



St Helens **Best Start in Life Local Plan**



Family Hub

ST HELENS
BOROUGH COUNCIL



I. Vision and targets

St Helens demographics and Vision

St Helens Best Start in Life Plan for 2026 – 2028 outlines a shared partnership vision for improving the wellbeing and outcomes for children in St Helens.

Positive early-life experiences are strongly linked to better learning, stronger social and emotional development, improved employment prospects, and healthier lives overall. The first 1,001 days—from pregnancy to age two—are especially critical, shaping lifelong physical and mental wellbeing.

The Marmot Review highlighted “giving every child the best start in life” as the most important action for reducing inequalities. Achieving this requires a coordinated approach from pre birth to age five, with health, education and community services working together and offering proportionate universalism—support for all, with extra help for families who need it most.

In practice, a Best Start means services working alongside families to support healthy pregnancies, strong parent–child relationships, high quality health visiting, good nutrition, early speech and language development, and safe, nurturing environments. When these foundations are in place, children are better able to learn, grow and build positive relationships throughout life.

Local Demographics and Needs

According to the 2025 Index of Multiple Deprivation, St Helens is ranked 46th most deprived local authority in England out of 296. Nearly a quarter (23.1%) of all LSOAs within the borough fall within the most 10% deprived of neighbourhoods nationally.

On the 2025 Income Deprivation Affecting Children Index (IDACI), which measures the proportion of all children aged 0-15 living in income deprived families, St Helens ranks of 74th most deprived authority nationally, out of 296. Twenty of St Helens 121 LSOAs fall within the most 10% deprived of all LSOAs nationally for IDACI and 38 that fall within the most deprived 20% of all LSOAs nationally.

In 2024/25, there were 26,977 children eligible for free school meals in St Helens across all state-funded primary and secondary schools.

In 2025, 25.6% (107) of homeless households had dependent children, including 75 single-parent households.

In St Helens, there are approximately 11,655 children aged 0-5, 12,545 aged 6-11, and 16,273 aged 12-19, giving a total of 40,473 children and young people aged 0-19.

Our Vision and Ambition

We envisage a St Helens where every child thrives from their earliest days, supported by a united partnership that works seamlessly across Family Help, health, education, police, and the voluntary and community sector.

Together, we will transform the system so that all children experience improved health and wellbeing, stronger development, and equitable opportunities to succeed. By championing the voices of children and their families and placing their experiences at the centre of everything we do, we will create a community where every child is empowered to grow, learn, and build a brighter future.

Top 4 Priorities for St Helens Best Start in Life

1. Close the Early Years Attainment Gap (GLD + FSM focus)

This is the single most prominent strategic priority across the plan. Highlighting the need to raise GLD to 75% overall and 53% for FSM children, and to target wards with the lowest outcomes.

Why this is a top priority:

- It underpins the whole plan's success.
- It requires coordinated action across health, HLE, ECEC, and Family Hubs.
- It directly tackles inequalities.

2. Strengthen Early Communication, Language and Home Learning Environment

Why this is a top priority:

- Early language is the strongest predictor of later attainment.
- It is a major driver of the GLD gap.

3. Improve Ante natal health, Perinatal Mental Health, Parent-Infant Bonding and Early Health

Why this is a top priority:

- The first 1,001 days are central to the plan's vision.
- Strong perinatal mental health improves attachment, development and school readiness.
- Health visiting and infant feeding are core statutory foundations.

4. Strengthen Multi Agency Integration Through Family Hubs.

Why this is a top priority:

- Integration is essential to reach priority families.
- Hubs are the mechanism for delivering proportionate universalism.
- They support early identification, transitions, parenting, SEND, and health.



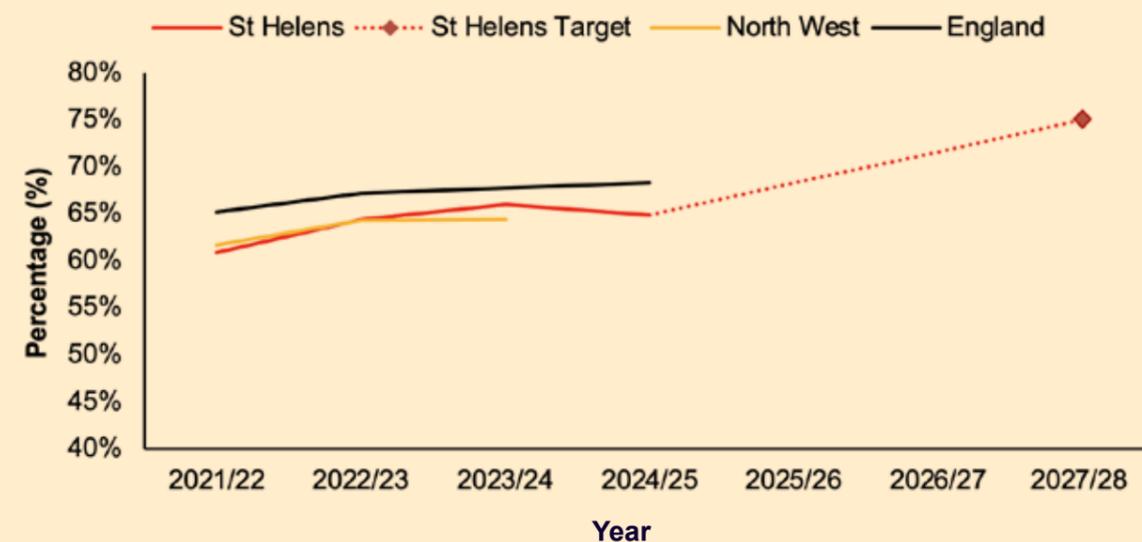
Targets

We have a target to increase the proportion of children in St Helens Borough Council achieving a Good Level of Development (GLD) to at least 75.0% at the end of the 2027/28 academic year; and for disadvantaged children to benefit at least equally from this improvement; that is, that the proportion of children eligible for Free School Meals (FSM) achieving a GLD at the end of the 2027/28 academic year is at least 53.2%

All Children Achieving a GLD

In 2024/25, 64.9% (1,226) of all assessed children in St Helens achieved a GLD in their reception year (figure 1).

Figure 1: Pupils achieving a good level of development at end of reception in St Helens, Northwest and England (including 2027/28 target for St Helens)



To reach our overall GLD target of 75.0% by 2028, an additional 190 children would need to reach a GLD.

Additional data for 2024/25 show that in St Helens:

- 70.4% of girls achieved a GLD at the end of reception, compared to 59.9% of boys in St Helens.

- 73.1% of children with no SEN provision achieved a GLD at the end of reception, compared to 19.6% of children with SEN needs.

- 65.8% of children whose first language is English achieved a GLD at the end of reception, compared to 59.6% of children whose first language was not English.

