Report of The Strategic Director of Children's Services to the meeting of the Health and Wellbeing Board on Tuesday 24 July 2018.

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Subject:

Bradford District Partnership Prevention and Early Help Programme

Summary statement:

This paper provides an update on the developing Bradford District Partnership prevention and early help, localities focused programme. This district wide programme covers all activities relating to prevention and early help across all ages and all themes.

In summary this programme seeks to provide a district wide co-ordinated approach to prevention and early help, moving away from some current initiatives working in isolation of each other and communities.

The paper reflects on the work achieved to date, the ambition for the future and the necessity for collaboration. In addition practical next steps for progression around a strategic narrative and governance are outlined, along with a request for resources to drive the programme forward.

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Portfolio:
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1. **SUMMARY**

This paper provides an update on the developing Bradford District Partnership prevention and early help, localities focused programme. This district wide programme covers all activities relating to prevention and early help across all ages and all themes.

In summary this programme seeks to provide a district wide co-ordinated approach to prevention and early help, moving away from some current initiatives working in isolation of each other and communities. There are three particular areas that have been identified as helping to drive this ambition forward which are further discussed in the report.

- A locality focused approach to ensure prevention and early help activities are accessible and tailored to each area.
- Services working in a more joined up collaborative manner, saving duplication and maximising local knowledge.
- All underpinned by enabling communities and individuals to use their own assets and strengths to determine their own futures.

This paper therefore reflects on the work achieved to date, the ambition for the future and the necessity for collaboration. In addition practical next steps for progression around a strategic narrative and governance are outlined, along with a request for resources to drive the programme forward.

2. **BACKGROUND**

2.1 The delivery of the Bradford District Plan (2016-2020) is underpinned by a requirement to have a greater focus on prevention and early help in how we deliver services both at a community and district wide level. This approach would lead to better outcomes for people where they are treated as individuals (and/or as part of a family). However no one service, organisation or person can create the right outcomes on their own, so a collaborative approach between communities and public/voluntary services is needed.

2.2 This would also support the delivery of accompanying strategies such as the Joint Health and Wellbeing Strategy and the Bradford District and Craven Health and Wellbeing Plan (the sustainability and transformation plan for our place), and the Bradford Economic Strategy amongst others.

2.3 Bradford District's definition of prevention and early help is: "Prevention is about stopping problems emerging in the first place. Early help is about preventing problems that are occurring from becoming worse and can be at any point in a person's life."

2.4 The strategic challenge facing the public and voluntary sector is to enable a way of working that enables people who live in the district to take a lead role in shaping and developing their community's and own lives to improve outcomes.

2.5 There are already many partnerships and work streams in the district that are working hard on prevention and early help initiatives from a thematic or age related

perspective. Most of these have already or are moving towards a locality approach. However it is accepted that further joining up of this delivery is needed alongside a stronger focus on communities leading the way. This programme of work is therefore focused on making better locality connections between the wide range of existing activities, whilst at the same time communities taking a lead in their own lives with service providers making this easier for them.

2.6   In light of this, partners in the district have shown their support for working to a set of principles as outlined through the former Bradford District Partnership Board's commissioned Prevention and Early Help Review. These principles are outlined below:

Golden thread	Local people taking greater ownership of actions supporting themselves and their communities Relationship between organisations and communities - building trust and reducing tensions Collaborative and Evidence based service design People can - mobilising communities Reducing isolation and loneliness Reduction of poverty Developing an intergenerational approach in communities				Evidence and strength based approach
Life stages	Starting well		Living Well	Aging Well	
Enablers	Workforce development	Cultural change	Every contact counts	Think family	public awareness – self care	

2.7   It is also acknowledged that a locality approach to prevention and early help would be the best means of connecting services to enable communities to achieve positive outcomes for themselves. Communities need to come together and take ownership, whilst working with service providers to strengthen their existing assets. Services then need to ensure they are themselves well connected to provide seamless support to communities as requested. Enhancing community development in areas with less capacity would also support communities to take a lead themselves.

