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Thrive at Five Year 2 Evaluation Report (2026)

Stoke-on-Trent and Redcar & Cleveland



Centre for
Evidence and
Implementation

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- Generating evidence through trialling, testing, and evaluating policies and programs to drive more effective decisions and deliver better outcomes
- Developing methods and processes to get high quality evidence into policy and practice
- Building cultures for evidence use



Contents

Executive Summary	1
1. Introduction	6
1.1. Introduction to Thrive at Five and the evaluation	6
1.2. The importance of the early years	8
1.3. Place-based approaches to supporting the early years	10
1.4. Thrive at Five delivery	13
1.5. Overview of the national evaluation	16
1.6. Evaluation activity drawn on for this report	18
2. Context in Stoke-on-Trent and Redcar & Cleveland	20
2.1. The Stoke-on-Trent Context	20
2.2. The Redcar & Cleveland context	31
3. Implementation of Thrive at Five in Stoke-on-Trent	36
3.1. Adoption and partnership building	36
3.2. Reach	41
3.3. Acceptability	44
3.4. Feasibility	47
3.5. Accountability and governance	49
3.6. Sustainability	50
3.7. Extending Thrive at Five activity geographically	52
3.8. Insights from internal evaluations	53
4. Implementation of Thrive at Five in Redcar & Cleveland	56

4.1. Adoption	56
4.2. Necessary pre-conditions for adoption and site selection	59
4.3. Partnership building and governance	61
4.4. Reach	63
4.5. Acceptability	64
4.6. Feasibility	65
4.7. Sustainability	66
5. Barriers and enablers to implementation and implications for strategies	68

5.1. Conceptual framing	69
5.2. Stoke-on-Trent	70
5.3. Redcar & Cleveland	72

6. Impact of Thrive at Five in Stoke-on-Trent	76
--	-----------

6.1. Impacts for practices and systems	76
6.2. Impacts for parents	84
6.3. Impacts for children	87
6.4. Insights from internal evaluations	90

7. Impact of Thrive at Five in Redcar & Cleveland	93
--	-----------

7.1. Impacts for systems and organisations	94
7.2. Impacts for parents	96
7.3. Impacts for children	97

8. Summary, discussion and recommendations	100
---	------------

8.1. Reviewing progress in relation to the theory of change	100
8.2. Mechanisms of change	103

8.3. Summarising findings against the Research Questions	105
8.4. Discussion and implications	108
8.5. Summary of recommendations	114
8.6. Next stages of the evaluation	114
Appendix A – Theory of change	117
Appendix B – Early Years Workforce Survey	122
Appendix C – Qualitative interviews	124
Appendix D – Intermediate outcomes data	126
Appendix E – Local evaluations	130
Appendix F – Schools data	131
Appendix G – Parent Surveys	132
Appendix H – Implementation of enhanced HV data collection	133
Appendix I – First year findings from enhanced HV data collection	135
Appendix J – Perspectives from the early years workforce survey	138
Appendix K – Perspectives from the early years workforce survey	141

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List of tables

Table 1. Consent rate per month (%): HV 1-year and 2-year checks data.....	23
Table 2. Consent rate by mother's age band (%): HV 1-year and 2-year checks data.....	23
Table 3. Mean language score data by child characteristics (2024 and 2025).....	27
Table 4. Summary of findings against the research questions	105
Table A5. Early years workforce survey respondents (Stoke-on-Trent, 2024 and 2025)	122
Table A6. Interviews conducted: Stoke-on-Trent 2025	124

List of figures

Figure 1. Thrive at Five's Implementation Stages.....	7
Figure A3. Thrive at Five National theory of change (updated February 2026)	121

Executive Summary

ABOUT THRIVE AT FIVE

Thrive at Five is a national charity working to improve early childhood development in socio-economically disadvantaged communities through systemic, place-based change. Beginning in Stoke-on-Trent and Redcar & Cleveland, the programme aims to strengthen parental capacity and build cross-sector collaboration across public, private, and voluntary organisations. Partnerships are now being developed with Middlesbrough, and planning for a Scotland local authority site is advancing.

The programme's long-term goal is to improve Early Years Foundation Stage Profile (EYFSP) scores and increase the proportion of children reaching a 'Good Level of Development' (GLD) by the end of their first year at school. Thrive at Five seeks to achieve this through simultaneous action across five key intermediate outcomes areas: parent-infant relationships, parental wellbeing, home learning environments, early communication and language, and access to high-quality early education and care.

The Thrive at Five approach combines **direct workstreams**, which support delivery of evidence-informed interventions with children and families, and **enabling workstreams**, which strengthen local systems, improve practice, and increase parent engagement. These workstreams are developed with each local area and adapted to local contexts. The work, and the engagement with the early years system, is coordinated in each site by a local backbone team and supported by the national Thrive at Five team.

PURPOSE OF THE YEAR 2 EVALUATION REPORT

This report presents findings from the second year of the independent evaluation of Thrive at Five, undertaken by the Centre for Evidence and Implementation. It covers the second year of implementation in Stoke-on-Trent and the first year in Redcar & Cleveland, examining implementation progress, facilitators and barriers, and early evidence of impact.

Evidence is drawn from qualitative interviews with senior leaders, workforce partners, practitioners, parents and backbone team staff, alongside workforce surveys, data benchmarking on intermediate outcomes in Stoke-on-Trent, and internal programme evaluation. Quantitative impact analysis using National Pupil Database data is planned but not yet been undertaken, and it remains too early to expect measurable change in GLD outcomes.

LOCAL CONTEXTS OF NEED

Stoke-on-Trent

Thrive at Five has been working with Stoke-on-Trent since 2021. Stoke-on-Trent faces significant socio-economic challenges that hinder early childhood outcomes. The latest EYFSP data from the 2024/25 academic year shows only 64.6% of children in the city achieved a GLD, below the national average of 68.3%. Among children eligible for free school meals, only 58.1% reach GLD. Thrive at Five is operating in Abbey Hulton and Bentilee wards - two areas marked by high deprivation, fragmented services, and parental isolation.

Stakeholder interviews revealed an under-resourced, disjointed early years system, exacerbated by the pandemic. Since then, improvements in collaborative working are building and are being attributed to Thrive at Five. Despite this, findings from the workforce survey (Summer 2025) indicated continued challenges across the city's practitioners, with only around half of participants (53%) agreeing that there is good collaboration across early years organisations. Parents also echoed concerns about service coordination, highlighting gaps in awareness and access to support.

Redcar & Cleveland

Redcar & Cleveland similarly has significant socio-economic challenges. The latest EYFSP data from the 2024/25 academic year shows 67.8% of children overall achieved a GLD, close to the national average of 68.3%. The disparities by disadvantage are particularly clear, with only 46.2% of children eligible for free school meals reaching a GLD, below the national average for this group (51.3%). Thrive at Five began work in 2024 and operates in five wards – Dormanstown, Eston, Grangetown, Kirkleatham and South Bank – all areas of high deprivation.

Findings from the workforce survey (Summer 2025) indicated that challenges are perceived across the city's practitioners. Although a higher proportion (66%) than in Stoke-on-Trent say there is good collaboration across early years organisations, this still points to significant room for improvement.

IMPACTS OF THRIVE AT FIVE IN STOKE-ON-TRENT

Stronger systems and practices

Interviews with senior leaders and practitioners in Stoke-on-Trent found continued strengthening of partnership working, with collaboration becoming more embedded at both strategic and operational levels. Thrive at Five was described as convening the system around shared early years priorities, supporting joint problem-solving, and increasing the use of data and evidence-informed approaches to understand need and target action. The programme has also supported workforce development through modelling relational approaches with families, training staff to deliver interventions, and sharing expertise in child development.

Empowered parents

Thrive at Five has modelled relational ways of working with parents and directly connected parents with each other and with services. Parents engaging with initiatives supported by Thrive at Five, such as Parent Baby Toddler groups and other Family Hub programmes, described new social connections and being more ready and able to access services. They described feeling more confident and knowledgeable about how to support their child's development, as well as improvements in their own wellbeing arising from these changes.

Children more ready for school

Parents and professionals observed clear improvements in children's school readiness. Most prominent were improvements in children's speech, language and communication. School staff were very impressed by the changes they saw from programmes such as Talking Time and Nuffield Early Language Intervention. They also pointed to improvements in children's social interactions with each other and in attention, memory and self-regulation.

IMPLEMENTATION INSIGHTS FROM STOKE-ON-TRENT

Thrive at Five continued to be highly and consistently valued across all levels of the early years system, with a strong sense of it as a needed and relevant contribution that was adding value and making a difference. There was no sense that the rationale for bringing Thrive at Five to Stoke-on-Trent had diminished, and it was consistently seen as a core and valued part of the early years system, highly acceptable to professionals at all levels and parts of the system.

Stakeholders particularly commented on the quality of the local backbone and national team staff, who were valued for their systems-focus, for relational ways of working (based on listening, collaboration, authenticity and integrity), and for their expertise in early years. The team has strong credibility and a track record of delivery. The interventions that Thrive at Five had initiated were seen as appropriate, valuable and effective. Other facilitators of the work were the policy momentum built by the new Department for Education targets for GLD set in each local authority, and the continued championing of Thrive at Five by a highly regarded local authority Chief Executive as well as by other respected local leaders. There are plans to extend the Stoke-on-Trent work from March 2026 by working with three new wards - Meir North, Meir South and Burslem.

Key challenges

- **System ownership:** There are strong connections at strategic and frontline levels in key agencies, and connections with middle managers have strengthened through a deliberate focus by the backbone team. However, it is not yet clear that organisations are embedding early years priorities and new ways of working, including use of evidence and parent empowerment, into their own organisational plans and driving these as priorities through their organisations. Resource constraints which affected the adoption of planned actions are perhaps also indicative that systems ownership could be strengthened.
- **Governance and accountability:** There is still a sense of governance focusing on shared decision-making about Thrive at Five's work and Thrive at Five reporting to the system, rather than the system taking ownership and accountability for the ambitions embodied by Thrive at Five.
- **Data sharing and coordination:** An enhanced set of data related to the intermediate outcomes is now collected by the health visiting system which, whilst a major achievement, is not yet running smoothly and is viewed as being data 'for Thrive at Five' rather than for the system itself. Data sharing remains a challenge, in particular sharing data on newborn children to support earlier engagement with families.
- **Reaching the most marginalised families:** Despite effective work reaching more parents, backbone team staff report that it remains a challenge to reach the *most* marginalised, and without better data sharing as well as more emphasis on parent outreach coordinated across the system it is difficult to know who is being missed.
- **Long-term sustainability:** The backbone team is increasingly working in ways that aim to ensure early ownership of initiatives by the wider system. There is a need to keep a focus on high-quality implementation as interventions become embedded. There is increasing consensus that a continued backbone team will be needed, but not yet clarity about what form this should take, whether an external body or a team within the existing system, and how it might be resourced.

IMPACTS OF THRIVE AT FIVE IN REDCAR & CLEVELAND

Implementation in Redcar & Cleveland is at an earlier stage, but senior leaders and practitioners were already noting impacts they attributed to Thrive at Five. They described stronger relationships across organisations, improved understanding of available services, and new partnerships developing. Senior leaders also described a richer shared understanding of the early years system, including from the perspective of parents, and of where there are weaknesses – although some felt this largely reinforced existing knowledge rather than providing new insights. Thrive at Five backbone staff were seen to be engaging with parents who were distant from services, helping them to engage with services and modelling approaches that influenced wider practice. While these developments represent important early progress, the programme's role and optimal points of system entry are still being established.

IMPLEMENTATION INSIGHTS FROM REDCAR & CLEVELAND

In Redcar & Cleveland, Thrive at Five is seen as well aligned with local strategic aims and priorities, and the ways of working it emphasises (collaborative partnerships, using evidence and data, emphasis on parental engagement) are recognised as important. The starting point for Thrive at Five's work with Redcar & Cleveland is different from the Stoke-on-Trent context where the early years system was universally seen as severely depleted and a blank canvas. Some senior leaders in Redcar & Cleveland described a starting point where early years was already a priority area, with an early years strategy in place, strong partnerships, and an extensive service system. Others were more critical of the system, describing a system where there was little real collaboration and poor engagement with and by communities. These different views underpinned different perspectives on whether and why Thrive at Five was really needed in Redcar & Cleveland, and it has been more difficult to identify the optimal points for systems entry. Not all senior leaders welcomed the challenge to the system that is an important part of Thrive at Five's approach, and there are concerns about backbone staff duplicating work already undertaken by other services although the additional resource, capacity and expertise is recognised.

There are clear foundations and facilitators to draw on. The priority of early years is shared. The credibility, networks and expertise of Thrive at Five as a national organisation are valued, as are the relational approaches and skills of backbone and national team staff. The emphasis on deep community and parental engagement is recognised and valued. The intention to develop tailored strategies with and for Redcar & Cleveland is seen as vital.

Key challenges

- **The absence of a recognised senior champion within the local system:** The departure of the senior leader who spearheaded bringing Thrive at Five to Redcar & Cleveland has left a gap, and it will be important to identify at least one person who can advocate for Thrive at Five from within the system and articulate and reinforce Thrive at Five's role.
- **Developing a shared understanding of the strengths and weaknesses of the local system:** Different understandings, and a degree of defensiveness among stakeholders, need to be addressed to build a shared platform for change and openness to constructive challenge.
- **Identifying the optimal systems entry points for Thrive at Five and developing shared plans:** In Stoke-on-Trent, Thrive at Five's early entry points included bringing new interventions where provision was limited or non-existent. In Redcar & Cleveland, where more is in place, there are concerns about duplication with existing provision. Thrive at Five aims to be an influencing, catalysing and facilitative presence rather than a direct service delivery organisation, but this work is less visible and tangible, and requires systems openness. The work would be aided by clearer articulation of Thrive at Five's approach and by developing shared strategies for direct and enabling workstream which are strongly and explicitly attuned to the local context.

CONCLUSIONS ACROSS THE SITES

Thrive at Five is making tangible progress in strengthening early years support in Stoke-on-Trent, where implementation has entered a consolidation phase, and is contributing to improvements in system collaboration, parental engagement, and children's development. In Redcar & Cleveland, the programme is at an earlier stage, with important foundations being established but further work required to build shared ownership and clarify its role within the local system. Across both sites, Thrive at Five demonstrates strong credibility, high acceptability, and clear potential to drive system-level change. The programme is well positioned to move into a more ambitious phase, which focuses on strengthening system ownership, clarifying governance arrangements, articulating enabling workstreams more clearly, being more explicit in modelling of ways of working, and including more parents and communities in decision-making and governance.



Part one

Introduction and Context for Thrive at Five

1. Introduction

1.1. Introduction to Thrive at Five and the evaluation

Thrive at Five is a national charity working to strengthen early years systems and improve children's developmental outcomes in communities facing socio-economic disadvantage. Its mission is to help children develop strong foundations for life and learning from pregnancy to five.

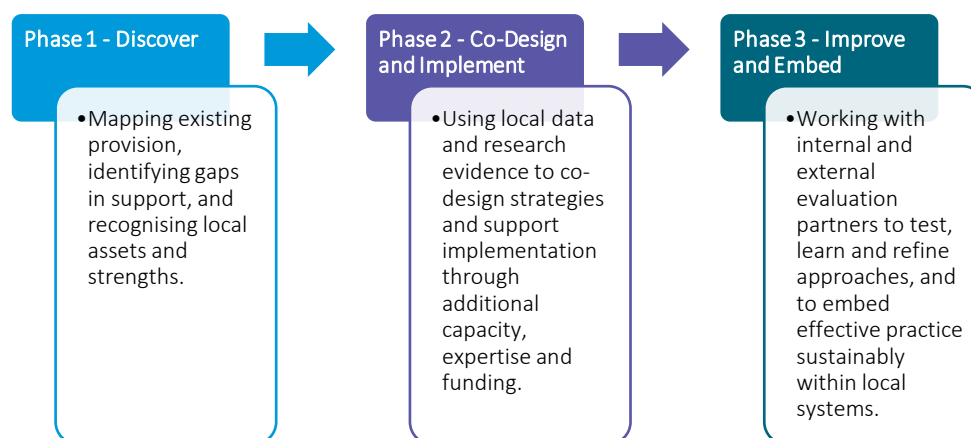
The organisation takes a long-term, place-based approach, committing to work in defined localities for a minimum of five years to support sustainable change. It describes its work as spanning the whole of a child's early journey, combining strengthened support for families, improvements in early years provision, and enhanced collaboration across the wider early childhood system. Operating across health, education and parenting support, and across public, private and voluntary sectors, Thrive at Five works alongside local partners to contribute to sustained improvements in outcomes and reductions in inequality.

The long-term objective is to contribute to sustainable improvements in children's developmental outcomes, including increasing the proportion of children reaching a 'Good Level of Development' (GLD) at age five, as measured by the Early Years Foundation Stage Profile (EYFSP). Equivalent measures will be used in Scotland to reflect the national context.

Thrive at Five is currently implementing its approach in Stoke-on-Trent, Redcar & Cleveland and Middlesbrough, with a further local authority site in development in Scotland. In each locality, the programme focuses on selected wards, aiming to reach approximately 2,500 children aged 0–5 and their families, alongside the practitioners and system leaders who shape early childhood development. This targeted geographic focus is intended to enable population-level change within defined communities.

Implementation in each locality follows a structured three-stage process, described in Figure 1.

Figure 1. Thrive at Five's Implementation Stages



In each locality, **direct impact workstreams** involve the introduction of evidence-informed approaches or tools targeting five intermediate outcomes:

- 1) Improvement in the strength of parent-infant relationships
- 2) Improvement in parental wellbeing
- 3) Improvement in the quality of home learning environments
- 4) Improvement in children's communication and language
- 5) Improvement in the quality of education and care in settings

Enabling workstreams aim to create the underlying conditions for sustainable positive changes in EYFSP outcomes, targeting parent outreach and engagement, strengthening the system and improving practice.

In each locality, a locally recruited 'backbone' team works with local partners and communities to implement and sustain the workstreams (see Appendix A for a full description of backbone teams). The work is supported by Thrive at Five's central team, trustees and Advisory Council. This brings specialist expertise in early childhood development, implementation and evaluation. It supports consistent quality across places and structured learning and refinement of the Thrive at Five approach as it expands across the UK. Local partners are asked to contribute £200,000 per year.



Thrive at Five have developed (with support from the CEI evaluation team) and iterated a **national theory of change** (see Appendix A) which sets out the key elements of their initiative and pathways of impact. The theory of change includes their intended mission, the target population, key strategies to be used, inputs, implementation outcomes, short-term outcomes, intermediate outcomes and final impact. Appendix A provides a full description of the theory of change.

1.2. The importance of the early years

A critical period for intervention and reducing inequities

The first five years of life are widely recognised as a critical period of development. Experiences in the years before starting school play a profound role in determining future opportunities and later life outcomes, including health, wellbeing, relationships, and achievements throughout the life course.^{1,2} By the age of five, many children in England are failing to achieve a GLD, as defined as meeting expected levels of development across the core areas of the EYFSP. Children from disadvantaged backgrounds are already likely to be behind their peers by this stage. A large body of research shows that inequalities across a range of outcomes are strongly correlated with being born into household poverty, and that they tend to widen with age.^{3,4} Inequalities in early childhood development have consequences that are not only carried into adulthood, but also passed down to future generations, creating a poverty trap effect.⁵ The first five years of life are therefore a critical period for intervention not only to ensure that children are able to have a positive start in life, but also to break the cycle of intergenerational inequality.

Within this period, the "first 1000 days" are often highlighted as a time of heightened opportunity and vulnerability for physical growth and brain development, making it a crucial window for interventions that can shape long-term outcomes.⁶ Following this, the "next 1000 days"—between ages 2 and 5—has recently been emphasised as a phase of expansion and refinement in cognitive, language, and socioemotional skills.^{7,8} During this time, children's developmental trajectories can either be sustained by building on early gains or recalibrated by addressing gaps in areas where environmental conditions may have previously been challenging or scarce.⁹ Overall, there is agreement that the quality of care and stimulation children receive during these years is critical, as it directly impacts children's future capacity to navigate academic, social, and emotional challenges.

Exposure to adverse experiences in the early years, such as socioeconomic disadvantage, poor caregiver mental health, maltreatment, or social isolation, not only increases

¹ Tomlinson, M., Hunt, X., Daelmans, B., Rollins, N., Ross, D., & Oberklaid, F. (2021). Optimising child and adolescent health and development through an integrated ecological life course approach. *BMJ*, 372. <https://doi.org/10.1136/bmj.m4784>

² Deloitte (2024). Prioritising early childhood for a happier, healthier society. How businesses can drive, and benefit from, transformative change in the UK. Report for The Royal Foundation of The Prince and Princess of Wales On behalf of The Business Task.

³ Almond, D., Currie, J., & Duque, V. (2018). Childhood circumstances and adult outcomes: Act II. *Journal of Economic Literature*, 56(4), 1360-1446.

⁴ Lindahl, M., Palme, M., Massih, S. S., & Sjögren, A. (2015). Long-term intergenerational persistence of human capital an empirical analysis of four generations. *Journal of Human Resources*, 50(1), 1-33.

⁵ Ibid

⁶ Indrio, F., Pietrobelli, A., Dargenio, V. N., Marchese, F., Grillo, A., Vural, M., Giardino, I. & Pettoello-Mantovani, M. (2023). The key 1000 life-changing days. *Global Pediatrics*, 4, 100049. <https://doi.org/10.1016/j.gped.2023.100049>

⁷ Aguayo, V. M., & Britto, P. R. (2024). The first and next 1000 days: a continuum for child development in early life. *The Lancet*, 404(10467), 2028-2030. [https://doi.org/10.1016/s0140-6736\(24\)02439-5](https://doi.org/10.1016/s0140-6736(24)02439-5)

⁸ Draper, C. E., Yousafzai, A. K., McCoy, D. C., Cuartas, J., Obradović, J., Bhopal, S., ... & Okely, A. D. (2024). The next 1000 days: building on early investments for the health and development of young children. *The Lancet*, 404(10467), 2094-2116. [https://doi.org/10.1016/s0140-6736\(24\)01389-8](https://doi.org/10.1016/s0140-6736(24)01389-8)

⁹ Britto, P. R., Lye, S. J., Proulx, K., Yousafzai, A. K., Matthews, S. G., Vaivada, T., ... & Bhutta, Z. A. (2017). Nurturing care: promoting early childhood development. *The lancet*, 389(10064), 91-102. [https://doi.org/10.1016/S0140-6736\(16\)31390-3](https://doi.org/10.1016/S0140-6736(16)31390-3)

children’s vulnerability but can also undermine their developmental progress.^{10,11,12} The links between poverty and poor outcomes are rooted in early childhood. The effects of inequality can manifest as early as age three, with significant gaps in cognitive and behavioural skills between children from disadvantaged backgrounds and their more advantaged peers.¹³ Teachers are increasingly reporting that more children are starting school without the foundational skills they need. These early disparities underscore the importance of creating a nurturing environment in the home, care, and educational settings that ensures children receive sensitive care, access to early learning opportunities, and protection from harmful threats.^{14,15}

Role of the early years ecosystem

Whilst a substantial share of variation in adult outcomes has been attributed to shared family background, including aspects of parenting,¹⁶ such nurturing environments are not solely dependent on primary caregivers, but also require the integration of services, policies, and programmes across sectors that support the early years ecosystem.^{17,18} The early years system encompasses a broad range of settings, organisations and services that are engaged in the care, protection, education, and development of young children from birth (and before, in the prenatal period) until they enter formal schooling, typically at the age of five. An integrated approach across this system is essential to fostering the holistic development of young children and mitigating the impact of adversity.

A system under strain

Across the public, private and voluntary spheres, tremendous resource and effort is put into supporting children in the early years. Yet increasingly, evidence suggests that fragmentation in the early years system in England and at the local level is a significant issue and limits the impact that the system can have as a whole.¹⁹ Services and professionals from across different parts of the system struggle to work together effectively, leading to missed opportunities to coordinate between agencies to provide holistic, joined up and equitable care for children and families and limiting attempts to

¹⁰ Nelson, C. A., & Gabard-Durnam, L. J. (2020). Early adversity and critical periods: neurodevelopmental consequences of violating the expectable environment. *Trends in neurosciences*, 43(3), 133-143. <https://doi.org/10.1016/j.tins.2020.01.002>

¹¹ The Royal Foundation Centre for Early Childhood (2021). *Big Change Starts Small*

¹² UNICEF (2022). *Early Moments Matter. Guaranteeing the best start in life for every baby and toddler in England. Policy Report.*

¹³ UNICEF (2025). *Held Back from the Start: The impact of deprivation on early childhoods.*

¹⁴ Deloitte (2024). *Prioritising early childhood for a happier, healthier society. How businesses can drive, and benefit from, transformative change in the UK. Report for The Royal Foundation of The Prince and Princess of Wales On behalf of The Business Task*

¹⁵ The Royal Foundation Centre for Early Childhood (2021). *Big Change Starts Small*

¹⁶ Björklund, A., Lindahl, L., & Lindquist, M. J. (2010). What more than parental income, education and occupation? An exploration of what Swedish siblings get from their parents. *The BE Journal of Economic Analysis & Policy*, 10(1).

¹⁷ Tomlinson, M., Hunt, X., Daelmans, B., Rollins, N., Ross, D., & Oberklaid, F. (2021). Optimising child and adolescent health and development through an integrated ecological life course approach. *BMJ*, 372. <https://doi.org/10.1136/bmj.m4784>

¹⁸ Miller, A. L., Stein, S. F., Sokol, R., Varisco, R., Trout, P., Julian, M. M., ... & Rosenblum, K. L. (2022). From zero to thrive: A model of cross-system and cross-sector relational health to promote early childhood development across the child-serving ecosystem. *Infant Mental Health Journal*, 43(4), 624-637. <https://doi.org/10.1002/imhj.21996>

¹⁹ Department for Education (2025). *Giving Every Child the Best Start in Life.*

tackle area-wide challenges collaboratively.²⁰ These missed opportunities create significant gaps in the availability of support for parents.²¹

Supporting parents and services

Supporting parents and fostering positive relationships between caregivers and service providers is equally important to ensuring positive outcomes. Therefore, fostering a shared understanding of the importance of the early years, establishing effective communication channels, and promoting collaborative and coordinated efforts across various child-serving systems and sectors can collectively sustain a healthy early years ecosystem, which, in turn, supports children's development and enhances family wellbeing.²²

Box 1. Latest policy developments

The Labour government has placed a key emphasis on early years, making 'breaking down the barriers to opportunity that derive from children's background' one of its five missions with the milestone or target of increasing the proportion of children reaching a GLD to 75% by 2028.

The Best Start in Life²³ policy launched in Summer 2025 emphasises that in children's development, it is children's homes and families that matter most, with families a child's first and most important teacher. Recognising how challenging the early years system is for parents to navigate, each local authority is asked to develop a local Best Start Plan. Best Start Family Hubs are to be established in every local authority, co-designed with local parents and with an evidence-informed core offer focusing on low-income families and children with additional vulnerabilities. Every local authority has been set a target for increasing the proportion of children reaching a GLD. In Stoke-on-Trent, this represents an increase from 64.6% of children in 2024/25 to 72.9% in 2027/28, and from 58.1% to 68.2% for those on school free meals. In Redcar & Cleveland, the target increase is from 67.8% to 75.9%, and from 46.2% to 62.6% for children on free school meals.

The policy also rolls out funded childcare more widely and intends to raise the status of educators and establish more Stronger Practice Hubs as centres of excellence in early years education and care.

1.3. Place-based approaches to supporting the early years

Place-based approaches and Collective Impact

"Place-based" approaches²⁴ have gained increasing traction in recent decades as an approach to addressing entrenched issues across whole local populations. Although their focus varies, they typically adopt an ecological or systems approach to tackling complex social issues, targeting a defined geographical location or 'place' and engaging all partners with a stake in an issue locally. By harnessing the resources and reach of the entire system

²⁰ Hoang, N-P.T., Ma, T., Silverwood, A.J. & Sanders M.R. (2024). Place-based approach to support children's development towards sustainable development goals: A scoping review of current effort and future agenda. *Children and Youth Services Review*, Volume 164, 107873. <https://doi.org/10.1016/j.chilyouth.2024.107873>.

²¹ Symons T., Kraftman, L. Gunter, T., Rao, Z. & Cattan, S. (2025) A new era for the early years: Joined up support that works for all families.

²² Symons T., Kraftman, L. Gunter, T., Rao, Z. & Cattan, S. (2025) A new era for the early years: Joined up support that works for all families.

²³ Department for Education (2025). Giving Every Child the Best Start in Life.

²⁴ Hoang, N-P.T., Ma, T., Silverwood, A.J. & Sanders M.R. (2024). Place-based approach to support children's development towards sustainable development goals: A scoping review of current effort and future agenda. *Children and Youth Services Review*, Volume 164, 107873. <https://doi.org/10.1016/j.chilyouth.2024.107873>.

and bringing all stakeholders together behind a shared vision and plan that is rooted in the use of evidence, these approaches have potential to achieve large-scale and sustainable change far beyond the reach of individual programmes or services.

Thrive at Five is informed by the Collective Impact model.²⁵ Collective Impact approaches bring together local leaders from different sectors to work together on a common agenda to address a specific problem. The Collective Impact framework is based on five components or 'impact conditions':

- **A common agenda:** with a shared vision for change, shared understanding of the problem and joint approaches
- **Shared measurement:** agreement on how success will be measured and reported and consistent data collection
- **Mutually reinforcing activities:** coordinated activities in a mutually reinforcing plan
- **Continuous communication:** to build and sustain trust and partnership
- **Backbone support:** provided by a separate organisation and staff team.

Evidence about the impacts of place-based approaches

A growing body of evidence, although mixed and of varying quality, suggests that place-based initiatives can play an important role in tackling inequalities in the early years.²⁶

A review of evidence on the outcomes of place-based interventions aimed at improving children's capacities to thrive aged 0-12, which varied in their focus and in the quality of evidence, found that 10 reported statistically significant improvements in at least one measured outcome, and 11 reported positive changes over time without significance testing or sufficient analytical details reported.²⁷

Similarly, of 12 initiatives identified in an earlier scoping review of place-based approaches to improving outcomes among disadvantaged children under the age of five, all but one demonstrated a positive outcome on at least one outcome measure. Of the 83 outcomes assessed using a comparison group, across all studies included, over a third (36.4%) demonstrated a positive outcome and at least a quarter of studies demonstrated sustainability in positive effects over time.²⁸

In the UK, across seven evaluations identified for the place-based 'Sure Start' programme, positive effects were found for nine outcomes measures relating to pregnancy and birth, child, parent, family and school and community measures.²⁹ Four of these positive effects were found to be sustained at follow up.³⁰ Further analyses of Sure Start³¹ have provided

²⁵ Kania, J. & Kramer, M. (2011). Collective Impact. *Stanford Social Innovation Review*, 9(1), 36–41. <https://doi.org/10.48558/5900-KN19>

²⁶ Hoang, N-P.T., Ma, T., Silverwood, A.J. & Sanders M.R. (2024). Place-based approach to support children's development towards sustainable development goals: A scoping review of current effort and future agenda. *Children and Youth Services Review*, Volume 164, 107873. <https://doi.org/10.1016/j.childyouth.2024.107873>.

²⁷ Ibid.

²⁸ Burgemeister, F. C., Crawford, S. B., Hackworth, N. J., Hokke, S., & Nicholson, J. M. (2021). Place-based approaches to improve health and development outcomes in young children: A scoping review. *Plos one*, 16(12), e0261643.

²⁹ Carneiro, P., Cattan, S., Conti, G., Crawford, C., Farquharson, C. & Ridpath, N. (2025) The short- and medium- term effects of Sure Start on children's development.

³⁰ Ibid.

³¹ Carneiro, P., Cattan, S., & Ridpath, N. (2025). The short- and medium-term impacts of Sure Start on educational outcome.

more evidence of positive impacts, sustained into late adolescence, across additional domains including health³² and education,³³ as well as outcomes relating to youth offending and children's social care.³⁴ By age 11, for example, children in areas with Sure Start coverage experienced significantly lower levels of hospitalisation, as well as improved self-reported health and mental health.³⁵ Access to a Sure Start centre from birth to age five was found to significantly improve educational achievement with effects lasting up to GCSEs (age 16) and sustained impacts on school absence.³⁶ Furthermore, living near a Sure Start centre before the age of five was associated with a reduced likelihood of being convicted or being in custody for a criminal offence by age 16, as well as reducing the amount of time spent in care.³⁷ The benefits were widespread and Sure Start reduced inequalities in some areas, with the strongest health benefits found in the most disadvantaged neighbourhoods and educational benefits stronger for children from ethnic minority backgrounds.³⁸

Evaluation findings from the ongoing ten-year early years place-based programme, 'A Better Start' (ABS), also provide numerous examples of the ways in which place-based programmes can help to reduce the risk of disadvantage in the early years.³⁹ The most recent report of the national evaluation, based on contribution analysis, identifies impacts on children's diet and nutrition, communication and language, and social and emotional development, as well as improvements to local services and ways of working including joined up working, upskilled workforces, more inclusive partnership working, parental and co-production with parents – the latter identified as perhaps the most important legacy of ABS.⁴⁰ These changes are identified as flowing from services being more adaptive to family needs, a test and learn approach, shared data and information, and evidence-informed service design.

Consistent relationships with ABS staff were found not only to help disadvantaged families to access a variety of services and resources but also thought to be key to maintaining the engagement of families who might have been unlikely otherwise to access formal support.⁴¹ This type of systems change brought about by ABS, the authors suggest, is particularly relevant in the pre-school years when disadvantaged children may not have many points of contact with the system.⁴²

Research on early years integration commissioned by London Councils similarly provides strong evidence that well-integrated early years services and systems can transform the experience of services for parents and their children. These changes include supporting families to navigate the local services available to them, supporting mainstream services to tailor their support to family's needs, and helping to ensure that families with high levels of need who are less visible to the individual programmes within the system, or less familiar with it, are less likely to fall through the gaps.⁴³

³² IFS (2022), The health effects of universal early childhood interventions: evidence from Sure Start.

³³ Carneiro, P., Cattan, S., & Ridpath, N. (2025). The short- and medium-term impacts of Sure Start on educational outcome.

³⁴ Carneiro, P., Cattan, S., Conti, G., Crawford, C., Drayton, E., Farquharson, C., & Ridpath, N. (2024). The effect of Sure Start on youth misbehaviour, crime and contacts with children's social care.

³⁵ IFS (2022), The health effects of universal early childhood interventions: evidence from Sure Start.

³⁶ Carneiro, P., Cattan, S., & Ridpath, N. (2025). The short- and medium-term impacts of Sure Start on educational outcome.

³⁷ Carneiro, P., Cattan, S., Conti, G., Crawford, C., Drayton, E., Farquharson, C., & Ridpath, N. (2024). The effect of Sure Start on youth misbehaviour, crime and contacts with children's social care.

³⁸ Carneiro, P., Cattan, S., Conti, G., Crawford, C., Farquharson, C. & Ridpath, N. (2025) The short- and medium- term effects of Sure Start on children's development.

³⁹ National Centre for Social Research et al. (2025). A Better Start National Evaluation 3rd annual report

⁴⁰ Ibid.

⁴¹ National Centre for Social Research et al. (2024). A Better Start National Evaluation 2nd annual report

⁴² Ibid.

⁴³ Isos partnership and London Councils (2022). Beyond Boundaries: Early Years Integration.

Evaluation of Collective Impact also finds positive impacts. A synthesis of evaluations of 25 collective impact initiatives in the US, using theory-based evaluation approaches concluded that there was plausible evidence of the initiative contributing to population change in most sites.⁴⁴ Changes in services and practices were found in most sites. Partnerships were a key driver of change.

Box 2. Government policy and place-based approaches

There is an increasing focus in UK government policy on place-based approaches. This is evident not only in the early years policies described above but also in other initiatives such as the Neighbourhood Health Service (with local partnerships taking responsibility for neighbourhood services, aiming to bring care closer to homes and to reduce health inequalities); UK devolution; the Test Learn Grow approach led by the Cabinet Office (supporting local authority innovation across policy areas); and Pride in Place (investment in the physical and social infrastructure of hyperlocal areas to build stronger communities, thriving places and empower local people) within which Bentilee & Ubbertley and Meir North in Stoke-on Trent are selected as a Phase 2 places.

1.4. Thrive at Five delivery

1.4.1. Stoke-on-Trent

Thrive at Five's delivery in Stoke-on-Trent to end December was described in detail in the Year 1 report. We summarise this here and provide an update on 2025 delivery.

Thrive at Five's work in Stoke-on-Trent is focused on two wards, Abbey Hulton and Bentilee. Discovery work took place in Stoke-on-Trent in late 2021 and early 2022, following which the initial work programme was developed. This initially focused on improving children's transitions into nursery and reception, later broadened to include more work with schools. The programmes and activities being delivered are:

- **Ready Steady Stoke:** a series of activities for families with transitioning children co-produced with a steering group of local stakeholders and delivered since summer 2022.
- **Nuffield Early Language Intervention (NELI):** an evidence-based programme for children in reception who needed language catch-up support. NELI was delivered from September 2022/23 in initially five and subsequently all seven schools through a partnership with the University of Staffordshire whose undergraduate education students provided additional capacity alongside peripatetic higher level teaching assistants employed by Thrive at Five to work across the seven schools.
- **Parent Baby Toddler (PBT) Groups:** Parental isolation is a key challenge in the two Stoke-on-Trent wards, and Thrive at Five worked in partnership with local organisations to increase the number of PBT Groups in the two wards. There is now capacity for 200 families each week to attend PBTs in school and community settings.
- **Talking Time:** A universal oral language intervention delivered in nursery classes across six primary schools from 2023.

⁴⁴ Lynn, J., Gase, L., Roos, J., Oppenheimer, S., Dane, A., Stachowiak, S., Akey, T., Beyers, J., Chew, A., Habtemariam, E., Gutierrez, J., & Orians, C. (2018). *When Collective Impact has an Impact: A cross-site study of 25 Collective Impact Initiatives.*

- **PEEP Learning Together:** Delivered in local nursery classes and PBTs since March 2025, to improve home learning environments.

Beyond the activities outlined above, Thrive at Five are also working with local midwives and health visitors to introduce the Newborn Behavioural Observation tool (NBO) which aims to build strong parent infant relationships. Additionally, in autumn 2025 Thrive at Five received funding from the 1001 Critical Days Foundation to support, through an innovative health visiting and family hub delivery model, the implementation of Video Interaction Guidance (VIG) to parents with children aged 6 months to 2 years in the Thrive at Five wards. The aim is to support parent-infant relationships, sensitive and responsive parent-child interactions, and cognitively stimulating home learning environments.

The backbone team Partnership & Programme Lead originally appointed was seconded to the local authority in a new role although remained engaged with Thrive at Five as a senior stakeholder, and a new Partnership & Programme Lead took up post in 2025.

Next steps in Stoke-on-Trent

As the Stoke-on-Trent programme matures, Thrive at Five expect to refine and sharpen their theory of change, with the individual workstreams complementing one another to create a coherent integrated package. To support this, they will shortly be relaunching their local governance structures. This will include two Working Groups (one for 0-2-year-olds and one for 3-5-year-olds) with Link Practitioners from a range of local services, a Senior Stakeholder Group, and a Leadership Group. They hope to increase the precision of their outreach work, by utilising birth registration data and Parent Connector capacity to reach a high proportion of local families with newborns. There are plans to set up Communities of Practice on Parenting and on Early Learning & Development. A project to develop and deliver data score cards showing data trends across the range of intermediate outcomes and helping to cement the work as a local multi-disciplinary mission to improve children's outcomes at age five is planned to start in spring of 2026.

There are plans to extend the Stoke-on-Trent work from March 2026 by working with three new wards - Meir North, Meir South and Burslem – drawing on the work undertaken in Abbey Hulton and Bentilee to improve children's outcomes and the proportion reaching a GLD. This expansion is being undertaken using the principles of Thrive at Five's adopt-and-discovery approach. However, as Thrive at Five is already established in Stoke-on-Trent and working with the same system partners, this phase is being implemented as a more rapid cycle of Discovery, drawing on existing knowledge of local communities while enabling further refinement of the approach to the new ward contexts.

1.4.2. Redcar & Cleveland

The second adopter site – Redcar & Cleveland, in northeast England – was set up in 2023, with the Discovery phase starting in January 2024 and early work also involving recruitment of the local backbone team (with recruitment completed by late summer 2024), setting up local governance structures, and completing detailed asset mapping of the five Thrive at Five wards chosen for delivery (Dormanstown, Eston, Grangetown, Kirkleatham and South Bank). An early years conference was held in June 2025.

Redcar & Cleveland is now in the Co-design stage, which involves researching and collaborating on direct impact workstreams, drawing on learnings from Stoke-on-Trent, and tailored for their local population. For example, the Local Authority introduced the Wellcomm assessment and Big Book of Ideas to all early years settings in Redcar & Cleveland in autumn of 2025. Wellcomm assessment is now ongoing in the 12 schools in the Thrive at Five wards (supported by the Early Education lead in the backbone team). This

data will be used by schools to identify which children need extra support as well as to monitor intermediate outcome for early language and communication.

The first Partnership & Programme Lead left the team in early autumn 2025 and a Northeast director is now in post overseeing the work in Redcar & Cleveland and in Middlesbrough.