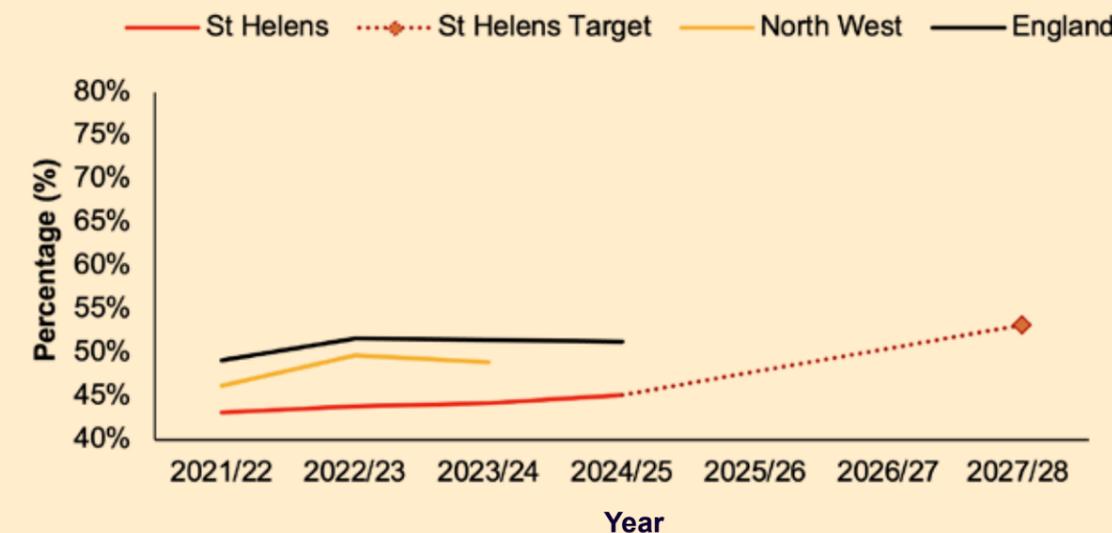
- 71.0% of children born in Autumn achieve a GLD at the end of reception, compared to 68.8% born in Spring and 57.7% born in Summer.
- 82.2% of all children achieved the expected level in physical development.
- 79.2% of all children achieved the expected level in personal, social and emotional development at the end of reception.
- 76% of all children achieved the expected level in communication and language at the end of reception.
- 74.9% of all children achieved the expected level in mathematics at the end of reception.

- 67.1% of all children achieved the expected level in literacy at the end of reception.

Children Eligible for Free School Meals Achieving a GLD

In 2024/25 45.2% (165) of children eligible for free school meals in St Helens achieved a GLD (figure 2).

Figure 2: Children eligible for free school meals achieving a good level of development at the end of reception in St Helens, North West and England (including 2027/28 target for St Helens)



To reach our free school meals GLD target of 53% by 2028, an additional 29 children eligible for free school meals would need to reach GLD

II. Current state

Early Years Outcomes and Priorities

The EYFS performance data for St Helens (2023–2025) provides a detailed picture of children's early development and highlights where targeted action is needed to ensure every child has the best start in life. While the borough's overall Good Level of Development (GLD) rate sits at 64.9%, this masks significant variation between communities, with some wards performing above national expectations and others facing persistent challenges.

Children in Billinge & Seneley Green, Rainford, and Eccleston achieve some of the strongest outcomes in the borough, demonstrating the impact of stable home learning environments, strong early years provision, and effective community networks. In contrast, children in Parr, Sutton Southeast, and St Helens Town Centre experience much lower GLD rates, reflecting higher levels of deprivation, greater complexity of need, and accessing to high quality early learning opportunities.

Across the borough, Literacy and Mathematics remain the weakest Areas of Learning, signalling a clear need for strengthened early literacy, communication, and numeracy support. These gaps are particularly pronounced in wards with lower GLD outcomes, where children are more likely to start school without the foundational skills needed for early learning success.

The data also highlights a significant and persistent disadvantage gap. Children eligible for Free School Meals achieve a GLD rate of just 45.2%, compared with 70.0% for their non FSM peers. In some wards, this gap exceeds 30 percentage points. This pattern underscores the need for targeted, relationship based support for families experiencing poverty, alongside improved access to high quality early education and home learning resources.

Priority families include those eligible for FSM, families living in high need wards such as Parr, Thatto Heath, Sutton Southeast, and St Helens Town Centre, and families experiencing multiple vulnerabilities including poverty, housing instability, and SEND. These communities require coordinated, multi agency support that addresses both developmental needs and the wider social determinants of health.

To respond effectively, the Best Start in Life plan will prioritise targeted early years services in wards with both high child populations and low attainment. At the same time, high performing areas such as Billinge & Seneley Green, Rainford, and Eccleston could offer opportunities to act as peer learning hubs, sharing best practice and strengthening professional development across the system.

St Helens is one of the areas benefiting from investment in Cradle to Career Parr, a place based, collective impact programme led by Right to Succeed. The initiative brings together schools, community organisations and statutory partners to improve outcomes for children and young people growing up in the Parr ward of St Helens.

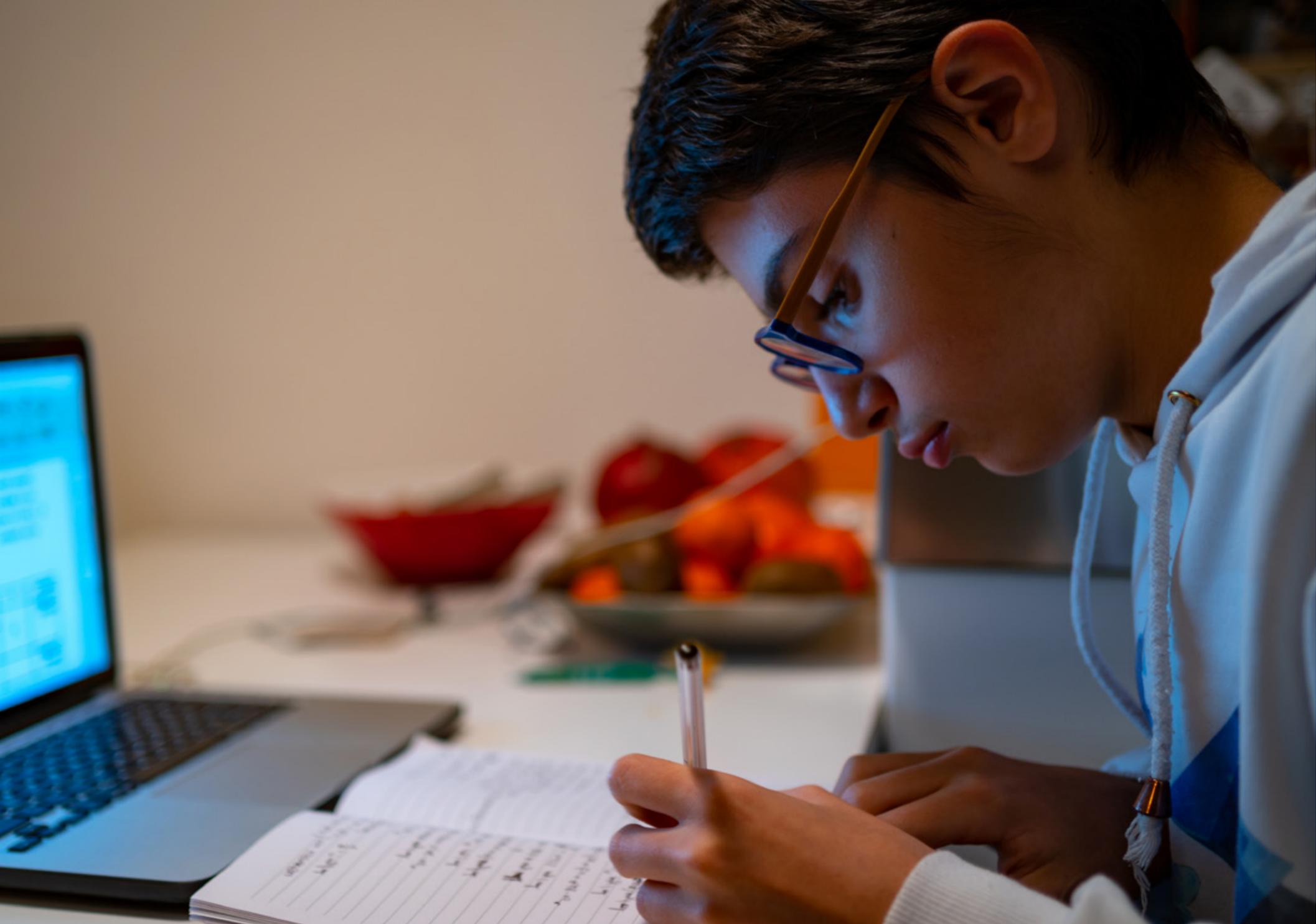
Co designed through an in depth Discovery process, the programme focuses on three interconnected strands: Education, Family and Services, and Community and Youth Voice. Together, these strands support a shared ambition: that every child in Parr thrives from their earliest years through to adulthood.