2.8   A district wide framework is also needed to ensure that the more strategic connections continue, and that a common approach is embedded in all places and organisations. None of these things can work independently from the other as depicted overleaf.
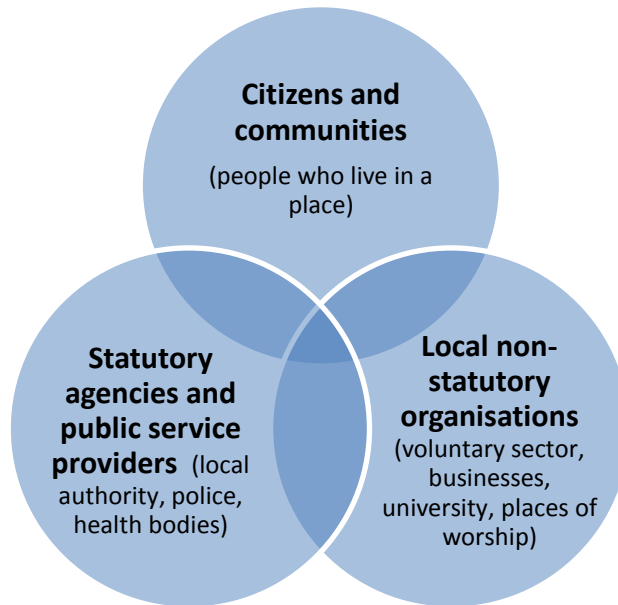
Community led locality based prevention and early help

3. OTHER CONSIDERATIONS

Creating a strategic narrative

3.1 In achieving a district wide strategic view on prevention and early help, it is important that a common narrative is agreed. This framework will support the guidance given and the decisions made by the district's strategic leads and boards. Any new opportunities or changes being made to district policies and programmes would need to be assessed according to that narrative ensuring a fit and connection with the wider prevention and early help agenda.

3.2 Recent partnership conversations have identified that all partners are committed to a locality approach and that geographical structures would benefit from being defined locally with flexibility built in.

3.3 It is already accepted that each area of the district needs to also be given the flexibility to shape its own prevention and early help activities to fit its geography and strengths. A prevention and early help guiding narrative would therefore provide each area with a set of common principles to work to.

3.4 A draft narrative has been circulated widely amongst partners with many comments received and welcomed. Such a narrative is however very broad and complex, so to ensure clarity of message not all permutations can be captured. Appendix 1 provides the detail of that narrative, which can be further refined as programmes of work develop and evolve.

The key messages of this narrative are:

a) Locality focus – services need to connect around constituency areas in the first instance, but communities would need to define their own identity be that geographic or through their own personal connections (interests, faith, social media etc).

b) Front line services connecting through formal and informal networks, working to the overall district wide prevention and early help strategic framework.
c) Communities taking the lead – with support being provided by services as required /requested.
d) Strengths (asset) based approach to maximise capabilities within an area – to be informed by public sector data and intelligence, and local knowledge.
e) Digital support to be developed to help information sharing.
f) Cross sector culture change instigated through updated organisational development approaches. This could be influenced through a number of different approaches such as Asset Based Community Development or other similar models.

3.5 It is suggested that these principles be adopted with immediate effect by existing programmes (as listed at 3.6). There should however be a focus from the Prevention and Early Help Strategic Board (see point 3.8) on one or two localities, where existing work could be strengthened, and community capacity further developed. Further debate is needed on where initial work could be undertaken, whilst bearing in mind that this focus shouldn't restrict any other communities from progressing with their own ambitions.

Existing programmes
3.6 It is acknowledged that there are many prevention and early help interventions already matured or in development. The intention of a common narrative has been drawn from the experiences of these practitioners and should add value to them, but not slow down their momentum. Some of those initiatives include the following.

a) 0-25 prevention and early help programme, including the co-production of detailed 0-19 Family Hub.
b) CCG/ Public Health community capacity building proposal
c) Healthy Bradford, which includes a specific focus on ensuring every place is a healthy place
d) Self Care and Prevention programme, which develops the capabilities of people and services, and includes specific initiatives such as social prescribing - this includes self care champions, and SMILE (community capacity building).
e) Development of a community based delivery model as part of the Bradford District and Craven Health and Wellbeing Plan (primary care home approach) to drive the vision including Happy Healthy at Home.
f) Community anchor development
g) Incommunities work with community centres
h) Existing Asset Based Community Development work
i) Well North
j) Neighbourhood Policing Strategy and NACPO National Consensus
k) Better Start Bradford
l) Active Bradford and Sport England Local Delivery Pilot
m) Integrated Communities Strategy and Integration Area Programme
n) People Can
o) Neighbourhoods and Wards planning
p) Independent advice services.

Next Steps: Strategic governance

3.7 The Health and Wellbeing Board provides the overall strategic lead to this programme of work, as the lead partnership in the Bradford District Partnership arrangements. The Board will guide future work to ensure it meets the prevention and early help principles, guiding the district towards its agreed ambition.

