.
- I can be worried about what is happening next so will need to be reassured and reminded that Mum will come to get me at the end of the session.
- I like a routine that I can see to help me know the plans for the day.
- If there is a new physical activity I need to be guided through it with supervision for the first few times then I will be fine to do things on my own.
- Please watch me when I am outside as if I am concentrating on climbing I sometimes do not notice other dangers such as gaps in the frame that I may fall off.
- I can get upset and I find it hard to calm myself down. I find it easier if you calm me down first before trying to distract me.

Sam’s All About Me Card
Appendix C2 - ‘All About Me’ (from Blaenau Gwent Flying Start)

All about Me

This is me...

Stick photo here

My name is………………………………… I like to be called……………………

D.O.B…………………………………… Gender…………………………………

My home language is………………………………………………………………………

I go to……………………………………………………………………………………………

(name of setting)

The leader is…………………………… Tel. No………………………………………………

I am going to move to……………………………………………………………………

(name of next setting)
Flying Start  Yes/ No  (Please circle)

Attendance

Medical/Additional Learning Needs

Comment  (Details to include any additional support given)

Family Background and Wellbeing
1. Relationships

2. Communication

3. Separation

4. Toilet Training

5. Physical Development
6. Things I do well…

7. Things I need help with…

8. I enjoy…

I give permission for the information in this document to be share with relevant agencies and my child’s new setting.

Signed (parent/carer)………………………………………………. Date………………

Signed (Key Worker)………………………………………………. Date………………

Signed (Leader)…………………………………………………… Date………………
Appendix C2 - ‘All About Me’ Type Information Card Template Developed by Denbighshire Flying Start

**ME IN A NUTSHELL**

Name:  
Date of Birth:  
Important people in my life:  
Pets:  
Favourite toys:  
Favourite places:  
Food I enjoy:  
Pre-school setting:  
Language spoken at home:  
Name of school I am going to:  

**PHOTOGRAPH**

<table>
<thead>
<tr>
<th>I am, I can</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
</table>
| I am confident and able to separate from my carer. | I can sit for a short period during circle time | I can sit for circle time | I can tell you how I feel or what I want through;  
• Actions  
• Words |
| I can maintain concentration on an activity of my own choice.  
• With an adult  
• Independently | I can play independently | I can play alongside friends | • I can understand simple instructions  
• I usually respond to adult instructions |
| I can concentrate on an adult’s chosen task. | I can join in group activities. | I can follow routines of the setting. |  |
| I can take turns. I can share. |  |  | I can accept change in routines. |

<table>
<thead>
<tr>
<th>Health Needs</th>
<th>Toiling</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hearing</td>
<td>In nappies</td>
</tr>
<tr>
<td>Vision</td>
<td>Working towards toileting</td>
</tr>
<tr>
<td>Other</td>
<td></td>
</tr>
</tbody>
</table>
## Professionals Involved (Date)

<table>
<thead>
<tr>
<th>Name</th>
<th>Contact No</th>
<th>Profession</th>
<th>Reports</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### In my setting i am sometimes;

<table>
<thead>
<tr>
<th>Anxious</th>
<th>Chatty</th>
<th>Quiet</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Confident</td>
<td>Excitable</td>
</tr>
<tr>
<td>Shy</td>
<td>Happy</td>
<td>Sociable</td>
</tr>
<tr>
<td>Lively</td>
<td>Friendly</td>
<td>Loud</td>
</tr>
<tr>
<td>Headstrong</td>
<td>Frustrated</td>
<td>Withdrawn</td>
</tr>
</tbody>
</table>

### Strategies that work for me (complete if appropriate)...  

### Ways adults can help me.

<table>
<thead>
<tr>
<th>IF I DO THIS</th>
<th>IT CAN MEAN</th>
<th>YOU NEED TO</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Parents Views;

Completed by: __________________________ Date: __________________________

78
### Expectations for successful Transition in Flying Start settings in Cardiff

<table>
<thead>
<tr>
<th>On entry into Flying Start settings</th>
<th>Essential</th>
<th>Desirable</th>
</tr>
</thead>
<tbody>
<tr>
<td>HV to sign up child to childcare during home visit, at around 16 months old. Names are sent to the Childcare Team</td>
<td>Share photos of key worker with family</td>
<td></td>
</tr>
<tr>
<td>Discussion held with Health visitor to give background of new admissions. Ensure that SoGS results are received from HV (only if a child’s development is one below the expected grade)</td>
<td>Compile a handbook including details of all the practitioners who are involved at the setting and offer to parents</td>
<td></td>
</tr>
<tr>
<td>Manager/Leader to organise an ‘Open Day’ at setting. Key worker to support completion of entry forms with parent/carer</td>
<td>Parents to bring photos of home/family in on admission</td>
<td></td>
</tr>
<tr>
<td>Next visit- Parent/carer meets with key worker and fills in additional paperwork. Handbook presented to parents Remind parents to register their child with the feeder school</td>
<td>Manager/Leader to send out personal invitation, addressed to each child, to attend a ‘Stay and Play’ session with carer/parent</td>
<td></td>
</tr>
<tr>
<td>Ensure Transition policy is in place following Flying Start philosophy</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
With large number of new starters provide a 'staggered' admission. Aim for each new child to start within two/three weeks.

