

<h1>BRIEFING</h1>	TO:	PH SMT 27/04/22 ACHandPH DLT 03/05/22 SLT/AD 07/06/22 Health and Wellbeing Board 21/09/22
	DATE:	21 st September 2022
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	TITLE:	Best Start and Beyond Framework

Background

1.1 Rotherham’s 2019 Director of Public Health Annual Report set out the evidence for the critical importance of the first 1001 days of life (from conception to age 2 years), describing it as a “window of opportunity” to give Rotherham’s children the best start in life and alter the trajectory of their life courses to provide potentially lifelong health, wellbeing and economic benefits.

In 2020, the Rotherham Integrated Health and Social Care Place Plan set out its transformation workstreams, with the first priority for children and young people being the first 1001 days.

In July 2021, the Public Health team reorganised its portfolio teams, aligning the work of its Consultants more closely with the four aims of the Health and Wellbeing Strategy, meaning there is now a dedicated public health portfolio team for addressing the best start to life, contributing to the objectives of Aim 1 of the strategy – to develop our approach to give every child the best start in life; and to support children and young people to develop well.

Since Spring 2021, Public Health has led a partnership approach to developing the specification for a re-commissioned 0-19s public health nursing service, a process which is now approaching its conclusion, with mobilisation of the newly awarded contract due to commence in the Autumn, working towards and a go-live date of April 2023.

A ‘Best Start and Beyond’ framework is being developed in order to derive optimum value from work that is already ongoing within the system and to provide a focused way of working for the interoperation of the 0-19s service and the wider system, including other key health resources. It will incorporate a broader system of influences around child/young person’s health from pre-conception through to transition to adulthood, focusing on key stages in a child’s life, with a continued acknowledgement of the primacy of the first 1001 days within this life course approach.

Key Issues

2.1 Key relationships
As part of the process for developing a framework as a whole-system approach, some key relationships have been established with Public Health for joint working. In particular, these include the ICB Rotherham Place joint commissioning role; TRFT midwifery and the current 0-19s service; RMBC’s C&YP directorate including Education and Inclusion team; and Early Help.

Interface with Early Help and whole system

We have agreed operationally that this framework sits beneath a strategic overview that also encompasses the Early Help Strategy, and that a sub-group of the Early Help Steering Group should be established to guide the actions beneath the framework. This new steering group has now met twice (in June and September), and will continue to meet on a quarterly basis.

This arrangement acknowledges that the Best Start and Beyond framework and the Early Help Strategy occupy similar territory, and creates considerable scope for a properly integrated and complementary approach. The Best Start and Beyond framework has a population-level health and wellbeing focus, based on addressing wider determinants, primary prevention and universal health services. This tessellates well with the Early Help Strategy's focus on a system for early intervention and prevention from harm, and the current focus on developing a Family Hub and Start for Life offer in Rotherham.

This framework will enable an overview of work delivered by the whole system (public agencies including those in the voluntary sector), influencing the health and wellbeing of children, young people and families. The framework is designed as a tool to describe direct or indirect influences, using priority 'lenses' for how we wish important health and wellbeing outcomes to be pursued.

Key principles

The framework intentionally aligns closely with the Prevention and Health Inequalities Strategy (March 2022 to December 2025), through the inclusion of a shared set of principles, which include the primacy of prevention, acting at the earliest possible stage to reduce the burden of ill-health, reducing inequality, adopting proportionate universalism, addressing wider determinants of health, working with people in respect of decisions about their health.

The principle of working with people means we should be co-producing our services wherever that is achievable – the framework adopts the Rotherham Charter (also known as The Four Cornerstones) for including families in designing services and support mechanisms that avoid stigma. It is important also to ensure that we provide not just services and support, but also create opportunities for our young people to realise their aspirations, as a key determinant of their health and wellbeing.

