

# *The Second Half of LEAP*







Summer 2020

Dear Partnership Board Member

**A unique point in time**

*As you know, this is a unique point in time characterised by a global health pandemic, considerable economic uncertainty, and high-profile racial injustices. The effects are already being felt widely across local communities and the longer-term consequences are likely to be far-reaching.*

*For the early years sector, this point in time also represents the half-way point of the National Lottery's A Better Start initiative. This bold and ambitious initiative is our opportunity - LEAP and the other ABS sites - to give children a better start and to show that coordinated and high-quality early childhood services help improve lives.*

*In many respects, the current unprecedented and changing context increases the risk of poorer local outcomes. Lockdown, combined with disruptions to or the withdrawal of core services, may widen inequalities in children's development. Anticipated rises in unemployment will likely lead to stressed families and stretched family budgets. Covid-19 could mean some parents are reluctant to participate in support groups or attend settings.*

*Yet the areas in families' lives and professional practice where LEAP must make a difference remain broadly the same, even if needs are sometimes more acute and delivery less straightforward. Some children need direct additional support to help them develop well. Parents want assistance with how to parent in a positive and responsive manner and how to build an active home learning environment for their children, and help with securing a decent family income. Parents also want support to help them manage their own mental and physical health, and to help them maintain strong couple relationships. Practitioners need the best skills so they can make every contact with a child or family count and supportive cross-institutional structures so they can work as one integrated system.*

*LEAP is well-placed to offset the risk of poorer local outcomes, and to continue making the necessary differences for children, families, and professionals, due to our strongly established local partnership. Each family, service, organisation, and community group, has a vital contribution to make, but is only through our collective impact that we can create an area where every young child gets a better start, irrespective of social background, race, or family circumstances.*

**A framework for the delivery of LEAP's second half**

*As a partnership committed to achieving collective impact, and charged with overseeing a complex programme that has clear desired impacts and a finite budget and timespan, we need an agreed framework that steers LEAP's second half. Given the unprecedented*

external environment associated with Covid-19, we also need this framework to ensure delivery can flex with the changing context. Thank you for all your inputs over the last several months on LEAP's theory of change refresh and operational planning. This report, the result of all our efforts, gives us the necessary framework.

The report has two sections. Section One presents the latest working version of LEAP's Programme Theory of Change. This has been informed by a specially commissioned review of the latest evidence on tackling early years inequalities and by a series of workshops with practitioners and parents. It sets out LEAP's high-level plan for helping to bring about improvements in child and family outcomes across the four LEAP wards. Section Two outlines how in operational terms we intend to put this plan into practice in the form of a roadmap to the end of the programme. This includes difficult decisions regarding the right operational strategy for this stage of the programme, LEAP's optimum shape, and which services to fund and for how long.

**Primary research to map new needs**

Alongside this report, we are also part-way through a large primary research project to explore how families with young children are feeling at the moment and whether the lockdown and its aftermath have created new needs that require additional services or new types of support. We will also be exploring how local practitioners are responding to this new environment and where they believe there are now unmet needs. We will bring this primary research and some recommendations to a future Partnership Board for your consideration.

We would very much welcome your feedback on the content of this report. Please do send responses to [LEAPAdmin@ncb.org.uk](mailto:LEAPAdmin@ncb.org.uk) by cop on Friday 7 August.

Thanks again for your engagement and support.



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## PROGRAMME ABBREVIATIONS

<b>ABS</b>	A Better Start (the National Lottery initiative of which LEAP is a part).
<b>APP</b>	Academic Practice Partnership (LEAP will recruit an Academic Practice Partnership in Autumn 2020 to help guide our independent evaluations).
<b>ANA</b>	Area Needs Assessment (an approach to assessing the types of need that exist in an area and the prevalence of those needs).
<b>CLD</b>	Communication and Language Development (one of LEAP's three child-level strands).
<b>D&amp;N</b>	Diet and Nutrition (one of LEAP's three child-level strands).
<b>LEAP</b>	Lambeth Early Action Partnership
<b>PVIs</b>	Private, Voluntary, and Independent childcare settings.
<b>SED</b>	Social and Emotional Development (one of LEAP's three child-level strands).

## SERVICE ABBREVIATIONS

<b>BFPSS</b>	Breastfeeding Peer Support Service
<b>CAN</b>	Community Activity and Nutrition
<b>EPEC</b>	Empowering Parents Empowering Communities
<b>FNP</b>	Family Nurse Partnership
<b>FPM</b>	Family Partnership Model
<b>IAPT</b>	Improving Access to Psychological Therapies
<b>LIHL</b>	LEAP into Healthy Living
<b>OHSS</b>	Overcrowded Housing Support Service
<b>PAIRS</b>	Parent and Infant Relationship Service
<b>PAIRS CoS</b>	Parent and Infant Relationship Service - Circle of Security
<b>PAIRS TT</b>	Parent and Infant Relationship Service - Together Time
<b>PINE</b>	Pregnancy Information on Nutrition and Exercise
<b>REAL</b>	Raising Early Achievement in Literacy
<b>STB</b>	Supervised Tooth-Brushing

## GLOSSARY OF TERMS

<b>Domains</b>	Domains are the different layers that together shape early childhood development. For instance, LEAP's domains incorporate the Child; Parenting and core life skills; Parents' Health and Well-Being; Improving Local Provision; Spaces for Children; Developing Community Resources; and Policy, Practice, and Systems Change.
<b>Outcome Areas</b>	These are the areas within each domain where LEAP will focus its efforts during the second half of the programme. According to our Evidence Review (July 2020), they are the areas likely to contribute most to positive child development. These Outcome Areas sit above our actual outcomes (see below).
<b>Outcomes</b>	These are the shorter-term outcomes within our Areas of focus that are the immediate goals of LEAP's work
<b>Intermediate Outcomes</b>	This refers to outcomes that precede the realisation of outcomes within LEAP's Areas of focus. For example, before a parent can provide an active home learning environment, they may need to develop earlier skills around confidence and self-esteem.
<b>Impacts</b>	These are the sustained effects that LEAP contributes to bringing about.
<b>Shared Measurement System</b>	This is our approach to better understanding how LEAP works collectively. It is a shared set of metrics that represent the overall changes we are aiming to help bring about, and it clearly shows how individual services contribute to the bigger picture.
<b>Strands</b>	Strands represent a useful (but not the only) organising framework for LEAP's work. Typically, we have placed services within three categories: Diet & Nutrition, Social & Emotional Development, and Communication & Language Development.
<b>Portfolio Principles</b>	These are the principles that we expect the LEAP portfolio to embody. They represent the key components of the community-level early childhood system that we have built. The Portfolio Principles are listed in full at Appendix 2 on p.76.
<b>Principles of Good Exits</b>	During the second half of the programme, LEAP services will have different end-dates. We have established Principles of Good Exits to ensure every service has an opportunity to learn from their LEAP delivery and to disseminate this learning into the broader system.



## CHARTS AND TABLES

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# EXECUTIVE SUMMARY

## EXECUTIVE SUMMARY

As a partnership overseeing a complex programme with clear desired impacts and a finite budget and timespan, we need an agreed framework that steers LEAP's second half. Given the unprecedented external environment associated with Covid-19, we also need this framework to ensure delivery can flex with the changing context.

This report gives us the necessary framework. Section One presents the latest working version of LEAP's Programme Theory of Change. This represents LEAP's high-level plan to help bring about improvements in child and family outcomes in our four target wards. Section Two outlines LEAP's roadmap to the end of the programme. This details how - in operational terms - we will put our plan into practice.

### LEAP's Programme Theory of Change

The Programme Theory of Change includes a description of: the context for LEAP; the intended impact for children that all LEAP's work seeks to contribute towards; the different domains that LEAP seeks to influence, and the outcomes we hope to achieve within each domain; and a summary of how LEAP works to achieve these outcomes.

On average, early child development outcomes are worse in areas with high levels of social disadvantage and we know that early outcomes too often predict later outcomes. This problem is reflected in the four Lambeth wards of Coldharbour, Stockwell, Tulse Hill, and Vassall. LEAP believes effective local partnerships that provide joined-up services and that work across the key domains shaping early childhood could help give children in disadvantaged areas a better start.

LEAP is a 'systems change' initiative which means that it seeks to influence a range of different factors that affect children's lives. In practice, this means that the theory of change is divided into seven different but interconnected domains. Below, we list each domain.

**Domain 1:** Improving early child development (diet and nutrition, social and emotional development, communication and language development).

**Domain 2:** Improving parental health and wellbeing - incorporating mental health and wellbeing, physical health and nutrition, couple relationships, and domestic violence.

**Domain 3:** Strengthening parents' knowledge, skills, and behaviours - so we have 'Increased positive, sensitive, and responsive parenting', 'Improved home learning environments', and 'Improved core life skills and behaviours'.

**Domain 4:** Improving child and family spaces - such as nurseries, children's centres, community settings, and outdoor spaces.

**Domain 5:** Developing community capacity and connections by encouraging and supporting families to help themselves and help others.

**Domain 6:** Improving early years services - with highly-skilled practitioners and more and better joint working.

**Domain 7:** Promoting collective action - with a shared vision, integrated planning, and better evidence.

In addition, there is one further 'enabling' domain. This is concerned with how LEAP reaches out to and engages all our target groups. As such, this domain underpins all the other domains.

Over the coming months, LEAP will develop detailed domain-level theories of change and then service-level theories of change that each relate directly to our domains. We will also establish a Shared Measurement system for both the programme overall and individual services.

## **LEAP's Roadmap to the End of the Programme**

Section Two (containing our Operational Plan in the form of a LEAP roadmap) is divided into three parts.

**Part A** establishes LEAP's broad delivery approach for the second half of the programme and introduces the LEAP roadmap. Here, we confirm that the second half of LEAP (2020-2025) will, in some important operational respects, differ markedly from the first half of LEAP (2015-2020).

During 2020-2025, LEAP will focus on especially promising services, place greater emphasis on outcomes and learning, transition (in some cases) to mixed funding models, and enable services to work collectively as a single integrated offer. We will also, for at least some of the period, be adapting to an environment marked by considerable uncertainty due to the effects of Covid-19 which include social distancing requirements and the prospect of further lockdowns.

LEAP's roadmap will capture our complex delivery landscape from now until 2025. It will provide clarity for partners managing and delivering our services, enable us to take account of the programme's overall coherence and interconnections between services, and support detailed discussions with commissioners and strategic leads about LEAP's exit and legacy.

**Part B** focuses specifically on LEAP's method for identifying especially promising services. First, we outline LEAP's decision-making process including who we consulted and when. Second, we set out LEAP's decision-making criteria (i.e. the factors taken into account when making decisions about which services are especially promising).

The criteria used to make decisions are:

1. Evidence - each service's relationship to the wider evidence-base and potential to influence LEAP's domain-level outcomes.
2. Local Needs - each service's fit with local needs.
3. Current Operations – engagement with and feedback to each service.
4. Impact - each service's readiness for impact evaluation and likelihood this evaluation will add to the existing evidence-base.
5. Future - each service's likelihood of future sustainability.
6. Coverage - service-level reach as a proportion of target population.
7. Wider Contribution – the role each service plays in LEAP's wider system.

**Part C** presents LEAP's roadmap to 2025. We start by reporting on the 'Levels of Promise' demonstrated by individual LEAP services according to the criteria outlined in Part B (the full breakdown of service-level scores is available at Appendix 7). Next, we apply these findings in the form of a roadmap.

The roadmap includes a provisional delivery schedule that sets out how long each service will run for and broadly how it will be funded. It describes how individual services relate to LEAP Domains and domain-level Outcome Areas. It has a detailed budget breakdown with provisional year-by-year funding allocations for services. Finally, it provides headline goals customised to each service for the years ahead.

Key points from the roadmap include:

- We confirm that LEAP's portfolio will narrow in Year 6 and then will retain a largely stable portfolio until Year 9. This represents an accommodation between our desire to stretch delivery over more years and our wish to maintain LEAP's purpose as a network of services with adequate breadth and depth to work across children's early lives.
- Overall, we expect a minimum of 15 services (out of 23 services in total) to run until the Year 9 point, with four other services expected to run for a minimum of two further years (to the end of March 2022 or the Year 7 point).
- Sustained delivery into Year 10 will require staffing and delivery funding to be met by partners.
- Each LEAP service will relate to at least one LEAP domain. Within this domain, each service will directly contribute to bringing about positive change in at least one Outcome Area and to at least one Outcome.
- Going forwards, we will want every LEAP service to (1) collate our full minimum dataset (including user, engagement, and outcomes data) on every participant so that we can learn about and track impact and (2) refer or signpost every participating family onto other LEAP services so that LEAP becomes an interconnected service that works with children and families throughout the critical early years of a child's life.

We close by taking stock of the LEAP portfolio as a whole. Specifically, we confirm that LEAP's planned portfolio for the second half of the programme remains largely consistent with our Portfolio Principles (as set out in Appendix 2). Our analysis also shows LEAP's considerable combined reach, but also emphasises the important role of LEAP outreach in ensuring we are reaching and retaining those with the most to gain from services.

# **SECTION ONE**

## **PROGRAMME THEORY OF CHANGE**

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***What is LEAP's high-level plan to help bring about improvements in child and family outcomes in our four target wards?***

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***In this Section, we show LEAP's new Programme-level Theory of Change diagrams and we describe, explain, and elaborate on the key points. The end-result should be a clear understanding for the reader of LEAP's high-level plan to improve local outcomes.***

## Introduction

In this section we introduce a working version of the Programme Level 'Theory of Change' for the Lambeth Early Action Partnership (LEAP). It includes a description of:

- The context for LEAP;
- The intended impact for children that all LEAP's work seeks to contribute towards;
- The different 'domains' that LEAP seeks to influence, and the outcomes we hope to achieve within each domain.

Alongside this summary, LEAP is working with New Philanthropy Capital to prepare more detailed theories of change that describe how we plan to achieve the outcomes within each domain.

The theory of change has been informed by a number of sources:

- A systems mapping exercise;
- A review of the evidence base around LEAP's work;
- Consultation with LEAP staff, and staff in associated organisations, conducted through workshops in April and May 2020;
- Other theory of change work in this area including LEAP service level theories of change, LEAP's previous work on outcomes, and the *A Better Start* theory of change;
- Focus groups with local families;
- Dialogue with the 'core' team at LEAP.

## The context for LEAP

### **Problem statements**

On average, early child development outcomes are worse in areas with high levels of social disadvantage. This problem is reflected in the four Lambeth wards of Coldharbour, Stockwell, Tulse Hill, and Vassall.

In places with deep and concentrated disadvantage, like these wards, local services working in isolation struggle to help children and families realise their potential. We need to test new ways of supporting early childhood in disadvantaged areas.

LEAP believes every young child, irrespective of background or postcode, has a right to the best start in life. We believe effective local partnerships that provide joined-up services and that work across the key domains shaping early childhood could help give children in disadvantaged areas a better start.

### **Scale of the problem**

Lambeth has a high-level of need in terms of deprivation, educational achievement, and health. It's one of the 20% most deprived districts/unitary authorities in England and nearly 1 in 4 children live in low-income families.

Children living in LEAP wards are significantly less likely to achieve at least the expected level of development in the prime areas of learning at the end of Reception, compared with children living in non-LEAP wards. The gap in Early Years Foundation Stage (EYFS) outcomes is especially pronounced for children eligible for the Pupil Premium and children of non-white British backgrounds.

### **Consequences of the problem**

Children who have poor early outcomes are more likely to go on to do less well at school

and are at greater risk of experiencing poorer outcomes as they move into adulthood (education, health, work, wellbeing, crime, substance misuse). Consequently, the cycle of disadvantage continues through generations.

### **Causes of the problem**

The link between family social disadvantage and children's outcomes (and the mechanisms by which one influences the other) is complex with a wide-range of factors at play. For instance, parental education appears to have an important role in the transmission of educational disadvantage through the provision of a stimulating and stretching home learning environment. Low or insecure family income is another key determinant of poor outcomes. It affects children's outcomes through parents' ability to invest in the things that children need to thrive (Family Investment Model). Social disadvantage can be stressful and have a negative impact on parents' mental health, and that in turn can influence interparental relationships, positive parenting and parents' health behaviours (Family Stress Model).

### **Covid-19**

Since March 2020, LEAP has also been operating in an unprecedented external environment due to the effects of Covid-19. Currently, many mainstream and LEAP early years services are being delivered virtually due to the virus and the Government's social distancing requirements. Families have coped with several months of lockdown and now face an anticipated economic recession. The broad areas where LEAP must make a difference to improve early years outcomes remain largely the same, but local needs may be more acute (for example, increased economic hardship) and delivery is less straightforward. As of July 2020, LEAP's immediate delivery environment is therefore one of considerable uncertainty, and therefore plans must contain a degree of flexibility.

### **Who does LEAP target?**

LEAP's ultimate target group is all families of children aged 0-3 years in four connected Lambeth wards (Coldharbour, Stockwell, Tulse Hill, and Vassall). In particular, we focus on children and families who, because of their situation and circumstances, may have additional or greater needs and are at greater risk of poor outcomes.

LEAP services work directly with:

- Pregnant women and their partners;
- Babies and children;
- Parents /carers.

In addition, LEAP also works through the following groups to achieve its aims:

- Community support networks, groups, and leaders - from parents' friends and family through to local community groups;
- Early years professionals and practitioners;
- The wider children's workforce and the institutions they work in;
- Local and national decision-makers.

The more detailed theories of change will describe the characteristics of each group.