1.4.3. Middlesbrough

Middlesbrough signed up to work with Thrive at Five in spring 2025, with the partnership formally agreed by councillors in April 2025 and announced publicly in May 2025. The Discovery phase took place over the autumn of 2025 and aimed to build a shared understanding of the local early years system, the challenges faced by families, and the opportunities for improving outcomes for children aged 0–5.

Part One of the Discovery process is ongoing, centred on professional and system-level perspectives. It has involved a series of meetings and workshops with 54 local professionals and practitioners from across the voluntary, community and faith sector, education, health services, and the local authority. This provided insight into how services currently operate, where there is strong practice, and where gaps, pressures, or duplication exist across the early years landscape. The Discovery process also incorporated a review of existing data, strategies, and research. Findings will be shared back with local stakeholders in February and March 2026. Central and Newport were selected as the wards for Thrive at Five.

Part Two of the Discovery process will build on this by centring the lived experiences of parents and carers of young children in Central and Newport. This phase will be delivered in collaboration with academics from Teesside University/Health Determinants Research Collaboration South Tees and will explore parental perspectives on navigating services, sources of support, and the everyday realities of raising young children in the area. Findings from Part Two are expected to be finalised and reported in May 2026 and will complement the system-level insights gathered in Part One.

1.4.4. Scotland

Discussions about a Scotland site for Thrive at Five began with the Scottish Government in 2024, and a Thrive at Five Scotland Director was appointed in early 2025. Initial discussions were held, with external experts, to determine an appropriate impact measure as an alternative to GLD to be used to shortlist possible local authorities as Thrive at Five sites. The lead measure is a combination of the 4–5-year-old health visitor check data (which covers broadly similar territory to the GLD) with Primary 1 Achievement of Curriculum for Excellence Levels (ACEL) data which is more narrowly focused on literacy and numeracy.

A Scotland Startup Group consisting of academics, voluntary and charity sector CEOs and system leaders has been set up and met for the first time in October 2025. The Group act as a critical friend to the programme for the first 12 months to support adapting the approach to the Scottish legal, policy and cultural context. The next steps will involve short-listing and selection of potential sites, following which set-up and then Discovery work will take place.



The Thrive at Five national team, working with Isos Partnership, are developing the '**Thrive at Five playbook**', drawing on their work in local areas and the internal and national evaluations, to document learning about the Thrive at Five approach and its implementation. The aim is to produce a resource that will capture insights and support work in each local area, supporting 'fidelity with flexibility'. The playbook maps out the work involved in each of the Adopt, Discover, Co-design and Implement, and Improve and Embed stages.

1.5. Overview of the national evaluation

1.5.1. Evaluation approach

CEI will undertake an evaluation in each of the Thrive at Five sites, following the delivery of the programme over time, and building learning from comparison between sites.

The overarching research questions are:

RQ1. Is there sufficient and collaborative support for the place-based initiative from key leadership?

RQ2. Is there sufficient support being provided to Workstreams from Working Groups and Backbone staff to deliver their work?

RQ3. Are individual workstreams being implemented as intended?

RQ4. What are the barriers and facilitators to implementation of individual workstreams? What refinements are needed as a result?

RQ5. Is Thrive at Five being implemented as intended?

RQ6. What are the barriers and facilitators to implementation of Thrive at Five? What refinements are needed as a result?

RQ7. Is there evidence of perceived impacts on intermediate outcomes, both quantitatively and qualitatively, among delivery staff and community participants?

RQ8. Is the Thrive at Five approach acceptable to all stakeholders and can it be sustained beyond the central Thrive funding and support period?

RQ9. Is there evidence of impact on long-term outcomes (EYFSP scores and GLD) that is attributable to Thrive at Five?

Each site-level evaluation includes an **implementation and process evaluation (IPE) strand**, using a mixed methods approach to assess progress in implementing Thrive at Five and learning about what it takes to implement it well, plus an **impact strand** with a focus on

measuring progress against the five intermediate outcomes using a range of validated measures, and the overall impact on EYFSP scores.

1.5.2. Impact evaluation

Impact on GLD

To understand the impact on GLD, the evaluation will compare the child-level outcomes in the wards receiving the initiative with child-level outcomes in the other wards within the local authority, and with a matched set of control wards in other local authorities. This 'difference-in-difference' methodology compares changes in outcomes in the 'treated' wards with the changes in outcomes in the 'counterfactual' wards over the same period and will involve a range of analysis methods.

Impact on intermediate outcomes

CEI will work with Thrive at Five to understand how existing data systems in each site can be used, or added to, to explore change in the intermediate outcomes.

In Stoke on Trent, Thrive at Five worked extensively with services to agree new data to be collected during health visitor review checks at age 1 and age 2 within the two Thrive at Five wards, using standardised validated instruments linked to intermediate outcomes. CEI and Thrive at Five supported this new data collection, training relevant staff and providing oversight. The measures used are:

- **Parental Wellbeing (1-year check)** – Short Warwick-Edinburgh Mental Wellbeing Scale (SWEMWBS)
- **Parent-infant interaction (1- and 2-year check)** – Mothers Object Relations Scale, Short Form (MORS-SF)
- **Home learning environment (2-year check)** -Toddler Home Learning Environment Scale (THLES)
- **Early language and communication (2-year check)** -Early Language Identification Measure Shortened (ELIM-S)

Approaches to measuring the quality of early education and care are in discussion.

1.5.3. Implementation and process evaluation

The IPE is guided by the Exploration Preparation Implementation Sustainment (EPIS) framework,⁴⁵ focused on exploring elements from the inner and wider contexts in which Thrive at Five operates, and how these connect to the central role of Thrive at Five as a bridging actor within the inter-organisational networks of the local system (e.g. partnerships, backbone team).

The IPE serves an important role in supporting Thrive at Five workstreams by providing real-time analysis around how well the initiative is operating, providing information around the potential need for, and possible approaches to course correction, and eventually generating learning for wider application and scaling of the approach to other sites. Comparisons between sites will provide important insight into what works in different contexts and into the external validity (or transferability) of findings.

⁴⁵ Moullin, J. C., Dickson, K. S., Stadnick, N. A., Rabin, B., & Aarons, G. A. (2019). Systematic review of the exploration, preparation, implementation, sustainment (EPIS) framework. *Implementation Science*, 14(1), 1-16.

The IPE involves:

- A programme of annual qualitative interviews and group interviews with leaders, backbone team staff, workstream delivery staff, practitioners and parents and carers
- An annual (possibly bi-annual) workforce survey with staff working in early years to benchmark and monitor key features of the local early years system

In addition, the Thrive at Five national team has undertaken internal evaluation activity of individual programmes in each site, focusing on implementation and where possible impacts. They also undertake regular surveys of parents and carers to understand and monitor change in experiences of each local context.

1.6. Evaluation activity drawn on for this report

This report draws on the following evaluation activity. Each element is described in more detail in the Appendices.

1.6.1. Stoke-on-Trent

- **Early years workforce survey:** A repeat of the Year 1 survey, conducted between July and October 2025, targeting leaders, managers and frontline practitioners. It also explored perceptions of the early years system, perceived current performance on Thrive at Five's intermediate outcomes, and awareness of Thrive at Five. The final sample was 59 participants, of whom 61% were frontline staff. For further details on coverage and sample, see Appendix J.
- **Qualitative interviews:** We conducted 34 interviews/focus groups (n=36 individuals) with system leaders (early Summer 2025) and with the backbone team, workstream leaders, delivery staff and parents (Summer and Autumn 2025). Appendix C shows further details of the sample and analysis.
- **Intermediate outcomes data:** We draw on additional data collected during health visitor (HV) review checks to monitor intermediate outcomes. In this report, these data are presented as baseline findings only, as data collection is still stabilising and has not been in place long enough to assess changes over time. Data were collected at 1-year and 2-year review checks between January and December 2025 and involved several validated instruments:
 - Short Warwick-Edinburgh Mental Wellbeing Scale (SWEMWBS)⁴⁶
 - The Mother's Object Relation Scale Short Form (MORS-SF)⁴⁷
 - The Toddler Home Learning Environment Scale (THLES)⁴⁸
 - The Early Language Identification Measure Shortened (ELIM-S)⁴⁹

⁴⁶ Short Warwick-Edinburgh Mental Wellbeing Scale (SWEMWBS). Copyright NHS Health Scotland, University of Warwick and University of Edinburgh, 2008, all rights reserved.

⁴⁷ Oates, J., Gervai, J., Danis, I., Lakatos, K. & Davies, J. (2018). Validation of the Mothers' Object Relations Scales Short-form (MORS-SF). *Journal of Prenatal and Perinatal Psychology and Health*, 33(1), 38–50

⁴⁸ Sammons, P., Hall, J., Smees, R., Goff, J., Sylva, K., Smith, T., et al. (2015a). *Evaluation of Children's Centres in England (ECCE). Strand 4: The Impact of Children's Centres: Studying the Effects of Children's Centres in Promoting Better Outcomes for Young Children and Their Families*. Research Report DFE-RR495. London, UK: Department for Education

⁴⁹ Public Health England (2020). *Early language identification measure and intervention guidance book*.

These are described fully in Appendix D.

- **Local evaluation reports:** We also draw on local evaluations and data analysis undertaken by the Thrive at Five central team in 2025 covering evaluations of NELI, Talking Time and PEEP Learning Together. These evaluations are described in Appendix E.
- **GLD analysis for Thrive at Five schools:** We draw on the central Thrive at Five team's analysis of EYFS outcomes for children in schools in the Thrive at Five wards compared with citywide averages. See Appendix F.
- **Reception language score data:** We analysed data from the six primary schools located in the Thrive at Five wards which have implemented Talking Time, comparing language scores for children attending the school's nursery prior to Reception (and so receiving Talking Time) with those who did not. See Appendix F for further information.
- **Parent surveys:** We also draw on surveys of parents undertaken, analysed and reported by Thrive at Five central team. See Appendix G.

1.6.2. Redcar & Cleveland

- **Early years workforce survey:** The same survey as in Stoke-on-Trent, carried out between November 2024 and May 2025, with 111 responses included in the analysis of whom 51% were frontline staff. See Appendix K for details.
- **Qualitative interviews:** We conducted a total of 20 interviews/focus groups (n=22 individuals) with system leaders (fieldwork in January and February 2025), and with the backbone team, delivery partners and practitioners (fieldwork in Autumn in 2025). See Appendix C for further details.
- **Parent survey:** We draw on a survey undertaken and analysed



Future evaluation activity

The IPE will be repeated annually. We will continue with the monitoring of intermediate outcomes in Stoke-on-Trent, and plans are underway to identify data sources to monitor intermediate outcomes in Redcar & Cleveland.

A request was approved for access to GLD data from the National Pupil Database in September 2025. Data has not yet been received but it is anticipated it will be available in Spring 2026 for a 'dress rehearsal' of the impact evaluation analysis, which will be repeated in future years.

2. Context in Stoke-on-Trent and Redcar & Cleveland

In this section we provide an overview of the context for Thrive at Five in Stoke-on-Trent and in Redcar & Cleveland. For Stoke-on-Trent, we firstly summarise the benchmarking data on intermediate outcomes and the local schools' early language Reception data to help understand the broader child development context. We then describe experiences of parenting drawing on the parent survey undertaken by Thrive at Five, our qualitative data from parents, and statistics on childcare availability and use from DfE and from local Stoke-on-Trent data. We end this section with a summary of findings from our 2025 early years workforce survey. For Redcar & Cleveland, we begin with an overview of local area statistics.⁵⁰ We then summarise findings from the Thrive at Five parent survey in Redcar & Cleveland, and from our own early years workforce survey.

2.1. The Stoke-on-Trent Context

2.1.1. Understanding the broader child development context using enhanced health visiting data collection

Why these data are included in the context chapter

This section includes findings from the enhanced health visiting (HV) data collection (see Section 1.6.1) to help situate Thrive at Five within the wider child development context in Stoke-on-Trent. These data are presented here, rather than in the impact findings chapter, because they provide an insight into underlying developmental risk and protective factors

⁵⁰ A similar analysis was provided for Stoke-on-Trent in the Year 1 evaluation report and so is not repeated here.

in the local system, rather than constituting a direct measure of programme impact. However, enhanced HV data collection is intended to become a measure of programme impact over time. Subsequent years of data collection will enable comparison across timepoints to assess any signs of change.

Filling an important measurement gap

Improving the measurement of critical early developmental factors - such as parental wellbeing, parent–infant interaction and the early home learning environment helps build a more complete picture of the local context in which Thrive at Five operates. These domains are widely recognised within the early years evidence base as key predictors of early childhood developmental outcomes^{51,52} and form a central part of Thrive at Five’s theory of change as its intermediate outcomes. However, they are not routinely or consistently captured in administrative datasets, creating an important measurement gap in terms of an impact evaluation framework.

Purpose of the additional HV data collection

The additional HV data are intended to support three connected purposes:

- **See change earlier.** By generating timely quantitative evidence on the intermediate drivers that move the dial on early years outcomes, the data can help detect shifts before changes are visible in statutory datasets such as EYFSP.
- **Test Thrive at Five’s contribution.** While not used for formal attribution, over time, the data will enable tracking of whether the 0-2 years direct impact workstreams (e.g., PEEP, NBO and VIG) are associated with improvements in targeted intermediate outcomes across the local population.
- **Enable continuous improvement.** Establishing a rolling, low-burden data flow, anchored in routine HV systems and supplemented with feasible, acceptable measures.



Wider value for the local early years system

The enhanced data collection also represents a significant opportunity for the health visiting service to contribute to strengthening the local early years evidence base. By capturing information that is not otherwise available, the additional HV data has the potential to enhance collective understanding of how families are experiencing early childhood in these wards and where support may need to be focused. While these data inform the evaluation, they are not solely an evaluation tool; they also provide valuable learning for local practitioners and commissioners across the city, supporting service development beyond the Thrive at Five programme itself.

⁵¹ UNICEF (2023). Early Childhood Development. UNICEF Vision for Every Child.

⁵² WHO, UNICEF & World Bank Group (2018). Nurturing Care for early childhood development: a framework for helping children survive and thrive to transform health and human potential.

2.1.2. Process of implementing the enhanced HV data collection

The introduction of the enhanced HV data collection was implemented through a staged process between September 2023 and April 2025 as outlined in Figure 1 (see Appendix H for further detail of the implementation). This included the recruitment and funding of a dedicated health visiting specialist role to deliver the enhanced data collection. The specialist was trained by a member of the evaluation team to administer the measures in a local community venue. This approach reflected the need to align outcome measures, secure data governance approvals, and embed new data collection practices within routine HV workflows.



Introducing the enhanced HV data collection to families

The enhanced HV data collection was intentionally introduced to families as part of a supportive, service-led conversation rather than as a standalone research activity. Health visitors were encouraged to position the measures as an extension of their routine role in supporting families, linking the questions to personalised support and to Thrive at Five's broader aim of strengthening early childhood development across the city.

Appendix H includes the communication materials used by health visitors and outlines how they were developed.

2.1.3. Summary of first-year findings from the enhanced HV data collection 2025

Baseline year and feasibility assessment

The period between January and December 2025 represents the first year of enhanced HV data collection. The findings presented below therefore function primarily as an initial baseline⁵³ and as a pilot of the feasibility of collecting and using these measures at scale through routine HV contacts. As such, the data provide early insight into intermediate developmental conditions in the Thrive at Five wards and should be interpreted as indicative and exploratory rather than definitive.

In future years, this approach has the potential to support the tracking of key intermediate outcomes over time through year-on-year trend comparisons. As these measures are influenced by multiple services, family circumstances and wider system factors, they are interpreted in this report as contextual and system-level indicators rather than as attributable effects of Thrive at Five alone. This distinction is particularly important at this early stage of data collection and distinguishes these findings from the internal Thrive at Five evaluations, where there is greater likelihood that findings can be attributed to the programme.

Who consented to the enhanced data collection?

Average consent rates for additional data collection were similarly low across 1-year (88 respondents, 37%) and 2-year (90 respondents, 41%) checks. There was, however, variability with monthly fluctuations in those who consented (see Table 1). Across the two health check points (the 1-year and 2-year checks), January had the lowest consent rates, with no families consenting, while October had the highest, with 61% consenting at the 1-year check, and 67% at the 2-year check.

⁵³ We recognise that the data from the 2025 enhanced HV data collection does not represent a 'baseline' in the true sense of the word as Thrive at Five has been operating in areas for 2.5 year prior to the start of data collection.

Table 1. Consent rate per month (%): HV 1-year and 2-year checks data

Month	Consent rate per month (%)	
	1-year-check data	2-year-check data
January	0%	0%
February	25%	33%
March	32%	44%
April - <i>change to in-clinic data collection</i>	43%	45%
May	42%	27%
June	28%	39%
July	47%	32%
August	39%	53%
September	56%	50%
October	61%	67%
November	44%	39%
December	27%	32%

Despite low and fluctuating consent rates for the additional measures, the participant profile is broadly representative for both the 1-year and 2-year data. No significant differences were found between consenting and non-consenting participants in relation to child gender, child ethnicity, birth order, or breastfeeding history.

However, differences were observed by parent age (see Table 2), with younger parents less likely to provide consent. When looking at each age band, for the 1-year check, consent rates were 20% among parents aged 18-25, compared with 59% for those aged 36-40, and 71% for those aged over 40. Although consent rates among younger parents were higher at the 2-year check than the 1-year check, they remained comparatively low – 38% consent rate for 18-25, 57% for 36-40 and 67% among those aged over 40. The consent rate for the 26-30 band at 2-year-check is both the lowest across all age bands, and lower than 1-year-check consent rates by 13 percentage points. These findings suggest that a greater outreach effort is required may be needed to engage younger parents, particularly at the 1-year review for mothers in the 18-25 age band.

Table 2. Consent rate by mother's age band (%): HV 1-year and 2-year checks data

Age band	Consent rate by age band (%)	
	1-year-check data	2-year-check data
Age < 18 ⁵⁴	100%	NA
Age 18-25	20%	38%
Age 26-30	47%	34%
Age 31-35	34%	40%
Age 36-40	59%	57%
Age > 40	71%	67%

What do the measures tell us?

Across three of the four measures, results are either in line with previously reported national averages or they exceeded expectations. Overall, findings suggest that consenting parents reported high wellbeing, strong parent-child relationships, and that their child has typical language development. There is greater variability for parental reporting of the

⁵⁴ In the 1-year-check data, there is only one mother within the age<18 band, and there are no mothers in the 2-year-check age <18 band.

home-learning environment, with activities focused on early communication and language reported more frequently than sensory activities and exploratory play.

However, these findings should be interpreted in light of how the measures were collected, as the sample is self-selecting and therefore subject to potential bias. Parents with more positive health visiting and parenting experiences may be more likely to consent to data collection, and subsequently, to report more favourable outcomes.

Early Language Identification Measure Shortened (ELIM-S) A total of 89 respondents (99% of those who consented) completed the ELIM-S measure. The majority of children (72%) were assessed as developing language as expected with no immediate requirement for intervention. This aligns with existing UK research⁵⁵ suggesting that approximately 75% of children assessed via ELIM, have a typical language development. Approximately a quarter of children showed some developmental concerns, while a small proportion (4%) were assessed as having significant developmental concerns requiring further assessment and targeted support.

Mother's Object Relation Scale Short Form (MORS-SF) A total of 85 (97% of those who consented) respondents at the 1-year check and 90 respondents (100% of those who consented) at the 2-year check answered all 14 items that allowed for a MORS-SF total score to be calculated. Most participants reported a strong parent-child relationship – 94% at 1-year check, and 90% at 2-year check. In the 1-year HV data, no parents fell in the 'at risk' category, and only 1% of parents were in this category for the 2-year check data.

Short Warwick-Edinburgh Mental Wellbeing Scale (SWEMWS) A total of 88 (100% of those who consented) respondents answered all seven items that allowed for a SWEMWS total score to be calculated. Scores ranged from 13-35, and the median score was 30.5, which is almost seven points above the average in UK general populations for women over 16 years (23.5).⁵⁶ Most participants (81%) have above average wellbeing, meaning their scores were 28 and over. A very small percentage (3%) fall in the below average wellbeing group, with a score of 20 and below.

The high proportion of parents scoring within the 'above average wellbeing' category may be interpreted in light of when the measure is collected. As parents are asked these questions at least 12-months post-partum, many may be more settled into parenthood by this stage. Where challenges were experienced earlier, there may have been a sufficient time for these to be addressed through appropriate support services, e.g. perinatal mental health services or local VCS offers, and this may have contributed to higher reported wellbeing.

⁵⁵ Law, J., Charlton, J., Wilson, P., Rush, R., Gilroy, V., and McKean, C. (2023). The development and productivity of a measure for identifying low language abilities in children aged 24-36 months. *BMC Pediatrics*, 23(1), 495. <https://doi.org/10.1186/s12887-023-04079-x>

⁵⁶ Ng Fat, L., Scholes, S., Boniface, S., Mindell, J., & Stewart-Brown, S. (2017). Evaluating and establishing national norms for mental wellbeing using the short Warwick-Edinburgh Mental Well-being Scale (SWEMWBS): findings from the Health Survey for England. *Quality of life research: an international journal of quality of life aspects of treatment, care and rehabilitation*, 26(5), 1129–1144. <https://doi.org/10.1007/s11136-016-1454-8>

Toddler Home Learning Environment Scale (THLES)

A total of 88 parents (98% of those who consented) answered all eight items that allowed for a THLES score to be calculated. Score ranged from 21-50, and the median score was 44 which is slightly higher than the average score of 43 reported in previous research studies.⁵⁷

Parents reported frequent engagement in activities that support early language, communication, and literacy. 89% draw their child's attention to the names of things more than once a day, 89% sing songs or nursery rhymes to their child more than once a day, and 78% read to their child more than once a day. Looking at the number of baby/toddler written books the child has, 80% own 21 or more.

Opportunities supporting spatial reasoning, problem solving, and motor skill development appear more variable. While 75% of parents reported talking about or teaching the names of shapes and colours more than once a day, a lower proportion (65%) reported using blocks or shape-sorting toys with their child more than once a day, and only 50% reported that their child plays in a messy way more than once a day.

Further, only 35% said their child is taken out every day or more than once a day, and over 20% of children are taken out twice a week or less, potentially exacerbating any feelings of loneliness and isolation amongst these parents.

The difference in these measures indicates that activities focused on early communication and language are more frequently reported on than sensory activities and exploratory play. This may be due to the greater ease of and access to early communication activities compared to sensory and exploratory activities that may involve an additional financial barrier. There may then be room for improvement and encouragement for parents in engaging in these activities in a way that is accessible to foster a stronger, more balanced home learning environment.

2.1.4. Implications for next steps

Approach to future data collection

Average scores - particularly for parental wellbeing and parent-infant relationship – appear higher than might be expected given the level of deprivation and known challenges in these communities. However, this pattern is likely influenced by sampling bias. The measures were typically offered following the routine HV check, meaning participation was self-selecting. Parents who had positive visits and no immediate concerns may therefore have been more likely to consent to additional data collection, skewing the sample towards those experiencing fewer difficulties.

For future waves, it is recommended that the additional measures are introduced earlier in the visit, before the main assessment, and that efforts are made to engage a broader range of families. This would help ensure the data more accurately reflect the full distribution of parenting experiences and potential support needs.

⁵⁷ Hall, J., Sylva, K., Sammons, P., Smees, R., Evangelou, M., Smith, T., and Goff, J. (2021). Investigating the reliability and validity of the Toddler Home Learning Environment (THLE) scale. *Frontiers in Education*, 6. <https://doi.org/10.3389/educ.2021.581005>.

We also plan to enhance the measurement of parent-infant relationships by exploring the addition of a complementary tool to the MORS-SF to better capture the quality of early interactions. The Karitane Parenting Confidence Scale⁵⁸ is planned as a supplementary measure at 1-year checks to provide a fuller picture of parents perceived capability alongside relationship quality.

Validation and future linkage opportunities

A small subset of data⁵⁹ collected since November 2025 allows preliminary comparison between a new binary item asking whether parents had any current wellbeing concerns (yes/no) and their SWEMWBS scores. Initial exploratory analysis indicates that parents reporting current wellbeing concerns had a lower median SWEMWBS score (28) than those who did not report current wellbeing concerns (30.5), suggesting alignment between the two measures.

A further item captures whether parents had any concerns about their child's language development, which can be assessed alongside their child's ELIM outcomes. However, the number of parents in the current dataset that reported communication concerns is too small to conduct any preliminary comparisons at present.

While very preliminary, the observed association between reported wellbeing concerns and SWEMWBS scores suggests potential for strengthening the validity of the HV measures through triangulation with other related data sources as the approach matures. Future data collection will attempt to expand this (pending approval by MPFT) by linking to:

- Responses to wellbeing-related questions asked at the 6–8 week check
- ASQ data from the 2-year check, including language development indicators

Implications for next stages of intermediate outcomes data collection

Overall, the HV data collection is demonstrating feasibility and showed that target consent rates of 60-70% are possible in time. The main implications for next steps are:

- Adjusting the timing and approach to data collection to reduce sampling bias
- Expanding sample coverage to capture a broader range of family experiences
- Conducting formal analysis of relationships between domains as the dataset grows
- Strengthening data linkage with existing HV and child development measures

2.1.5. Reception language score data

This section includes findings from reception classroom language score data in schools within the Thrive at Five wards (see Section 1.6.1 and Appendix F), helping to describe children's language and communication within the context of schools supported by Thrive at Five in Stoke-on-Trent.

⁵⁸ Crncec, R., Barnett, B., & Matthey, S. (2008). Development of an instrument to assess perceived self-efficacy in the parents of infants. *Research in nursing & health*, 31(5), 442–453. <https://doi.org/10.1002/nur.20271>

⁵⁹ These new questions were only introduced in November 2025, and so sample sizes are small. At the 1-year check, 14 parents answered the question on current wellbeing concerns, with 4 (29%) answering yes and 10 (71%) answering no. At the 2-year check, 16 parents answered the question on communication concerns, with 2 (13%) answering yes and 14 answering no (87%).

The mean language score across all children in the 2024 Reception data is 94.22, (range: 65-126), which is very similar to the mean score in the 2025 Reception data of 94.72 (range: 65-128).

When examining child characteristics, statistically significant differences were observed in both cohorts between children with EAL and those without, and between children with SEND and those without (see Table 3). No statistically significant differences were observed in either year by setting type (i.e. whether children attended their school nursery, a different school nursery, a PVI nursery, or were home-based prior to Reception) or by child gender.

Table 3. Mean language score data by child characteristics (2024 and 2025)

	2024 Reception data (mean language score)	2025 Reception data (mean language score)
EAL	84.29	85.16
No EAL	97.35	97.13
SEND	87.72	83.81
No SEND	97.48	97.62

These results may indicate that children who remained within the same school setting for nursery and Reception, and were therefore more likely to have been exposed to the nursery language intervention supported by Thrive at Five (i.e., Talking Time), do not have significantly higher language screen scores than those children who are schooled elsewhere prior to reception and were not exposed. However, this interpretation remains exploratory, as the Reception data do not indicate whether children who remained in the same school setting for nursery and Reception were actually exposed to Talking Time.

2.1.6. Experiences of being a parent in Stoke-on-Trent

To provide contextual background on the experiences of parenting, data is drawn from findings from a parent survey conducted by Thrive at Five, parent interviews conducted by CEI, and available local data including the most recent Stoke-on-Trent childcare sufficiency report and childcare sufficiency data reported by the Department for Education. Overall, findings across these sources suggest that many parents experience gaps in information and support, uncertainty about where to seek help, and practical barriers to engaging with available services.

In the previous year, findings across Thrive at Five’s parent survey and our qualitative interviews converged in highlighting perceived gaps in available support and challenges in engaging with services. Parents frequently described parenting as challenging, isolating and emotionally demanding, and many expressed anxiety due to conflicting advice and fear of being judged around their parenting.

Findings from the second year paint a similar picture, with parents continuing to face challenges in accessing information and navigating services. According to Thrive at Five’s survey, conducted with 299 parents across Stoke-on-Trent, only around half of parents say they have enough and helpful information in pregnancy (52%) or to support their baby’s development (53%), and only around a third to support toddlers (34%) or children starting school (32%). Parents in Thrive at Five wards were more likely to report having enough and helpful information at every child life stage than those from non-intervention wards, with statistically significant differences across all stages, most pronounced for toddler and school-related information, where Thrive at Five’s work is most directed. Despite this, the

overall pattern across Stoke-on-Trent suggests that large numbers of parents experience information gaps, uncertainty, and difficulty navigating the system.

This sense of uncertainty is also reflected in parents' confidence in accessing help. Only a third of parents (32%) say they are confident about knowing where to get help if they were worried about a child; 43% report being only quite confident, and 25% not confident at all. Parents also report limited trust and confidence in professional support (e.g. GP staff, health visitors, nursery or school staff). Around half of parents agreed that they could trust professionals (50%) and felt listened to (48%), while fewer than half agreed that they did not feel judged (39%), were helped with the issue they came with (35%), were helped to feel more confident as a parent (24%), or received the support they needed (22%). Likewise, fewer than half of parents had a positive view of service availability and accessibility within Stoke-on-Trent, with only 41% agreeing that services are available in their local area and just 22% saying these services are straightforward and easy to navigate. Overall, fewer than half of parents (45%) say they have plenty of support, and only around half of parents view Stoke-on-Trent positively as a place to raise children, with 53% rating it as excellent or good.

These survey findings are strongly reflected in the qualitative interviews conducted as part of our implementation and process evaluation. Parents involved in Family Hubs in Bentilee (where Thrive at Five has been working closely with the Family Hub) and Abbey Hulton (where Thrive at Five's involvement was more recent) were asked about their experiences of parenting in Stoke-on-Trent. These parents lived in and around Bentilee, Hanley and Abbey Hulton and described challenges related to finding information, accessing services and knowing where to turn for support.

Those living on the outskirts of Bentilee described living in areas with limited local provision, and Family Hubs with a Thrive at Five presence and their Parent Connector roles were often described as the main or only place to engage with other parents, as well as a central access point for peer support, information and signposting to relevant services. For some parents, Thrive at Five supplemented limited statutory provision:

"I will say, I was a bit late to the game really finding out about stuff like this [advice about parenting and baby development] because I didn't start attending this group [PBT] till [baby] was probably about 12 months old. If I'd have known what was available when I first had him like I would always advise people now to go and look around. Whereas my health visitor never told me anything like that." Parent, Stoke-on-Trent

Parents in Abbey Hulton described more activities and groups with "loads of places to go", but also highlighted structural barriers around resources that shape access to provisions:

"There isn't much around me, unless you can travel. I'm lucky, I drive. If I didn't drive, I think I'd be isolated if I'm honest (...) I was lucky that I'd got that money because, obviously, I've got a very well-paid job. If I hadn't have got that money, I'd have been even more isolated." Parent, Stoke-on-Trent

Across interviews, Thrive at Five was described as a gateway to support and information, helping to connect parents with services, information, and peer networks. Compared to Year 1, parents interviewed in Year 2 appeared to be less isolated than those interviewed the previous year, indicating that they had begun to form friendships within peer networks and had better access to information about available support for children. They also described feeling emotionally safe within Thrive at Five groups and provision:

“So, I can go and speak to my local GP. Health visitors are on hand on the phone, in the health visiting hubs and things like that. There are opportunities for me to take my baby to go and get weighed, but most of it is mostly here through Thrive at Five. They've put me in contact with various services that have helped me in terms of me, myself, as a parent, my child's development, me talking to other parents and gaining other parenting skills, but then also have put me in touch with services such as Mother's Mind about my mental health as well - which has massively benefited me.” Parent, Stoke-on-Trent

This lived experience account from parents navigating support and services in Stoke-on-Trent sits alongside wider data on childcare provision and take-up. 2025 Department for Education data⁶⁰ show that early years provision for 2- to 4-year-olds is delivered through a mix of private, voluntary and independent providers (PVIs – 38%) and state-funded schools (62%). Almost all children (99%) attend settings rated Good or Outstanding by Ofsted.

Take-up of funded early years places is high among 3- to 4-year-olds, at 85.0% for three-year-olds (slightly below the national average of 90.6%) and 100% for four-year-olds (national average 95.6%). However, take-up among 2-year-olds eligible for targeted support (FRAS) is much lower at 53.9%, and well below the national average of 65.2%.⁶¹

Stoke-on-Trent's childcare sufficiency report provides further system-level context, although it dates from 2021.⁶² At that time, the Local Authority reported no significant sufficiency concerns, noting that there were enough childcare places city-wide for children aged 0–5. However, the report also highlighted variation in availability and take-up across wards. In particular, take-up of funded places for 2-year-olds varied significantly at ward level, with markedly lower take-up in Abbey Hulton (56%) compared with much higher levels in Bentilee (93%).

2.1.7. Perspectives from the early years workforce

Professionals' perspectives of the early years system



Overall, findings from this survey suggest that there are **feelings of prolonged change and improvement to connectedness, but further work is needed to ensure sustained confidence in a sense of collaboration, integration, and infrastructure.** Perspectives on data usage are overall positive, and professionals within Stoke-on-Trent often use data to support children and families.

Respondents are **consistently confident in the importance of the parental role,** but this year, **views are more mixed on the understanding of available services and knowledge of local referral pathways.** There remains a need for confidence and awareness building in these two areas, to ensure targeted, quality support can be provided to parents and children. It is important to note that these findings are presented for descriptive purposes only, and no statistically significant differences were identified.

Before outlining findings from the 2025 early years workforce survey, it is important to note that these analyses should be interpreted with caution. The 2025 survey used a pragmatic sampling approach, meaning there is no guarantee that the same participants completed the survey both in 2024 and 2025. As a result, we are unable to make definitive direct comparisons between the two samples, as they may reflect different groups of

⁶⁰ Department for Education (2025). Funded early education and childcare: Local authority data – Stoke-on-Trent.

⁶¹ DfE data 2024/25 from Nesta Best Start in Life data profiles

⁶² City of Stoke-on-Trent (2021). Childcare Sufficiency Assessment 2021-22 for Education (2025).

respondents. In addition, the 2025 sample size (59 included responses) is also almost half that of 2024 (112 included responses), and the profile of respondent's roles differs slightly across years (see Table A4 in Appendix B), further making definitive direct comparisons challenging.

Practitioners responding to the 2025 early years workforce survey expressed somewhat more optimistic views in some areas compared to the previous year, though findings suggest there remains scope to strengthen system integration. As in the 2024 workforce survey, practitioners working in Thrive at Five operating wards - whether exclusively or alongside non-operating wards ('Within Thrive at Five Scope') reported more positive views on connectedness than those whose work is limited to areas exclusively outside the Thrive at Five scope. Figures for findings in this section can be found in Appendix J.

Connectedness and collaboration

A large majority (88%) of respondents working within Thrive at Five Scope reported feeling connected to others in the sector, compared with only 29% of those working outside Thrive at Five Scope. Among those within Thrive at Five Scope, this figure is higher than Year 1 (76% in Year 1 and 88% in Year 2). However, perceptions of collaboration show a more mixed picture. In 2025, 51% of respondents within Thrive at Five Scope felt that staff collaborate well, compared with 57% of respondents outside Thrive at Five Scope. This differs from the 2024 survey, where those within Thrive Scope reported stronger perceptions of collaboration (71%) than those outside it (47%). Year-on-year, collaboration perceptions among respondents within Thrive at Five Scope therefore appear to have declined (from 71% to 51%).

Organisational integration, structures and processes

Only a third of respondents (33%) felt positively about organisational integration across services, while the largest proportion (43%) reported neutral views. This percentage is lower than the 2024 workforce survey, where 51% of respondents agreed that organisations were well integrated. When examined by geography, respondents working within Thrive at Five Scope reported somewhat more positive views (36%) than those outside it (14%). Perceptions were somewhat more positive regarding the presence of structures and processes to bring individuals and organisations together, with 48% of respondents agreeing these were in place. However, this is slightly lower than the 2024 survey (55%). Respondents within and outside Thrive at Five Scope reported similar perceptions on this measure (51% and 57% respectively).

Use of data

Survey responses also provide insight into the use of data within the local system. Fewer respondents reported that their service had access to local data related to child development compared to the previous year (91% in Year 1 and 76% in Year 2). However, respondents within Thrive at Five Scope in 2025 were more likely to report access to such data than those outside Thrive at Five Scope (80% compared with 60%). Respondents were also asked how frequently data are used for specific purposes. Most respondents (79%) reported that data are often used to identify support for children and families, and the same proportion reported that data are often used to monitor the impact of support. These figures are broadly consistent with the 2024 survey, where 74% reported that data were often used to identify support needs and 70% reported that data were often used to monitor impact.

Professionals' perspectives of the quality of support for parents and children

Across the Stoke-on-Trent workforce survey, respondents expressed strong agreement with the principle that parents are the most important support for their children. In 2025, 89% of respondents endorsed this view, consistent with the 2024 survey (90%). There was very little difference between those working within Thrive at Five operating wards and those outside them (89% and 90% respectively). When examining respondents within

Thrive at Five Scope year on year, this very high level of agreement remains stable (90% in Year 1 and 89% in Year 2).

Across the whole sample, in both Year 1 and Year 2, a higher percentage of professionals reported having a good understanding of available services and programmes (80% in Year 1 and 68% in Year 2) than reported confidence in their own knowledge of local referral pathways (68% in Year 1 and 56% in Year 2). However, perceptions of both understanding and confidence are lower in 2025 when compared with the previous year. Looking specifically at professionals within Thrive at Five operating wards in 2025, perceptions were consistently higher than for those outside of them: 72% of respondents within Thrive at Five scope reported a good understanding of available services compared with 54% of respondents outside of it, and 62% of respondents within Thrive at Five operating wards reported confidence in referral pathways compared with 39% outside this scope. However, perceptions of those working within Thrive at Five operating wards in 2025 are again lower when compared to those within Thrive at Five operating wards from the previous year. This may reflect emerging changes in how early years services are being funded and changes in commissioning structures, as well as the pressures of new Government targets.

Despite these changes, respondents continued to report strong confidence in their own ability to support families. A large majority agreed that they have access to approaches that work well for families (77% in Year 1 and 79% in Year 2), that they are confident in their own ability to support children and families (85% in Year 1 and 89% in Year 2), and that they feel well supported by their service to provide the best care for families (90% in Year 1 and 87% in Year 2).

2.2. The Redcar & Cleveland context

2.2.1. Understanding the broader community landscape

Redcar & Cleveland – a borough in North Yorkshire with a population of approximately 138,000 – is, like Stoke-on-Trent, marked by a post-industrial economic history of enduring socio-economic challenges, characterised by high levels of poverty, unemployment, and health inequalities.⁶³ The area has long faced economic difficulties, particularly following the long-term decline of heavy industry causing the loss of skilled job opportunities, and is the eight most deprived local authority in terms of employment deprivation in England, and in the top 25% of the most deprived authorities in England.⁶⁴ These figures underpin significant challenges across education, health, housing, and living conditions

The impact of this socio-economic disadvantage is particularly pronounced among children and families, with recent figures suggest that four in ten children living in the borough are growing up in poverty.⁶⁵ Redcar & Cleveland has one of the highest rates of 'looked after children' in England, with approximately 149 looked after children per 10,000, compared with the national average of 67 children per 10,000.⁶⁶

Children in their early years are particularly affected by these socio-economic challenges. The latest DfE data⁶⁷ for the academic year 2024/25 reveals that 67.8% of children achieve GLD in Redcar & Cleveland, which aligns with the northeast England average of 67.8% but falls very slightly below the national average of 68.3%. However, disparities are seen more widely when comparing children eligible for Free School Meals (FSM) to those who are not.

⁶³ Redcar & Cleveland Borough Council: local authority assessment (2025)

⁶⁴ Office for National Statistics (2025). English Indices of Deprivation.

⁶⁵ Redcar and Cleveland Poverty Strategy (2025-2027)

⁶⁶ Department for Education (2025). Children looked after in England including adoptions

⁶⁷ Department for Education (2025). Early years foundation stage profile results

In Redcar & Cleveland, only 46.2% of children eligible for FSM achieve GLD, which is 5 percentage points less than the national average of 51.3% for the same group. Moreover, only 16.3% of those with a SEND need reached GLD in 2025; this is nearly 4 percentage points lower than the national average (20.6%) and nearly 6 percentage points lower than the average for the northeast (22.1%).

Use of childcare in Redcar & Cleveland

In terms of childcare provision, the 2025 Childcare Sufficiency Assessment⁶⁸ concluded that the picture for childcare sufficiency in Redcar & Cleveland is “currently satisfactory” but also noted that the final roll out of early years entitlements in September 2025 may place extra burden on the supply of early years childcare places. A significant number of parents are using informal childcare and 48.2% of parents surveyed who use or need childcare rely on a combination of informal and formal provision to meet their needs. Take-up of funded early years places is high among 3- to 4-year-olds, at 95.8% (slightly above the national average of 93.1%). Take-up among 2-year-olds eligible for targeted support (FRAS) is lower, at 75%, although this remains above the national average of 65.2%.

