



SMS Publication 4

Collation of LEAP's Theories of Change (ToC)

October 2021



List of acronyms and initialisms

BAME	Black, Asian and Minority Ethnic	HLE	Home learning environment
BaU	Baby and Us (EPEC service)	HLP	Healthy Living Platform
BFPS	Breastfeeding Peer Support	IMH	Infant mental health
BMI	Body mass index	MATVAT	Maternity Vulnerability Assessment Tool
BSW	Better Start Workers	OHS	Oral health service
CAMHS	Children and adolescent mental health services	ORIM Framework	Opportunities, Recognition, Interaction, Models Framework
CAN	Community Activity and Nutrition	PAIRS	Parent and Infant Relationship Service
CoSP	Circle of Security Parenting (PAIRS service)	PCI	Parent child interaction
CPD	Continued Professional Development	PINE	Pregnancy Information for Nutrition and Exercise
DIP	Data Integration Platform	PVI	Private, Voluntary and Independent
ECD	Early childhood development	REAL	Raising Early Achievement in Literacy
EHLE	Early home learning environment	SaLT	Speech and Language Therapy
EHLEI	Early Home Learning Environment Index	SLC	Speech, language and communication
EPEC	Empowering Parents, Empowering Communities	SLCN	Speech, language and communication needs
ESOL	English for speakers of other languages	STB	Supervised toothbrushing
EYE	Early Years Educator	ToC	Theory of Change
EYFS profile	Early years foundation stage profile	TT	Together Time (PAIRS service)
FEWs	Family Engagement Workers	WDC	Workforce Development Coordinator
FNP	Family Nurse Partnership		

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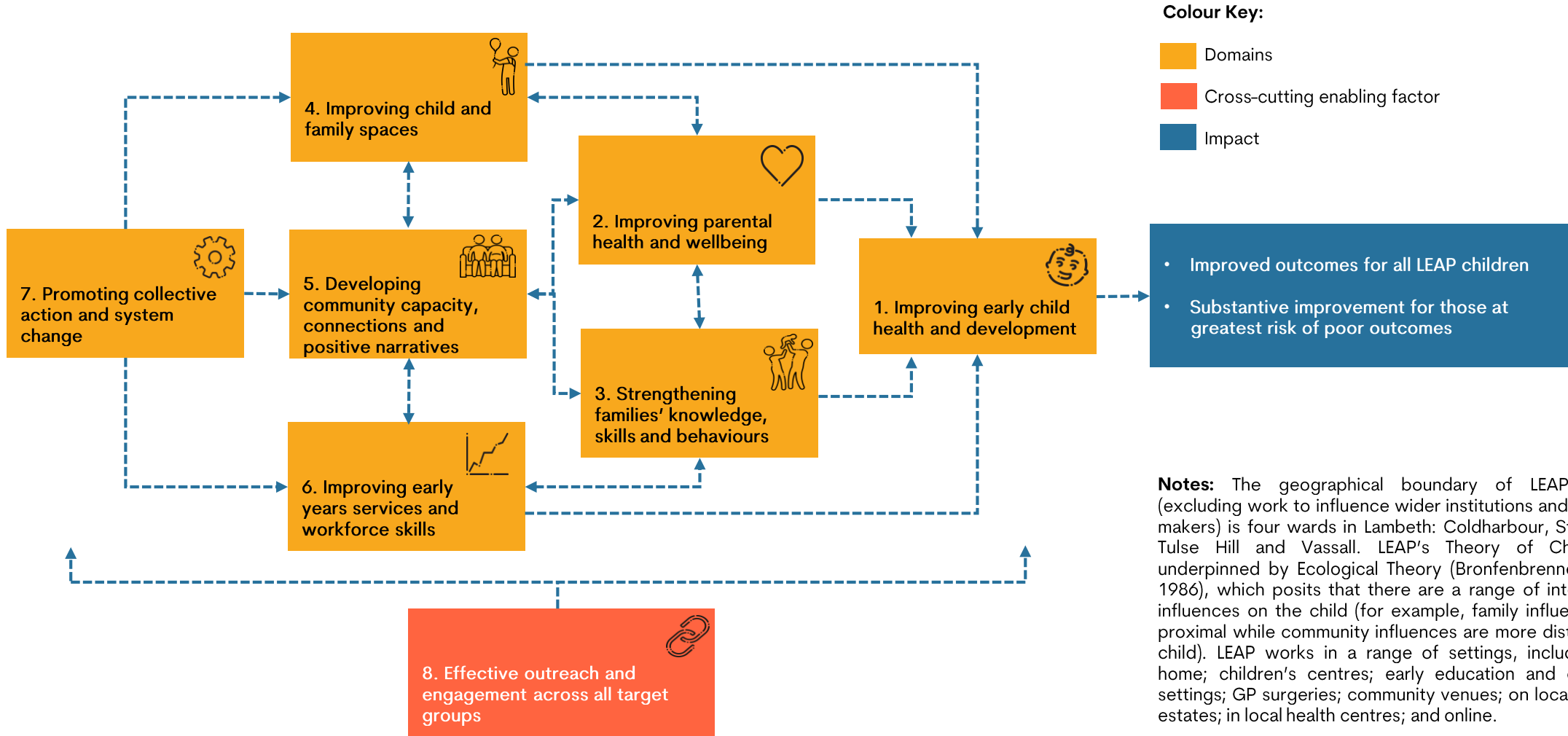


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Section 1

The LEAP Programme

Programme Theory of Change



Long-term outcomes by domain

<p>1. Improving early child health and development </p> <p>1.1. Improved diet and nutrition</p> <ul style="list-style-type: none"> 1.1.1. Fewer children are born with high or low birth-weight 1.1.2. Fewer children have high or low BMI 1.1.3. Fewer children have dental caries/decay <p>1.2. Improved social and emotional development</p> <ul style="list-style-type: none"> 1.2.1. Age-appropriate self-management and self-control 1.2.2. Secure attachment to a trusted caregiver 1.2.3. Improved child mental health and wellbeing 1.2.4. Positive relationships with other children 1.2.5. Positive relationships with adults <p>1.3. Improved communication and language development</p> <ul style="list-style-type: none"> 1.3.1. Children have age-appropriate use of verbal and non-verbal communication methods 1.3.2. Children have age-appropriate vocabulary comprehension 1.3.3. Children display improved listening and attention skills 	<p>2. Improving parental health and wellbeing and reducing parental conflict </p> <p>2.1. Good mental wellbeing</p> <ul style="list-style-type: none"> 2.1.1. Improved parental mental health and wellbeing 2.1.2. More families have strong support networks <p>2.2. Improved parental physical health and nutrition</p> <ul style="list-style-type: none"> 2.2.1. Parents have an improved diet and lifestyle during pregnancy and beyond <p>2.3. Positive family relationships</p> <ul style="list-style-type: none"> 2.3.1. Improved co-parenting relationships 2.3.2. More survivors of domestic abuse access appropriate specialist support 	<p>3. Strengthening families' knowledge, skills and behaviours </p> <p>3.1. Positive parenting knowledge, skills and behaviours</p> <ul style="list-style-type: none"> 3.1.1. Increased knowledge and application of positive, sensitive and responsive parenting 3.1.2. More mothers initiating and continuing breastfeeding 3.1.3. Improved weaning practices, with more families introducing appropriate food at appropriate times <p>3.2. Improved home learning environments</p> <ul style="list-style-type: none"> 3.2.1. More frequent and varied verbal exchanges between families and children 3.2.2. Provide more access to books, book sharing and reading aloud 3.2.3. Incorporating reading, literacy and other learning activities into daily routines 3.2.4. Increased planning and engaging children in learning activities in and outside the home 	<p>4. Improving child and family spaces </p> <p>4.1. More safe and accessible early years provision and community spaces</p> <p>4.2. More families make use of early years provision and community spaces</p> <p>4.3. Increased use of outdoor space for exercise, play or health reasons</p>
<p>5. Developing community capacity, connections and positive narratives </p> <p>5.1. Families connected with each other</p> <ul style="list-style-type: none"> 5.1.1. Families with young children increasingly support each other <p>5.2. Community involvement</p> <ul style="list-style-type: none"> 5.2.1. Families more actively involved in and engaging with their local community 5.2.2. Families feel empowered to represent and advocate for themselves and their communities <p>5.3. Families connected to child and family services</p> <ul style="list-style-type: none"> 5.3.1. Families more actively involved in co-production, development and improvement of local child and family provision and spaces 5.3.2. Increased trust and engagement between families / communities and local services <p>5.4. Positive social / cultural norms and behaviours</p> <ul style="list-style-type: none"> 5.4.1. Increased understanding of why early childhood matters amongst families, their support networks, and the wider community 5.4.2. Families, and particularly Black and ethnic minority families, feel empowered to promote inclusion and safely challenge prejudice or racist attitudes and behaviours across the community 	<p>6. Improving early years workforce skills and services </p> <p>6.1. Workforce skills and expertise</p> <ul style="list-style-type: none"> 6.1.1. Improved skills around identifying and supporting children with speech and language difficulties 6.1.2. Improved skills around identifying and supporting families where there are attachment and/or infant mental health issues 6.1.3. Improved skills around identifying and supporting children who are overweight or obese <p>6.2. Service provision and quality</p> <ul style="list-style-type: none"> 6.2.1. More welcoming, inclusive and approachable services for all children and families, and particularly disadvantaged groups 6.2.2. Families, and particularly Black and ethnic minority families, feel listened to by practitioners and professionals, and that their needs and experiences are taken seriously 6.2.3. Families know how to raise racism and injustice issues, and where to get professional support 6.2.4. Improved early childhood education and care, and child and family services 	<p>7. Promoting collective action and system change </p> <p>7.1. Shared vision and joint working</p> <ul style="list-style-type: none"> 7.1.1. A shared vision for children and families across the system and a joint approach for realising this vision 7.1.2. More integrated planning and delivery of services and resources for children and families <p>7.2. Evidence-based policy, practice, commissioning and decision-making</p> <ul style="list-style-type: none"> 7.2.1. Thorough understanding of local need and demand 7.2.2. More reliable evidence about the impact of place-based, collective impact initiatives is generated, shared, understood and used locally and nationally for continuous learning and improvement <p>7.3. Improved statutory services and child and family provision by other providers</p>	<p>8. Effective outreach and engagement across all target groups </p> <p>8.1. Outreach and engagement with children and families</p> <ul style="list-style-type: none"> 8.1.1. More families, and particularly disadvantaged families, have sustained engagement with local early years services (both LEAP and non-LEAP statutory, voluntary and community services) <p>8.2. Outreach and engagement with other stakeholders / target groups</p> <ul style="list-style-type: none"> 8.2.1. Increased awareness, understanding and engagement with LEAP's work among local services, workforce and decision makers