## Intended impact of LEAP

Impact is defined as the 'sustained effect that LEAP aims to contribute towards'. It has two elements:

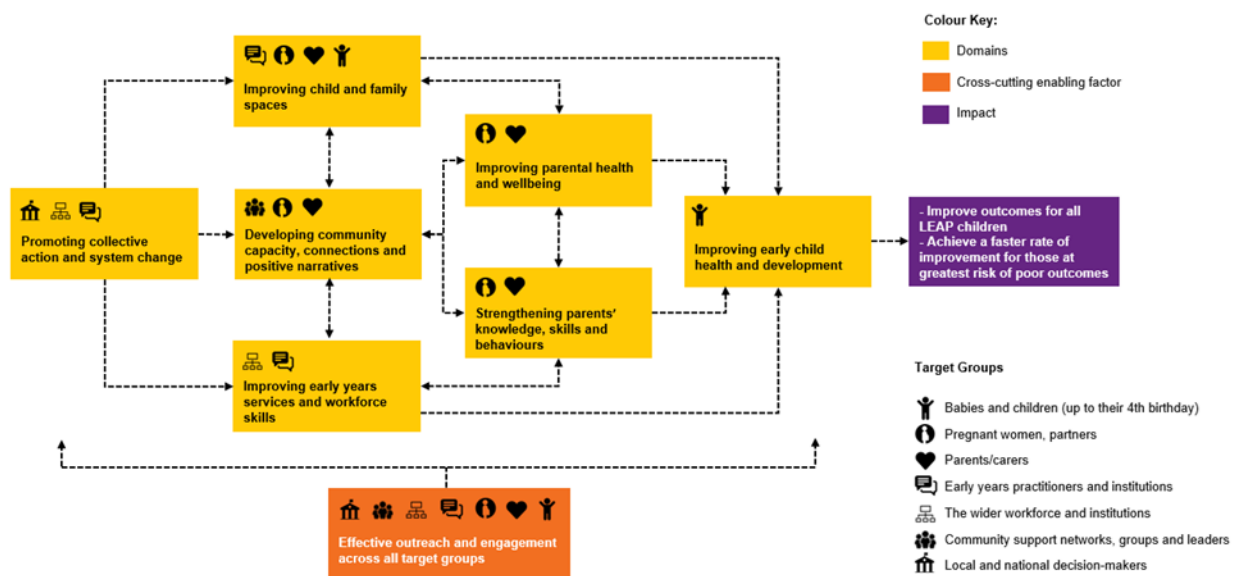
- All children thrive: Improved ECD outcomes for all children.
- A faster rate of improvement in ECD for those at greatest risk of poor outcomes.

ECD outcomes mean all children achieve a good level of development at the end of reception. This is measured through The Early Years Foundation Stage Framework (EYFS) scores (CLD, SED), and the National Child Measurement Programme. Achieving these two impacts will mean that children are 'ready' to start school and better placed to have a positive childhood and to progress well through the school system, ultimately leading to improved life chances.

## Domains and Outcomes

LEAP is a 'systems change' initiative which means that it seeks to influence a range of different factors that affect children's lives and focuses as much as possible on the root causes of problems rather than their symptoms. The theory of change is also informed by Ecological Theory (Bronfenbrenner, 1979; 1986) which posits that there are a range of interrelated influences on the child (for example, family, setting, and community influences). In practice, this means that the theory of change is divided into seven different but interconnected parts that we refer to as 'domains' and one 'enabling' domain that supports all the others. These are summarised in the chart below.

### Lambeth Early Action Partnership: Programme Theory of Change



The chart shows how the eight domains are all orientated towards the impacts listed above in the purple box, and span key child development outcomes, outcomes for parents, outcomes for practitioners, and broader community and system level outcomes (which are described further below). It also summarises how the different domains are interrelated and support each other, with causality / influence often going in both directions.

In the following pages, we describe each domain in turn.

## Domain 1: Improving Early Child Development

The central part of LEAP's theory of change is the changes we want to achieve with children themselves.

The three main categories are widely established and are used in the *A Better Start* theory of change. The evidence suggests that early child development (in the key areas of nutrition, social and emotional development, and communication and language development) can have a significant impact on long-term life chances and outcomes, and is crucial to reducing health inequalities.

Within each category the individual outcomes have been agreed through a process of consulting the literature and consultation with LEAP partners, staff and local families. As far as possible, outcome wording is aligned to work outside LEAP and, similarly, established indicators and methods will be used.

## Domain 2: Improving parental health and well-being

Direct work with parents/carers is a particular focus for LEAP because parenting is known to be the most significant influence on children's development across all three childhood outcome domains above (in Bronfenbrenner's terminology this is a key part of the micro system – the relationship between parents and children).

Section 5.1 of the evidence review summarises the evidence around the significance of **parental mental health and wellbeing** for child outcomes, both during pregnancy and afterwards. For example, if parents are struggling with mental health and stress, there is a risk that they can be distracted, short-tempered or even aggressive towards their child. When this happens, it can generate anxiety and the production of stress chemicals in the child's brain, which can interfere with their development and ability to learn (see page 30).

The importance of **parental physical health and nutrition** partly relates to its known effects on improving mental health and wellbeing. It also relates to pregnant mothers and the risk that maternal diet and consumption of harmful substances poses for foetal development and preterm birth (see literature review section 5.2).

The third outcome area included is around **couple relationships** and domestic violence (the significance of these issues is discussed in section 7 of the evidence review. In summary, a large body of evidence identifies an association between the nature and quality of the parental relationship and child outcomes; persistent, hostile and unresolved conflict can lead to more negative parenting and a less stable home environment. This may result in increased



### Improving early child health and development

#### Improved diet and nutrition

- Fewer children born with low birth-weight
- Fewer children with high or low BMI
- Improved oral health

#### Improved social and emotional development

- Improved emotional regulation
- Reduced emotional vulnerability
- Age-appropriate self-management and self-control
- Increased secure attachment to a trusted caregiver
- Improved mental health and wellbeing

#### Improved communication and language development. Improved:

- Inhibitory control
- Cognitive development
- Intellectual functioning
- Verbal and non-verbal communication skills and an increased vocabulary
- Letter recognition
- Reading achievement / comprehension
- Literacy



### Improving parental health and wellbeing

#### Good mental wellbeing

- Improved mental health and wellbeing
- Parents have increased support from friends & family

#### Good physical health and nutrition

- Improved physical health and nutrition

#### Positive family relationships

- Improved parent couple relationships
- Fewer parents experiencing domestic abuse
- More survivors of domestic abuse access appropriate specialist support

distress for the child. The review also describes how exposure to domestic abuse in pregnancy, infancy and toddlerhood can result in emotional distress for the child and undermine the attachment relationship between child and parent/mother.

*Collectively, the LEAP theory of change argues that improvement in outcomes in this domain will lead to home environments that are safer, calmer and more stable, and will help parents to better engage with the parenting support and services provided by LEAP and others.*

### Domain 3: Strengthening parents' knowledge, skills and behaviours

The next outcome domain also relates to parents and carers but focuses on the development of their parenting skills and behaviours.

The first two outcomes relate to good practice in how parents feed babies and then toddlers. Section 6 of the evidence review discusses the importance of these factors in more detail - in particular, how poor nutrition can lead to cognitive and behavioural issues, as well as affecting the child's general ability to concentrate, engage and take part in activities.

**Positive, sensitive and responsive parenting** refers to the benefit of parents being well attuned to their child; these parents can respond sensitively to their child's needs, pick up on non-verbal cues, interpret their communications and respond appropriately. This is a key outcome for LEAP, both in terms of: a) parental knowledge about what is important; and b) application of positive parenting. Its importance is discussed in more detail in section 2 of the evidence review, in particular how 'secure' attachment provides a "solid base from which to explore the world" and allows early social and emotional learning to take place, and paves the way for infants to develop a sense of self-awareness (page 18). Drawing on our discussions with practitioners, this outcome also covers: improved parental reflective functioning; authoritative parenting (setting and reinforcing healthy / appropriate routines boundaries and behaviours); and creating emotionally stable and responsive environments.

Section 3 of the evidence review describes how positive **home learning environments** have been found to 1) lead to higher academic achievement in the early years and throughout primary school and 2) allows children to benefit more from being at pre-school.

The key features of a positive home learning environment are:

- Frequent and varied verbal exchanges between parents and children, involving a varied vocabulary and adults taking the lead from the child - communicating with them when the child is ready to receive and process that communication;
- Planning and engaging children in learning activities in and outside the home;
- Incorporating reading, literary and other learning activities into daily routines;
- Providing access to books, book sharing and reading aloud.

The final outcomes in this domain relate to parents developing skills that will **support them towards employment or receipt of their benefits entitlements**. This is included in LEAP's theory of change because of the well-established association between parental/family income and child outcomes. For example, analysis of the Millennium Cohort Survey (MCS) indicated that family income is the strongest predictor of children's vocabulary and understanding of



**Strengthening parents' knowledge, skills and behaviours**

**Positive parenting knowledge, skills and behaviours**

- Increased knowledge and application of positive, sensitive and responsive parenting
- More mothers initiating and continuing breastfeeding
- Improved weaning practices, with more parents introducing appropriate food at appropriate times

**Improved home learning environments**

**Core life skills and behaviours**

- Increased employment or developing the skills needed for employment
- Receiving financial entitlements from the benefits system

objects at age three. The same study indicated that parents with financial worries are at risk of being more stressed than parents with a higher income and that economic circumstances are correlated with the development of key social and emotional characteristics in children. Hence, the long-term impact that LEAP aims to contribute to through this outcome are higher income levels amongst targeted families and increased financial security / stability, which the research shows will have an indirect positive effect on the child outcomes described in domain 1.

#### Domain 4: Improving child and family spaces

A key part of LEAP's strategy is improving child and family physical spaces such as nurseries, community centres and outdoor spaces. Deprived wards with high population densities - such as Lambeth - have among the lowest proportion of green spaces (private or public) which reduces the opportunities that children from low-income families have to go outdoors. By improving local facilities, LEAP aims to encourage children and families to engage in more exercise and play activities – which research shows has a positive association with mental and physical health for both children and families.




**Improving child and family spaces**

- More safe and accessible early years provision and community spaces
- Increased use of outdoor space for exercise, play or health reasons

#### Domain 5: Developing community capacity, connections and positive narratives

This part of LEAP's work focuses on encouraging and supporting families to help themselves and others through creating opportunities for families to connect, building motivation and capacity for increased community involvement. Interviews with LEAP Parent Champions gave a sense of how empowered and motivated community members can make a positive difference. Furthermore, section 10.2.3 of the evidence review describes community involvement as essential to the success of system level initiatives and argues that effective place-based approaches “ensured that families are fully involved in the co-design and co-production” – both of the overall strategy and individual programmes, as well as including “some element of co-delivery by families” (p61).

Workshop discussions made it clear that this domain should also include the aim of **increasing understanding of why early childhood matters** across all of Lambeth society. The argument for this is that with greater understanding aspects of business and society will then become more ‘family friendly’ and that a range of stakeholders will make changes to their businesses / institutions that better reflect the needs of children and families to create a more ‘child friendly borough’. We also think that greater understanding across society will lead to more positive encouragement of mothers by their peers.



**Developing community capacity, connections and positive narratives**

**Families connected with each other**

- Families with young children and the wider community increasingly support each other

**Community involvement**

- Families more actively involved in and engaged with their local community
- Families feel empowered to represent and advocate for themselves and their communities.

**Families connected to child and family services**

- Families more actively involved in co-production, development and improvement of local child and family provision and spaces
- Increased trust and engagement between families / communities and local services

**Positive social/cultural norms and behaviours**

- Increased understanding of why early childhood matter amongst families their support networks and the wider community

## Domain 6: Improving early years services and workforce skills

LEAP runs or partners with a broad range of services across Lambeth. Conversations in the workshops identified workforce skills, motivation and integrated working as the priority areas where improvements are needed.

In line with this, the evidence review pointed to examples of other place-based initiatives which had successfully brought together “partnerships of very diverse stakeholders, where the need for better partnership and more integrated working had been repeatedly identified but had never been achieved” (p50). The review also found evidence to suggest that replacing individual service/organisation agendas with approaches to working together to co-ordinate improvements is key to delivering positive results – hence the inclusion of outcomes related to issues like collaboration and establishing a common language.

An aspect of the **skills** LEAP wants to see in the children's workforce are formal skills and qualifications. More broadly, LEAP is aiming for an increase in a number of other attributes including:

- Confidence in identifying and supporting children with early language delays;
- Understanding of infant mental health, how to identify child attachment issues, and how best to strengthen bonds between parent and child;
- Understanding of children's physical development and nutrition needs;
- Partnership working with families.

Ultimately this part of LEAP's work is intended to **improve education and care, and child and family services**. Specifically, this includes:

- More welcoming, inclusive and approachable provision/services for children and families, particularly disadvantaged groups;
- Provision/services are better tailored to meet the needs of the community.

The goal is that more families, and particularly disadvantaged families, have sustained engagement with local early years services (both LEAP and non-LEAP statutory, voluntary and community services).



### Improving early years services and workforce skills

#### Workforce skills and expertise

- A more highly-skilled and qualified child and family workforce
- A more connected and motivated child and family workforce

#### Provision/service quality

- More welcoming, inclusive and approachable services for all children and families, and particularly disadvantaged groups.
- Improved early childhood education and care, and child and family services.

## Domain 7: Promoting collective action and system change

At the system level, LEAP is aiming to have a significant and sustained effect on how services are coordinated and delivered to improve their long-term impact on children and families. Hence the final outcome domain refers to the changes LEAP is working towards in pursuit of these goals.

The first outcome of this domain relates to the need for a **shared vision and approach** which is described - in our evidence review - as an essential starting point for any systems change initiative (p61).

Next are two key aspects of collective action that are covered in detail in Box 2 page 10 of the evidence review: **Assessing local needs and integrated service planning in response to needs**. Their inclusion reflects strong evidence that an understanding of needs is crucial to the success of systems change initiatives and section 10.5.2 of the LEAP evidence review.

The following domain relates to the collection of **reliable evidence of impact**. While being the most distal domain in terms of direct, day-to-day influence on outcomes of children currently growing up in Lambeth, LEAP's work to promote collective action and system change arguably has the greatest potential to achieve a major, long-term impact for future generations in Lambeth and beyond. One of the key themes in the evidence review was the number of the gaps in evidence base – particularly in relation to new and hard to evaluate practices such as collective action system change initiatives. The idea underlying this part of the Theory of Change is that LEAP's evaluation work will generate more reliable evidence about the joint working approach to early years and answer research questions about what works, what doesn't work, and why things work or not.

It is hoped that the work of LEAP, and the evidence it generates, will inform local and national decision makers about the importance of early years and the role of early education, identification and intervention models across communities. In the long run we want to see appropriate and sustained levels of funding for early years interventions and national and local policies that positively affect child and family outcomes or family circumstances. This aim is articulated in the final outcome that refers to long-term improvement in the quality of all services for families and children.



### Promoting collective action and system change

#### Shared vision

- A shared vision for children and families across the system, and joint approach for realising this vision

#### Early intervention

- Thorough understanding of local need and demand.  
- More integrated planning and delivery of services and resources for children and families

#### Evidence-based policy, practice, commissioning and decision-making

- 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

**Improved statutory services and child and family provision by other providers**

### Enabling factor that supports each of the domains

The final domain is not an outcome area as such but rather an 'enabling factor' that underpins all of LEAP's work across the seven outcome domains and is important enough to be reflected in this summary theory of change. Most importantly, it relates to how LEAP goes about identifying and engaging local families to work with and the detailed theory of change that sits behind this goes into more detail about how all LEAP services approach this.

This engagement factor also covers the objective of engaging other professionals and local services in LEAP's work.



#### Effective outreach and engagement across all target groups

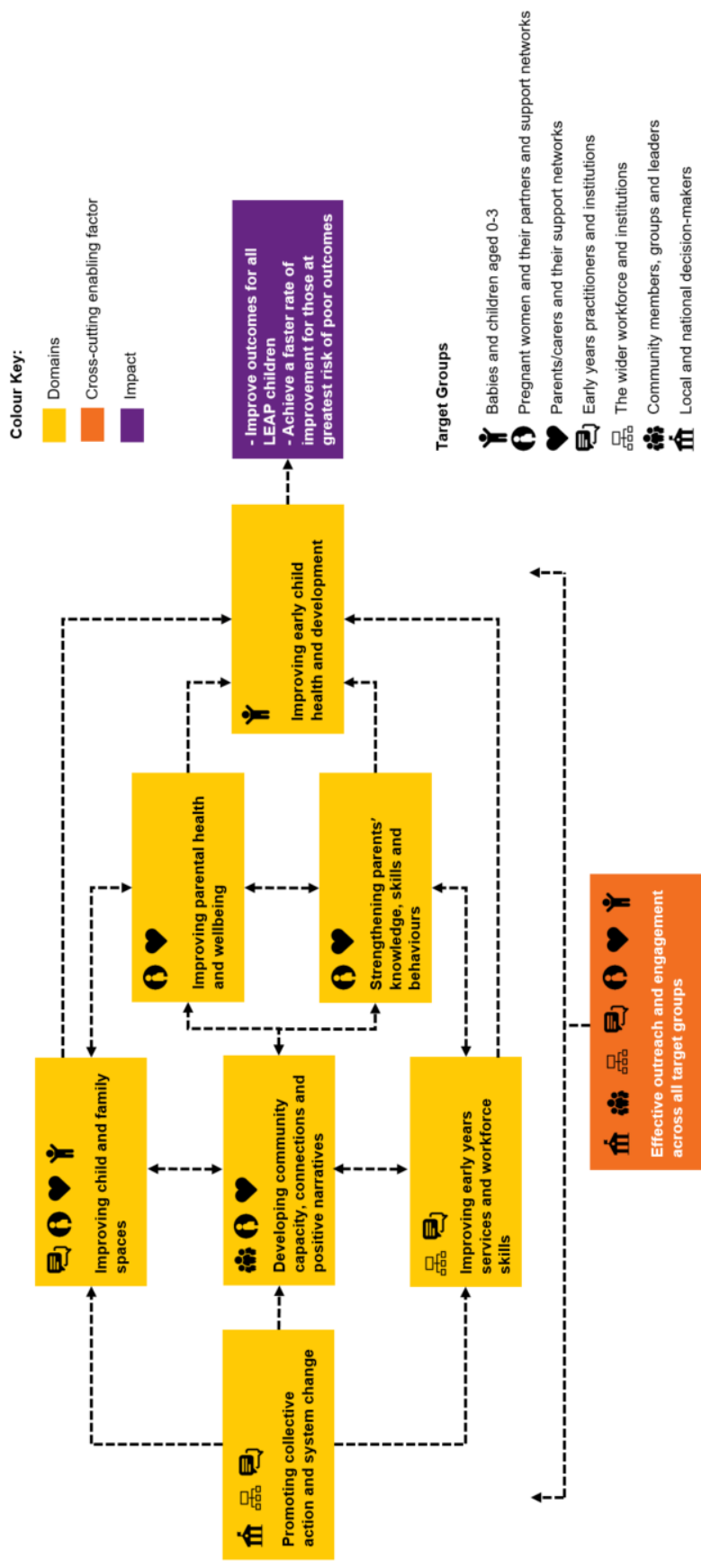
##### **Outreach and engagement with children and families**

- More families, and particularly disadvantaged families, have sustained engagement with local early years services (both LEAP and non-LEAP statutory, voluntary and community services)

##### **Outreach and engagement with other stakeholders / target groups.**

- Increased awareness, understanding and engagement with LEAP's work among local services, workforce and decision makers

# Lambeth Early Action Partnership: Programme Theory of Change





# Lambeth Early Action Partnership: Programme Theory of Change





# SECTION TWO

## A ROADMAP TO 2025

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*How in operational terms will LEAP put our plan into practice?*

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*This Section is divided into three parts. Part A establishes LEAP's broad delivery approach for the second half of the programme. Part B explains how decisions have been made regarding which services to fund and for how long. Part C sets out a working version of LEAP's roadmap to 2025.*

# Part A

## LEAP's approach to delivering the second half of the programme

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*Building on LEAP's refreshed Theory of Change, Part A establishes our approach to delivery (i.e. LEAP's operational strategy) for the second half of the programme and describes how this differs from what has gone before. In doing this, we demonstrate that the second half of LEAP (2020-2025) will, in some important operational respects, differ markedly from the first half of LEAP (2015-2020).*

*For example, during the first half of LEAP, resources were spread across a very broad portfolio of services, LEAP was the sole funder of these services, both monitoring and evaluation were chiefly focused on whether implementation was going to plan, and services were largely concerned with their own delivery. Between 2020 and 2025, LEAP will focus on especially promising services, place greater emphasis on outcomes and learning, transition (in some cases) to mixed funding models, and enable services to work collectively as a single integrated offer. We will also, for at least some of the period, be adapting to an environment marked by considerable uncertainty due to the effects of Covid-19 which include social distancing requirements and the prospect of further lockdowns.*

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## Introduction

LEAP has a set of consistent programme goals that underpin and anchor delivery across the ten-year initiative (see Appendix A on p.75). However, as with many longstanding place-based initiatives, LEAP's short-to-medium term approach to delivery is contingent on both the programme's stage of implementation (e.g. piloting, delivering at scale, demonstrating outcomes) and the external environment.