2.2.2. Experiences of being a parent in Redcar & Cleveland

Insight into the experiences of parents in Redcar & Cleveland is drawn from Thrive at Five’s parent survey, completed by 175 parents. The survey in Redcar & Cleveland was carried out in collaboration with the Family Hubs, so it illustrates the experiences of parents involved in the Family Hubs. Overall, 68% of parents agreed they have enough and helpful information in pregnancy, 70% to support baby’s development, but fewer than half (40%) to support development of toddlers and to support starting school (36%). This resembles a similar trend in Stoke-on-Trent with lower percentages of parents noting having access to enough helpful information for the development of toddlers and for children starting school; these are notably the target areas for Thrive at Five’s initiatives. Redcar & Cleveland showed higher percentages than Stoke-on-Trent across these variables although as noted above this may reflect differences in the make-up of the survey sample. Likewise, parents in Redcar & Cleveland reported higher percentages around knowing where to get support than those in Stoke-on-Trent, although still only 44% reported being confident.

Experiences with professionals were also a little more positive than in Stoke-on-Trent across multiple measures. Around two-thirds of parents in the survey said they experienced trust in professionals (62%), feeling listened to (69%) and receiving support when needed (61%); and over half experienced services being available (58%), and not feeling judged (53%). However, below half experienced being helped with their issue (48%), being made to feel confident as a parent (42%), and finding it easy to access support (35%). Overall, half of parents (50%) reported having plenty of support and 63% rated Redcar & Cleveland as an excellent or good place to raise children.

⁶⁸ Redcar and Cleveland Childcare Sufficiency Report 2025

2.2.3. Perspectives from the early years workforce

Professionals' perspectives of the early years system



Overall, the survey findings reflect the early years system in Redcar & Cleveland is perceived as **less fragmented and less resource-constrained than in Stoke-on-Trent**. However, when considered alongside the more positive workforce survey findings from Stoke-on-Trent in Year 1, there is considerable **scope for further strengthening data use and data infrastructure** to better support children and families. There may also be **room for improvement in knowledge of available local referral pathways that matches the existing high level of knowledge of available services**. In doing so, a stronger, more joined-up system could be fostered where understanding and knowledge can be translated into action and impact.

Connectedness and collaboration

Survey data from 2025 indicate that 67% of respondents across all Redcar & Cleveland wards felt connected to other individuals and organisations in the sector, and 66% felt there was good collaboration across organisations. Compared with Year 1 workforce survey data from Stoke-on-Trent, where only 55% of respondents felt a sense of connection, and 59% reported perceiving good collaboration across individuals and organisations, respondents in Redcar & Cleveland were more optimistic at baseline.

When stratifying by geography, respondents working within the Thrive at Five's scope reported a greater sense of connection than those outside it, reflecting the pattern seen in Year 1 Stoke-on-Trent data. However, while respondents outside Thrive at Five Scope reported entirely positive perceptions of staff collaboration (100%), views on staff collaboration of those within Thrive at Five Scope were more varied at 66%, with only 13% of this group strongly agreeing they felt connected to others. This contrasts with Stoke-on-Trent Year 1, where those within Thrive at Five Scope were more positive than counterparts outside of it (71% vs 47%).

Organisational integration, structures and processes

Overall, 59% of respondents in Redcar & Cleveland were positive about organisational integration, nearly double the Year 1 Stoke-on-Trent figure (33%). Within Thrive at Five Scope, 61% felt positively about integration, compared with 38% of those working only outside of the Thrive at Five wards. Similarly, 59% of participants overall agreed that structures and processes were in place to bring individuals and organisations together, higher than the 48% reported in Year 1 Stoke-on-Trent. Those within Thrive at Five Scope again reported greater agreement than those outside the scope.

Use of data

Views about Access to and use of data in Redcar & Cleveland were generally positive. Most respondents (78%) reported access to local child development data, with those within Thrive at Five Scope slightly more confident than those outside (80% vs 71%). When asked about the use of data for specific purposes, 69% felt data was often used to identify support for children and families, and 77% felt data was often used to monitor the impact of support. These figures are slightly lower than Year 1 Stoke-on-Trent responses (79% for both measures). Overall, perceptions of the system in Redcar & Cleveland are positive and encouraging, representing a solid foundation for Thrive at Five to build on, while highlighting specific areas for further development.

Professionals' perspectives of the quality of support for parents and children

Survey responses highlight a strong recognition of the important role parents play in supporting children. An overwhelming majority (96%) of respondents reported that their organisation's ethos reflects this belief. High levels of agreement were also seen for support aimed at empowering parents and carers (87%) and for creating opportunities to engage with local families (76%). Participants similarly reported confidence in their own abilities, with 96% feeling capable of supporting children and families, and 95% feeling well supported by their service to provide high-quality care.

When comparing understanding of available services to knowledge of local referral pathways, 85% of respondents felt they had a good understanding of services and programmes in the area, while fewer (73%) felt confident in their knowledge of referral pathways. This mirrors the pattern seen in the Year 1 Stoke-on-Trent survey (80% had a good understanding of services; and 68% confident in referral pathways).

Stratifying by geography, there was little difference between Thrive at Five Scope and non-Thrive at Five Scope respondents in confidence in referral pathways (74% vs 73%). A larger difference was evident for understanding of available services, with 86% of respondents within Thrive at Five Scope reporting a good understanding, compared to 73% of those outside of their scope.



Part two

Experience of implementing Thrive at Five

3. Implementation of Thrive at Five in Stoke-on-Trent

3.1. Adoption and partnership building



In the Year 1 evaluation, senior leaders' accounts highlighted how adoption was underpinned by a strong perceived need for a new approach to early years support in a context characterised by high levels of deprivation, social isolation, low levels of GLD relative to the national average, and a fragmented early years system following sustained disinvestment. Adoption was also shaped by features of the Thrive at Five approach that were seen as particularly well suited to this context, including its focus on early years and school readiness, holistic vision for children's development, its emphasis on collaboration and community engagement, and its positioning as an approach rather than a fixed programme, allowing for local adaptation.

The approach was seen as needed in Stoke-on-Trent because of the absence of a strong early years system, siloed and fragmented working, and poor levels of GLD. The centring of the use of evidence and data was less emphasised at that stage.

By the second year of evaluation, the majority of Thrive at Five's direct workstreams in Stoke-on-Trent were in the '*Improve and embed*' stage of implementation. This stage involves the ongoing monitoring, adaptation and refinement of workstreams, alongside efforts to embed ways of working, strengthen partnerships, and plan for sustainability and succession as Thrive at Five gradually steps back from direct delivery. However, some workstreams, particularly those focused on parent-infant relationships, remained in earlier stages of implementation as they continued to be established. In this context, adoption

remains relevant as a process of continued endorsement and engagement by system partners, expressed through sustained and evolving partnerships and institutional support.

3.1.1. Continued relevance and perceived added value

In this year's data, understandings of Thrive at Five among senior leaders and practitioners that we interviewed for the first time again recognised Thrive at Five as focused on early years and school readiness. They understood Thrive at Five as aiming to catalyse change at systems level, strengthen partnership, improve a system that remains uncoordinated, and develop service provision. Their understandings also centred community and parent engagement, and relational work (with communities and between practitioners). We heard more than in Year 1 about Thrive at Five as an approach that challenges current ways of working, catalyses change, identifies gaps, and is rooted in an understanding of child development and parents' needs and places children at its heart. We also heard more references to Thrive at Five as an approach that uses evidence-informed approaches and data (for example in examining the root causes of issues and introducing the new health visitor data collection).

Across interviews in Year 2, senior leaders consistently expressed the view that Thrive at Five continues to address the 'right problems' in Stoke-on-Trent. There was no sense among system leaders that the rationale for Thrive at Five had diminished over time. Rather, Thrive at Five was seen as remaining highly relevant and aligned with wider strategies, values and priorities, while adding distinctive value to the early years system.

Even among senior leaders who viewed Thrive at Five as already having been influential, there was a strong perception that its role remains necessary. Thrive at Five was described as helping to coordinate activity across a complex system, pulling services together and supporting a shared focus within the early years sector. This coordinating function was seen as particularly important in a context where many organisations are delivering valuable work, but often in parallel rather than as part of a coherent, system-wide response.

"[Thrive at Five] help coordinate. They pull the services together and make us focus in a direction (...) Because you've got lots of people doing really, really positive things within a community, but they're not necessarily, it's not a coordinated response." Senior leader, Stoke-on-Trent

"There is a very confusing landscape [of services] (...) There is this sort of web of services that really aren't necessarily talking to each other." Senior leader, Stoke-on-Trent

As in Year 1, senior leaders referred to the long-term impacts of disinvestment in early years and family support, including the loss of Sure Start, which was widely seen as having left a significant gap in provision, specialist support and system-level coordination. Thrive at Five was perceived as working positively within this space, not simply by filling gaps, but by providing a forum for collective reflection, joint working and strategic thinking about early years provision.

"There's been no other forum for that [discussion of early years provision] locally in the last few years. I think that's the big change for me, that practitioners are beginning to or have had an opportunity to come together and even know about each other." Senior leader, Stoke-on-Trent

In line with this, senior leaders emphasised its alignment with a shared local ethos and ambition for improving outcomes for children, and its role in enhancing and strengthening what already exists rather than replacing it. Thrive at Five was positioned as a key contributor within a broader push for a more coherent early years strategy across the system, and part of a wider conversation about strategic alignment, not as a competing initiative but as a component of a larger, system-wide approach.

“That was part of the reason why Thrive was such a good fit here, because that ethos exists here and exists within Thrive (...) It wasn't just: What do we need, to fill this gap? It was much more about: We've got big ambitions for children; we know we need to do better.” Senior leader, Stoke-on-Trent

These areas of challenge were welcomed, and we heard no resistance to the transformative aims of Thrive at Five. There were also no suggestions that Thrive at Five is not needed or that it duplicates existing work, and its contribution is clearly viewed as going beyond simply adding resource or a transactional framing. Thrive at Five is seen as aligned with existing strategies, goals, values and ethos, but able to add value. There was a clear sense of space for Thrive at Five to make a difference, particularly given significant disinvestment in early years, and to fill the gap left by the loss of Sure Start.

“[Thrive is] a bold initiative to bring asset-based thinking to the way family support is done in Stoke-on-Trent (...) trying to overturn those deficit-based practices of the past.” Senior leader, Stoke-on-Trent

Thrive at Five continues to receive strong institutional endorsement from system leaders. In their roles within the local early years system, senior leaders spoke positively about Thrive at Five's contribution, and it was consistently described as a valued part of the local early years ecosystem. Its alignment with local priorities and its perceived role in supporting coordination, partnership working and strategic focus were central to this continued endorsement.

Some practitioners spoke more narrowly about the particular initiative they were involved in with Thrive at Five, but here too they saw Thrive at Five as bringing new approaches and not simply being additional resource to do work that others were already doing.

3.1.2. Partnership building in practice

Findings from Year 2 suggest that partnership building remains central to Thrive at Five's role within the Stoke-on-Trent early years system, but that its nature has evolved from initial relationship-building towards the maintenance, deepening and, in some areas, expansion of partnerships. In Year 1, there was strong consensus among stakeholders that Thrive at Five had effectively built relationships with key partners, secured buy-in at both strategic and operational levels, and achieved a high profile within the local authority, communities and partner organisations. Key organisations were reported to be working closely with Thrive at Five, and the initiative was widely seen as facilitating new or strengthened relationships across the system.

Maintenance and deepening of partnerships

In Year 2, evidence points to the consolidation of these relationships, with partnerships becoming more regular, trusted and operational. Sustained collaboration with schools and nurseries was particularly evident through the continued delivery of interventions such as Talking Time and NELI, and more recently PEEP Learning Together. These ongoing

partnerships were described by backbone team members as supporting continuity in delivery while also enabling partners to adapt and refine their own practice over time.

Thrive at Five's work with the Bentilee Family Hub was seen as supportive and influential and has continued as the management of the Family Hub moved from Alpha Academies to the local authority. Thrive at Five actively supported this transition: early life workers from the local authority shadowed Thrive at Five's backbone team members during the delivery of PBT sessions to observe facilitation approaches and group delivery in practice. Thrive at Five also shared planning materials and session resources used in groups such as Babbling Babies, enabling local authority staff to deliver these sessions independently. In addition, Thrive at Five facilitated early life workers' participation in relevant external training opportunities alongside voluntary sector partners (e.g., PEAK), helping to build capability and continuity in delivery within the Family Hub.

Backbone team members described this process as instrumental in supporting local authority staff to establish and deliver group activities, with Family Hub staff also acknowledging its value in helping maintain continuity. Thrive at Five's role during this transition included modelling facilitation approaches and sharing practical delivery knowledge, enabling local authority staff to take on delivery with greater confidence. This illustrates how partnership working extended beyond coordination to include knowledge transfer and capacity-building, supporting the embedding of ways of working within statutory services.

“The local authority are now in Bentilee [Family Hub]. Their staff are there and they're learning, we've had this six-week transition where we've made sure, we've supported with modelling and sharing.” Backbone team member, Stoke-on-Trent

Expansion and layering of partnerships

Partnerships were consistently described as being at the heart of Thrive at Five's approach, with particularly strong relationships reported across education, children's social care and Family Hubs.

There was also evidence that some partnerships are beginning to shift from a primary focus on delivery towards greater involvement in strategic discussion and system-level coordination. Backbone team members described a gradual move away from supporting only small-scale, locally led initiatives towards contributing to more embedded approaches to parent–infant relationships and parental mental health across the early years system by establishing a Task and Finish Group around this topic – see 6.1.1. Beyond this, support included increased senior-level engagement around priority issues and growing practitioner capacity to design and adapt locally tailored interventions, such as the use of 'gap analysis' following NELI implementation in reception classrooms. Backbone team members and workstream staff described how Thrive at Five has supported schools to undertake 'gap analysis' work, using NELI data to identify specific areas of early learning where children with language difficulties may require additional support. Together, these developments suggest a layering of partnerships, with Thrive at Five operating simultaneously at delivery, capacity-building and strategic levels.

Barriers to partnership building and continued endorsement

Despite these positive developments, stakeholders identified several barriers to sustaining and expanding partnerships. Engagement with the health sector was seen as improving at a local level and in the additional intermediate outcomes data collection but remained challenging overall. Limited capacity within health visiting services was repeatedly cited as

a constraint, alongside differences between health and social models of practice that were perceived to create tension at leadership levels.

“The health model and a social model are very different things. [The health sector] are purists, and we work to this model. So if it isn't mandated and we're not contractually obliged to do it, and it isn't related to a health need, a diagnosis or a medical, you know, then it's not part of our remit.” Senior leader, Stoke-on-Trent

Primary health care and housing were also identified by senior leaders as gaps in current partnership involvement. Backbone team members echoed these concerns, noting limited engagement from some GP surgeries and baby clinics. They also described ongoing sensitivities affecting partnership working, particularly in the context of recent contract changes and long-term budget reductions within health visiting services. These were described as contributing to some uncertainty and tension between frontline health visitors and senior public health decision-makers regarding role expectations, which could affect the scope of frontline practitioners' involvement in the new 0–2 workstreams.

Maintaining engagement with schools was also identified as becoming more challenging over time. While nurseries and reception classes remain key partners, some backbone team members noted that, as Thrive at Five and associated interventions have become more established, they no longer carry the same sense of novelty within busy school environments. This was described as reflecting a common implementation pattern in schools, where new initiatives initially attract strong attention but may gradually compete with other priorities as they become routine. In response, backbone team members highlighted ongoing efforts to sustain engagement and support schools to reflect on outcomes and refine their delivery, particularly for children who may not be benefitting as expected.

“I know with my work in schools, coming up to four years, we're not the new novelty anymore (...) I'm noticing it, and the peripatetic support leaders as well. How do I keep this fresh and relevant?” Backbone team member, Stoke-on-Trent

Enablers of partnership building and continued endorsement

Several enabling factors were identified as supporting continued partnership building. These included increasing momentum and investment in early years through Family Hubs and Start for Life funding, alongside discussions around renegotiating the contract for the health visiting service, which were seen as potential opportunities to align roles and provision more closely with Thrive at Five's approach. However, awareness of these developments was uneven across stakeholders. Senior leaders also highlighted opportunities for Thrive at Five to leverage working alongside emerging local initiatives, particularly the Families First Partnership programme and its emphasis on design and co-production.

“All the eggs from a local authority are going to be in that [Families First Partnership] basket (...) at the moment because there's such a lot to do around that design element. (...) I think there's a real opportunity around the co-production and using that to inform some of the local reforms and the models.” Senior leader, Stoke-on-Trent

Continued buy-in from senior leaders remained a critical enabler, reinforced by renewed national attention to early years, funding streams and targets related to GLD. Thrive at Five's hyper-local, community-immersed approach was also repeatedly cited as a

distinguishing strength, particularly by senior leaders who had initially favoured a city-wide approach but came to value intensive local engagement.

Finally, Thrive at Five was described as having influence beyond that of many local organisations, linked to its entrepreneurial approach, and connections to philanthropy, central government, and national partners, and its strong grounding in early years evidence. Its ability to draw on research expertise and connect local partners with subject matter experts was also seen as strengthening its role as an advocate for early years priorities within the system. As noted in Year 1, this credibility, visibility and perceived energy across the national leadership and backbone team continued to support partnership building and sustained system engagement.

3.2. Reach



As in the previous year, reach was understood not simply in terms of numbers, but as the extent to which the right children and families were meaningfully engaged and supported across different settings and points of contact, in ways that could contribute to parental wellbeing and children's developmental outcomes.

Findings from Year 2 suggest that different elements of Thrive at Five's local approach have contributed to sustaining and, in some areas, expanding its reach to parents and children compared to Year 1. However, senior leaders, backbone team, and practitioners continue to recognise reach as an ongoing challenge rather than a completed achievement, particularly among the most marginalised parents.

3.2.1. Reach through direct impact workstreams

Thrive at Five's direct impact workstreams focus on improving key intermediate outcomes in their Theory of Change -See Section 1.5, including children's communication and language development and the quality of home learning environment. These workstreams involve supporting partner organisations to deliver structured interventions to children and their families.

As part of the workstream focused on improving children's communication and language, Thrive at Five supports local schools to deliver structured interventions, including Talking Time in nursery classes and NELI in Reception classes. As reported in Thrive at Five's internal evaluations - see Section 3.8 -, during the 2024/25 academic year, six schools implemented Talking Time with 152 children participating across nursery classes. Slightly more than half of participants were girls (54.6%), with 14.6% of the total of children identified as having English as an Additional Language (EAL), 15.8% as having Special Educational Need (SEND), and 36% eligible for Pupil Premium.

Seven schools delivered NELI during the same period. The total Reception cohort across these schools comprised 280 children, of whom 52% were girls, 21% had EAL, 24% had SEND, and 38% were eligible for Pupil Premium. A total of 262 children were screened using the LanguageScreen assessment, with 102 children (36.4% of the Reception cohort) participating in the intervention. For both Talking Time and NELI, internal evaluation findings indicated promising evidence of progress in children's language skills -see Section 6.4.

To support improvements in the home learning environment, Thrive at Five also supported delivery of the PEEP Learning Together programme in schools within the Thrive at Five

wards. PEEP is a structured intervention designed to support children's home learning environment and their communication and language skills through joint parent-child sessions. As reported in Thrive at Five's internal evaluation -see 3.8-, four schools delivered PEEP during the 2024/25 academic year. Between five and eight sessions were delivered in each school, with an average of between two and six parent-child pairs attending weekly sessions. However, one school did not reach the minimum delivery threshold of six sessions. We also heard from parents and practitioners that elements of the PEEP programme were incorporated into some PBT sessions at Bentilee Family Hub, which parents described as particularly valuable -see Sections 3.3 and 6.3.

3.2.2. Reach through parent outreach and engagement enabling workstream

Thrive at Five's enabling workstreams focus on building the relational and structural conditions necessary for long-term system change. The Parent Outreach and Engagement enabling workstream plays a central role in this by connecting families with early years support through communication activities, community events, and PBT groups and the work of Parent Connectors. Through these, Thrive at Five seeks to expand awareness of available provision, strengthen parents' confidence in accessing services, and foster sustained engagement with early years support.

Consistent with Year 1 findings, backbone team members, practitioners and parents described ongoing and sustained engagement of caregivers through activities supported by Thrive at Five, particularly PBT groups based at the Bentilee Family Hub.

The role of Parent Connectors continued to be viewed as central to achieving this reach. Across interviews, Parent Connectors were described as bringing credibility, energy and authenticity to engagement work, rooted in their relationships within local communities. Their ability to make parents feel comfortable, supported and welcomed remained a key mechanism through which reach was achieved and sustained.

As in Year 1, parents were also described as acting as informal connectors, bringing other parents into groups, sharing information about local provision, and encouraging engagement through word of mouth.

"If you've done a good job then that parent will go and tell another parent, they will tell another parent." Backbone team member, Stoke-on-Trent

Compared to Year 1, Year 2 findings indicate some expansion of reach through parent outreach activities supported by Thrive at Five, including PBTs and community events such as Bumps & Babies and Autumn Tales & Trails, into new locations and settings. Engagement was reported not only within Family Hub-based provision but also through sessions delivered in community venues, including a local church in Abbey Hulton, as well as community-based sessions for parents and babies. In some cases, Thrive at Five facilitated access to specialist-led groups hosted within Family Hub provision, such as the "Mother's Mind" PBT sessions, delivered by a mental health practitioner and focusing on maternal wellbeing. The initiation of PBTs in Abbey Hulton was noted among senior leaders and backbone team members as an important step towards engaging with families from this ward and strengthening Thrive at Five's presence in the area. Parents also described increased engagement with school readiness support for children under five, either embedded within PBT sessions or through additional targeted provision at the Hub.

This year's findings also note evidence of increased reach through health-related contact points. Backbone team members described Parent Connectors attending antenatal appointments, early clinics and newborn checks, enabling contact with parents who may not yet be aware of community-based provision.

"We're partnering up with MPFT [Midlands Partnership Foundation Trust] in some of their early clinics as well and their newborn checks. So, we're getting to meet a lot more parents in those forums as well, who might be going to antenatal appointments but then being unaware of what's available in the community."
Backbone team member, Stoke-on-Trent

Communication campaigns and online presence were also described as contributing to reach, particularly through social media and word of mouth. Backbone team members noted that focusing communicational messages around 'real-life videos of real-life children from real-life areas' and using accessible language worked particularly well for increasing content engagement among families.

3.2.3. Reach through broader collaborative work with practitioners and systems

In addition to direct engagement with children and outreach and engagement activities with families, Thrive at Five has also extended its reach through broader collaborative work with practitioners, service providers, and system leaders. This has involved convening stakeholders, strengthening coordination, and preparing the conditions for implementation of new interventions targeting key intermediate outcomes.

In relation to the parent–infant relationships and parental wellbeing intermediate outcomes, Thrive at Five's work during Year 2 focused primarily on preparing the conditions for delivery rather than direct implementation. Through the establishment of a Task and Finish Group on parent–infant relationships, Thrive at Five convened practitioners, service leads, commissioners, and subject matter experts to develop a shared understanding of local needs and agree on priorities for action. This process resulted in system-level agreement to introduce two evidence-informed interventions — Neonatal Behavioural Observation (NBO) and Video Interactive Guidance (VIG) — with Thrive at Five supporting partner organisations to establish delivery capacity and implementation arrangements. While delivery of these interventions had not yet formally commenced at the time of reporting, preparatory work had already reached a wide range of stakeholders across health, early years, and family support services. These interventions are intended to strengthen early parent–infant relationships and, in response to gaps identified through the Task and Finish Group, will also contribute to addressing the needs of parents experiencing mild-to-moderate mental health difficulties.

3.2.4. Key implementation challenges in relation to reach

As in Year 1, extending reach to the most marginalised parents remained a key challenge. While senior leaders generally felt that Thrive at Five was reaching some families with identified needs, there was concern that some parents — particularly those with lower confidence or fewer social skills — remain less likely to engage in group-based provision.

"I know that the right families are engaging because they were families of need. They were also families with a little bit of confidence. (...) Those are the ones that we struggle with." Senior leader, Stoke-on-Trent

Concerns about reach to the most disadvantaged families were also raised in relation to specific interventions. For example, senior leaders noted variation in how schools recruited parents to PEEP Learning Together. While some schools were described as using more targeted recruitment strategies focused on families most likely to benefit (e.g. children with poorer speech, social skills or lower parental engagement), others were perceived to be engaging parents who were already confident and involved in school life.

Backbone team members noted that while participation had increased in Abbey Hulton and engagement among fathers had improved to some extent, parents who were not already connected to services were still the hardest to reach.

Some fathers explicitly highlighted that parent-focused provision in Stoke-on-Trent often felt oriented towards mothers, which could act as a barrier to male caregivers' engagement.

“These kinds of groups [PBTs] (...) are very much directed towards mums, not males and dads (...) What about us males? I'm a stay-at-home dad [and would like more] help, advice (...) I think at first, you've got to get more men through the door. That's the biggest problem, isn't it?” Parent, Stoke-on-Trent

Finally, backbone team members identified structural barriers to monitoring and strengthening reach, including difficulties accessing ward-level birth registration data. This limited the team's ability to assess coverage systematically and to tailor engagement strategies based on detailed demographic information within Thrive at Five wards.

“We would really like to access birth registration data, for that to then be used as a potential outcome or measure of how many Parent Connectors are engaging or reaching. These conversations have been complex and ongoing, and as of yet, we haven't identified a solution. (...) It would make life so much easier in terms of a mechanism to measure for that parent outreach work, of how many parents we need to connect with, how many parents are we currently connecting with.” Backbone team member, Stoke-on-Trent

3.3. Acceptability



As in the previous year, acceptability was understood as the perception among stakeholders that Thrive at Five and its approach are agreeable, satisfactory, and that it appropriately responds to local needs and context.⁶⁹

Across both years of the evaluation, Thrive at Five's work in Stoke-on-Trent has been viewed very positively by stakeholders at all levels of the system. In Year 2, acceptability remained high and, in some respects deepened, with Thrive at Five increasingly described as a familiar, trusted and embedded presence within the local early years system and communities.

⁶⁹ Proctor, E., Silmere, H., Raghavan, R., Hovmand, P., Aarons, G., Bunger, A., ... & Hensley, M. (2011). Outcomes for implementation research: conceptual distinctions, measurement challenges, and research agenda. *Administration and policy in mental health and mental health services research*, 38(2), 65-76.

3.3.1. Senior leaders' perspectives

Senior leaders continued to express strong confidence in Thrive at Five's approach and contribution. Views were universally positive among both newly interviewed and previously interviewed senior leaders. Thrive at Five was described as bringing credibility, expertise and constructive challenge, underpinned by authenticity, integrity and a track record of delivery. Its local and national teams were seen as investing time in relationships, listening carefully, working collaboratively and demonstrating long-term commitment, which has helped to build trust across the system.

In Year 2, Thrive at Five was also described as having matured and become more embedded. Senior leaders noted increased visibility, deeper awareness of the programme, and referred to Thrive at Five as having become "*part of the language*" locally. Its national profile, connections and early years expertise were valued, particularly its ability to challenge the system as a whole, rather than individual organisations, while maintaining a shared focus on the ultimate outcome of increasing the proportion of children achieving GLD.

Notably, the use of evidence and data featured more prominently in perceptions of acceptability than in Year 1. Senior leaders reported seeing stronger and more explicit use of evidence in Thrive at Five's work, particularly within the 0–2 workstream. This included the use of data to identify gaps and needs, explore root causes, and consider evidence-informed solutions. Several leaders commented that this strengthened Thrive at Five's credibility and would welcome wider sharing of this learning with the broader workforce.

3.3.2. Practitioners' and delivery partners' perspectives

Practitioners and delivery partners continued to describe Thrive at Five as highly acceptable and supportive of their work, generally describing this in relation to specific initiatives. School- and nursery-based interventions such as NELI and Talking Time were viewed positively by school and nursery staff and Academy Trusts, who valued both the interventions themselves and the accompanying 'gap analysis' approach following NELI. These workstreams were widely seen as relevant, practical and aligned with classroom realities.

However, responses among teaching staff were mixed. A particular challenge was where initiatives supported by Thrive at Five, such as NELI, took children out of mainstream class time.

"[With teachers] it's a bit hit and miss (...) All my schools are positive about it, [but in] some schools you'll go into, and a teacher won't let you take a child from a certain thing. Another school you'll go into and a teacher will say, 'They need this more than anything else, take them.' If you're going into a maths lesson, one teacher will say, 'No, can you wait until we're finished?'" Delivery Partner, Stoke-on-Trent

As noted, Thrive at Five's support for the transition of Bentilee Family Hub from Alpha Trust back to Local Authority management was also described positively. The consistency of Thrive at Five's staff presence and Thrive at Five's active role in supporting communication and continuity, were seen as important for sustaining engagement and trust with parents. Children's engagement was also reported positively by practitioners, who noted that children enjoyed and participated actively in Talking Time and NELI sessions. Practitioners and parents alike described children continuing to use resources provided through these interventions beyond the sessions themselves.

3.3.3. Parents' perspectives

Echoing Year 1 findings, parents continued to describe provision supported by Thrive at Five in very positive terms, particularly PBT sessions and community-based activities. Parents valued the warm, welcoming and non-judgemental environments created, as well as the relational approach of Parent Connectors and group facilitators. Feeling listened to, supported, and accepted were repeatedly emphasised as important features.

Backbone team members confirmed this and also noted strong and sustained engagement with community initiatives such as Bumps and Babies – a locally established event that Thrive at Five has supported and helped to strengthen – as well as PBT provision delivered in community settings and school-based contexts. In some cases, this included specialist-led sessions hosted within Family Hubs, such as Mothers Mind, a group focused on maternal wellbeing delivered by external practitioners, alongside sessions focused school readiness. However, practitioners reported that attendance and retention remained challenging for school-based PEEP sessions. While engagement improved in some schools, others were characterised by families drifting in and out of sessions, and low turnout. These challenges suggest that, although PEEP shows promise, its acceptability is uneven and remains context dependent.

Box 3. Contributing features underpinning acceptability

This high level of acceptability across actors, both in relation to Thrive at Five as an organisation and to the specific interventions it supports, was seen as underpinned by several interrelated features.



Thrive at Five's role in constructively challenging the system by surfacing local needs and making them visible.

Thrive at Five was described by senior leaders as helping the system to recognise issues that may have been overlooked or normalised and creating opportunities for co-designed responses that actively engage communities rather than imposing predefined solutions. It was seen as encouraging a systemic focus on root causes, supporting the system to move beyond short-term or narrowly defined responses towards more reflective, joined-up approaches aimed at improving outcomes for families.



Thrive at Five's emphasis on local tailoring and adaptation.

Senior leaders described the interventions supported by Thrive at Five as flexible yet rigorous, allowing them to be tailored to local contexts while remaining grounded in evidence and clear principles. This balance between adaptability and fidelity to key principles was viewed as particularly important in a complex and diverse local system, and as contributing to the perceived relevance and credibility of Thrive at Five's work. Senior leaders also valued Thrive at Five staff's willingness to listen to and incorporate practitioners' perspectives, particularly regarding what works well for children in specific settings such as schools and early years provision. This approach was contrasted with experiences of working with larger organisations, where practitioners' insights were not always perceived to be heard or acted upon.



A strong relational focus was identified as a defining and highly valued feature of Thrive at Five's work.

Senior leaders described a renewed emphasis locally on the importance of individual relationships between parents and infants in the early years, an area they felt had been missing locally for some time. Practitioners reinforced this perspective, describing Thrive at Five staff as supportive and capacity-building in their approach. Practical support, such as sharing planning materials and resources, facilitating shadowing opportunities, and prompting reflective discussions, was seen as particularly valuable.

3.4. Feasibility



As in Year 1, findings from the second year of the evaluation indicate that Thrive at Five continues to be feasible to implement in Stoke-on-Trent.

Core strategies set out in the national theory of change are being delivered, and there was no evidence from interviews with senior leaders, backbone team members, practitioners or partners to suggest that the approach is fundamentally misaligned with the local context. Rather, Year 2 findings suggest increasing maturity in implementation, with clearer internal coordination, more intentional use of evidence, and progress in addressing some of the challenges identified in the first year.

There was clear evidence that several workstreams are moving into the ‘*Improve and Embed*’ phase of implementation within Thrive at Five’s approach. Senior leaders and backbone team members described workstreams that are no longer focused solely on piloting or testing activities, but are increasingly concerned with refining delivery, embedding ways of working within partner organisations, and preparing conditions for longer-term sustainment. This was particularly evident in work with schools, where Thrive at Five’s role has increasingly focused on embedding approaches and modelling practices to support sustained delivery. In contrast, within the developing 0–2 workstream, Thrive at Five’s role has centred more strongly on convening partners, strengthening coordination and supporting system alignment in preparation for the implementation of interventions such as the Newborn Behavioural Observation (NBO) and Video Interactive Guidance (VIG).

“Part of that embedding is really reflecting on what we’ve done, reinforcing the things that we really like, but being brave enough to change those things. [The gap analysis approach is] part of embedding, because what we’re doing is, in the skillset that we are doing with the schools and helping to train them - whether that be with schools or community buildings or hubs or whatever - it’s giving those leaders, middle leaders and practitioners the kinds of skills that I’ve talked about, that I would use if I was working in their settings.” Backbone team member, Stoke-on-Trent

Compared to Year 1, there was more recognition of the use of data and evidence as part of implementation. At the practice level, the use of NELI data to conduct ‘gap analysis’ in reception classes was described as both strengthening intervention targeting and modelling evidence-informed decision-making for practitioners. At a more strategic level, the Task and Finish Group on parent–infant relationships reflected progress in using evidence to support collective problem-solving and agreement on priorities. This represents a shift from earlier challenges around progressing work with 0–2s, where a lack of formal structures had previously made it harder to build momentum and consensus. In Year 2, a particular strength was that the work began with efforts to align priorities and strategic focus across practitioners, senior leaders and decision-makers, developing shared understandings before moving into delivery.

Several enablers of feasibility were identified. Backbone team members described a stronger internal strategy guiding their work, with roles more clearly aligned to the national Thrive at Five vision while remaining responsive to local priorities. This was perceived to support a more consistent message across different levels of the system, including senior leaders, middle managers, practitioners and parents. Teams also reported working with greater intentionality, using clearer objectives to guide activity planning and refinement. In addition, increased sharing of learning across the two Thrive at Five sites was described as supporting reflection, adaptation and the transfer of emerging practices.

“This year, it's been a lot more strategic and intentional, (...) there's a lot of concentration on making everything work together in unity (...) looking at everything from a national perspective, and how the Stoke-on-Trent comms work complements the Redcar comms work, and how we can all work together.”
Backbone team member, Stoke-on-Trent

Despite these strengths, several ongoing challenges remain. Practitioners highlighted the importance of the additional personnel and hands-on support provided through Thrive at Five in enabling the delivery of school readiness initiatives. This additional capacity was seen as critical to implementation, particularly in supporting coordination, engagement with families, and delivery across different settings. As a result, some practitioners raised questions about the feasibility of sustaining or expanding these approaches more widely without continued resourcing and dedicated implementation support.

“A lot of the success around the early language support in the Thrive at Five schools has come through the injection of additional personnel. Whether it is through the students that have come from Staffordshire University and the support that they've given, or the peripatetic staff that have been employed to deliver some of those programmes.” Delivery Partner, Stoke-on-Trent

Geographic boundaries also continue to complicate implementation, with families from areas between Abbey Hulton and Bentilee accessing provision, making strict ward-based targeting difficult in practice. Finally, as in Year 1, staff noted that transport barriers remain a constraint on feasibility for some families, particularly those living further from the Family Hub and reliant on paid public transport.

“Where we are right now in Bentilee, everywhere is accessible if you want to access it. There's a hill that's difficult with a pram. If you're in Abbey Hulton, but you want to come to something in Bentilee, you've got to get three buses (...). So, you're talking the cost and the expense as well. That parents that we're talking about are disadvantaged.” Backbone team member, Stoke-on-Trent

Taken together, Year 2 findings suggest that Thrive at Five remains feasible to implement in Stoke-on-Trent, with growing evidence of learning, adaptation and embedding over time. While some structural and resource-related challenges persist, there is clear evidence that the programme is responding to these constraints through changes in approach, increased coordination, and more intentional use of evidence—strengthening the conditions for continued implementation and future sustainment.

3.5. Accountability and governance



As highlighted in the Year 1 evaluation, the long-term sustainment of Thrive at Five's activities and ways of working depends on partners progressively taking responsibility for ambitions, strategies, delivery and outcomes within their own organisations, rather than Thrive at Five remaining the primary driver of action. Accountability, in this sense, extends beyond participation or collaboration to include ownership of priorities, resourcing decisions, and the cascading of Thrive at Five ambitions through organisational structures.

In Year 1, there was evidence that while partners were actively engaged and collaborating with Thrive at Five, this had not yet translated into a clear sense of shared accountability across the system. Some interviewees suggested that partners had not fully "taken on the mantle" of Thrive at Five, with responsibility for delivery often resting with individuals rather than being embedded within organisational leadership, management and reporting lines. Governance arrangements were also not always well understood, and there was limited clarity about where accountability for achieving Thrive at Five's ambitions sat within the wider system.

Findings from Year 2 suggest that this remains an area of partial progress and ongoing development. Senior leaders and backbone team members described a growing sense of shared responsibility for delivering planned Thrive at Five activity, with partners increasingly positioned as co-deliverers rather than recipients of support. However, this shared responsibility appears to be stronger in relation to activity delivery than to collective accountability for outcomes and for embedding Thrive at Five's ways of working, such as community engagement and evidence-informed practice. Thrive at Five was taking active steps to strengthen accountability mechanisms, particularly by increasing engagement with middle managers to improve alignment between strategic endorsement and operational delivery. Backbone team members reported early signs of improvement, with some senior leaders noting that their team leads were aware of and involved in initiatives supported by Thrive at Five. However, this has not yet emerged as a consistent or system-wide pattern.

"When we were in the [governance board] meeting - because I'm always trying to triangulate stuff, so when [Thrive at Five] were giving a presentation about what was going on in schools (...), I'm thinking, 'I wonder if my lead is involved in this, she should be here...' (...) So I was messaging in the background frantically to try and find out who had been involved in these pieces of work. Straightaway, they were coming back to me saying, 'Yes, I'm involved, and we're doing this, and it's in this school.' Straightaway, they were able to come back and just reassure me that Thrive at Five were involving the right people at the right time, and it was great that the impact and evidence of that was coming through the governance route."
Senior leader, Stoke-on-Trent

There is some emerging evidence of Thrive at Five and improving early years being referenced within city-wide strategies. The council's Corporate Strategy, "Our City, Our Wellbeing", positions improving school readiness and GLD as a system-level priority and refers to Thrive at Five as a partner in work to ensure every child has the best possible start in life, including boosting child development and school readiness. This indicates a positive movement towards taking on Thrive at Five's ultimate goal of more children achieving GLD as well as formal recognition of Thrive at Five's ambitions and role within the strategic architecture of the local children's system.

However, interviews suggest that accountability has not yet fully shifted from Thrive at Five reporting to the system, towards the system collectively owning Thrive at Five's ambitions. While Thrive at Five continues to report progress through its governance groups, there remains a sense that wider system actors do not consistently take ownership of resourcing and driving initiatives forward. This was evident, for example, in relation to the 0–2 workstream, where partners collectively agreed on the implementation of Video Interactive Guidance (VIG) as a priority action through the Task and Finish Group. However, progress was constrained by budget limitations, and implementation only moved forward once Thrive at Five secured additional funding.

"[The challenge] has been the money. There was no money in the system that could be identified to fund this. Although the [Task and Finish] working group agreed that VIG was what would work best for Stoke and was an approach that felt was something they would want to adopt and test and try, (...) there was no funding in public health, (...) in children's services, [or] through Midlands Partnership Foundations Trust. (...) Everyone was back behind the idea, but the money was the issue." Backbone team member, Stoke-on-Trent

Some senior leaders explicitly recognised this as a system-level issue, emphasising the need for shared accountability if Thrive at Five is to be fully embedded. However, they could not point to specific recommendations for how to improve or restructure governance. The current policy momentum, particularly around Best Start in Life and GLD targets, is recognised as a potential opportunity to strengthen shared accountability and governance arrangements. There was a sense that, four years into delivery, Thrive at Five is at a critical point where clearer ownership across the system will be necessary to embed the work for the future.

"It's got to be the children's system if we're saying that Thrive is an integral and important part of the children's system, and it is... we have to take that shared accountability." Senior leader, Stoke-on-Trent

"It's an opportune moment, and we [Thrive at Five] need to really keep a healthy pressure on the system to make sure that they [Senior Leaders] are really seeing Thrive at Five's work as something that needs to be owned by everybody, and/or because we're now four years in, how do we embed this work for the future.'" Backbone team member, Stoke-on-Trent

3.6. Sustainability



As in Year 1, professionals consistently emphasised that the scale and nature of change Thrive at Five aims to achieve - shifting cultures, strengthening systems, and improving early childhood outcomes is unlikely to be secured, let alone sustained, within the timeframe of Thrive at Five's initial funding.

There was widespread recognition that both the national and local Thrive at Five teams are highly alert to this challenge, reflected in their emphasis on catalysing, facilitating and modelling change with partners, rather than assuming long-term responsibility for direct delivery.

In relation to specific workstreams, some activities were viewed as more inherently sustainable than others. As reported in Year 1, schools were widely expected to be able to continue delivering NELI, and the partnership with Staffordshire University was seen as

stable and likely to endure. In Year 2, NELI continued to be delivered across participating schools. However, it remains important to note that peripatetic support staff, seen as critical to consistent and high-quality implementation, continue to be funded by Thrive at Five, and there is a need for continued work to sustain commitment to NELI over other curriculum time. The 'gap analysis' described represents a deepening of practice but also introduces further questions about how this added capacity can be sustained once Thrive at Five steps back.