Programme level short-, medium-, and long-term outcomes



	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
O1	Establish and support local services responsible for improving child health and development.	S1	Families at risk of poor outcomes have access to services they rate positively.	M1	Improved early child health and development. (Domain 1)		
O2	Establish and support local services responsible for improving parental health and wellbeing.	S2	Parenting health and wellbeing services are accessed, completed and rated positively by appropriate groups using robust measures.	M2	Improved parental health and wellbeing. (Domain 2)		
O3	Establish and support local services responsible for strengthening families' knowledge, skills and behaviour.	S3	Parenting relationship services are accessed, completed and rated positively by appropriate groups and use robust impact measures.	M3	Increased knowledge and application of positive, sensitive and responsive parenting. (Outcome 3.1.1)		
O4	Establish a programme of improvement and development of child and family spaces.	S4	Increase in safe and accessible community spaces.	M4	More families make use of early years provision and community spaces. (Outcome 4.2)		Improved outcomes for all LEAP children
O5	Provide support for services responsible for developing community capacity, connections and positive narratives.	S5	Increased number of high quality community activities open to families with pre-school children.	M5	Developed community capacity, connections and positive narratives. (Domain 5)		Substantive improvement for those at greatest risk of poor outcomes
O6	Provide support for services responsible for improving early years services and workforce skills.	S6	Early years professionals accessing good quality training and development activities.	M6	Early years professionals feel competent and confident. (Domain 6)		
O7	Provide support for services and workforce to promote collective action and system change.	S7	Integrated planning and delivery of Lambeth services.	M7	Local services, workforce and decision makers actively promote partnership working and system change. (Domain 7)		
O8	Provide support for services responsible for effective outreach and engagement across all target groups.	S8	Increase in number of disadvantaged families engaging with local early years services.	M8	More families, and particularly disadvantaged families, have sustained engagement with local services. (Outcome 8.1.1)		



Section 2

Domains

Domain 1: Improving early child health and development



	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
O1	CAN and PINE programmes deliver home visits and workshops.	S1	Pregnant women engage in positive health behaviours.	M1	Fewer children are born with high or low birthweight.		
O2	Oral Health Service works with early years' service to promote evidence-based messages and distribute tools for oral health in a coordinated way.	S2	Early-years practitioners' have increased knowledge, skills and resource to support young children's oral health.	M2	Fewer children have dental caries/decay.		
O3	PAIRS service delivers one to one psychotherapy and group sessions for parents, and supervision, consultation and training for practitioners.	S3	Increased knowledge and application of positive, sensitive and responsive parenting.	M3	Children display age appropriate self-management and self-control.		
O4	Domestic abuse service provides early intervention, enhanced casework and holistic support to survivors/victims.	S4	Survivors have increased awareness of domestic abuse, what it means, signs of abuse, how to respond and the services that are available.	M4	Children are securely attached to trusted caregivers.		Improved early child health and development in LEAP wards.
O5	Natural Thinkers delivers family sessions, community engagement activities and workforce training.	S5	Parents feel encouraged to do outdoor activities with their children.	M5	Children have positive relationships with other children.		
O6	Making it REAL provides teachers and practitioners with training in home visiting and use of the ORIM framework to support early language and literacy.	S6	Practitioners / team chooses and constructs content of home visits based on what the family are already doing and child's individual needs and interests.	M6	Children have good verbal and non-verbal communication skills.		
O7	Making it REAL delivers home visits and literacy events sustained by practitioners teaching parents how to do these activities after the home visit and events have ended.	S7	Parents and families develop confidence and knowledge and do more to support their children's early learning and development at home.	M7	Children have good listening and attention skills.		
O8	Sharing REAL with Parents practitioners support early home learning environment (EHLE).	S8	Families have a better understanding of how children learn.	M8	Children have age appropriate skills in drawing and copying.		

Domain 2: Improving parental health and wellbeing and reducing parental conflict



	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
O1	CAN, PINE and HLP deliver services focused on supporting women to have a healthy diet and lifestyle in pregnancy and beyond.	S1	Women feel supported by service teams to make healthy changes in pregnancy and beyond.	M1	Mothers feel positive about the changes they have made to their diet and lifestyle and are resilient to setbacks.		
O2	The Family Nutrition (HENRY) service provides flexible one-to-ones, community-based workshops, and community capacity building.	S2	Parents feel services are understandable and coherent, and help them to build confidence and secure the support they need.	M2	Improved knowledge about nutrition, improved self-efficacy, and parental wellbeing leading to positive mental health.		
O3	Baby Steps supports expectant parents, with a focus on helping parents to build strong couple relationships and support networks and to access wider support.	S3	Parents feel more confident and more aware of wider support opportunities.	M3	Families are connected with and support each other through improved social support, awareness of local resources and access to other services.		
O4	LEAP focuses on expanding FNP and improving the service in terms of quality and reach.	S4	Parents actively engage in and positively rate FNP.	M4	Improved parental wellbeing and confidence.		Improved parental physical and mental health and improved parental wellbeing.
O5	EPEC delivers the Baby and Us (BaU) service.	S5	Increased parental knowledge around looking after your own mental wellbeing, strengthening couple relationships, and meeting your baby's needs.	M5	Sustained improvement in parental wellbeing and confidence.		
O6	One-to-one and group-based support from Breastfeeding Peer Supporters.	S6	Parents/caregivers feel supported to breastfeed.	M6	Parents/caregivers have high breastfeeding initiation and sustainment rates.		
O7	The LEAP Gaia service works closely with pregnant women and women with young children who are at the early stages of acknowledging domestic abuse.	S7	Parents who are experiencing domestic abuse are identified.	M7	More survivors of domestic abuse access appropriate specialist support and have increased wellbeing as a result.		
O8	LEAP services refer into Psychological Therapies and Relationship Counselling.	S8	LEAP families receive the additional specialist support they need.	M8	LEAP parents have improved mental health and LEAP families experience reduced family conflict.		

Domain 3: Strengthening families' knowledge, skills and behaviours



	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
O1	Baby Steps service provides expectant parents with nine group sessions and two home visits.	S1	Parents feel understood and supported in creating emotionally stable and responsive environments for their children.	M1	Parents understand the importance of early childhood and the protective nature of consistent relationships.		
O2	PAIRS service provides parent-infant psychotherapy, Circle of Security Parenting, and Together Time interventions.	S2	Parents/caregivers are open to exploring their relationship with their child.	M2	Parents have better knowledge of and apply positive, sensitive and responsive parenting.		
O3	Empowering Parents, Empowering Communities (EPEC) delivers the 'Baby and Us' and 'Being a Parent' services.	S3	Parents feel groups are inclusive and represent their needs.	M3	A community of parents share parenting strategies, support one another and make connections with different people in their local community.		
O4	Breastfeeding Peer Support Service provides one-to-one infant feeding support to all LEAP women in the perinatal period and beyond.	S4	Parents and practitioners know about breastfeeding support available and how to access and signpost it.	M4	All LEAP women breastfeed until introducing solids.		Parents have improved parenting knowledge, create better home learning environments, and access employment and/or benefit entitlements.
O5	Family Nutrition (HENRY) service supports delivery of the suite of Diet and Nutrition services that are part of Lambeth's Better Start initiative.	S5	A supportive environment and non-judgmental listening where parents feel safe, valued, and understood.	M5	Parents/caregivers have knowledge and understanding of how they can provide a healthy start and support their children's development and feel that they have the skills and confidence to do so.		
O6	Doorstep Library service provides weekly visits and book lending service to families and monthly training sessions for all new volunteers.	S6	Parents attend, engage with and rate sessions positively.	M6	Parents see the value of reading as part of home learning environment, understand 'how to' read/ share stories with young children, and read more with their children.		
O7	REAL service delivers 'Sharing REAL' and 'Babies Next Steps' services up to eight times a year.	S7	Parents sign up for courses and attend all programme sessions.	M7	Parents have increased knowledge and skills in how best to support their child's communication, language, literacy, and personal, social, and emotional development.		

Domain 4: Improving child and family spaces



	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
O1	LEAP delivers £4.3 million capital programme in 11 projects across target wards.	S1	Extensive improvements made to four LEAP children's centres, Loughborough Community Centre and one o'clock clubs.	M1	More safe and accessible early years provision and community spaces.		
O2	Natural Thinkers run 'stay and play sessions' for families at children centres and community settings.	S2	Parents /caregivers have opportunities to get involved with Natural Thinkers activities.	M2	Increased parental knowledge of the importance of outdoor play to their children's development.		
O3	Natural Thinkers run community engagement events and training LEAP FEWs to facilitate Natural Thinkers activities within community groups..	S3	Increased practitioner confidence in facilitating outdoor activities with families.	M3	Families are aware of and explore the outdoor spaces available to them.		
O4	Natural Thinkers provide one day and two half day sessions workforce training.	S4	Practitioners see the delivery of training as good/excellent, and rate it as accessible and informative.	M4	Practitioners create opportunities for outdoor experiences and promote and support parental involvement in natural settings.		More safe and accessible early years provision and community spaces.
O5	Natural Thinkers provide network meetings where practitioners come together to share practice ideas and learn new skills.	S5	Practitioners engage with and value network meetings.	M5	Practitioners make a commitment to incorporating the outdoors into their everyday work.		
O6	HLP offer community gardening and physical activities.	S6	Parents have access to healthy food choices and knowledge, green spaces and physical activity that is affordable or free.	M6	Families increase their use of green and open spaces in their local area.		
O7	HLP coproduce new workshops and ideas, getting members to lead activities and share their skills.	S7	Families are actively involved in co-production, development and improvement of local child and family provision and spaces.	M7	Community centres and children's centres have improved outdoor child-friendly green spaces including growing facilities.		