In March 2020, we reached the programme's mid-point. This milestone presented a timely opportunity for LEAP to update our approach to delivery so that it better supports us as we (a) deliver at scale with a focus on demonstrating outcomes, and (b) in the short-term at least, adapt to the new context associated with Covid-19.

In Part A, we establish LEAP's approach to delivering the second half of the programme and highlight key operational differences between LEAP's two halves. We also surface the practical implications of our approach going forwards. Finally, we introduce our plan for creating a LEAP roadmap so that everyone can see what the overall shape of the programme will look like at any given point between now and 2025.

## LEAP's changing approach to delivery

### ➤ **How will the second half of LEAP differ from the first half of LEAP?**

During LEAP's first five years (2015-2020), resources were spread very widely to explore where and how change might be achieved. LEAP was the sole funder of projects and evaluations were chiefly focused on matters of operational process and engagement. Few interventions came to the end of their funding and services were predominantly concerned with their own implementation and delivery.

In contrast, over the period 2020-2025, LEAP's approach to delivery will change in several key ways.

- LEAP funding will be targeted on especially promising services that (a) relate to our domain-level Outcome Areas, (b) stand the best chance of bringing about positive outcomes for children and families, and (c) could plausibly be the subject (either individually or collectively) of impact evaluation that adds value to the existing evidence-base.
- In practice, this will mean LEAP moving forward with a narrower portfolio of services clustered around a small number of domain-level Outcome Areas, but care will be taken to ensure the programme retains sufficient breadth and depth to honour our Portfolio Principles (see Appendix B on p.76).
- Some LEAP services will cease delivery in their current form and LEAP learning will be disseminated and hopefully incorporated into the broader system.
- The scale of LEAP evaluation work will be greatly amplified, and all services will be expected (with enhanced support from our Core Team) to regularly collect a minimum dataset on participants and to routinely report high-quality data, including outcomes data.
- We will establish a LEAP Shared Measurement System and complementary service-level theories of change and measurement systems, so it is clear both what data should be collected using which tools and how every service (and every data line collected by every service) contributes to the overall programme.
- Quarterly service reviews will include a greater focus on whether each individual service is reaching and retaining the children and families who have most to benefit.
- Mixed funding for individual services - largely through financial contributions from partner statutory agencies to complement LEAP funds - will become more common as the evidence-base grows for these services.
- Integrated service pathways where multiple services work collectively to realise shared aims will gain enhanced definition and be subject to evaluation.

In relation to Covid-19:

- LEAP will develop a Digital Strategy with an aspiration to be able to move seamlessly between face-to-face and online delivery should further lockdowns occur.
- LEAP will examine how each of our especially promising services could best be adapted to meet new emerging needs linked to Covid-19 alongside the old established needs.

The second half of LEAP will therefore be characterised by a sustained focus on a narrower set of highly-promising services clustered around domain-level Outcome Areas and a significant increase in evaluation work with greater emphasis on outcomes. We will see different services working to different end-dates, mixed funding models for some promising individual services, and the emergence of clear integrated service pathways. Also, in response to Covid-19, we will see a new emphasis on digital delivery where face-to-face

services are no longer a viable option and additions to our portfolio to ensure new needs are addressed where necessary.

➤ **Why should LEAP's approach to delivery change during the second half of the programme?**

These changes are driven by our desire to ensure LEAP makes the greatest possible positive impact for current and future generations of children. Over time, LEAP wants to persuade local and sub-regional commissioners that the best of our work should be sustained. Equally importantly, we want to show national decision-makers how a collective place-based initiative can help improve early years outcomes and reduce local inequalities. This will require a body of evidence showing the positive contribution each service has made and our overall impact.

LEAP currently has 23 "live" early years services engaged in testing. We need to make choices about which of these services have most promise and should therefore receive further funds for delivery, evaluation, and learning, and we need to do this whilst bearing in mind LEAP's role as a laboratory for testing both individual services and the effectiveness of a single integrated offer. The alternative would be to continue funding everything and spread our resources too thinly. This may mean we end up not collecting the quality data and evidence that will be necessary to show where either individual services or aspects of the portfolio should be sustained and replicated over the longer-term.

This approach closely follows the National Lottery Fund's recommendations. It also adheres to LEAP's original plan to test a wide range of approaches, identify promising services, support them to improve, enable them to demonstrate their effectiveness, and learn about the impact of integrated service pathways. Moreover, LEAP funding was always expected to taper towards the end of the programme with the local system picking up more of the costs. Given the financial context has changed greatly since 2015, it is even more important that we focus and re-allocate LEAP funds to support especially promising services.

➤ **How do you decide which services are especially promising services?**

The fullest response to this question can be found in Part B which starts on Page 30 (Identifying LEAP's Most Promising Portfolio of Services). Here, we confirm that decisions regarding which services are especially promising include consideration of:

- The key drivers of improved outcomes (which factors contribute most to positive child development and are sensitive to intervention - i.e. our domain-level Outcome Areas).
- What are our biggest local needs?
- Each service's potential to engage and reach the right families.
- Each service's capacity to respond to new needs associated with Covid-19 alongside established needs, and each service's capacity to operate in an uncertain environment where digital delivery may have to play a greater role.
- Findings from monitoring and evaluation.
- The likelihood of each service being sustained at scale over the long-term.
- The contribution each service makes to our integrated pathways.

All these factors, when applied to individual services, will require careful and informed judgements. With this in mind, we have established a small, expert Working Group from the LEAP leadership team to oversee these decisions.

➤ **How can a service be stopped in advance of a full independent evaluation?**

LEAP has already collected a great deal of data on services which can help us make preliminary assessments about current and possible future impact. Drawing on this data, we have made decisions about which services are appropriate for, ready for, and have shown enough promise to justify, costly impact evaluations. This type of evaluation could only ever have been undertaken with some services.

For less developed services, we may, in partnership with local agencies, want to focus our learning and reflection on implementation questions so that local commissioners can adjust delivery models before carrying out their own further testing. Where services have demonstrated less promise, we may want to explore reasons why, or deconstruct the intervention and consider whether any elements of delivery were effective and could inform existing practice. Our priority will therefore be to work towards the most useful learning opportunities for each service or project.

➤ **What are the practical implications of these changes?**

- Different LEAP services will have different end-dates, but every LEAP service will have adequate notice, a proper exit plan, and time to make sense of and synthesise their learning (see Appendix C on p.77 for our Principles of Good Exits).
- Promising LEAP services will be supported to reconfigure service-level Measurement Frameworks so they contribute directly to our Programme-level Theory of Change and Shared Measurement Framework.
- Services will shortly be required to automatically upload their monitoring and evaluation data onto our new integrated data platform and some services will be required to pseudonymise their data before it is uploaded.
- LEAP services will also be supported to: work in a joined-up way across integrated service pathways; develop their digital delivery in line with LEAP's digital principles; consider how they might best tackle new Covid-19 related needs alongside established needs; and put in place stronger plans to engage, recruit, and retain their target populations.
- We will invest in strengthening LEAP's core team capacity so we can (1) better support busy practitioners to collect consistent high-quality data, (2) fully analyse this data and present it to stakeholders and wider audiences, and (3) commission and oversee an extensive programme of independent evaluations.
- As our evidence-base grows, we will explore where local agencies can take on some delivery costs as part of the transition to full mainstreaming and where existing LEAP services can be expanded using non-LEAP funds.

## A Roadmap to the End of the Programme

Below, we introduce the idea of a LEAP roadmap. The roadmap will be LEAP's mechanism for capturing and illustrating our complex delivery landscape from now until 2025.

### ➤ **Why produce a LEAP roadmap?**

- Partners managing and delivering services need clarity about LEAP objectives for their service and the likely duration and value of our funding if progress continues to be made towards meeting these objectives.
- By looking at all services as part of one integrated exercise, we can better take account of the programme's overall coherence and interconnections between services.
- By setting out our plans in full, we will be in a stronger position to commence detailed discussions with commissioners and strategic leads regarding LEAP's exit and legacy.

### ➤ **What will the LEAP roadmap show and how will it be used?**

The roadmap will show the expected duration of LEAP funding for each individual service (so long as progress continues to be made towards meeting our objectives) alongside expected service-level funding allocations for each of the programme's remaining years. It will also clearly set out the objectives and indicators for each service. This will give managers and practitioners a greater level of certainty about funding for their services.

LEAP's roadmap will not be a fixed plan that cannot under any circumstances change. Instead, it will take the form of a working document that represents our best current judgement on how LEAP could evolve. It will be conditional on services continuing to make progress towards meeting our objectives and will therefore be responsive to new evidence that comes to light and/or changes in the external environment that make it difficult for services to perform as expected.

## Next Steps

In Part A, we established LEAP's approach to delivering the second half of the programme, outlined the key differences between LEAP's two halves, and introduced our plan to create a LEAP roadmap to 2025. Part B sets out our approach for making decisions about which services are especially promising services and should therefore receive funding over a longer period. Part C will present a working version of the LEAP roadmap.





## Part B

### Identifying LEAP's Most Promising Portfolio of Services

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*Part B focuses specifically on LEAP's method for identifying especially promising services, in order to enable careful and considered judgements about where funding should be prioritised. First, we outline LEAP's decision-making process including details of who we consulted and when. Second, we set out LEAP's decision-making criteria (i.e. the factors taken into account when making decisions about which services are especially promising). Part B therefore links Part A, where we established our approach to delivering the second half of the programme, with Part C, where we set out in detail the LEAP Roadmap to 2025.*

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### Introduction

As outlined in Part A, the second half of LEAP (2020-2025) will, in some important operational respects, differ markedly from the first half of LEAP (2015-2020).

Significantly, the second half of LEAP will see a focus on especially promising services and a narrower overall portfolio. Especially promising services will receive funding for longer, have their impact evaluated rigorously, and become embedded (hopefully) within the local system. More broadly, the second half of LEAP will see several projects come to the end of their LEAP-funded period and our learning across many areas of early years practice captured and disseminated. To illustrate this changed delivery landscape, LEAP has created a roadmap (presented in Part C), so that everyone can see what the overall shape of the programme will look like at any point between now and 2025.

Part B sets out and explains LEAP's approach to deciding which services have most promise and should therefore continue to receive funding and for how long. In turn, these decisions underpin the roadmap presented in Part C.

### A Decision-Making Process

LEAP's decision-making process for identifying which services have the most promise can be divided into several stages:

- Stage 1 involved the production of a draft roadmap by a dedicated Working Group;
- Stage 2 refers to scrutiny by LEAP's Officers Working Group and External Quality Assurance; and
- At Stage 3 the roadmap will go to LEAP's Partnership Board for final approval.

Details on the entire process and our criteria for making decisions were published in advance and circulated widely amongst LEAP stakeholders. LEAP's Officers Working Group and members of the Partnership Board had an opportunity to comment on both the proposed process and the decision-making criteria in November and December 2019 prior to Stage 1 commencing.

Below, we describe the stages in more detail and they are illustrated in Figure 1.

**Stage 1:** A dedicated Working Group produced a draft of the LEAP roadmap (first produced in January to February 2020, and reviewed and updated in June 2020).

The Working Group was comprised of:

- NCB's Director of Practice and Programmes,
- the LEAP Director,
- the LEAP Assistant Director,
- the LEAP Programme Manager.

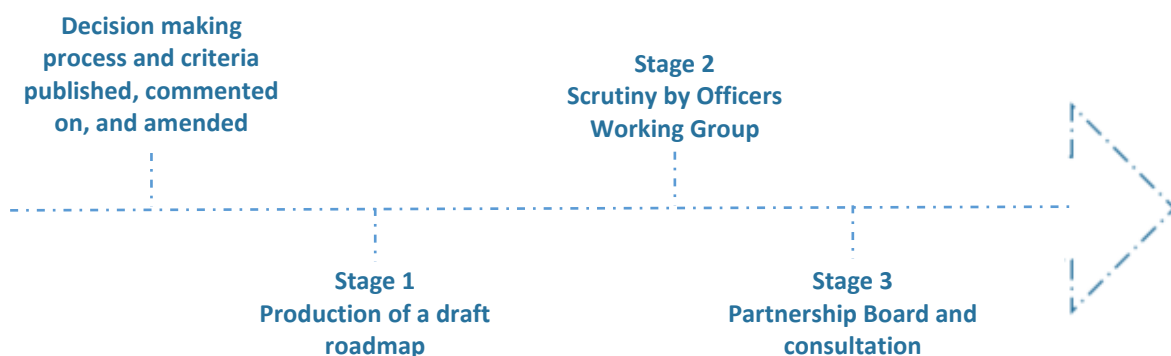
This is the group that has been responsible for the oversight and management of all LEAP services through our quarterly Service Review system. They bring a strong understanding of the breadth and depth of LEAP and the progress being made by individual services.

Development of the first draft roadmap involved scoring and categorising individual services and applying these scores and categorisations to a roadmap considering the available budget. In June 2020, in light of Covid-19, the group reconvened to review and update the decision criteria, and to re-run the scoring process. A final version of the roadmap was produced for Officer Working Group scrutiny in early July 2020.

**Stage 2:** The draft roadmap was presented to and scrutinised by members of LEAP's Officers Working Group in February 2020 and then again in July 2020. On both occasions, this group talked through and sense-checked the rationale for individual decisions and the impacts of these decisions on the overall portfolio. The approach was also scrutinised by an external assessor for quality assurance (the Blackpool ABS site Director Merle Davies).

**Stage 3:** The roadmap will then go to LEAP's Partnership Board. After the Partnership Board, there will be a consultation process for ten working days. Submissions will be made via email. All submissions will be considered by the Chief Executive of the National Children's Bureau (Anna Feuchtwang), the LEAP Director (Laura McFarlane), and NCB's Director of Practice and Programmes (Annamarie Hassall).

**Figure 1 - LEAP's decision-making process for identifying promising services**



## Decision-Making Criteria

In producing the draft roadmap, the Working Group considered each service with reference to seven key dimensions of service promise:

- 1) **Evidence** - relationship to the wider evidence-base/potential to influence LEAP's domain-level Outcome Areas;
- 2) **Local Needs** - continuing fit with local needs (established needs and new needs emerging as a result of Covid-19);

- 3) **Current operations** - engagement and feedback from families and/or practitioners, and readiness to deliver in an uncertain environment due to Covid-19;
- 4) **Impact** - readiness for impact evaluation and likelihood this evaluation will add to the existing evidence-base;
- 5) **Future** - likelihood of sustainability;
- 6) **Coverage** - reach as a proportion of target population;
- 7) **Wider Contribution** - role in LEAP's wider system.

The seven dimensions are each represented by statements describing desirable characteristics of services. Members of the Working Group have individually and then collectively scored services using a five-point Likert Scale based on the extent to which they agree or disagree that the statement applies to the service under consideration (1 point for Strongly Disagree, 2 points for Disagree, 3 points for neither Agree nor Disagree, 4 points for Agree, and 5 points for Strongly Agree).

Over the following pages, each of the seven dimensions is addressed in more detail.

## 1. Evidence

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**Statement 1: This intervention is grounded in the wider evidence-base about what is important to children's early development, and either what has worked previously or what is likely to work.**

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### **Explanation**

As is widely understood, children's early development is shaped by many interacting factors. Some of these factors - typically referred to as protective factors - are associated with an increased probability of positive child outcomes. For example, LEAP's Domains and domain-level Outcome Areas, drawn from our recent evidence review (Tackling Inequalities in the Early Years), include several factors, namely good parental physical and mental health, positive parenting and secure parent-child attachment, an active home learning environment, and strong parental relationships. By drawing on the existing evidence, we have developed an understanding of key protective factors and which of these are most important. The first part of the above statement therefore relates to whether each intervention is focused on changing the areas of a child's life that are considered important and likely to leverage most positive benefit.

