

Best Start in Life Workstream- Update

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Living our values every day




Accountable



Integrity



Empower



Respect



Excellence



Structure

- Why Best Start in Life
- Journey to date
- Current picture
- Action plan
- Challenges and asks from the Health and Wellbeing Board



Why Best Start in Life?

- Crucial to building physical, intellectual and emotional development and reducing inequalities across the life course
- Evidence shows that social spending on children early in the life cycle has greater impact
- Policy drivers include the recent Leadsom Report, 2021, “The best start for life: a vision for the 1,001 critical days”



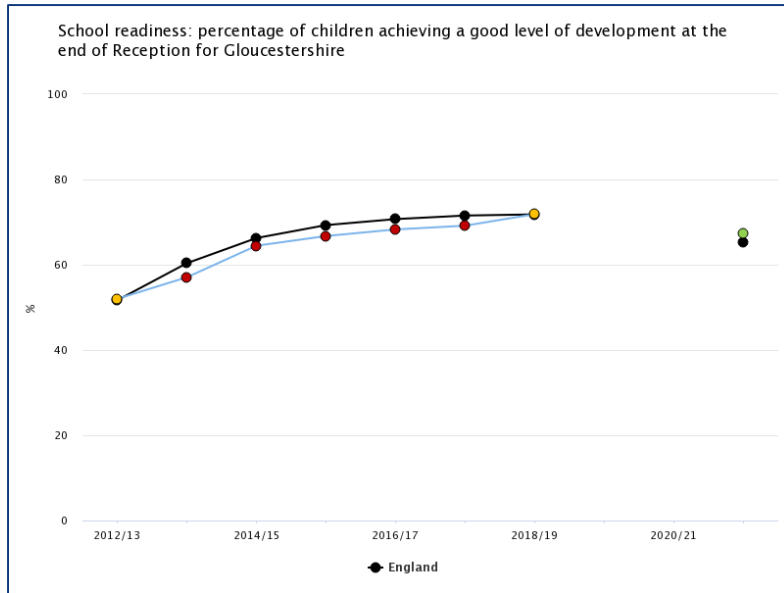
HWB Strategy Priority Areas

Give every child the best start in life

- Attachment and responsive parenting
- Childhood poverty
- Healthy lifestyles including oral health
- Childhood immunisations in 0-5 year olds
- School readiness (with a focus on those in receipt of free school meals)
- Vulnerable children
- Breastfeeding
- Smoking in pregnancy and early years
- ACEs



Journey to date



- Training for school reception class teachers to ensure consistency in assessment of GLD
- Increasing uptake of free childcare age 2 for eligible families
- Wide range of training delivered to EY practitioners, PEEP training available to practitioners that support families in supporting strong parent-child relationships
- 1 year investment in 'Steps Ahead' and 'Best Start in Life' targeted at cohort affected by pandemic
- HVs distributed 2,750 toothbrushing packs to children at 9-12 month review.
- This Mum Can social media campaign to promote breastfeeding in young mums in Gloucester
- Healthy Me, Baby and Beyond healthy lifestyles programme

Current picture

2021/22 data

- Despite improvement in average GLD, consistently seeing stark disparities within subgroups
- Further analysis planned to understand drivers, broader than early years

	Glos	National	SW
GLD	67.4%	65.2%	66.3%
BAME	53.4%	60.6%	56.5%
White	68.3%	66.3%	67.3%
SEN	16.8%	18.8%	20.0%
No SEN	72.9%	70.0%	72.1%
FSM	44.8%	49.1%	46.1%
No FSM	70.2%	68.8%	69.8%

Action Plan Aim and Objectives

- **Aim:** To hold shared accountability for improving outcomes and reducing inequalities for those aged 0-5
- **Objective 1:** Increase number of children benefitting from early intervention and support where needed
- **Objective 2:** Reducing inequalities for those aged 0-5
- **Objective 3:** Ensure clear information on services and support is available and accessible, including to families who may be less likely to access support and who may need it the most
- **Objective 4:** Promote health and wellbeing



Objective 1 - Progress

- **Increase number of children benefitting from early intervention and support where needed**
- Embed community and service user engagement to increase number of children benefitting from early intervention and support where needed
- Work in partnership with VCS to ensure universal and targeted support for families with young children available across county
- Promote funded childcare and ASQ offer to increase take up of free childcare from age 2 for those eligible
- Provide a range of training and support to EY practitioners to skill up workforce to identify and support children with additional needs, those likely to fall behind



Objective 2 - Progress

- **Reducing inequalities for those aged 0-5 and support development of national Start for Life offer as this is rolled out**
 - Development of the Family Hubs model to offer accessible, welcoming community support that facilitates early intervention and supports system integration
 - Sufficiency and quality of EY provision across the county, EY strategy and workforce issues.
 - Provide a range of training and support to EY practitioners to skill up workforce to identify and support children with additional needs, those likely to fall behind
 - In each of the 6 localities of the county continue to deliver a “targeted PEEP group” – structured stay and play group for families in need of support
 - Work in partnership with VCS to ensure offer of universal parent and baby/toddler support across county



Objective 3 - Progress

- **Ensure clear information on services and support is available and accessible, including to families who may be less likely to access support and who may need it the most**
- Map current provision for EY children and parent/carers across the county, using a variety of sources i.e. Glosfamilies directory, VCS registers, de-designated CCs etc.
- Review the current Glosfamilies Directory to ensure all info is up to date and look at best ways for promotion
- Consider whether Glosfamilies Directory can be promoted further on social media including Entertaining Kids on a Budget FB Group
- Implement findings from commissioned behavioural insights work to best engage families with highest levels of need in the family hubs offer and health promotion interventions.



Objective 4 - Progress

- **Promote health and wellbeing**
- Roll out South West supervised toothbrushing pilot and support 'First Dental Steps' research
- Continue to maintain UNICEF Level 3 Baby Friendly Initiative standard. Develop This Mum Can into a sustainable campaign delivered through Family Hubs to encourage breastfeeding amongst young mums. Deliver the infant feeding strategy for Gloucestershire.
- Increase uptake of childhood immunisations in 0-5 year olds with a focus on MMR
- Preventing injury (accidental and non-accidental) through campaigns such as Safe Sleep and ICON
- Reduce smoking in pregnancy and early years through embedding smoking cessation lead midwife and piloting CO monitoring by Health Visitors.



Challenges

- EY sector workforce and recruitment
- Funding allocation to the EY sector from DfE and budget announcement
- Capacity and resource for early intervention
- Waiting lists and access for specialist services (e.g. SALT, CAMHS, EP/Advisory teaching)
- Stretched universal statutory services (e.g. primary care, public health nursing)
- Funding and support to VCS
- Increasing demand
- Broader challenges beyond early years



Asks of the Health and Wellbeing Board

- Keep Best Start in Life workstream as a priority despite overall improvement in GLD
- Continue to advocate for non-stigmatising, accessible support to enable early intervention through Family Hubs and community capacity building
- Life-course approach to reducing inequalities