Domain 5: Developing community capacity connections and positive narratives



	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
O1	LEAP-funded universal access community activities in every ward.	S1	Parents and children across target wards attend community activities.	M1	Increased trust and engagement between families, communities and local services.		
O2	Natural Thinkers run sessions at children's centres and community settings, where families can engage in outdoor activities that use nature as a resource.	S2	Families have the tools / resources to take part in outdoor play.	M2	Increased opportunities for children to interact with other children and with adults.		
O3	Making it REAL conduct home visits with targeted children and literacy events with a wider group of children from early years settings.	S3	Parents and families develop confidence and knowledge and do more to support their children's early learning and development at home.	M3	Increased understanding of why early childhood matters amongst families, their support networks, and the wider community.		
O4	Deliver 'Sharing REAL' and 'Babies Next Steps' services.	S4	Parents sign up for courses and attend all service sessions.	M4	Parents create improved home learning environments and engage in more learning activities with children.		Families are connected to each other, their communities, and family services; and they are empowered to promote inclusion and challenge racism.
O5	HLP coproduces new workshops, getting members to lead activities and share skills.	S5	Families are actively involved in coproduction, development and improvement of local provision.	M5	Families have expanded their community networks by making friends with other parents and becoming aware of community organisations.		
O6	Baby Steps supports expectant parents, with a focus on helping parents to build support networks and to access wider support.	S6	Parents feel more confident and more aware of wider support opportunities.	M6	Families are connected with and support each other through improved social support, awareness of local resources and access to other services.		
O7	EPEC run peer led groups designed to improve parenting, child development and family outcomes.	S7	Parents feel groups are inclusive and represent their needs.	M7	Parents feel empowered as individuals and as a community, developing community capacity.		
O8	The FNP service delivers up to 64 home visits of 60-90 minutes for clients pregnant with their first child and living in Lambeth.	S8	Young mothers set realistic goals, break them down into small, achievable steps, and gain a sense of self-efficacy.	M8	Young parents develop positive links with other family members and community resources.		
O9	Parent Champions deliver parent-led groups.	S9	Parents/caregivers feel listened to, supported and empowered.	M9	Families more actively involved in and engaged with their local community.		
O10	Parent Champion Befrienders are matched with and support local parents at risk of isolation.	S10	Families experience welcoming, diverse, inclusive spaces and relationships within the early years' community.	M10	Families experience welcoming, diverse, inclusive spaces and relationships within the early years' community.		

Domain 6: Improving workforce skills and early years services



	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
O1	PAIRS provides training in understanding the mental health needs of infants and young children to fellow practitioners in social care, early years, health and education.	S1	Practitioners in social care, early years, health and education access good quality training, consultation and supervision.	M1	Increased recognition and identification, within the workforce and wider service network, of infant mental health needs.		
O2	SaLT Evelina service provides universal and targeted services to support the families of children 0-3-years-old (and beyond) in Lambeth.	S2	Increased parental awareness of SaLT support and access available if concerned about SLC development.	M2	Parents/caregivers confidently using PCI strategies that support their child's language development.		
O3	SaLT Evelina service provides training for health and early years practitioners (childcare and preschool provision).	S3	Increased practitioner understanding of SLC development.	M3	Practitioners confidently and accurately using strategies and tools to support and identify SLCN in settings.		
O4	Oral Health Service partners with dental practices within LEAP wards and surrounding boundaries by offering accredited training, resources and ongoing support.	S4	Early years practitioners are confident in the ability and knowledge of the training session provider.	M4	Early-years practitioners' have increased knowledge, skills and resource to support young children's oral health.		Improved services are inclusive and approachable, with a workforce better able to address speech and language, mental health, weight issues, and support families experiencing racism and injustice.
O5	Housing and Early Years Workforce Development Coordinator develops and delivers a programme of workforce development for Lambeth's early years workforce in relation to housing advice.	S5	Managers and practitioners recognize the need for the early years workforce to be able to identify housing and related needs and provide initial advice.	M5	Early years practitioners are better equipped to provide an effective initial response to housing and related needs, through advice, advocacy signposting or referrals.		
O6	REAL provides training for teachers and practitioners in home visiting and use of the ORIM framework to support early language and literacy. academic year.	S6	Teachers and practitioners sustain involvement in the service.	M6	Increased teachers' and practitioners' knowledge and confidence in home visiting families to support early language and literacy.		
O7	REAL supports practitioners deliver their targeted projects through 'network meetings' to share knowledge and provide additional training opportunities.	S7	Practitioners involved attend and value network meetings.	M7	Teachers and practitioners hand over knowledge and support confidence in parents and families.		

Domain 7: Promoting collective action and system change



	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
O1	LEAP jointly funds a Housing and Early Years Workforce Development Coordinator (WDC) post.	S1	Postholder in place.	M1	WDC provides advice, signposting and a hub of resources for Lambeth practitioners.		
O2	Develop programme of workforce development for Lambeth's early years workforce in relation to housing advice, including signposting to housing agencies where appropriate.	S2	Lambeth early years workforce access good quality training in relation to housing advice.	M2	Managers and practitioners recognize the need for the early years workforce to be able to identify housing and related needs and provide initial advice.		
O3	WDC continually assesses workforce needs; maps, monitors and promotes local provision relevant to supporting pregnant women and families with young children around their housing options and related issues.	S3	Practitioners are better equipped to provide an effective initial response (advice, signposting or referrals) when housing and related needs may be impacting on pregnancy or early childhood development.	M3	Managers and practitioners identify opportunities for joint working with agencies that address housing and related needs, in order to provide a more immediate, holistic and seamless service for families.		
O4	Establish Partnership Board and contribute to Lambeth Children's Alliance.	S4	Providers engage with LEAP stakeholder events.	M4	Shared vision and joint working across early years service providers.		Collective action and system change across early years provision in LEAP areas.
O5	Invest in comprehensive local evaluation with independent and in-house evaluation specialists.	S5	Lambeth senior leaders engage with knowledge exchange events and materials.	M5	Evidence-based policy and decision making.		
O6	Develop multiple system change projects.	S6	Tools developed by LEAP are rolled out by professionals across Lambeth.	M6	Improved local system of childcare provision.		
O7	Develop DIP and establish with Lambeth's Azure cloud system.	S7	DIP links person level data across all services and with local administrative datasets.	M7	Services have a good understanding of family journeys through the local early years system.		

Domain 8: Effective outreach and engagement across all target groups



	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
O1	HLP works alongside the community to increase access to green spaces and physical activity, widen access to affordable healthy food, provide fruit and vegetable bags and increase knowledge and confidence around cooking healthy food.	S1	Parents feel supported.	M1	Families actively involved in coproduction, development and improvement of local child and family provision and spaces, and there is increased trust and engagement between families/communities and local services.		
O2	LEAP funds two nurse posts focused on expanding FNP so that all eligible young parents in the LEAP wards can access it.	S2	Target groups engage with FNP and actively participate in making decisions.	M2	More families, and particularly disadvantaged families, have sustained engagement with local early years services (both LEAP and non-LEAP statutory, voluntary and community services).		Provision in LEAP areas characterized by effective outreach and engagement across all target groups. Improved early child health and development in LEAP wards.
O3	WDC continually assesses workforce needs; maps, monitors and promotes local provision relevant to supporting pregnant women and families with young children around their housing options and related issues.	S3	Practitioners are better equipped to provide an effective initial response (advice, signposting or referrals) when housing and related needs may be impacting on pregnancy or early childhood development.	M3	Managers and practitioners identify opportunities for joint working with agencies that address housing and related needs, in order to provide a more immediate, holistic and seamless service for families.		
O4	Parents/caregivers provide families with timely information from a trusted source about relevant early years services and activities.	S4	Families have increased knowledge of local services and support available.	M4	More families, and particularly disadvantaged families, have sustained engagement with local early years' services.		



Section 3 Services

A.1: Doorstep Library



What is the service?

Doorstep Library volunteers visit families once a week during term time to read and share stories with children and their siblings. Families can take part in a reading session or lend and swap books from the convenience of their home.

Who is eligible?

- Children aged 0–3–years–old and their siblings.
- Parents or caregivers of children aged 0–3–years–old.

	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
1. Delivery	O1 Practitioners deliver a home-based reading service that provides a weekly home-based reading service* for LEAP families.	S1	Families sign-up, stay engaged, and rate the service positively.	M1	Parents have the knowledge, confidence, and motivation to read regularly to, and with, their child.		
2. Training and CPD	O2 Provide training, supervision, and resources and equipment (books, stools, backpacks, tablets) for volunteers.	S2	Volunteers attend training, rate it positively and receive the equipment and resources.	M2	Volunteers have the skills, confidence, resources and equipment they need to deliver the programme successfully.		Parents provide improved Home Learning Environments*** and children are better prepared for school****
3. Engagement	O3 Practitioners recruit families with children aged 0–3–years–old through door-to-door engagement and work with partners.	S3	The service reaches their target population** and supports them to stay engaged.	M3	Parents from the service's target population have the knowledge, confidence, and motivation to read regularly with their child.		
4. Stakeholders	O4 Develop relationships with other local providers and stakeholders.	S4	Families are signposted to services (two – three times a term or tailored).	M4	Families access signposted services/activities.		
5. Ongoing Support	O5 Provide ongoing support to staff and volunteers via mentoring, additional training and supervision.	S5	Volunteers received support, and rate it positively.	M5	Staff and volunteers feel supported to deliver the programme successfully.		

* Practitioners deliver a home-based reading service that provides either: a) weekly visits and book lending to participating families on the Loughborough or Tulse Hill Estates or b) weekly online reading sessions with LEAP families

** For Doorstep Library, our target population is families with children aged 0–3–years–old living on the Loughborough and Tulse Hill Estates with priority given to families who are struggling to create good home learning environments.

*** a) More frequent and varied verbal exchanges between families and children; b) More access to books, book sharing and reading aloud; c) Incorporating reading, literacy and other learning activities into daily routines; and d) Increased planning and engaging children in learning activities in and outside the home.

**** a) Age-appropriate vocabulary comprehension and b) Improved listening and attention skills.

A.2: Natural Thinkers



What is the service?