<table>
<thead>
<tr>
<th>Essential</th>
<th>Desirable</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>On entry to Foundation Phase</strong></td>
<td><strong>Invite nursery teacher into setting to meet the children that are transferring</strong></td>
</tr>
<tr>
<td>Transition document completed by keyworker</td>
<td>Children to visit feeder school accompanied by key worker e.g. an event day</td>
</tr>
<tr>
<td>Leader to oversee final Transition documents and work with keyworker to ensure that quality information is included</td>
<td>Prospective school uniforms in role play area</td>
</tr>
<tr>
<td>Transition document shared and signed by parents</td>
<td>Photos of school buildings and staff for sharing with children</td>
</tr>
<tr>
<td>Leader to arrange a meeting with Foundation Phase Teacher to discuss individual children and to hand over Transition documents</td>
<td>Joint early years training sessions which include the Playgroup and School Nursery</td>
</tr>
<tr>
<td>Leader to ensure Transition documents are signed for and copy of receipt given to Flying Start Advisory Team</td>
<td>Develop good practice visits between both settings (e.g. story time, assemblies, fetes)</td>
</tr>
<tr>
<td></td>
<td>Suggestion that Flying Start feeder settings be allocated a 'newsletter' section on school website</td>
</tr>
</tbody>
</table>
Appendix E: Example of ‘Attendance Guidance’, provided by Swansea Flying Start

Flying Start Swansea
Attendance Guidance

To be reviewed 1/3/2015
Version agreed on 4/3/2014 by Operational Management Group
Ratified on 4/3/2014 by Operational Management Group
Written by Flying Start Management Team

Version Amended 26/1/2015
**Flying Start Attendance Guidance**

**Introduction**

This guidance has been produced on the basis of supporting good practice within Flying Start in Swansea in relation to attendance. Flying Start childcare focuses on improving the outcomes for young children in preparation for school and in the longer term.

The following guidance is to be followed by all childcare settings and does not replace the All Wales Child Protection Procedures. It does, however, help to safely manage risk.

**Background**

Children who are living within designated areas are entitled to attend childcare for 2 ½ hours per day, 5 days a week.

During the home visit, parents will complete the attendance agreement (see Attendance Agreement, pg8). A copy of this agreement will be given to the parent and a copy will be kept in the Child’s Record File. Parents are made aware of the expectation that they are to inform a member of staff at the childcare setting as soon as possible if their child will not be attending childcare on that day (see Attendance Guidance flow diagram, pg3).

*A flexible approach to the number of sessions attended is often required to cater for parents’ needs. For example, if a parent decides to bring the child for three sessions only, then this should be accommodated. However, providers should encourage parents to take up their full entitlement where possible (WG FS Guidance - Annex 2 2013). Parents are made aware that they are entitled to increase their number of sessions at any time.*

Every child is given the choice to attend either a Welsh or English provision.
Purpose of Guidance

In Flying Start we believe good attendance is essential to enable children to settle and benefit from the learning opportunities available to them. At a young age continuity and consistency are important contributors to a child's well-being and progress. Also we believe regular attendance at Flying Start can set a precedent for statutory school.

Outcomes

Welsh Government emphasise the importance of good attendance in Flying Start. In Swansea, we aim for 80% attendance at all settings.

Who is Responsible?

It is the responsibility of all Flying Start staff to encourage good attendance and to support families.

Staff should be proactive in contacting families with children who are eligible to attend Flying Start childcare, to secure parents’ support and children’s attendance at the settings. Tenacity and initiative may be needed to engage some parents, especially from ‘hard-to-reach’ groups, so that their children receive their full allocation of childcare (WG FS Guidance - Annex 2 2013).

The Childcare Manager collates and monitors information for all children each term in line with safeguarding guidance. A copy of the information regarding acceptance of the childcare offer is sent to the Flying Start Data & Information Officer who then sends it to Welsh Government on a termly basis.

