Report of the Strategic Director of Children’s Services to the meeting of the Children’s Services Overview & Scrutiny Committee to be held on 27th January 2016.

Subject:
Better Start Bradford Programme Update

Summary statement:
An update on setting up the Better Start Bradford programme, early implementation and sharing of the learning from the programme across Bradford district.

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1. **Summary**

1.1 Better Start Bradford (BSB) is an opportunity for Bradford to test out and add to the evidence base of ‘what works’ in improving child health and development outcomes in the early years, improving maternal and child health and school readiness.

1.2 It also provides an opportunity to test innovative approaches to changing the way our systems work together as we are using the Better Start Bradford partnership programme as a vehicle for reform across the district in early years and child health. Learning from developing the BSB programme has been instrumental in supporting the development of the district’s Integrated Early Years Strategy.

1.3 This report outlines the background to the programme, the key features of the Bradford approach and reports on the progress in implementation around setting up the infrastructure to support the programme, the ‘early starter’ projects and key aspects of evaluation and learning across the district.

1.4 The development of the Better Start Bradford bid and early implementation of the programme has profoundly influenced the district wide approach to early years service delivery and the development of the Integrated Early Years Strategy (IEYS) for children under 7 years 2015-2018. It’s focus on evidence based and outcomes has ensured we have built on existing good practice but also developed new approaches where needed. The IEYS 5 workstreams are focused on:

- Children ready for school and schools ready for children
- Improve health and wellbeing for all children and reduce inequalities
- Support and increase parents’ knowledge and skills
- Support the development of high quality leadership together with highly skilled and responsive workforce
- Integrated working and system change

The last workstream – integration working and system change - is key to delivery of all the other workstreams.
2. **Background**

2.1 The Better Start Bradford programme is the result of a successful £49 million Big Lottery Fund bid led by Bradford Trident, awarded in June 2014 for a 10 year early intervention and prevention programme.

2.2 Bradford was one of only five areas nationally to be awarded funding from the Big Lottery Fund’s *A Better Start* programme, following intensive partnership work between Bradford Trident, Children’s Services and Public Health in the Council, the Police, Clinical Commissioning Groups (CCGs), NHS providers, Voluntary and Community Sector organisations, elected members and families.

2.3 Better Start Bradford is a ‘test and learn’ programme which is being used as a vehicle for reform across the district in early years and has already informed the development of the Integrated Early Years Strategy 2015-18. It is being delivered in 3 disadvantaged wards (Bowling and Barkerend, Bradford Moor and Little Horton) but aims to embed what works across the district. For example, specific attachment training for our early years workforce (including volunteers) is being rolled out and the Baby Buddy phone app is now being promoted across the district.

2.4 The primary outcomes are to improve communication and language development, social and emotional development and nutrition in children aged 0-3 years and will affect a change to our systems so that families benefit from smarter, seamless services which recognise and address needs at an earlier stage, with a workforce providing responsive, consistent support. It is supporting the improvement to school readiness as part of its work towards New Deal priority outcome ‘great start in life and good schools’.

2.5 It is entirely focused on pregnant women and young children aged 0-3 years. During pregnancy a woman’s mental and physical health, behaviour, relationships and environment all influence the developing foetus. All these factors can have a significant impact on the baby’s wellbeing and long term outcomes. After birth, babies’ brains and bodies continue to develop rapidly; in the first two years 700 new neural connections form. Because of this any new experience, positive or negative, can have short and long term impacts.

2.6 From a cost benefit approach the best time to invest in evidence based prevention and early intervention is in the first 3 years of life, as it is this time when the improvement in outcomes is highest. The increasingly robust national and international evidence base supports effective interventions at a very early stage; pre-conception, pregnancy and first three years of life.
2.7 Key features of the BSB model include:

2.7.1 Early intervention and prevention interventions rooted in the best available evidence and science, alongside detailed monitoring of their implementation and effective evaluation, led by Born in Bradford.

2.7.2 A clear focus on outcomes for children, with a framework detailing the measures to be used, baselines and short, medium and long term outcomes. The key development outcomes are:

- improving children’s social and emotional development
- improving their communication and language development
- improving their nutrition
- improving school readiness and maternal and child health.

2.7.3 A community-led Partnership Board ensuring that there is joint accountability for the programme between communities and local public services. The Partnership Board includes representation from the Director of Children’s Services, the Director of Public Health and local parents who jointly manage the programme and the budget.