Natural Thinkers offers training to early years practitioners so they can provide high quality outdoor learning for children. The programme focuses on developing children’s wellbeing, involvement, and communication and language development. Through the programme practitioners build their knowledge and understanding to work with parents, demonstrating the importance of connecting children to nature and supporting them with practical ideas to engage their children when they are outdoors.

Who is eligible?

- Children aged 0-3-years-old.
- Early years childcare settings and practitioners.

	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
1. Delivery	O1 Run Natural Thinkers Stay and Play sessions.	S1	Families attend Natural Thinkers and rate them positively.	M1	Parents have increased knowledge and confidence to help children learn in the outdoors.		
2. Training and CPD	O2 Provide training* and resources to practitioners in early years settings.	S2	Practitioners engage with the training, and rate this positively.	M2	Early years practitioners have increased knowledge about the benefits of outdoor learning and increased confidence to run effective outdoor activities**.	Settings provide high-quality outdoor activities as part of their everyday working, parents help children to learn in the outdoors, and participating children demonstrate increased levels of wellbeing and involvement.	
3. Engagement	O3 Engage families on a universal basis whilst aiming to achieve the most difference for children from lower socio-economic families and from BAME backgrounds.	S3	Families engaged with the service include those living in deprived neighbourhoods and from BAME backgrounds .	M3	Children are encouraged to play outdoors.		
4. Stakeholders	O4 Agree key 'Natural Thinkers' messages to be reinforced by other services.	S4	Other services reinforce key 'Natural Thinkers' messages as part of their delivery.	M4	Participants from other services hear and respond positively to these key messages.		
5. Ongoing Support	O5 Provide ongoing support to settings though accreditation and network meetings.	S5	Practitioners engage with the support, and rate this positively.	M5	Early years practitioners cultivate a growing staff commitment to children’s learning in nature.		

* Visit settings, explain accreditation, explain what is expected of settings around a Development Plan, agree start-up grant.

** a) Create opportunities for outdoor learning experiences and promote and support parental involvement in natural thinkers settings, b) Recognise when children make progress in their learning, c) Interact with parents and children, d) Model using the outdoors.

A.3: Making it REAL



What is the service?

Making it REAL trains practitioners to provide advice and guidance to parents on how to support their child’s literacy at home. This service includes home visiting and working with parents directly.

Who is eligible?

- Children aged 0–3–years–old.
- Early years childcare settings and practitioners.
- Parents or caregivers of children aged 0–3–years–old.

	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
1. Delivery	O1	Oversee the delivery of Making It REAL to over 100 LEAP families with young children each year.	S1	Families sign-up, complete, and positively rate the service.	M1	Parents have the knowledge and confidence, and the motivation, to support children’s early learning in the home.	
2. Training and CPD	O2	Support over 20 local childcare settings and children’s centres (through training and network meetings) to deliver Making It REAL each year.	S2	Practitioners within settings engage with the training and find this useful.	M2	Practitioners within settings feel confident and competent to support children’s early language and literacy.	Practitioners are able to better support children’s early language development, parents provide improved home learning environments, and children achieve stronger early language and literacy outcomes.
3. Engagement	O3	Support settings to select families with the most to benefit from Making It REAL.	S3	Our target population** engages with and completes the service.	M3	Parents in our target population have increased knowledge, confidence and motivation to support their child’s early learning.	
4. Stakeholders	O4	Agree key ‘Making It REAL’ messages to be reinforced by other services.	S4	Other services reinforce key ‘Making It REAL’ messages as part of their delivery.	M4	Participants from other services hear and respond positively to key ‘Making It REAL’ messages.	
5. Ongoing Support	O5	Establish processes to ensure Making It REAL families are referred into Sharing REAL.	S5	Families referred into Sharing REAL.	M5	Families accessing Sharing REAL.	

** For Making It REAL, our target population comprises children in settings who would benefit most from the service including those living in deprived neighbourhoods and those from BAME backgrounds.

A.4: Sharing REAL with Parents



What is the service?

Sharing REAL works with parents to teach them ways of supporting young children’s engagement with books, early writing, songs and rhymes and how to make use of all the print around them in their home, in the street, and in the shops. The training comprises four two-hour sessions.

Who is eligible?

Parents or caregivers of children aged 0–3-years-old.

	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
1. Delivery	O1	S1	Parents attend the courses, complete them*, and rate them highly.	M1	Parents have increased knowledge, confidence, and motivation, to provide an improved home learning environment for their child.		
2. Training and CPD	O2	S2	Better Start Workers engage with the support and rate it positively.	M2	Better Start Workers feel confident and competent to deliver Sharing REAL.		Parents provide an improved Home Learning Environment*** for their child and sustain these changes over the longer-term.
3. Engagement	O3	S3	The service reaches our target population** and supports them to complete the course.	M3	Parents from our target population feel more confident about supporting their child's early learning.		
4. Stakeholders	O4	S4	Other services reinforce key 'Sharing REAL' messages to be reinforced by other services.	M4	Participants from other services hear and respond positively to key 'Sharing REAL' messages.		
5. Ongoing Support	O5	S5	Sharing REAL families are referred (where appropriate) into free childcare places, LEAP Community Activities and SaLT, (including Chattertime)	M5	Sharing REAL families access free childcare places and LEAP Community Activities, SaLT and Chattertime.		

*Access the required dosage that we believe is necessary for positive outcomes to occur.

** For Sharing REAL, our target population is LEAP families with a child aged 18-months to 3-years-old with priority given to families living in disadvantaged neighbourhoods, families from BAME backgrounds, and the families of children where there is an existing concern about speech, communication and language development.

***a) More frequent and varied verbal exchanges between families and children, b) More access to books, book-sharing and reading aloud, c) Incorporating reading, literacy, and other learning activities into daily routines, d) Increased planning and engaging children in learning activities in and outside the home.

A.5: Supporting Babies' Next Steps



What is the service?

Supporting Babies' Next Steps works with parents to teach them ways of supporting their baby's communication and language, social, emotional, and physical development. The training comprises four sessions.

Who is eligible?

Parents or caregivers of babies aged 0-1-year-old.

	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
1. Delivery	O1 Deliver three groups (each with eight to ten parents) of Supporting Babies' Next Steps each year.	S1	Parents sign-up, complete, and positively rate the service.	M1	Parents have increased knowledge and confidence, and increased motivation, to support their child's learning in the home.		
2. Training and CPD	O2	S2		M2		Parents provide a good Early Home Learning Environment for their child.	
3. Engagement	O3 Work with partners to ensure our target population is well represented amongst service participants.	S3	Our target population engage with, complete, and positively rate the service.	M3	Our target population has increased knowledge and confidence, and increased motivation, to support their child's early learning in the home.		
4. Stakeholders	O4 Agree key messages on the Early Home Learning Environment to be reinforced by other services.	S4	Key messages are reinforced by other services as part of their delivery.	M4	Participants from other services hear and respond positively to these key messages.		
5. Ongoing Support	O5 Establish processes to secure follow-on referrals into Chattertime.	S5	Families are referred into Chattertime.	M5	Referred families access Chattertime.		

A.6: Speech and Language Therapy (SaLT) – Evelina Award



What is the service?

The SaLT – Evelina Award is a programme of training which aims to enhance early years practitioners' interactions with children. The training is delivered by speech and language therapists and comprises a baseline audit, training, coaching, and reviews. Through the training practitioners will have improved understanding of speech and language communication (SLC) development, how to support children's SLC, how to share this knowledge with parents and when/how to make SaLT referrals. Upon successful completion of the training, settings receive the Evelina Communication Friendly Environment Foundation Award.

Who is eligible?

Early years childcare settings and practitioners.

	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
1. Delivery	O1 Action plans* are agreed for children at risk of speech and language delay (with both child-level and parent-level activities.)	S1	Settings support parents to engage with the action plans and the related support and rate this support positively.	M1	Parents have the knowledge, confidence and motivation to support their child's speech and language development.		
2. Training and CPD	O2 Speech and Language Therapists provide a programme of training and coaching for practitioners* to identify children with SLCN using the WellComm tool and to support them better through Action Plans.	S2	Practitioners within the settings engage with the training, rate this positively, and use the screening tool (WellComm) and evidence-based strategies for supporting children.	M2	Practitioners have the knowledge and confidence to identify and support children with speech and language difficulties.		Practitioners in EY settings are better able to support SLC development and identify and support children with SLC needs; parents are supported to provide improved home learning environments for their child; targeted children improve their communication and language skills.
3. Engagement	O3 Promote and offer the Evelina Award programme to all local early years setting.	S3	Settings engage with the offer and work towards either the Foundation or Enhanced Evelina Award for Communication Friendly Environments	M3	Settings sustain engagement and maintain achievement of the Foundation or Enhanced Evelina Award for Communication Friendly Environment		
4. Stakeholders	O4 Agree key 'Evelina Award' messages to be reinforced by other services.	S4	Other services reinforce key 'Evelina Award' messages as part of their delivery.	M4	Participants from other services hear and respond positively to key 'Evelina Award' messages.		
5. Ongoing Support	O5 Establish processes to secure follow-on referrals to Making It REAL and Sharing REAL.	S5	Families referred to Making It REAL and Sharing REAL.	M5	Families access Making It REAL and Sharing REAL.		

*Action plans are the result of screening of children in settings by staff with the WellComm Screening tool and devised for children scoring Amber or Red on the WellComm screening tool used as output in Evelina Award programme

A.7: Speech and Language Therapy (SaLT) – Chattertime



What is the service?

SaLT - Chattertime are group sessions run by a speech and language therapist supported by a setting practitioner who has completed the Evelina Award training for parents. The aim of the sessions is to help parents identify when a SaLT referral is required. A speech and language therapist will offer parents top tips on how to support their child's early speech and language development and offer advice on any concerns. Children are given the opportunity to practice their communication with other children through playing, singing, rhymes and stories.

Who is eligible?

- Children aged 0-3-years-old.
- Parents or caregivers of children aged 0-3-years-old.
- Early years childcare setting practitioners who have completed the Evelina Award training.