Views on the sustainability of other interventions were more mixed. Some school-based practitioners expressed confidence that Talking Time would continue within their nurseries, given the high and ongoing level of need around communication and language. At the same time, they emphasised that Thrive at Five stepping back would represent a significant loss of capacity for the community, noting that schools do not necessarily have the resources to fill that gap independently.

"But I just think it will be such a big loss for the whole community if [Thrive at Five] was to be taken away. There's not really anybody that can fill those gaps because us, as a school, we haven't got the availability or the resources really to fill that gap. As much as we try and as much as we do try and engage families, we can't offer what they offer." Delivery Partner, Stoke-on-Trent

Across interviews in both Year 1 and Year 2, there was a strong emphasis on the importance of what some described as "building stickiness": embedding new priorities, cultures and ways of working so that Thrive at Five approaches become business as usual across the system. In Year 2, senior leaders reported, and welcomed, more explicit discussion about sustainability and exit planning, although there was no clear consensus on what a viable long-term approach would look like. A shared concern was that any withdrawal of Thrive at Five would need to be carefully managed to avoid destabilising local organisations or undermining the early years ecosystem that has been strengthened through the programme.

"I think if they ever need an exit strategy (...) the how do we get out without doing damage, and whilst enabling the support to sustain, I think that's incredibly tough." Senior leader, Stoke-on-Trent

As in Year 1, senior leaders emphasised the importance of a dedicated backbone function to support system coordination and improvement. However, by Year 2 there was greater clarity and consensus regarding the nature and necessity of this role, with leaders recognising that even with successful system redesign and cultural change, these functions would continue to require dedicated capacity rather than becoming fully absorbed into existing structures within Stoke-on-Trent. Echoing last year's findings, there was also growing consensus that any backbone role would need to retain a degree of independence from statutory systems while remaining physically and relationally embedded within communities. Interviewees expressed doubt that any single existing organisation could easily take on this role, and uncertainty remains about how this could be funded sustainably, whether locally or through national mechanisms.

"[A backbone team] anchors everything. I would like that to be a very flexible core backbone team that's agile and adaptable. (...) Sometimes the value of working outside a big organisation - like a local authority - is that you get to be the disrupter, and that agitates the system a little bit - and that's good. (...) It shouldn't matter which organisation you work for, those boundaries can be

blurred, and should be, because you all have a shared goal to improve outcomes for families.” Senior leader, Stoke-on-Trent

Securing national-level support for place-based early years improvement was again seen as an important pathway for sustainability. In Year 2, this view was reinforced by the policy momentum associated with the new Best Start in Life strategy and renewed national focus on GLD targets, which some interviewees felt could create more favourable conditions for sustained resourcing of early years provision, including through local authority investment in Family Hubs and related services.

Several practical challenges to sustainability were also highlighted in Year 2. Staff turnover across the system was described as a “*massive issue*”, creating risks for continuity and fidelity of delivery. Backbone team members emphasised the need for simple, accessible and scalable approaches to training and continuing professional development to ensure that new practitioners can maintain programme quality.

Another challenge identified by backbone team members is that interventions in school settings tend to have a limited “*shelf life*”, with fidelity declining over time as initiatives become part of standard practice and are less scrutinised, with staff change, or when new leaders introduce alternative approaches. In response, Thrive at Five has begun developing more explicit embedding plans for new programmes or interventions, aimed at supporting partners to maintain systematic approaches while also identifying and adapting elements that are not working well, with the longer-term goal of enabling partners to sustain impact independently.

“It's widely known that things in a school usually have a three-year shelf life. (...) The first year when you're first implementing it, (...) the second year when you're embedding it, and (...) the third year where it's settled. Then, because it loses its newness, people start to go rogue and do their own thing. We're at that point now. That's where the skill is for us as backbone team to really start to be like, 'Okay, you've done all this amazing work. It's better. It would be even better if -' and then coming along with some expertise, with experience” Backbone team member, Stoke-on-Trent

In contrast to these ongoing challenges, Year 2 also offered early indications of how sustainability might be supported in practice. Backbone team members reflected that the transition of the Bentilee Family Hub from Alpha Trust back to local authority administration has functioned as a practical test case for Thrive at Five ‘moving on’. This transition was seen as providing useful learning about how knowledge, relationships and ways of working can be transferred, and has contributed to thinking about what sustainability might look like in practice.

3.7. Extending Thrive at Five activity geographically

In Year 2 there were concrete developments indicating potential geographic expansion of Thrive at Five activity within Stoke-on-Trent. As outlined in Chapter 1, plans are in place to extend the programme from March 2026 to three additional wards – Meir North, Meir South and Burslem – building on the experience and learning generated in Abbey Hulton and Bentilee.

Alongside formal expansion plans, interviewees described ways in which Thrive at Five's approaches and learning were already influencing work beyond the original wards. This included:

- The design and delivery of Family Hub offer more broadly. In particular, the approach developed within Bentilee Family Hub, including adaptations to the profile of activities, delivery methods, and engagement strategies, was described as informing the offer across other Family Hubs in Stoke-on-Trent (See Section 6.1).
- The adoption of Thrive at Five's community consultation methods by senior leaders. Interviewees described how survey approaches used in Thrive at Five wards had been replicated to better understand the needs of families in other localities. Insights generated through Thrive at Five's work conducting and interpreting parent surveys were used as a lens to inform understanding of families' needs in other parts of the city and to guide the development of locally relevant responses. This suggests that Thrive at Five's approach to engaging parents and communities is beginning to influence wider practice and decision-making across the system.

"The changes that we were then able to consider for the two areas [Abbey Hulton and Bentilee], we were then able to say, 'Do these apply elsewhere as well?' So that's enabled a ripple effect and we've been able to make changes in other areas of my portfolio because of the learning that came through that programme of work." Senior leader, Stoke-on-Trent

Taken together, these findings suggest that Thrive at Five's influence is beginning to extend beyond its original geographic focus, both through planned expansion and through the wider uptake of its approaches within the local system.⁷⁰

3.8. Insights from internal evaluations

This section draws on internal evaluations conducted by the Thrive at Five national team during Year 2. These evaluations focus primarily on implementation processes and experiences, drawing on interviews, focus groups, delivery records and, where relevant, pre- and post-intervention assessments. The findings provide insight into how initiatives are being delivered in practice, the conditions supporting or constraining implementation, and how delivery has evolved over time. Together, they complement the external evaluation findings by shedding light on feasibility, acceptability and early signs of embedding of specific initiatives across key Thrive at Five workstreams.

3.8.1. Nuffield Early Language Intervention (NELI)

The Nuffield Early Language Intervention (NELI) entered its third year of delivery in the Thrive at Five wards with the core approach unchanged from earlier implementation. As in the previous year, seven schools continued to implement the programme during 2024-25, with 102 children (35.4% of the whole Reception cohort) participating in the intervention. Implementation dosage improved compared to Year 2, with all participating schools completing the full 20-week intervention.

As in previous years, several factors were identified as supporting effective implementation. These included the use of peripatetic learning support leaders, who

⁷⁰ The evaluation design compares changes over time in the proportion of children reaching GLD in the Thrive at Five wards with those in other wards within the same local authority. The evaluation team is also reviewing the scope to compare outcomes with matched wards outside Stoke-on-Trent, recognising that elements of the approach and its influence may increasingly extend beyond the original focus areas.

focused exclusively in delivering the intervention and ensured consistency while adapting flexibly to each school's ethos and routines; and the involvement of university students, who provided additional capacity by supporting or independently delivering sessions. Careful timetabling of sessions around assemblies, PE lessons and other school activities was also highlighted as an important enabler, helping ensure the programme was completed as intended.

Key implementation challenges included adapting delivery for children who experienced difficulty engaging with the more complex content in Part 2 of the programme, as well as for some pupils with EAL and SEND, who often required additional or alternative interventions in order to make meaningful progress. Variation in the reliability and attendance of student volunteers was also identified as a challenge, with more consistent participation seen as important for maintaining delivery continuity across schools.

3.8.2. Talking Time

Talking Time entered its second year of delivery in the Thrive wards with the core approach unchanged from Year 1. All six schools continued to implement the programme during 2024–25, and in several settings Talking Time was described in the Thrive at Five evaluation report as becoming “embedded practice” across the foundation stage. Compared to Year 1, there was greater emphasis on consistency and whole-setting embedding, supported by the peripatetic leaders funded by Thrive at Five.

The Thrive at Five internal evaluation report notes that implementation quality varied across schools. In three settings, challenges to consistent delivery were reported, primarily linked to practical constraints such as limited classroom space, combined nursery and reception provision, and staffing changes that temporarily disrupted routines. In response, peripatetic leaders provided targeted support to re-establish delivery and strengthen fidelity. Where Talking Time was delivered consistently and embedded across the foundation stage, implementation was strongest, and this appeared to align with more favourable outcomes in children's language development, echoing patterns observed in Year 1.

3.8.3. PEEP Learning Together

PEEP Learning Together was implemented for the first time in the Thrive wards during Spring Term 2025, delivered in four school-based nurseries to children aged 3–4 years. The programme is designed to be used flexibly to meet the needs and interest of local families, focusing on any or all of the available topics.⁷¹ However, schools supported by Thrive at Five were asked to deliver a minimum of 6 sessions, with a recommended target of 10. In practice, schools delivered an average of 6.5 sessions (ranging from 5 to 8). One school did not meet the minimum delivery threshold, and only one delivered all PEEP topics, although all covered sessions from the Communication and Language / Early Literacy strand.

The internal evaluation report notes that attendance varied considerably, ranging from 2 to 9 parent–child pairs per session, and was higher when sessions were delivered during school hours and when parents were able to bring younger siblings. Parents who attended responded positively, particularly valuing shared activities with their children and opportunities for small-group interaction. Delivery by school staff and the peripatetic leaders was supported by the programme's clear structure combined with flexibility, allowing facilitators to adapt language, pacing and content to parents' needs and contexts.

⁷¹ Peep (2026). Peep Learning Together Programme. Available at: <https://www.peep.org.uk/ltp>

Peripatetic leaders played a central role in supporting staffing capacity, co-delivery and continuity across settings.

Key barriers to implementation included low uptake among families with higher levels of need, limited staff time, and constrained access to resources. Recruitment approaches that prioritised families based on identified need among those expressing interest were perceived as more effective than first-come, first-served approaches, highlighting important learning for future delivery and scaling.

3.8.4. Parent Outreach and Engagement

Parent Outreach and Engagement is a key component of Thrive at Five's approach aiming to connect families with early years services, community resources, and parenting support. As an enabling workstream focused on building conditions for long-term change, it has been in place since the onset of Thrive at Five's work in Stoke-on-Trent and is now in its third year of implementation. Core components include the deployment of Parent Connectors within community settings, alongside the facilitation of PBT sessions and wider community engagement events.

Several factors were identified as supporting effective implementation. These included the expansion of PBT groups, with 13 new groups established and now serving approximately 138 families per week, helping address a gap in provision for families with children aged 0-2. Strengthened working relationships with health visitors, midwives, early years settings, and voluntary organisations were also highlighted as important enablers. The Parent Connector role was consistently identified as an important enabler, particularly in building trust with families through an informal, empathetic approach, maintaining a regular presence in everyday settings, and providing flexible, individualised advice and support.

4. Implementation of Thrive at Five in Redcar & Cleveland

4.1. Adoption

As this is the first year of evaluation in Redcar & Cleveland, adoption is understood primarily in terms of stakeholders' perceptions of whether Thrive at Five is needed, appropriate, and able to add value within the local early years system. Interviews with senior leaders and delivery partners highlight both strong alignment with local priorities and some uncertainty about Thrive at Five's distinctive contribution alongside an already active system.

4.1.1. Senior leaders' perspectives

Most senior leaders understood Thrive at Five as a third sector organisation focused on the early years, helping children get the best start in life and to be ready for school. They recognised its aim to support local partners to work collaboratively and its emphasis on strengthening engagement with families and communities. However, for some this was expressed in terms of reaching harder-to-reach families rather than empowering parents or centring parents' needs and preferences in service design. We did not hear the use of data and evidence specifically called out.

Views about whether there is a need for Thrive at Five in Redcar & Cleveland were very mixed, and rather different from what we heard in our first round of interviews in Stoke-on-Trent. It is important to note here that the interviews in Redcar & Cleveland were conducted at an earlier phase in implementation than our first interviews in Stoke-on-Trent, and that most took place in the first quarter of 2025 (and the findings shared with Thrive at Five at that time).

Despite these differences in timing, senior leaders consistently highlighted a clear local need to strengthen early years outcomes, particularly in relation to children's readiness for school, language and communication development, and the number of children starting school requiring additional support.

However, there were different views about the quality of the existing early years system. A small group of participants were very critical of the system, describing poor engagement with communities, a "patriarchal" approach rooted in certainty about what families need rather than in responsive, parent-led working, and poor engagement across agencies and with the voluntary and community sector.

"I'm not sure there really is a system! It's just a dysfunctional group of individuals and organisations all trying to do their best." Senior leader, Redcar & Cleveland

"Since the financial crisis and funding cuts, everything has become a lot more transactional and immediate." Senior leader, Redcar & Cleveland

In contrast, other senior leaders were much more positive in their perceptions of the current system. They described early years having been a priority since 2022, an early years strategy in place, a recently refreshed strategic needs analysis, a shared vision for early years, existing strong partnerships, and extensive delivery infrastructure. This included Family Hubs with active programmes of work, PBTs in every Family Hub, and a wide range of practitioners working directly with families. This was explicitly seen as a different starting point from Stoke-on-Trent.

"[The need in Redcar & Cleveland is] very different from what I see [Thrive at Five] did at Stoke where ... they've gone in afresh and started the strategy I think we're ahead of the game." Senior leader, Redcar & Cleveland

This diversity of views led to different views about the potential role for Thrive at Five. Those who were more critical of the current system saw a need for Thrive at Five to catalyse and support transformation in approaches to early years and to families, taking Redcar & Cleveland "to a new place". They were looking to Thrive at Five to surface issues, understand them deeply, change how partners come together, change the narrative about working with families, and identify and help to fill gaps in the current system. The Discovery stage for example was seen as a potentially more transformative way of working than what was described as a more transactional, performance culture approach to problems seeking an immediate solution and moving quickly to planned actions.

"It's about engaging with people in a different way that we wouldn't necessarily do. Also, looking at things through a different lens and a different angle from a point of view of - Our starting point sometimes, the way we do things, is generally based on the needs, the services we have, the resources we have and we know that they fit the community. I think Thrive at Five are trying to really change that narrative in terms of bringing it back to 'This is what the community want. How do we meet their needs?'. " Senior leader, Redcar & Cleveland

"We don't have time very often to stop and hold up the mirror across the whole system. We might look at it ourselves, but we don't look at it across the whole system." Senior leader, Redcar & Cleveland

For others it was less clear whether, why and where there was a need for Thrive at Five. They were unclear what Thrive at Five was offering, describing it as “*abstract*” and unclear, and were concerned about disruption rather than welcoming challenge. There was uncertainty about how Thrive at Five could add to existing work, and concerns that it would duplicate, or even take resources from, existing services and initiatives. While there was broad support for Thrive at Five’s focus on partnership, early intervention and long-term change, expectations varied regarding how this should translate into concrete activity.

Where a role for Thrive at Five was seen, it was as an additional resource to work alongside existing services, or to engage parents directly and connect them with existing services. Here participants highlighted Thrive at Five’s emphasis on community and parental engagement as a distinctive and valuable feature, particularly the potential role of Parent Connectors in reaching parents who may not engage with Family Hubs or other established services.

In addition, Thrive at Five’s status as a national charity was seen as an important enabling factor. This was associated with additional capacity, access to external funding, and links to influential national networks, including major funders and central government. One participant said that Thrive at Five had been “*sold*” to other leaders as an initiative that would bring investment to Redcar & Cleveland, so that leaders were not expecting a focus on systems change and challenge.

“We also could see that having Thrive at Five working alongside us would add value and bring, I suppose, the strengths of the national charity alongside us and what we wanted to achieve.” Senior leader, Redcar & Cleveland

An identified barrier to adoption was a degree of defensiveness among some stakeholders, with questions raised about Thrive at Five’s added value and resistance to perceived external influence. This was often framed as part of a wider cultural tendency within local systems to retain control rather than engage fully in collaborative approaches.

4.1.2. Delivery partners’ perspectives

Delivery partners’ views on Thrive at Five’s role in Redcar & Cleveland were similarly mixed. They were generally not expecting more transformational work. They generally saw Thrive at Five as additional resource working alongside existing services, and particularly additional resource to reach parents. Some saw Thrive at Five as well positioned to support the implementation of initiatives already prioritised by the local authority, for example by promoting services, supporting partner engagement, and bringing a fresh perspective to existing plans.

Others questioned the extent to which Thrive at Five was needed in Redcar & Cleveland, given the perceived density of existing provision and the accessibility of Family Hubs and community-based support. In contrast to neighbouring areas – such as Middlesbrough – perceived as having more evident gaps in provision, some delivery partners felt that Redcar & Cleveland already offered strong connectivity and infrastructure for families, making it less clear where Thrive at Five would add distinct value.

“Redcar’s got it right. Redcar actually is one of the better local authorities for having that open door access to the family hubs already, but I know that Thrive at Five are moving into Middlesbrough and it’s very much needed there (...). I can see how that would be so much more beneficial in Middlesbrough (...) because

everything's missing there. We see the gaps in Middlesbrough because we can't connect parents to groups, and we can't do what we want to do there, but in Redcar it's like around every corner there's a Family Hub, and we can take our families to there and do our work from there." Delivery Partner, Redcar & Cleveland

Practitioners tended to understand Thrive at Five in narrower, more operational terms. Their perceptions reflected primarily the work of Parent Connectors in reaching families and strengthening connections between families and services, although some also referred to improved connections between practitioners and encouragement of new approaches and ways of working.

As we noted in Chapter 2, members of the backbone team in Redcar & Cleveland described aspects of the existing system as fragmented and uneven, particularly noting gaps in universal and early help provision (as opposed to targeted services). They had experienced very mixed responses from leaders and practitioners, some welcoming external challenge, others mistrustful or doubtful and taking a transactional approach, treating Thrive at Five as a commissioned programme. As noted earlier, the interviews were undertaken early in the work in Thrive at Five and in the first quarter of 2025, and even at that stage backbone staff felt they were receiving more open responses and were beginning to win trust.

Taken together, these findings suggest that in its first year in Redcar & Cleveland, adoption of Thrive at Five is characterised by broad alignment with local priorities and recognition of potential added value, alongside ongoing questions about distinctiveness, complementarity, and fit within an early years system perceived as relatively well-developed. Continued clarity about Thrive at Five's role, coupled with visible examples of how it complements and strengthens existing provision, is likely to be important in supporting adoption as implementation progresses.

4.2. Necessary pre-conditions for adoption and site selection

Analysis of adoption and implementation across Stoke-on-Trent and Redcar & Cleveland has provided valuable insights into the kinds of contexts in which Thrive at Five is most likely to gain traction and make a difference. The findings are particularly relevant as the programme embarks on further expansion to other areas.

Thrive at Five's Playbook already recognises the importance of careful LA selection, including an initial data review, due diligence on stability and capacity, and structured dialogue to support readiness where attention is paid to community assets; high level buy-in; organisational culture and capacity; strong strategic leadership; willingness to work in partnership with Thrive at Five and the local community; openness about strengths and weaknesses and to learning and change.

Our evaluation findings to date reinforce the importance of this careful approach and add further clarity on the pre-conditions that appear to support effective adoption. These conditions are highlighted and discussed in Box 4 below.

BOX 4: Necessary pre-conditions for adoption and site selection



Organisational readiness is a multi-faceted concept that is defined in the implementation science literature in different ways, for example as:

- Requiring a shared resolve to implement a change (change commitment) and shared belief among those involved in their ability to make the change (change efficacy).⁷²
- The degree to which those involved are individually and collectively primed, motivated, and technically capable of executing the change.⁷³
- A function of a combination of motivation (to make the change), general organisational capacity (i.e. a well-functioning organisation) and specific capacity for the intended innovation.⁷⁴

The literature on place-based interventions^{75,76,77,78,79,80} describes the conditions that enable place-based change, alongside (and not always clearly distinguished from) the strategies or activities involved in place-based change.



These are seen as including:

- Strong community relationships and engagement, belief that local people should influence, willingness to shift power to communities
- A shared vision, shared goals and outcomes, place-based strategies and plans
- Collaborative working and governance including a backbone team and existing trusted partnerships
- Systems partners taking a long view and a systemic focus
- A culture of learning, innovation and adaptation
- Enabling and distributed leadership for change
- The use of evidence, data and shared measurement

However, place-based working is an evolving approach, where the conditions for success are often formed during the process of the work itself and not necessarily in place before the work begins. Indeed, Thrive at Five would be unlikely to be able to make a significant difference in systems where transformation has already occurred. The question is therefore not whether conditions are perfect, but whether there is a sufficient foundation to enable change to take root.

⁷² Weiner, B.J. (2009) A theory of organizational readiness for change. *Implementation Science*, 4, 67. <https://doi.org/10.1186/1748-5908-4-67>

⁷³ Holt DT, Helfrich CD, Hall CG, Weiner BJ. Are you ready? How health professionals can comprehensively conceptualize readiness for change. *J Gen Intern Med*. 2010 Jan;25 Suppl 1(Suppl 1):50-5. <https://doi.org/10.1007/s11606-009-1112-8>

⁷⁴ Billiald S & McAllister-Jones LT (2015). Behaving Like A System? The preconditions for place-based systems change. *Collaborate*

⁷⁵ Place Matters framework for place-based change

⁷⁶ Our Place (2023) The glue that enables place-based initiatives to work. *Our Place*.

⁷⁷ Lloyd, J. & Cline, G. "The bigger you go the less you know": Why place-based, relational approaches to public services must be core to Local Government Reorganisation. *Collaborate*.

⁷⁸ Foster-Fishman, P.G. & Watson, E.R. (2012) 'The ABL Change Framework: A Conceptual and Methodological Tool for Promoting Systems Change. *Am J Community Psychol* 2012, 49 (3-4): 503-516

⁷⁹ Randle, A. & Anderson, H. (2017) Building Collaborative Places: Infrastructure for systems change

⁸⁰ Collective Impact (2022) Readiness Assessment Tool



Looking across our data from Stoke-on-Trent and Redcar & Cleveland and drawing on the literature^{81,82,83} we have identified the following as being necessary pre-conditions for Thrive at Five, and issues that should be considered and assessed as part of site selection:

1. **Influential senior local champions:** committed to Thrive at Five, and able to bring and keep on board other systems leaders. In Stoke-on-Trent the LA Chief Executive is widely described as playing this role. However, given turnover, it would be risky to rely on a single champion and advisable to identify several senior local champions in each site if possible
2. **Recognised urgency of improving GLD:** GLD levels for children on free school meals are well below where they should be, and this is recognised as urgent by at least some systems leaders
3. **Openness to challenge and to sharing power:** with parents, partners and the wider community. An important aspect of openness to challenge is an authorising environment with distributed leadership, resilience, and openness to innovation
4. **Self-efficacy:** a belief among systems leaders that change is possible – even if this belief is not held by all relevant actors nor evidenced by previous effective change programmes
5. **Baseline capacity and resources:** time, funding and at least some community assets are available
6. **Absorptive capacity:** systems leaders will be able to value and use new knowledge, and the aims of Thrive at Five are not obviously at risk of being displaced by financial insolvency or a more urgent issue to address.

These conditions are not binary and should not be treated as rigid entry criteria. Rather, they provide a structured lens for assessing readiness and identifying where additional preparatory work may be needed before formal adoption, as well as continuing to shape them during the process of implementation.

4.3. Partnership building and governance

Senior leaders generally felt that Thrive at Five had engaged the “right people” in its first year in Redcar & Cleveland. They described positive connections having been established across key parts of the system, including health visiting, education, public health, the Integrated Care Board, and the voluntary and community sector. There was a sense that Thrive at Five had created a platform for cross-sector dialogue and that a growing awareness of the need for collaborative work was emerging, encouraging actors across children’s services to become involved.

“I think the right people have been involved. I think there was the call to action initially to get everyone that was involved in children’s services across the system

⁸¹ Weaver L. (ed) The Collective Impact Toolkit. Chapter 2 Assessing Readiness

⁸² Ibid.

⁸³ Foster-Fishman, P.G. & Watson, E.R. (2012) ‘The ABLe Change Framework: A Conceptual and Methodological Tool for Promoting Systems Change. Am J Community Psychol 2012, 49 (3-4): 503-516

to come and listen and be involved. Equally, with the VCS, [Thrive at Five's Programme Lead] and his team have gone out and made links. So I think they've managed to get a good overview insight and also engagement with a wide range of our services." Senior leader, Redcar & Cleveland

However, senior leaders also noted gaps in representation. Despite engagement from diverse sectors, some partners were perceived as under-represented, including SEND services, midwifery and maternity services, and direct links with nurseries and schools. This suggests that while initial partnership-building efforts have been broadly successful, further work may be required to ensure comprehensive system engagement.

Practitioners described tangible benefits from Thrive at Five's convening role. Several reported feeling more connected to other services and professionals as a result of Thrive at Five facilitating introductions and joint working. Some also described collaborative working in the delivery of community-based initiatives, such as Bumps & Babies sessions, highlighting joint planning and shared efforts to increase engagement. This suggests early progress in operational partnership building, particularly at the level of community-facing delivery. One practitioner also highlighted stronger links with the Family Hub and the local Multibank, a community resource providing families with access to essential household and personal care items, as an example of improved connectivity across services.

"We've got a stronger link to them [Family Hub and Multibank], which is important because we do have a lot of people coming in that can use the local services." Practitioner, Redcar & Cleveland

"We're complementing each other. We're working together. With these next round of Bumps and Babies, we've had a number of meetings, we're trying to get the word out together." Practitioner, Redcar & Cleveland

In relation to governance, structures were described as still evolving. While Thrive at Five has brought together diverse voices, some senior leaders raised concerns about the clarity of roles, shared decision-making processes, and accountability arrangements. There were tensions regarding how success should be defined and measured, whether in terms of long-term systemic change, more immediate improvement in outcomes for children under five years old, or cost savings. Some senior leaders suggested that greater involvement from Thrive at Five's national team could strengthen local governance discussions and foster a stronger sense of shared accountability, particularly given the seniority of local authority representation at governance forums.

"I think there needs to be somebody at a strategic level. We've got somebody at a strategic level in terms of our Director of Children's Services, plus a bunch of operational people, plus we've got the funders, (...) but I think we need that at that point from Thrive at Five as well." Senior leader, Redcar & Cleveland

Two key barriers to deeper partnership integration were identified. First, although relationships across sectors (education, social care, voluntary sector) were not characterised by overt conflict, senior leaders noted that they were not yet sufficiently strong to support fully joined-up, multi-agency working. Each sector was perceived as prioritising its own objectives, limiting sustained collective action. The absence of a clearly articulated shared plan was seen as constraining deeper embedding. Without a jointly owned roadmap, Thrive at Five risks being perceived as operating alongside, rather than fully integrated within existing local structures. Addressing this may be important in

moving from early partnership formation towards more mature, system-wide collaboration.

“I don't think [partnerships within the early years sector in Redcar] are anything like strong enough. I don't think there's so much resentment or conflict, but obviously they could be better. (...). They're focusing on their own things.” Senior leader, Redcar & Cleveland

4.4. Reach

Senior leaders expressed clear expectations that Thrive at Five would strengthen reach, particularly to families who are not currently engaging with Family Hubs or other local provision. The Parent Connector role was viewed as central to this ambition. Senior leaders suggested that Parent Connectors could provide the kind of relational “hand-holding” that health visitors had previously offered but no longer have capacity to sustain. There was also a broader ambition for Parent Connectors to act as a bridge between families and the education system at key transition points helping parents navigate and engage with services earlier and more confidently.

“The Parent Connectors hopefully are just beginning to start to do that bit of one-to-one, and that bit of hand-holding. If you're a parent, and you feel a bit isolated, and you're not very confident, for whatever reason, then walking into a centre, that you haven't got friends, it must be really tricky for them. Whereas if they've got someone that'll take those few steps with them, and settle them in (...). To be honest, years gone by, health visitors would have done that, but just as our resource has diminished we have some skill mix, but (...) sometimes capacity is difficult.” Senior leader, Redcar & Cleveland

Delivery partners and practitioners offered a more mixed picture of reach at this early stage. Some noted that Thrive at Five had prompted new thinking about how services are delivered, including moving activities such as Bumps and Babies sessions beyond Family Hub settings and into community spaces, although they highlighted ongoing challenges in engaging particular groups, especially younger parents. On the other hand, some practitioners questioned the extent to which Parent Connectors were yet reaching new or previously disengaged families. In some cases, they perceived that support was being offered primarily to families already attending groups. However, practitioners also identified a clear potential value-add for Thrive at Five in engaging families who have historically not accessed services, including some ethnic minority families and others facing multiple barriers to engagement.

“[Parent connectors] are very engaging with the families, but the families who come to the groups don't always necessarily need the support. (...) [Parent Connector] was allocated a mum who lives close to South Bank Family Hub, and she went and met her out in the street. (...) She brought the mum and the little boy into South Bank Family Hub, and she [Mum] kept coming back. [Parent Connector] had the capacity in the diary to keep coming back and supporting this mum to access the family hub. [Mum] doesn't speak very good English, and then she's had lots of issues since, so [Parent Connector] was really supportive in trying to find the right support to guide her through the issues that she was facing. I think that's how Thrive at Five should be working. We should be seeing more of that.” Practitioner, Redcar & Cleveland

Several contextual factors were identified as shaping reach. An enabler noted by senior leaders was the geographical proximity to each other of the initial focus wards, which was seen as facilitating coordinated outreach and relationship-building across neighbouring communities. At the same time, barriers were acknowledged. Community engagement in harder-to-reach wards was described as requiring time, trust and local credibility, and there were anticipated challenges in recruiting local individuals to take on Parent Connector roles. Together, these findings suggest that while ambitions for reach are clear and some adaptive strategies are emerging, extending engagement to the most marginalised families remains an ongoing implementation challenge in this first year.

4.5. Acceptability

Acceptability of Thrive at Five in Redcar & Cleveland during the first year of implementation was mixed among senior leaders and delivery partners, with some expressing cautious optimism while others remained uncertain about its role and potential contribution alongside existing services.

At a strategic level, Thrive at Five was widely seen as aligned with local priorities, particularly around school readiness, early intervention, and partnership working. Senior leaders recognised its emphasis on long-term change and system strengthening as consistent with local ambitions. However, Thrive at Five was more often understood as enhancing and supporting existing provision rather than fundamentally transforming it. While some stakeholders welcomed its potential to provide constructive challenge and encourage reflection, others viewed its role primarily in terms of bringing additional capacity, expertise, and external perspective to support ongoing work.

Some senior leaders also expressed cautious reflection on how Thrive at Five's approach would translate within the Redcar & Cleveland context. While valuing its focus on challenging the system, understanding families' needs in depth, and promoting flexible, responsive provision, they emphasised the importance of ensuring that approaches are locally grounded. In particular, there was some concern that elements developed in Stoke-on-Trent might be introduced in Redcar & Cleveland without sufficient recognition of existing provision and prior work in areas such as speech and language support.

Delivery partners were broadly positive about Thrive at Five's involvement, particularly valuing the additional operational capacity and specialist knowledge it brought, as well as its role as a collaborative partner who could support implementation and provide space for reflection, particularly in areas such as early years transitions.

“That extra capacity [that TAF brings] is received really well, and it's very much appreciated by me as well. It's nice to bring that little bit of added knowledge, somebody to bounce off, somebody to kind of have those sort of, 'What do you think if-?' That's really helpful.” Delivery Partner, Redcar & Cleveland

At a more operational level, backbone team members reported generally positive engagement with schools, particularly in relation to community engagement initiatives and strengthening transition support. However, acceptability appeared more mixed among some practitioners working within Family Hubs and community-facing roles. While the Parent Connector role was recognised as potentially valuable in supporting family engagement, some practitioners perceived overlap with existing Early Life Worker roles and expressed concern about duplication. Backbone team members described variability in these relationships, with collaboration strengthening over time in some contexts while remaining more contested in others.

“There's a bit of a narrative, 'Oh, but we [early life workers] were going to do this anyway, and now you [Thrive at Five] have done it,' (...) I think there's days where that relationship is really strong, and really good, and they can really see the value that we bring, but then there's days where it's very frustrating, and exhausting.”
Backbone team member, Redcar & Cleveland

These tensions suggest that while Thrive at Five is broadly accepted at strategic and operational levels, frontline integration requires ongoing negotiation of roles and clarity of purpose. However, across stakeholder groups, an important enabler of acceptability was the relational approach adopted by both the national and local Thrive at Five teams. Team members were described as authentic, emotionally intelligent and supportive in their engagement, investing in relationships and fostering open conversations. This relational style appears to have mitigated some initial scepticism and laid the groundwork for trust-building in the first year of delivery.

4.6. Feasibility

In this first year of implementation, stakeholders identified a number of factors that support the feasibility of implementing Thrive at Five in Redcar & Cleveland, alongside structural and relational barriers that may constrain delivery.

4.6.1. Enablers to implementation

Senior leaders highlighted several structural features that enhance feasibility. Geographical proximity of the selected wards to each other was identified as a practical facilitator, enabling staff to work more efficiently across communities and making outreach more manageable. In addition, Redcar's established strategic focus on early years as a key driver of later educational outcomes has created alignment with Thrive at Five's aims, helping to position it within existing workstreams. Particularly regarding school-based workstreams, senior leaders noted that the academy status of most schools in Redcar may support feasibility. While academies operate independently, this autonomy can allow Thrive at Five to build traction school-by-school where relationships are strong.

Delivery partners and practitioners also described practical enablers. Thrive at Five was seen as reinforcing and supporting initiatives already developed by the local authority, for example by promoting reflection on how early years transition guidance is being implemented in practice.

“[Guidelines] were developed by the local authority (...) but I know that Thrive at Five have got copies (...) and they're like, 'Right, okay, how are these being used on the ground? How are they being rolled out? How are they being used in the schools and settings in the Thrive at Five wards?'.“ Delivery Partner, Redcar & Cleveland

Overall, a common perception across actors was that Thrive at Five brings additional capacity and support to help 'make things happen' and creating opportunities that otherwise might not happen. An example of this was the Early Years Conference, which actors including senior leaders, delivery partners and practitioners found enriching as a space for networking, collaboration and reflection on the early years ecosystem.

“It takes a long time to put an event on; to organise something, it takes commitment and they have the time and capacity to do that as part of their role.”

It's creating opportunities that probably wouldn't happen otherwise." Practitioner, Redcar & Cleveland

4.6.2. Barriers to implementation

At the same time, several barriers were identified. A key tension concerns perceived duplication of roles, particularly between Parent Connectors and Family Hub staff. Some local authority practitioners described overlap as problematic.

"There's too much of a crossover. I feel like it would have been better for us if we'd got the funding for those extra people to come and work how we work, not for Thrive at Five to be in the area, doing what we're doing." Practitioner, Redcar & Cleveland

In line with this, some practitioners described limitations in the scope of the Parent Connector role that they felt constrained its effectiveness for outreach. Unlike Family Hub staff employed by the local authority, Parent Connectors do not have routine access to families' contact details through local authority systems and typically engage families through community settings or where contact has been initiated or consented to by families themselves. This was described by some practitioners as affecting continuity of support and responsiveness, particularly in comparison with Family Hub roles that include home visits and direct follow-up with families as part of their remit.

Staff turnover within the Thrive at Five team was also reported to have slowed early progress for some delivery partners, although participants noted that the current team structure is now perceived as proactive and that implementation processes have become smoother.

At a broader system level, senior leaders pointed to the difficulty of driving change within specific wards when most services operate at borough-wide scale and within wider public sector structures. Targeting only five wards within a larger system introduces complexity in alignment, coordination and perceived fairness, potentially constraining the ease with which Thrive at Five can embed its work. Overall, while enabling conditions are present, including strategic alignment, added capacity, relational working and evaluation infrastructure, implementation feasibility in Redcar & Cleveland is shaped by ongoing negotiation of roles, structural constraints, and the challenge of embedding ward-focused activity within a borough-wide system.

4.7. Sustainability

In this first year of implementation in Redcar & Cleveland, sustainability has not been a focus of discussions, and what we heard were early reflections and open questions about what might realistically endure beyond Thrive at Five's direct involvement, and under what conditions.

Senior leaders emphasised that sustainability will be shaped primarily by the wider funding landscape and the extent to which activity can be embedded within existing structures or supported through volunteer-led provision. There was recognition that long-term continuation of activity cannot rely indefinitely on external funding and must align with local capacity. At the same time, some leaders viewed Thrive at Five's approach as inherently oriented towards sustainability. One senior leader highlighted that the programme's emphasis on strengthening what already exists, rather than creating wholly new parallel services, increases the likelihood that changes can be maintained.

“What I like about Thrive at Five is that it's all about supporting the local system that currently exists with what's here. Technically we might be doing things differently in a few years' time, but it should be sustainable because it's not been about adding a lot of new resource which can't be sustained.” Senior leader, Redcar & Cleveland

Backbone team members described sustainability as something that must be considered from the outset rather than retrospectively. One member noted the importance of interpreting Discovery findings through a sustainment lens, ensuring that proposed initiatives are realistic within local capacity. We heard some backbone team members describe specific strategies used from the outset of partnerships to promote sustainability. One such strategy involved a deliberate approach, when introducing school-based interventions, of providing initial support and then gradually stepping back, with the intention to give school staff time and space to plan for ownership and continuation.

“I've always got one eye on, that whatever I'm putting in place has got to be sustainable because I can't be there all the time. (...) So that gives them time to then plan who's going to take that over to make it sustainable. If I can make them happen, then somebody else can pick that up and then continue that.” Backbone team member, Redcar & Cleveland

Practitioners identified both tangible and intangible elements that could represent Thrive at Five's legacy. Tangible contributions included initiatives such as the Early Years Conference and Bumps and Babies events, which were seen as concrete outputs that could potentially continue. More intangibly, practitioners pointed to shifts in ways of working, particularly increased collaboration and joint planning, as a potential longer-term impact. However, they also acknowledged that such cultural changes are vulnerable to leadership turnover and dependent on the individuals driving them.

5. Barriers and enablers to implementation and implications for strategies

A new element of the Year 2 report is the explicit integration of implementation theory to interpret barriers and enablers emerging from the evaluation. This section is intended to add practical value beyond description by linking local experience with evidence about effective implementation practices. By mapping observed challenges and strengths to constructs from the Consolidated Framework for Implementation Research (CFIR)^{84,85} and associated strategies from the Expert Recommendations for Implementing Change (ERIC) taxonomy,⁸⁶ the evaluation aims to support real-time learning. The linkage between contextual determinants and candidate strategies draws on the CFIR–ERIC matching process, which provides expert-informed guidance on which implementation strategies are most likely to address specific CFIR-identified barriers.⁸⁷

⁸⁴ Damschroder, L.J., Aron, D.C., Keith, R.E., Kirsh, S.R., Alexander, J.A. and Lowery, J.C. (2009). Fostering implementation of health services research findings into practice: a consolidated framework for advancing implementation science. *Implementation Science*, 4(1).

⁸⁵ Damschroder, L.J., Reardon, C.M., Opra Widerquist, M.A. and Lowery, J. (2022). Conceptualizing outcomes for use with the Consolidated Framework for Implementation Research (CFIR): the CFIR Outcomes Addendum. *Implementation Science*, 17(1). <https://doi.org/10.1186/s13012-021-01181-5>

⁸⁶ Waltz, T.J., Powell, B.J., Matthieu, M.M., Damschroder, L.J., Chinman, M.J., Smith, J.L., Proctor, E.K. and Kirchner, J.E. (2015). Use of concept mapping to characterize relationships among implementation strategies and assess their feasibility and importance: results from the Expert Recommendations for Implementing Change (ERIC) study. *Implementation Science*, 10(1). <https://doi.org/10.1186/s13012-015-0295-0>

⁸⁷ Waltz, T.J., Powell, B.J., Fernández, M.E. et al. (2019). Choosing implementation strategies to address contextual barriers: diversity in recommendations and future directions. *Implementation Science*, 14, 42. <https://doi.org/10.1186/s13012-019-0892-4>

The intention is that these insights can feed back into programme decision-making, helping partners to refine how Thrive at Five is embedded locally, strengthen areas of momentum and select strategies that are responsive to local context rather than generic. In this way, the evaluation functions not only as a mirror, but as part of a continuous improvement loop.

5.1. Conceptual framing

Implementation determinants are the multilevel barriers and enablers that shape how well a programme is delivered and achieves its intended outcomes. These span features of the programme itself, the target population, delivery organisations, and wider system context. Some determinants are potentially modifiable (e.g., leadership engagement), while others are more structural (e.g., national policy environment).