In its first year, Cradle to Career Parr has already delivered a wide range of targeted support. This includes literacy and inclusion work in schools, interventions to reduce the risk of young people becoming NEET, and the co design of a new youth offer. The programme has also established family connectors, early years link workers and a local multi disciplinary team to strengthen access to support.

Grounded in strong partnership working, shared data and meaningful resident involvement, Cradle to Career Parr is building sustainable, locally led systems that improve school readiness, enhance life chances and empower the community to shape its own future. Learning from this programme will support interventions across the borough.

Delivering improved outcomes in St Helens will require a whole system approach. Strengthening early literacy and numeracy, enhancing engagement with FSM families, and improving the home learning environment will be central to this work. Family Hubs will play a key role in coordinating support, building trusted relationships, and ensuring families can access help early. Collaboration between schools, early years settings, health visitors, and Family Hubs will be essential to closing developmental gaps and ensuring every child enters school ready to learn, thrive, and succeed.





Existing services

Health and Early Help

Strengths

The universal health presence is exceptionally strong, with Healthy Child Clinics running daily across hubs and libraries. Sleep Advice, breastfeeding support, antenatal programmes, and the Infant Feeding Team ensure continuity from pregnancy through infancy. Targeted and specialist pathways are well defined, including specialist feeding clinics, SLCN pathways, OT/physio drop-ins, and evidence-based parenting programmes such as Triple P, HENRY, PAACES, DART, and Gateway. Mental health support is available for parents and young people through YMCA Listening Service, Parents in Mind, and PAACES. Integration with community resources—food pantries, libraries, schools, and voluntary sector partners—strengthens the early help ecosystem.

Gaps

Perinatal mental health support is limited outside scheduled groups, with no weekly drop-ins, provision for fathers could be better advertised. Children aged 5–10 have limited access to health and wellbeing support beyond Family Matters. The adolescent health offer is less visible within the Family Hub timetable, lacking information about sexual health, substance misuse, or emotional wellbeing groups. Local support services for parents of children who are neurodivergent or who have a disability could be clearer.

Priority actions and measure of progress

- Father-focused provision to be more visible within the family hub timetable: Increase in the number of fathers attending father specific or father inclusive sessions within the Family Hub timetable.

- Improve signposting for parents with neurodivergent children and children with disabilities: Percentage of families who report understanding how to access services that can support them with parenting neurodiverse children or children with disabilities. \

Home Learning Environment (HLE)

Strengths

The home learning offer is underpinned by a strong universal early literacy programme, with Read & Rhyme sessions delivered daily across libraries and hubs, complemented by Read & Rhyme on Tour to reach families with lower library engagement. Story Makers (0–36 months) further strengthens early communication and parent–child interaction. Play-based learning is consistently available through Little Wizz Kids, Sensory Baby Groups, Mini Chefs, Playground Sports & Crafts, and Baby Breakfast Club, ensuring daily access to rich early learning experiences. Targeted speech and language support is well structured, with Chatterbox, Tot’s Talking, and Speech & Language Therapy forming a clear universal–targeted–specialist pathway. Parental engagement is supported through groups such as Coffee/Tea Tots, Families with Voices Forum, Young Parents Group, and Grandtots, which indirectly strengthen the home learning environment.

Gaps

There are no take-home resources, home learning packs. Provision for 3–5-year-olds is inconsistent, with most sessions focused on 0–36 months and limited support for school readiness. Weekend provision is minimal, restricting access for working families.

Priority actions and measure of progress

- Improve marketing to advertise evidence-based HLE programmes (e.g., PEEP and Whizz Kids) and the digital offer: Increase in numbers accessing PEEP, Whizz Kids, and other HLE programmes. Growth in website/social media engagement (clicks, shares, reach).
- Expand provision for 3–5-year-olds, including age specific school readiness content: Improvements in school readiness indicators captured through existing local authority metrics
- Develop take-home HLE resources: Number of take-home resources produced and distributed
- Increase outreach in Early Years settings: Number of Early Years settings engaged through outreach

Early Childhood Education & Care (ECEC)

Strengths

Universal stay-and-play provision is strong and geographically well distributed, offering consistent early years stimulation through Little Wizz Kids, Sensory Baby, Mini Chefs, and Little Movers & Mini Groovers. Childminders benefit from a dedicated support group that promotes quality improvement. Developmental pathways are clear and multi-agency, with Development Checks, Healthy Child Clinics, Chatterbox, specialist feeding support, and SEND services enabling early identification. SEND inclusion is a notable strength, with VIBE Saturday Club, Advanced Solutions Network, Bridge Centre, IASS, and therapy drop-ins providing a comprehensive offer.

Gaps

There are no explicit school readiness or transition programmes for children entering nursery or school. Provision for 3–4-year-olds not accessing funded ECEC is sparse, leaving some children at risk of missing early education opportunities.