	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
1. Delivery	O1 Speech and Language Therapists run weekly* Chattertime sessions for babies/children and their parents.	S1	Families attend Chattertime sessions regularly (if needed) and rate them positively.	M1	Parents have the knowledge, confidence, and motivation to support their child's early learning.		
2. Training and CPD	O2 Provide initial training to Better Start workers/EYE practitioners who are involved in Chattertime delivery.	S2	Better Start workers/EYE practitioners engage with the training and ongoing coaching (through co-running the Chattertime) and rate this positively.	M2	Better Start workers/EYE practitioners feel confident and competent to effectively support Chattertime delivery; sustain skills and knowledge to transfer to other children's centre activities and family engagement.		Parents provide an improved Home Learning Environment**** for their child/children and children get access to specialist support where needed.
3. Engagement	O3 Work with local services** to identify most accessible locations for Chattertime and recruit local children and families with the most to benefit.	S3	Our target population*** engages with the service.	M3	Parents from our target population have the knowledge, confidence, and motivation to support their child's early learning.		
4. Stakeholders	O4 Agree key 'Chattertime' messages to be reinforced by other services.	S4	Other services reinforce key 'Chattertime' messages' as part of their delivery.	M4	Participants from other services hear and respond positively to key 'Chattertime' messages.		
5. Ongoing Support	O5 Establish processes to secure follow-on referrals to Sharing REAL and free early childcare places.	S5	Families are referred to Sharing REAL and free childcare places.	M5	Families access Sharing REAL and free early childcare places.		

* This entails one weekly Baby Chattertime session (for babies under 15-months and their parents) and one weekly Chattertime session (for children aged 15-months to 3-years-old and their parents).

** This includes working with Better Start workers, health visitors, local service leads, and community managers and Parent Champions and inclusion agents.

***For Chattertime, our target population is families with children aged 0-3-years-old who are living in the LEAP area including those living in disadvantaged neighbourhoods, and those from BAME backgrounds.

**** a) More frequent and varied verbal exchanges between families and children, b) More access to books, book sharing and reading aloud, c) Incorporating reading, literacy, and other learning activities into daily routines, d) Increased planning and engaging children in learning activities in and outside the home.

~ families who may only need reassurance may only need to attend one-two times and have strategies modelled, other families we would be looking to see more attendance to support their skill development

~~ initial training would coincide with the Evelina audit baseline Identifying SLCN in the EYFS training with then ongoing coaching and relevant training offered as part of the joint delivery of the Chattertime with the SLT team

B.2: Community Engagement Team



What is the service?

LEAP Community Engagement creates opportunities for parents to get to know one another and to find out about services; strengthens parent voice and capacity; and equips community organisations with the skills and confidence they need to deliver high-quality early years activities.

Who is eligible?

TBC

	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
1. Delivery	O1 Informed and timely engagement offers across all four wards*	S1	New and repeat LEAP families engage	M1	New and repeat LEAP families positively value (rate) engagement offers		Parents connecting to each other, their community and early years services Developing community capacity, connections and positive narratives Established model of best practise partnership working across organisations Continuation of practice which supports LEAP target group
2. CoCreate Fund	O2 Provide seed funding opportunities to external organisations and groups	S2	Fund recipients collaborate with service users/local community members to plan and deliver initiatives that engage/support the LEAP target group	M2	Changes effected Fund recipients have enhanced understanding of working within the LEAP target group and local community. Positive impact changes to the LEAP target group observed		
3. Engagement	O3 Implement and oversee strategies to ensure LEAP's target populations** are reached by our community activities.	S3	LEAP's target populations are engaging with community activities.	M3	LEAP's target populations are benefiting from community activities.		
4. Stakeholders	O4 Identification of legacy partnership working opportunities and spaces across LEAP wards. Support cohorts of parents to have a stronger voice in the running of the local early years system.	S4	The delivery of shared partnership engagement activities across wards which align to LEAP values and best practice. Parents engage with the support and training that LEAP provides.	M4	Confidence in LEAP activities and services. Organisations can identify how LEAP works to support their own agendas. Parents have increased skills, knowledge and confidence to help improve the local early years system.		
5. Ongoing Support	O5 Community Connector role who is working to connect people from community events into services	S5	Families have basic information about what they can access	M5	People engage with LEAP and other local – level services		

**Parents living in deprived neighbourhoods and from BAME backgrounds

B.7: Parent Champions (Volunteers)



What is the service?

Parent Champions is a volunteer outreach service. Parents support other parents by sharing their knowledge and experiences. Training is offered for volunteers to develop their knowledge of LEAP, A Better Start Aims, early years services and communication skills. Parent Champions assist parents and caregivers to connect with relevant family services.

Who is eligible?

Parents or caregivers of children aged 0-3-years-old living in one of LEAP's four wards.

	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
1. Delivery	O1 Provide and coordinate a range of Parent Champion volunteering opportunities.	S1	Parent champions are involved in the designated volunteering opportunities.	M1	Parent champions have increased transferable skills after taking part in volunteering activities		
2. Training and CPD	O2 Provide volunteer training.	S2	Volunteers start, complete, and positively rate training.	M2	Parent champions have increased confidence and knowledge about early years services.		Parent Champions have the skills and confidence needed to progress in pathways to employment. And have the assets and skills needed to reach and support their peers to engage with early years' services
3. Engagement	O3 Deliver targeted volunteer recruitment.	S3	Our target population*** is well-represented amongst volunteers.	M3	Our target population support early years' activities as part of their volunteering role and model this engagement to their peers.		
4. Stakeholders	O4 Agree key 'Parent Champion' messages to be reinforced by other services.	S4	Other services reinforce key 'Parent Champion' messages.	M4	Information about early years' services is widely disseminated to LEAP's target population.		
5. Ongoing Support	O5 Provide additional training for volunteer roles where families are directly referred into services by Parent Champions.	S5	Parents access additional training on Befriending, Digital Champions and facilitating parent groups.	M5	Families are supported to engage with early years' services by bridging services offered by Parent Champions.		

* Parent Champions are involved in supporting early years' groups and also running parent-led groups.

**See separate Befriending Theory of Change

***Parents living in deprived neighbourhoods and from BAME backgrounds

B.8: Parent Champions (Befriending)



What is the service?

TBC

Who is eligible?

TBC

	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
1. Delivery	O1 Provide befriending support through matching targeted* LEAP parents with a Befriender.	S1	Parent and Befriender have regular contact.	M1	Parents matched with a befriender have increased knowledge about local early years services and more confidence to access these services.		
2. Training and CPD	O2 Provide training and development for Befrienders.	S2	Parents attend and complete the Befriending training, and rate this positively.	M2	Befrienders feel confident and competent to deliver the service.		Targeted families have sustained engagement with local early years services and parental wellbeing is increased.
3. Engagement	O3 Work with partners to identify parents/caregivers in need of Parent Champion befriending.	S3	Identified parents/caregivers are recruited and matched appropriately with a Parent Champion Befriender.	M3	Identified parents/caregivers have access to a non-judgemental and relatable peer relationship.		
4. Stakeholders	O4 Agree key 'Isolation' messages for parents to be reinforced by other services.	S4	Other services reinforce key 'Isolation' messages as part of their delivery.	M4	Participants from other services hear and respond positively to these messages.		
5. Ongoing Support	O5 Establish processes to secure referrals to Children's Centres, LEAP Community Activities and Healthy Living Platform.	S5	Refer parents to Children's Centres, LEAP Community Activities, and the Healthy Living Platform.	M5	Parents access Children's Centres, LEAP Community Activities, and the Healthy Living Platform.		

*Parents who are isolated (without a network, not connected to services, ESOL, mental health issues)

B.9: Parent Representatives



What is the service?

Each LEAP ward has two or three elected 'Parent Representatives' who attend quarterly Early Years Parent Forums and LEAP Partnership Boards.

Who is eligible?

Parents or caregivers of children aged 0-3-years-old.

	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
1. Delivery	O1	S1		M1			
2. Training and CPD	O2	S2		M2			
3. Access	O3	S3		M3			
4. Stakeholders	O4	S4		M4			
5. Support	O5	S5		M5			

Notes here

C.1: Breastfeeding Peer Support (BFPS)



What is the service?

Breastfeeding Peer Support offers practical, emotional and informational support about breastfeeding for local parents. The service is led by peer supporters or co-facilitated with health visitors. The service works alongside referral-only breastfeeding support groups led by specialist midwives and health visitors. LEAP families are offered an enhanced service of one-to-one contact antenatally and postnatally via phone support and home visits.

Who is eligible?

Parents or caregivers of babies.

	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
1. Delivery	O1 Provide one-to-one and group-based sessions* to support women's breastfeeding initiation and sustainment.	S1	Women engage with and positively rate the service.	M1	Women have increased knowledge and confidence about the benefits of breastfeeding and increased confidence about how to breastfeed.		
2. Training and CPD	O2 Provide training for the Breastfeeding Helpers and Supporters.	S2	Breastfeeding Helpers and Supporters engage with the training, and find this useful.	M2	Breastfeeding Helpers and Supporters feel confident and competent to deliver the service.		Women are more likely to initiate and sustain breastfeeding.
3. Engagement	O3 Work with partners to ensure our target population** is well-represented amongst service participants.	S3	Women from our target population** engage with the service and rate the service positively.	M3	Women from our target population have improved knowledge and confidence.		
4. Stakeholders	O4 Agree key 'Breastfeeding' messages to be reinforced by other services.	S4	Other services reinforce key 'Breastfeeding' messages as part of their delivery.	M4	Participants from other services hear and respond positively to key 'Breastfeeding' messages.		
5. Ongoing Support	O5 Establish processes to ensure follow-on referrals into Healthy Living Platform.	S5	Families are referred into Healthy Living Platform.	M5	Families access the Healthy Living Platform.		

* In person and via the telephone/online.

** Those living in deprived neighbourhoods, and those from BAME backgrounds.

C.2: Community Activity and Nutrition (CAN)



What is the service?

Community Activity and Nutrition (CAN) supports pregnant women to change their behaviour in relation to dietary intake and physical activity. The eight-week service is delivered through three appointments delivered by health trainers and supervised by a midwife.

Who is eligible?

Pregnant women with a BMI of 25 and over.