It is also important to consider not just whether a factor is important, but how easily, and by what means, it can be changed. Again, there is an existing evidence-base on the effectiveness of different approaches, spanning service content to delivery styles and more. It's important to emphasise this is not about exclusively focusing on proven interventions, but about making sure innovative services have a strong evidence-informed rationale for why they are likely to work. The second part of the above statement therefore refers to whether the service has promise according to the wider evidence on either what has worked in other contexts or what is likely to work.

### **Sub-statements to assist scoring**

- This intervention aims to achieve an outcome that is critical for positive early childhood development.
- This type of intervention (e.g. home visiting, group work, telephone support) has proven effective in a different context at bringing about the desired outcome.

- Some or all the activities that make up this intervention have proven effective in a different context at bringing about the desired outcome.
- Some or all the activities that make up this intervention are likely to work according to the existing research and evidence.

#### **Some key reference documents**

- La Valle & Jones (2020). *Tackling Inequalities in the Early Years, A rapid evidence review to inform LEAP's next five years*. New Philanthropy Capital.
- Asmussen, K et al (2016). *Foundation for life: What works to support parent-child interaction in the early years?* The Early Intervention Foundation.
- Dartington Service Design Lab (2018). *Evidence Review - Improving the early learning outcomes of children growing up in poverty*. Save the Children.
- Field, F (2010). *The Foundation Years: Preventing Poor Children Becoming Poor Adults*. The Report of the Independent Review on Poverty and Life Chances, London: Cabinet Office.
- The Centre for Research in Early Childhood (2014), *Early Years Literature Review*, The British Association for Early Childhood Education.

## **2. Local Needs**

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**Statement 2: This intervention is a response to considerable local need.**

---

### **Explanation**

Different places have different configurations of needs. These differences can be seen between local authority areas, but also within them across different neighbourhoods. Also, need is not fixed but instead changes over time. It is therefore key that place-based initiatives are customised to address specific patterns of need in their locality at that time. At LEAP, we track local need through a regularly updated ANA. In prioritising services, we therefore considered whether each service is addressing a continuing and considerable local need, or even a new emerging need (such as needs emerging as a result of Covid-19). Additionally, we considered the potential of individual services to meet needs beyond the LEAP area in other Lambeth wards and more broadly.

### **Sub-statements to assist scoring**

- The outcome this service aims to achieve is a local need for the LEAP wards.
- Existing services are not meeting this local need.

#### **Key reference documents**

- *LEAP's Local Needs Assessment (compiled by the LEAP data team and the LEAP Evaluation and Research team)*.
- Dunne, Hamblin, Lewis, Musowu, Roberts, & Stanke (2020). *Thematic Analysis - The immediate impact of the Covid-19 crisis on LEAP's partners, workforce, and families*. LEAP

### 3. Current Operations

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**Statement 3: This intervention is getting strong engagement and feedback from families and/or local practitioners, and is ready to deliver in an uncertain environment due to Covid-19.**

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#### **Explanation**

Services may have amazing scientific content, but they cannot be truly effective unless they engage and retain their target populations. An early indicator of service promise can therefore be ascertained from current engagement rates and participant feedback. LEAP has an extensive body of data on engagement with and feedback to our services. This data has therefore been considered as part of our service prioritisation process. Beyond this, we considered whether services are ready to deliver in our newly uncertain environment, due to Covid-19 and the prospect of future lockdowns.

#### **Sub-statements to assist scoring**

- This intervention has a clear plan for recruitment and engagement.
- This intervention is meeting expected engagement numbers.
- This intervention is exceeding expected engagement numbers.
- This intervention is reaching its target population (the right population to tackle local outcome inequalities).
- Feedback data from this service is strong.
  - This service is ready to make adaptations that enable delivery in our newly uncertain environment due to Covid-19.

#### **Some key reference documents**

- LEAP's routine monitoring data.
- LEAP's quarterly-updated scorecards.
- LEAP's service tracker on Covid-19 adaptations.

### 4. Impact

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**Statement 4: This intervention will be ready during the second half of LEAP to participate in a rigorous impact evaluation and this evaluation will likely add to the existing evidence-base.**

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#### **Explanation**

A factor in deciding which services to fund and for how long will be each service's readiness to demonstrate positive impact in their chosen outcome measure(s). For this purpose, LEAP used a slightly adapted version of the Early Intervention Foundation's Standards of Evidence Framework. This bands services according to the strength of evidence they have that any positive change is directly attributable to their intervention as opposed to some other underlying cause. The banding system is explained in more detail below:

- Not Yet Level 2 (the lowest band) = Where key elements of the service's logic model are still to be verified in relation to practice and the underpinning scientific evidence.
- Level 2 = Where there is evidence of improving an outcome from a study involving at least 20 participants (representing 60 per cent of the sample) using validated instruments.

- Level 3 = Where there is evidence from at least one rigorously conducted evaluation (defined as an evaluation with a robust counterfactual) demonstrating statistically significant positive impact on at least one outcome.

**Figure 2 - Early Intervention Foundation Evidence Standards Summary**



Our aim at LEAP will primarily be to move services along this developmental journey into Level 2 and for some services into Level 3. We have particularly looked to prioritise services that are both ready to move along this developmental scale and where this additional evaluation work will add to the existing evidence base.

**Sub-statements to assist scoring**

- This intervention is addressing a clearly defined and quantified problem or opportunity.
- The priority for this intervention is to understand the impacts that have been produced rather than to further understand and improve the quality of implementation.
- This intervention has an evidence-informed theory of change that explicitly links to LEAP's programme-level theory of change, and that clearly describes inputs, activities, reach, outcomes, impacts, and proposed causal linkages between them.
- It is plausible that this intervention's activities will lead to the desired outcome.

- This intervention is relatively mature and stable.
- External influences on this intervention are accounted for and assessed as relatively stable.
- This intervention is consistently generating high-quality reliable data that aligns with its theory of change.
- This intervention is being delivered at a scale that allows for impact measurement against a counterfactual controlling for potential biasing factors (i.e. there is adequate statistical power).

**Some key reference documents**

- *Early Intervention Foundation Standards of Evidence* - [www.guidebook.eif.org.uk/eif-evidence-standards](http://www.guidebook.eif.org.uk/eif-evidence-standards).
- *Peersman, G et al (2015). Evaluability Assessment for Impact Evaluation. A Methods Lab publication. London: Overseas Development Institute.*
- *LEAP's routine monitoring data and scorecards.*

## 5. Future

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**Statement 5: This intervention stands a realistic chance at being sustained at scale over the long-term.**

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### **Explanation**

Some services show promise but have an unrealistic cost or operating model or the wider system is simply not in a place for them to be successful. In these instances, there will certainly be valuable learning for the wider system, but it is unlikely the service will be adopted wholesale. As such, we have considered whether there is a realistic chance of mainstreaming each service, and whether the wider system is ready for this service (i.e. whether the wider conditions are in place to make the service a success). These calculations also took into account the shifting boundaries for public service commissioning into account. For instance, we needed to be clear whether services will likely be commissioned at a local authority, sub-regional or other level; and how this may influence decision-making processes and the implications for sustainment.

### **Sub-statements to assist scoring**

- The costs of scaling this intervention and delivering it over the long-term could feasibly be met by either local statutory agencies within current budget settlements or by philanthropic investment.
- Local agencies/philanthropic funders are interested in mainstreaming and scaling this work.

**Some key reference documents**

- *LEAP Service Plans.*



## 6. Coverage

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**Statement 6: This intervention is reaching a large proportion of its local target population.**

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### **Explanation**

It is important to consider service prioritisation in the context of the scale of reach and levels of local need. Where there are large numbers of families in need of a service, it makes sense to address this high level of need rather than create something that works but can only be delivered (often for reasons of time or cost) to a tiny fraction of the target population. Another important consideration for the Working Group has therefore been the match between a service's reach and the scale of local need.

### **Sub-statements to assist scoring**

- This intervention is reaching at least 50 percent of its local target population.
- This intervention has a plan for reaching more of its target population over time.

### **Key reference documents**

- *LEAP's local needs assessment*
- *LEAP's routine monitoring data.*

## 7. Wider Contribution

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**Statement 7: This intervention makes a significant contribution to the wider LEAP system and to A Better Start strategic aims.**

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### **Explanation**

LEAP is a collective impact initiative as opposed to a list of unconnected services. Accordingly, we expect LEAP services to work in concert, creating the conditions for each other's success. In making decisions about which services to prioritise and continue funding, we therefore considered the contribution each service makes to the effectiveness of the overall LEAP system. For instance, it might be that a service has mixed effectiveness on their intended outcomes, but acts as a powerful engagement tool or preparatory experience for other services. Moreover, some individual services may be important strategically to the wider A Better Start programme. They may align with initiatives in other sites and be in a strong position to contribute to an emerging evidence base. We needed to consider this complexity when making decisions about which services to prioritise.

### **Sub-statements to assist scoring**

- This intervention is a major source of referrals into other LEAP services and/or into wider local early years services.
- This intervention is a major destination for participants from other LEAP services and/or from wider local early years services.

- This intervention contributes to narrowing local inequalities in child development.

#### **Some key reference documents**

- *LEAP's routine monitoring data on referrals.*

## **Collective Judgement**

The approach outlined in this paper relies on our collective judgement rather than the detached and objective processing of hard facts. Indeed, the initial scoring and categorising exercise (and the translation of this exercise into a budgeted plan) may well produce different results with a different Working Group. Equally, it is plausible that different priorities could emerge from an Officers Working group or a Partnership Board with a different membership. Our approach here is to acknowledge these limitations and this messiness whilst ensuring the approach is transparent. The decisions encapsulated in the LEAP roadmap represent our best collective judgement on the right way forward for the programme.

## **Next Steps**

In Part C, we publish the LEAP roadmap to 2025, an accompanying budget, and headline goals for each service in their remaining time as a LEAP project. We also take stock of the LEAP portfolio as a whole.



# Part C

## LEAP's Roadmap to 2025

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*Part C sets out LEAP's roadmap to 2025. We start by describing the levels of promise demonstrated by individual services over the first half of LEAP, according to the criteria and approach outlined in Part B. Second, we present LEAP's provisional Delivery Schedule and Budget Forecasts for the next five years, and we confirm headline goals for each individual service over this timescale. Finally, we take stock of LEAP's overall portfolio, and some of the next steps we need to take.*

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### Introduction

In Part C we set out the LEAP roadmap to 2025, but we will start by briefly reviewing Section Two as a whole. At the start of the section, Part A established our broad approach to delivering the second half of the programme. Given a key aspect of this approach is to focus on a narrower set of promising services, Part B outlined LEAP's methodology for identifying which services have the most promise and should therefore receive funding for longer. In Part C, over the following pages, we present (a) our decisions regarding which services have shown most promise, (b) a roadmap to the end of the programme, and (c) a stocktake of LEAP's planned portfolio as a whole.





Before we go further, it is important to provide some guidance for readers on how the information presented herein should be interpreted and used. First, as previously stated, our assessments of promise with regard to individual services represent informed judgements rather than empirical or scientific conclusions. We have done our best in the absence of definitive evidence and we have taken decisions openly and with a great deal of consideration. Second, the resulting plans represent our best projections as to how we currently want and expect LEAP to evolve. None of this should be set in stone, and where new evidence emerges, and a change of plan is desirable, we will bring updated proposals back to the LEAP Partnership Board. The roadmap is therefore an attempt to offer greater certainty to services in order to aid their planning, whilst acknowledging that continued funding remains conditional on engagement and outcomes, and that our uncertain operating environment may mean further changes are necessary in due course.

### Levels of Promise

Table 1 on the following pages shows the results of our exercise to assess levels of promise associated with individual LEAP services. Each service has been awarded a 'Level of Promise' rating, with five circles representing the highest level of promise, four circles representing the next level of promise, and so on and so forth. Next to each rating, there is an explanation drawing out key details from the wider scoring exercise. For a full breakdown of all scores, see Appendix 4 on page 77.





## INDIVIDUAL LEAP SERVICES LEVELS OF PROMISE



Service name	Partner(s)	Theme	Service description	Level of promise	Explanation of promise
<b>CASELOAD MIDWIFERY</b>	Guy's and St Thomas' NHS Foundation Trust	 <b>Pregnancy</b>	<i>A midwifery service that offers continuity of care by a small team throughout pregnancy, labour, birth, and the postnatal period.</i>		LEAP Caseload Midwifery shows a high level of promise. It is based on an enhanced version of a well-evidenced practice model, and may have a role to play in tackling inequalities (particularly racial inequalities) in Lambeth's maternity outcomes. Local engagement and feedback are strong, and an impact evaluation appears viable. The service also acts as an entry point to LEAP for fairly large numbers of women. Currently, the service is supporting women via telephone and digitally, but we expect face-to-face delivery to resume in due course. Going forwards, the service needs to agree the specific, measurable outcomes that should be the basis of a rigorous impact evaluation.
<b>GROUP PREGNANCY CARE</b>	King's College Hospital NHS Foundation Trust	 <b>Pregnancy</b>	<i>Antenatal care provided through a series of group sessions.</i>		The LEAP Group Pregnancy Care Service was rated 2.5 for level of promise. Despite the best efforts of a dedicated and skilled staff team, the service has not managed to get significant numbers of LEAP women to attend initial group sessions (6 or 7 LEAP women attended initial sessions in each of the last three quarters). Our early plan was to run this service for a further year to see if this recruitment challenge could be overcome, but Covid-19 redeployments, and the long-term nature of the support provided, have made this difficult. As a result, LEAP and KCH made the joint decision to close the service early.






## INDIVIDUAL LEAP SERVICES LEVELS OF PROMISE



Service name	Partner(s)	Theme	Service description	Level of promise	Explanation of promise
<b>BABY STEPS</b>	Lambeth Council, Evelina London Children's Hospital, Guy's and St Thomas' NHS Foundation Trust	 Pregnancy	<i>A nine-week parent education service designed to prepare soon- to-be mums and dads for becoming parents.</i>		LEAP Baby Steps shows a high level of promise. As a model, it is research-informed with a growing body of evidence to suggest it can be implemented and scaled as intended. There has been strong local demand for the service (daytime and evening sessions) and engagement and feedback has so far been positive. Also, there is a clear framework of expected outcomes and measurement tools, that align strongly with our priorities to help build secure parent-child bonds and strengthen parental well-being. Going forwards, the service should consider how best to ensure those most in need are consistently recruited and retained. In response to current Covid-restrictions, LEAP Baby Steps is developing a model for digital delivery.
<b>MATERNITY PATHWAY COORDINATORS</b>	Guy's and St Thomas' NHS Foundation Trust and King's College Hospital NHS Foundation Trust	 Pregnancy	<i>Support for women and families to help them navigate the local maternity pathway.</i>		LEAP's Maternity Pathway Coordinator Service was given a 2 rating. Service reach has been lower than expected, outputs in terms of referrals to other services have also been fairly low, and sustainability beyond LEAP appears very unlikely. Individual Maternity Pathway Coordinators have worked hard, and we thank them for this, but the service as a whole has struggled to get going.






## INDIVIDUAL LEAP SERVICES LEVELS OF PROMISE



Service name	Partner(s)	Theme	Service description	Level of promise	Explanation of promise
COMMUNITY ACTIVITY AND NUTRITION	Guy's and St Thomas' NHS Foundation Trust	 Pregnancy / Health	<i>An eight-week service that supports pregnant women with a Body Mass Index (BMI) of 25 and over to change their behaviour in relation to dietary intake and physical activity.</i>		LEAP Community Activity and Nutrition (CAN) shows a very high level of promise. The model has been adapted from the UK Pregnancies Better Eating and Activity Trial (UPBEAT) which saw improvements in diet and healthy lifestyle and reduced gestational weight gain amongst the intervention group. The service supports over 100 LEAP women per year and records very high satisfaction rates. CAN also strongly complements our breastfeeding peer support offer and community healthy living activities.
PREGNANCY INFORMATION ON NUTRITION AND EXERCISE	Guy's and St Thomas' NHS Foundation Trust	 Pregnancy / Health	<i>A single workshop that provides nutritional and healthy lifestyle advice for pregnant women.</i>		It is too early to award a 'Level of Promise' rating to Pregnancy Information on Nutrition and Exercise. Given PINE has only just commenced, we plan to offer the service until the end of the 2020/21 financial year. This will give us time to gather evidence of effectiveness.
BREASTFEEDING PEER SUPPORT	Lambeth Council and The Breastfeeding Network	 Health	<i>Support for local parents who require practical, emotional, and informational support with regards to breastfeeding.</i>		LEAP's Breastfeeding Peer Support Service shows some promise. It builds on a strong evidence-base about the importance of breastfeeding and the potential of peer support to help women breastfeed. The service is co-commissioned with the local authority and delivered across the borough with an enhanced LEAP offer. Evaluation potential is currently weakened by difficulties

## INDIVIDUAL LEAP SERVICES LEVELS OF PROMISE






Service name	Partner(s)	Theme	Service description	Level of promise	Explanation of promise
<b>FAMILY NUTRITION SERVICE</b>	Healthy Eating and Nutrition for the Really Young		<i>Expert nutritional support for local families so they can plan and prepare a healthy diet for their young children.</i>		obtaining breastfeeding sustainment data. In light of Covid-19, the Breastfeeding Peer Support Service has established remote drop-in groups.  It is too early to award a 'Level of Promise' rating to the Family Nutrition Service. Given this work has only just commenced, we plan to deliver the service to the end of the 2020/21 financial year to properly test effectiveness.
<b>LEAP INTO HEALTHY LIVING</b>	Healthy Living Platform		<i>A local membership-organisation that runs Cook and Eat sessions, where families with young children can learn how to cook healthy vegetarian meals, grow food, and take part in physical activity together.</i>		LEAP into Healthy Living shows some promise. The service runs a full programme of healthy living activities with high levels of engagement and positive feedback. It helps connect families to other LEAP services and provides a pathway for families wanting continued engagement around healthy diet and lifestyle. A priority for the service is creating a sustainable funding model and establishing clear outcome measures. During the Covid crisis, the service has taken a leading role in the distribution of emergency food parcels.
<b>ORAL HEALTH SUPPORT SERVICE</b>	King's College Hospital Special Dentistry Team		<i>A local Oral Health Service working with dentists, childcare</i>		LEAP's Oral Health Support Service shows promise. The key components of our approach - communicating with parents and caregivers, supervised toothbrushing in pre-school settings, work with dentists - are all based on Public Health England (PHE) and National Institute for Clinical