The CFIR provides a structured way of conceptualising these determinants across five major domains:

Intervention characteristics: or features of the intervention/programme itself (e.g., complexity, adaptability)

Outer setting: including external factors such as policy, resources and local conditions

Inner setting: or organizational context, including infrastructure, relationships, culture, tension for change

Individuals: including leaders, those implementing the intervention and ‘recipients’ and considering need, capability, opportunity and motivation

Implementation process itself, including assessing needs, planning engaging stakeholders, and evaluating progress

Implementation strategies, in contrast, are the deliberate methods or activities used to overcome or activate identified determinants and support the adoption, fidelity, and sustainability of an intervention. These strategies may include approaches such as training and education, technical support, professional coaching, or financial incentives. The ERIC framework⁸⁸ identified 73 discrete strategies, organised into nine overarching categories (or clusters) based on concept mapping and expert consensus.⁸⁹

⁸⁸ Waltz, T.J., Powell, B.J., Matthieu, M.M., Damschroder, L.J., Chinman, M.J., Smith, J.L., Proctor, E.K. and Kirchner, J.E. (2015). Use of concept mapping to characterize relationships among implementation strategies and assess their feasibility and importance: results from the Expert Recommendations for Implementing Change (ERIC) study. *Implementation Science*, 10(1). <https://doi.org/10.1186/s13012-015-0295-0>

⁸⁹ Powell, B.J., Waltz, T.J., Chinman, M.J., Damschroder, L.J., Smith, J.L., Matthieu, M.M., Proctor, E.K. and Kirchner, J.E. (2015). A refined compilation of implementation strategies: results from the Expert Recommendations for Implementing Change (ERIC) project. *Implementation Science*, 10, 21. <https://doi.org/10.1186/s13012-015-0209-1>

The CFIR-ERIC matching work further links specific types of contextual barriers with candidate strategies,⁹⁰ supporting the selection of strategies that are theoretically aligned with the challenges observed.

The sections below summarise the key enablers and barriers identified through qualitative interviews in Stoke-on-Trent and Redcar & Cleveland and considers their implications for the ongoing implementation strategy of Thrive at Five.

5.2. Stoke-on-Trent

The Year 2 findings from Stoke-on-Trent have been interpreted through the lens of the CFIR^{91,92} and the CFIR-ERIC matching work,⁹³ drawing out the pathways from observed enablers and barriers to the types of actions most likely to strengthen implementation in the next phase of programme delivery.

Overall, the Year 2 evidence from Stoke-on-Trent suggests Thrive at Five is operating in a comparatively enabling implementation context, with increasing coherence between the national approach and local delivery. The key determinants surfaced in the qualitative interviews cluster around favourable external conditions and leadership alignment, strengthening internal implementation infrastructure and intentionality, and persistent operational barriers relating to data visibility, sector engagement, and communication across organisational layers.

5.2.1. Enablers: Building policy momentum, continued leadership alignment, and a more intentional implementation approach

A major enabling factor in Stoke-on-Trent is the growing local and national momentum around early years, including Family Hubs and Start for Life investment and renewed attention to early years outcomes. Thrive at Five is operating in a context where early years is already seen as a priority, which makes alignment easier and reduces the need to 'make the case' from scratch.



There is a practical opportunity here to lean into this alignment rather than delivering parallel activity. From an implementation strategy perspective, such contexts lend themselves to approaches such as explicitly mapping Thrive at Five's work on to other funded initiatives, positioning it within existing plans and funding conversations (e.g., within Stoke-on-Trent's Best Start in Life delivery plan), and using shared forums to show how efforts connect. These strategies are not about creating momentum from scratch, but harnessing policy tailwinds to consolidate Thrive at Five's relevance.

Sustained buy-in from senior leaders in Stoke-on-Trent remains a critical enabler for Thrive at Five. Leaders are not only supportive in principle but actively engaged in the programme's direction. This strong endorsement, further reinforced by national funding

⁹⁰ Waltz, T.J., Powell, B.J., Fernández, M.E. *et al.* (2019). Choosing implementation strategies to address contextual barriers: diversity in recommendations and future directions. *Implementation Science*, 14, 42. <https://doi.org/10.1186/s13012-019-0892-4>

⁹¹ Damschroder, L.J., Aron, D.C., Keith, R.E., Kirsh, S.R., Alexander, J.A. and Lowery, J.C. (2009). Fostering implementation of health services research findings into practice: a consolidated framework for advancing implementation science. *Implementation Science*, 4(1).

⁹² Damschroder, L.J., Reardon, C.M., Opra Widerquist, M.A. and Lowery, J. (2022). Conceptualizing outcomes for use with the Consolidated Framework for Implementation Research (CFIR): the CFIR Outcomes Addendum. *Implementation Science*, 17(1). <https://doi.org/10.1186/s13012-021-01181-5>

⁹³ Waltz, T.J., Powell, B.J., Fernández, M.E. *et al.* (2019). Op cit.

shifts and outcome targets for early years, creates favourable conditions for implementation.



The key challenge now is not securing commitment but leveraging that leadership support more deliberately to drive system-wide learning and alignment. For example, we recommend strategies including creating opportunities for leaders to act as visible champions, using leadership forums as structured spaces to review and interpret progress data, collectively reflect on emerging challenges, and agree adaptive responses. Making Thrive at Five's priorities visible within organisational plans, performance discussions and cross-agency initiatives would further embed the work.

Interviewees also described the presence of a stronger internal strategy and greater intentionality in delivery. Roles are more clearly aligned to the national Thrive at Five vision, and activity appears more purposeful. This suggests a maturation in the implementation process and the priority now is on consolidating these gains.



Drawing on implementation science, our recommended strategies include maintaining structured planning cycles, protecting space for reflection and adaptation, and continuing to clarify roles and responsibilities as the programme evolves. This type of structured, iterative working helps prevent drift and supports steady improvement over a multi-year programme.

5.2.2. Barriers: Data visibility, sector engagement and cascading support through organisational hierarchies

Despite strong enabling conditions in Stoke-on-Trent, interviewees highlighted structural barriers to accessing monitoring data (including new birth registrations) and understanding reach. Without clear information on who is being engaged and where gaps remain (e.g. the significant degree of missing demographic data in health visiting measures), it is difficult to target effort or demonstrate progress in ways partners recognise.



Our recommendations here are to strengthen the learning loop around data, clarifying responsibilities for data use, and establishing forums where data are reviewed jointly with partners. The aim is not simply to improve reporting, but to use data actively to guide where effort is focused and how approaches are adapted.

Engagement with the health sector also remains difficult, and support to schools appears to be shifting from initial enthusiasm to questions of sustainability and priority. For both sectors, the issue is less about access and more about maintaining relevance and protecting space within increasingly pressured environments.

Within schools in particular, responses among teaching staff were mixed. A specific challenge arises where initiatives supported by Thrive at Five — such as NELI — require children to be withdrawn from mainstream classroom time. While these approaches are evidence-informed and valued by many, some teachers expressed concern about the trade-offs involved, particularly in the context of curriculum pressures and accountability expectations. Over time, as programmes such as NELI become embedded, the opportunity cost becomes more visible, i.e., what is displaced, how it affects classroom flow and whether the gains justify the investment of time. This highlights a practical implementation tension that requires careful navigation.



Our recommended response strategy is to move from general engagement to more tailored, role-specific collaboration. With health, this may mean identifying respected individuals who can act as connectors, co-designing small, realistic collaboration points, and demonstrating how Thrive at Five activity helps meet health-sector priorities. With schools, it suggests a need for more explicit dialogue about opportunity cost, alignment with curriculum and accountability frameworks, and adaptation of delivery models where needed. Ongoing consultation and flexibility will be important to ensure that support remains responsive to operational pressures and does not feel like an additional burden. In both cases, sustained engagement depends not only on goodwill but on perceived value, feasibility, and fit with day-to-day realities.

A further barrier is the disconnect between senior leaders, middle managers and frontline staff in how they relate to Thrive at Five. While high-level support is evident, this does not always translate into consistent understanding or practice at operational levels.



Our recommendation here is to make the cascade of information and expectations more deliberate. This can include tailoring messages and materials for different roles, creating forums where middle managers can discuss implementation implications, and identifying champions at multiple levels who can reinforce the work in everyday settings. Rather than assuming alignment will diffuse naturally, the system needs structured routes for translating strategy into practice.

5.2.3. Overall interpretation

In Stoke-on-Trent, implementation is supported by strong outer-setting momentum, sustained local leadership engagement, and a maturing internal implementation approach. The principal challenges now concern strengthening the infrastructure for learning from local data, deepening integration with key sectors such as health and education, and ensuring that leadership-level commitment is translated into consistent support across organisational layers. The most useful next steps include strengthening governance mechanisms that reinforce shared accountability for Thrive at Five priorities, consolidating learning systems, equipping more sector-specific champions – especially within health and primary education – and designing intentional multi-level communication and support so that high-level strategic alignment is translated into consistent operational practice.

5.3. Redcar & Cleveland

5.3.1. Enablers: Relational credibility, local coherence and external legitimacy

A prominent enabler experienced in Redcar & Cleveland is the relational approach adopted by both national and local Thrive at Five team members. Stakeholders consistently described team members as authentic, emotionally intelligent and supportive, emphasising their ability to hold honest conversations and create space for reflection across organisational boundaries. This style of engagement appeared to reduce defensiveness and foster psychological safety, particularly in cross-sector discussions. These findings indicate that relational practice is functioning as an active implementation mechanism rather than simply a background condition.



In this context, we recommended that strategies are focused on coalition-building, consensus development and the use of advisory or partnership structures. Protecting time for relationship building is not peripheral, but central to progress.

Geographical proximity between the in-focus wards is also viewed as an enabling condition. Concentrating delivery in neighbouring areas was seen as making community outreach, visibility, and coordination across services more manageable. This proximity supports repeated contact with stakeholders and communities, helping relationships to consolidate over time.



The opportunity here is to use this spatial coherence deliberately – e.g., mapping key actors and networks, identifying where connections are weak, and creating structured forums where partners and community members can interact. Thrive at Five’s role as a broker and convenor can therefore be exercised more intentionally, using proximity to deepen collaboration and participation, including greater involvement of community members and leaders.

Thrive at Five’s status as a national charity is a further source of credibility as well as their knowledge of early child development. Stakeholders perceived this as bringing additional capacity and access to influential networks, including links to major funders and central government. Communications expertise was also highlighted as a key asset in promoting local services and Thrive at Five was seen as offering resources and reach beyond what local systems could mobilise alone.



The practical task is to translate this external legitimacy into tangible value for the system. We recommend strategies such as brokering new relationships, leveraging additional funding, and amplifying local priorities through strategic communication. In this way, Thrive at Five’s national profile becomes a resource for local system development rather than just a feature of its identity.

5.3.2. Barriers: System culture, alignment and scale

Despite these strengths, several barriers point to deeper system-level dynamics. One was a degree of defensiveness among some stakeholders, who questioned Thrive at Five’s added value and were cautious about external influence. Participants often framed this not as opposition to Thrive at Five specifically, but as reflecting a broader cultural tendency within local systems to retain control and protect established ways of working. In this context, progress is unlikely to be achieved by pushing harder from the outside. Instead, it requires building stronger internal ownership, legitimacy, and relational trust.



Our recommendations include continuing to replay local evidence and insights, creating spaces for joint sense-making, and deliberately investing in relational infrastructure. This may involve strengthening facilitation capacity, enabling more frequent cross-sector dialogue, and supporting leaders and practitioners to build the skills and confidence needed for trust-based collaboration. Identifying and supporting credible senior local champions is vitally important, but trust cannot rest solely on individuals.

A related challenge concerns how Thrive at Five builds traction in Redcar & Cleveland. In Stoke-on-Trent, early momentum was supported in part by visible direct delivery activity, which demonstrated tangible value and helped establish credibility. In Redcar & Cleveland, there may be scope for some direct delivery, but it carries more risks in this context – including duplication of existing provision and reinforcing the perception of Thrive at Five as a delivery partner rather than a transformative partner. The programme therefore faces a strategic question – is trust and credibility best built through visible delivery activity, through relational and convening work, or a combination of the two? At present, the answer is not clear, and it may not mirror the pathway taken in Stoke-on-Trent. This reinforces the importance of local judgement and an adaptive strategy, rather than a ‘lift

and shift' approach. There were suggestions from some stakeholders that elements of the approach were perceived as being transferred from Stoke-on-Trent without sufficient tailoring to the Redcar & Cleveland context. Whether or not this perception reflects the full reality, it is significant in of itself.



In early implementation phases, credibility often depends not only on what is delivered, but on how visibly it is adapted to local priorities, assets and constraints. We recommend more explicit articulation of how approaches are being tailored and how local voices are shaping decisions to help strengthen trust and reduce the perceptions of a 'transplanted' approach.

Another barrier is the absence of a shared system plan. Without a jointly developed roadmap, Thrive at Five risks being perceived as operating in parallel to, rather than in collaboration with, existing structures. Stakeholders suggested that while some relationships were strong, formal alignment mechanisms were less developed.



The practical recommendation here is the need to move from informal collaboration towards more explicit planning – including the creation of local implementation blueprints (drawing on the work of the playbook), agreeing shared priorities, clarifying roles, and making commitments visible. Developing a jointly owned plan does not replace relational working but provides the structure in which those relationships can translate into coordinated action.

A final challenge relates to scale and system boundaries. Thrive at Five's work is concentrated in specific wards, yet many relevant services and decision-making structures operate at borough or wider system level. At the same time, building trust in underserved hyperlocal communities takes time, and the success of the Parent Connector roles depend heavily on local credibility and networks.



Our recommended response to these challenges is to pace expansion carefully and continue to tailor approaches to local contexts. This means investing in deeper community engagement, involving local families more directly in design and delivery, and recognising that relational depth may need to come before geographic spread. Attempts to scale too quickly risk weakening the very relationships on which success depends.

5.3.3. Overall interpretation

In Redcar & Cleveland, Thrive at Five's core strengths lie in its relational approach and external legitimacy, while the main challenges sit within system culture, the absence of a shared planning framework, and the tension between ward-level work and wider system structures. The most appropriate responses to these contextual determinants focus on trust building, identifying and supporting internal champions, moving from relationship-building to jointly owned planning, and deepening community-rooted engagement before extending scale. Our findings reinforce the interpretation that relational work is not merely preparatory but is itself a central mechanism through which place-based change becomes possible.



Part three

Impact of Thrive at Five

6. Impact of Thrive at Five in Stoke-on-Trent

At the second year of evaluation of Thrive at Five in Stoke-on-Trent, evidence on the impacts of the initiative is drawn primarily from implementation and process evaluation data. This includes qualitative findings from interviews with senior leaders, workstream staff, practitioners and parents, capturing perceptions of change and early impacts across different levels of the system. We are not yet able to include findings from the planned difference-in-difference analysis of GLD data from the EYFSP. In addition, while measures aligned to Thrive at Five's intermediate outcomes are now being collected through the health visiting system, this year's data will function as a baseline for future longitudinal monitoring –see Section 2.1. As such, analysis of change over time in these measures is not yet possible within the scope of this report. This chapter also incorporates quantitative evidence from internal evaluations of selected Thrive at Five programmes and activities, conducted by the Thrive at Five national team. Taken together, the data available at this stage point to consistent perceptions of positive outcomes relating to the levels of change documented in the theory of change: practices and systems, parents and children.

6.1. Impacts for practices and systems

Across both years of the evaluation, senior leaders, workstream staff and practitioners described Thrive at Five as having contributed to changes in professional practice and system functioning. While Year 1 findings highlighted early signs of improved partnership working and community engagement, Year 2 findings suggest that these changes have deepened, become more embedded, and are increasingly visible at a system level. In particular, stakeholders described strengthened collaboration within and across organisations, a more prominent and intentional use of evidence and data to inform planning and delivery, and a sustained focus in community engagement.

6.1.1. Impacts on partnerships and organisations



As in Year 1, Thrive at Five was widely perceived to have stimulated and strengthened partnership across organisations and individuals working in the early years system.

In Year 2, however, these partnerships were described as becoming more operationally embedded within the two Thrive at Five wards. Senior leaders reported that practitioners were increasingly likely to know one another, have a clearer understanding of each other's roles, and be more aware of available support and referral pathways. This was seen as enabling more coordinated and timely responses to families' needs moving beyond awareness to routine collaboration.

Compared to the previous year, where improved partnership working was largely characterised by enhanced professional networks and increased awareness of the wider system of support, this year's findings point to a deeper level of integration. Senior leaders described an underlying dynamic of "connections driving connections", whereby Thrive at Five's relational work across different levels of the system — including practitioners, middle managers and senior leaders — and across sectors has helped to create and sustain new linkages between organisations. One senior leader described how relationships established by Thrive at Five with senior leaders, middle managers and frontline practitioners create a ripple effect, enabling new connections to form both within and between organisations.

"I think that connections drive connections. [Thrive at Five have] built relationships with me [senior leader], and I'm able to connect them, but more at that senior level (...). So [Thrive at Five] will make that assessment to say, 'Hold on then, we need to speak to a decision-maker or somebody that can enable this,' (...). Around the speech work, for example, because [Thrive at Five staff] built the relationships at a local level with the health visitor and school nursing team lead [middle manager] - as soon as there's an evolving piece of work, [middle manager] is able to then say, 'Oh, well, I can bring [Practitioner] in,' or, 'I can bring [Delivery Partner] in for a conversation,' and they're empowered. (...) I think that those relationships have driven just an expansion of that circle, that stakeholder circle at [the middle manager] level." Senior leader, Stoke-on-Trent

One area where this was particularly mentioned was in relation to health partners. In the previous year of the evaluation, we found that engagement with the health sector had presented challenges. In the second year, however, practitioners described how Thrive at Five had supported services such as health visiting to become more visible, better connected, and more integrated both strategically and operationally within the Family Hub. However, some senior leaders expressed caution, noting that while partnerships with the health sector had improved over the past year, they did not yet consider this to represent a fundamental shift in health service engagement with Thrive at Five and overall with the wider system.

Senior leaders also emphasised that organisations feel better supported and more connected to other professionals across the system. They attributed this to Thrive at Five's collaborative way of working and the commitment of the Backbone team's Development Leads and Community Coordinator. This was described as contributing to a shift towards a more system-focused and collaborative approach. Rather than building bilateral relationships with organisations or services, Thrive at Five was perceived to encourage a coalition-based way of working that recognises the complementary strengths of different actors across the early years system. This way of working was described as influencing

organisational cultures and expectations, inviting partners to think beyond organisational boundaries and to consider their role within a wider early years ecosystem.

“That more system-conscious way of working that isn't powerfully led by one organisation with everybody else expected to follow, but is much more about recognising the strengths that come with organisations working on a more broader coalition basis. So [Thrive at Five] seem to get that. I can't give you a, 'I have spoken to them about this, and this is what they said.' I think there is just a sense that they get it and they value what other organisations bring.” Senior leader, Stoke-on-Trent

In addition to strengthening collaboration across organisations, this year's findings highlight improved alignment within organisations. Backbone team members noted that Thrive at Five's deliberate engagement with middle managers had helped to keep middle managers informed about initiatives and collaborative work supported by Thrive at Five. This was perceived to support stronger alignment between senior leadership priorities and practitioners' day-to-day practice, contributing to greater organisational cohesion around early years approaches.

“We had this strategy. We went down our stakeholder list and we measured them to see if they were hot or cold (...) Then there are certain ones where we know we've got to build that relationship and really establish that. There's been a lot of change, and it feels like we are getting those messages across because the relationships with the leaders - the permission-givers as such - was brilliant. The relationships with the practitioners was great. (...) It was really the connection between the senior leaders and the middle leaders that sometimes messages weren't getting through, but they definitely are because we have made [senior and middle leaders] aware that this is something that needs to happen.” Backbone team member, Stoke-on-Trent

Some senior leaders also noted that organisations are beginning to transform how they think about early years practice and service delivery, creating space for new ideas to emerge. This was attributed to Thrive at Five's active sharing of learning across the system, which was perceived to support the embedding of an approach focused on community engagement and on tailoring services to meet the community's particular needs, beyond immediate interventions or initiatives.

A tangible example of this was the recent decision by the local authority to replicate the approach developed at the Bentilee Family Hub across the remaining Family Hubs. Although the hub was administered by Alpha Trust, Thrive at Five staff were delegated responsibility for organising activities and introduced a different profile of provision. This included personalising PBT group names to make them more welcoming to parents, using PBT sessions to address specific themes such as perinatal mental health and to deliver group-based interventions targeting early language and communication (e.g., Soundpots). Following its perceived success in strengthening parental engagement and generating positive feedback from families, elements of this approach are now being extended to other hubs.

“As part of a trial Alpha Trust ran [Bentilee] hub. Then the two-year period was up, so it's gone back to the local authority. (...) What I thought would happen, because the profile of activity in the Bentilee hub is quite different (...) I thought they would simply change the things in Bentilee so they matched with all of the other hubs, but they haven't. The groups and things in Bentilee are more successful. So I'm

delighted to tell you that a lot of the things in Bentilee are now going to start to be put into the other hubs and not the other way around.” Backbone team member, Stoke-on-Trent

Regarding networking and collaboration across professionals, Year 2 findings suggest that Thrive at Five’s influence on system change can be seen in both tangible developments and more intangible shifts in relational culture. Thrive at Five’s role appears to have evolved beyond facilitating connections to actively convening the system around shared priorities and collective problem-solving. Senior leaders noted that Thrive at Five has brought partners together in new forms of collective, systems-level working to explore how the early years system can be strengthened.

Another key tangible example of this system-convening role was the establishment of the Task and Finish Group on parent–infant relationships and parental mental health. Between October and December 2024, Thrive at Five convened a cross-sector group in collaboration with the 0–19 Family Matters Sub-Group, bringing together a wide range of stakeholders from across the local system, including the City Council, Integrated Care Board, NHS trusts, midwifery, health visiting, CAMHS, family hubs, social care and the voluntary sector. Beyond simply convening the group, Thrive at Five facilitated a structured process in which partners could jointly review existing provision, reflect on the evidence base, and identify gaps. This was described as helping to shape a shared direction for future work, while strengthening relationships and trust across the system.

“Since those task and finish groups, we [Thrive at Five] have continued to coordinate relevant discussions and conversations with the (...) head of universal services from our local Midlands Partnership Foundation Trust, and also Public Health. (...) we shared a briefing paper (...) to all 39 participants of the task and finish group, and also wider senior decision-makers, such as the director of Public Health in the city, and a suggested solution to what we’re saying would be a more universal offering of (...) two evidence-based ways of working, which can help to attune parent/infant relationships by very much strength-based ways.” Backbone team member, Stoke-on-Trent

Some senior leaders described this exercise as enabling consensus and alignment to emerge around evidence-informed approaches to supporting parents experiencing mild-to-moderate mental health difficulties. They highlighted that Thrive at Five’s role was particularly valued for bringing practitioners, decision-makers and subject matter experts together in a way that was both challenging and supportive, reinforcing the message that Thrive at Five’s role is not to deliver change directly, but to enable and mobilise the system to act.

“The Task and Finish Group were able to then do the stocktake of what they’d got, compare it to the evidence, look at what the gap is, and actually form a way forward, but I think that the Thrive at Five had brought that knowledge base, that credibility.” Senior leader, Stoke-on-Trent

“Thrive at Five’s uniqueness is that they’ve been able to do what they do with others through this sense of collective impact and collaboration. [Thrive at Five say] ‘We’re not here to do everything; we’re here to support you to do more’ and I think that message has resonated loud and clear. But actually, now you’re seeing the outcomes, I think there’s no argument.” Senior leader, Stoke-on-Trent

Alongside these more visible developments, senior leaders also described a ‘less tangible’ shift in the relational culture of the system. The space in which actors engage was perceived as more connected, less hierarchical, and closer to the community. For some, this was described as raising the level of ambition across the system and instilling a shared belief in ‘the art of the possible’, particularly in areas that had previously felt fragmented or difficult to progress collaboratively.

*“We've got to acknowledge, actually, that Thrive have given us much more than just an organisation who've come in to do their thing; they've given us collaboration, they've given us- People believe in the art of the possible because of Thrive, and that's great. We don't want to lose that ambition and that hope.”
Senior leader, Stoke-on-Trent*

“The less tangible things that people have felt, but are not practical, touchable things - like the ability to walk into a Family Hub, or the ability to reach out to a professional or to another parent, or to somebody else. Let's not lose that (...) those softer relational things.” Senior leader, Stoke-on-Trent

In line with this, practitioners also referred to improved collaboration and communication across services, bringing together representatives from different sectors including the local authority teams, health, voluntary sector organisations, and early years practitioners. This was seen not simply as an increase in contacts, but as a shift towards more intentional and coordinated ways of working across organisational and professional boundaries.

6.1.2. Use of evidence and data



In Year 1, there were early indications that Thrive at Five had begun to stimulate an expanded use of evidence and data across the local early years system. While these developments were noted, the use of evidence and data in Year 1 was not yet described as a central or defining feature of Thrive at Five’s system role.

In contrast, Year 2 findings suggest that the use of evidence and data has become a more distinct and prominent area of impact, coming more to the forefront in shaping both practice and system-level decision-making.

In specific areas where Thrive at Five has taken a direct convening or delivery role, senior leaders described it as providing not only access to evidence, but also the capacity and expertise to analyse data more intentionally and to use evidence to inform planning, delivery and collective learning. This was particularly evident in initiatives such as the Task and Finish Group on parent-infant (0-2) relationships, and the gap analysis linked to the NELI intervention in Reception classes. In these contexts, evidence shifted from being applied in isolated initiatives towards its use as a shared resource to support coordination, prioritisation and decision-making.

One key way in which Thrive at Five has influenced the use of evidence and data is through its system-convening role, particularly via the Task and Finish Group on parent–infant relationships and parental mental health – see 6.1.1 – Thrive at Five brought together a wide range of stakeholders from across the local system and embedded the use of evidence at the heart of this collective work. This included involving national experts and academics to support discussion and decision-making, and creating space for stakeholders to engage critically with the evidence base underpinning different approaches to supporting parents and infants.

“Thrive at Five did a piece of work around the parent relationships in nought to two. We did a series of workshops, and I think what I saw then compared to other years was more of that evidence base. This is what the Professor is telling us, but this is what the high efficacy evidence, written documented evidence is telling us, so bringing probably a little bit more of that to the front line, which I think was really helpful.” Senior leader, Stoke-on-Trent

Senior leaders noted a growing alignment around the importance of evidence-based interventions, particularly in relation to the 0–2 age group, and highlighted that the Task and Finish Group enabled conversations to move beyond general agreement on relevant methodologies towards more informed consideration of which interventions have the strongest evidence base and how these might be applied locally. This was reflected in a more consistent and shared understanding of “what works” among practitioners, service leads and decision-makers. Thrive at Five’s role was not simply to present evidence, but to act as a knowledgeable facilitator of evidence-informed dialogue. The use of this evidence was also described as underpinning Thrive at Five’s credibility, enabling them to challenge practice constructively and to raise questions about gaps in provision in ways that were accepted by specialist practitioners. In doing so, stakeholders were able to collectively take stock of current provision, identify gaps, and consider future directions grounded in both local data and wider research evidence.

“If [Thrive at Five] hadn't brought that evidence into the room, the practitioners in the room could have walked all over them, because you're talking about specialists in the field. (...) You can't have Thrive at Five coming in and challenging from a clinical perspective the gaps in service when you've got 40 practitioners sat there, whereas actually bringing that approach and that methodology in, and the academic side of it, they are then the facilitators of the information that enable a facilitation of a conversation within the group of practitioners.” Senior leader, Stoke-on-Trent

A second prominent example of Thrive at Five’s influence on the use of evidence and data relates to its work with schools, particularly through the use of data generated within the NELI intervention and used for ‘gap analysis’ -see Section 3.1.2. This approach was seen as enabling more purposeful and targeted planning, with Reception teachers working alongside peripatetic staff to identify priority areas for intervention.

“When the children had finished the [NELI] programme we did a gap analysis to see where the gaps were for those children, because there were some of those children where their speech and language were so poor they weren't able to access part of the curriculum. So now at the end of the programme we did an analysis to see where the gaps were, and what could we do with them then to plug those gaps to enable them to get the other elements of GLD.” Backbone team member, Stoke-on-Trent

Importantly, this data-informed planning led to practical, intentional delivery. Teachers asked volunteer university students who already had established relationships with children within the implementation of NELI to deliver additional tailored, play-based activities aimed at addressing identified gaps. The teachers felt this was supporting children’s progress towards achieving GLD. Backbone team members also noted growing interest from Academy Trusts in the ‘gap analysis’ approach, following this more explicit and purposeful use of data to guide decision-making and demonstrate impact.

“I've got conversations going on with various [Multi-academy Trust's] CEOs around that. There's one from another Trust that is saying to me, 'I really love this role [referring to the tasks practitioners were conducting regarding gap analysis in Reception children to identify their needs and support progress towards GLD]. I want to sit down with you. I want to work out a strategy on how we can make what you've developed into a role where it's a shared resource.” Backbone team member, Stoke-on-Trent

Beyond these specific examples, senior leaders highlighted Thrive at Five's broader contribution to building system capacity for data analysis and intentional planning. Thrive at Five was seen as providing practical support to analyse data, interpret findings and translate insights into action, including being asked by local authority education colleagues to support analysis of GLD data across the city and to share learning from Thrive at Five wards at early years forums. This was seen as further evidence of Thrive at Five's growing role as a trusted partner in evidence-informed system development.

“We've been approached by the Local Authority education colleagues to help to look at GLD across the city. They've asked that [Thrive at Five Development Lead] and I - we've been shown all their data - they've said, 'Will you help with sharing learning at headteacher forums and at early years leads forums? Although we can't take Thrive at Five to all their areas, we want them to at least know what you've done, how you've done it, so that they can think about what else they might do.” Backbone team member, Stoke-on-Trent

Taken together, these findings suggest that in Year 2, Thrive at Five's impact on the use of evidence and data has become a more central mechanism through which system change is being pursued. Across both strategic and practice-level examples, Thrive at Five was perceived to model and facilitate a more intentional, coherent and shared use of evidence and data in planning and decision-making, reinforcing its role as both a system convener and a source of analytic capacity within the local early years system.

6.1.3. Impacts on community engagement

This year's findings reinforce and extend the emphasis on community engagement identified in Year 1. In practice, community engagement was most commonly described in relation to increasing reach, strengthening relationships with parents and carers, and improving participation in services and activities. Thrive at Five continued to be described as modelling the value of proactive outreach, engaging closely with parents and communities, investing in trust-building, and creating welcoming spaces that encourage families to engage with support.

Senior leaders also described Thrive at Five as acting as an advocate for the community, bringing insights from parents into strategic discussions and influencing how services respond to expressed needs. In this sense, community engagement was not framed solely as increasing attendance, but as strengthening feedback loops between families and decision-makers with some senior leaders acknowledging the importance of embedding it within the system so that it becomes routine rather than programme-specific. However, the emphasis in Year 2 remained on improving access, utilisation and relational trust, rather than on more formal co-design or shared governance approaches.

“We've seen (...) the real value of working hyper-local within a community. (...) Thrive is probably a great example to hold up of that real hyper-local footprint and the importance of that, and the importance of working with and through your community. (...) We've tested it and proven it to be a good way of working in

Thrive at Five. I think the community engagement has got to stay a really central feature (...) the next stage naturally is embedding and making that business as usual.” Senior leader, Stoke-on-Trent

Senior leaders highlighted Thrive at Five’s close engagement with communities as enabling a deeper understanding of parents’ needs and priorities, and as modelling effective ways of working with families. Backbone team members described how approaches trialled within the Bentilee Family Hub – including adapting the profile and framing of PBT sessions to making them more welcoming, and integrating themed content such as maternal mental health and early language development (e.g., Soundpots) — were being taken up and extended across other Family Hubs within the council -see 6.1.1. This was viewed as an indication that Thrive at Five’s approaches to shaping the content, framing and delivery of group provision, including how sessions are promoted and tailored to parents’ expressed interests, were beginning to influence wider service design and delivery across Family Hubs. However, while the impact of this engagement was perceived to be stronger in Bentilee than in Abbey Hulton — largely due to the presence of an established Family Hub in Bentilee — stakeholders identified the development of a new Family Hub in Abbey Hulton as a significant opportunity to extend and strengthen community engagement in that ward.

“[Thrive at Five’s] work has definitely embedded and taken a hold and had a greater impact in [Bentilee] more than [Abbey Hulton]. So I think there’s a real opportunity to focus on the community of Abbey Hulton. I think the ways in which we can do that are numerous. (...) We’re repurposing a building in the Abbey Hulton ward to be a family hub because we haven’t got one in Abbey and it’s always been a gap.” Senior leader, Stoke-on-Trent

6.1.4. Other impacts

Emphasis on early years

As in Year 1, Thrive at Five has helped to raise awareness of the importance of the early years in children’s development and to embed this more firmly within organisational agendas, as recognised by senior leaders and backbone team members. Senior leaders reported seeing a stronger focus on the early years as a priority area for Stoke-on-Trent, reflected in increased attention to GLD, language, and home learning environments — key intermediate outcomes within Thrive at Five’s theory of change — and in heightened focus and strategic interest in this area. This was described as making a difference collectively across the system, while also supporting individual leaders to advocate more effectively for early years investment within their own organisations.

“[In participant’s organisation] We talk about good levels of development, and we talk about communication. We talk about the home-learning environment and all those things.” Senior leader, Stoke-on-Trent

This increased emphasis has also extended beyond organisations traditionally focused on the early years. Backbone team members highlighted how organisations not previously engaged in early years work are now recognising its relevance to the wider life course and to their own organisational missions, and are becoming more actively involved as a result.

“YMCA only worked with older children and young adults, and since coming to our events and being involved with us they’ve said ‘Oh, actually this is really important stuff (...). They’ve started having a minibus in the holidays, we get a £500 budget, and they take our young families out. But until then they never worked with the

young generation because to them it wasn't really on their agenda.” Backbone team member, Stoke-on-Trent

Skills development

Thrive at Five continued to be described as contributing to skills development across the workforce. Senior leaders noted that practitioners are becoming more reflective and coordinated in their practice. Backbone team members described practitioners as increasingly confident and skilled in delivering evidence-based interventions such as Talking Time and NELI, following their implementation in nursery and reception classrooms supported by Thrive at Five, and increasingly able to identify gaps and adapt their practice in response, particularly through the use of ‘gap analysis’ exercises in reception classrooms - see 6.1.2.

In addition, continued collaboration with university-based early years students through involvement in initiatives supported by Thrive at Five, allowed students to gain confidence, practical experience, and a clearer understanding of working with young children and families. This was seen as strengthening skills and readiness among those likely to enter the early years workforce, supporting longer-term system capacity. One early years undergraduate student volunteering in the delivery of NELI reflected:

“This is the first [volunteering opportunity] for something in our branch [referring to her Early Years degree programme] to do with education. (...) It is such an important intervention where, when I've been in placements before, they don't offer anything like this. I'd say [I've gained] a lot of confidence, because it is almost like you've got your own little class. (...) it is very big on experience. Being in a school, you get to see first-hand how things will play out. It shows you a little bit of what your future could be like.” Practitioner, Stoke-on-Trent

6.2. Impacts for parents

In Thrive at Five's theory of change, impacts for parents are positioned as one of the ways in which improved outcomes for children come about, as well as an intermediate outcome (improved parental wellbeing). We therefore discuss impacts for parents first before discussing impacts for children.

Across both years of the evaluation, parents and practitioners described a range of perceived impacts for parents associated with activities supported by Thrive at Five. While parents were not always aware of Thrive at Five's role in the initiatives they accessed, they consistently reported benefits for themselves and their families. This year's findings largely reinforce and consolidate those reported in Year 1, suggesting that impacts related to social connection, parental confidence, knowledge, and wellbeing have been sustained over time; aligning with Thrive at Five's theory of change short term outcomes for parents.

6.2.1. Increased social networks



As in Year 1, parents described developing new social connections through their participation in PBTs and other activities supported by Thrive at Five, such as school readiness sessions.

These peer relationships were perceived as an important source of emotional and practical support, contributing to parents feeling less isolated and more connected within their local communities.

“When I first had [baby] I did have a few weeks of feeling really bad (...) but when I was feeling like that I started thinking about the ladies here out of all the playgroups I go to, which was quite nice (...) This was my newest playgroup compared to the rest, but I was thinking of them when I was feeling like that. I don't feel like that now.” Parent, Stoke-on-Trent

“All the mums now, we're all friends and we'll go do stuff, whereas the other ones [from other PBTs], everyone was very secluded (...) We all went out for a meal, [we] took the boys to Adventure Village (...) or me and a couple went to a comedy event the other week.” Parent, Stoke-on-Trent

“Another mum at [school readiness sessions], she'd just had a new baby, so I think it was probably she was there more for her own mental health I think, more than anything else, it was just giving her somewhere to go (...) She could breastfeed her baby, her older child could go and play, and it was just I think something to get her out and it was a benefit [for her].” Workstream staff, Stoke-on-Trent

While the overall pattern mirrors Year 1 findings, Year 2 included an example of a parent taking on a more active role within a PBT by volunteering as a link between participating parents and the group lead. Although isolated, this example suggests potential opportunities for greater parental involvement and leadership within community-based provision.

“I now help run this [PBT]. I'm a volunteer. I'm just the one that everyone talks to (...) if someone tells me their problems, I'll just talk to them, or I'll message [PBT lead] (...) and then she will go ahead with if anything needs to be done with them.” Parent, Stoke-on-Trent

6.2.2. Increased take-up of services and support

Findings related to parents' engagement with services and support in Year 2 closely echo those from the previous year. Parents described feeling supported to navigate concerns about their children's development and to access appropriate services, particularly through signposting provided by Parent Connectors.

“If you've got any concerns (...) you can always speak to one of the ladies [Parent Connectors], and they're always there to point you in the right direction of what professional you need to go to (...) My eldest little boy is going through assessments for autism and they've been amazing, pointing me in the right direction. (...) [Parent Connectors] are always there if you need them for advice.” Parent, Stoke-on-Trent

“[Thrive at Five staff] have put me in contact with various services that have helped me in terms of me, myself, as a parent, my child's development, me talking to other parents and gaining other parenting skills, but then also have put me in touch with services such as Mother's Mind [PBT] about my mental health as well, which has massively benefited me.” Parent, Stoke-on-Trent

6.2.3. Increased parental knowledge and support for children

Parents continued to report increased confidence and knowledge in how to support their children's development, consistent with Year 1 findings. They described feeling more

assured in how they talk to their children and in implementing activities at home to support learning and development.

“Definitely communication with my children (...) talking about them getting ready for school and making sure they're aware of routines (...) That's some advice I really have taken on board of just little things like that. Just asking the children how their day's been. Congratulating them on any achievements that they've had.” Parent, Stoke-on-Trent

Practitioners similarly observed that parents who attended school readiness sessions with their children appeared more confident and informed regarding how best to support their child.

“I think it gave mum a lot more confidence in what she needed to do with her child to get them ready for school, well ready for nursery. I think she was just slightly unaware before, of the things that would be expected of her child, and it just made her feel a bit better, knowing what she needed to work on.” Workstream staff, Stoke-on-Trent

“Parents of younger children are beginning to think about getting them ready for school (...) one of the parents said how valuable she'd found it, because she now knows some of the things she's got to work on, and she's got two years before she has to meet the end goal [of her child attending reception]. So she found it useful to have that information earlier, rather than later.” Workstream staff, Stoke-on-Trent

A new element emerging in Year 2 was the perceived impact of Thrive at Five school readiness communication campaign, delivered through social media, short-form videos and printed material. This campaign was designed to complement in-person workshops with parents and drew on national messaging (e.g., the Starting Reception website resources), but was adapted to the local context through simplified language, accessible formats and the use of videos featuring children and families from Stoke-on-Trent. Staff reported that these resources supported parents' knowledge across a broader range of topics, including health-related behaviours such as tooth brushing, and encouraged parents to seek further information independently. This suggests an expansion of perceived impacts beyond language and learning-focused practices.

“Some of the feedback we've had from parents is that it was really useful for them to know how to improve their daily routine, or the tooth brushing video helps them encourage their little ones to brush their teeth (...). I know a lot of the parents [were] like 'Oh, that post you put on about this, it was fantastic. It made me realise this, and this', 'I went on that website and I saw this. What do you think about this?' (...) It sparked something in the parents to go and find out more.” Backbone team member, Stoke-on-Trent

6.2.4. Improved confidence, wellbeing and mental health

This year's findings reinforce and consolidate parental wellbeing as a key area of sustained impact associated with Thrive at Five. As in Year 1, improvements in wellbeing remained the most consistently reported impact for parents attending activities supported by Thrive at Five, particularly PBTs. Parents described feeling less isolated, less anxious, and more confident. In Year 2, parents also articulated more clearly how these improvements

supported their own emotional regulation, with perceived benefits extending to their interactions with their children.

“My confidence has grown a lot coming to groups [PBTs]. I feel more confident in myself and not as much anxiety as I did have” Parent, Stoke-on-Trent

“I think the main thing is because they've helped me so much, that's benefited [child] in the long run because I'm not getting as frustrated with [child] because of group, because I understand more. (...) If he is crying and you can't process it, it's okay to put him in his cot and walk away for a minute, so you can calm down and then go back to it. I've definitely learned that. I've also learned that there's people that you can message if you need help.” Parent, Stoke-on-Trent

These perceived improvements in parental confidence and wellbeing were also observed by staff facilitating sessions supported by Thrive at Five. Staff described parents appearing more confident in their interactions with their children, more willing to try new strategies at home, and more reflective about what works for their family. They noted that increased parental confidence was linked not only to knowledge acquisition, but also to parents feeling trusted, supported, and capable.