Priority actions and measure of progress

- Introduce more school readiness drops in's and transition programmes at key transition points: Percentage of children attending at least one transition or school readiness session before starting nursery, preschool, or Reception.
- Strengthen outreach to families not taking up funded ECEC places. Increase in the number of previously non engaged families supported to take up their funded ECEC place.

Cross-Cutting Strengths

Universal provision is high volume and varied, with families able to access sessions daily across multiple hubs. Multi-agency integration is strong, with NHS, libraries, schools, YMCA, and voluntary sector partners embedded in delivery. Geographic coverage is good and SEND inclusion services for children is evident across the system.

Cross-Cutting Gaps

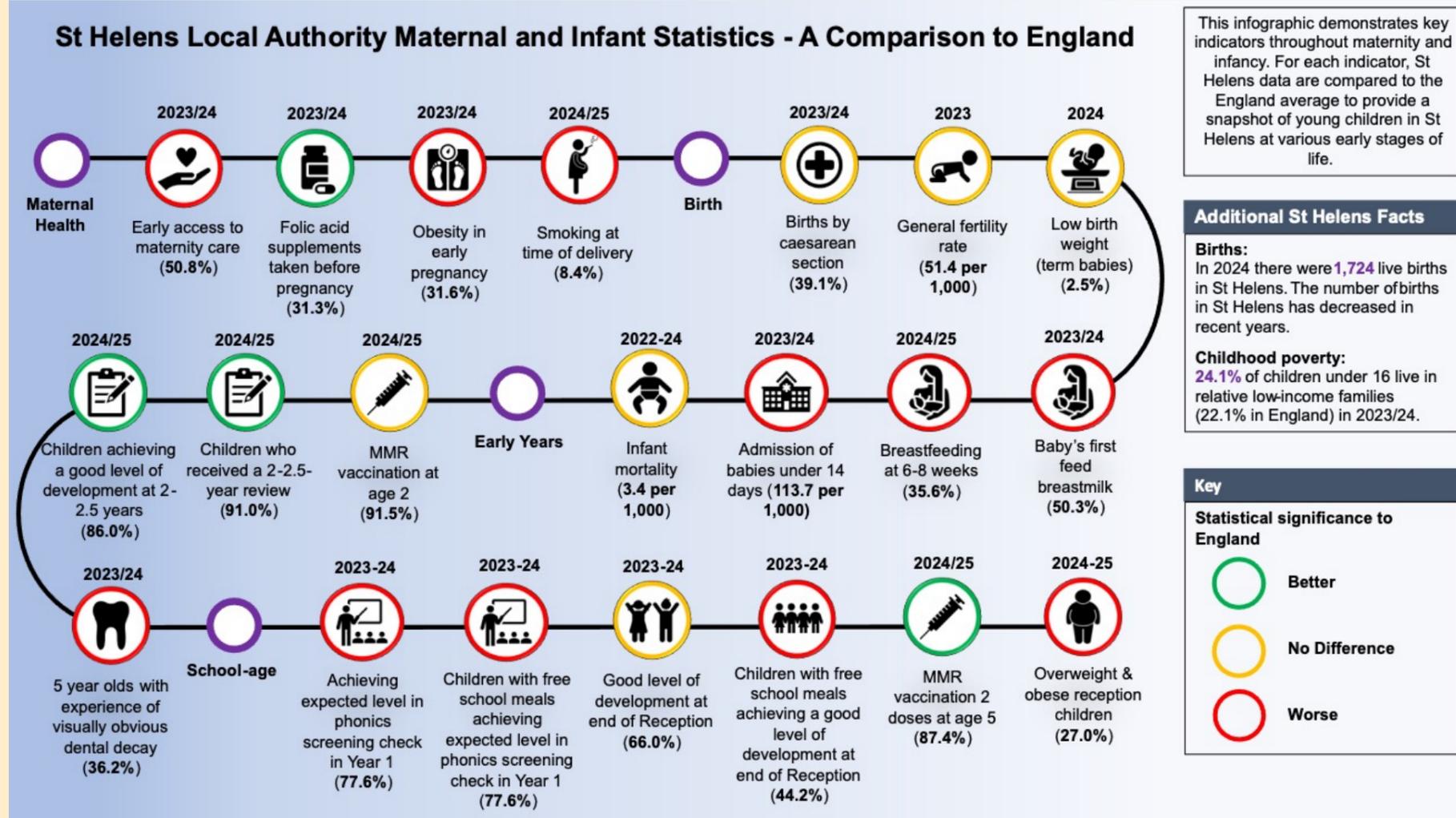
The digital offer could be clearer with better links to HLE or SEND content. The routes into targeted support for young people and adolescents lack clarity and require stronger visibility across the system.





III. Core Best Start in Life service aims

Maternal and early years health services



Current Picture

The St Helens 0–19+ Enhancing Families Programme supports parents to make healthy choices in pregnancy, develop safe and sensitive parenting, and understand their child’s development. Families who need extra help receive tailored, specialist support from a dedicated Enhancing Families Health Visitor, with regular home visits from pregnancy to age two.

The programme is trauma informed and uses evidence based, therapeutic approaches to strengthen parent–child relationships and promote healthy brain, emotional and physical development. The ‘Journey of Change’ tool is used with families to identify needs, plan support and track progress. informed and uses evidence based, therapeutic approaches to strengthen parent–child relationships and promote healthy brain, emotional and physical development. The ‘Journey of Change’ tool is used with families to identify needs, plan support and track progress.

The 0–19 Service co-delivers the Pregnancy and Beyond Programme and provides a comprehensive offer for families with children aged 0–5. Well Child Clinics are delivered across Family Hub venues, offering support with weight reviews, feeding, sleep (including safe sleep), and wider health and parental mental wellbeing. Development reviews are also delivered within Family Hubs, enabling timely assessment of children’s progress and early identification of any emerging needs. The service additionally provides vitamins for babies and pregnant women and actively promotes the Healthy Start scheme to support family nutrition and wellbeing. Health partners co-deliver quarterly baby shower events at Family Hubs to showcase services and support that can be accessed to promote infant health and early years health services. delivers the Pregnancy and Beyond Programme and provides a comprehensive offer for families with children aged 0–5. Well Child Clinics are delivered across Family Hub venues, offering support with weight reviews, feeding, sleep (including safe sleep), and wider health and parental mental wellbeing. Development reviews are also delivered

within Family Hubs, enabling timely assessment of children’s progress and early identification of any emerging needs. The service additionally provides vitamins for babies and pregnant women and actively promotes the Healthy Start scheme to support family nutrition and wellbeing

The **St Helens Wellbeing Infant Feeding Team** provides comprehensive support for parents across the borough, covering all aspects of infant feeding from pregnancy through to the introduction of solid foods. Working closely with Whiston Hospital, community midwifery services, and the 0–19+ Service, the team ensures parents have access to support seven days a week, including evenings, weekends, and bank holidays. In partnership with the Halton Infant Feeding Team, additional postnatal support is offered on weekdays. The service is inclusive, offering individualised guidance to all parents and carers regardless of feeding method. Support is available through clinics, drop-in groups, a specialist lactation clinic, and home visits. A free breast pump loan scheme is also available. Beyond immediate feeding support, the team contributes to key health priorities in St Helens by promoting breastfeeding, which helps reduce childhood obesity and improve oral health, while also offering long-term benefits such as lower risks of obesity, diabetes, and dental issues.