3.8 The Health and Wellbeing Board will be supported by the recently reshaped Prevention and Early Help Strategic Board. This group currently chaired by Michael Jameson (Bradford Council) and Helen Hirst (Bradford District and Craven CCGs) has to date had a 0-19/25 age group focus. It has however been agreed that this focus will move to a sub group, and that the Board will reassess its membership and terms of reference to consider all ages. Draft terms of reference for this Board are presented at appendix 2.

3.9 Commissioning is also a key contributor to the prevention and early help agenda, and as such further discussion is needed on how the governance arrangements can best support this – with an assumed role for the Executive Commissioning Board.

Next Steps: Programme support

3.10 With regards to scoping the specific nature of the work required to progress this programme, it is important to recognise its organic and complex nature. People perceive situations differently, and multiple collaborations and initiatives will continue to co-exist. Therefore a systems thinking approach will be required to support networks, rather than a linear or hierarchical programme management approach to change.

3.11 It is therefore suggested that in order to realise the prevention and early help ambition (for all theme, all age) that meaningful partnership resourcing is needed to drive the programme forward. It is proposed that one programme lead role is resourced as a convenor and connector, to provide oversight of the existing and developing district wide work on prevention and early help from a place based perspective. That role would further develop the policy narrative, drive forward opportunities for more service connections and support local areas to realise the prevention and early help ambitions.

3.12 This post should be hosted within one of the community hubs/anchor organisations to reflect the intention to focus on working with communities on the things that are done 'by' communities, rather than focusing on service delivery done 'to' communities by organisations. Progressing this in Keighley as a follow up to the Bradford District Partnership led workshop held in January 2018 would also realise further progression in that area.

3.13 Partners are therefore asked to jointly fund a three year fixed term post, a more detailed job profile for which would be prepared should this be agreed by partners.

4. FINANCIAL & RESOURCE APPRAISAL

This paper specifically requests partners of the Bradford District Partnership to fund a dedicated programme lead post to further develop and provide oversight to this work. Locality activities and service delivery however would continue through existing resources.

5. RISK MANAGEMENT AND GOVERNANCE ISSUES

As outlined at 3.7 and 3.8, the Health and Wellbeing Board provides the overall strategic lead to this programme of work. The Board will guide future work to ensure it meets the prevention and early help principles, guiding the district towards its agreed ambition. To achieve this they will be supported by the Prevention and Early Help Strategic Board which will provide practical and operational direction and decision making.

6. LEGAL APPRAISAL

None.

7. OTHER IMPLICATIONS

7.1 EQUALITY & DIVERSITY

The prevention and early help approach should positively impact on all people of the district equally. There would be no disproportionate impact on any particular protected characteristic group.

7.2 SUSTAINABILITY IMPLICATIONS
There are no sustainability issues arising from this programme.

7.3 GREENHOUSE GAS EMISSIONS IMPACTS

There are no greenhouse gas issues arising from this programme.

7.4 COMMUNITY SAFETY IMPLICATIONS

There are no community safety implications arising from this programme.

7.5 HUMAN RIGHTS ACT

There are no human rights issues arising from this programme.

7.6 TRADE UNION

There are no trade union issues arising from this report. The report does however outline a need for statutory and non statutory services to address their working cultures to enable a greater prevention and early help approach. This would require staff training and working practices to be altered. As individual projects are developed Trade Unions will be consulted as appropriate.

7.7 WARD IMPLICATIONS

Some of the early discussions took a focus on Keighley East as a means of testing out how services and communities could connect across the prevention and early help agenda. However the overall programme is district wide and will ultimately impact all wards.

8. NOT FOR PUBLICATION DOCUMENTS

None.

9. OPTIONS

None.

10. RECOMMENDATIONS

10.1 That the support, resource and programme arrangements be considered and the district wide ambition around Prevention and Early Help be implemented.

10.2 That the Board provides comment on the principle expectations of a programme lead role.

10.3 That the Board is asked to note the Prevention and Early Help Strategic Board's role in overseeing the practicalities of developing this programme of work including the associated programme lead role, to comment on the terms of reference and for agencies to nominate Senior Lead representation for the Prevention and Early Help Strategic Board.