“Parents seem a lot more confident, (...) when talking to the children. So they'll take [an] idea and they'll try it at home. (...) To give parents ideas to try at home has been really nice and then they'll come back the next week, 'I tried that and they loved it.'” Workstream staff, Stoke-on-Trent

“We had a young girl that was one of the first families we had contact with who had special educational needs, and she started coming when the baby was five months old and she was being told ‘you can't go there, you're not capable of catching two buses by yourself.’ (...) So we got in contact with the social worker and said, ‘We're a trusted organisation’ and she came with a social worker, she came regularly for a good few years. (...) She's had a really nice journey of building her confidence, and accessing support and proving to people that she can do it, she can be a mum, and any advice and information that you sat and spoke to her about she took it in.” Parent Connector, Stoke-on-Trent

6.3. Impacts for children

Across both years of the evaluation, parents, practitioners and senior leaders perceived improvements in children's outcomes that they attributed, partially or wholly, to Thrive at Five.

While Year 1 findings highlighted impacts primarily at the level of individual children and settings, Year 2 findings suggest a growing confidence among senior leaders that these improvements may also be reflected in emerging population-level trends, particularly in relation to speech, language and communication. Senior leaders noted that meaningful changes in outcomes take time, but expressed confidence that Thrive at Five is contributing to improved developmental trajectories for children.

6.3.1. Readiness for school



As in Year 1, readiness for school remained a key area in which perceived impacts for children were reported. These perceived impacts represent an important step towards Thrive at Five's ultimate goal of more children achieving a GLD.

Parents and practitioners continued to attribute improvements in children's readiness to a combination of PBTs, targeted work to support transitions into school, and language and communication interventions delivered in nursery and school settings.

In Year 2, parents welcomed a more explicit and visible focus on school readiness within PBT sessions and additional targeted provision delivered through the Family Hub, compared to the previous year. They described how this focus supported children's social development, communication skills, and emotional adjustment to starting school.

"The School Readiness Project was amazing to try and get her ready to be transitioned into a new school (...) She's gone into that new school now and it's like she's always been there. She walked in, head held high first day (...) She loves it" Parent, Stoke-on-Trent

"[PBT sessions have] helped him socially. He was really shy before, whereas now he'll come and he'll speak to the staff, (...), to the kids (...) because he has, from such a young age, been involved with other children, and other development things that Mothers Mind [PBT] have done, and obviously, the Thrive at Five girls as well, it's helped massively in terms of when I took him to nursery (...) He was fine and he settled in really well because he'd been exposed to different people." Parent, Stoke-on-Trent

Practitioners similarly reported that children who attended PBT and PEEP sessions appeared more confident in their interactions with peers and better prepared for the social and behavioural expectations of school, echoing findings from the first year of the evaluation.

"[Children] with the poorer speech or lack of parental engagement or poor social skills that have been attending those PEEP sessions, [their] social skills have improved." Workstream staff, Stoke-on-Trent

"We've seen children go from really shy to them running the group basically. (...) There was a little girl that's been coming since she was one and now she's turned three recently. Just her confidence and the way she's now accepting more and a lot of the children. (...) [It's] been a good shift to see confidence building" Practitioner, Stoke-on-Trent

6.3.2. Speech, language and development

Perceived impacts on children's speech, language and communication continued to be a central theme in Year 2, building on the strong emphasis identified in Year 1. Practitioners and senior leaders described speech, language and communication outcomes, and GLD more widely, as important indicators of the programme's success, while acknowledging that substantial changes in measured outcomes will take time to emerge. These perceived changes align with Thrive at Five's intermediate outcome of enhanced communication and language.

“A key measurable outcome I suppose is the GLD and the impact of that across the board. Thrive alone can't do that and we would be naive to think it could, but to see that consistently improving for children in the next year group, and the next year group, and the next year group, is definitely something to continue to aspire to.” Senior leader, Stoke-on-Trent

“The work [Thrive at Five] have done around GLD, around communication I think has been recognised as being an important measure of the success of the programme [Thrive at Five]. (...) The work (...) with NELI is impressive and the level of engagement, I think, is significant both with the university and equally the nurseries and schools. That communication and language approach is really an important one in the Stoke context, partly because there are quite a lot of reports of children coming into school not at the right stage of development where you'd expect them to be, both in nursery and at the commencement of Reception.” Senior leader, Stoke-on-Trent

Practitioners reported observing stronger language and communication skills among children who participated in Talking Time in nurseries and NELI in reception classrooms. Staff described children progressing through more complex communication skills, from learning specific vocabulary to being able to construct a full narrative. Some noted that these children appeared to sustain accelerated progress into the first year of Key Stage 1, particularly in phonics.⁹⁴

“We found it was very, very successful with last year's cohort. We saw really good progress for lots of children with using the Talking Time.” Practitioner, Stoke-on-Trent

“The local authority have highlighted that in five of our seven schools, the children in the Reception year in communication and language are outperforming the other children across Stoke. That's disadvantaged children. (...) when they look at the Year 1 phonics data, those schools are showing that those children are continuing to make that accelerated progress, and that it's feeding into their reading and literacy” Backbone team member, Stoke-on-Trent

“The data is showing that children who've accessed NELI are coming through stronger on the Year 1 phonics testing” Workstream staff, Stoke-on-Trent

Talking Time was also perceived to support language development in nursery settings, with practitioners highlighting progress among children with EAL. Staff described children participating more actively in discussions, constructing longer sentences, and demonstrating increased confidence in communication.

“I had a little boy last year; he was EAL and he spoke very, very little but he saw a picture of an aeroplane and he was just telling me about the time he went to visit his family on the aeroplane. It just blew me away because he'd made that connection. Normally, you wouldn't see that side of him at all. I didn't even know

⁹⁴ Whilst we can see tentative evidence of more children from Thrive at Five schools achieving GLD and higher scores in the communication and language domains compared with the citywide data; CEI have not reviewed any local data to substantiate the claims of a sustained improvement in Year 1 phonics data.

that he was capable of putting those sentences together and having those discussions." Practitioner, Stoke-on-Trent

Beyond speech and language outcomes, practitioners also noted perceived improvements in children's confidence in social interactions and gains in cognitive processes associated with participation in NELI, including increased attention span, memory, and knowledge of the world.

"I was really surprised in their memory and how that expanded. There was a time where we had a tray, and I'd take an item out when they had their eyes covered, and they had to remember the item that was missing. Their attention span and their recognition was so amazing that they knew straight away." Workstream staff, Stoke-on-Trent

"There were some children before who came into NELI and Thrive at Five not really knowing anything about the world. You're thinking doctors and dentists. Then towards the end of the year, they were thinking 'When I grow up, I can be a doctor, I can be a...'. The change was so positive that it was great." Workstream staff, Stoke-on-Trent

6.4. Insights from internal evaluations

We turn now to findings from the internal evaluations undertaken by the Thrive at Five national team. As in Year 1, these evaluations are based on pre–post measures and descriptive analysis rather than counterfactual designs, and therefore cannot attribute change directly to interventions supported by Thrive at Five. Nevertheless, they provide useful insights into areas of promise and align with qualitative findings reported elsewhere in this section.

Nuffield Early Language Intervention (NELI)

In its third year of delivery, NELI continued to show promising indicators of supporting children's early language development. LanguageScreen assessments conducted in autumn 2024 and summer 2025 indicate positive shifts across language development categories, with a decrease in the proportion of children identified as needing language support and a corresponding increase in the proportion assessed as having no language concerns. At baseline, 42% of participating children were categorised as needing support to develop their language skills, while 55% were identified as potentially benefitting from receiving support. By summer 2025, these proportions had decreased to 12% and 35% respectively. Over the same period, the proportion of children assessed as having no language concern increased substantially from 3% in autumn 2024 to 53% in summer 2025.

Analysis of standardised LanguageScreen scores also indicated statistically significant improvements in children's mean language scores over the academic year, with an average gain of 9.8 points among children who participated in NELI. This increase was notably greater than that observed among non-participating pupils, whose scores increased by an average of 3.5 points over the same period.

Talking Time

In its second year of delivery, Talking Time continued to show evidence of promise in supporting children's early language development. Compared to Year 1, the evaluation approach was strengthened through the consistent use of the LanguageScreen assessment

across all participating schools, enabling cross-school comparison for the first time. Findings indicated statistically significant improvements in children’s language scores over the academic year.

LanguageScreen assessments conducted in autumn 2024 and summer 2025 showed positive movement across language development categories. At baseline, 36.6% of children were categorised as having some or significant language concerns (amber or red). By summer 2025, half of the children initially identified as red or amber had moved up at least one category, with particularly strong improvement among those initially categorised as amber, 65.5% of whom moved to green. As a result, the proportion of children identified as having no language concern increased from 63.4% in autumn to 74.1% by the end of the school year. As in Year 1, outcomes varied across settings, with stronger improvements observed in schools where Talking Time was most fully embedded across the foundation stage.

PEEP Learning Together

PEEP Learning Together was implemented for the first time in Thrive at Five wards in Year 2, and early findings indicate evidence of promise at child, parent and practitioner levels. Parents reported increased engagement in home learning activities and greater confidence in supporting their children’s learning, alongside wider perceived benefits for children’s attention, confidence and emotional regulation. Post-intervention survey data indicate that over 80% of parents across all four participating schools reported increased engagement in home learning activities following PEEP, including reading, singing, crafts, letter recognition and counting.

Language assessment data from participating schools also showed statistically significant improvements in children’s scores, although baseline levels were relatively high, suggesting that many participating children did not have identified language needs pre-intervention. LanguageScreen data from three schools indicated statistically significant increases in mean scores for 21 children, from 90.38 in autumn 2024 to 96.76 in summer 2025, on a scale ranging from 65-135 where children scoring below 81 indicating a child has language skills significantly below the average for their age and require additional support. In one school using the Early Language Screen Score, mean scores increased from 4.82 in autumn 2024 to 7.91 in summer 2025, on a scale ranging from 0-10, where scores below 4 indicate significant language delay requiring immediate targeted intervention.

Practitioners facilitating PEEP reported increased confidence in delivering family-focused provision and engaging parents, particularly among those with less prior experience.

Parent Outreach and Engagement

Parent Outreach and Engagement is an enabling workstream within Thrive at Five’s approach, aiming to connect families with early years services, community resources, and parenting support through the facilitation and support of PBTs and community events, alongside the deployment of Parent Connectors within the community.

Evidence from interviews with local parents and caregivers and backbone team members (including Parent Connectors, the Community Coordinator, and the 0–2 Development Lead) indicates meaningful outcomes for parents, children, and local services. Parents described reduced social isolation, increased confidence, and enhanced knowledge of child development. Many also reported developing stronger peer networks and lasting friendships have formed through participation in PBT sessions and community events.

Practitioners and parents also highlighted perceived benefits for children, particularly through opportunities for structured social interaction. These were described as supporting improvements in children's social skills, communication, independence, and readiness for nursery or school. Teachers noted that children who attended PBT sessions hosted in the same school they would later attend were more emotionally prepared for transition and better able to engage in learning when starting Reception.

7. Impact of Thrive at Five in Redcar & Cleveland

This section reports on perceived impacts of Thrive at Five in Redcar & Cleveland during the first year of delivery. It is important to bear in mind the timing of data collection is important for interpreting these findings. Senior leaders were interviewed during the first half of the year, at a point when implementation was still at an early stage, and therefore largely discussed anticipated or expected longer-term impacts rather than observed change. Delivery partners, practitioners and backbone team members were interviewed later in the year, when early delivery had begun and some initial impacts at practitioner, organisational and parent levels were beginning to be identified. As a result, this section distinguishes between expected impacts articulated by senior leaders and emerging impacts described by professionals closer to delivery, recognising that impacts for children are likely to take longer to become visible.

Overall, findings from the first year of the evaluation in Redcar & Cleveland suggest that early impacts of Thrive at Five are most visible at the system, organisational and parent levels, with impacts for children remaining largely aspirational at this stage. Early impacts described by professionals on the ground align closely with the anticipated outcomes articulated by senior leaders, particularly in relation to strengthened partnerships, improved engagement with families, and increased confidence among parents. These early changes correspond to the short- and intermediate-term outcomes set out in Thrive at Five's theory of change. These findings point to emerging changes in relationships, ways of working, and access to support, which are consistent with what Thrive at Five describe in their early implementation phase and theory of change.

7.1. Impacts for systems and organisations

Early signs of impact were identified mainly at the system and organisational levels, as Thrive at Five's activity at the time of data collection had focused largely on the set-up and Discovery phase. Senior leaders in particular described early impacts in terms of strengthened relationships, shared understanding, and organisational reflection, rather than direct changes in service delivery or outcomes.

7.1.1. Partnerships and networking

Senior leaders highlighted stronger connections across local networks and improved insight into current challenges facing the community and the system, such as parent isolation, fragmentation across services, and parents' difficulties navigating available support. In one example, research conducted by Thrive at Five identified that parents often felt overwhelmed or "bombarded" by information. This insight informed a joint workstream between the local authority and Thrive at Five focused on improving how information is shared, with the local authority adapting website content and links to provide clearer, more coherent signposting aligned with the Family Hub offer.

"One of the workstreams was about us sharing information coherently with parents and from the research that Thrive at Five had done, one of the things that came out of it was that sometimes parents feel bombarded with information (...) so we [Local Authority] wanted to add in the information that we wanted to be shared with parents onto the website, already linked to the Family Hubs (...)"
Senior leader, Redcar & Cleveland

A central theme among senior leaders was the value of conferences led by Thrive at Five as opportunities to convene actors across the system. These events were described as spaces that brought together statutory and voluntary sector partners, strengthened local networks, and presented accessible evidence related to early years. Some senior leaders noted tangible follow-on effects, such as health visitors engaging more actively with community resources after attending conferences, including visiting community centres and connecting more closely with voluntary sector provision. However, some also suggested that the conferences would benefit from a clearer articulation of their overarching purpose and intended outcomes. In particular, some felt that while the events were successful in generating dialogue and shared energy, they did not always leave attendees with a clear north star or agreed set of next steps, making it harder to translate discussion into coordinated action.

"I've been to a couple of (...) conferences [Thrive at Five] have pulled together, which the last one was excellent, but there's- I'm not seeing a 'so what', I'm not seeing a what's coming out of that. It was excellent. It got people in the room, it got people talking, it raised the issues, but I'm not seeing the so what." Senior leader, Redcar & Cleveland

These views were echoed by practitioners, who described the conferences as supporting a clearer shared understanding of roles, responsibilities, and the wider local picture. Practitioners emphasised the value of situating their own work within a broader system of partners and services.

"I think the conferences (...) have really connected people. Lots of networking, and a better understanding of what everybody is there to do. One of the conferences was around early years, and I thought as a professional I gained a better

understanding of what that bigger picture was locally and what the need was, and where I fitted into that big picture.” Practitioner, Redcar & Cleveland

We found mixed perceptions among practitioners regarding the extent to which Thrive at Five was supporting increased promotion and utilisation of services among families. Practitioners based outside council services (e.g., not-for-profit organisations) described Parent Connectors as helping them to stay more up-to-date with available local provision, which in turn enabled them to make more informed referrals and signpost families more effectively. In contrast, practitioners based within council services (e.g., early life workers and Family Hub staff) reported that they were already familiar with available services and had established processes for contacting families. Some felt there was overlap between their role and that of the Parent Connectors, raising concerns about potential duplication of effort.

7.1.2. Insights into community needs

Views were mixed regarding the extent to which the Discovery phase generated new insights into community needs. Some senior leaders felt that the Discovery work helped surface underlying challenges that had not previously been fully visible, prompting reflection on the complexity and interconnectedness of the issues facing families. In these cases, Thrive at Five was described as supporting a deeper understanding that some challenges — such as limited access to safe outdoor and green spaces — are driven by structural and contextual factors that cannot be addressed through isolated or short-term interventions.

“...we've unpicked it a lot (...) actually the reasons behind that are more complex than we can suddenly fix.” Senior leader, Redcar & Cleveland

However, other senior leaders felt that the findings largely echoed existing local assessments and intelligence, leading to more mixed views about the added value of the Discovery phase at this stage.

7.1.3. Organisational reflection and learning

Some senior leaders described Thrive at Five as creating valuable ‘*headspace*’ for reflection, particularly through engagement with local data (such as the *1001 Days* report) and discussions about new ways of working with families and communities. One senior leader reflected that although extensive parent survey data had already been collected locally, there had been limited opportunity to step back and digest what the findings meant in practice. They highlighted the value of working with Thrive at Five’s Programme Lead, who drew out key themes from the data and convened a conference focused on these priorities. This was described as enabling both personal and organisational reflection, supporting a deeper interpretation of the evidence and dissemination of key public health insights.

There was also emerging evidence that Thrive at Five was beginning to encourage the local authority to “think differently” about provision and engagement. Practitioners provided examples of early shifts in practice, such as extending *Bumps and Babies* events beyond Family Hub settings into community spaces. This was seen as an example of testing more flexible and locally responsive approaches to service delivery.

“The Bumps and Babies events that are coming up, some of them aren't going to be coming out of the family hub, [rather] in community spaces. I think that's the

real benefit of trying to help the local authority think differently about how they can reach families.” Practitioner, Redcar & Cleveland

7.2. Impacts for parents

7.2.1. Impacts anticipated by system leaders

Senior leaders interviewed during the first half of the year did not yet perceive direct impacts on parents but articulated a set of anticipated outcomes they hoped Thrive at Five would contribute to over time. These expectations centred on improved parental engagement, reduced stigma associated with services, and stronger parental confidence and wellbeing. In the second half of the year, professionals working more closely with families described early impacts that align closely with these hoped-for outcomes, suggesting that initial changes may be emerging at ground level even if system-level impacts are not yet fully visible.

Senior leaders highlighted increased parental engagement within communities and with local services as a key hoped-for impact, particularly among groups that have historically been less engaged. They hoped this would lead to parents developing a more positive view of local provision, seeing services as a resource ‘with’ them rather than something done ‘to’ them, and feeling more comfortable accessing support in community settings.

“I would hope that we’ll have somehow engaged with our communities and our parents at ground level and their view of our services, family hubs, the child’s health and development system, local one. They would feel more engaged with it and see it as a resource for them, with them, not to them.” Senior leader, Redcar & Cleveland

Senior leaders also expressed hopes that Thrive at Five would support parents to prioritise their own health and wellbeing, strengthen relationships with their children, and develop a better understanding of how to support their children’s needs, particularly around starting school.

“I think we would want (...) parents beginning to understand (...) that they can help their child with to make the life easier at school. Not necessarily the hard-and-fast outcomes immediately of improve school readiness [rather] some of the softer things around that; increase engagement with services, increase engagement with the child.” Senior leader, Redcar & Cleveland

7.2.2. Early impacts perceived by professionals on the ground

In contrast to the absence of perceived impacts at senior leadership level earlier in the year, delivery partners, backbone team members, and practitioners reported observing some early impacts for parents during the second half of the year. In relation to engagement and connection, professionals described parents as becoming better connected with one another and more informed about what support they can access locally. Delivery partners noted that Thrive at Five had contributed significantly to engagement through PBT sessions, particularly through the work of Parent Connectors, who were described as building relationships within community settings that local authority staff do not typically operate in. One senior local authority lead reflected that PBT are not part of her formal remit, highlighting the value of Thrive at Five’s presence in these more relational, community-based environments.

“I think [Thrive at Five] have made lots of impact with the parent and toddler groups. I haven't seen them in action myself, but listening to the feedback that they've given at meetings, it's been really lovely to hear that. That's somewhere that we just don't go; certainly as the LA it's not somewhere that I would necessarily go, because it's not part of my role. It's really lovely to hear that they've made such good connections with families. The work that [Thrive at Five Development Lead] is doing around parent champions [referring to Parent Connectors] (...) could be really key to guiding and supporting families in a real local context, rather than expecting whatever fits borough wide to fit with singular communities.” Delivery partner, Redcar & Cleveland

Backbone team members and practitioners particularly emphasised impacts for more vulnerable families, who were described as feeling less isolated, better supported, and more confident. Thrive at Five was reported to have helped reduce isolation among families living in refuges or facing language barriers that limited their access to information and support predominantly communicated in English. Through bespoke support and relationship-building, families were described as becoming more confident in navigating their local environment and services, and more willing to share experiences of racism and discrimination.

“I've got families that are confident to take the children out on their own, now they know where to go” Practitioner, Redcar & Cleveland

“We've supported parents out of isolation when they were feeling quite poorly with their mental health, and now they tell us that we're a lifesaver and they feel much better, and they've now got a whole new group of friends, and they're volunteering at the baby bank, and volunteering at Parent Baby Toddler groups, from being stuck at home doing nothing” Backbone team member

Finally, practitioners described how families had begun to access initiatives that support leisure and wellbeing, which were perceived as enriching family life. One example frequently cited was the Beach Week initiative, promoted and facilitated by Thrive at Five alongside the Family Hub, which was described as creating meaningful and enjoyable experiences for children and families. Taken together, these early impacts align with Thrive at Five's theory of change which emphasises short term outcomes for parents relating to improved access to services, improved parenting knowledge, skills and confidence.

“Especially in Grangetown, we made some really good connections with people and families, so enriching their lives, and making their quality of life better.” Practitioner, Redcar & Cleveland

7.3. Impacts for children

While no early impacts for children were reported by stakeholders interviewed in the first year of delivery, senior leaders articulated clear expectations regarding the areas in which Thrive at Five could contribute to improved outcomes over time — particularly school readiness and the development of a more robust understanding of how different interventions influence children's outcomes across the 0-5 journey. This included ambitions to track children's experiences of services and interventions over time, to identify what appears to make a difference, and if promising patterns emerge, to use this learning to inform wider roll-out beyond the initial wards. Progress in these areas represents an important step towards the ultimate goal set out in Thrive at Five's theory of change: increasing the proportion of children achieving GLD. Senior leaders consistently

highlighted this as a key hoped-for impact, alongside children feeling safe and secure within their home and learning environments.

“I just desperately want our young people to be ready for school and they might not have the greatest time at home, but if they can go to school and it just feels like a nice place and they've got a trusted person and there's something of school life that they just enjoy, and to be in a position where they're ready to learn. Just for them to feel safe, secure.” Senior leader, Redcar & Cleveland

However, senior leaders were clear that improvements in GLD would depend on collective effort across the system rather than on Thrive at Five acting alone. While a tangible improvement in GLD scores in the five Thrive at Five wards was identified as a key indicator of success, this was understood as the product of coordinated action between partners operating at different levels of the system. At the same time, some acknowledged the complexity of evaluating Thrive at Five's distinct contribution within a context where multiple early years initiatives are operating simultaneously across the borough, recognising that Thrive at Five represents an additional layer of support within a wider landscape of early years activity.

“In terms of seeing data impact, we're hoping our GLD scores for our children improve in those wards. That's a baseline thing that we've said, but there are many variables that impact on that. (...) I don't think Thrive will [achieve it] on their own. I think it'll be a system-wide thing because (...) we all need to work together to do those things, so hopefully we can.” Senior leader, Redcar & Cleveland

Senior leaders also expressed hopes that Thrive at Five would be able to strengthen understanding of how specific interventions delivered within the five wards influence children's outcomes across the 0–5 age range. This included ambitions to track children's exposure to different services and programmes and to assess what appears to make a difference to outcomes such as GLD. Although they recognised that such learning would initially be limited to Thrive at Five wards, this was viewed as a valuable starting point for informing decision-making and supporting potential wider roll-out across the borough in the future.



Part four

Discussion and recommendations

8. Summary, discussion and recommendations

This chapter brings together the key learning from the 2025 evaluation across Stoke-on-Trent and Redcar & Cleveland. It reviews progress in relation to the national theory of change (ToC) (see Chapter 1), summarises findings against the evaluation questions (set out in Chapter 1), highlights key issues for developing the work, and sets out the next stages of evaluation activity.

8.1. Reviewing progress in relation to the theory of change

Thrive at Five's national ToC sets out how its core strategies and inputs are expected to strengthen local systems, support family engagement, and contribute over time to an increase in the number of children with a GLD. As in last year's evaluation, the ToC has been used as a structured framework for assessing progress. This helps ensure continuity, allows us to track how implementation is unfolding in each site and highlights where attention may be needed. It also provides a programme theory-driven approach to the evaluation that supports future analysis of impacts and whether they can be attributed to Thrive at Five.

Across Stoke-on-Trent and Redcar & Cleveland, there is consistent evidence that the core components of the approach are being implemented and recognised locally. As is typical in place-based work, progress varies across sites, reflecting local starting points, system readiness, and stage of implementation.

In this section we work through each component of the ToC and assess progress.

→ Target Population

Implementation in both Stoke-on-Trent and Redcar & Cleveland is in line with the target population of pregnant women and children aged 0-5 at risk of not reaching GLD, although with less focus on pregnancy. This group is targeted through both working in wards with most social disadvantage and lower proportions of children reaching GLD, and through some interventions (such as NELI) being targeted within this to children most at need whilst other interventions are universal.

→ Approach

In terms of the approach, there is a clear focus on both the **strategic drivers** (unlocking the power of parents and carers and strengthening the community of collaboration). The first is primarily addressed through new and strengthened interventions although there is also evidence of Thrive at Five modelling a more parent-focused way of working and supporting parents' engagement with services. The second is evidenced in both collective planning and in facilitating new partnerships and extended joint working. This is more evident in Stoke-on-Trent. In Redcar & Cleveland, foundational work has taken place but more concrete delivery plans and clarity about the optimal systems entry points for Thrive at Five, are in development.

Similarly, in Stoke-on-Trent there are clear **direct action workstreams** in three areas while this work is in development in Redcar & Cleveland. There is also evidence of work in the three **enabling workstreams** (parent outreach and engagement, strengthening the system and improving practice). Parent outreach and engagement are seen as effective in both sites though with a recognition that continued work is needed to reach the most marginalised parents. There is more evidence of systems strengthening in Stoke-on-Trent and more recognition that this is an area where Thrive at Five's input is needed. There is also more evidence of improving practice in Stoke-on-Trent, particularly through supporting staff to deliver new interventions, but Thrive at Five's work building understanding of child development is recognised and valued in Redcar & Cleveland. In Stoke-on-Trent, stakeholders describe continued cross-sector collaboration, increased practitioner confidence, and more coordinated approaches to delivery. They continue to point to Thrive at Five's role in strengthening data use, supporting local analysis, guiding programme selection and adaptation, and introducing evidence-informed approaches. Although it is more evident than last year, this dimension of the work is less visible to some partners than the relational aspects, suggesting there may be value in making the evidence work more explicit. There are not yet specific strategies for the enabling workstreams (see further below).

→ Inputs

The inputs described in the ToC are clearly in place in both sites.

→ Implementation outcomes

Thrive at Five continues to be firmly **adopted** in Stoke-on-Trent. Whilst the programme is obviously in place in Redcar & Cleveland, the senior leadership support for the decision is less firmly in place. Thrive at Five's role is not yet fully embedded or consistently understood across the system. Some stakeholders still question its added value or see it as sitting alongside existing structures rather than as part of them, and further work is needed in clarifying purpose, positioning and alignment.

Reach is extending in both sites, with Stoke-on-Trent understandably more advanced. Most nurseries and all primary schools within the intervention wards are involved in programmes promoted by Thrive at Five, although with continued work to reach the most marginalised families early and often enough. The programme's **acceptability** is clearly established in Stoke-on-Trent where there is consensus that it is adding value and firmly

part of the ecosystem. Acceptability is more mixed in Redcar & Cleveland - clear for some, but for others there are questions about whether and where Thrive at Five can really add value and there is concern about possible duplication. Thrive at Five's relational approach is well received locally, and stakeholders consistently describe the team's engagement as authentic, supportive and credible. These early relational gains matter as they lay the groundwork for implementation and later system change and align directly with the ToC's emphasis on partnership and shared ownership as drivers of progress.

Feasibility is also clear in Stoke-on-Trent, although some challenges remain—particularly around cascading understanding through organisational layers and maintaining engagement in areas where early enthusiasm has naturally waned. Feasibility is more tentative in Redcar & Cleveland, where it is not yet clear how and where Thrive at Five can best play a role. Finally, there is initial evidence that Thrive at Five's ambitions and ways of working, and specific interventions, are becoming **institutionalised** and embedded in Stoke-on-Trent. Partners recognise that long-term sustainability will require the system to take ownership of the work rather than rely solely on the backbone team. As we discuss below, continued work needed to develop an approach for sustainment. Work in Redcar & Cleveland is not yet at this stage.

→ **Short-term outcomes**

In terms of short term outcomes, in Stoke-on-Trent there is evidence (in the form of the work being undertaken and practitioner and parent feedback) of progress in the short term outcomes for **children** (positive experiences, nurturing care, evidence-based support and high-quality education) and **parents and carers** (access to services, peer support and advice, leading to improved knowledge, skill, confidence and capacity in parenting) although this is not measured in the evaluation. **Practitioners** described being better connected with each other and with parents and more aware of the support available. There is also evidence of progress in shared goals, data use, access to evidence-based approaches and enhanced knowledge, skills, and confidence. In Redcar & Cleveland it is too early to expect evidence of these outcomes, although there is early evidence of improved networking and knowledge for practitioners. Similarly, in terms of outcomes for **systems leaders**, there is clear evidence in Stoke-on-Trent of shared vision and increased understanding of what is needed, greater access to evidence-based approaches, more collaborative action, although not yet clear progress in improved data systems. Again, in Redcar & Cleveland this would not yet be expected.

→ **Intermediate outcomes**

We do not yet have robust quantitative data on the intermediate outcomes. In Stoke-on-Trent there is qualitative evidence of individual parents describing improved parent-infant relationships, improved wellbeing and improved home learning environments, and this is also the perception of practitioners. Progress is more evident in children's communication and language, including in local language assessments as part of NELI and Talking Time. There is not yet direct work on improving the quality of education and care in settings, beyond the introduction of specific interventions delivered by setting staff such as Talking Time. Again, in Redcar & Cleveland full plans are not yet in place for how these outcomes might be achieved.

→ **Impact**

Finally, it remains too early to draw firm conclusions about the impact of Thrive at Five on the proportion of children achieving GLD in either site. However, qualitative evidence from senior leaders in Stoke-on-Trent suggests growing confidence that improvements in GLD may be beginning to emerge locally. The recent internal analysis of GLD data also provides some encouraging signals. Across the seven primary schools in the Thrive at Five wards, the proportion of children achieving GLD increased by an average of 1.2 percentage points

between 2024 and 2025, compared with a 0.6 percentage point increase across the city as a whole. Improvements were more pronounced for children eligible for FSM within Thrive at Five schools, where GLD attainment increased from 52.8% in 2024 to 64.2% in 2025 (an 11.4 percentage point increase). This contrasts with a small citywide decrease in GLD attainment among FSM-eligible children, from 58.7% GLD in 2024 to 58.2% in 2025.

While the above patterns are promising, they should be interpreted cautiously. At this stage, the findings represent early signals rather than attributable programme effects, and further data over time will be required to assess whether these trends are sustained and can be linked to Thrive at Five activity.

8.2. Mechanisms of change

Thrive at Five's ToC does not specifically set out mechanisms of change. As these are an important aspect of programme theory, in this section we discuss emergent mechanisms of change drawing on our analysis, earlier work developing the ToC with the Thrive at Five national team, and wider implementation theory.

Mechanisms can be conceptually complex and difficult to distinguish from intended outcomes, particularly in a detailed and multi-layered ToC such as Thrive at Five's. Target outcomes such as improvements in aspects of child development or increased parental engagement do not arise simply because services exist; they arise because certain *processes* are activated within individuals, relationships, organisations and systems. If programme activities represent the inputs, mechanisms describe the processes that convert those inputs into change. Making these mechanisms more explicit strengthens programme design and supports learning, by distinguishing between what Thrive at Five does and how those activities are intended to lead to change.

Several candidate mechanisms appear to be operating. These should be viewed as working hypotheses rather than fixed components, offered as a basis for further refinement with the national and local Thrive at Five teams.

Building mutual trust between families and services

A central mechanism appears to be the development of trusted relationships between parents and professionals. This arises in the relationships between parents and Thrive at Five backbone staff, the relationships between parents and other practitioners that Thrive at Five facilitate, parents' experiences of high-quality effective interventions, and potentially in how parents are viewed within and by the wider system.

The continuity offered by Thrive at Five, along with an approach that explicitly values parents' expertise, can shift how families experience the system. In this framing, trust is not simply an outcome but a driver: when parents feel respected and understood, they are more likely to engage, share concerns early, and participate meaningfully in decisions about their children.

This mechanism is reciprocal. Thrive at Five also appears to support services to trust parents — to see them as knowledgeable partners rather than passive recipients. This resembles the dynamic of a 'therapeutic alliance' whereby change occurs when both sides recognise and value each other's expertise.

Valuing lived experience as a source of expertise

A related mechanism concerns Thrive at Five's emphasis on parents lived experience. By consistently positioning parents as knowledgeable about their children and circumstances, Thrive at Five potentially catalyses ways of working that appear to strengthen parental confidence and agency. This does more than encourage participation; it shifts parents' role in the system, from users of services to contributors to their child's development and to service improvement. This mechanism may underpin the programme's intention of supporting parents to be 'the best they can be', not through instruction or interventions alone but through recognition of their strengths and capabilities.

Modelling evidence-informed practice across the system

Stakeholders also point to Thrive at Five's role in modelling evidence-informed ways of working. The team do not simply promote individual interventions; staff demonstrate an evidence-driven approach — interrogating evidence, improving data systems, using data to understand need and where interventions need to be targeted, selecting solutions that fit local needs, and adapting them thoughtfully.

This modelling operates at multiple levels. Practitioners reported increased confidence in using and adapting evidence. Partners described a greater sense of shared ownership in identifying gaps and selecting responses. Over time, this can build system capability: learning becomes transferable and not tied to single programmes. For this mechanism to be effective, intentionality matters — modelling needs to be visible, the aims explicit, and supported by structured opportunities for reflection and the transfer of the modelled practices.

Bringing a systems focus to early years

The programme also appears to function as a catalyst for a stronger systems focus. This increases local awareness of the importance of early childhood and of shared aims and mutual interdependencies, helping to surface shared priorities, recognition that they can only be met through collaborative work and by reducing fragmentation, and making early years visible across parts of the sector that may not traditionally focus on this agenda. As agencies begin to see themselves as working toward a common purpose and shared agenda, joint action becomes easier. Here, Thrive at Five's advocacy around early years does more than communicate — it helps partners make sense of the system together, enabling movement from parallel activity to a coordinated effort.

Systems-thinking requires relational capacity as well as collective sense-making and collaborative action. It involves trust, which is built through empathy, kindness, openness, values-led working and awareness of inter-personal dynamics. Thrive at Five staff, along with key systems leaders are seen as modelling these ways of working, and they are important enablers of collaborative action that merit attention in their own right.

Constructively challenging the status quo

Stakeholders also described a more disruptive mechanism at play: the programme's capacity to challenge existing assumptions and ways of working. This can involve holding up a mirror to the system, sharing evidence or parent perspectives that highlight gaps, or raising ambition about what is possible. While potentially uncomfortable, this challenge can also be productive. It encourages reflection, surfaces unmet need, and disrupts entrenched practices.

Importantly, the effectiveness of this mechanism depends heavily on context. Different organisations vary in their readiness to absorb challenge, and the programme's influence may depend on its ability to calibrate when and how challenge is introduced.



8.3. Summarising findings against the Research Questions

The findings against the evaluation’s research questions are summarised below in Table 3, drawing together evidence from qualitative interviews, intermediate outcomes analysis, and Thrive at Five’s internal evaluations.






In line with our qualitative and mixed-methods approach, this summary aims to reflect the nuance of the findings by indicating the breadth of evidence across stakeholder groups, capturing the convergence of perspectives and distribution of evidence across system levels. To support interpretation, we use a set of three icons to indicate when evidence was reported by each stakeholder group:





Table 4. Summary of findings against the research questions

Research Question	Stoke-on-Trent	Redcar & Cleveland
<p style="text-align: center;">1</p> <p>Is there sufficient and collaborative support for the place-based initiative from key leadership?</p>	<p style="text-align: center;"></p> <p>Strong support from system leaders continues and has consolidated since last year. Early years remains visible within strategic priorities and there is sustained endorsement of Thrive at Five’s approach. This has been accompanied by improved alignment between system leaders and practitioners around shared priorities and approaches. The main development need is not senior buy-in but strengthening cascading and shared ownership across organisational layers so that leadership commitment translates consistently into operational practice.</p>	<p style="text-align: center;"></p> <p>There is some important senior-level support, but this is not yet consistent, and collective ownership is less embedded across the system. Awareness of Thrive at Five and its purpose is still developing, and a clearly recognised internal champion has not yet emerged. Further work is needed to build shared understanding, strengthen alignment, and reinforce a common agenda across partners.</p>

Research Question	Stoke-on-Trent	Redcar & Cleveland
<p>2</p> <p>Is there sufficient support being provided to Workstreams from Working Groups and Backbone staff to deliver their work?</p>	 <p>Overall, support structures appear to be functioning effectively, and both system leaders and practitioners continue to view the backbone team as responsive and facilitative. As implementation matures, the priority is ensuring that responsibility is shared with, and moved to, partners rather than drifting toward the backbone team.</p>	 <p>The backbone team is seen as supportive, approachable and facilitative among system leaders and delivery partners at the middle-management level. While there is some variation in experience at frontline level, there is overall evidence of relationships beginning to strengthen. Formal coordination mechanisms and clarity of roles between groups, partners and the backbone team are still developing, and additional structure may help ensure workstreams move from planning into sustained delivery.</p>
<p>3</p> <p>Are individual workstreams being implemented as intended?</p>	 <p>Direct workstreams continue to be implemented broadly as intended, with increasing intentionality and alignment with the national approach. Some workstreams have matured and embedded since last year, while others (particularly those focused on 0-2) are at earlier stages of development. There is evidence of enabling workstreams in action, but not yet documented strategies or plans.</p>	 <p>Workstreams are in earlier stages of implementation. Initial activity is focused on relationship-building, local alignment and groundwork for delivery rather than full planning. There needs to be a shared view of where Thrive at Five can add to the system, and to optimal system entry points, before detailed plans can be developed. This means that implementation fidelity cannot yet be assessed in the same way as Stoke-on-Trent.</p>
<p>4</p> <p>What are the barriers and facilitators to implementation of individual workstreams? What refinements are needed as a result?</p>	 <p>Key facilitators include strong leadership endorsement, policy alignment with national early years priorities, effective work with stakeholders to develop workstream plans, an experienced backbone team, and increasing system familiarity with the approach. The work is supported by Thrive at Five by adding capacity and funding, and by the perceived quality of Thrive at Five staff and support.</p> <p>Persistent barriers include data access constraints, capacity pressures within partner organisations, and uneven engagement across sectors. The lack of documented strategies or plans for enabling workstreams is also an important barrier.</p>	 <p>Facilitators include the relational approach of Thrive at Five staff, credibility associated with the national programme, and geographic proximity of target wards supporting community engagement. The development of plans for workstreams is at an early stage.</p> <p>Barriers include some stakeholder defensiveness, lack of consensus about where Thrive at Five should intervene in the system, absence of a shared system plan, and structural challenges in delivering ward-focused work within borough-wide systems. Refinements should prioritise clarifying positioning, strengthening joint sense-making and planning, and identifying system champions.</p>

Research Question	Stoke-on-Trent	Redcar & Cleveland
<p>5</p> <p>Is Thrive at Five being implemented as intended?</p>	<p></p> <p>Implementation remains aligned with the theory of change and appears to be progressing into a consolidation phase. Compared with last year, there is clearer strategic direction, more intentional delivery and stronger integration within local structures, although further embedding is still required for full system ownership.</p>	<p></p> <p>Implementation broadly reflects the intended approach but remains in earlier phases. The programme is establishing credibility, relationships and system entry points rather than demonstrating mature integration. Current patterns are consistent with early-stage implementation rather than divergence from the intended approach.</p>
<p>6</p> <p>What are the barriers and facilitators to implementation of Thrive at Five? What refinements are needed as a result?</p>	<p></p> <p>Facilitators include strong credibility, senior endorsement, policy alignment, and increasing practitioner confidence.</p> <p>Key challenges relate to sustaining engagement across sectors, ensuring shared responsibility, strengthening data systems, and translating collective strategic commitment into organisational strategies and plans that filter through to frontline practice.</p> <p>Refinements should focus on institutionalising structures, supporting multi-level engagement, and strengthening collective reflection and learning loops, and community engagement in planning and governance.</p>	<p></p> <p>Facilitators include relational credibility, flexibility of approach and external legitimacy.</p> <p>Challenges include developing shared ownership, clarifying the programme's role within the system, and ensuring alignment with existing structures.</p> <p>Refinements should focus on strengthening internal champions, formalising joint planning, and deepening community-rooted engagement.</p>
<p>7</p> <p>Is there evidence of perceived impacts on intermediate outcomes, both quantitatively and qualitatively, among delivery staff and community participants?</p>	<p></p> <p>Quantitative outcome data remain limited, but qualitative insights from practitioners and parents, system-leaders' acknowledgement of positive trends observed at population-level, and emerging quantitative evidence continue to suggest perceived improvements in children's communication and language. Additional HV data are beginning to provide baseline insight into additional intermediate outcomes around parental wellbeing, parent-infant interactions, and home learning environments, though these should currently be interpreted as contextual indicators rather than programme effects.</p>	<p>No evidence is yet available.</p>

Research Question	Stoke-on-Trent	Redcar & Cleveland
<p>8</p> <p>Is the Thrive at Five approach acceptable to all stakeholders and can it be sustained beyond the central Thrive funding and support period?</p>	 <p>The approach continues to be viewed as highly acceptable across system leaders, practitioners, parents, and children (as reported by their parents/carers).</p> <p>There is increasing attention to sustainability planning, and stakeholders recognise the need for long-term system ownership. However, future arrangements for sustaining the overall approach, particularly backbone functions, remain a live discussion.</p>	 <p>There is acceptability among system leaders and delivery partners engaged with the programme, particularly in relation to its relational approach and flexibility, although for others there are concerns about duplication and a lack of clarity about where Thrive at Five could make a difference.</p> <p>Further work is needed to develop plans, embed the approach within local structures and secure shared ownership as a precursor to planning for sustainment.</p>
<p>9</p> <p>Is there evidence of impact on long-term outcome (EYFSP scores and GLD) that is attributable to Thrive at Five?</p>	<p>Robust quantitative evidence of impact on long-term child outcomes is not yet available. This is consistent with expected timelines, as system-level change typically precedes measurable child-level outcomes. Early qualitative and administrative signals are encouraging although not sufficient for attribution.</p>	<p>No quantitative evidence of long-term outcomes is yet available. Given the earlier stage of implementation, measurable impacts would not be expected at this stage.</p>

8.4. Discussion and implications

8.4.1. Site-specific conclusions

Stoke-on-Trent: From establishment to consolidation and ambition

In Stoke-on-Trent, implementation is more advanced, with Thrive at Five functioning as a more visible and embedded presence in the local system.