## INDIVIDUAL LEAP SERVICES LEVELS OF PROMISE



Service name	Partner(s)	Theme	Service description	Level of promise	Explanation of promise
			<i>settings, and health visiting teams.</i>		Excellence (NICE) recommendations. The service is responding to and helping define (through our 3-year old survey) local need. Engagement from pre-school settings was positive prior to the Covid-crisis and we hope to be able to resume this work in the near future. We are also working with LEAP's wider service network to improve the dissemination of toothbrushing packs as delivery via the health visitor service proved patchy.
<b>GP CONNECT</b>		 Health	<i>Encouragement for GPs and health visitors to hold regular meetings so that support for identified children (those at risk of poor outcomes) can be discussed.</i>		It is too early to award a 'Level of Promise' rating to GP Connect. Given GP Connect has only just completed their pilot phase, we plan to continue delivering the service as soon as feasible given restrictions associated with Covid-19.
<b>FAMILY NURSE PARTNERSHIP</b>	Evelina London Children's Hospital	 Bonding	<i>Trained nurses carry out regular structured home visits from early pregnancy until the child is two years old.</i>		LEAP Family Nurse Partnership shows promise. The model has an extensive evidence-base from the US. In response to a disappointing UK Randomised Control Trial, the service has undergone a process of review and adaptation. Our work forms part of this review. LEAP FNP continues to have a full caseload and well-established processes for data collection and monitoring. A priority going forwards will be to provide really clear and compelling





## INDIVIDUAL LEAP SERVICES LEVELS OF PROMISE



Service name	Partner(s)	Theme	Service description	Level of promise	Explanation of promise
<b>PARENT AND INFANT RELATIONSHIP SERVICE</b>	South London and Maudsley NHS Foundation Trust	 <b>Bonding</b>	<i>A service that helps parents spend quality time together with their baby/child and further improve their relationship.</i>		evidence of local impact given the expense and very targeted nature of the service.  LEAP's Parent and Infant Relationship Service shows promise. Parent Infant Psychotherapy (the basis of our one-to-one service) is recognised in the wider evidence as a promising method of improving infant attachment security. For PAIRS Groups (Circle of Security and Together Time), there is a less developed evidence-base but still some early signs of potential. On engagement, PAIRS one-to-one mostly maintains a full caseload and PAIRS Circle of Security is well-attended. PAIRS Together Time has struggled with recruiting and retaining families. The PAIRS service is a key driver of our work to enhance parent child attachment and there is early commitment from the NHS to identify a sustainable model.
<b>EMPOWERING PARENTS EMPOWERING COMMUNITIES</b>	Lambeth Council and South London and Maudsley NHS Foundation Trust	 <b>Bonding</b>	<i>An eight-week course supervised by trained parent facilitators that helps parents improve their parenting and the quality of their interactions with their child.</i>		Empowering Parents Empowering Communities shows some promise. The service has a strong national and international evidence-base and a clear framework for impact measurement. It acts as a pathway for Baby Steps families and works to both enhance responsive parenting and improve parental well-being. Engagement feedback data (while limited given the service has only been



## INDIVIDUAL LEAP SERVICES LEVELS OF PROMISE



Service name	Partner(s)	Theme	Service description	Level of promise	Explanation of promise
<b>ENHANCED SPEECH AND LANGUAGE THERAPY</b>	Lambeth Council and Evelina London Children's Hospital	 Learning	<i>An intensive programme of coaching and training for early years practitioners in PVI settings and weekly drop- in groups for families aimed at supporting the development of young children's early communication skills.</i>		LEAP Enhanced Speech and Language Therapy (comprising the Evelina Award, Chattertime, and the Wellcomm speech and language tool) shows a very high level of promise. It helps embed the latest evidence on creating communication-friendly environments into PVI settings and gives parents and children access to specialist support when concerns first emerge. Local engagement from practitioners and parents has been strong, there has been a significant increase in the identification of need and subsequent referrals, and there is potential to collect and analyse high-quality outcomes data. In 2021, we will be investing additional resources in direct speech and language work with children (and their families) at risk of falling behind, in response to concerns about lockdown and a widening word gap.
<b>RAISING EARLY ACHIEVEMENT IN LITERACY</b>			<i>A structured programme of home visits and events that help parents support</i>		LEAP Raising Early Achievement in Literacy shows promise. Our model is based on the original REAL project developed by Professors Cathy Nutbrown





## INDIVIDUAL LEAP SERVICES LEVELS OF PROMISE



Service name	Partner(s)	Theme	Service description	Level of promise	Explanation of promise
<b>AND SHARING REAL</b>	Lambeth Council and the National Children's Bureau	<b>Learning</b>	<i>their children's early literacy and a four-session training course that increases parental confidence with regard to supporting children's early language and literacy.</i>		and Peter Hannon and evaluated most recently by the Sutton Trust. However, we have introduced some adaptations, so the model is better suited to younger children. Currently, we are working with 21 local settings and engaging approximately 70 children each year. Sharing REAL with Parents (comprising a series of workshops for parents on creating a strong home learning environment) represents an additional strand to the service and is being delivered across the area. Our monitoring and feedback suggest both models are valued (by local practitioners and families) and effective. Going forwards, we want to get better at testing the impact of more prolonged support for individual families. We would also like to see Sharing REAL delivered at a greater scale across the four wards.
<b>DOORSTEP LIBRARY</b>	Doorstep Library	 <b>Learning</b>	<i>A volunteer-led home reading service that supports children and parents in reading for pleasure.</i>		Doorstep Library shows some promise. They have proven to be an exemplary partner and the need for long-term (working with families over an extended period of time) early literacy and reading interventions comes over clearly in the research evidence. They also play a unique role within LEAP's CLD portfolio by working with families of very young children in the home environment, before they start spending time in settings. As the service moves forward post-Covid, we would like to work



## INDIVIDUAL LEAP SERVICES LEVELS OF PROMISE



Service name	Partner(s)	Theme	Service description	Level of promise	Explanation of promise
<b>NATURAL THINKERS</b>	Lambeth Council	 <b>Learning</b>	<i>Training to help early years practitioners provide high-quality outdoor learning for children.</i>		<p>with Doorstep Library to try and achieve a significant increase in participation. At the moment, reach numbers - 40-50 families - are still relatively low given costs and the broadly universal (within certain estates) nature of the service.</p> <p>LEAP Natural Thinkers shows some promise. The service is now focused on enhancing well-being as a step towards improving learning. Impact is assessed using the Leuven scale. We currently have 18 local settings using the Natural Thinkers approach and we are hopeful that changes will become embedded in practice. The service is also being delivered in some out-of-borough settings. Early conversations are taking place with the National Children's Bureau about scaling this model. A challenge for this work will be attributing improvements in well-being or educational performance directly to the changes introduced as a result of Natural Thinkers.</p>
<b>PARENT CHAMPIONS</b>	Lambeth Council	 <b>Connecting</b>	<i>A service that helps connect parents to early years services and helps establish a network of information and support</i>		<p>The LEAP Parent Champions project shows some promise. Over 200 parents have completed Parent Champions training. We currently have 35 active Parent Champions (our highest ever number). In the last quarter, Parent Champions had over 400 chats with local parents about LEAP services and a</p>







## INDIVIDUAL LEAP SERVICES LEVELS OF PROMISE



Service name	Partner(s)	Theme	Service description	Level of promise	Explanation of promise
			<i>amongst parents and carers.</i>		new befriending offer is gathering momentum. Indeed, early conversations are underway with the local authority about a possible expansion of the project to other parts of the borough. As the service moves forward, we need to become sharper at capturing impact and showing tangible examples of where families have benefited from this form of outreach.
<b>COMMUNITY ENGAGEMENT</b>	Stockwell Partnership, Loughborough Community Centre, Myatt's Field Park	 <b>Connecting</b>	<i>A multi-pronged approach to engaging local parents of young children with LEAP and wider early years services.</i>		LEAP's Community Engagement Strategy shows some promise. Whereas evaluation evidence is weaker in this general area, there is little question that the readiness and capacity of our population to engage with LEAP will be a critical factor in determining our success. Last year, we ran x number of community events with y attendances. Our universal access community activities and Stay & Plays act as an essential gateway to the wider programme. As the service becomes more mature, we will want to see parents and community members to play an even greater role in creating their own projects and driving decisions about services. We will also want to see examples of the engagement journey 'in action', from initial contact, to attendance at community events, to accessing more specialist services where appropriate.

## INDIVIDUAL LEAP SERVICES LEVELS OF PROMISE



Service name	Partner(s)	Theme	Service description	Level of promise	Explanation of promise
<b>DOMESTIC VIOLENCE GROUPS</b>	St Michael's Fellowship	 Stresses	<i>Support groups for women at risk of or experiencing domestic violence.</i>		LEAP's Domestic Violence Groups received a 2 rating. The service struggled with engagement and has worked with very few LEAP parents. Whereas there is a local need, it is unclear whether groups offered in this format and with this content can reach their target families and make a difference. St Michael's Fellowship has worked hard to trial this idea, and we thank them for this and wish them luck with future delivery.
<b>OVERCROWDED HOUSING SUPPORT SERVICE</b>	Lambeth Council	 Stresses	<i>Casework support for families in overcrowded housing with young children.</i>		LEAP's Overcrowded Housing Support Service was rated a 2.5 for level of promise. The main concerns were about longer-term sustainability, low reach relative to prevalence of the problem, and the difficulties associated with demonstrating impact given the type of support on offer. None of this is a reflection on individual team members who are simply first-class - committed, talented, and brilliant partners. Whereas the service in its current form has limitations, we are keen to explore how certain activities (e.g. housing training for early years practitioners) can be maintained.
<b>DOMESTIC VIOLENCE ENHANCED CASEWORK</b>		 Stresses			LEAP's Domestic Violence Enhanced Casework Service received a 3 for level of promise. There remains a concern about the feasibility of sustaining and expanding the service over the

## INDIVIDUAL LEAP SERVICES LEVELS OF PROMISE



Service name	Partner(s)	Theme	Service description	Level of promise	Explanation of promise
	The Gaia Centre (Refuge)		<i>Enhanced casework support for local LEAP families at risk of or experiencing domestic violence.</i>		longer-term, and new referrals from community settings appear to have been limited. Individual staff members are capable, principled and deeply impressive and it is clear the Gaia Centre is a vital local asset.



# The LEAP Roadmap to 2025

Below, we present our LEAP Roadmap to the end of the programme in the form of two charts and two tables.

- The first chart (LEAP's Provisional Delivery Schedule), which starts on p. 46, illustrates how long each service is expected to run for, where costs will be covered completely by LEAP, and where financial contributions from partners are required to help meet costs.
- The second chart (LEAP Services by Domain and domain-level Outcome Areas), which is on p. 50, shows how every LEAP service will contribute to meeting outcomes within our Domains and 'Areas of focus'.
- The first table (LEAP Services Budget Forecast), which is on p. 52, presents a full provisional budget breakdown for LEAP services covering the five-year period. Figures given in brackets denote required partner contributions.
- The second table (LEAP Service Goals), which starts on p. 53, provides headline goals attached to every service. We have chosen to show not just how long each service is expected to run for (subject to engagement and outcomes), and how much resource they are expected to receive (again subject to the above), but also what we expect services to achieve with this additional time and investment.

## LEAP's Provisional Delivery Schedule

The task of proposing a LEAP Delivery Schedule based on the level of promise demonstrated by individual services is not wholly straightforward. Indeed, it is possible to translate these levels of promise into alternative evolving portfolios with quite different shapes and configurations of services. We have explored and broadly modelled two examples below.

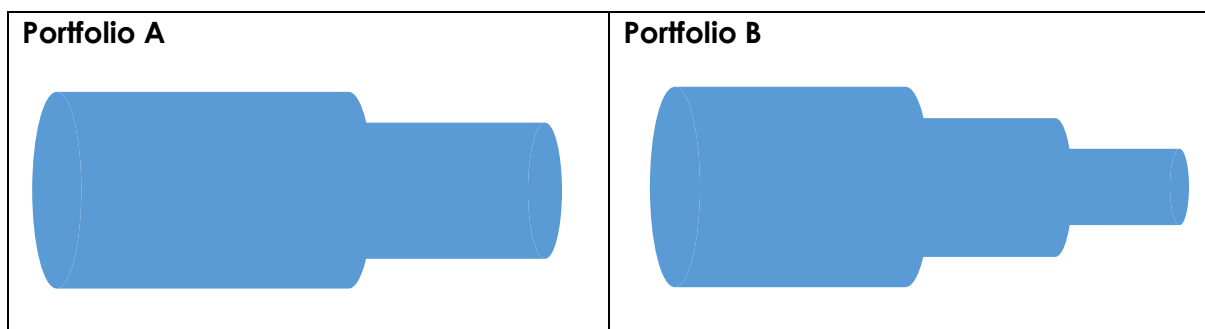
**Portfolio A** works on the basis that a large proportion (well over half) of our services warrant a further prolonged spell of delivery with a sharper focus on outcomes. It uses the levels of promise exercise to stop some of our less promising services. However, continued funding is proposed for those services that are seen to have exceeded a minimum threshold (over three circles, with longer-term funding for those services securing three and a half circles or more).

This approach has several advantages. First, it is sensitive to LEAP's role as both a platform for individual services and a single integrated offer. By retaining medium ranking and high-ranking services, we are in a better position to explore how a bundle of services interact and complement one another. Second, it establishes a fairly stable LEAP portfolio for much of the programme's second half. This is critical so that we can evaluate our integrated pathways (with large numbers of services working in conjunction) over an extended period of time, and so that we can clearly define what constitutes the LEAP offer. Third, this approach recognises the limitations of our approach to judging service promise and makes less fine-grained decisions based on these judgements. A disadvantage to this model is that it will be difficult given available resources to provide a LEAP-funded portfolio of this breadth right to the end of ten years.

**Portfolio B** works on the basis of a more funnelled approach. Some services are stopped over the next year and then a further tranche of services is stopped at a later point. In essence, the portfolio is whittled down to just a handful of services (likely 3-5 services) for the final couple of years. One advantage here is that this would enable us to maintain a portfolio for the entire ten years of the *A Better Start* initiative. It also results in us prioritising a small number of (hopefully) very high-quality services. The disadvantages are that our portfolio for the final two years would be very limited and would not adhere to LEAP's Portfolio Principles.

Moreover, our portfolio would be constantly changing and would lack the stability needed for proper evaluation and learning, and we may have little time to properly learn about and evaluate our integrated pathways before they risk being scaled back.

On balance, we have decided to move forward with **Portfolio A**. As the proposed Delivery Schedule (p. 42) shows, LEAP service delivery (where LEAP funds make up at least half of the overall delivery costs for every service) will run until the 31 March 2024. This will be nine years since the programme's start and leaves just under four full financial years of LEAP-funded delivery. This represents an accommodation between our desire to stretch delivery over more years and our wish to maintain LEAP's purpose as a network of services with adequate breadth and depth to work across children's early lives. This approach also delivers the stability and consistency that will be necessary to properly learn about and evaluate LEAP as a whole.



In total, we expect a minimum of 15 services (out of 23 services in total) to run until the year nine point, with four other services expected to run for a minimum of two further years (to the end of March 2022 or the year seven point). Over three quarters of LEAP services will therefore be continuing to deliver for at least another two years.

### **LEAP Services by Domain and domain-level Outcome Areas**

This chart explicitly links our planned services with LEAP's Domains and domain-level Outcome Areas as highlighted in Section One's Programme Theory of Change. It shows the changes LEAP wants to help bring about and the combinations of services that LEAP is relying on to help achieve these changes (non-LEAP services that directly contribute to our theory of change are shown in italics).

### **LEAP Services Budget Forecast**

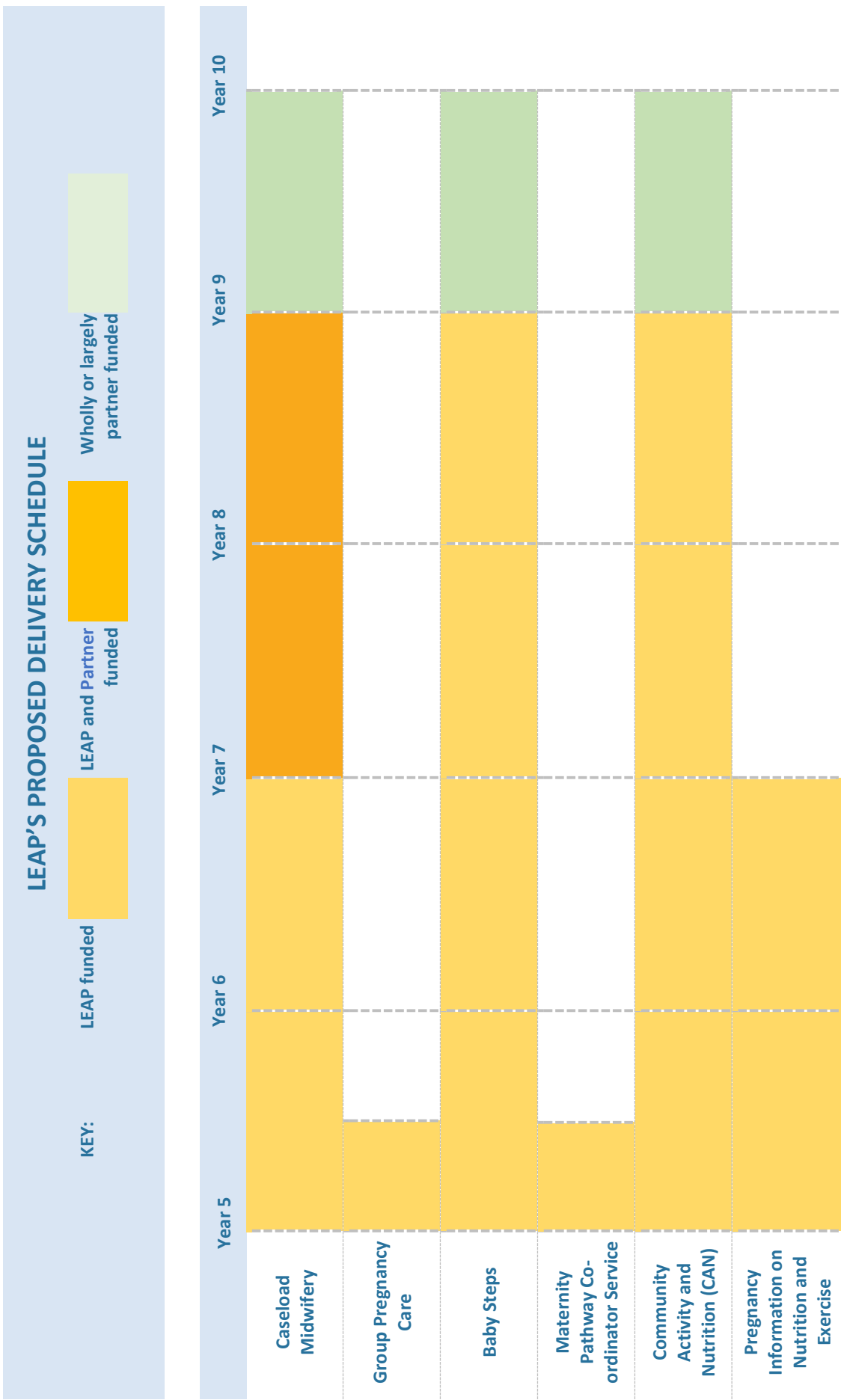
The LEAP Services Budget Forecast (p.46) provides an extra layer of detail through year-on-year funding totals for each service area. It also shows the year-on-year funding split between LEAP and partners where running costs are shared. By providing these forecasts to the end of the programme, we hope to give partners greater certainty about the duration and value of LEAP funding (subject to engagement and outcomes) and ensure commissioners can plan effectively for LEAP's legacy.