The full list of principles included in the framework is:

- Embedding proportionate universalism by delivering interventions at a scale and intensity that is proportionate to the degree of need.
- Adopting a whole pathway approach, considering opportunities for primary, secondary and tertiary prevention.
- Drawing from research, data and intelligence to develop evidence-based interventions.
- Working with local people and involving them in decisions about their health and care.
- Taking a compassionate approach to health promotion.
- Making every contact count to maximise opportunities for prevention.
- Advocating for prevention within the wider system, including work to tackle the 'causes of the causes.'
- Challenging clinical variation to raise the bar of the management of risk factors and chronic conditions across all communities.
- Acting at the earliest possible stage to prevent and reduce the burden of ill-health.
- Raising the average performance for a health and wellbeing outcome is seen as of secondary importance to reducing the slope of its social gradient.

Life course approach

The Best Start and Beyond framework covers key stages of the progress of a child's life. The first 1001 Days is the first of these stages, and its primary importance is emphasised by the principle to act at the earliest possible stage to reduce the burden of ill-health. In all four key life stages are identified: the first 1001 days; early years (pre-school); school age; and transition to adulthood. Within each life course stage, the framework includes a high level overall outcome and a set of enabling outcomes that are expected to be delivered by various parts of the system. These enable the steering group to consider whether the framework's vision is being delivered in the best way possible.

Overall priority lenses

A small set of priority themes are included to guide the steering group for applying this framework. These reflect priority needs and stakeholder views, including the views gathered through a co-production consultation exercise carried out by Rotherham Parent Carers' Forum. These are intentionally broad-brush themes, which are likely to have different applications within the different life stages. They are: addressing family poverty; maternal health and health behaviours; transitions between key life stages (and services); mental health; and a compassionate approach to health and wellbeing.

Poverty

Poverty is included as a priority, as it the most important determinant of poor health and wellbeing, with a very clear association with inequality. At a time when the country is experiencing a rapid increase in the cost of living, it is inevitable that family poverty is increasing, leading to considerable parental stress about basic needs, such as heating, clothing and food, and that this is likely to be adversely affecting their children's development, in ways that might be lifelong. Efforts locally to reduce the effects of poverty should give primary consideration to protecting the health and wellbeing of our children/young people, with an emphasis on building resilience and agency within the community.

In this respect, Rotherham has already been very proactive in respect of children and the effects of poverty, with initiatives such as £1mn of food vouchers to ensure 10,000 children would not go hungry during the long summer break in 2021, and the range of activities provided through the Rotherham Healthy Holidays programme, for which free places were available for families entitled to free school meals. Similarly, Rotherham is providing financial assistance to eligible families struggling with the costs of school uniforms.

Compassionate approach

Rotherham's Healthy Weight Declaration makes a commitment to a compassionate approach to healthy weight. This approach acknowledges that one potential outcome of health promotion campaigns that focus on lifestyle choices may be to inadvertently reinforce stigma for the individual. There is considerable evidence that stigma related to weight can be associated with poor psychological and physical health outcomes for individuals, and that it is a poor motivator towards adopting healthier behaviours in respect of diet and physical activity.

There is also a very particular need for a compassionate approach in providing a supportive environment for mothers who wish to breastfeed their babies, where the risks associated with feelings of shame and failure can be quite profound for the mother, with potential negative consequences for their baby. The approach should extend to creating supportive environments and advice in settings for early years and school age children and will also go beyond a narrow focus on nutrition and weight to include all aspects of health and wellbeing.

With this in mind, Rotherham is seeking to become a breastfeeding-friendly borough, and this is about creating the opportunities for supported and informed feeding choices to be made by mothers, without the risk of stigma associated with whatever that choice is.

Parental health

Maternal health as a broad priority will have most relevance within the first 1001 days, and is likely to include promoting health literacy and reducing risky health behaviours especially in planning for and during pregnancy. This priority has been intentionally broadened to parental health in acknowledgement of the importance of the health and wellbeing of both parents in influencing the conditions in which children develop.

Mental health

Mental health issues for children/young people and families will be addressed at need, ensuring support is offered at the earliest opportunity to prevent escalation. There will also be a holistic person- and family-centred approach with respect to the potential causes and effects of mental health concerns, avoiding seeing mental health in isolation.

Perinatal mental health is a key concern within the first 1001 days. 20% of new and expectant mums experience perinatal mental health problems (i.e. during pregnancy or in the first year following birth). If left untreated, mental health issues can have significant and long-lasting effects on the woman, the child, and the wider family.