	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
1. Delivery	O1 Deliver the CAN Programme* to women with a BMI of 25 or over each year.	S1	Women sign-up, complete, and positively rate the CAN programme.	M1	CAN women have increased knowledge, confidence and motivation to adopt a healthy diet and lifestyle.		
2. Training and CPD	O2 Provide training for the Health Improvement Facilitators and lead midwives.	S2	Health Improvement Facilitators engage with the training and find this useful.	M2	Health improvement facilitators feel confident and competent to deliver the sessions with CAN women.		Women have an improved diet and lifestyle during pregnancy and beyond (including subsequent pregnancies) and babies are born with a healthy birth weight.
3. Engagement	O3 Send recruitment letters to every eligible woman and follow up with targeted phone calls/texts over a three-week period.	S3	Women from our target population** access and complete CAN.	M3	Women from our target population have increased knowledge, confidence and motivation to adopt a healthy diet and lifestyle.		
4. Stakeholders	O4 Agree key 'CAN' messages for parents, to be reinforced by other services.	S4	Other services reinforce key 'CAN' messages as part of their delivery.	M4	Participants from other services hear and respond positively to the key 'CAN' messages.		
5. Ongoing Support	O5 Establish processes to secure follow-on referrals into Breastfeeding Peer Support and HLP.	S5	Families are referred into Breastfeeding Peer Support and HLP.	M5	Families access Breastfeeding Peer Support and HLP.		

* Core components of the CAN Programme comprise an initial appointment with a Project Midwife, eight sessions with a Health Improvement Facilitator, and then further appointments (both antenatally and postnatally) with the Project Midwife.

**Women from deprived neighbourhoods and women from BAME backgrounds.

C.4: Healthy Living Platform (HLP)



What is the service?

HLP is a membership based service for local families. HLP promotes a healthy lifestyle and aims to provide an environment that encourages families to eat healthily, socialise, and be physically active. Community led activities include cook and eat sessions, food growing, and physical activities like Zumba, yoga, and dancing.

Who is eligible?

Families based in the four LEAP wards.

	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
1. Delivery	O1 Family activities including communal cooking, gardening, and physical activity classes.	S1	Families engage with the activities and find them enjoyable and useful.	M1	Families have increased knowledge and confidence about healthy diet and lifestyle.		
2. Training and CPD	O2 Provide Food Ambassador training.	S2	Food ambassadors access training and gain the skills to manage their own community food projects.	M2	Food ambassador led projects support the local community to access healthy, affordable food.		Parents feel supported by and connected to their local communities, enabling them to provide a healthy diet and lifestyle for their family.
3. Engagement	O3 Provide a universal service which welcomes all families, including those from diverse backgrounds*.	S3	Families, including those from diverse backgrounds, are well represented within the service.	M3	More families, including those from diverse backgrounds, have sustained engagement with the service and feel more connected to the community.		
4. Stakeholders	O4 Develop community food hubs in partnership with community organisations, children centres and other networks	S4	Community food hubs collaborate with HLP and co-produce family activities.	M4	Community organisations are supported to create and sustain community food hubs which benefit LEAP families, leaving a legacy beyond the length of the programme.		
5. Ongoing Support	O5 Provide support for people and local groups to set up sessions and services in their communities.	S5	Local people and community groups take a role in running sessions.	M5	Families and community groups develop and run healthy living sessions.		

* Those living in deprived neighbourhoods, and those from BAME backgrounds.

C.5; C.6; C.7*: Oral Health Service



What is the service?

The Oral Health Service promotes good dental practice for early years children. Key oral health messages are promoted through community activities and workshops. Supervised toothbrushing (STB) is supported in PVI childcare settings. The Oral Health Service also works with dentists to support them to be child friendly and to promote early dental attendance and uptake of fluoride varnish.

Who is eligible?

- PVI childcare settings and their practitioners.
- Dentists who are interested in promoting child-friendly practices.

	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
1. Delivery	O1 Disseminate oral health packs to LEAP families with a child aged one and under via other LEAP services.	S1	Parents receive and respond positively to the oral health packs.	M1	Parents have increased knowledge and confidence about how best to support young children's oral health.		
2. Training and CPD	O2 Engage and provide STB training in early years childcare settings**.	S2	Settings engage with the programme and trial STB.	M2	STB is an established daily routine within the childcare setting.		Improve oral health related quality of life for all children.
3. Engagement	O3 Support and attend local community events to promote the importance of good oral health for young children.	S3	Families engage with and respond positively to evidence based information shared.	M3	Parents have increased knowledge and confidence about how best to support young children's oral health.		
4. Stakeholders	O4 Work in partnership with local NHS dental practices.	S4	Strong partnership with local NHS dental practices.	M4	Dentists support more young children aged 0-3-years-old.		
5. Ongoing Support	O5 Provide training and support to local early years practitioners and local workforce.	S5	Early years practitioners and local workforce engage with the training and support offered.	M5	Early years practitioners and local workforce have increased knowledge and confidence about how best to support young children's oral health.		

*C.5: Supervised Tooth Brushing, C.6: Oral Health Packs, C.7: Dentist Engagement

** Oversee Supervised Toothbrushing in at least 20 LEAP early years childcare settings per year.

C.8: Pregnancy Information for Nutrition and Exercise (PINE)



What is the service?

PINE supports women to change their behaviour in relation to dietary intake and physical activity through a one-off workshop.

Who is eligible?

Pregnant women with a healthy weight (BMI 18.5–24.9).

	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
1. Delivery	O1 Deliver PINE workshops.	S1	Women attend workshops and rate them positively.	M1	Women have increased knowledge and confidence to maintain a healthy lifestyle during their pregnancy.		Women have and apply knowledge of recommended guidance on healthy nutrition and activity during pregnancy.
2. Training and CPD	O2 Training provided for the delivery team.	S2	Team attended the training and rate positively.	M2	Team feel confident and competent to deliver the service.		
3. Engagement	O3 PINE workshops are offered to all eligible women, and follow-up phone calls made to target women.	S3	Target women* are accessing the service and rating it positively	M3	Target women successfully apply workshop principles		
4. Stakeholders	O4 Agree key 'PINE' messages to be reinforced by other services.	S4	Other services reinforce key 'PINE' messages as part of their delivery.	M4	Participants from other services hear and respond positively to these key messages.		
5. Ongoing Support	O5 Establish process for sharing information about wider services with PINE attendees.	S5	PINE attendees receive information about wider services.	M5	PINE attendees engage with wider services.		

* Women with a BMI between 18.5-24.9 who live in the LEAP wards.

D.1: Caseload Midwifery



What is the service?

Caseload Midwifery offers continuity of care from a named midwife and team throughout pregnancy, labour, birth, and the postnatal period.

Who is eligible?

Pregnant women living in one of LEAP's four wards.

	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
1. Delivery	O1 Deliver continuity of midwifery care to approximately 210 LEAP women per year.	S1	Women accept the service and positively rate it	M1	Women form trusting relationships with their midwife receive personalised care and support plan.		
2. Training and CPD	O2 Provide support and training opportunities to the LEAP team of Caseload Midwives.	S2	The delivery team engage with the training and support on offer and find this useful.	M2	Midwives feel confident to deliver the service and have increased job satisfaction.		Women have improved obstetric outcomes**, improved wellbeing (TBC), and are more likely to initiate and sustain breastfeeding.
3. Engagement	O3 Proactively recruit women with additional vulnerabilities to the service.	S3	Women with additional vulnerabilities are fully engaged with the service.	M3	Women from our target population are benefitting from the service.		
4. Stakeholders	O4 Work closely with broader services to provide holistic care for women.	S4	The delivery team engage with GPs, mental health specialists, and other stakeholders.	M4	Midwives spend more time liaising with relevant agencies and follow up actions related to a women's care.		
5. Ongoing Support	O5 Provide supervision and support to the LEAP team of Caseload Midwives.	S5	The delivery team engage with the supervision and support on offer and find this useful.	M5	Midwives feel supported to deliver the service and have better relationships with colleagues.		

**Obstetric outcomes include mode of birth, reduction in preterm delivery and stillbirth

E.1: Baby Steps



What is the service?

Baby Steps is a nine-week perinatal educational service designed to prepare parents-to-be for having a baby, becoming parents and giving their baby the best possible start. The service includes workshops on how to care for their new baby, reducing the stress that often occurs for parents of a newborn and improving the lives of their babies.

Who is eligible?

Expectant parents living in one of LEAP's four wards.

	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
1. Delivery	O1 Run the full Baby Steps Service* for approximately 180 LEAP women and their partners per year.	S1	Parents attend, complete, and positively rate the service.	M1	Parents have increased knowledge and confidence about positive parenting, mental health and wellbeing, and parental relationships.		
2. Training and CPD	O2 Provide training for the delivery team.	S2	The delivery team engage with the training they receive and find this useful.	M2	Practitioners within the delivery team feel confident and competent to deliver the service.		Children benefit from positive, sensitive and responsive parenting; parents have improved mental health and wellbeing (with more referrals to specialist services); and parents feel more connected to other parents.
3. Engagement	O3 Recruit women through phone calls and text messages** and target those with vulnerabilities***	S3	Women from LEAP target groups**** are well represented amongst service participants.	M3	Parents from LEAP target groups are benefiting from the service.		
4. Stakeholders	O4 Agree key 'Baby Steps' messages to be reinforced by other local services.	S4	Other services incorporate key 'Baby Steps' messages into their delivery.	M4	Participants from other services hear and respond positively to key 'Baby Steps' messages.		
5. Ongoing Support	O5 Establish approach to secure follow-on referrals into Breastfeeding Peer Support, EPEC BaU, and PAIRS Together Time.	S5	Number of referrals made into Breastfeeding Peer Support, EPEC BaU, and PAIRS Together Time.	M5	Number of families accessing support through Breastfeeding Peer Support, EPEC BaU, and PAIRS Together Time.		

* A home visit, six antenatal group sessions, followed by a postnatal home visit, and three further group sessions. Groups have no more than ten women (and partners/fathers) whose babies are all due within four weeks of each other.

** A maximum of three phone calls/messages are sent before it is presumed women are not interested.

*** Vulnerabilities include those with mental health problems, those who have had some involvement with social care, and those who delivery staff identify as in need.