### **LEAP Service Goals**

Finally, our LEAP Service Goals (p.47) emphasise the goals we expect to realise in each service area given the expected delivery schedule and budget forecasts. Largely, these

focus on reach, participation and retention; data collection and particularly outcomes data collection; and our expectation that high numbers of participants are routinely referred or signposted to other services. There is overlap across services but for transparency we have documented these in full. These goals cover both outputs and outcomes.

**Chart 1 - LEAP's Provisional Delivery Schedule**



## LEAP'S PROPOSED DELIVERY SCHEDULE

KEY:

LEAP funded



LEAP and Partner funded



Wholly or largely partner funded



	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10
Breastfeeding Peer Support	LEAP funded	LEAP funded	LEAP funded	LEAP and Partner funded	Wholly or largely partner funded	Wholly or largely partner funded
Family Nutrition Service	LEAP funded	LEAP funded	LEAP funded	LEAP and Partner funded	Wholly or largely partner funded	Wholly or largely partner funded
LEAP Into Healthy Living	LEAP funded	LEAP and Partner funded	LEAP and Partner funded	LEAP and Partner funded	Wholly or largely partner funded	Wholly or largely partner funded
Oral Health Support Service	LEAP funded	LEAP funded	LEAP funded	LEAP and Partner funded	Wholly or largely partner funded	Wholly or largely partner funded
LEAP Health Team	LEAP funded	LEAP funded	LEAP funded	LEAP and Partner funded	Wholly or largely partner funded	Wholly or largely partner funded
Family Nurse Partnership	LEAP funded	LEAP funded	LEAP funded	LEAP and Partner funded	Wholly or largely partner funded	Wholly or largely partner funded

## LEAP'S PROPOSED DELIVERY SCHEDULE

KEY:

LEAP funded



LEAP and Partner funded



Wholly or largely partner funded



	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10
Parent and Infant Relationship Service (PAIRS)	LEAP funded	LEAP funded	LEAP and Partner funded	LEAP and Partner funded	Wholly or largely partner funded	Wholly or largely partner funded
Empowering Parents Empowering Communities	LEAP funded	LEAP funded	LEAP and Partner funded	LEAP and Partner funded	Wholly or largely partner funded	Wholly or largely partner funded
Enhanced Speech and Language Therapy	LEAP funded	LEAP funded	LEAP and Partner funded	LEAP and Partner funded	Wholly or largely partner funded	Wholly or largely partner funded
Raising Early Achievement in Literacy (REAL)	LEAP funded	LEAP funded	LEAP and Partner funded	LEAP and Partner funded	Wholly or largely partner funded	Wholly or largely partner funded
Doorstep Library	LEAP funded	LEAP funded	LEAP and Partner funded	LEAP and Partner funded	Wholly or largely partner funded	Wholly or largely partner funded
Natural Thinkers	LEAP funded	LEAP funded	LEAP and Partner funded	LEAP and Partner funded	Wholly or largely partner funded	Wholly or largely partner funded

## LEAP'S PROPOSED DELIVERY SCHEDULE

KEY:

LEAP funded



LEAP and Partner funded

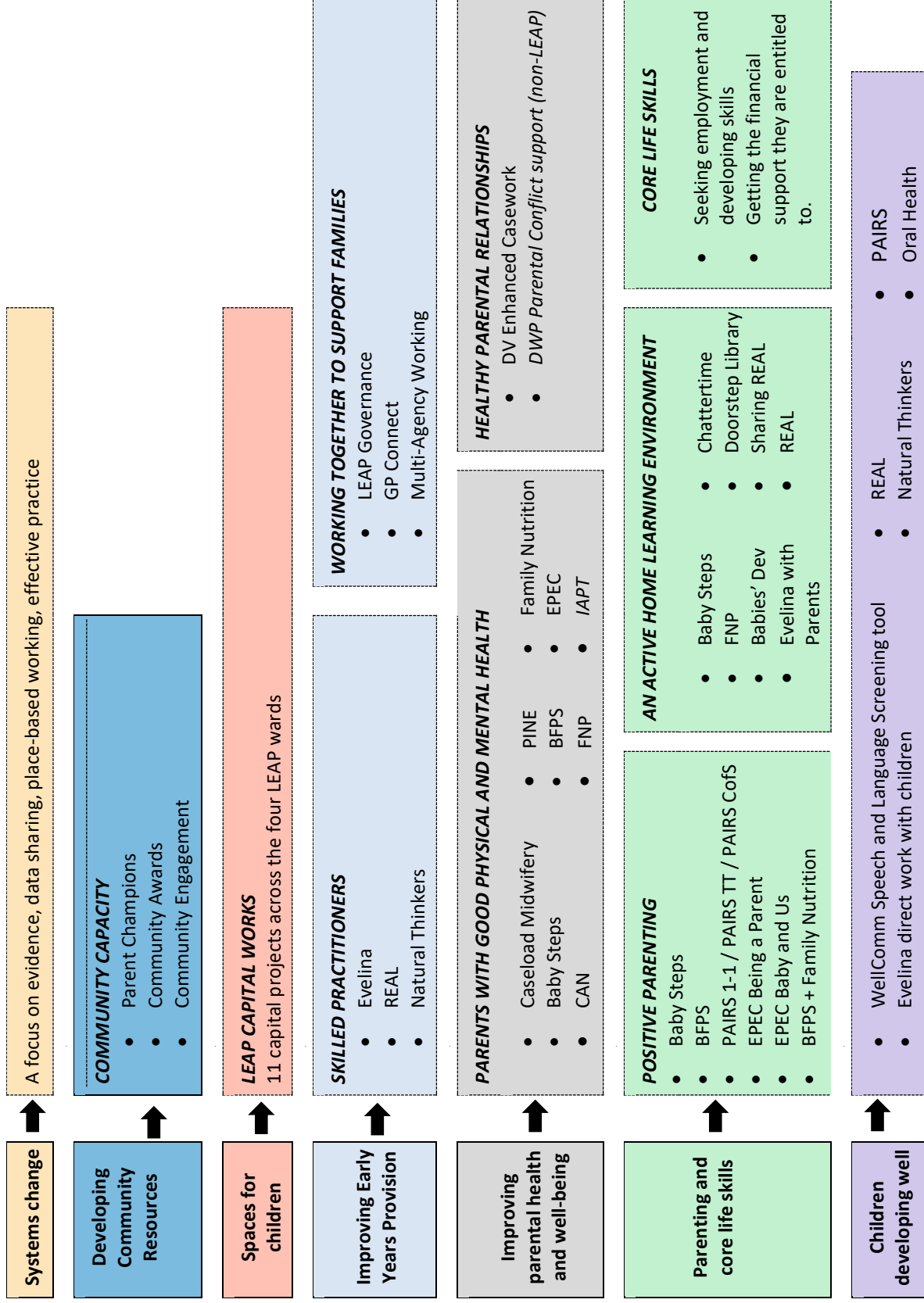


Wholly or largely partner funded



	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10
Parent Champions	LEAP funded	LEAP funded	LEAP funded	LEAP and Partner funded	LEAP and Partner funded	Wholly or largely partner funded
Community Engagement	LEAP funded	LEAP funded	LEAP funded	LEAP and Partner funded	LEAP and Partner funded	Wholly or largely partner funded
Domestic Violence Groups						
Overcrowded Housing Support Service	LEAP funded					
Domestic Violence Enhanced Casework	LEAP funded	LEAP funded	LEAP funded	LEAP and Partner funded	LEAP and Partner funded	Wholly or largely partner funded

**LEAP Services by Domain and domain-level Outcome Area**





## LEAP BUDGET FORECASTS

Service name	Year 6	Year 7	Year 8	Year 9	Year 10
CASELOAD MIDWIFERY	413,268	421,533	322,500 (100,00)	214,982 (200,000)	/
GROUP PREGNANCY CARE	174,083	/	/	/	/
BABY STEPS	292,297	298,143	304,106	310,188	/
MATERNITY PATHWAY COORDINATORS	40,000	/	/	/	/
COMMUNITY ACTIVITY AND NUTRITION	220,305	225,352	262,499	267,749	/
PREGNANCY INFORMATION ON NUTRITION AND EXERCISE	33,000	33,000	/	/	/
BREASTFEEDING PEER SUPPORT	40,807	41,623	42,456	43,305	/
COMMUNITY NUTRITION SERVICE	80,000	81,600	/	/	/
LEAP INTO HEALTHY LIVING	174,192	150,000	104,500	104,500	/
ORAL HEALTH SUPPORT SERVICE	81,817	82,923	84,051	85,202	/
GP CONNECT	51,446	51,446	/	/	/
FAMILY NURSE PARTNERSHIP	166,236	169,561	102,000 (70,000)	86,476 (90,000)	/
PARENT AND INFANT RELATIONSHIP SERVICE	342,057	342,057	348,625	355,324	/
EMPOWERING PARENTS EMPOWERING COMMUNITIES	60,000	60,000	60,000	60,000	/
ENHANCED SPEECH AND LANGUAGE THERAPY	322,382	300,000	300,000	300,000	/
RAISING EARLY ACHIEVEMENT IN LITERACY	123,667	125,127	126,617	128,136	/
DOORSTEP LIBRARY	83,806	66,000	/	/	/
NATURAL THINKERS	48,189	49,153	49,153	49,153	/
PARENT CHAMPIONS	147,839	150,796	153,812	156,888	/
COMMUNITY ENGAGEMENT	353,467	355,467	355,467	355,467	/
DOMESTIC VIOLENCE GROUPS	/	/	/	/	/
OVERCROWDED HOUSING SUPPORT SERVICE	100,144	/	/	/	/
DOMESTIC VIOLENCE ENHANCED CASEWORK	153,392	156,000	156,000	156,000	/

## LEAP SERVICE GOALS

Service name	Domain and [Area of focus]	Expected LEAP end date	Service goals
Caseload Midwifery	Parents' Health and Wellbeing [Parents with good physical and mental health]	31 March 2024	<ul style="list-style-type: none"> <li>➤ To have provided outstanding continuity of care by a named midwife and a small team for between 150 and 250 LEAP women per financial year (with increases each year so that we are reaching 250 women per year by 2023/24) and to have prioritised women with high needs.</li> <li>➤ To have routinely collected high-quality data on every participant throughout their maternity journey, so we can draw detailed conclusions about impact.</li> <li>➤ To have acted as a gateway to the LEAP Programme and ensured almost every woman is referred or signposted to other LEAP services.</li> <li>➤ To have demonstrated positive impact on a range of outcome areas including parental physical and mental health, child birth outcomes, and breastfeeding initiation and sustainment.</li> </ul>
Baby Steps	Parenting and core life skills [Positive Parenting]	31 March 2024	<ul style="list-style-type: none"> <li>➤ To have supported at least 180 LEAP families per financial year to attend the Baby Steps course (with at least 75 percent of participating families completing six or more of the nine sessions).</li> <li>➤ To have ensured at least half the families starting Baby Steps had high needs and that these families were as likely as other families to complete six or more of the nine sessions.</li> <li>➤ To have collected high-quality data on every participating family throughout their engagement with Baby Steps, so we can draw detailed conclusions about impact.</li> <li>➤ To have worked as part of an integrated pathway of services and ensured almost all families are referred or signposted to other LEAP services.</li> </ul>

## LEAP SERVICE GOALS

Service name	Domain and [Area of focus]	Expected LEAP end date	Service goals
			<ul style="list-style-type: none"> <li>➤ <i>To have demonstrated positive impact on a range of outcome areas including parental health and wellbeing, positive parenting, and an active home learning environment.</i></li> </ul>
Community Activity and Nutrition (CAN)	<i>Parents' Health and Wellbeing [Parents with good physical health]</i>	<b>31 March 2024</b>	<ul style="list-style-type: none"> <li>➤ <i>To have supported approximately 120 eligible LEAP women per financial year to successfully complete the Community Activity and Nutrition Service.</i></li> <li>➤ <i>To have collected high-quality data on every participant throughout their engagement with CAN and at 6-months postnatally, so we can draw detailed conclusions about impact.</i></li> <li>➤ <i>To have worked as part of an integrated pathway of services and ensured almost all participants are referred or signposted on to other LEAP services.</i></li> <li>➤ <i>To have demonstrated positive impact on a range of outcome areas including parental health and wellbeing and child birth outcomes.</i></li> </ul>
Pregnancy Information on Nutrition and Exercise	<i>Parents' health and Wellbeing [Parents with good physical health]</i>	<b>31 March 2021</b>	<ul style="list-style-type: none"> <li>➤ <i>To have run over 30 workshops for pregnant women.</i></li> <li>➤ <i>To have collected high-quality data on every participant, so we can collate and learn from women's feedback about the workshops.</i></li> <li>➤ <i>To have signposted participants to our wider network of LEAP services.</i></li> </ul>

## LEAP SERVICE GOALS

Service name	Domain and [Area of focus]	Expected LEAP end date	Service goals
Breastfeeding Peer Support	Parenting and core life skills [Positive Parenting]	31 March 2024	<ul style="list-style-type: none"> <li>➤ To have supported over 120 LEAP women per year with their breastfeeding needs.</li> <li>➤ To have collected high-quality data on every participant throughout their engagement with the service and at appropriate follow-up points, so we can draw detailed conclusions about impact.</li> <li>➤ To have worked as part of an integrated pathway of services and ensured almost all families are referred or signposted on to other LEAP services.</li> <li>➤ To have supported some women to initiate and sustain breastfeeding who would not otherwise have done so.</li> </ul>
Family Nutrition Service	Parenting and core life skills [Positive Parenting]	31 March 2021	<ul style="list-style-type: none"> <li>➤ To have run over 200 workshops for local families and to have provided individual nutritional support and advice to over 100 LEAP families.</li> <li>➤ To have collected high-quality data from participants about the service, so we can draw detailed conclusions about user satisfaction and impact.</li> <li>➤ To have demonstrated positive impact on a range of outcome areas including positive parenting and children's diet and nutrition.</li> </ul>
LEAP Into Healthy Living			<ul style="list-style-type: none"> <li>➤ To have established and maintained a well-attended network of healthy living activities in community venues across LEAP.</li> </ul>

## LEAP SERVICE GOALS

Service name	Domain and [Area of focus]	Expected LEAP end date	Service goals
		31 March 2024	<ul style="list-style-type: none"> <li>➤ To have collected high-quality data on every participant throughout their engagement with the service, so we can draw detailed conclusions about impact.</li> <li>➤ To have worked as part of an integrated pathway of services and ensured almost all participants are referred or signposted on to other LEAP services.</li> <li>➤ To have demonstrated positive impact on a range of outcome areas related to children's diet and nutrition.</li> </ul>
Oral Health Support Service	Parental and core life skills [Positive Parenting]	31 March 2024	<ul style="list-style-type: none"> <li>➤ To have embedded supervised toothbrushing schemes in at least 20 local early years settings.</li> <li>➤ To have given out over 500 toothbrushing packs to LEAP one-year olds every year.</li> <li>➤ To have improved support for young children in local dental practices.</li> <li>➤ To have collected high-quality data on every participant throughout their engagement with the service, so we can draw detailed conclusions about impact.</li> <li>➤ To have worked as part of an integrated pathway of services and ensured almost every participant is referred or signposted on to other LEAP services.</li> <li>➤ To have demonstrated positive impact on a range of outcome areas including children's oral health and positive parenting.</li> </ul>

## LEAP SERVICE GOALS

Service name	Domain and [Area of focus]	Expected LEAP end date	Service goals
LEAP Health Team	Improving early years services [Practitioners working together to support families]	31 March 2022	<ul style="list-style-type: none"> <li>➤ To have completed further pilot phases of the GP Connect service.</li> <li>➤ To have evaluated MatVat and set out next steps for the tool.</li> <li>➤ To have supported LEAP services to become embedded within local referral pathways.</li> </ul>
Family Nurse Partnership	Parenting and core life skills [Positive Parenting] Parental Health and Wellbeing [Good parental mental health]	31 March 2024	<ul style="list-style-type: none"> <li>➤ To have supported approximately 36 high-need LEAP families per financial year through structured home visits and group sessions.</li> <li>➤ To have collected high-quality data on every participant throughout their engagement with the service, so we can draw detailed conclusions about impact.</li> <li>➤ To have worked as part of an integrated pathway of services and ensured almost all participants are referred or signposted on to other LEAP services.</li> <li>➤ To have demonstrated positive impact on a range of outcome areas including positive parenting, an active home learning environment, and parental health and wellbeing.</li> </ul>
Parent and Infant			

