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**Report of:** *John Macilwraith, Executive Director, People Portfolio*

**Report to:** *Cabinet*

**Date of Decision:** *18<sup>th</sup> March 2020*

**Subject:** *‘A Great Start in Life’ – Sheffield’s Early Years’ Strategy*

Is this a Key Decision? If Yes, reason Key Decision:-	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
- Expenditure and/or savings over £500,000	<input type="checkbox"/>	
- Affects 2 or more Wards	<input checked="" type="checkbox"/>	
Which Cabinet Member Portfolio does this relate to? <b>Children and Families</b>		
Which Scrutiny and Policy Development Committee does this relate to? <b>Children, Young People and Family Support Scrutiny and Policy Development Committee</b>		
Has an Equality Impact Assessment (EIA) been undertaken?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If YES, what EIA reference number has it been given? 771		
Does the report contain confidential or exempt information?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
If YES, give details as to whether the exemption applies to the full report / part of the report and/or appendices and complete below:-		
<p><i>“The (report/appendix) is not for publication because it contains exempt information under Paragraph (insert relevant paragraph number) of Schedule 12A of the Local Government Act 1972 (as amended).”</i></p>		

## Purpose of Report:

‘A Great Start in Life’, Sheffield’s Early Years Strategy builds on our previous strategy Following a wide range of consultation across the city it has been co-developed with colleagues from the local authority, health, schools, early years providers, private, community, voluntary sectors, parents and carers.

The strategy sets out the city’s ambitions for enabling all children aged 0 to 5 years and their families to achieve their full potential. It sets out priorities and plans for

continuing to develop high quality maternity services, early help and prevention and intervention services which meet a diverse range of needs.

### Recommendations:

It is recommended that Cabinet:

Agree, support and approve the priorities set out in 'A Great Start in Life', Sheffield's Early Years Strategy.

### Background Papers:

*(Insert details of any background papers used in the compilation of the report.)*

'A Great Start in Life' – Sheffield's Early Years' strategy

[Great Start in Life 13 February 2020.docx](#)

Lead Officer to complete:-		
1	I have consulted the relevant departments in respect of any relevant implications indicated on the Statutory and Council Policy Checklist, and comments have been incorporated / additional forms completed / EIA completed, where required.	Finance: <i>Paul Jeffries, Finance Manager</i>
		Legal: <i>Nadine Wynter, Legal Service Manager</i>
		Equalities: <i>Bashir Khan, Equalities Officer</i>
	<i>Legal, financial/commercial and equalities implications must be included within the report and the name of the officer consulted must be included above.</i>	
2	<b>EMT member who approved submission:</b>	<i>John Macilwraith, Executive Director, People Portfolio</i>
3	<b>Cabinet Member consulted:</b>	<i>Cllr Jackie Drayton, Cabinet Member for Children and Families</i>
4	I confirm that all necessary approval has been obtained in respect of the implications indicated on the Statutory and Council Policy Checklist and that the report has been approved for submission to the Decision Maker by the EMT member indicated at 2. In addition, any additional forms have been completed and signed off as required at 1.	
	<b>Lead Officer Name:</b>  Nicola Shearstone	<b>Job Title:</b>  Head of Commissioning for Prevention and Early Intervention – All age
	<b>Date:</b> 9 March 2020	

## 1. PROPOSAL

- 1.1 This strategy is integral to Sheffield's wider health priority of enabling good health and wellbeing throughout life. It has major implications for the city's long term outcomes including educational attainment, community cohesion and economic prosperity.
- 1.2 Our ambition is to ensure all our city's children have the opportunity to achieve their potential and live long, healthy and happy lives. We remain committed to working towards fulfilling these ambitions for every child in Sheffield, including our most vulnerable infants.
- 1.3 Sheffield's Best Start strategy was launched in 2015 following detailed discussions which brought together colleagues from health, the local authority, schools, private, community and voluntary sectors. Over the last three years there have been many achievements and this progress is recognised within the 'A Great Start in Life' strategy. Further work remains to be done however, and as part of the strategic review we have considered with all stakeholders including families where gaps remain. Future priorities for action will be based on these outstanding areas for development
- 1.4 'A Great Start in Life' sets out our commitment to a culture of partnership and working with a focus on prevention to help all families achieve the best outcomes for their children. With the involvement of our communities we will continue to find opportunities to provide earlier support and further improve our service offer to families by sharing and developing good practice.
- 1.5 Our philosophy hasn't changed. It is still aligned with our vision for a fairer, inclusive city, and one that builds on the strengths of communities and citizens to create the best environment for all children living in our city. With this in mind we have renamed our early years' strategy "A Great Start in Life".