**** LEAP targets those living in the most deprived neighbourhoods and those from BAME backgrounds.

E.2: Domestic Abuse – Enhanced Casework (Gaia)



What is the service?

Domestic Abuse – Enhanced Casework (Gaia) offers support for LEAP parents at risk of, or experiencing, domestic abuse. Caseworkers can work with parents at an earlier stage, more holistically and for longer than traditional domestic abuse services. The service also supports the local workforce to be aware of, and responsive to, domestic abuse.

Who is eligible?

LEAP parents at risk of, or experiencing, domestic abuse.

	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
1. Delivery	O1 Provide support for parents or expectant parents who are at the early stages of experiencing or recognising domestic abuse.	S1	Parents or expectant parents engage with the support and rate it positively.	M1	Parents or expectant parents feel safer and have increased awareness of the dynamics of abuse and what a healthy relationship looks like.		
2. Training and CPD	O2 Facilitate the Gaia team's participation in training opportunities.	S2	Practitioners access development activities and rate them positively.	M2	Practitioners feel confident and competent to deliver the service.		Parents and expectant parents have improved wellbeing, feel they are safe and moving in a positive direction, and there is a better environment for their children to grow and thrive.
3. Engagement	O3 Target groups who are less likely to access traditional domestic abuse services.	S3	Parents from LEAP target groups* engage with the support and rate it positively.	M3	Families from LEAP target groups feel safer and have increased awareness of the dynamics of abuse and what a healthy relationship looks like.		
4. Stakeholders	O4 Agree key 'Gaia' messages to be reinforced by other services.	S4	Other services reinforce key 'Gaia' messages in their delivery.	M4	Participants from other services hear and respond positively to key 'Gaia' messages.		
5. Ongoing Support	O5 Establish processes for follow-on referrals to children's centres (to ensure families are registered) LEAP Community Activities and free early childcare places?	S5	Parents are referred to children's centres, LEAP Community Activities, and free early childcare places.	M5	Parents access children's centres, LEAP Community Activities, and free early childcare places.		

* LEAP target groups include those living in disadvantaged neighbourhoods and those from BAME backgrounds.

E.3: Empowering Parents, Empowering Communities (EPEC)



What is the service?

EPEC offers parenting courses delivered by trained peer facilitators. During the eight-week course participants learn strategies for improving the quality of their interactions with their child; increasing their efficacy and confidence in parenting; and bringing up confident, happy and co-operative children.

Who is eligible?

- Baby and Us: parents or caregivers of babies under 1-year-old.
- Being a Parent: parents or caregivers of children aged between 2- and 11-years-old.

	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
1. Delivery	O1 Run six courses* designed to improve parenting, child development and family outcomes	S1	Parents attend and complete the groups, and rate them positively.	M1	Parents feel knowledgeable and confident to apply positive parenting		
2. Training and CPD	O2 Deliver regular supervision and workshops to delivery parents.	S2	Parents access development opportunities and rate them positively	M2	Parents feel confident and competent to delivery the course		Parents apply positive parenting. Parents feel connected to other parents. Parents have improved wellbeing.
3. Engagement	O3 Work with partners to ensure our target population** is well represented amongst service participants.	S3	LEAP target population engages with the service and rates the service positively.	M3	Parents from LEAP's target population feel confident and competent to apply positive parenting		
4. Stakeholders	O4 Equip other services to reinforce key 'EPEC' messages	S4	Other services reinforce key 'EPEC' messages as part of their delivery.	M4	Participants from other services hear and respond positively to key 'EPEC' messages.		
5. Ongoing Support	O5 Establish processes for sharing information with EPEC participants about Chattertime and LEAP Community Activities.	S5	EPEC participants receive information about Chattertime and LEAP Community Activities.	M5	EPEC participants engage with Chattertime and LEAP Community Activities.		

* Baby and Us and Being a Parent courses (numbers TBC) in the LEAP area.

** Families living in deprived neighbourhoods and/or from BAME backgrounds.

E.4: Family Nurse Partnership (FNP)



What is the service?

FNP is a preventative, evidence-based voluntary home visiting programme. Specially trained nurses offer intensive and structured home visiting from early pregnancy until the child is 2-years-old. The Family Nurse builds a supportive relationship with the family, using in-depth methods, to work with young parents on attachment, relationships and psychological preparation for parenthood, aiming to help them overcome adverse life experiences and support both the parent and child reaching their potential.

Who is eligible?

First time young parents living in Lambeth.

	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
1. Delivery	O1 Deliver FNP so that all eligible young parents in the LEAP wards can access it.	S1	Parents engage with, complete, and positively rate the service.	M1	TBC		
2. Training and CPD	O2 Provide training and clinical guidance to family nurses and nurse supervisors.	S2	Family Nurses engage with the training and clinical guidance available and find this useful.	M2	Family Nurses feel confident and competent to deliver the service.		Parents apply positive parenting. Children are healthy and developing well.
3. Engagement	O3 Ensure FNP is accessible and inclusive to all local groups.	S3	Families from LEAP's target population* engage with, complete, and positively rate the service.	M3	TBC		
4. Stakeholders	O4 Agree key 'FNP' messages to be reinforced by other services.	S4	Other services reinforce key 'FNP' messages as part of their delivery.	M4	Participants from other services hear and respond positively to key 'FNP' messages.		
5. Ongoing Support	O5 Establish processes to ensure children access free childcare places.	S5	Children are helped to access free childcare places.	M5	Children are accessing their free childcare places.		

*LEAP target groups are those living in the most deprived neighbourhoods and those from BAME backgrounds.

E.5: Housing and Early Years Workforce Development Coordinator



What is the service?

TBC

Who is eligible?

TBC

	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
1. Delivery	O1	S1	M1				
2. Training and CPD	O2	S2	M2				
3. Engagement	O3	S3	M3				
4. Stakeholders	O4	S4	M4				
5. Ongoing Support	O5	S5	M5				

Notes here

E.6: PAIRS – One to One



What is the service?

PAIRS one-to-one service supports parents to enjoy their relationship with their infant. The service provides a non-judgmental, reflective space for parents to observe and think about their babies. PAIRS practitioners provide one-to-one psychotherapeutic support to strengthen the relationship between parents and their infant, support the infant's development and wellbeing, and supporting parental confidence to manage the stress of being a parent.

Who is eligible?

Parents or caregivers of babies aged

	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
1. Delivery	O1 Provide one-to-one support to approximately 45 families per year where there is a significant risk of poor parent-child attachment.	S1	Families engage with, complete, and positively rate the service.	M1	Parents have increased knowledge in positive, sensitive, and responsive parenting and increased confidence in their ability to apply this knowledge.		
2. Training and CPD	O2 Parent-infant psychotherapists delivering the service are provided with CPD opportunities	S2	Parent-infant psychotherapists engage with CPD opportunities and rate them positively	M2	Parent-infant Psychotherapists feel confident and competent in delivering the intervention.		Parents apply positive, sensitive, and responsive parenting, and children establish a secure attachment with their caregiver.
3. Engagement	O3 Ensure one-to-one support is accessible and inclusive.	S3	Eligible parents from LEAP's target population* engage with, complete, and positively rate the service.	M3	Eligible parents from LEAP's target group have increased knowledge and confidence in applying positive, sensitive, and responsive parenting.		
4. Stakeholders	O4 Establish key 'PAIRS' messages for parents that can be reinforced by other services.	S4	Other services reinforce key 'PAIRS' messages as part of their delivery.	M4	Participants from other services hear and respond positively to key 'PAIRS' messages.		
5. Ongoing Support	O5 Establish processes to check parents are registered with children's centres and informed about childcare places	S5	Parents are encouraged to engage with children's centres and take up free childcare places	M5	Families access children's centres and free childcare places		

*LEAP target groups are those living in the most deprived neighbourhoods and those from BAME backgrounds

E.7: PAIRS – Circle of Security Parenting



What is the service?

Circle of Security Parenting is an eight-week group programme that aims to: support parent's understanding of, and response to, their child's emotional needs; support parent's relationship with their child; enhance the development of children's self-esteem and improve parent's confidence in their parenting abilities.

Who is eligible?

Parents or caregivers of children aged between 4-months and 5-years-old.

	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
1. Delivery	O1	Oversee or run at least six Circle of Security Groups* in the LEAP area per year.	S1	Parents engage with, complete, and positively rate the service.	M1	Parents have increased knowledge and confidence with regard to positive, sensitive, and responsive parenting.	
2. Training and CPD	O2	Provide regular supervision and workshops to practitioners delivering the service.	S2	Practitioners engage with CPD opportunities and rate them positively.	M2	Practitioners feel confident and competent in delivering the service.	Parents apply positive, sensitive, and responsive parenting, and children establish a secure attachment with their caregiver.
3. Engagement	O3	Work with partners to ensure our target population** is well represented amongst service participants.	S3	LEAP target population engages with, completes, and positively rates the service.	M3	LEAP target population has increased knowledge and confidence with regard to positive, sensitive and responsive parenting.	
4. Stakeholders	O4	COSP facilitators embed key COSP and PAIRS messages into wider work and share with colleagues.	S4	Children's centre workforce is equipped to share key COSP and PAIRS messages with families.	M4	Families are exposed to and respond positively to key COSP and PAIRS messages whilst accessing children's centre provision.	
5. Ongoing Support	O5	Establish processes to secure follow-on referrals into Sharing REAL.	S5	Families are referred to Sharing REAL.	M5	Families are accessing Sharing REAL.	

* Groups ideally include between six to eight families.

** Families living in deprived neighbourhoods and parents from BAME backgrounds.

E.8: PAIRS – Together Time



What is the service?

PAIRS – Together Time is a six-week group programme that aims to enhance parent’s capacity to observe and understand their baby’s cues, mentalize their baby’s experience and reflect on their relationship with their baby. Together Time is delivered by trained family professionals using a technique called ‘Watch, Wait and Wonder’ to support parent / infant interaction.

Who is eligible?

Parents or caregivers of babies aged between 3- and 8-months-old.