## LEAP SERVICE GOALS

Service name	Domain and [Area of focus]	Expected LEAP end date	Service goals
Relationship Service (PAIRS)	Parenting and core life skills [Positive Parenting]	31 March 2024	<ul style="list-style-type: none"> <li>➤ To have supported at least 40 high-need LEAP families per financial year as part of our one-to-one Parent Infant Psychotherapy offer.</li> <li>➤ To have supported 80 LEAP families with early signs of insecure attachment per financial year through PAIRS Together Time and Circle of Security Groups (with at least 75 percent of families completing these courses).</li> <li>➤ To have collected high-quality data on every participant throughout their engagement with PAIRS, so we can draw detailed conclusions about impact.</li> <li>➤ To have worked as part of an integrated pathway of services and ensured almost all families are referred or signposted on to other LEAP services.</li> <li>➤ To have demonstrated positive impact on a range of outcome areas including positive parenting and secure parent-child attachment.</li> </ul>
Empowering Parents Empowering Communities		31 March 2024	<ul style="list-style-type: none"> <li>➤ To have supported over 100 LEAP families with high needs per financial year through the Empowering Parents Empowering Communities course (with at least 75 percent of families completing the course).</li> <li>➤ To have collected high-quality data on every participant throughout their engagement with the service, so we can draw detailed conclusions about impact.</li> <li>➤ To have worked as part of an integrated pathway of services and ensured almost all participants are referred or signposted on to other LEAP services.</li> </ul>

## LEAP SERVICE GOALS

Service name	Domain and [Area of focus]	Expected LEAP end date	Service goals
Enhanced Speech and Language Therapy	<p>Parenting and core life skills [An active home learning environment]</p> <p>Improving early years services [Highly-skilled practitioners]</p>	31 March 2024	<ul style="list-style-type: none"> <li>➤ To have demonstrated positive impact on a range of outcome areas including positive parenting and parental health and wellbeing.</li> <li>➤ To have supported over 20 local early years settings to achieve an Evelina Award and maintain their good practice (with settings using the Wellcomm tool to assess all children, referring those scoring RED, and developing packages of support for those scoring AMBER).</li> <li>➤ To have provided direct child or family level speech and language support to at least 70 LEAP children per year who scored AMBER on the Wellcomm tool.</li> <li>➤ To have established and maintained a network of weekly Baby Chattertime and Chattertime Groups across the LEAP area, serving hundreds of LEAP children every quarter.</li> <li>➤ To have collected high-quality data on every participant throughout their engagement with the service, so we can draw detailed conclusions about impact.</li> <li>➤ To have worked as part of an integrated pathway of services and ensured children and families are referred on to specialist or other LEAP services.</li> <li>➤ To have demonstrated positive impact on a range of outcome areas including an active home learning environment and highly-skilled practitioners.</li> </ul>



## LEAP SERVICE GOALS

Service name	Domain and [Area of focus]	Expected LEAP end date	Service goals
<p>Raising Early Achievement in Literacy (REAL)</p>	<p><i>Parenting and core life skills [An active home learning environment]</i></p> <p><i>Improving early years services [Highly-skilled practitioners]</i></p>	<p>31 March 2024</p>	<ul style="list-style-type: none"> <li>➤ <i>To have supported over 150 high-need LEAP families per year through either our home visiting service or parent support course.</i></li> <li>➤ <i>To have collected high-quality data on every participant throughout their engagement with REAL, so we can draw detailed conclusions about impact.</i></li> <li>➤ <i>To have worked as part of an integrated pathway of services and ensured almost all participants are referred or signposted on to other LEAP services.</i></li> <li>➤ <i>To have demonstrated positive impact on a range of outcome areas including an active home learning environment and highly-skilled practitioners.</i></li> </ul>
<p>Doorstep Library</p>	<p><i>Parenting and core life skills [An active home learning environment]</i></p>	<p>31 March 2022</p>	<ul style="list-style-type: none"> <li>➤ <i>To have supported over 80 families per year from local LEAP estates.</i></li> <li>➤ <i>To have collected high-quality data on every participant throughout their engagement with the service, so we can draw detailed conclusions about impact.</i></li> <li>➤ <i>To have referred or signposted almost all families on to other LEAP services.</i></li> <li>➤ <i>To have demonstrated positive impact on a range of outcome areas including an active home learning environment.</i></li> </ul>

## LEAP SERVICE GOALS

Service name	Domain and [Area of focus]	Expected LEAP end date	Service goals
Natural Thinkers	Improving early years services [Highly-skilled practitioners]	31 March 2024	<ul style="list-style-type: none"> <li>➤ To have supported over 20 local early years settings to embed Natural Thinkers best practice.</li> <li>➤ To have collected high-quality data on every participant throughout their engagement with the service, so we can draw detailed conclusions about impact.</li> <li>➤ To have worked as part of an integrated pathway of services and ensured high numbers of participants are referred or signposted on to other LEAP services.</li> <li>➤ To have demonstrated positive impact on a range of outcomes areas including children's wellbeing and highly-skilled practitioners.</li> </ul>
Parent Champions	Developing Community Resources	31 March 2024	<ul style="list-style-type: none"> <li>➤ To have demonstrated that the Parent Champion Service can retain over 30 active Parent Champions at any one time and that these Parent Champions can consistently engage with very high numbers of local parents.</li> <li>➤ To have shown that Parent Champions are frequently cited by local parents as a key source of information about local early years services.</li> <li>➤ To have shown that over 30 women with young babies who are isolated or at risk of isolation can be effectively supported per year by the Parent Champion Befriending Service.</li> </ul>
Overcrowded Housing		30	<ul style="list-style-type: none"> <li>➤ To have designed a training offer for early years practitioners across the borough.</li> </ul>

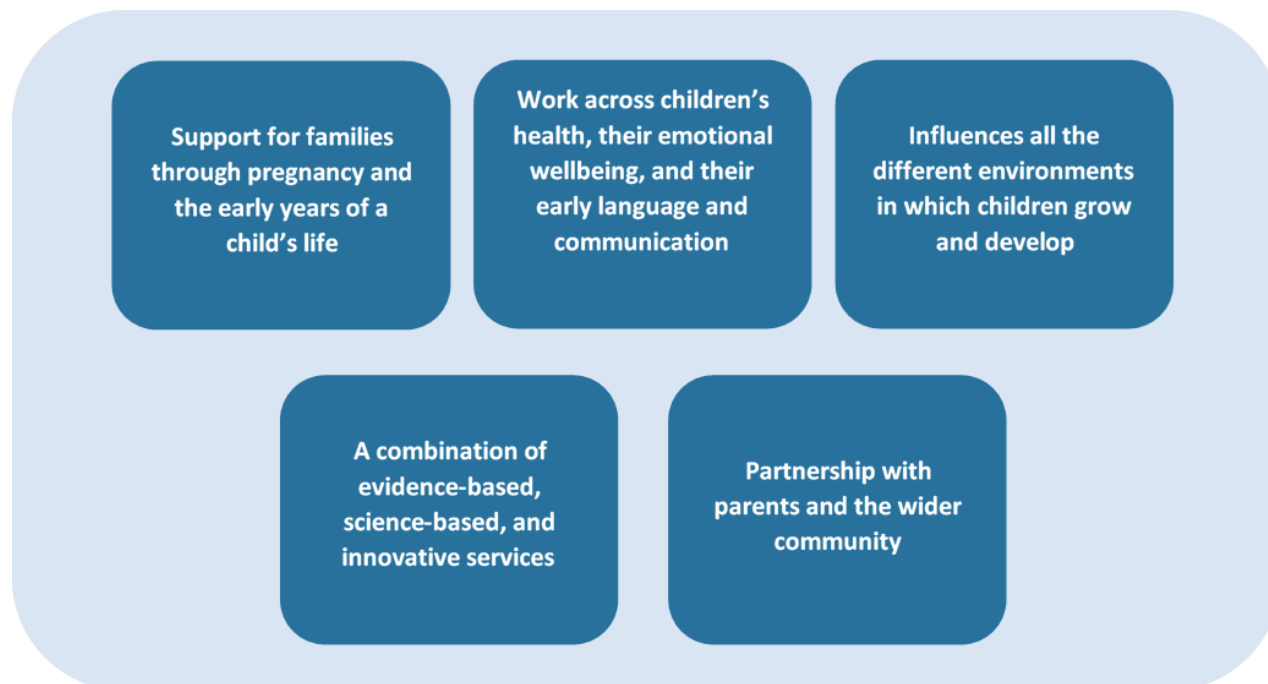
## LEAP SERVICE GOALS

Service name	Domain and [Area of focus]	Expected LEAP end date	Service goals
Support Service		30 November 2020	
Domestic Violence Enhanced Casework	<i>Parental Health and Wellbeing [Family Relationships]</i>	31 March 2024	<ul style="list-style-type: none"> <li>➤ To have supported over 40 LEAP women per year who have experienced DV.</li> <li>➤ To have worked as part of an integrated pathway of services and ensured families are referred on where appropriate to wider LEAP services.</li> <li>➤ To have demonstrated positive impact on a range of outcome areas including parental wellbeing and DV survivors getting the support they need.</li> </ul>

## Taking stock of LEAP's overall portfolio

Here, we consider our overall portfolio. The purpose is to take stock of LEAP as a single integrated offer. First, we explore the extent to which LEAP's evolving portfolio incorporates all our Portfolio Principles as recapped in Figure 9. Second, we show the approximate annual reach of LEAP's services and service clusters as a way of understanding the scale of change that our work may be able to help demonstrate.

**Figure 9 - LEAP's Portfolio Principles**

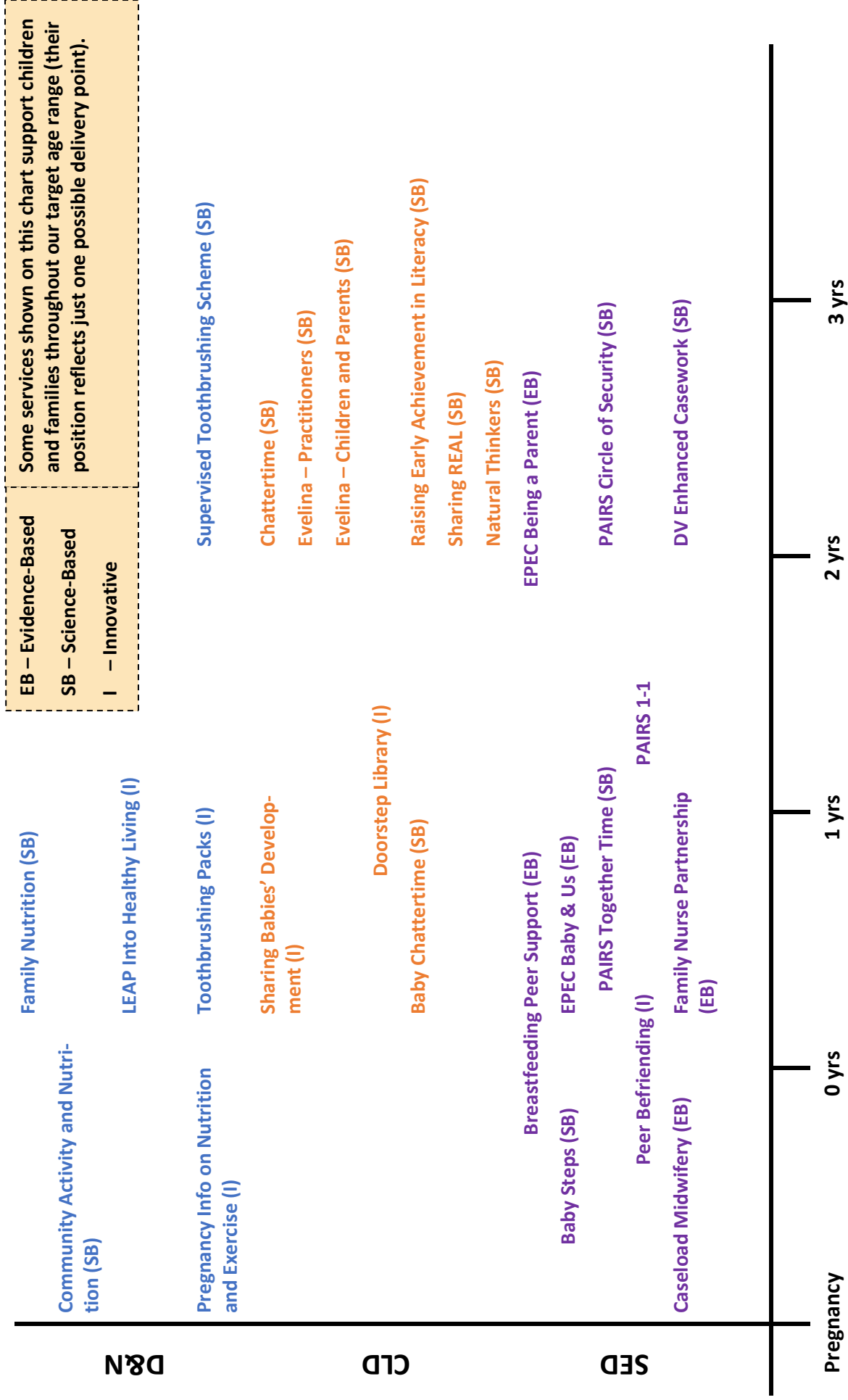


### **LEAP's Portfolio**

LEAP's planned portfolio for the second half of the programme is largely consistent with our Portfolio Principles. As Chart 7 on the next page demonstrates, LEAP spans the key stages of early childhood; works across children's social and emotional development, communication and language, and diet and nutrition; and comprises evidence-based, science-based, and innovative services. Whilst not shown in Chart 7, LEAP services also focus on the different domains of early childhood influence, incorporating direct work with children, parenting and core life skills, parents' health and well-being, local service provision, spaces for children, community resources, and wider systems. The entire programme is underpinned by parental partnership as seen in the LEAP Parent Champions and our Community Engagement Strategy.

Despite this, LEAP's portfolio has one significant limitation. With regard to our work on improving parents' core life skills and health and well-being, we do not have many services that directly address the economic hardships faced by local families. This is of particular concern given the looming recession and rises in unemployment anticipated as part of the post-Covid recovery phase. Clearly, there are limits to what a community place-based initiative can do when national and local economic and welfare policy levers sit elsewhere. Nonetheless, we believe it is possible for LEAP to play a greater connective role. *In the coming months, LEAP will therefore carry out a mapping exercise of local employment and benefits advice and support so that any families we work with can be readily signposted to these services.*