11. APPENDICES

Appendix 1 – Prevention and early help strategic narrative for Bradford District

Appendix 2 – Prevention and Early Help Strategic Board draft terms of reference **(To Follow)**

12. BACKGROUND DOCUMENTS

Bradford District Partnership Prevention and Early Help Review (September 2017) https://bdp.bradford.gov.uk/documents-and-paperwork/bradford-district-partnership-board/?Folder=September+2017.

Appendix 1 – Prevention and early help strategic narrative for Bradford District

1. Introduction and future state

The Health and Wellbeing Board (with their strategic oversight) and the Prevention and Early Help Strategic Board (with their operational oversight), need to ensure that a consistent prevention and early help approach is applied to programmes, initiatives and new policies in the district. To support them with this a strategic framework is needed to assess programmes against, ensure the approach is being met and steer our district wide culture towards this ambition. This strategic narrative therefore aims to set out an overarching ambition with some practicalities to support the Boards in their role.

As work develops it is anticipated that this narrative would be further refined to capture the latest position, and reflect the learning from existing and any new initiatives. It needs to underpin all that we do and enable partners to drive forward what has been described as a social movement.

There is a long term ambition where prevention and early help is the starting point for the district's way of working. Where communities are more independent from statutory services, and where services are fully connected to add value and complement the strengths of each individual community. This future state can be described as follows:

- People actively lead and shape their community.
- There is a shared vision for the place built by the people on their understanding of their collective strengths.
- People and communities are skilled in asset based approaches and are actively supporting local partnerships (people and organisations) to make the most of their assets.
- Community hubs/anchor organisations are present, vibrant and inclusive, with good local participation by people and organisations. Community anchors can include a school, college, voluntary sector hub, parish/town councils, etc.
- There are places to go and things to do that matter to the people who live there.
- Thematic champions are present, active and visible, drawn from and working with the local community.
- Social prescribing is available and well used with a trusted network of brokers and activities to engage with.
- Volunteering is supported and is the norm.
- Services know each other, are working together as a virtual team, and are working for communities as co-producers.
- Co-production is the default approach for people and services.
- There is a shared community discussion/ decision making arrangement that is accepted and used by people and services.
- The information we have about the place is used collectively to help us make choices.

2. Scope of prevention and early help programme

The prevention and early help programme/movement requires a change in approach by communities and our statutory and non statutory service providers. This would

create the foundations on which we could achieve our ambitions, as highlighted in the previous section. Those foundations can be described as follows.

Capabilities and conditions for change
- Community engagement and development using asset based approaches and leadership understanding and support for it (including their own capacity building).
- Development of skills, belief, experience and culture of co-production with all stakeholder groups (people, community organisations and services).
- Development of skills, beliefs, experience and culture of enabling, listening and supporting in services.
- Support for leaders at all levels within organisations to understand and practice change and influence in a system context – a system organisational development 'programme' and the capacity required to implement it.
- Moving from services doing for, to communities doing things for themselves. But recognising sometimes that interventions need to be done with, or in some cases still done for. Clarity is needed on when each applies (to be defined by each locality).

Infrastructure to support collaboration
- Teams supported to understand each others' context, pressures and priorities – e.g. shadowing, mentoring.
- Teams meeting regularly and communicating frequently – in pursuit of delivery of common goals.
- Shared information and working space. Virtual web based space rather than only physical.
- Community based discussion/ decision making arrangements.

Agreement of a common vision
- Shared understanding of community assets.
- Support for development of a future vision for each place, shaped by the people.
- Agreement of priorities for collective action linked to the vision.
- Agreement of common outcomes and measures to enable progress to be tracked.

3. Community development

Bradford has a rich history of successful community development practices which need to be drawn on to realise the ambition of communities and individuals being more independent in making their choices, and creating their own support mechanisms. Work is therefore needed to draw this past learning in with existing neighbourhood mechanisms to provide an enhanced and more community led framework. This would also draw upon the expertise and relationships developed by Bradford Council and partners' neighbourhood based teams. Elected members would need to be central to this work as the democratically elected representatives of communities.

This work however needs to be initiated by communities themselves, possibly through existing community hubs – these could be anchor organisations, town/parish councils, informal partnerships, schools etc. Many of these are already collaborating on similar principles as part of their work with Locality and others are taking asset based approaches (though it is noted that many alternatives exist).

This approach in tandem with more effective service connections (as outlined in the next section) would allow resources to be directed where they are most needed.