In the majority of settings SIMS is used to monitor attendance in order to ensure that systems for recording and monitoring attendance are increasingly robust. It is a requirement for the Childcare Manager or Senior Childcare Worker to input SIMS data on a weekly basis.
Flying Start Childcare Attendance Guidance

If child is absent with no explanation – contact by telephone

No answer – Leave message and follow with text where facilities are available

No answer by end of session

Record as “Unauthorised”

Follow up and record on Continuation Sheets in child’s file. Refer to Managing Absence (pgs 4-6)

If child is absent with explanation

Contact made by nominated Childcare Worker with parent/carer

Explanation recorded on “Continuation Sheets” in Child’s Record File

List of valid reasons used to record absence (see Register Codes, pg9)
Managing Absence 1

If no contact is made with the family after 2 consecutive days, discuss with Health Visitor. Nominated CCW to continue to try to establish contact and record on “Continuation Sheets”.

If no contact after 5 working days, calling card hand delivered by CCM through letterbox (see Calling Card, pg10). Discuss with HV. Nominated CCW to continue to try to establish contact and record on “Continuation Sheets”.

If no contact after further 5 days, send initial letter (see Letter 1, pg11). Discuss with HV. Nominated CCW to continue to try to establish contact and record on “Continuation Sheets”.

If contact is made, continue to monitor and record information on “Continuation Sheets” in Child’s Record File.

If no contact after further 5 days, send last chance letter (see Letter 2, pg12). Discuss with HV. Nominated CCW to continue to try to establish contact and record on “Continuation Sheets”.

If contact is made, constant communication with HV as keyworker. Closely monitor attendance and record information on “Continuation Sheets” in Child’s Record File.

HV to attempt to contact family and GP and inform CCM of outcome.

Lose space

Discuss with HV. Raise at monthly Q&A meeting. CCM to highlight on monthly return to Flying Start Data & Information Officer.
**Managing Absence 2**
*For Children with Safeguarding Concerns*

* HV identified as “Cause for Concern”

If no contact is made with the family after 2 consecutive days, discuss with Health Visitor who will attempt to contact family. Nominated CCW to continue to try to establish contact and record on “Continuation Sheets”.

- If no contact after 5 working days, calling card hand delivered through letterbox (see **Calling Card, pg10**). Discuss with HV any potential risks prior to visiting child’s home. The HV will follow ABMUHB guidance on non-attendance and inform CCM of outcome.

- If unable to contact family HV to discuss with CNS SC. Full discussion between HV and CCM and consider joint referral to Children’s Services.

- Raise at monthly Q&A meeting.

If contact is made, constant communication with HV as keyworker. Closely monitor attendance and record information on “Continuation Sheets” in Child’s Record File.
Managing Absence 3
For Children with Safeguarding Concerns*

* Identified as a Child in Need or Child Protection

If no contact is made with the family after 2 consecutive days, discuss with Health Visitor who will contact family. Nominated CCW to continue to try to establish contact and record on “Continuation Sheets”.

No contact

Inform allocated Social Worker. Discuss HV. Nominated CCW to continue to try to establish contact and record on “Continuation Sheets”.

If contact is made, communication with Social Worker and HV as keyworker. Closely monitor attendance and record information on “Continuation Sheets” in Child’s Record File.

HV will discuss with CNS SC and follow ABMUHB Safeguarding Children Guidance. Inform CCM of outcome.
Persistent Absence

The Childcare Manager, Health Visitor and Family Facilitator will need to look at the attendance data on a monthly basis during planned meetings. During these meetings, the following issues will need to be discussed;

a) Current attendance figures
b) Potential new attendees
c) Those leaving the Flying Start setting before their 42 week entitlement. In these cases, find out where child is moving to, discuss exit plan and look at transition to new area. CCMs will need to input the child’s details on the termly returns to the Flying Start Data & Information Officer. This will be discussed at termly Q&A meetings.

Childcare Managers can identify patterns of attendance through SIMs.

Persistent Absence

Persistent absence is defined as any child whose attendance falls below 80%. If a pattern is emerging, speak to parent and Health Visitor.

If attendance is consistently less than 80% (After 2 months)*

or

There are recurring patterns of absenteeism

Discuss possible options for alternative arrangements eg. Reduced sessions, morning/afternoon swap. Constant communication with HV as keyworker.

Any concerns about a child’s absence should be discussed as part of the Monthly Multi-agency meetings in order to adopt a holistic approach to encourage good attendance. A further discussion may need to take place at the termly Q&A Meeting if problems persist.

* At the CCM’s discretion. This will be monitored on a weekly basis, however, CCMs will need to use their discretion in relation to its frequency.
Attendance Agreement

Flying Start childcare is provided to benefit your child. With this in mind, the childcare provider will be monitoring attendance and families will need to inform childcare as soon as possible when their child won’t be attending due to illness, holidays, etc.

**It is your responsibility as the parent/carer to contact the Flying Start setting by the end of the session to inform them why your child has been absent.**

I am aware that my child is entitled to five 2.5 hour sessions of Flying Start Childcare provision.

At this time I would like my child to attend for ____________ sessions a week.

The sessions my child will attend are:

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If not taking the full entitlement, the sessions can be increased to the full 5 day entitlement upon discussion with the childcare manager or child’s key person.