Chart - The scope of LEAP's Portfolio

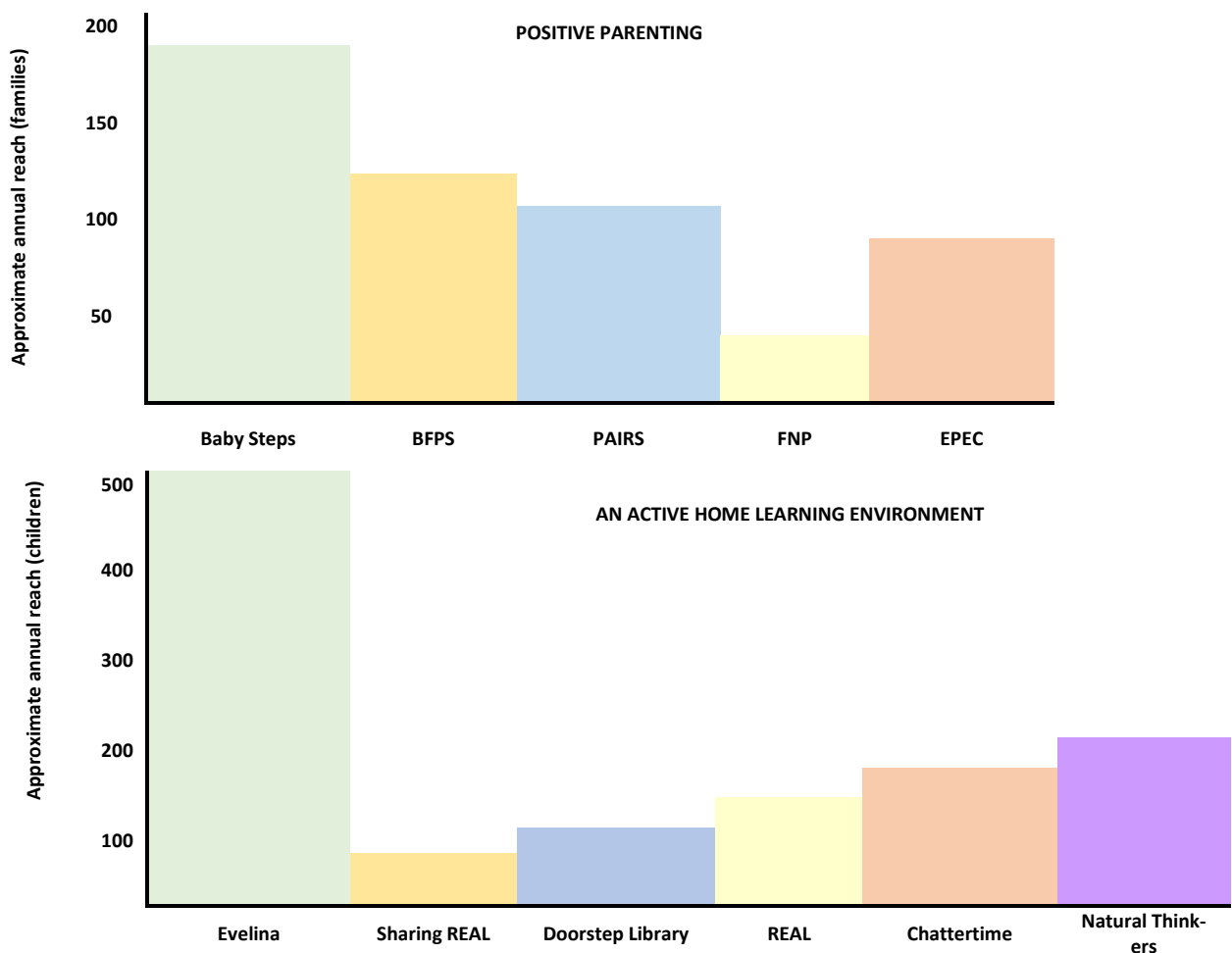


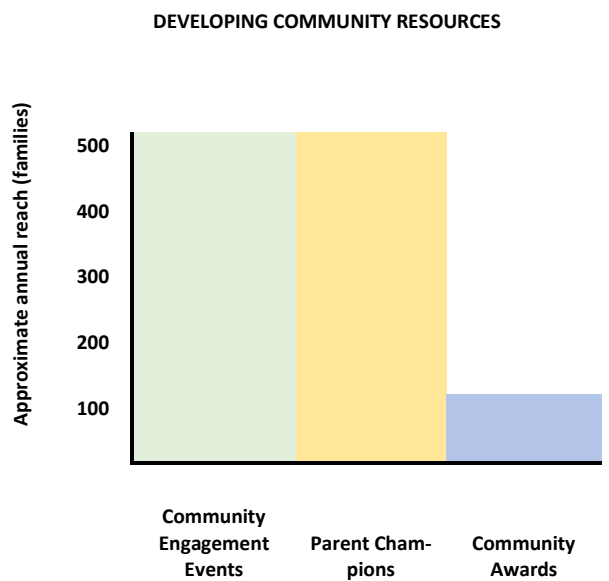
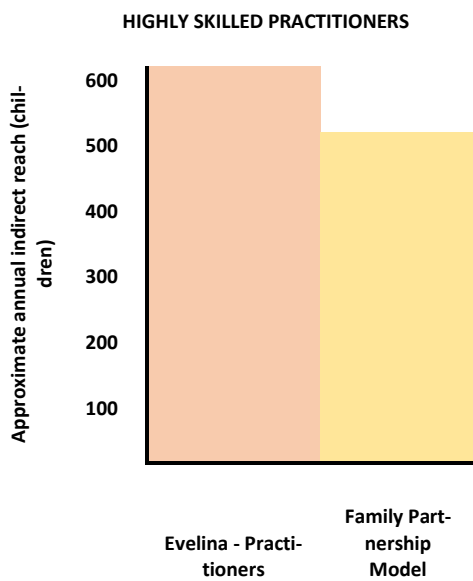
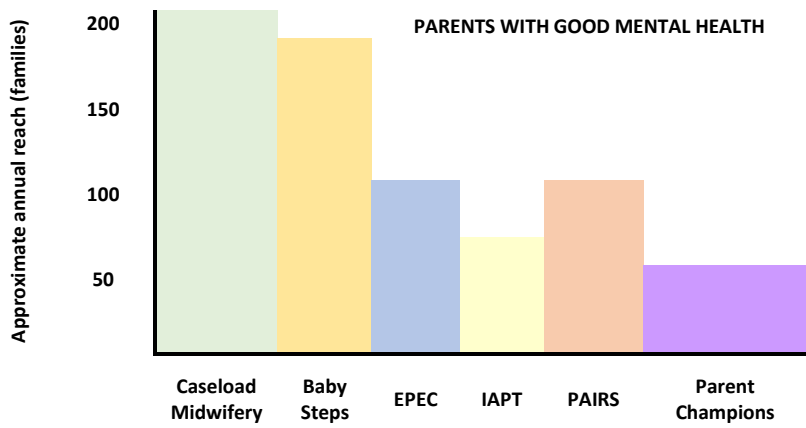
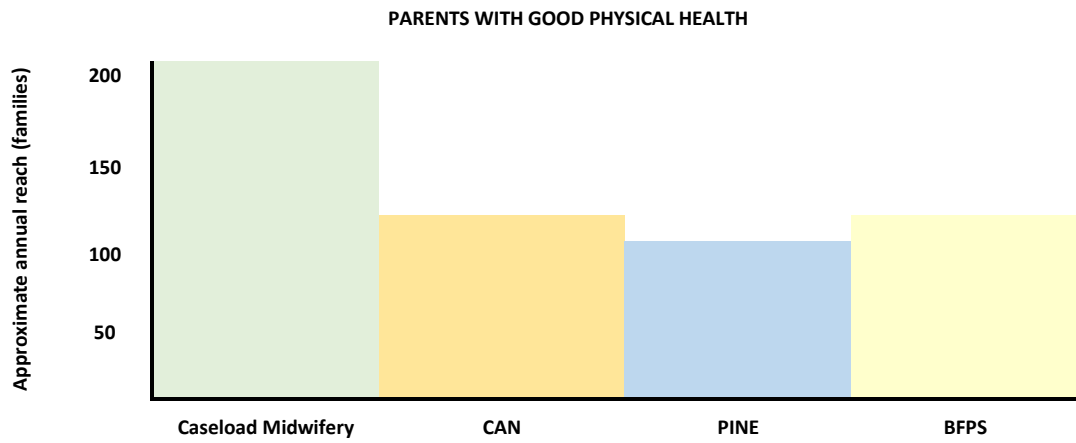
## LEAP's Reach

Figure 10 below shows the approximate annual reach of some of LEAP's individual services (based on delivery before the Covid-crisis and lockdown). Each service is shown in a cluster based on a domain-level 'Area of focus'. Evidently, LEAP has significant reach across a wide-range of areas. We have some services with the potential to influence very large numbers (over 500) children and families every year such as the Evelina Speech and Language Award, the Family Partnership Model, and our programme of community engagement activities. We have services that reach nearly 200 children and families per year (Caseload Midwifery, Baby Steps and Family Nutrition) and other services that consistently reach around 100 children and families per year (Community Activity and Nutrition, Breastfeeding Peer Support, Raising Early Achievement in Literacy, Natural Thinkers).

To put these figures in context, there are approximately 3000 LEAP families at any one time. Each age bracket (0-1 years, 1-2 years etc) has around 700 children. There are around 30 percent of LEAP children each year who do not reach expected standards in communication and language development at age five (approximately 210 children). Likewise, there are around 30 percent of LEAP children who do not reach expected standards in social and emotional development at age five (again approximately 210 children). Finally, there are around 20 percent of LEAP children who are overweight or obese at age five (approximately 140 children).

From this, we can see that LEAP does have the potential to make a difference for a significant proportion of local children who are at risk of not meeting expected standards. However, to do this we need to systematically focus our targeted services on children and families with the greatest needs. *Throughout the second half of the programme, LEAP will work with all our services to ensure they are engaging and retaining those with most to gain.*





## Conclusion

Whereas Part A described the rationale, and Part B outlined the methods, Part C presents the results. As part of this, individual LEAP services are given a 'Level of Promise' rating. Our proposed Delivery Schedule shows how long services will run for and where partner contributions are necessary to support costs. Individual services are presented in their domain-level outcome area clusters. LEAP budget forecasts provide an extra layer of detail in the form of year-by-year funding totals. Service goals are clarified in the context of likely delivery timetables and available resources. Finally, we take stock of the portfolio as a whole and consider where additional steps may be necessary so that LEAP is best placed to honour our portfolio principles and maximise the effect of our reach.



# APPENDICES

## Appendix 1 - Programme Goals

### LEAP Programme Goals

**Over the ten years of the programme, LEAP aims to:**

- Support over 10,000 local babies and children.
- Invest in and strengthen local partnership working that is focused on promoting positive early childhood development through less bureaucratic and more joined-up services.
- Create better opportunities for parents and the wider community to co-produce local early years services with professionals.

**During the programme's second half (2020-2025), LEAP will:**

- Oversee the delivery at scale of promising individual services that support local families during pregnancy and/or the early years of a child's life.
- Demonstrate that these promising individual services are having a positive impact on the outcomes of children and/or their families.
- Oversee the delivery at scale of an integrated pathway of services that together support local families through pregnancy and the early years of a child's life.
- Demonstrate that this integrated pathway of services is together having a positive impact on the outcomes of children and their families and reducing local inequalities in child development.

**By the end of the programme, LEAP will:**

- Produce a suite of evaluation and learning reports that set out the key insights from the LEAP programme (both what does and doesn't work) and work with the National Lottery Community Fund to effectively disseminate these messages.
- Secure a legacy for LEAP's work in Lambeth so that our learning and practice continues to benefit future generations of children.

## Appendix 2 - Portfolio Principles

### LEAP Portfolio Principles

LEAP is a laboratory for the testing of both individual early years services and a single integrated early years offer. With this in mind, we have recorded below a set of Core Portfolio Principles that we expect LEAP as a whole to embody.

Therefore, whilst we assess the promise of individual services, we must not lose sight of the coherence and shape of the overall LEAP portfolio.

We expect LEAP's portfolio to:

- Support families through pregnancy and the early stages of a child's life (to reflect our belief that children and families need continued support so that interventions build on one another over time).
- Work across children's diet and nutrition, their emotional wellbeing, and their early language and communication (to reflect our conviction that effective early years policy and practice should support the whole child).
- Influence all the different layers that play a role in shaping how children learn and develop (given that the conditions in which parenting takes place, the quality of local child-care settings, and the wider community environment all impact on children's development).
- Comprise a combination of evidence-based, science-based, and innovative services (so that we are trialling new ideas whilst still being strongly informed by the existing evidence-base).
- Represent a partnership with parents and the wider community (given that we need a shared endeavour to improve local early childhood development as opposed to top-down services).

### Appendix 3 - Principles of Good Exits

## LEAP Principles of Good Exits

During the second half of the programme, LEAP (at least as currently constituted and funded) expects to exit from all services and projects. For some services, this will not occur for several years. For other services, this will happen sooner. To ensure each exit is a good exit, we have established several supporting principles.

1. Each service will be able to see - via the LEAP roadmap - their expected end-date, their expected funding allocation for each remaining year of delivery, and the priorities that LEAP would like to see them working towards during this remaining period.
2. Before any exit occurs, each service (practitioners, service leads, and senior managers within host agencies) will be given adequate notice and time to reflect on and synthesise their learning.
3. LEAP will work closely with host agencies so they are aware of likely service end-dates and so they can explore alternative employment options for affected employees.
4. LEAP will carry out Impact Assessments on all decisions to stop delivering services including consideration of the impact on families and the workforce.
5. Each service will benefit from opportunities for practitioners to reflect on both their key learning and the ramifications of this learning for future practice.
6. Our aim is that every single LEAP service will secure a LEAP legacy (this could be the sustainment and scaling of the service over the long-term, the transfer of some particularly effective service element to mainstream provision, or the incorporation of broader learning into the local early years system).
7. Every practitioner will be able to arrange a time to meet or speak with Laura or Chris about any concerns.

**Appendix 4 - LEAP Governance Membership**

<b>LEAP Officers Working Group</b>
Chief Executive, National Children's Bureau
Strategic Director of Children's Services, Lambeth Council
Director of Public Health, Lambeth Council
Assistant Director of Children's Commissioning, Lambeth Council and Lambeth Clinical Commissioning Group
Senior NHS Representative, King's Health Partners
Senior Voluntary Sector Representative
Director of Practice and Programmes, National Children's Bureau
LEAP Director
LEAP Assistant Director

<b>LEAP Partnership Board</b>	
Diana Bankole, Parent Representative (Vassall)	David Grafton, Service Manager, Lambeth CAMHS
Kimberlin Dunkley, Parent Representative (Stockwell)	Clr Donatus Anyanwu (Coldharbour)
Mariam Ibrahim, Parent Representative (Tulse Hill)	Clr Ed Davie (Cabinet Member - Children, LBL)
Michelle Kidd, Parent Representative (Coldharbour)	Clr Emma Nye (Coldharbour)
Ami Mansaray, Parent Representative (Stockwell)	Professor Oteng-Ntim (Consultant Obstetrician, GSTT)
Sylvie-Blanche Nkou, Parent Representative (Tulse Hill)	Clr Jacqui Dyer (Vassall)
Khudeja Rahman, Parent Representative (Vassall)	Laura Griffin (Early Years Commissioning Lead, LBL)
Abi Onaboye, Director of Children's Commissioning, LBL	Clr Lucy Caldicott (Stockwell)
Andrew Eyres, Director, Lambeth CCG	Clr Marica Cameron (Tulse Hill)
Ann Lorek, Consultant Paediatrician, Evelina	Miriam McCarthy (KCH NHS Trust)
Anna Feuchtwang, CEO of the NCB	Clr Mary Atkins (Tulse Hill)
Annamarie Hassall, Director of Practice and Programmes at NCB	Merlin Joseph, Strategic Director Children's Services, LBL
Clr Annie Gallop (Vassall)	Clr Mohamed Hashi (Stockwell)
Clr Ben Kind (Tulse Hill)	Clr Mohamed Jaser (Stockwell)
Bimpe Oki, Public Health Consultant, LBL	Nina Khazaezadeh (Consultant Midwife, GSTT)
Candice James, Manager of Loughborough Community Centre	Clr Gadsby (Vassall)
Cathy Twist, Director of Education, LBL	Dr Rachel Kilner (Local GP)
Damon Tulloch-Foley, Metropolitan Police	Ruth Hutt, Director of Public Health, LBL
Dan Stöten, Assistant Director, Integrated Commissioning (LBL and Lambeth CCG)	Steve Griffin (Stockwell Partnership)
Tracey McCormack (KCH NHS Trust)	Clr O'Hara (Coldharbour)
Sue Pettigrew (St Michael's Fellowship)	Vicki Smith (NLCF)
	Sam Hunt (Policy Officer, LBL)
	Victoria Sherwin (Myatt's Field Park)

## Appendix 5 - Scoring Sheet

### LEAP Roadmap Scoring Sheet

LEAP Service	1. Relationship to the wider evidence base	2. Continuing fit with local needs profile	3. Engagement and feedback from families and/or practitioners	4. Readiness for impact evaluation	5. Likelihood of sustainability	6. Reach as a proportion of target population	7. Contribution to LEAP's wider system	Totals	Ability to adapt model in the event of future lockdowns
Community Activity and Nutrition	4	5	5	5	4	4	4	31	4
Speech and Language Therapy	5	5	5	4	4	4	4	31	4
Baby Steps	4	5	5	5	4	3	4	30	4
Caseload Midwifery	5	5	4	4	4	4	4	30	5
Raising Early Achievement in Literacy (REAL)	4	5	4	4	4	4	4	29	4
PAIRS	4	5	3	4	4	4	4	28	3
Family Nurse Partnership	5	5	4	4	3	4	3	28	4
Oral Health Packs & Supervised Toothbrushing	4	5	4	5	4	3	3	28	2
LEAP into Healthy Living	3	5	4	3	3	4	5	27	4
Natural Thinkers	4	4	4	3	4	4	4	27	3
Parent Champions	3	4	4	3	4	4	5	27	3
Empowering Parents, Empowering Communities	4	4	3	4	4	3	4	26	4
Breastfeeding Peer Support	4	4	4	3	4	4	3	26	4
Community Engagement	3	4	4	3	3	4	5	26	3
Domestic Violence Enhanced Caseworkers	4	5	4	4	3	3	3	26	4
Doorstep Library	4	4	4	4	3	3	3	25	3
Group Pregnancy Care	3	4	3	3	3	3	3	22	2
Overcrowded Housing Support Service	3	4	4	3	2	2	3	21	3
Maternity Pathway Coordinators	3	4	2	1	1	2	2	15	5
Domestic Violence Groups	3	4	1	1	1	1	1	12	2
GP Connect	0	0	0	0	0	0	0	0	5
Pregnancy Information on Nutrition and Exercise	0	0	0	0	0	0	0	0	3
Family Nutrition (HENRY)	0	0	0	0	0	0	0	0	4
LEAP Health team	0	0	0	0	0	0	0	0	5

Guide to scoring: 1 = low; 5 = high

Our overall scoring is based on an assumption that we will gradually, over the next year, return to more 'normal' delivery conditions. If this does not prove possible and we instead face prolonged cycles of lockdown, we have also considered - in the final column - some estimates as to how well-placed each service is to adapt to this new context. We have not used these estimates as part of our wider scoring exercise.

## IMPACT ASSESSMENT RISKS AND MITIGATIONS

Service and expected end date	Impact Assessment Risk	Mitigating Action
<p><b>Domestic Violence Groups</b> <b>1 April 2020</b></p>	<p><b>Risk 1</b> - That the 11 LEAP women who have attended a group (including four Bangladeshi women with Bengali as their home language) cannot find an alternative setting to get this type of support.</p> <p><b>Risk 2</b> - That St Michael's Fellowship cannot re-allocate staff previously working on the groups to other tasks.</p>	<p>Conversations with Gaia and Lambeth Council are underway.</p> <p>Early conversations with St Michael's Fellowship so they have time to explore alternative options.</p>
<p><b>Overcrowded Housing Support Service</b> <b>30 September 2020</b></p>	<p><b>Risk 1</b> - That local families (approximately 62 percent of those previously benefiting from the service have been Black Caribbean or Black African) can no longer access this type of support.</p> <p><b>Risk 2</b> - That Family Housing Advisors previously funded by LEAP cannot find new posts with the local authority structure.</p>	<p>We want all local families with housing and related financial concerns to be able to access high-quality support. We will therefore explore with the local authority the possibility of funding a full-time post to help equip the local early years workforce (who work directly with thousands of local families) with the skills they need to provide immediate housing advice. We will also work to link this advice with wider support through existing Lambeth programmes such as Opportunity Lambeth and the Emergency Support Scheme.</p> <p>Early conversations with the local authority about the likely future of LEAP funding so there is time to explore internal options.</p>
<p><b>Maternity Pathway Coordinator Service</b> <b>30 September 2020</b></p>	<p><b>Risk 1</b> - That some women continue to struggle with navigating the various local maternity services.</p> <p><b>Risk 2</b> - That referrals to some services (such as <i>Pregnancy Information on Nutrition and Energy</i> workshops or <i>Breastfeeding Peer Support</i>) may be impacted negatively by the withdrawal of the Maternity Pathway Coordinator Service.</p> <p><b>Risk 3</b> - That our Maternity Pathway Coordinators struggle to find alternative employment options within the NHS trusts.</p>	<p>LEAP to explore automated text message services.</p> <p>LEAP to encourage cross-referrals and signposting between maternity services and to explore whether an additional half-day or day of recruitment capacity is needed for specific interventions).</p> <p>Early conversations with the NHS trusts so they are aware of the likely duration of LEAP funding and can explore alternative options.</p>

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