Key conclusions and recommendations for Stoke-on-Trent are:

- **Strong foundations are now in place.** Thrive at Five is experienced as a tangible, “3D” presence, with clear legitimacy and system positioning.
- **The programme is entering a new phase of implementation.** The focus is shifting from establishment toward consolidation, refinement and greater intentionality.
- **Intentionality is increasing but could be made more explicit.** There is growing evidence of deliberate system-shaping (e.g., through modelling ways of working), but opportunities remain to articulate this clearly, so partners understand what is being demonstrated and how to take it forward in their own practice.

- **Signs of culture shift are emerging.** Organisations not traditionally central to early years (e.g., YMCA) are showing greater recognition of early childhood, indicating broader system reach and influence.
- **Communication through organisational hierarchies remains a challenge.** While senior-level engagement is strong, translating strategic alignment into consistent organisational strategies and priorities, and filtering these throughout organisations to frontline practice still requires attention. Does Thrive at Five have a clear sense of how it wants systems leaders to take collective ambitions forward in their own organisational strategies, and is there work to support this?
- **Consensus without resourcing poses an ongoing risk.** The Task and Finish work for the new 0-2 workstream illustrated strong consensus-building, but momentum slowed when resourcing was unclear. Linking collective planning to clear pathways to action and investment is crucial.

Redcar & Cleveland: Relational foundations, but a need for a reset?

Implementation in Redcar & Cleveland has established important relational foundations but Thrive at Five's position within the local system remains less fully embedded than in Stoke-on-Trent.

Key conclusions recommendations for Redcar & Cleveland are:

- **Relational working is a core enabler.** Thrive at Five's emotionally intelligent, facilitative approach is recognised and valued. This relational style is clearly an asset and should continue to be used intentionally as a tool for change.
- **Legitimacy and visibility are still forming.** Thrive at Five is described as present but not yet fully tangible within the system — more of a facilitating presence than an operational one. This aligns with its intention to enable rather than deliver, but this also creates a tension as credibility in place-based work is often (as in Stoke-on-Trent) built through visible action. The presence of more formulated strategies and plans, and a more developed service system, makes it harder to identify where in the system Thrive at Five should intervene. Careful thought is needed to determine whether to build credibility through direct delivery (which risks duplication or working in parallel) or through a focus on strategic influencing, systems-thinking and challenge. more service?
- **Mixed acceptability signals the need to reset and rebuild shared understanding.** Some defensiveness among stakeholders indicates that Thrive at Five's role and contribution are not uniformly understood, welcomed or owned across the system. It may be necessary to bring stakeholders together to reframe and secure support for Thrive at Five's ambitions, continue with collective sense-making and identify points for systems entry.
- **A clear internal system champion has not yet emerged.** Unlike in Stoke-on-Trent, there is not yet a recognised senior advocate from within the system who can articulate and reinforce Thrive at Five's role. Identifying and inducting such a champion (ideally more than one person to protect against staff change) appears critical for deeper embedding.

- **Governance and collective sense-making need strengthening.** Both formal structures (roles, plans, decision-making arrangements) and informal elements (shared understanding, narrative alignment) will need to evolve to move from parallel activity to genuine collective ownership.
- **Thrive at Five's convening credibility is a key asset.** Its position as a national charity with early years expertise and government/funder connections gives it significant influence as a system broker. This potential is acknowledged and should be fully activated into shared system action.

8.4.2. Cross-site synthesis

Towards a more ambitious collective impact approach

Across both areas, the findings suggest that there is scope to raise the level of ambition, strengthen alignment, and move toward a deeper, more consistent commitment to transformative change. While progress has been made, particularly in building shared understanding and collaboration, alignment remains more tentative, especially in Redcar & Cleveland. Moving from alignment to transformation will require partners to increasingly take collective responsibility for the ambitions of Thrive at Five, share risk, and make decisions that redistribute power and resources within the system.

Thrive at Five may find it useful to draw on ideas from the Tamarack Institute's thinking about 'Collective Impact 3.0',⁹⁵ which encourages collective initiatives to evolve over time. The revised framework reframes the original five conditions, as outlined below, in ways that may offer prompts for reflection, while recognising that progression across these dimensions is developmental.

For example:

- Moving from **common agenda** to a **shared aspiration**: a shared vision for improving GLD based on a collective understanding of the drivers and root causes of low GLD.
- Expanding **shared measurement** into **strategic learning**: continuing to strengthen the consistency, quality and usability of data, but embedding shared measures within a larger system of learning and evaluation with regular review and collective sense-making.
- Shifting from **mutually reinforcing activities** to **high-leverage actions**: using emerging evidence to prioritise activities most likely to influence GLD and related intermediate outcomes.
- Evolving from **continuous communication** to **meaningful engagement** with parents and early years system stakeholders at multiple levels: authentic and inclusive community engagement with those most affected by complex issues, drawing on multiple perspectives on what holds back GLD and how the early years system can be improved, and creating a broad constituency for change. There may be value in reviewing current governance and decision-making models (see further below) and clarifying and articulating the intended scope of parent

⁹⁵ Cabaj M. & Weaver L. (2016). *Collective Impact 3.0 An evolving framework for community change*.

outreach and engagement, and how this supports improved child development outcomes.⁹⁶

- Re-imagining **backbone support** as **‘containers for change’**: supporting local backbone teams to lead collaborative working, mobilise diverse cross-sector partnerships, surface and challenge assumptions, and strengthen trust and collaboration in ways that strengthen the early years system and directly contribute to improved outcomes for children.

Many of these ideas are already visible in Thrive at Five’s work. Used pragmatically, the framework may provide a structured way to guide future reflection and planning – while maintaining a clear focus on improving children’s development.

Clarifying the strategic priorities and enabling workstreams

There may also be scope to strengthen the clarity and visibility of the two strategic pillars described in the ToC - 1) unlocking the power of parents and carers to provide nurturing and stimulating environments for their children, and 2) strengthening the community of collaboration around children and families - as well as the three enabling workstreams (parent outreach and engagement, strengthening the system, and improving practice).

While the direct workstreams have detailed strategies that partners value, the enabling workstreams are less clearly articulated. Developing similarly concrete strategies – for example, describing what ‘good’ looks like, the intended outcomes, and the strategies and actions needed to get there – would make the enabling workstreams more explicit and visible. It might also be useful to reflect on whether they are sufficiently expressed to drive the intended systems change. For example, making explicit how the enabling workstreams are expected to move from, e.g., improved collaboration to wider structural and behavioural shifts – i.e., sustained shifts in governance, decision-making, resource allocation, service coordination and data use that ultimately improve child outcomes and increase the proportion of children reaching GLD? In this report, we have often used phrases like ‘Thrive at Five’s ambitions’ or ‘Thrive at Five’s ways of working’ to refer to wider goals – but it leaves us wondering whether these ambitions for the system are sufficiently clearly articulated and would be played back in the same way by your stakeholders.

Place-based initiatives often hold both ‘narrow-bound’ and ‘wide-bound’ missions and conflict between them can arise.⁹⁷ For Thrive at Five, the aim to raise the proportion of children reaching a GLD could overshadow the ‘how’ of the strategic priorities and enabling workstreams, particularly with the new DfE targets, which could incentivise targeted short-term action rather than deeper cultural change. Having agreed strategies for them would enable Thrive at Five to give equal weight to these and ensure they are not lost.

For example, does ‘unlocking the power of parents’ mean strengthening home learning environments or is it a deeper change in mental models? Does ‘parent outreach and engagement’ mean reaching more parents and connecting them with existing services? Or designing services and delivery based on parents’ needs and preferences? Or involving parents in decision-making? Or changing mindsets so that parents are viewed as equal partners? Does ‘strengthening the system’ mean more use of data and measurement (referenced in the Playbook) or is it about bringing a systems lens to issues, systems

⁹⁶ In this context, ‘community’ is used in the broad sense common in US literature, referring to both local population and professionals working within the system.

⁹⁷ Dark Matter Labs: Many to Many Systems Field Guide (not dated)

building work,⁹⁸ addressing entrenched modes of thinking and building relational capacity? Does 'improving practice' mean workforce upskilling in child development and specific initiatives, or does it go deeper than this?

There is a need to:

- Define what "good" looks like for enabling functions
- Develop a vision for wider system outcomes (e.g., parent empowerment, community capacity)
- Ensure there is not over-concentration on measurable end outcomes at the expense of underlying mechanisms of more profound change
- Ensure the Thrive at Five approach, ambitions and intended systems impacts are clearly and consistently understood across the system, with shared plans in place.

Governance evolution

Governance arrangements may need to evolve to reflect the programme's maturity and ambitions. In the Year 1 report we recommended that thought is given to how governance systems surrounding Thrive at Five might be strengthened and used to hold all local systems partners to account in taking on Thrive at Five's ambitions and ways of working. Our analysis at Year 2 of the evaluation suggests that this still needs attention to create a system that is not about joint decisions about Thrive at Five's work and how Thrive at Five is accountable to the local system but is about the system itself taking wider responsibility for Thrive at Five's ambitions. Governance is seen by some as the key element that enables or obstructs collective action initiatives.⁹⁹

From our fieldwork, review of the literature and discussions with others, it seems unlikely that there is an obvious blueprint for this. Evaluations of other place-based approaches describe different approaches for connecting backbone teams with wider governance,^{100, 101, 102} but it seems likely that 'form follows function' and that an important starting point is to be clear about the purposes of governance, which might include.^{103, 104, 105}

- Framing the collective purpose and developing collaborative strategies
- Aligning policies, strategies and resourcing decisions
- Identifying systems-based barriers and opportunities for change
- Catalysing collective sense-making and collaborative action
- Generating learning and insight across the system
- Changing the assumptions, values, mental models that underpin the system as is and hold it in place
- Re-distributing power, resources and action

These systems opportunities may not emerge in the early months or years of a place-based initiative, and boards may early on play a role of overseeing the performance of a

⁹⁸ Cuthbert, C. & Law, C. (2024). Better Start: Building Systems for Early Childhood Development.

⁹⁹ Griffith Centre for Systems Innovation (2024) Governance In and For Complexity

¹⁰⁰ Cuthbert & Law (op.cit)

¹⁰¹ Small Steps Big Changes 2015-2025 Final Report

¹⁰² Sisya K, Shahrokh T, Dutton A and White C (2025) The design, implementation and evaluation of Together for Childhood. NSPCC Learning.

¹⁰³ Griffith Centre (op. cit)

¹⁰⁴ Dark Matter Labs: Many to Many Systems Field Guide (not dated)

¹⁰⁵ Jo Blundell of Place Matters, personal correspondence

backbone team rather than catalysing change¹⁰⁶. Place-based initiatives have sometimes found it hard to shift from conventional management and accountability models.¹⁰⁷ A key message is that governance involves both hard and soft elements, both structural aspects and how systems leaders interact.^{108,109} In this sense, “*governance doesn’t happen in isolation or solely through structures and rules, but through the quality of dynamics and the depth of relationships between actors*”.¹¹⁰

It might be helpful to consider addressing this through:

- Review of progress and of existing governance with trusted local stakeholders
- Selecting members of governance groups based on systems leadership attributes rather than the organisations or boards they represent
- Inclusion of parents and community members as active participants in governance
- Greater attention to collective sense-making and learning rather than reporting and oversight
- Individual leaders taking on a role as champion for specific aspects of the vision (e.g. learning and sense-making, challenging mental models, parent empowerment, systems interactions and dynamics)
- Supporting leaders to reflect the Thrive at Five ambitions (both the ‘how’ and the ‘what’) in their own organisational strategies

Shifting power and mental models around parents

As we noted above, there is a need to clarify the ambitions relating to parents. Stakeholders and backbone staff generally refer to a focus on parent *engagement* (connecting parents with services) but this is different from parent *empowerment* (supporting parents as agents of change) which is a phrase also used by some stakeholders and backbone team staff. If a more transformative approach is envisaged, this requires:

- Disrupting deficit-based narratives
- Positioning parents as partners and contributors
- Ensuring parent influence within governance and delivery structures
- And ensuring that this aim is consistently understood and shared by stakeholders

Sustainability and the backbone function

It will be important to continue to be attentive to working in ways that become embedding, owned and sustained by the system, and to continue to be explicit about this with stakeholders at all levels. Thrive at Five needs to resist being drawn into operational delivery unless this is a deliberate tactic to build traction or explicitly part of testing and modelling. Attention needs to be paid to how interventions, and their high-quality implementation, can be sustained. There is a growing consensus that there is a continued need for a strong coordinating or “backbone” function. Key questions to consider moving forward include:

¹⁰⁶ Jo Blundell of Place Matters, personal correspondence

¹⁰⁷ Lata, L.N., Reddel, T., Head B.W., and Craven, L. (2024). Advancing collaborative social outcomes through place-based solutions – aligning policy and funding systems. *Policy and Society*, 00(00)1-15.

¹⁰⁸ Griffiths Centre, op. cit.

¹⁰⁹ Dark Matter Lab (op. cit)

¹¹⁰ Dark Matter Labs (2025): *Governing Together*

- How to build sustainment into the implementation of individual interventions
- Whether the backbone team role should remain with an external organisation or transition into system ownership?
- How can relational, convening and learning functions be sustained beyond programme funding and embedded as routine system practices?

8.5. Summary of recommendations

Taken together, our findings indicate that Thrive at Five is entering a new stage of development. However, the nature and pace of this next phase is likely to differ across sites.

In Stoke-on-Trent, where alignment and system ownership appear more established, there may be scope to move into a more ambitious phase characterised by:

- Distributed system ownership
- Clearer articulation of enabling outcomes and strategies
- More explicit modelling of ways of working
- Greater clarity about the intended scope of parent and community engagement
- A shift from consensus-building to resourced collective action

In Redcar & Cleveland, where alignment remains more tentative and implementation foundations are still consolidating, the priorities may be to:

- Strengthen shared understanding of Thrive at Five's role and contribution
- Demonstrate the value of shared approaches
- Build confidence and legitimacy and stronger internal champions
- Continue deepening relationships and clarity of purpose

Across both areas, the central implementation challenge for the next phase of delivery is less about introducing new components and more about building upon and consolidating foundations. This includes deepening legitimacy, agreeing and strengthening governance, and progressively translating relational goodwill into changes in practice and decision-making that ultimately improve children's development and increase GLD.

8.6. Next stages of the evaluation

The next phase of the evaluation will build on the learning generated to date and focus on deepening understanding of implementation processes, strengthening measurement of intermediate outcomes across all delivery sites, and progressing the impact evaluation design. As in previous phases, activities will be tailored to reflect differences in implementation stage across sites.

Continued qualitative data collection

We will continue with the annual programme of qualitative data collection across both Stoke-on-Trent and Redcar & Cleveland to capture developments as implementation matures. Data collection will continue to include a broad range of stakeholders — including backbone teams, workstream delivery staff, system leaders, practitioners and

parents - enabling the evaluation to track change over time and explore how programme mechanisms operate in different local contexts. Future rounds will continue to prioritise inclusion of perspectives that may have been under-represented to date and will explore how Thrive at Five priorities are being embedded within organisational strategies, decision-making and day-to-day practice.

In line with earlier learning, particular attention will be paid to understanding:

- How system leadership commitment is cascaded through organisations
- How governance and accountability structures are evolving and functioning
- How shared ownership of delivery is developing
- How practitioners experience their role in designing and delivering workstreams
- How local partners interpret and operationalise the “common agenda”

These areas are central to understanding how changes to the early years system are occurring because of Thrive at Five’s efforts and how they can be sustained.

Strengthening quantitative evidence

Quantitative data collection will continue to expand and mature over the coming year. This includes:

- The workforce survey:
 - Reviewing the cadence and distribution approach of the survey – i.e., to boost respondent numbers, we may revert to a bi-annual collection – as well as refining questions to focus on differences in perceptions of universal and targeted services
- Intermediate outcomes:
 - Continuation of enhanced health visiting data collection in Stoke-on-Trent with a focus on increasing representation and variation across the sample and a trial of additional measures of parental confidence
 - Further development of intermediate outcome collection / data access in Redcar & Cleveland
 - Working with the Thrive at Five national team to identify how to assess the quality of early education and care settings

As datasets grow, there will be increasing opportunities to examine patterns over time, explore associations between domains, and triangulate findings across multiple data sources.

Progressing the impact evaluation

Once access to the NPD data is available, we will test the Differences-in-Differences analytical approach within Stoke-on-Trent data, and if required, against alternative comparison areas, for academic years up until 2024/25 (the latest year for which full data is available).

As implementation evolves, it will remain important to monitor programme spread and any new initiatives introduced in comparator areas, as these factors can affect the ability to detect change. The evaluation will therefore continue to document local contextual

developments and consider alternative or complementary analytical strategies where needed.

Evaluation of additional sites

Alongside ongoing work in Stoke-on-Trent and Redcar & Cleveland, evaluation planning will continue for additional locations. This includes:

- Progressing design work for the Scotland sites and supporting the commissioning of a Scottish evaluation team
- Establishing the evaluation approach for Middlesbrough: beginning with interviews with senior leaders, a workforce survey and exploration of approaches for measuring intermediate outcomes

Learning from existing sites will inform these developments, helping ensure that evaluation methods are proportionate, context-sensitive and aligned with implementation stage. Working across more sites will provide opportunities to learn how the design and implementation need to vary according to different starting points and contexts, the necessary pre-conditions for adoption, and how to build conditions for success.

Looking ahead

As Thrive at Five continues to evolve, the evaluation is moving from documenting early implementation towards assessing consolidation, system embedment and sustainability. A key focus going forward will be understanding how and under what conditions the programme can be sustained beyond the period of central funding and support, and what this implies for local systems seeking to institutionalise the approach - supporting both programme refinement and wider learning for place-based early years initiatives.

Appendix A – Theory of change

An initial theory of change was developed by Thrive at Five with Dartington Service Design Lab, and further developed and iterated with support from the CEI evaluation team. It is in the process of being iterated further. The current version is reproduced below and encompasses the following elements:

Mission

The theory of change sets out an explicit mission at the forefront of the approach. This is simply articulated as helping children in their early years develop strong foundations for life and learning.

Target population

The target population is defined as pregnant women and all children aged 0-5 years in their target localities, with a particular emphasis on children at risk of not reaching a GLD at the end of their first year of school. As well as the families, Thrive at Five also targets all those who help shape babies and children's early development and learning, which includes practitioners, broader early years professionals, early years volunteers, and system leaders.

Strategies

The Thrive at Five approach is comprised of two interwoven strategic drivers:

- **Unlocking the power of parents and carers** to give their children the nurturing care and supportive environments they need, and
- **Strengthening the community of collaboration around children and families** across (and within) the public, private, and voluntary sectors.

These two strategic drivers are interwoven because they interact with, and influence, each other. For instance, as parents become engaged and knowledgeable they will be more likely to access and benefit from services and support. Equally, strengthened collaborative action encourages better services and support that, in turn, helps unlock parenting capability.

The team in each locality coordinates and supports a broad range of partners through a 3-stage development process:

- **Phase 1 - Discover:** this phase includes mapping the gaps in support for babies, children and families, and identifying the assets in the local community.
- **Phase 2 - Co-Design and Implement:** using the data from discovery plus research evidence to co-design strategies. Supporting implementation with additional capacity, including expertise and funding.
- **Phase 3 - Improve and Embed:** partnering with an internal and external evaluation team to test, learn and refine. Discovering sustainable ways to embed things that work.

Thrive at Five's approach encapsulates two types of action – direct impact workstreams and enabling workstreams.

Direct impact workstreams typically involve the introduction and careful local implementation of established evidence-based approaches or tools. These workstreams directly target the intermediate outcome areas (see below), and progress can be tracked using pre-and-post assessments of participants. The direct impact workstreams currently being delivered in Stoke-on-Trent include Talking Time, PEEP Learning Together, and the Nuffield Early Language Intervention (NELI). In addition, plans are well-advanced for introducing Newborn Behavioural Observations and Video Interaction Guidance.

Enabling workstreams aim to create the underlying conditions for sustainable positive changes in EYFSP outcomes. The enabling workstreams centre around three key strands - **parent outreach and engagement** (including parent outreach initiatives, innovative communications and community events); **strengthening the system** and **improving practice** (which includes workforce upskilling).

Inputs

To put the above approach into practice in local places, Thrive at Five provide support in the following ways:

- **A minimum 5-year commitment to working in local partnership** towards a common agenda. The approach starts with an agreement with a Local Authority and other public sector partners to a minimum five year partnership with Thrive at Five. This is intended to cement a co-funding arrangement and agreement to the Thrive at Five approach to achieve sustainable improvements in the percentage of children reaching a GLD by the end of their first year at school, within a selected geographical locality.
- **A local backbone team:** Thrive at Five provide capacity for collaborative action through a small, local 'backbone' team, which is made up of talented and passionate local people. Local teams work in partnership with the public, private and voluntary sectors. They provide expertise around evidence use and implementation and enable effective collaboration by playing a neutral, coordinating role, creating connections, and enabling continuous communication across all parts of the systems and within communities. The make-up of each backbone team varies, but they involve roles such as Programme Director, Health lead, Early Years Education lead, Early Years Health Lead, Parent Outreach and Engagement lead, Programme Officer, Community Coordinator, Communications Officer, and Parent Connectors.
- **A national team:** local backbone teams are supported by the Thrive at Five national team which 'holds' the national approach, leads strategic liaison with potential and new sites, and brings expertise in the delivery of early childhood programmes, research, and evaluation. The Thrive at Five national team assists local programme development and implementation, oversees the testing of replicability and scalability, leads on the development of the overall Thrive at Five early years approach, and leads on local evaluation of new programmes introduced by Thrive at Five. The national team is supported by Thrive at Five's Board and Expert Advisory Council.
- **Additional resources** of £200k per year are required to be provided by a partnership of local agencies. Thrive at Five allocates around £150,000 to £200,000 per year to help catalyse service innovations (over and above the cost of the backbone team).

Implementation outcomes

Implementation outcomes are separately defined in the theory of change, as important stages in the pathway to the ultimate impact and to inform evaluation of the quality of implementation. The relevant implementation outcomes are:

- **Adoption:** the extent to which services and organisations engage with the Thrive at Five local programmes.

- **Reach:** the extent to which the right children and families are engaged and supported by the programme at the scale necessary to achieve the intended outcomes.
- **Acceptability:** whether the approach is liked and/or seen as suitable by parents, practitioners, the broader early years paid and volunteer workforce, system leaders, and the 'backbone team'.
- **Feasibility/Fidelity:** whether the approach as outlined - the nascent approach - is doable and can be delivered broadly as intended.
- **Institutionalisation:** whether the approach gets institutionalised within systems and processes and can be sustained over the long term.

Short term outcomes

Short term outcomes are defined according to key groups of beneficiaries – children, parents/carers, and practices and systems.

- **Children** get the positive experiences, nurturing care, evidence-based support and high-quality education they need.
- **Parents and carers** have improved access to high-quality services, wider peer support networks and general parenting advice. As a result, parents have improved parenting knowledge, skills, and confidence, and they are better able to meet children's needs.
- **Practitioners, broader early years professionals, and early years volunteers** are better connected with each other and with parents, have a stronger knowledge of the full scope of available resources to support children and families across their locality. They have a shared goal/shared goals around early years outcomes. They also have strengthened data and processes to identify need; improved access to evidence-based approaches; enhanced knowledge, skills, confidence, and capacity to soundly implement these approaches; strengthened data systems to assess the effectiveness of these approaches; and improved support to help them reflect on and strengthen their practice.

Systems leaders¹¹¹ have a strengthened shared vision and better connections with parents. They have an increased understanding of the full scope of available resources to support children and families across their locality; improved access to and knowledge of evidence-based approaches; improved data systems to identify need and assess what works; enhanced processes to enable collaborative action.

Intermediate outcomes

Thrive at Five aims to bring about positive change through simultaneous action across five key intermediate outcomes areas. These intermediate outcomes were carefully selected based on the best available evidence around what shapes children's early outcomes. They are expressed as applying at a population level in target areas (i.e. across the local population of children aged 0-5 in the Thrive at Five wards):

- 1) Improvement in the strength of parent-infant relationships
- 2) Improvement in parental wellbeing
- 3) Improvement in the quality of home learning environments

¹¹¹ Systems leaders are those who have strategic responsibility and oversight across their organisation/sector.

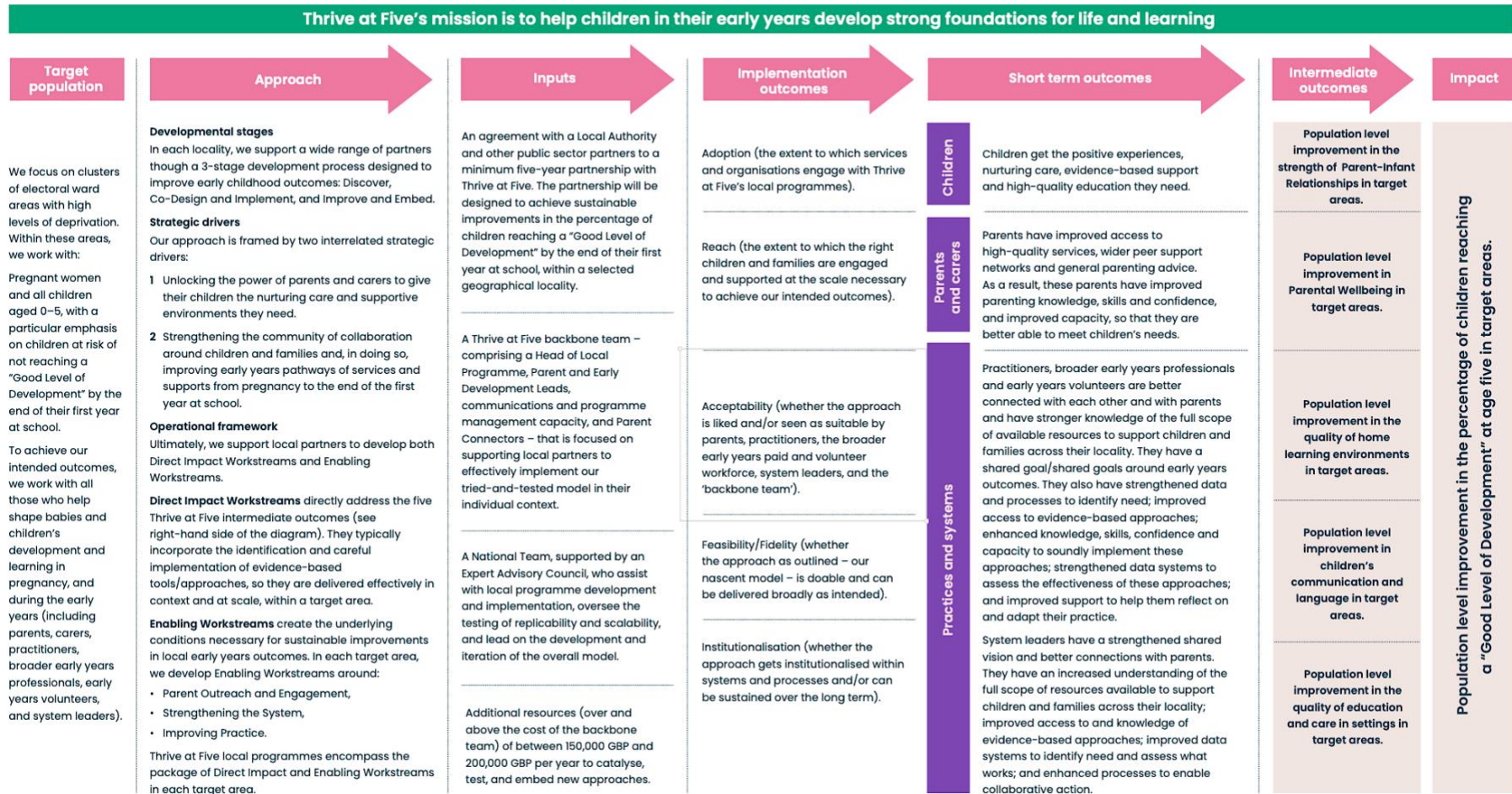
- 4) Improvement in children's communication and language
- 5) Improvement in the quality of education and care in settings

Impact

The ultimate outcome of Thrive at Five is to achieve an improvement in the percentage of children reaching a 'Good Level of Development' by the end of the first year at school in Thrive at Five wards. As described below, this will be adjusted to accommodate the Scotland site where the GLD measure is not used.

Figure A2. Thrive at Five National theory of change (updated February 2026)

Thrive at Five Theory of Change



Appendix B – Early Years Workforce Survey

(Stoke-on-Trent and Redcar & Cleveland)

Stoke-on-Trent

A repeat of the Year 1 local early years workforce in Stoke-on Trent was conducted between July and October 2025. It targeted the same population of local stakeholders, including leaders, managers and frontline practitioners. It also explored the same measures, broadly looking at perceptions of the early years system, perceived current performance on Thrive at Five’s intermediate outcomes, and awareness of Thrive at Five.

This year’s 2025 workforce survey was launched in July 2025, and the main distribution channel was an anonymous URL shared among key leaders and service leads by the Thrive at Five national team. The survey received 77 responses, of which 59 met the eligibility criteria and were included in the analysis, from both managerial and frontline early years staff, working within Thrive at Five and non-Thrive at Five wards. Table A1 below provides a breakdown of survey respondents for the Year 1 and 2 workforce surveys.

Table A5. Early years workforce survey respondents (Stoke-on-Trent, 2024 and 2025)

Nature of respondent role (n=59)	n (%)	n (%)
	2024	2025
Frontline staff	60 (54%)	36 (61%)
Other management/supervisory role	16 (14%)	12 (20%)
Senior leadership	25 (22%)	9 (15%)
Administrative staff & other	11 (10%)	2 (4%)
Total	112 (100%)	59 (100%)

The survey data were analysed using descriptive analyses, looking at total numbers and percentages for each response item. Where appropriate, bivariate analysis was used to compare respondents based on the geographic location of their work – which included those working in the Thrive at Five wards of Abbey Hulton and/or Bentilee (either exclusively or across Stoke-on-Trent), and those working only in non-Thrive at Five wards. These two groupings are referred to as ‘Within Thrive Scope’ and ‘Not Within Thrive Scope’ respectively. Where sample sizes allowed, chi-square tests and t-tests were used to check for evidence of statistical significance in responses between these two groups.

Responses for the 2024 and 2025 workforce surveys for the ‘Within Thrive Scope’ geographical area have also been compared and reported upon where appropriate, to assess any trends and change over time. It is important to note, however, that the response rate for the 2025 workforce survey was significantly lower than the 2024 workforce survey. This lower response rate may reflect a combination of factors commonly affecting workforce surveys, including high workload pressures among early years staff, the length of the survey, and the wider context of multiple concurrent data collection requests across services. It may also indicate varying levels of perceived relevance or visibility of how survey findings are used to inform practice and system development. The 2025 sample was a little more skewed to frontline staff, and we do not know the extent to which the same individuals answered both the 2024 and 2025 surveys. As such, these

comparisons need to be approached cautiously. However, they are included to show exploratory analyses and an indication of trends between 2024 and 2025 responses.

Redcar & Cleveland

We conducted the same early years workforce survey as in Stoke-on-Trent, between November 2024 and May 2025. The survey was originally launched in November 2024, however, due to low response rates during the holiday period, it was re-launched in January 2025. It was distributed via anonymous link in email with senior leaders and VCS professionals and promoted using a QR code in Family Hubs and at the Thrive at Five conference in January 2025 to extend reach.

The survey received 151 responses (of which 111 were included in analysis), again from both managerial and frontline early years staff, working within Thrive at Five and non-Thrive at Five wards. Table A2 provides a breakdown of survey respondents.

Table A2. Early years workforce survey respondents (Redcar & Cleveland, 2025)

Nature of respondent role (n=111)	n (%)
Frontline staff	56 (51%)
Other management/supervisory role	23 (21%)
Senior leadership	17 (15%)
Administrative staff & other	15 (13%)
Total	111 (100%)

We used the same analysis approach as for the Stoke-on Trent, comparing responses from respondents Within Thrive Scope with those Not Within Thrive Scope, and comparing responses to those from the 2024 Stoke-on-Trent to identify any similarities and differences between the two sites during their initial years of delivery.

Appendix C – Qualitative interviews

(Stoke-on-Trent and Redcar & Cleveland)

Stoke-on-Trent

As in Year 1, we conducted qualitative interviews across five participant groups, with a total of 34 interviews/focus groups (n=36 individuals) conducted in 2025, as shown in Table A3.

Table A6. Interviews conducted: Stoke-on-Trent 2025

Participant Group	Timeframe	Roles	Total
System Leaders	Round 1: May to August 2025	AD Children’s Services, MD Children & Families MPFT, Director of Public Health, Home Visiting Service Managers, VCS lead, CAMHS Psychologist	8 individual interviews
	Round 2: November 2025	Director of Family Matters	
Backbone team	Round 1: June to August 2025 Round 2: October 2025	At rounds 1 and 2: Partnerships & Programme Lead; 3-5 Lead; Communications Officer At round 1 only: 0-2 Lead; Parent Connectors (x2); Community Coordinator At round 2 only: parent connectors (x2); Parent & Community Outreach Lead	11 individual interviews
Workstream leaders/delivery staff	Round 1: June 2025	Leads for NELI	1 paired interview
	Round 2: October 2025	Leads for Talking Time, and Ready Steady Stoke	1 paired interview, 2 individual interviews
Parents	Round 1: June 2025 Round 2: October 2025	Local parents of children aged 0-5	8 individual interviews

Practitioners	October 2025	Staff from Family Hub, University volunteer student	3 individual interviews
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The data were analysed thematically, using the Framework method¹¹² with themes derived both deductively (based on research questions and the national theory of change) and inductively (including any unexpected issues). The theory of change was used as a roadmap for analysis, aligning insights implementation outcomes (and where possible, with short-term and intermediate outcomes too).

Redcar & Cleveland

We conducted qualitative interviews with system leaders, the backbone team, delivery partners and practitioners, a total of 20 interviews/focus groups (n=22 individuals) conducted in 2025. Because the work is less advanced we interviewed delivery staff and practitioners working in the early years system rather than workstream leaders, and we did not interview parents. Data were analysed as per Stoke-on-Trent.

Table A4. Interviews conducted: Redcar & Cleveland 2025

Participant Group	Timeframe	Roles	Total
System Leaders	Round 1: January & February 2025	CEO Woodsmith Foundation, Head of Health Visiting Service, Education Service Manager, Early Help Service Manager, AD for Education and Skills, Public Health Practitioner, Counsellor - Lead Member for Children and Families, Director of Public Health, Director of Children's Services	9 individual interviews
Backbone team	September - October 2025	Partnerships & Programme Lead; Parent & Outreach Lead; 3-5 Lead; Parent Connectors (x2); Programme Support Manager	3 individual interviews, 1 focus group (n=3)
Delivery Partners	October 2025	Early Years Lead Professional, VCS Manager, Family Hub Manager	3 individual interviews
Practitioners	October & November 2025	Staff from early help team; Staff from local VCS organisations	4 individual interviews

¹¹² Spencer, L., Ritchie, J., Ormston, R., O'Connor, W., & Barnard, M. (2014). Analysis: Principles and processes. In J. Ritchie, J. Lewis, C. M. Nicholls, & R. Ormston (Eds.), *Qualitative research practice: A guide for social science students and researchers* (2nd ed., pp. 269-290). Sage.

Appendix D – Intermediate outcomes data

(Stoke-on-Trent)

For Stoke-on-Trent, we draw on the additional data collected during health visitor (HV) review checks to monitor intermediate outcomes. In this report, these data are presented as baseline findings only, as data collection is still stabilising and has not been in place long enough to assess changes over time.

Data were collected in the two Thrive at Five wards at 1-year and 2-year review checks between January and December 2025. From January to March 2025, the data were collected during home visits, and from April 2025 onwards, this process shifted to in-clinic collection. The parents or carers that consented to the additional data collection were asked questions corresponding to the validated instruments described below.

Short Warwick-Edinburgh Mental Wellbeing Scale (SWEMWBS)

THE SWEMWBS¹¹³ is a shortened, 7 item version of the 14 item Warwick-Edinburgh Mental Wellbeing Scale, designed to evaluate the mental wellbeing of participants over the past two weeks. The items focus on the positive aspects of mental health, such as social connectedness. The statements asked of respondents are:

- I've been feeling optimistic about the future.
- I've been feeling useful.
- I've been feeling relaxed.
- I've been dealing with problems well.
- I've been thinking clearly.
- I've been feeling close to other people.
- I've been able to make up my own mind about things.

The measure is scored by summing the scores for each of the seven items, which are individually scored from 1 ('None of the time') to 5 ('All of the time'). These raw scores are totaled across the seven items to provide an overall score between 7 and 35, where higher scores indicate a higher positive mental wellbeing.

For analysis, overall scores have then been placed into one of three categories – scores of 20 and below have been defined as 'Below average wellbeing', scores of 21 to 27 have been defined as 'Average wellbeing', and scores of 28 and above have been defined as 'Above average wellbeing'. A below average score suggests that the individual may be facing emotional difficulties and therefore may need further assessment or intervention. For reference in UK general population samples, an average score is 23.5.¹¹⁴

¹¹³ Short Warwick-Edinburgh Mental Wellbeing Scale (SWEMWBS). Copyright NHS Health Scotland, University of Warwick and University of Edinburgh, 2008, all rights reserved.

¹¹⁴ Ng Fat, L., Scholes, S., Boniface, S., Mindell J., & Stewart-Brown S. (2017) Evaluating and establishing the national norms for mental well-being using the short Warwick-Edinburgh Mental Well-being Scale (SWEMWBS): findings from the Health Survey for England. *Quality of Life Research*, 26(5), 1129-1144.

The Mother's Object Relation Scale Short Form (MORS-SF)

The Mother's Object Relation Scale Short Form (MORS-SF)¹¹⁵ is a tool designed to assess a mother's perception of her infant's behaviour and feelings towards her. It aims to therefore provide an understanding of a mother's internal working model and, highlight the strength of a mother-infant relationship.

The short form scale consists of 14 items. Items on the scale are scored in two separate categories – 'warmth' and 'invasion' as categorised in Table A5 below. Each item is scored on a scale of 0 ('Never') to 5 ('Always'). These raw scores are totalled separately across warmth and invasion items, to provide an overall warmth score and an overall invasion score per respondent. Table A6 outlines how these two scores are then defined when combined into an overall MORS-SF indicator; a low warmth score combined with a high invasion score can indicate that the development of the parent-infant relationship is particularly at risk.

Table A5. MORS-SF categories

Items	Category
My child smiles at me	Warmth
My child annoys me	Invasion
My child likes doing things with me	Warmth
My child talks to me	Warmth
My child irritates me	Invasion
My child likes me	Warmth
My child wants too much attention	Invasion
My child laughs	Warmth
My child gets moody	Invasion
My child dominates me	Invasion
My child likes to please me	Warmth
My child cries for no obvious reason	Invasion
My child is affectionate towards me	Warmth
My child winds me up	Invasion

Table A6. MORS-SF category scoring

Category	Category score	MORS-SF Indicator
Warmth	20 or more	Strong parent child relationship
Invasion	Less than 12	
Warmth	20 or more	Potential concern
Invasion	12 or more	
Warmth	Less than 20	At risk
Invasion	12 or more	

¹¹⁵ Oates, J., Gervai, J., Danis, I., Lakatos, K. & Davies, J. (2018). Validation of the Mothers' Object Relations Scales Short-form (MORS-SF). *Journal of Prenatal and Perinatal Psychology and Health*, 33(1), 38–50

Toddler Home Learning Environment Scale (THLES)

The Toddler Home Learning Environment Scale (THLES)¹¹⁶ is a tool designed to assess the quality and richness of the learning environment in which toddlers are raised. It focuses on various factors which help to contribute to early child development such as the availability of learning resources, parental engagement, and emotional and cognitive stimulation in the home. The tool can therefore be used to help identify any areas within the home environment that would benefit from enhancement, and guide parents to create a more supportive learning environment.