	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
1. Delivery	O1 Run at least three Together Time Groups* in the LEAP area each year and develop a plan for how to increase this number.	S1	Parents engage with, complete, and positively rate the service.	M1	Parents have increased knowledge in positive, sensitive, and responsive parenting and increased confidence about how to apply this knowledge.		
2. Training and CPD	O2 Provide training to the delivery team and to Better Start workers involved in delivery.	S2	The delivery team and involved Better Start workers engage with the supervision and support available and rate it positively.	M2	The delivery team and involved Better Start workers feel confident and competent in delivering the service.		Parents apply positive, sensitive, and responsive parenting, and children establish a secure attachment with their primary caregiver.
3. Engagement	O3 Ensure Together Time is accessible and inclusive.	S3	Parents from LEAP’s target groups** are accessing the service and rating it positively	M3	Parents from LEAP target groups have increased knowledge and confidence in positive, sensitive, and responsive parenting.		
4. Stakeholders	O4 Agree key ‘PAIRS’ messages for other services reinforce.	S4	Other services reinforce key ‘PAIRS’ messages as part of their delivery.	M4	Participants from other services hear and respond positively to key ‘PAIRS’ messages.		
5. Ongoing Support	O5 Establish processes to secure follow-on referrals into Baby Chattertime.	S5	Referrals made into Baby Chattertime.	M5	Families accessing Baby Chattertime.		

*Groups should comprise between six and ten parents.

**Our target population is comprised of those where there is a risk of poor parent-child attachment including families living in deprived neighbourhoods and parents from BAME backgrounds.

E.9: PAIRS – Workforce Work



What is the service?

PAIRS clinicians support the local early years workforce to respond to infant mental health (IMH) needs and support parent-infant relationships by providing:

- reflective supervision and workshops for individuals and groups delivering LEAP interventions
- training for key workforce groups supporting LEAP families
- consultation on cases to the wider Lambeth workforce
- ad hoc activities to share PAIRS expertise and insights beyond LEAP
- development of practice and processes within Lambeth CAMHS.

Who is eligible?

Local early years workforce.

	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
1. Delivery	O1 Provide a programme of support to upskill the local workforce in relation to IMH* and parent-infant relationships.	S1	Professionals and volunteers engage with, complete, and positively rate support from PAIRS.	M1	Professionals and volunteers feel increased confidence and knowledge around IMH and parent-infant relationships, and are equipped to support and signpost/refer families as appropriate within their roles.		
2. Training and CPD	O2 Provide PAIRS practitioners with CPD opportunities.	S2	PAIRS practitioners engage with CPD opportunities and rate them positively.	M2	PAIRS practitioners feel confident and competent in delivering workforce support.		Improved workforce skills to identify and support families where there are issues with IMH and parent-infant relationships. Support uptake of interventions addressing IMH and parent-infant relationships.
3. Engagement	O3 Target key workforce groups* with interventions that support their practice and capability to signpost/refer families to appropriate services**.	S3	Key workforce groups engage with, complete, and positively rate support from PAIRS.	M3	Key workforce groups feel increased confidence and knowledge around IMH and parent-infant relationships, and are equipped to support and signpost/refer families as appropriate within their roles.		
4. Stakeholders	O4 Agree key PAIRS messages to be reinforced by other services, including around signposting/referring families.	S4	Other services reinforce key PAIRS messages as part of their delivery and make appropriate referrals.	M4	Participants in other services hear and respond positively to key PAIRS messages and can access appropriate interventions.		
5. Ongoing Support	O5 Coordinate local strategic group to ensure the needs of the infant are met in a multidisciplinary working environment.	S5	System leaders engage with steering group and take action within their areas of influence.	M5	System leaders facilitate improvements within their areas of influence, and support the workforce to engage with PAIRS.		

* Key workforce groups include:

- Those whose roles make them particularly well-placed to identify families' needs and refer to PAIRS One-to-One (e.g. in children's social care, Early Help, health visiting)
- Those whose roles benefit from ongoing individual/group supervision from PAIRS (e.g. Baby Steps, FNP)
- Those facilitating psychodynamic group interventions developed or first implemented locally by PAIRS (Circle of Security Parenting, Together Time)
- Those who build relationships with LEAP families, particularly families living in deprived neighbourhoods and from BAME backgrounds, and who need a basic awareness of PAIRS messages and interventions (e.g. Parent Champions).

** PAIRS One-to-One, PAIRS Together Time or Circle of Security Parenting

F.1: Workforce Development Strategy



What is the service?

LEAP's workforce development strategy aims to support the knowledge and skills of the local early years workforce, as well as support collaborative working with the goal of bringing about a shared vision and common framework for working with families. The offer includes training programmes, workshops, seminars and events covering topics across LEAP's key outcome areas for early child development.

Who is eligible?

Local early years workforce.

	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
1. Delivery	O1	S1		M1			
2. Training and CPD	O2	S2		M2			
3. Engagement	O3	S3		M3			
4. Stakeholders	O4	S4		M4			
5. Ongoing Support	O5	S5		M5			

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F.2: Knowledge Makes Change (KMC) Seminar Series



What is the service?

The KMC seminars are free online events. They are open to everyone, but generally aimed at professionals. Expert guest speakers present key, national, early childhood research and practice developments. Attendees will also learn how LEAP is supporting local children and families.

Who is eligible?

Local early years workforce.

	Interventions (outputs)		Short-term outcomes		Medium-term outcomes		Long-term outcome
1. Delivery	O1	S1		M1			
2. Training and CPD	O2	S2		M2			
3. Engagement	O3	S3		M3			
4. Stakeholders	O4	S4		M4			
5. Ongoing Support	O5	S5		M5			

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Section 4

Additional projects

Additional LEAP projects



The following projects have been carried out by LEAP in addition to the service delivery and development outlined earlier in this report. By carrying out these projects, we hope to significantly strengthen the infrastructure of our local early years system.

LEAP projects	Description	Intended outcome
Capital Works	LEAP invested approximately £4.3 million in 11 local early years capital projects. The funding was used to improve outdoor early years spaces, build new facilities for multi-agency working and health consultations focused on young children and their families, create Parent Rooms in children’s centres, enhance children’s centre signage and entrances to make them more welcoming, and renovate and refurbish estate-based early years spaces.	Improve local early years facilities and early years outdoor spaces.
Data Integration Platform	LEAP created an Early Years DIP that links data across datasets, services and organisations. The Platform is intended to help systems leaders and practitioners to better understand the journey that families take through the local early years system.	Improve collective action and strengthen the local system.
Parent Voice	LEAP has established several new channels for local parent voice. For example, each year we recruit a cohort of Parent Representatives to bring the views of LEAP parents to the LEAP Board. We also hold quarterly Early Years Parent Forums in each LEAP ward, and we run regular People in the Lead Days. At People in the Lead Days, parents are given the opportunity to feedback on any of our work, from communications materials to service delivery to community activities.	Improve early years services and collective action.

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Additional LEAP projects



LEAP projects	Description	Intended outcome
Practitioner-led projects to improve the local system	<p>LEAP created a small amount of ring-fenced time each week for representatives from the key early years professional groupings (midwives, health visitors, GPs) to work together on system improvement projects. Two resulting pieces of work are of particular note. First, GP Connect worked with local GP practices to better embed regular shared meetings between GPs and health visitors. This has led to a new local emphasis on ensuring these meetings happen, and new administrative capacity to support this.</p> <p>Second, LEAP midwives designed the Maternity Vulnerability Assessment Tool (MATVAT) so that midwives could better identify and respond to social vulnerability. The MATVAT is now being piloted by three NHS trusts to assess feasibility and we have formed a MATVAT Working Group that includes the Royal College of Midwives.</p>	Improve collective action and system change.
Unified Branding	LEAP aimed to introduce greater consistency into local early years communications through our website, events calendar, and poster generator tool. This is especially important given that many different partners are involved in providing early years support and services which can create the impression of a fragmented system.	Improve collective action.
WellComm Communication and Language Screening Tool	LEAP introduced the WellComm Communication and Language Screening Tool into the local early years system. In doing this, we wanted to create a common approach (and language) to identifying young children's communication and language needs across early years settings, children's centres, and health visitor caseloads.	Improve local early years services and create the conditions for stronger collective action.
Workforce Forums	LEAP has created regular opportunities for local early years practitioners to come together across traditional service silos. We hold LEAP Provider Events three times per year, Early Years Setting Events twice per year, and Workforce Webinars several times per year.	Improve early years services and collective action.



Section 5

Services and projects by domain

LEAP services and projects by domain



LEAP services and projects	Domain 1 Early child health and development	Domain 2 Parental health and wellbeing	Domain 3 Parental knowledge, skills and behaviours	Domain 4 Early years facilities and outdoor spaces	Domain 5 Community capacity	Domain 6 Practitioner skills and early years services	Domain 7 Collective action and systems change
Baby Steps		✓	✓				
Befriending Support		✓					
Breastfeeding Peer Support		✓	✓				
Capital Works				✓			
Caseload Midwifery	✓	✓					
Community Activity and Nutrition	✓	✓					
Community CoCreate Fund					✓	✓	
Community Engagement Activities					✓		
Data Integration Platform							✓
Domestic Abuse - Enhanced Casework (Gaia)		✓					
Doorstep Library	✓		✓				
Empowering Parents, Empowering Communities		✓	✓				
Family Nurse Partnership	✓	✓	✓				
Healthy Living Platform			✓				
Making it REAL	✓		✓			✓	

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LEAP services and projects by domain



LEAP services and projects	Domain 1 Early child health and development	Domain 2 Parental health and wellbeing	Domain 3 Parental knowledge, skills and behaviours	Domain 4 Early years facilities and outdoor spaces	Domain 5 Community capacity	Domain 6 Practitioner skills and early years services	Domain 7 Collective action and systems change
Natural Thinkers	✓		✓	✓		✓	
Oral Health	✓		✓			✓	
PAIRS Circle of Security			✓			✓	
PAIRS One-to-One			✓				
PAIRS Together Time			✓				
Parent Champions					✓		
Parent Voice Structures					✓		✓
Practitioner-led projects to improve systems						✓	✓
Regular Practitioner Events						✓	✓
SaLT - Chattertime	✓		✓				
SaLT - Evelina Award	✓		✓			✓	
Sharing REAL			✓			✓	
Supporting Babies' Next Steps			✓				
Unified Branding							✓
Wellcomm Speech and Language Screening Tool						✓	✓