4. Service connections and culture change

In order to realise the prevention and early help ambitions, statutory and non-statutory services need to adapt their culture and ways of working, to allow communities to drive their own agenda and offer support where locally identified. To enable this, services need to re-think how and when that support is offered. This requires organisations of all sizes to evolve their practices and develop their staff to practice the new approach.

Services also need to be better connected so that support to communities can be provided in a joined up and seamless way. This is likely to differ from one locality to another in response to local strengths (assets) and needs. The following points should be considered by organisations when developing this joined up approach.

- Outline what is required through workforce development to enable the culture change.
- The narrative should be 'person centred' rather than organisationally shaped.
- Needs to focus on a 'no wrong door' approach e.g. take one person/family in one area and map their pathway opportunities.
- Community networks need to be promoted, so that in each area front line workers know what their cross organisational colleagues are doing, and where appropriate can work together.
- Provide a framework and guidance on community strengths (rather than needs) assessments – such as an enhancement of existing ward plans. This would then lead to the identification of any gaps and the link back to community development.
- Local information (sometimes called data and intelligence) to be used in a partnership arena to have a better shared understanding of each community.
- Any interventions or approaches need to be sustainable.
- An outline of the required organisational culture change and expectations management between public and voluntary sector and communities.
- Articulation of the associated risks and mitigations management.
- Digital support – initiatives such as PeopleCan enhance community development activities. However a means of identifying 'what's going on' in an area would be a useful tool – be that a public agency health service or a community meeting/activity.
- A communications strategy and action plan is needed to share key messages at all levels.
- Statutory and non-statutory services to spend time co-locating in existing hubs to support the development of local solutions with local communities. No decision should be made in isolation of others.
- Community hubs to host informal and formal networking sessions between local practitioners/professionals, to help to build understanding and potential for local connections.

5. Supporting evidence

The strategic narrative has to date been developed initially from the Bradford District

Partnership Board commissioned prevention and early help review (presented in September 2017); and then further refined through assessing good practice and recommendations from external research.

Some of that external research is presented below as an illustration to support on going refinement of the narrative.

a) The RSA report "Transforming Together: Leading for People and Place" includes a description of the future behaviours required of services working with people and communities. This is set out in the table below along with potential development actions required.

Future behaviour and perspective	Development actions to get there
Convene around places and actively make time to engage with partners in order to focus on communities and develop honest committed relationships.	• Develop a future vision together – respecting the unique contribution of all. • Take time to understand each others pressures, operating environment, and language – e.g. cross sector secondments and shadowing. • Work with coalition of the willing
Think and act systemically. Agree a clear purpose, outcomes and priorities. Encourage long term political support.	• OD to support capability to build and sustain trust, collaboration, influence, whole system thinking • Spend enough time on a shared vision that all can own • Develop effective system governance
Develop an entrepreneurial edge. Optimistic and creative. Passionate persuasive and persistent. Track, reflect, learn and adapt	• OD to support Leadership at all levels to promote creativity and pace • OD to support use of personal narrative – e.g. of persuasive and passionate • Use small number of meaningful outcome indicators
Build and shared ethos and engage others. Empower middle managers and engage whole workforce. Devote time and energy to the process.	• Include middle managers in OD for system • Values based recruitment and shared culture programmes • Dedicate time and resource – capacity and £s

b) The 'Building Collaborative Places' report suggests an outline route map for each community. This could be further refined locally.

1. Understand the local context	2. Co-create a future vision for the place	3. How you will get there	4. Build readiness to deliver the change	5. Delivering the change
Understand your place economically and socially. Co-create a social & economic portrait of a place informed by: • citizen engagement • data analysis • partner engagement • political engagement Understand the drivers for change, such as: • national policy • economic drivers • rising demand • poor outcomes	Work across organisational and sectoral boundaries to co-create a common vision for the place and the community. Hold the tension of different viewpoints and incentives as this vision is brokered. Identify the components of a new place-based strategy.	Co-produce a collaborative action plan which flows from the common vision and is not defined by organisational and institutional boundaries. Explore how the role, behaviour and practice of public services needs to change in order to achieve it. Agree operating principles that will guide a new collaborative approach.	Understand your readiness to collaborate and invest in creating the culture, relationships and buy-in from partners and citizens. Expertly unpick the barriers and enablers to the change and formulate strategic and tactical responses which are built on shared value.	Support and 'hard-wire' changes in practice and culture by building the collaborative place-based infrastructure described in this report (i.e. governance, outcomes, funding, delivery, workforce development etc). Agree how these will be developed to support whole system, whole place collaboration.