Transitions

Work will be developed with key partners to prepare for transitions at each point in the life course to ensure the needs of children/young people and their families are met and, when necessary, the transfer of care to adult services is seamless.

Key Actions and Relevant Timelines

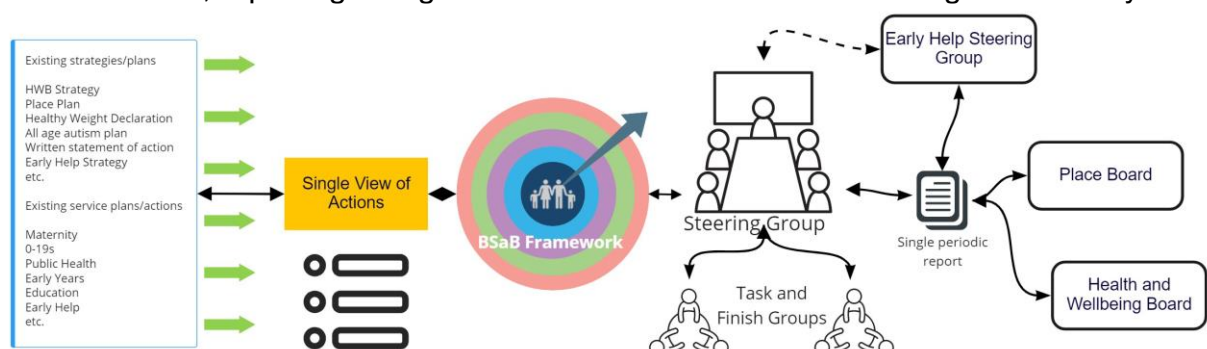
3.1 A live document

All strategies are to some extent emergent and need to be able to respond to changing population needs, system changes and stakeholder priorities. The concept of a framework is that it should allow for such flex, but it will also need to be kept under review, and should be seen as a live document.

Governance

Informal and intermittent steering meetings have taken place during the development of this framework. A more formally constituted steering group as a sub-group of the Early Help Steering Group has now met twice to finalise the framework document. The terms of reference, processes for identifying opportunities for system improvement work and for progress reporting have been agreed.

The work flow, reporting and governance have been described diagrammatically:



Endorsement of this approach by the Health and Wellbeing Board will also provide assurance to the Place Board as it refreshes its transformation priority workstream actions.

Action plan

A first version of an action plan has now been compiled (see appendix), based on actions already present in other plans and forums. Inevitably, this will mean actions will be owned and led across a range of services and agencies, elsewhere and are likely to have different lines of governance and reporting. The advantage of bringing them together under this framework is to create some system oversight for the steering group, and the ability to map the actions against the framework, with the prospect of identifying important gaps and opportunities for more integrated, efficient and effective effort. These gaps and opportunities will then be the key focus for the Steering Group in moving from framework development to implementation. The Steering Group might set up task and finish groups where appropriate to take best advantage of these opportunities. Such opportunities may exist at service, place and ICS levels.

Key system developments

The name of the Best Start and Beyond framework intentionally mirrors the title used for the new 0-19s contract, currently approaching the beginning of mobilisation for full implementation of the new service in April 2023. It will be extremely important that the new service sees itself as a component of a wider system of services and influences on children/young people – their start to life and their progress towards adulthood, and this framework is seen as a key vehicle to enable that to happen effectively. Similarly, other services particularly within in the health, care and education fields will need to be able to adapt to allow the optimal system operation and to reflect common priorities.

Key developments within the Early Help system also need to be acknowledged and coordinated with the framework, including the naming of Rotherham as one of 75 local authorities eligible for a share of central government funding to establish family hubs and to publish a start for life offer, in order to improve the delivery of universal, early intervention, and support services. The positioning of the Best Start and Beyond Steering Group as a sub-group of the Early Help Steering Group ensures a complementary and coordinated approach.

Implications for Health Inequalities

4.1 Health inequalities will be a key component within the framework, and important opportunities where partners are able to support this agenda will be identified.

Recommendations

5.1 To support the development and implementation of a Best Start and Beyond framework.

6.1 **Related Information / documents**
 Best Start and Beyond Framework
 Collated action plan