- The **Building Attachment and Bonds Service (BABS)** is a specialist parent-infant mental health initiative launched on 4th December 2023 at Sutton Family Hub in St Helens. It provides targeted, therapeutic support to parents with complex needs, helping them strengthen secure attachments with their infants and address personal challenges linked to past adverse experiences. Working collaboratively with midwifery, health visiting, social care, Early Help, and Change Grow Live (CGL), BABS promotes improved mental health outcomes and contributes to reducing health inequalities. The service operates through an integrated, multi-disciplinary partnership model and plays a key role in supporting the St Helens Family Hub and the Best Start for Life programme.

Priority actions and measure of progress

Perinatal MH and infant bonding

- **Improved Parental Mental Health Scores:** Reduction in depression and anxiety rates over time and reported better access to mental health services.
- **Enhanced Parent–Infant Bonding and attachments Scores:** Positive change in attachment and bonding assessments.
- **Reduce risks and safeguard the parent infant relationship and mental health:** a reduction in risk, levels of need and less babies and children becoming looked after.
- **Increased Service Uptake:** Growth in participation in perinatal mental health and parenting programs.
- **Reduced Crisis Interventions:** Fewer emergency mental health cases during the perinatal period.
- **Long-Term Child Outcomes:** Improved emotional regulation, resilience, and early learning readiness.

Infant feeding and Early Years health

- **Promotion of Well child clinics and pregnancy and beyond programmes:** Attendance numbers at well child clinics and the pregnancy and beyond programme. (covering safe sleep and safety advice)
- **Increased Exclusive Breastfeeding Rates:** Growth in exclusive breastfeeding at 1st feed and at 6-8 weeks.
- **Reduced Feeding-Related Health Issues:** Decline in hospital admissions or poor weight gain cases.
- **Improved Infant Nutrition and Growth through promotion of healthy start and healthy nutrition practices:** Higher proportion of infants meeting healthy growth benchmarks and increase in numbers of vitamins given.
- **Promoting uptake of childhood vaccinations, making it easier for families to access:** numbers of uptake of vaccinations
- **Health visiting contacts:** Increase take-up of key health visiting contacts, particularly for priority families and in underserved communities
- **Decrease in Mothers smoking at time of delivery:** Decline in mothers smoking at time of delivery.
- **Reduction in 5 yr olds with obvious visual dental decay:** Increase in targeted settings to take up the offer of supervised tooth brushing.

Home learning environment and parenting interventions

HLE

There is a pathway for speech and language provision includes the introduction of evidence based assessment tools and clear action plans, supported by the re introduction of the integrated health check to strengthen early identification and intervention. Family Hub staff are trained in the Parents as First Teachers programme, which equips parents and carers with the knowledge and confidence to understand and enhance their child's early learning and development. This evidence based approach is embedded across all areas of delivery, with consistent home learning messages that highlight the vital role parents and carers play in supporting children's progress.

The 0–19 Service delivers all core contacts within the Healthy Child Programme, including the birth visit, 6–8week review, 1year development review, and 2year development review. At each contact, practitioners discuss home learning and practical ways parents can support their child's development. Additional home learning opportunities are promoted regularly through the service's social media channels. 6-week review, 1 year development review, and 2 year development review. At each contact, practitioners discuss home learning and practical ways parents can support their child's development. Additional home learning opportunities are promoted regularly through the service's social media channels.

Home start – School readiness support for children aged 2–5 focuses on development through play, with home based sessions designed to help parents and carers prepare their child for the next stage of learning. Volunteers trained in an evidenced based home learning programme deliver personalised play activities that encourage engagement and build key early skills. Alongside this, families are supported to develop strong community connections through guided visits to Family Hubs, Children's Centres and local needs led groups, helping to create a wider network of support around each child.

Parenting

Support for parents and carers during pregnancy has been strengthened to ensure help is available early in their parenting journey. The offer now includes Provision on perinatal mental health, bonding and attachment, early communication, home safety, infant feeding, emotional wellbeing SEN support and other key aspects of early development including a digital parenting offer. The parenting programme has also been expanded to include a wide range of evidence based interventions, with specific provision for male carers and more marginalised groups. Parent volunteers are delivering one of the evidenced based parenting programmes EPEC.

Alongside this, practical support is available for everyday challenges such as toileting, sleep routines and establishing a healthy diet, helping families feel more confident and equipped as they prepare for their child's arrival and throughout childhood. Promotion of the take up of Early Years education entitlement is a priority.

Priority actions and measure of progress

- **Improvement in Developmental Assessments:** Progress in early learning and wellbeing indicators over time.
- **Increased Parental Engagement Rates:** Growth in participation in home learning and community and parenting programmes.
- **Reduction in Developmental Vulnerability:** Fewer children identified as developmentally at risk and increase in numbers accessing early intervention to promote development.

- **Attendance and Retention:** Frequency of attendance and completion rates for parenting courses, workshops, or home visits.

- **Engagement Across Demographics:** Participation rates by age, cultural background, and socioeconomic status to assess equity of access.

- **Parenting Confidence Scores:** Self-reported confidence in parenting abilities before and after program participation.

- **Knowledge Assessments:** Pre- and post-program surveys measuring understanding of child development, health, and safety.

- **Maintain take up of Early Years education entitlements:** Increase / sustained numbers accessing Early Years Education Entitlement.

- **Enhanced School Readiness:** Higher proportion of children entering school meeting developmental benchmark

Early Childhood Education and Care access and quality

Currently there is a good take up of Early Childhood Education and Care entitlements in St Helens

- **91%** for eligible 2 year olds (Passport for 2s)

- **94%** for 3 year olds

- **98%** for 4 year olds

(Based on DfE Census Data and the latest DfE Scorecard for Early Learning 2 year olds.)

100% of group based providers are judged Good or Outstanding.

100% of childminders hold Good or Outstanding judgements.

Interest in becoming a childminder has increased by at least 50% year on year, presenting a strong opportunity to expand the workforce and meet local childcare needs.

As set out earlier data tells us that in 2024/25, **64.9% (1,226)** of all assessed children in St Helens achieved a GLD in their reception year. **45.2% (165)** of children eligible for free school meals in St Helens achieved a GLD

Priority Actions and measure of progress

- **Sustain and increase take up of early education entitlements,** ensuring participation remains at or above current levels:

- 91% of eligible 2 year olds (Passport for 2s)

- 94% of 3 year olds

- 98% of 4 year olds

- **Expand high quality early education and childcare in areas of highest need**, using the school based nursery programme to increase provision and support long term sustainability for schools and settings.
- **Pre-Registration Support and Bespoke Training Offer:**
For childminders in the borough
- **Develop and share across the partnership borough wide sufficiency report** mapping current and future supply and demand for early education entitlements and school aged childcare, informing strategic planning, commissioning and investment.
- **Embed the Speech and Language Pathway** – understanding across all partners to strengthen early identification and intervention.
- **Grow the training and CPD offer**, responding to sector needs and supporting quality improvements based on triangulation of data from partners
- **Enhance digital communication**, positioning the EYHUB website as the primary source of guidance, resources and updates.
- **To develop an education led specific action plan for improvement of the EYFSP** – there will be working plan with SMART actions for Thatto Health, Sutton and Parr.