The scale consists of 8 items that are scored on a scale of 1 to 7, dependent on the item. Table A7 outlines this in more detail for clarity. Scores for individual items are summed to give a total score which ranges from 7 to 56. A higher score indicates a more supportive home learning environment, whereas lower scores suggest that there is room for improvement. Previous research has found that an average score is around 43.¹¹⁷

Table A7. THLES item scoring

Item	Scoring
How often does someone at home take the child out of the house, for example visiting family or friends, or going out to the park?	Very rarely (1) to Every day or more than once a week (7)
How often does someone at home draw the child's attention to the names of things during their day-to-day activities?	Never/not yet (0) to More than once a day (7)
How often does someone use blocks or shape sorting toys at home with the child?	
How often does someone at home talk about, or try to teach the child about the names of colours or shapes?	
How often does someone at home sing songs or nursery rhymes to or with the child?	
How often does the child get a chance to play in a messy way, for example using playdough, paints, or sand?	
How often does someone at home read to the child?	
How many books written for babies or toddlers does the child have?	No books (0) to 21 or more books (7)

Early Language Identification Measure Shortened (ELIM-S)

The Early Language Identification Measure Shortened (ELIM-S)¹¹⁸ is a screening tool designed to assess language development in children, with a particular focus on identifying early signs of language delay or atypical language development. The tool measures early language milestones including receptive language, expressive language, and social communication.

¹¹⁶ Sammons, P., Hall, J., Smees, R., Goff, J., Sylva, K., Smith, T., et al. (2015a). *Evaluation of Children's Centres in England (ECCE). Strand 4: The Impact of Children's Centres: Studying the Effects of Children's Centres in Promoting Better Outcomes for Young Children and Their Families*. Research Report DFE-RR495. London, UK: Department for Education

¹¹⁷ Hall, J., Sylva, K., Sammons, P., Smees, R., Evangelou, M., Smith, T., and Goff, J. (2021). Investigating the reliability and validity of the Toddler Home Learning Environment (THLE) scale. *Frontiers in Education*, 6. <https://doi.org/10.3389/educ.2021.581005>

¹¹⁸ Public Health England (2020). *Early language identification measure and intervention guidance book*.

The measure consists of five observational measures that are scored as a 1 if the measure is observed by the health visitor, and 0 otherwise. The maximum score that can be given is therefore 5. These measures are:

- Observed communicative intent.
- Speech mostly intelligible to parent.
- Child observed putting words together.
- Parent and child take turns communicating.
- Child understands what is being said to them when their parent asks them something.

A word list is also given to parents that consists of 50 words. It is expected that there are some words almost all children would be able to say (e.g. mama) and some only a few children will be able to say (e.g. gentle). A record is kept as to how many of these words the parent reports that the child both understands and uses. Table A8 clarifies how these scores are then combined, and how during analysis they have been placed into three categories. 'Green' indicates the child is developing as expected, 'Amber' indicates the child exhibits some concerns, and 'Red' indicates there is a significant concern for the child's development.

Table A8. ELIM-S Scoring

Scale	Score	Category
Observation	5	Green Child developing as expected
Word list	18 and over	
Observation	1 to 4	Amber Child exhibits some concerns
Word list	17 or below	
Observation	0	Red Child exhibits significant concerns
Word list	17 or below	

Appendix E – Local evaluations

(Stoke-on-Trent)

We draw on local evaluations undertaken in Stoke-on-Trent by the Thrive at Five national team in 2025:

- **Evaluation of NELI:** addressed impacts and implementation. This was the third year of local evaluation. The national team data collected from the seven local primary schools in the Thrive at Five wards, involving (1) child-level demographic data, (2) information about children’s participation in NELI and school delivery of NELI, and (3) Language Screen scores which were gathered before and after implementation of NELI for all children regardless of whether they participated in the intervention. Qualitative interviews were also carried out with Thrive at Five’s Early Years Development Lead and the Peripatetic Learning Support Leaders who helped deliver NELI and coordinate implementation of the intervention.
- **Evaluation of Talking Time:** addressed implementation of the intervention and its impact on children’s language skills using the LanguageScreen assessment measure, a standardised tool designed to assess early language abilities in young children. For the 2024/25 cohort, LanguageScreen data was collected by practitioners across six participating schools at two timepoints: pre-delivery in autumn 2024 (data available for 152 children), and post-delivery in summer 2025 (data available for 147 of those who had completed the autumn assessment).
- **Evaluation of PEEP Learning Together:** focused on facilitating factors and barriers to implementation, early indicators of impact on children, parents and PEEP facilitators, and recommendations for future implementation. The evaluation used a mixed methods approach. Quantitative data included nursery LanguageScreen scores collected at two timepoints, pre-delivery in autumn 2024 and post-delivery in summer 2025, to assess changes in children’s language development. Qualitative data included interviews with school-based PEEP facilitators and Thrive at Five staff (including peripatetic leaders, and the Early Years Development Lead), as well as interviews with 10 parents who attended PEEP sessions with their child. Additional data sources included facilitator-completed session monitoring records (covering session topics, attendance and engagement) and a post-intervention parent survey examining changes in the home learning environment, knowledge, and confidence.
- **GLD analysis for Thrive at Five schools:** examined Early Years Foundation Stage (EYFS) outcomes for children in seven primary schools located in Abbey Hulton and Bentilee, Stoke-on-Trent. The analysis compared outcomes for Thrive at Five schools with citywide averages and explored changes between the 2023/24 and 2024/25 academic years, alongside longer-term trends since 2022. It focused on overall GLD scores and the Communication and Language early learning goal, with particular attention to outcomes for children eligible for Free School Meals (FSM) and those identified with Special Educational Needs (SEN).

Appendix F – Schools data

(Stoke-on-Trent)

We included analyses of two sets of school data from schools in the two wards in Stoke-on-Trent: GLD data and reception language score data.

GLD analysis for Thrive at Five schools

We examined Early Years Foundation Stage (EYFS) outcomes for children in seven primary schools located in Abbey Hulton and Bentilee, Stoke-on-Trent. The analysis compared outcomes for Thrive at Five schools with citywide averages and explored changes between the 2023/24 and 2024/25 academic years, alongside longer-term trends since 2022. It focused on overall GLD scores and the Communication and Language early learning goal, with particular attention to outcomes for children eligible for Free School Meals (FSM) and those identified with Special Educational Needs (SEN).

Reception language score data – Stoke-on-Trent

Reception data for 2024 and 2025 were analysed across the six primary schools¹¹⁹ located in the Thrive at Five wards who have implemented Talking Time. The analysis compared mean language scores of children who attended their own school nursery prior to Reception with those who did not – including children who were at home, attended a different school nursery, or attended a PVI nursery. This comparison was undertaken as a proxy indicator of likely exposure to Talking Time within school nursery settings supported by Thrive at Five. Children who attended their Reception school nursery were more likely to have been exposed to Talking Time and related language support, whereas those attending other settings may have had different levels or types of exposure. This approach allows for exploratory analysis of whether language outcomes differ between children with varying likelihood of exposure to provision supported by Thrive at Five.

This analysis allows us to explore whether children who remained within the same school setting for nursery and Reception, and were therefore more likely to have been exposed to Thrive at Five pre-school language interventions (i.e., Talking Time), show different language outcomes on entry to Reception compared with children who will not have been exposed and have come from elsewhere pre-reception.

Across the six primary schools, the 2024 Reception data consists of 234 children, and 2025 Reception data consists of 224 children. Child characteristics across the two datasets appear broadly similar, as outlined in Table A9. However, there is missing data across all characteristics in the 2024 data, whereas the quality of 2025 recording is more accurate.

¹¹⁹ Abbey Hulton Primary School has been excluded from this analysis, as they have not implemented Talking Time within their setting.

Table A9. Characteristics of Reception children in Stoke-on-Trent – 2024 and 2025

		2024 n (%)	2025 n (%)
Gender	Female	123 (53%)	120 (54%)
	Male	110 (47%)	104 (46%)
	Missing	1 (1%)	0 (0%)
EAL	Yes	42 (18%)	45 (20%)
	No	133 (57%)	179 (80%)
	Missing	59 (25%)	0 (0%)
SEND ¹²⁰	Yes	57 (24%)	47 (21%)
	No	121 (52%)	177 (79%)
	Missing	56 (24%)	0 (0%)
EYPP	Yes	79 (34%)	83 (37%)
	No	113 (48%)	141 (63%)
	Missing	42 (18%)	0 (0%)
Total		234	224

Appendix G – Parent Surveys

(Stoke-on-Trent and Redcar & Cleveland)

We draw on the parent surveys undertaken and analysed by the Thrive at Five central team which asked questions about parents’ access to information and support.

The Stoke-on-Trent parent survey was distributed through Thrive at Five’s Facebook page, through schools, and in PBT’s and other spaces where Thrive at Five Parent Connectors were meeting with parents and had 299 responses across different wards (61.5% from Thrive at Five wards).

In Redcar & Cleveland the survey was distributed through the family hubs Facebook page, also promoted locally in Family hubs and by Parent Connectors in their interactions with parents and had 175 responses across different wards (31.4% from Thrive at Five wards).

A Chi-square Test of Independence was used to determine statistically significant differences between responses from Thrive at Five wards and from other wards.

¹²⁰ The apparent reduction in recording of children having SEND is surprising and may reflect data quality issues.

Appendix H – Implementation of enhanced HV data collection

(Stoke-on-Trent)

Process of implementing the additional HV data collection

Early scoping and agreement (Sept 2023 – May 2024)

The initial groundwork began in September 2023, when the City Director was socialised to the proposal for additional data collection. This early engagement helped build senior-level understanding and support for strengthening measurement of early developmental factors.

By April 2024, outcome measures for the additional data collection had been agreed. This ensured that the selected indicators aligned with Thrive at Five's theory of change and with what was feasible to collect in routine HV practice.

In May 2024, agreement in principle was secured with MPFT to collect the data within two Thrive at Five wards. This marked a key step in confirming operational feasibility and local system commitment.

Developing infrastructure and governance (June – December 2024)

Between June and December 2024, work focused on establishing the technical and governance foundations needed to support implementation. This included drafting data sharing agreements and programming the data dashboard to enable collation and use of the new measures. This period ensured that both the legal/data governance requirements and the practical systems for managing the data were in place before collection began.

Operationalisation and launch (January 2025)

In January 2025, data sharing agreements between MPFT, Thrive at Five and CEI were finalised. During the same period a family practitioner was recruited and onboarded and received training by CEI, and the additional HV data collection was formally launched. This stage marked the transition from planning to live data collection.

Embedding into routine practice (from April 2025)

From April 2025, the approach shifted from home visit-based collection to in-clinic data collection. This change aimed to firstly boost consent rates (which it achieved), but also to support longer-term sustainability by anchoring the measures more firmly within routine service delivery contexts.

Introducing the additional HV data collection to families

The parental communication materials seen below were designed to be accessible and reassuring, using plain language and a strengths-based tone. They were co-created by CEI, the Thrive at Five communications team, and local Parent Connectors.

Figure A2. Parent facing communication materials for HV data collection

Hi, I'm Alison, from the Health Visiting and School Nurse Service. You might have heard of Thrive at Five? We're working with them to introduce a bit of extra support from health visitors for you and your growing family. It's all about making things even better for young children and their families from 0-5.

Some of this might include...

- **How you as parents are feeling and taking care of yourselves.**
- **The special bond between you and your little ones.**
- **How you can make learning fun at home, including learning to talk, and understanding words**
- **Things to do with your little ones locally, such as parent, baby, & toddler groups, the library, nurseries, and schools.**

To help us understand a bit better ask you to complete a short and simple questionnaire. All your responses will be kept private, but your feedback will really help us offer the best advice for you and the local community.

Every parent deserves personalised support from a helping hand through their parenting journey.

More visits, more support – just for you and your baby!

We're adding more health visitor appointments to support you and your baby beyond the regular check-ups.

What's included?

Support to strengthen your bond with your baby, some tips for learning at home, and friendly check-ins to ensure you're feeling your best!

Want to know more?

Just call your health visitor or text us on 01520 815722. We're here to help!

mpft.nhs.uk
thrive at five

Appendix I – First year findings from enhanced HV data collection

(Stoke-on-Trent)

Figure A3. SWEMWBS total scores (1-year check)

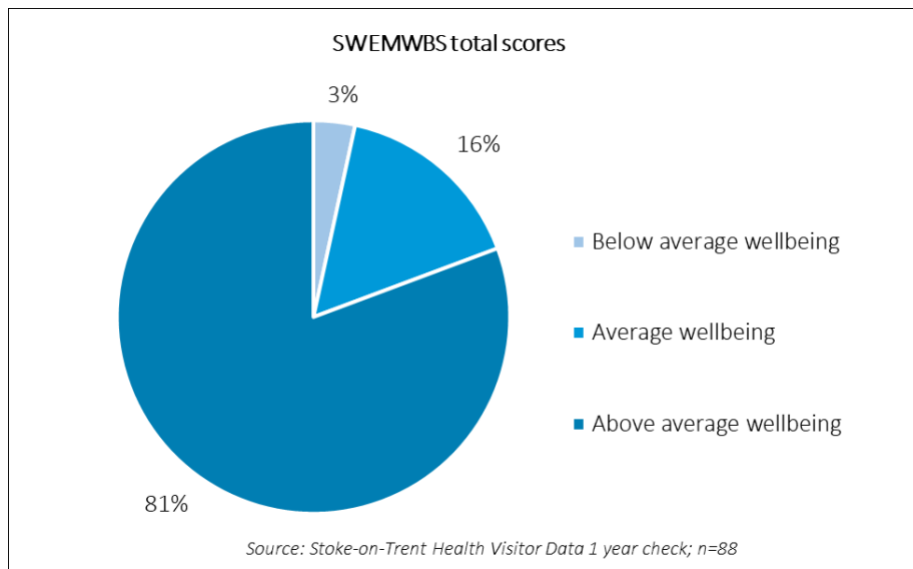


Figure A4. MORS-SF scores (1-year check)

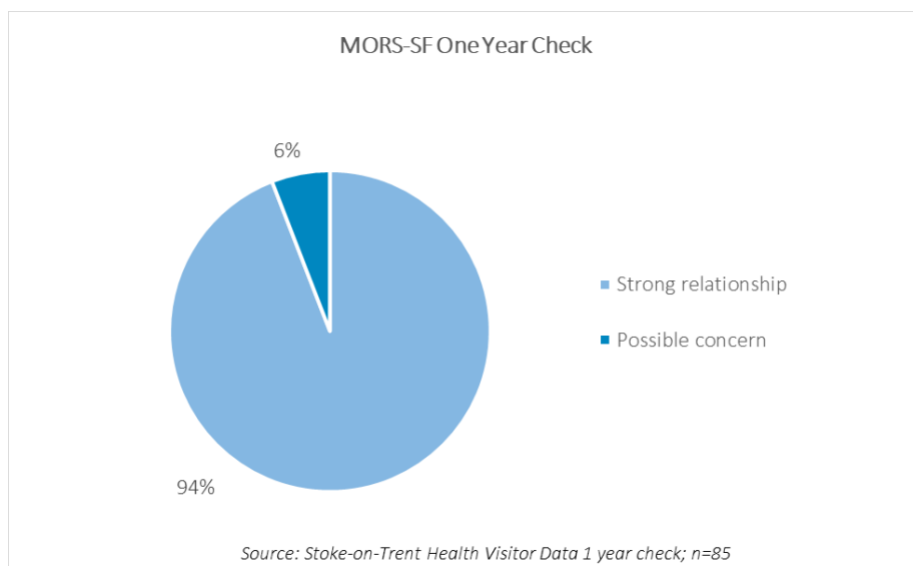


Figure A5. MORS-SF scores (2-year check)

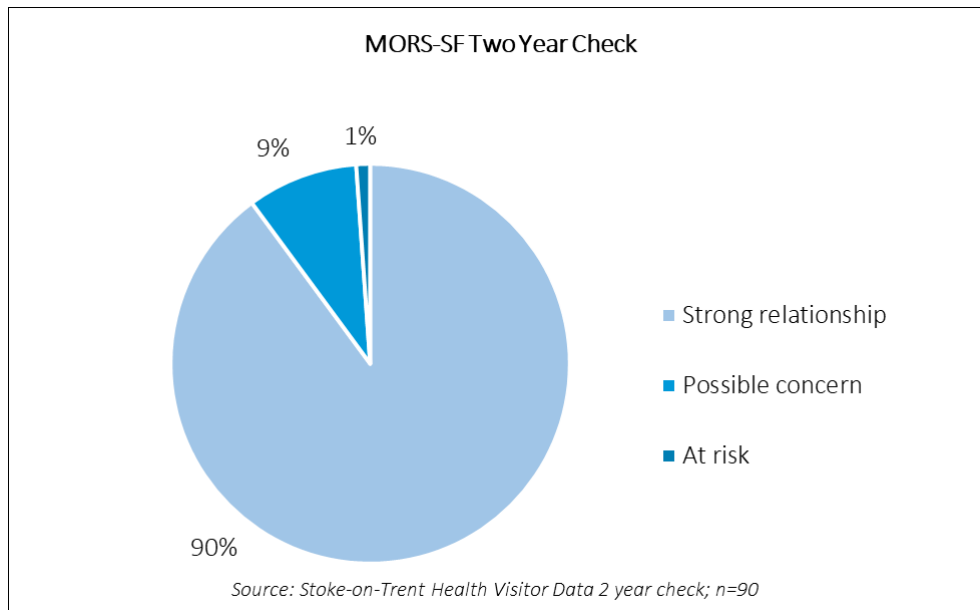


Figure A6. ELIM-S scores (2-year check)

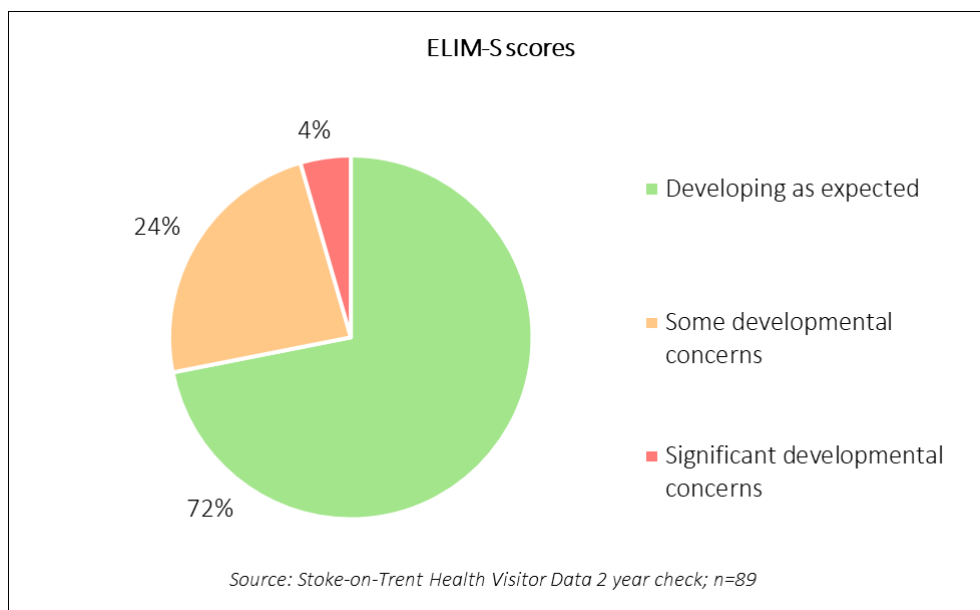
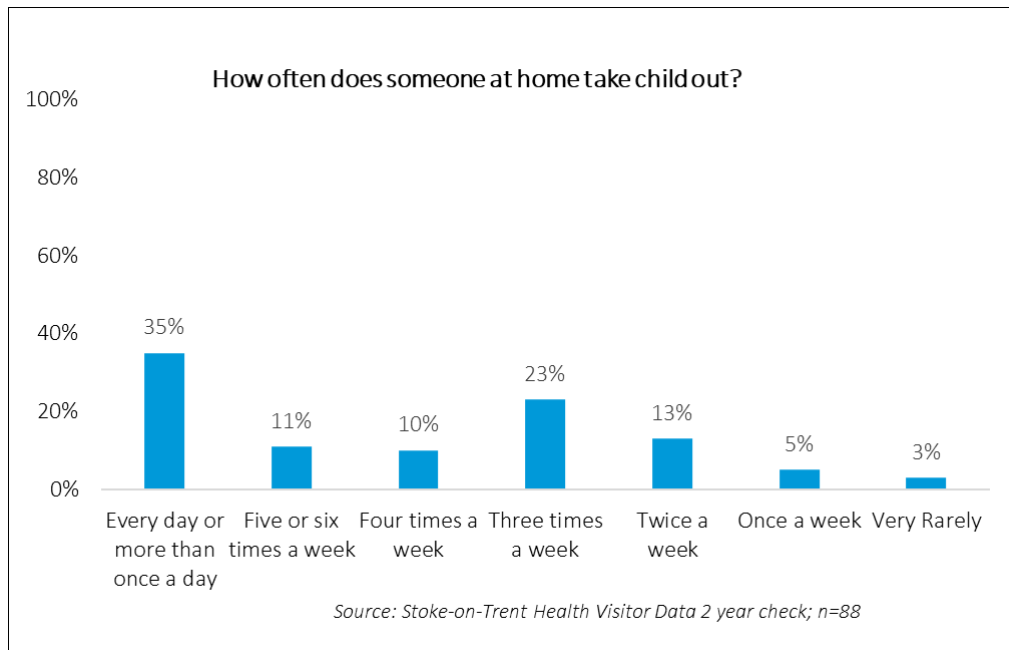


Figure A7. THLE (2-year check): How often does someone at home take your child out.



Appendix J – Perspectives from the early years workforce survey

(Stoke-on-Trent)

Figure A8: Perceptions of connection with other individuals/organisations

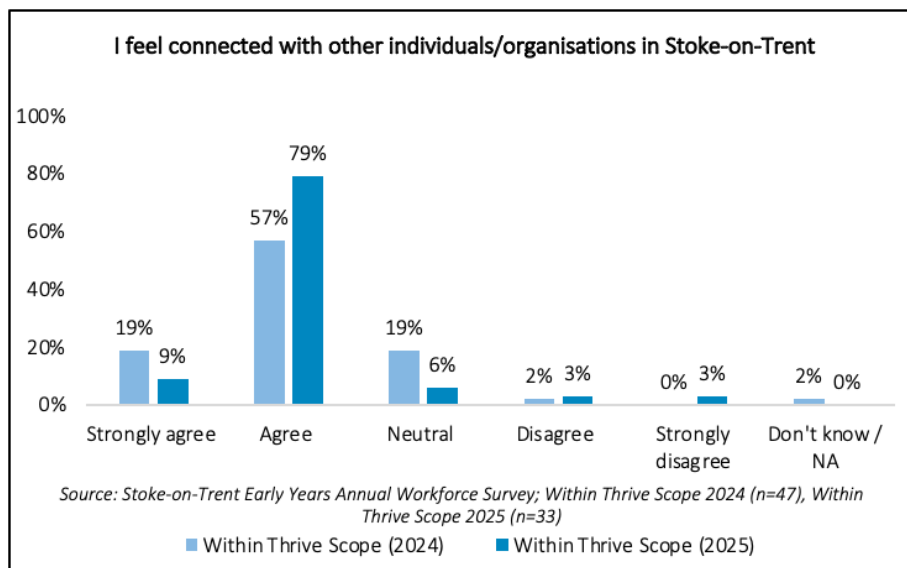


Figure A9: Perceptions of collaboration with other individuals/organisations

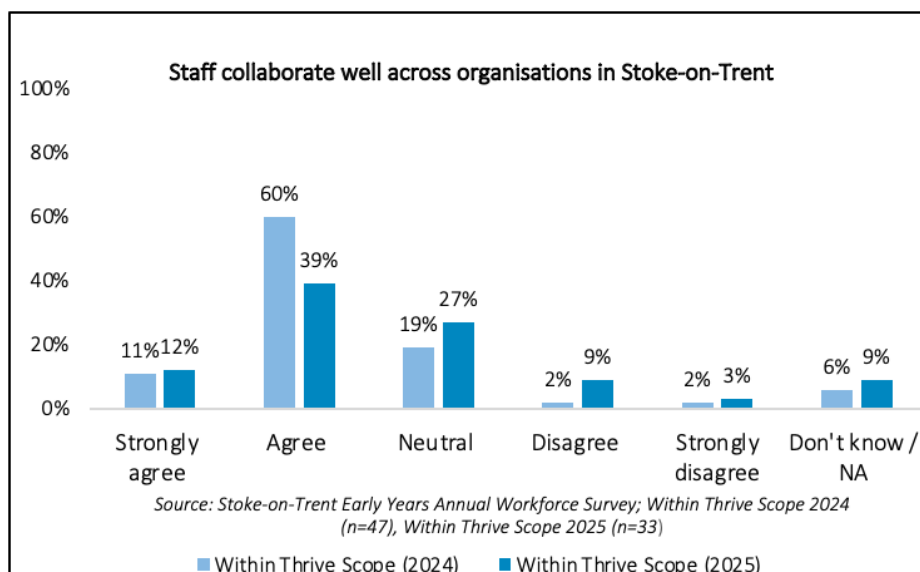


Figure A10: Perceptions of intregation across organisations

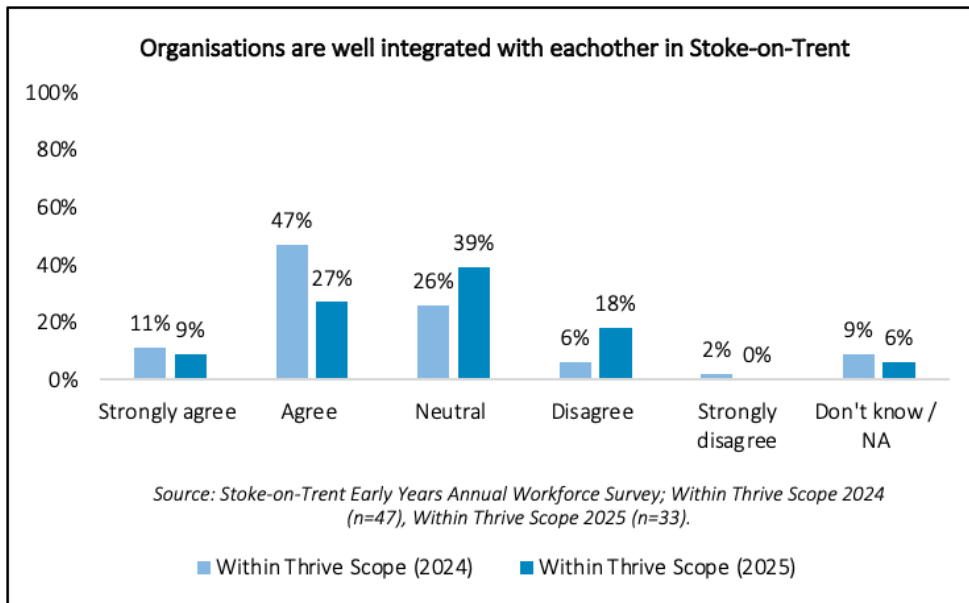


Figure A10: Perceptions of infrastructure across organisations

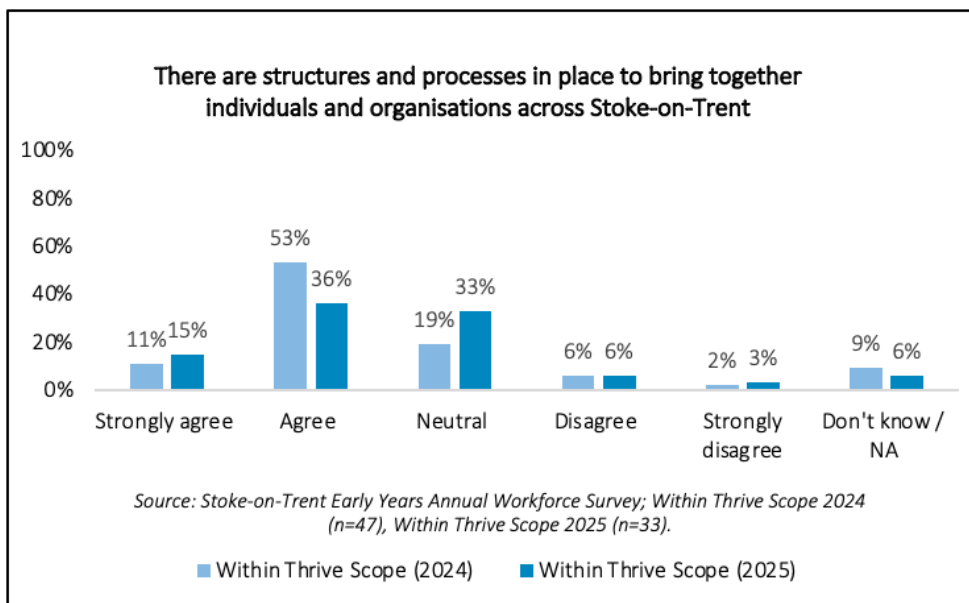


Figure A11: Understanding of available services

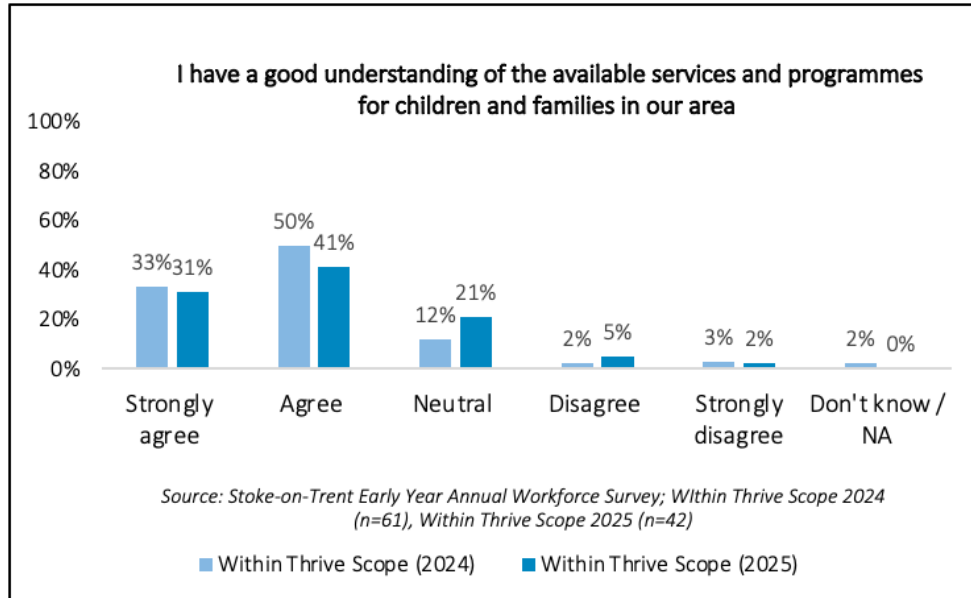
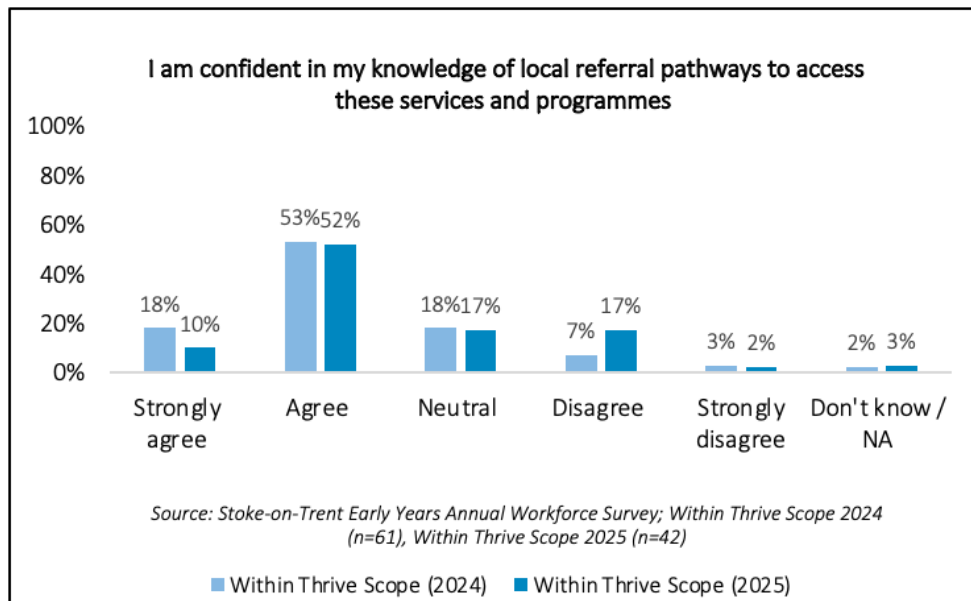


Figure A12: Knowledge of local referral pathways



Appendix K – Perspectives from the early years workforce survey

(Redcar & Cleveland)

Figure A13: Perceptions of connection with other individuals/organisations

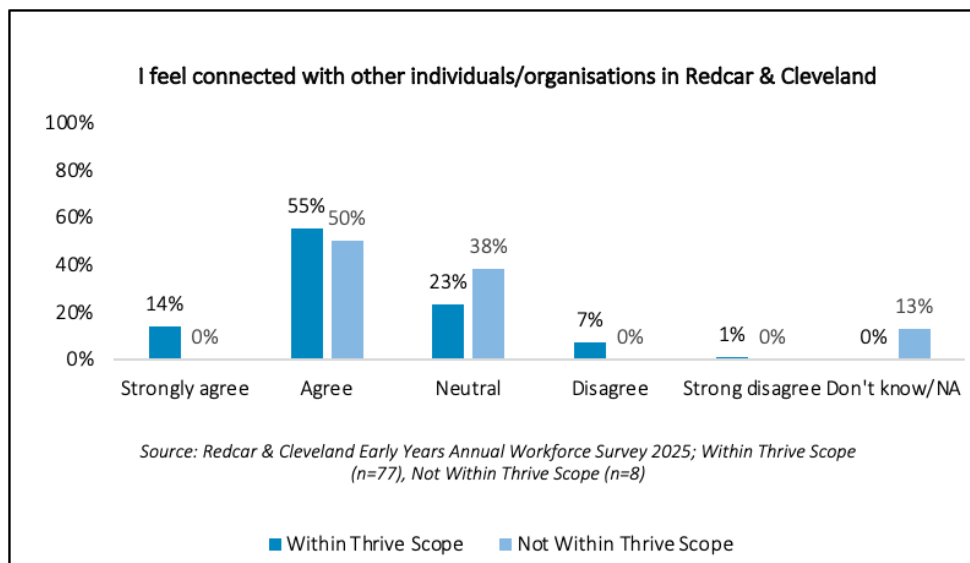


Figure A14: Perceptions of collaboration with other individuals/organisations

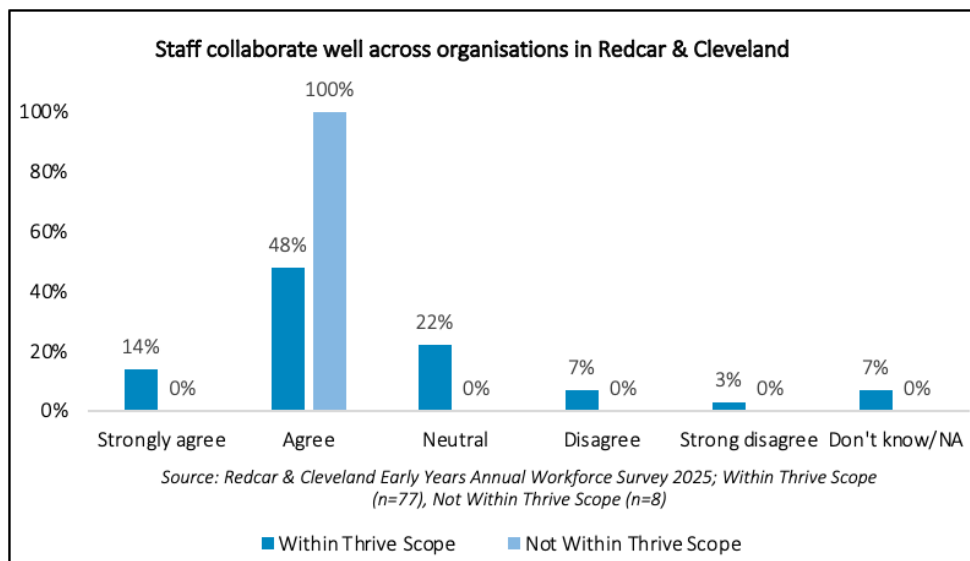


Figure A15: Perceptions of integration across organisations

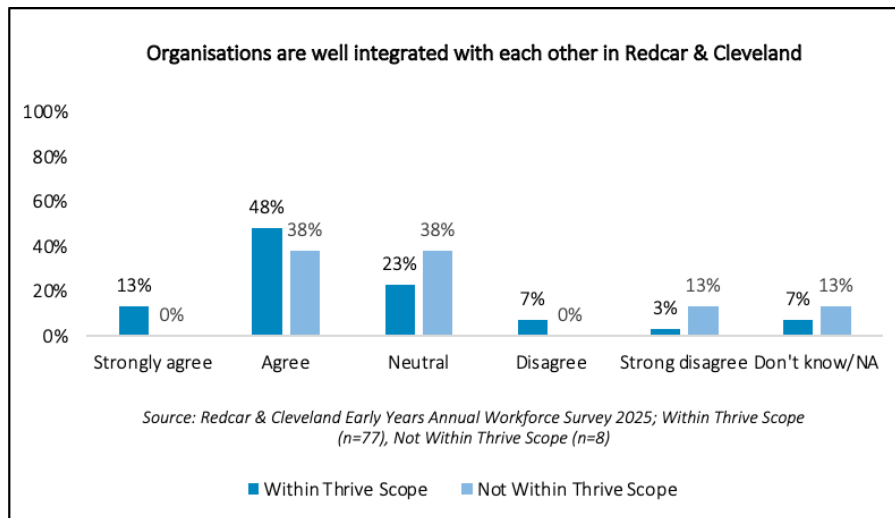
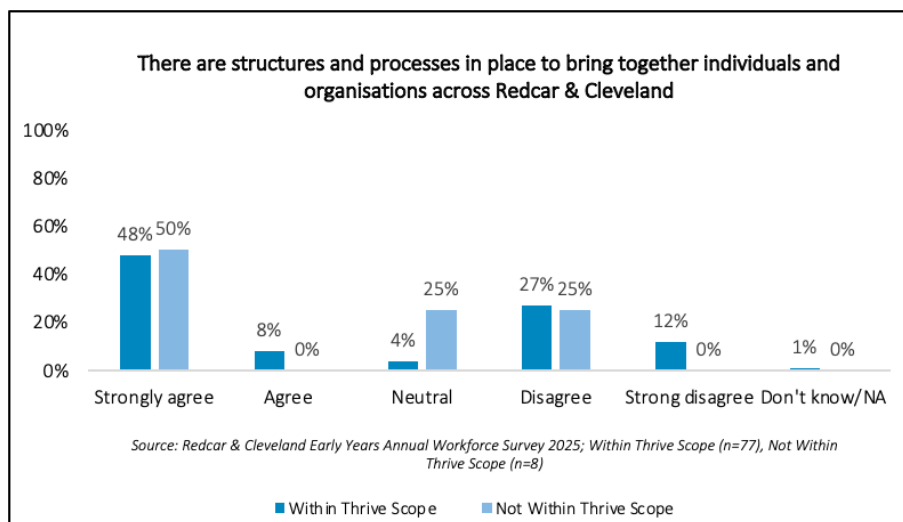
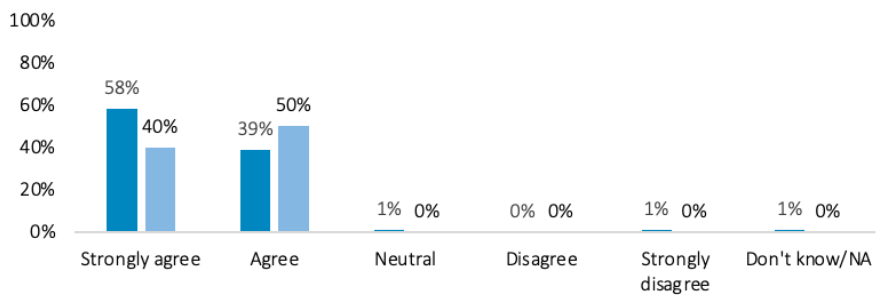


Figure A16: Perceptions of infrastructure across organisations



A17: Perceptions on the importance of parents' role

Our ethos is rooted in a belief that parents are the most important support to their children



Source: Redcar & Cleveland Early Years Annual Workforce Survey 2025; Within Thrive Scope (n=83), Not Within Thrive Scope (n=10)

■ Within Thrive Scope ■ Not Within Thrive Scope

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