2.7.4 The London School of Economics is working with Better Start Bradford to develop a tool for cost benefit analysis to identify potential savings from successful interventions. This will inform future commissioning plans for the district.

2.7.5 An integrated workforce approach will strengthen consistent support for families by implementing common pathways, a joint training programme and a shared data system.

2.8 The set up phase June 2014 – March 2015 has enabled us to ensure that we have the right people and systems in place to ensure robust leadership, management, monitoring and evaluation of the programme. This means that our infrastructure will support implementation effectively and efficiently.

2.9 Early implementation projects from April 2015 include:

- Innovation Hub will provide a robust system for effective monitoring and evaluation, building on the strong academic, practitioner, and community networks already developed by the Born in Bradford research programme. (5 year contract worth £3,928,167)
- Perinatal Support Service which provides emotional support to families during pregnancy and the first year after birth, where a parent is struggling with their emotional health and wellbeing or where they have been diagnosed with a low to moderate level perinatal mental illness. (3 year contract worth £988,969)
Talking Together, a service to support children in their communication and language development. All 2 year olds have an initial language assessment in the home which may be followed by a 6 week intervention delivered in the home for those identified as being at risk of language delay. (3 year contract worth £753,356)

Baby Buddy mobile phone app for parents and parents-to-be with personalised content approved by doctors and midwives that spans from pregnancy right through to the first six months after birth. (agreement for £75,000 for monitoring and development of another community language)

Personalised midwifery care pilot which ensures that women see the same midwife for all their community midwifery appointments throughout their pregnancy and the postnatal period. Appointments are longer and women are supported to make informed choices around the birth of their baby. (3 year contract worth £1,626,952)

2.10 BSB projects build additional early help for families around children’s centre services in seven children’s centre reach areas: Barkerend, Community Works, Burnett Fields, Canterbury Woodroyd, Mortimer House and Tyersal. These centres continue to offer a core offer of health, early learning and family support services. BSB appointed five Children’s Centre Facilitators in June to work closely with the centres and ensure services for families are co-ordinated to complement rather than compete with each other.

The seven children’s centres will move into new cluster arrangements from late summer 2016. Canterbury Woodroyd, Burnett Fields will form the new BD5 cluster. Barkerend, Community Works, Mortimer House will form part of the new East Bradford cluster while Tyersal will join the new South Bradford cluster. BSB will have membership of the new Advisory Boards, which will help foster even closer links and joint planning between BSB, children’s centres and other key partners.

3. Report issues

3.1 The BSB programme is taking a staged approach to implementation; 4 interventions are currently being delivered across the Better Start Bradford area with 3 more to start in early 2016 with 3 year contracts worth approx. £324k.

Impact for the district: The Baby Buddy phone app, supporting women during pregnancy is already being rolled out across the district due to support from the CCGs and partners via the Maternity Network. The HENRY project, which focuses on improving nutrition and exercise in the really young, is being delivered in partnership with Public Health and Children’s Centres to ensure that what is proven to work can be embedded into district wide provision and sustainable.

3.2 Each Better Start Bradford intervention is subject to a process of service design which supports co-production of the intervention with experts in the field and service users, and enables due consideration to the evidence that it works, how it can be implemented to ensure it reaches everyone eligible and how it will be monitored for
effectiveness.

**Impact for the district:** This new approach to considered design of a service before implementation is going to support new approaches to commissioning. The district's Perinatal Mental Health Group is involved in designing Better Start Bradford's new infant mental health service to ensure that sustainability is embedded into planning and commissioning lessons are learned. Also, the Family Links Antenatal Programme has struggled to gain momentum in parts of the district so is undergoing service design in the Better Start area to test out potential improvements.

3.3 Learning Together is the joint training programme which is delivering networking and sharing events for everyone working with pregnant women and young families in the area plus a range of expert sessions, bringing leading professionals to Bradford to lead discussions in the latest thinking.

**Impact for the district:** Free evidence based bonding and attachment training is now available across the district for all early years staff, and training to deliver the HENRY programme is regularly available to a wide range of practitioners.

3.4 SystmOne is the preferred shared database to capture the data on individual beneficiaries and work is progressing to address consent, information governance and technical issues. This will be piloted in April 2016. Shared data across health and early years is essential in ensuring efficient recording without duplication and effective family support.