I have read and understood the above and been given a copy of the attendance agreement.

DATE:__________________

SIGNED (PARENT/CARER ____________________________
We called today but missed you. We miss (child’s name) at (setting name) and ask that you call us as soon as possible on (setting phone no.).

Many thanks,
(Manager’s name)
Dear (Parent/carer’s name),

We are concerned that we have not heard from you. After trying to contact you by phone and leaving a calling card, we still have not heard from you regarding (child’s name) attendance. If you have any difficulties in attending the session or any issues you wish to discuss, please contact us on (setting phone no). If we do not hear from you within 5 working days, we may consider withdrawing your child’s place.

Many thanks,

(Manager’s name)
Dear (Parent/carer’s name),

We have tried to contact you on numerous occasions. We are concerned that we have not heard from you. Your child has missed (number) sessions. As stated in the Attendance Agreement, it is your responsibility to inform us of your child’s absence by the end of the session.

Flying Start is here to benefit your child. We have discussed (child’s name) with other agencies who have not identified a reason for him/her to miss the Flying Start sessions, therefore, if we do not hear from you within 5 working days, we will withdraw your child’s place.

Many thanks,
(Manager’s name)
Appendix F - Implementation of Flying Start transition guidance: Examples of effective transition and information sharing protocols between Flying Start and Foundation Phase

Blaenau Gwent Flying Start

What protocols are in place for information sharing between Flying Start and the Foundation Phase settings and what impact have they had?

Consultation meetings and workshops took place to discuss transition practices in the authority. Attendees included: nursery staff, childcare managers, the Flying Start Advisory Teacher, Flying Start Childcare Coordinator, Blaenau Gwent Quality Assurance Officer and the Early Years Education Psychologist.

It was agreed for Flying Start transition documents to be passed from Flying Start settings to nurseries and for them to be signed by parents. Individual Play Plans (where relevant) are also passed to nurseries. Any confidential reports from outside agencies e.g. speech and language therapist/education psychologist are only passed to the nursery with the verbal consent/approval of the parent.

The Flying Start transition documents were developed by a working party made-up of Flying Start advisory teachers, nursery teachers, preschool and Flying Start childcare staff, advisory staff, and development officers. They had the opportunity to ensure the information gathered by Flying Start settings and then transferred to schools was useful and appropriate. This ensured transition information is relevant and not excessive.

Transition cluster meetings are held between Flying Start childcare and nursery staff where verbal information is imparted as well as the written transition documentation. They are hosted on a rolling rota by both Flying Start childcare and nursery settings. The transition cluster meetings enable the sharing of good practice and ideas; allows teachers to meet staff from all the childcare settings in their cluster; and allows dedicated time to share information without children being present. The meetings have fostered positive, working relationships.

Where are the protocols working well and is the information provided by Flying Start settings what schools need?

The Flying Start transition documents are electronically produced and samples are checked by the Flying Start Advisory Teacher before being passed from Flying Start childcare to nurseries. The documents look and read more professionally and have been well received by nursery teachers. As a result, some nursery teachers have requested closer links with the Flying Start settings by asking to visit the setting and also inviting the childcare staff to visit the children in nursery to follow their progress. Many staff who were reluctant to host transition cluster meetings are now keen to play host and share their ideas.

Nursery staff have been willing to share personal contact details e.g. e-mail, mobile numbers so they can receive dates, venues and reminders directly rather than via the school contact where sometimes communication breaks down.
The feedback from all involved has been very positive with both nurseries/schools and Flying Start childcare settings offering to host future meetings.

In your experience, how can barriers to information sharing be overcome?

We have found working with school clusters collectively jeer the schools on to participate more.

Where there has been little engagement by a school, Flying Start childcare settings will ring the schools to talk to the teachers, submit the completed transition documentation and ask, often successfully, to visit the school.

**Denbighshire Flying Start**

What protocols are in place for information sharing between Flying Start and the Foundation Phase settings and what impact have they had?

Two initiatives have been established to help and support transition between Flying Start and Foundation Phase:

i) The Denbighshire’s Pre-school Panel – The Panel is a central referral point for childcare settings (Early Education or Flying Start) who have concerns regarding children attending their setting. The panel consists of an Early Years Education Psychologist, the ALN teacher, Flying Start Advisory Teacher and Early Education Teacher.

ii) The central electronic EDRMS “filing” system – This allows Local Authority staff to access information / services received by a child.

There is also an Early Years Observation booklet “Learning to play, playing to learn - Skills in the Foundation Phase Areas of Learning observation recording system”. This involves an individual assessment procedure which starts in the Flying Start childcare settings and continues with the child into the 3 year old funded provision and then into the nursery class.