Transition to school and reception year

The Early Years Quality and Inclusion Team, as part of the EYHUB, initiated a sector-wide consultation to review and strengthen approaches to Reception readiness. While a parent-facing poster is already in place to support families in understanding the key skills children need before starting school, the consultation highlighted a clear need to articulate and share Reception teachers' expectations with group-based providers. This information will help settings refine their curriculum and teaching approaches to better prepare children for a successful transition into

Reception the Bridge Centre hosts its annual Next Steps Conference during the summer term. This event brings together schools from across St Helens to share key information about children who will be joining them in September 2025 and who have previously received assessments or support from The Bridge Centre or wider Education and Learning teams, including TESSA, Speech and Language Therapy, Physiotherapy, and Occupational Therapy.

Where children have already been assessed by The Bridge Centre and present with complex needs that may require additional specialist input once they start school, settings can make a referral to TESSA Triage for further advice and support.

The 0–19 Service provides development follow ups using a graduated approach where concerns are identified at routine reviews. Assessments such as ASQ, ASQ SE and ELIM are used to inform next steps, with referrals made for early intervention and support to promote school readiness where appropriate. Clinics are delivered across Family Hub venues to maximise accessibility for families, and referrals are routinely made into Family Hub groups and voluntary sector partners, including HomeStart.

A dedicated School Ready Practitioner (funded through Family Hubs) supports children aged 3–5 by working alongside Family Hub Navigators to engage families in the support available. The role includes delivering school readiness drop ins, providing targeted 1:1 outreach, and strengthening community engagement. As this is a newly established role, work is underway to continue raising its profile across local partners and communities.

School Entry Questionnaires are completed during the first term of Reception, providing parents with an opportunity to share information about their child's physical and emotional health. These are issued to all school aged children, including those who are electively home educated.



Priority actions and measure of progress

- **Strengthen delivery and engagement with school readiness drop ins and targeted 1:1 intervention for families of 3–5 year olds:** Uptake of school readiness drop ins and number of targeted interventions completed.
- **Ensure high quality completion of development reviews and timely referrals into Family Hubs, Children’s Centres, and wider services:** Number of development reviews completed, and referrals made to Family Hubs/Children’s Centres/other services
- **Increase completion of School Entry Questionnaires to strengthen understanding of children’s health and development at the point of starting school:** Number of School Entry Questionnaires completed
- **Implement auto-enrolment in free school meals:** numbers of eligible children accessing FSM

SEND support

St Helens provides a broad, inclusive SEND offer across the Best Start in Life pathway, with Family Hubs delivering a wide range of SEND specific and SEND friendly activities, specialist drop ins, and accessible play opportunities. The HAF programme expands inclusive holiday provision using a clear SEND coding system, increasing participation for children with additional needs. Targeted Early Help offers evidence based interventions and coordinated support for families, preventing escalation to social care. For children with more complex needs, Short Breaks provide universal, targeted and specialist options, including the Outstanding rated Abbeyford service, ensuring personalised support and meaningful experiences for children and families.

The Bridge Centre in St Helens, The Bridge Centre offers a specialist service to children from birth up to the age of 5 years old, with a recognised disability/diagnosis where significant development delay is likely to feature, complex health needs and neuro developmental conditions, or a significant developmental delay in at least 2 areas of their development.

Based at the Bridge Centre are the Portage Team, Outreach Team, Senior Learning Assistants and Specialist SEND Team. The Bridge Centre coordinates assessments delivered by the EY’s Operational team consisting of the team based within the centre and supported by:

- Speech and Language Therapy
- Physiotherapy
- Occupational Therapy
- Sensory Support Team (Specialist Teachers)

The service provides a child centred approach offering assessment, monitoring and intervention through multi-agency working. Assessments, interventions, and support for each child is carried out following an individual Programme of Assessment, this programme is agreed and with parents. This is reviewed regularly with parents and professionals involved, depending on the child’s current needs.

Outreach Support

The Bridge Centre team provides specialist advice, practical strategies, and hands on support to help children learn, play, and thrive in nurturing early years environments. Staff visit settings to observe children, listen to practitioners, and recommend approaches tailored to each child’s individual needs. During visits, they also offer training and coaching to build practitioner confidence and skills. Their support includes ideas, tools, and techniques that strengthen children’s communication, learning, and wellbeing.

The 0–19 Service includes a dedicated SEND Practitioner who delivers SEND coffee mornings and health drop ins for parents and children. These sessions provide early support, advice, and a direct route into follow up with the family’s Health Visitor where needed. A new joint drop in offer is also being established in partnership with Merseycare’s Occupational Therapy and Physiotherapy teams, alongside the 0–19 SEND Practitioner, to provide a more coordinated and accessible pathway for families.

Priority actions and measure of progress

- Promote the SEND coffee mornings and establish the joint offer to include OT and Physiotherapy teams: Number of families attending SEND coffee mornings and joint OT/Physio/SEND drop ins. Outcomes from family feedback on ability to access quality SEND advice.
- Consider increasing the Co-location of specialists, including dedicated SEND practitioners in each Family Hub once guidance is received from DFE



IV. System enablers

Service integration & Best Start Family Hubs

Family Hubs

St Helens is one of the 75 local authorities who received initial funding from the Department for Education and Department of Health, based on deprivation of need.

Family Hubs in St Helens are seen to be a single point of access. They provide support for parents and carers with children and young people aged 0-19 and up to 25 for children with special educational needs and disabilities.

Family Hubs provide support to parents and carers so they can nurture their babies and children, improving health and education outcomes for all. Ensuring that support provided is communicated to all parents and carers, including those who are hardest to reach and/or most in need of it; and build on the evidence base for what works when it comes to improving health and education outcomes for babies, children and families.

Where are the Family Hubs?

There are three Family Hubs in St Helens Borough; they are in Sutton, Newton-le-Willows and the Town Centre, with a further network of Children's Centres serving areas that fall into the 30% most deprived in the borough. Family Hubs services also include outreach in families' homes and other community settings. Service delivery has been extended to include evenings and weekend support.

Family Hub Priorities

Home learning and speech and language

Parenting support

Parent-infant relationship and perinatal mental health support

Infant feeding

Engaging families in the development and delivery of Family Hub services

Transforming

Priority actions

- **Prioritise outreach and engagement alongside partner agencies** for target groups such as

- **Children in low attaining wards** such as Parr, Sutton Southeast, Thatto Heath and St Helens Town Centre.