**Impact for the district:** We will hopefully develop one data system, one child health record and overcome the data sharing obstacles that currently exist across early years – technical and procedural, ensuring that data is shared across midwifery, health visiting and children’s centres.

3.5 The Integrated Care Pathway (ICP) outlines the key support available from Midwifery, Health Visiting and Children’s Centre for parents of children aged 0-5 years in the district and forms the core of those service’s delivery. The Better Start Bradford programme is carefully aligned with the ICP to ensure a consistent approach to support from across the services. Shared pathways are key to consistent messages and offering seamless support and sharing data also supports this.

**Impact for the district:** Many new key elements of the ICP and delivery of the healthy child programme are or will be being piloted in the Better Start Bradford area e.g. attachment and bonding screening tool at 3-4 months, joint two year reviews.

3.6 Born in Bradford will provide an Innovation Hub for the programme which will help develop an understanding of the underpinning science behind the interventions and develop the evidence base. They will follow a cohort of Better Start babies to allow the impact of the programme to be measured and they will evaluate each project. Full results for the projects will be available via cohort data from 2021, although some preliminary findings will be available depending on the outcomes.
and measures, after 2-3 years of each project starting.

3.7 On a national level, Warwick University are leading an **impact and economic evaluation of the national programme** with the following research questions:

- How effective is A Better Start (ABS) in improving children’s socio-emotional functioning, nutrition and language?
- How cost-effective is ABS?
- How quickly do we find improvements in outcomes, and how sustainable are these over time?
- How does this compare with families in other areas not supported by Big Lottery Fund’s investment?
- Is the programme investment worthwhile?
- How much does it cost to run the programme, including the initial set-up, and over time?
- How cost-effective are different approaches in terms of the outcomes achieved?

3.8 Throughout our programme, as new evidence emerges through the programme or from colleagues locally, nationally and internationally, BSB will **disseminate the knowledge** to ensure our workforce and communities share in the latest evidence and thinking. An annual conference will facilitate this.

3.9 **Key areas at district wide level** which have been informed and influenced by the learning in the development and implementation of the BSB programme include:

- Implementation and further development of the Integrated Care Pathway (ICP) between midwives, health visitors and children centre staff.
- Joint multi-disciplinary training for early years staff including e-learning on bonding and attachment, HENRY (healthy eating and nutrition in the really young) training and district wide approach to Antenatal classes Family Links Antenatal (FLAN) programme.
- Aligned commissioning approaches to Family Nurse Partnership, Perinatal mental health services, Health Visiting & Children’s centres service delivery using the district wide and BSB expertise jointly and ensuring focus on clear early years outcomes and using best available evidence to inform planning.
- Informing plans and delivery of new approaches to integration and delivery in the context of the 7 Cluster Model for children’s centres and the Health Visiting Services Review and the whole approach towards effective implementation of Integrated Early Years Strategy for children 0-7 years

4. Options

4.1 Not applicable; this is an update for information.

5. **Contribution to Corporate Priorities**

5.1 The BSB Programme contributes to the priorities within the Bradford District Health and Wellbeing Strategy and the associated Health Inequalities Action Plan (HIAP). HIAP Priorities 1-6 of the 18 priorities are focused on child poverty, infant mortality, parenting and early years, ensuring children are well prepared for adulthood. It is also included as part of the New Deal Priority 1 ‘Good schools and a great start in
life’. This priority is led by the Director of Children’s Services. It also contributes to the Children and Young People’s Plan. BSB is a key member of the Integrated Early Years Strategy group overseeing the delivery of the IEYS workstreams and many other key children’s groups and networks across the district.

6. **Recommendations**
6.1 Committee members are asked to consider and to note the information provided in this report and the high commitment within the District to improving outcomes and reducing inequalities for all young children through evidence based early intervention and prevention to ensure all children reach their potential.

7. **Background Documents**
7.1 See Better Start Bradford Families Speak Out [https://www.youtube.com/watch?v=YrMImH9Tj-4](https://www.youtube.com/watch?v=YrMImH9Tj-4)


7.4 Five numbers to remember about early childhood development, Center on the Developing Child Harvard University (2014) [http://developingchild.harvard.edu/resources/multimedia/interactive_features/five-numbers/](http://developingchild.harvard.edu/resources/multimedia/interactive_features/five-numbers/)


8. **Not for Publication documents**
8.1 None.

9. **Appendices**

9.2 Integrated Care Pathway 2014.