The assessment procedure is further enhanced by an additional method of sharing information through the ‘At a Glance - in a Nutshell Pen Portrait’ document. This was developed in consultation with parents, schools and stakeholders to provide a succinct pen portrait of the child as they leave pre-school settings and transition into school. It is used to help settle and support the child into the school.

Where are the protocols working well and is the information provided by Flying Start settings what schools need?

The Pre-school Panel is proving a highly effective way of identifying, planning interventions and tracking children from Flying Start through to school. It has resulted in more inter-departmental collaboration and multi-agency working.

The ‘In a Nutshell’ document provides a balance on information - this was developed in consultation with teachers and provides the information they requested.
In your experience, how can barriers to information sharing be overcome?

The Flying Start Education Team and Foundation Phase Team have reviewed provision to overcome issues. Such issues included too much information being passed to teachers in schools. This has been addressed by the ‘In a Nutshell’ document led by the ALN Advisory Teacher for Early Years.

Also, consent from parents to share information is now obtained through the completion of questionnaires at the end of Flying Start childcare. This signed agreement allows Flying Start staff to share information with schools and 3 year old funded provisions. Speech and language therapists also gain parental consent to share information.

Merthyr Flying Start

What protocols are in place for information sharing between Flying Start and the Foundation Phase settings and what impact have they had?

The Early Years team in Merthyr Tydfil has worked closely with the Education Department to improve the transition process into school. This has included:

- the joining up of data systems between Flying Start and Education;
- embedding of the Foundation Phase into Early Years settings;
- sharing of transition documentation; and
- developing a cross sector moderation process between schools and early years settings.

When registering with childcare, all parents sign a registration form confirming they are in agreement with the pre-school carrying out Foundation Phase Profile (FPP) assessments and Wellcomm screenings. Also, that this information can be shared with schools.

A transition document is in place to support children’s transition as they move from settings to schools.

Where are the protocols working well and is the information provided by Flying Start settings what schools need?

The transition document was developed with a range of partners from schools, advisory service and setting practitioners. It provides evidence on where children are developing, based on the criteria from the Welsh Government’s FPP. It also includes information on what the child enjoys and where they need support to improve. Any documentation from outside agency involvement, IPPs and WellComm assessments are all expected to be included with the document.
In your experience, how can barriers to information sharing be overcome?

Barriers can be overcome by:

- Undertaking a standardisation and moderation process to ensure parity of judgements between pre-schools and schools to aid consistency and accuracy of judgements.
- Transition meetings where the receiving school facilitates an information sharing session or where there is a visit to the feeder setting.

**Monmouthshire Flying Start**

What protocols are in place for information sharing between Flying Start and the Foundation Phase settings and what impact have they had?

Termly transition meetings are held with Foundation Phase settings involving Flying Start Health Visitors, Playgroup Leaders, Flying Start Teachers, Flying Start Transition Co-ordinator, Foundation Phase setting leader or Teacher and ALN Coordinator when necessary. Each child is discussed and childcare staff talk through and handover the transition document.

The Flying Start Transition Co-ordinator will liaise with Foundation Phase settings prior to transition to obtain children’s induction and setting visit dates. Childcare staff remind families to attend meetings and visits, and where children are given the opportunity to visit the Foundation Phase setting, childcare staff aim to attend alongside parents and children where possible. When Flying Start childcare settings and Foundation Phase settings are co-located, Flying Start childcare staff will accompany children to visit their new setting on a weekly basis for at least 3 - 4 weeks prior to transition.

Foundation Phase setting staff are invited to visit the child at the childcare setting following which a transition meeting takes place.

Following transition, the Flying Start Transition Co-ordinator maintains links with Foundation Phase settings by checking how Flying Start children have settled and if any further information or support is required.

For families of children with additional needs, additional setting visits are provided to develop relationships with new setting staff and children. During these visits families are often accompanied by the child’s keyworker. With parental consent, Foundation Phase settings are informed about the additional needs of children as early as possible so that they can plan effectively to meet those needs. A multi-agency meeting is arranged, which includes parents and documentation is passed on as early as possible. Monmouthshire’s Early Years Additional Needs Officer and any relevant professionals involved with the child’s care are also invited.

If families are in receipt of Portage services, the Portage advisor will continue to liaise and work with Foundation Phase staff during the nursery year.
Where are the protocols working well and is the information provided by Flying Start settings what schools need?

It works well for all of our settings with support from the Flying Start Transition Coordinator who arranges meetings, supports settings to complete and share relevant documentation, and liaises with schools after transition and throughout the nursery year. For families in receipt of Flying Start Portage services, this support will continue throughout the nursery year and the Portage advisor will liaise with Foundation Phase staff on a weekly basis.

In your experience, how can barriers to information sharing be overcome?

Parents sign the Flying Start Transition document to consent to information being shared. Also, Foundation Phase setting staff sign a transition record form to acknowledge they have received all transition documentation and information.