- **Children from low income (FSM eligible) families**, especially in Newton le Willows East, Sutton Southeast, Parr and Moss Bank.

- **Families living in high need or deprived areas** with multiple vulnerabilities.

- **Children with emerging or identified SEND**, particularly speech, language and communication needs.

- **Parents with additional needs**, including perinatal mental health challenges, young parents, lone parents and those experiencing trauma or domestic abuse.

- **Families not engaging with universal services**, such as health visiting or early education.

- **Families with English as an Additional Language (EAL)** who may face barriers to accessing support.

- **Care experienced parents and families affected by trauma** requiring relational, trauma informed support.

- **Fathers and non-birth partners**, who are often under represented in early years services.

- **Families at key transition points**, including maternity to health visiting, early education entry and school readiness.

- **Consider increasing the Co-location of specialists**, including SEND practitioners in each Family Hub once guidance is received from DFE

- **Share training** to enable smooth transitions between Best Start Family Hub(s), health settings, childcare settings and schools that enable a 'no wrong door' approach

Measures of progress:

Percentage of families in both universal and target groups accessing Best Start Family Hubs, family feedback on join-up between services, monitoring data about referrals and waiting times for key services.

Workforce capacity and capabilities

St Helens' Best Start in Life ambitions rely on a confident, skilled and well supported workforce across Family Hubs, early years settings, health services, perinatal mental health, parenting support, SEND pathways and the wider voluntary and community sector. Our focus over the next three years is to ensure that the workforce has the capacity, capability and confidence to deliver high quality, integrated support for families from pregnancy to age five.

Priority Actions

Robust workforce capacity and stability: Work to maintain recruitment and retention in key Best Start services.

Build shared skills and consistent practice: Delivery of coordinated multi agency training aligned to Best Start priorities, including early communication, trauma informed practice and inclusive SEND support.

Support integrated working and workforce wellbeing: Prioritise staff wellbeing, supervision and reflective practice to support resilience and retention.

Measures of Progress

- Vacancy rates, turnover and time to recruit.
- Caseload levels and sickness absence.
- Percentage of staff completing core multi agency training.
- Staff reported confidence in supporting early years needs and working jointly across services.
- Staff satisfaction and engagement.
- Retention of newly recruited staff and indicators of stress or burnout

Family Involvement

A Parent and Carer Panel called Families with Voices Forum has been developed to ensure that the voices of children, parents and carers directly shape the Family Hub offer. This includes supporting parents and carers through training, co production and volunteering opportunities that strengthen their confidence and involvement. A wide range of families are consulted, with effort made to reach seldom heard groups so that the offer reflects diverse experiences and needs. Feedback is also gathered via case studies, surveys, questionnaires, observations and feedback on digital platforms.

Family Hubs are committed to acting on the feedback they receive and following up with families to make sure the changes made are meaningful and effective.

Family Hubs are strengthened by a team of 30 volunteers who enhance the reach, quality, and relational warmth of our offer. Their roles span parent voice, peer support, programme delivery, and community engagement, ensuring families feel welcomed, informed, and empowered.

Volunteers contribute to key functions including the Families with Voices Forum, Parent Champion roles, parenting programme support, Being a Parent course co delivery, and wider group facilitation. Their lived experience and community insight help us build trust, extend our reach into underserved groups, and create more responsive services.

Since September 2025, four volunteers have progressed into employment in local primary schools, demonstrating the value of our volunteering pathway in developing confidence, skills, and routes into education and childcare roles.

The Parent Champion model has increased awareness of the Family Hub offer, particularly among families with English as an Additional Language. Through peer led communication, school links, online forums, and community outreach, Parent Champions have strengthened early access to support while benefiting from enhanced training, personal development, and employment opportunities.

Priority actions

- Expand our current parent panels with a focus on underserved communities, and ensure that parent views are present in decision-making forums
- Expand our parent champion's programme
- Develop a local shared area volunteer policy and handbook

Measures of progress

- Number of parent panel members recruited,
- Number of parent champions recruited retention rates over 12 months, diversity of parent champions compared to local demographics,
- evidence of service changes in response to parental feedback,
- parental engagement with services,
- increased parental awareness of available services and support.

Monitoring, evaluation and learning

Monitoring, evaluation and learning (MEL) is currently overseen through the Family Hub Strategic and Operational Group. Building on this foundation, we will embed a stronger, more coherent MEL culture across the early years system to ensure that the Best Start in Life plan delivers meaningful and measurable improvements for children and families.

A robust MEL approach will enable partners to understand what is working well, identify where change is needed, and continuously refine services in response to evidence, data and lived experience. By creating shared learning loops across health, education, Family Hubs and wider partners, we will strengthen decision making, improve accountability, and ensure that support remains responsive to the needs of local communities.

Priority Actions

- **Develop a shared outcomes framework across all early year's services** A unified outcomes framework, aligned to this plan, will provide a consistent basis for measuring progress, setting expectations, and ensuring all partners are working towards shared goals for children and families.
- **Strengthen information sharing across the early years system** Improved data flow between health visiting, Family Hubs, early education settings and schools will support earlier identification of need, smoother transitions, and more coordinated, timely support for families.
- **Embed routine collection of parent and practitioner feedback** Regular, structured feedback mechanisms will ensure that lived experience directly informs service design, delivery and continuous improvement. This includes proactive approaches to hearing from families who may be less likely to engage.
- **Revisit the terms of reference and group members for the Family Hubs strategic and operational groups.** This group will oversee and monitor delivery of the plan, ensuring partners work together effectively to improve outcomes and narrow the attainment gap. Progress will be measured through Good Level of Development (GLD) targets and supported by whole system transformation.

Measures of Progress

- Shared outcomes framework agreed and adopted by all partners
- Clear success measures in place for each priority action
- Routine, high quality collection of parent and practitioner feedback
- Demonstrable examples of decisions, service changes or resource shifts made in response to MEL insights

Accountability and governance

We will strengthen and expand our governance and accountability arrangements to ensure the high quality delivery of the Best Start in Life plan. Our approach will emphasise multi agency ownership, clear coordination across the early years system, and shared responsibility for improving outcomes. Strong governance will ensure that partners remain aligned to shared priorities, that progress is monitored effectively, and that decisions are consistently informed by evidence, lived experience and system learning.

Priority Actions

- **Revisit the terms of reference and group members for the Family Hubs strategic and operational groups.** This will provide overall strategic leadership and accountability for the plan, ensuring alignment with wider partnership structures, including health, education and VCSE. The strategic group will feed into the Health and Well Being Board.
- **Strengthen links between the Strategic Board and operational delivery managers** Clear reporting lines and communication pathways will ensure that strategic decisions translate into effective operational practice, and that frontline insights inform system level decision making.

- **Embed shared accountability across all partners** Roles, responsibilities and expectations will be clearly defined so that every organisation contributes meaningfully to the delivery of the plan and is accountable for progress within their area of influence.
- **Ensure parent and community voice is formally represented within governance** Mechanisms will be enhanced to ensure that families lived experience informs governance discussions, decision making and continuous improvement across the system.