If a transition meeting is unable to take place, the Flying Start Transition Coordinator will arrange with the Foundation Phase setting to deliver and discuss transition documentation at the setting.

Pembrokeshire Flying Start

What protocols are in place for information sharing between Flying Start and the Foundation Phase settings and what impact have they had?

Transition involves the use of the Foundation Phase Profile (FPP) which is also used in our schools. This allows a seamless transition to take place with worthwhile data for both Flying Start and schools. The FPP has been welcomed by schools and this has improved the transition process.

The transition of information is undertaken in a handover meeting between the Flying Start Advisory teacher and the Nursery teacher which involves discussions around the child. The class teacher will also have visited the Flying Start setting at regular intervals throughout the child’s year and would have built up a sound knowledge of the child’s development. The child will also visit the class they are going to.

Children with additional learning needs have regular meetings about their development throughout the Flying Start year. This is co-ordinated and chaired by the Flying Start Advisory teacher and other professionals attend including the Flying Start Health Visitor, SENCO and class teacher.

Information is shared at a panel which is chaired by the Pre-school Additional Needs teacher. Decisions are then made about the appropriate placement for the child. A detailed transition meeting is then held which the Flying Start Advisory teacher will attend along with the appropriate Advisory teacher who will support the child once transition has been completed. Children with additional needs who are still requiring 1:1 support at the end of Flying Start will have 3 weeks transitional support from their 1:1.
Where are the protocols working well and is the information provided by Flying Start settings what schools need?

Transitions work well when Flying Start settings are on the school premises and good liaison is already happening between staff and children. It also works well when professionals involved with that child meet in person at the next transition stage and discuss the child.

In your experience, how can barriers to information sharing be overcome?

Transition meetings and building up good relationships with the Flying Start Health Visitors can help. It is important that parents have signed the forms before any information can be passed on to a school.

Rhondda Cynon Taf Flying Start

What protocols are in place for information sharing between Flying Start and the Foundation Phase settings and what impact have they had?

Nursery teachers (or learning support assistants/nursery nurses) will attend the setting to observe the children or carry out certain activities such as story time. Likewise, schools will invite settings to transition days or events such as sports days and school concerts.

All of our Flying Start settings and Registered Education Providers complete a transition document (‘On My Way’) and this is given to schools at the end of the term before entry. This is being brought into line with the Foundation Phase Profile.

Early Years Team Around the Child (EYTAC) meetings are also implemented for children with additional learning needs. If children have severe or complex medical needs then an EYTAC should be arranged for the beginning of the half-term prior to the child starting nursery. All significant adults involved with the child are invited which can include parents or guardians, receiving schools, Flying Start setting representatives, Flying Start Health Visitors and Flying Start core team representatives. The ‘On My Way’ transition document is shared during Flying Start to school EYTAC meetings.

When an EYTAC meeting action plan is drawn up, each relevant stakeholder(s) / significant adult(s) will be given at least one action. For example, a school to ensure they have ‘now and then’ cards made for the child as well as an information pack containing photographs of the classroom and the teachers. The actions are then reviewed in the subsequent EYTAC meeting to monitor progress towards the child’s aims.

Nursery teachers are invited to visit the setting before children start school and their observations of the child in the setting gives further useful information.
Where are the protocols working well and is the information provided by Flying Start settings what schools need?

Feedback regarding EYTAC meetings has been positive. Schools where EYTAC meetings have been held are now requesting them more often as they value the outcome of the meeting. The committal to the action plan at the end of the meeting gives a baseline/marker for the content of the follow-up meeting and allows us to measure the progress the child has made.

It is hoped the ‘On My Way’ transition document will aid schools in knowing which children are more likely to have additional learning needs and potentially require more support. It will also demonstrate to schools that a graduated response to assessing and meeting the child’s needs has been followed by the Flying Start setting.

In terms of the EYTAC meetings, schools are given the opportunity to collate all the information they feel is necessary to ensure they can support the child fully.

In your experience, how can barriers to information sharing be overcome?

Previously we have worked with School Improvement to improve communication and held termly Network meetings in Valley clusters to which settings, schools and other professionals were invited.

Holding EYTAC meetings and giving all stakeholders a platform to discuss the child’s needs and share information with each other has aided in overcoming certain barriers of communication.

We also ascertained what schools would like to see in the ‘On My Way’ transition document. It was identified that having a point of contact for all agency involvement would benefit both schools and settings as well as including more detailed information on elements such as the child’s likes, dislikes and potential stress triggers.

Swansea Flying Start

What protocols are in place for information sharing between Flying Start and the Foundation Phase settings and what impact have they had?

Almost all of Flying Start childcare settings are located within schools which makes the process much more effective. Through regular visits, formal and informal meetings, open days, joint activities (e.g. concerts, excursions, sport days), parenting groups and joint staff training, close working relationships have been developed between Flying Start and Foundation Phase staff.

In the vast majority of cases, children who attend Flying Start childcare transition to the co-located school where they receive a minimum of four planned visits to the nursery class prior to them starting. In addition, the Flying Start Keyworker meets with a member of staff from the nursery class and discusses the transition documentation which also includes the Foundation Phase Profile (FPP) information.
collated; the child’s Wellcomm score; and if relevant, the child’s IPP and SaLT targets. For children with additional learning needs, the Educational Psychologist may also attend a meeting with the SENCO and other nominated staff.

In instances where children transition to schools that are not co-located, where possible, the information is relayed to a nominated member of staff at a pre-arranged meeting. Otherwise, this is done via a telephone conversation and the information is delivered to the Nursery prior to the child starting.

The Flying Start Link Teachers work closely with the Foundation Phase Lead, analysing data, delivering joint training, sharing good practice and hosting an annual Transition Day for both Flying Start and Foundation Phase staff. In addition, children’s information is transferred from Flying Start to schools via SIMS, thus enabling tracking to be more straightforward and effective.

Flying Start childcare liaise with Foundation Phase to ensure that, where possible, the child starts Flying Start childcare 42 weeks prior to the predicted school start date, thus ensuring there no gaps in provision.

Where are the protocols working well and is the information provided by Flying Start settings what schools need?

Transition works well in all of our settings. One setting (St Helen’s), however, has been identified as an example of good practice following an Estyn Inspection which recognised this as a particular strength of the school and Flying Start.

Some of the Flying Start childcare settings feed to a number of school nurseries. Although transition arrangements are not as effective as they would be if they were to attend a co-located school, protocols are in place for the sharing of the transition documentation. In these cases, the information is relayed to a nominated member of staff at a pre-arranged meeting. Otherwise, this is done via a telephone conversation and the information is delivered to the nursery prior to the child starting. In addition to this, in some cases, the Flying Start Keyworker will arrange to meet the child with the parent(s) at the school nursery for their initial visit.

Children who attend Flying Start have a greater number of opportunities to visit the nursery, and established relationships between multi-agency staff means information sharing is more effective. Families have already developed relationships with the Flying Start setting, thus making it more likely that they will engage with school as a result.

The Flying Start Link Teachers reviewed the information shared between Flying Start and Nurseries after concerns about the relevance and usefulness of the previous developmental tracker.

The implementation of the FPP in Nurseries and within Swansea Flying Start has resulted in a single tool being used in both phases, thus ensuring greater consistency and continuity.
In general, schools report the information shared at the transition meetings is extremely useful for planning, assessment and tracking purposes.

In your experience, how can barriers to information sharing be overcome?

When school admission arrangements change, due to a change in circumstances (e.g. funding, staffing levels, full classes) the transition process can sometimes be hindered. In these circumstances, it is essential that where possible, the changes are planned in advance and information is shared between the school and Flying Start.

Transition arrangements are more effective when children attend co-located nurseries. However, Flying Start Childcare Managers and Keyworkers are developing close relationships with staff from a number of nurseries that are not co-located in order to share transition documentation.

**Vale of Glamorgan Flying Start**

What protocols are in place for information sharing between Flying Start and the Foundation Phase settings and what impact have they had?

A transition pack is prepared by the Flying Start Key Worker within the Flying Start childcare setting.

The pack includes the ‘All About Me’ transition document together with child developmental assessments, WellComm screening result and Foundation Phase Profile (FPP) information. The Flying Start Advisory Teachers visit all catchment schools and build good links with nursery / foundation phase teachers thus address issues arising, progress being made and services available to families etc.

Flying Start facilitates a termly meeting which brings together settings leaders, nursery teachers/Foundation Phase leads. An outcome of these meetings is, on introduction of FPP within Flying Start childcare settings, we identified a need for moderation meetings to be held following the half-term of a child’s entitlement. This ensures agreed levels of assessment are in place across the settings and catchment Nursery schools.

The transition arrangements are often discussed at the termly Flying Start childcare setting meetings which are facilitated by the Flying Start Advisor. The meetings are attended by setting leaders, nursery teachers from local catchment schools, childminder network facilitator and relevant Flying Start managers (Project lead and Early Years). Gaps and ideas, along with good practice, new research etc are shared.

Some nurseries have low numbers of Flying Start children attending so the Advisory Teacher (aka Early Years Advisor (EYA)) and/or childcare staff will visit the school and take relevant documents with them. This hand delivery is more effective than posting the information.
There is also direct contact with nurseries - direct emails to ensure invitations to meetings / transition events received for example. The EYA completes follow-up visits to the catchment schools by half-term to discuss any concerns that may have arisen and offer a link/remind schools they can refer to other Flying Start support services. Such as Early Years Practitioners for SLC skills or assistance with routines, parenting etc.