Measures of Progress

- Clearly defined roles and responsibilities agreed by all partners
- Governance meetings held as planned, with timely sharing of summaries and decisions, including with the public
- Evidence that partnership decisions are informed by monitoring, evaluation and learning insights
- Demonstrated multi agency involvement in governance (attendance, contributions, shared actions)
- Parent and carer voice formally embedded and influencing governance processes

Funding

St Helens' Best Start in Life plan is supported through Family Hubs and Start for Life funding, Early Years Education Entitlements, the 0–19 Healthy Child Programme, services commissioned for perinatal mental health, parenting and targeted SEND investment, alongside contributions from the Enhancing Families Programme, the Wellbeing Infant Feeding Team, and voluntary sector partners.

Additional place based funding through Cradle to Career Parr (right to succeed) strengthens early years education, family support and multi agency working in one of the borough's highest need wards.

Over the next three years, funding will be directed towards improving early communication and literacy, increasing take up of funded early education, strengthening school readiness, expanding evidence based parenting support, and enhancing SEND pathways. Progress will be measured through improved GLD outcomes, higher ECEC take up, increased participation in home learning and parenting programmes, reduced developmental vulnerability across the early years, and stronger engagement from priority families.

Priority actions

- Align investment for Family Hubs & Start for Life, Early Years Education Entitlements, Healthy Child Programme, perinatal mental health, parenting and targeted SEND with the best start for life healthy babies' priorities
- Use the place based funding to model integrated practice in high need communities.

Measures of progress

Monitoring of core service costs against both service engagement and target child outcomes and number and type of commissioned services

Action Plan : This action plan focuses on the areas that matter most, setting clear priorities with measurable progress so partners can drive meaningful, coordinated improvement for children and families. It will remain a live document subject to ongoing review and update.

Service Area	Priority Actions	Measures of Progress	Responsible Agency / Lead Partner	Deadline / review date
Perinatal MH, Infant Bonding & Early Health	Increase access and uptake of perinatal mental health and bonding support (BABS, PMH pathways)	Growth in participation in PMH and parenting programmes Improved parental MH scores; improved attachment scores; reduced crisis interventions	BABS, 0–19 Service, Midwifery, Mental Health Services, Family Hubs	April 2027
	Promote Well Child Clinics and Pregnancy & Beyond programmes	Attendance numbers at clinics and programmes	0–19 service, Family Hubs,	April 2027
	Increase exclusive breastfeeding rates	Growth in exclusive breastfeeding at first feed and 6–8 weeks	Infant Feeding Team, Midwifery	April 2027
	Reduce feeding related health issues	Decline in hospital admissions/ poor weight gain	Infant Feeding Team, Midwifery	April 2027
	Improve infant nutrition and vitamin uptake	Higher proportion of infants meeting growth benchmarks; increased vitamin distribution	0–19 Service, Public Health, Family Hubs.	April 2027
	Promote uptake of childhood vaccinations	Increased vaccination uptake	0–19 Service, Public Health, Family Hubs	April 2027
	Increase uptake of health visiting contacts	Increased take up of key HV contacts, especially for priority families	0–19 Service, Public Health	April 2027
	Reduce mothers smoking at delivery	Decline in smoking at time of delivery	Public Health, Midwifery	April 2027
	Reduce dental decay in 5 year olds	Increase in targeted settings taking up supervised toothbrushing	Oral Health Team, Schools, Early Years	April 2027
Sen & Early Help	Improve signposting for SEN	% of families reporting understanding of how to access SEND/disability support	SEND Team, Family Hubs, IASS	Dec 2026
	Embed the Speech and Language Pathway across all partners.	Numbers accessing training. Referral consistency rates	Education and all partners	Dec 2026

Home Learning Environment (HLE)	Improve marketing and take up of evidence based HLE programmes (PEEP, Whizz Kids) and digital offer	Increased numbers accessing PEEP, Whizz Kids; growth in website/social media engagement	Family Hubs, Home start Libraries, Communications Team	Dec 2026
	Expand provision for 3–5–year–olds with age specific school readiness content	Improvements in school readiness indicators	Family Hubs, Early Years Team, education	Dec 2026
	Develop take home HLE resources	Number of take home resources produced and distributed	Family Hubs, Libraries Early Years Team, Family Hubs	Dec 2026
	Increase outreach in Early Years settings	Number of settings engaged through outreach	Family Hubs, Libraries Early Years Team, Family Hubs	Dec 2026
	Improve school readiness	Higher proportion of children meeting developmental benchmarks	All agencies	July 2027
Parenting Interventions and engagement	Increase parental engagement and retention in home learning and parenting programmes	Growth in participation and retention rates	Family Hubs, Home Start, 0–19 Service, parenting programme leads	Dec 2026
	Increase parental engagement from target groups and areas	Participation rates from targets groups and areas	All agencies	Dec 2026
	Reduce developmental vulnerability through early intervention	Fewer children identified as developmentally at risk	Family Hubs, Early Years Team, education, 0–19 service	Dec 2026
	Improve parenting confidence and knowledge	Pre/post programme improvements in confidence and knowledge assessments	Family Hubs, Parenting Programme Leads	Dec 2026
	Improve school readiness	Higher proportion of children meeting developmental benchmarks	All agencies	July 2027
	Increase parental engagement from target groups and areas	Numbers of families from target groups accessing services	All agencies	Dec 2026
	Expand our current parent panels with a focus on underserved communities, and ensure that parent views are present in decision-making forums	Number of parent champions recruited retention rates over 12 months, diversity of parent champions compared to local demographics, evidence of service changes in response to parental feedback,	Family hubs	Dec 2026

Service Area	Priority Actions	Measures of Progress	Responsible Agency / Lead Partner	Deadline / review date
ECEC Access & Quality	Maintain and increase early education entitlement uptake	Percentage of eligible children accessing ECEC	All agencies	Dec 2026
	Expand high quality early education and childcare in priority wards by delivering the school based nursery programme	Uptake of provisions and support	Education	Dec 2026
	Deliver a pre registration and bespoke training programme for new and prospective childminders	Number of participants receiving tailored support and complete required training	Education	Dec 2026
	Strengthen digital communication by positioning the EYHUB as the primary platform for guidance, resources, and updates	increasing traffic and engagement on the EYHUB website	Education and partners	Dec 2026
	Develop an education led EYFSP improvement plan for Thatto Heath, Sutton, and Parr	Raised EYFS outcomes in identified areas	Education	Dec 2026
Cross Cutting System Improvements	Improve digital offer (HLE, parenting, SEND)	Increased website / digital engagement	Access and Technology officer, Family Hubs, SEND Team	Sept 2026
	Strengthen multi agency integration through Family Hubs	Improved referral pathways, shared data, and joint delivery	Family Hubs, NHS, VCS, Education	Sept 2026





Family Hub

ST HELENS
BOROUGH COUNCIL