Flying Start have settings (two in-house, one commissioned) within three of the six catchment schools. This has improved links/communication

Where children are moving onto schools ‘out of area’, the Flying Start Advisor will ensure meetings are offered and that the relevant documentation/information is shared appropriately.

Where are the protocols working well and is the information provided by Flying Start settings what schools need?

We have a ‘virtual’ Flying Start school as every Flying Start child is matched to their Unique Pupil Referral system and data packs are produced annually enabling comparison at the end of Foundation Phase with peers across the Flying Start area, the wider local authority and All Wales data.

Although there are caveats (for example, relatively small Flying Start cohort and transient element within the Flying Start population) it does provide data ‘good enough’ to be considered. These data packs will be shared with the 6 schools that have the greatest count of Flying Start children within the schools population for their information and to prompt discussion on closer working together to improve the outcomes.

When consulted, the schools were satisfied with the level of information received from Flying Start. They consider it is used productively to ensure all children are placed appropriate to their needs and prior experiences. Generally, it was commented no further information was needed.

A ‘Childcare Transition Procedure’ was developed by our EYA and includes WellComm and Foundation Phase Profile data. On completion, the EYA consulted with schools to determine it met their needs.

In your experience, how can barriers to information sharing be overcome?

Increased communication, explicit support and the introduction of an Advisory Teacher with a focus on 3-4 years has made a positive difference.

The five Flying Start catchment schools now use the Wellcomm Speech and Language Toolkit to screen and provide interventions for children in Nursery 1. This ensures there is a continuum of use from Flying Start settings into schools and data will be available of children’s progress from two years to four years.
The catchment schools are fully aware of the Flying Start services that support families with children aged 3-4 and how to access them. Action plans are being developed to ensure settings and schools develop a range of activities to support the transition process for children, maintain communication and develop ways of holding joint activities for children in both.

**Wrexham Flying Start**

What protocols are in place for information sharing between Flying Start and the Foundation Phase settings and what impact have they had?

Flying Start supervisors meet with Early Education supervisors or nursery teachers to discuss pertinent information relating to the child. This includes preference for child’s play choices; particular friendships; medical needs; strategies used to support the child’s emotional well-being; early identification of additional learning needs (ALN). Where appropriate, confidential information is shared with the responsible person.

Flying Start transition paperwork and ALN play plans are given and discussed with the next setting’s supervisor/nursery teacher. Transition visits take place throughout the year (Flying Start children visit their new setting and the new playgroup staff/nursery teacher will also visit the child/children in their current Flying Start setting) where informal information sharing may take place.

Where are the protocols working well and is the information provided by Flying Start settings what schools need?

The transition protocols work well where there is co-operation from all parties involved and working relationships are strong between Flying Start Childcare and Early Education settings or schools.

Each setting completes individual transition documents evidencing the progress a child has made. The Childcare Advisory team have refined the document to ensure completion is manageable and timely. The dialogue between practitioners is beneficial in supporting the paperwork. Practitioners and Advisory Teachers find this very helpful in ensuring the children's needs are met.

These protocols are most effective when the childcare provision is on the same site as the Early Education and/or school nursery provision and a single management structure is in place.

In your experience, how can barriers to information sharing be overcome?

Barriers can be overcome by:

- Input/regular visits to Early Education groups from Flying Start Health Visitors.
- ‘The lack of knowledge and understanding in the wider educational community about Flying Start’ - This could be addressed through representation of Flying Start at Head Teachers’ meetings. Also, Childcare Advisory service promoting
childcare by providing an annual information session for a targeted audience of school representation.

- ‘Logistics of implementing a transition protocol and procedure e.g. time, release of staff’ - This could be resolved through strategic plans to recognise the importance of including Flying Start within County and School transition policies and protocols.
  Also, the writing of a transition policy requires co-operation and commitment of all parties concerned – policy writing should not fall to one setting. Likewise, a letter could be sent to all schools requesting the inclusion of the Flying Start service to their transition policy (if required).

- Co-locating Flying Start Advisory Childcare Teams, Early Education Advisory Teams and Foundation Phase School Support teams in one location promotes positive working relationships, good communication and a joined up approach.

- Flying Start Senior Advisory Teachers meeting a minimum of once per term to discuss common issues e.g. transition, training, service delivery.

- “If a child has medical needs, specific additional needs or any other’ - The Flying Start Advisory Teach/Flying Start Health Visitor could liaise and organise a meeting of all relevant parties. Also, nursery teacher/supervisor can contact the Flying Start supervisor if concerns arise or more information is required.

- ‘Staff changes within both schools and early education settings impact on established working relationships’ - Flying Start Advisory Teacher can liaise with Schools and Early Education settings to forge positive links and relationships.