### 1.6 Policy Context

There are 8 key drivers for the city:

- 1. Sheffield's Joint Health & Wellbeing Strategy
- 2. Tackling Poverty Strategy/Framework
- 3. Early Years Foundation Stage (EYFS)
- 4. Healthy Child Programme (HCP)
- 5. Overview of the six early year's high impact areas (DOH)

- 6. Whole Family Working Principles
- 7. Locality Working
- 8. All Age Prevention and Early Help

- 1.7 All children need strong trusting relationships with key adults in their lives and need to feel safe in order to thrive, flourish and enjoy a successful school life and adulthood. Good quality support provided during pregnancy, at birth and beyond to help families foster secure and positive relationships is profoundly important. Early positive bonds provide a child with a sense of emotional security and enable them to explore their world with confidence.
- 1.8 The Marmot Review report 'Fair Society, Healthy Lives' clearly described the social and economic cost of health inequalities. Social stresses including poverty, poor housing and unstable employment, increase pressures on parents and families which act against their ability to create a safe, healthy and nurturing environment for their children. In Sheffield 35.2% of the population live in areas classified as amongst the most deprived in England (the average is 20%), and 1 in 4 of Sheffield's children live in poverty
- 1.9 Children exposed to these factors are less likely to get off to a healthy start from birth and are more likely to experience poorer outcomes by the time they start school compared with children living in less deprived circumstances. Infant mortality rates in Sheffield remain higher than the England average, despite an extensive evidence based programme of work to reduce the risk factors. One of our main objectives is to understand what role everyone can play in seeking to reduce inequalities and improve wellbeing across the city.
- 1.10 Families of children under 5 have access to a range of services from health, social care and education. Through the lifetime of the original Best Start Early Years' Strategy there have been fundamental changes and developments to these services: -
  - The Local Authority now has responsibility for commissioning 0-19 Public Health services following regulations passed in 2017.
  - Our Children's Centres are developing into Family Centres with an all age approach.
  - A new approach to access to early help has further reinforced early years' partnerships.
  - The partnerships at the foundation of the Early Years Centres of Excellence are being developed and strengthened.
  - Our reputation as a Baby Friendly City continues to grow. Sheffield is the first Local Authority to receive the Unicef Baby Friendly Gold Award

- 1.11 A commitment to effective partnership arrangements remains an important focus for early years' work in Sheffield, particularly in responding to increased vulnerability.
- 1.12 Progress is being made on developing locality based community paediatric service working alongside universal services including Family Centres to identify children who are vulnerable by virtue of disability, disadvantage, safeguarding issues, chronic illness or being looked-after and intervening at the earliest possible point to provide evidence-based care and improve outcomes. Where possible the intention is to provide care in localities close to home through an integrated child development service.
- 1.13 Integrated working is an increasingly important strategic driver for improving health and wellbeing. Accountable Care Partnerships (ACPs) have been introduced, bringing together organisations to improve population health by joining up services and tackling the causes of ill health. Shaping Sheffield is the ACP's strategic plan for improving population health and wellbeing which includes promoting prevention and developing resilient families and communities help all children have the best life chances.
- 1.14 Both Shaping Sheffield and the Joint Health and Wellbeing Strategy recognise that most poor health experienced in later life results from what happened in earlier stages in life. 'A Great Start in Life will bring together one single approach for early years' work to ensure that the citywide vision and strategic priorities for children aged 0-5 years and their families is the same.
- 1.15 Preventing ill health requires an all-age approach involving joined up practice and partnerships across all sectors, and most importantly communities. People's own strengths and networks, their connections, assets and resources are paramount to wellbeing and improving quality of life. As part of this work we will improve the availability of high quality information and advice for families to improve equity of access, build resilience and self-efficacy.
- 1.16 We will continue to collaborate with partners and communities to build places and deliver services that support and sustain these factors. This includes listening to the people where they live to design support around their needs, cutting across agency boundaries where necessary.
- 1.17 The range of factors are complex which can impact on a child's development, their social and health economic prospects and increase their vulnerability to physical and mental health problems, criminal involvement, substance misuse or exploitation.
- 1.18 In Sheffield the challenge of working together to address these multiple factors is tested further by the presence of significant social and health inequality. We know that most important protective factor for children is

the quality of parent infant interactions. By building on our existing work with neighbourhoods, we are committed to empowering all families to provide a healthy, stable and nurturing environment for their children, and transforming the way we work so that we can offer everyone the help they need.

- 1.19 Since the Best Start Strategy was launched in 2015 a considerable amount of work has been taken forward to implement and drive forward change in early years' services. Actions have been progressed through existing partnerships and by building new relationships across public, voluntary, the private sector, with communities and with schools. We have designed ways of working which identify and respond to the needs of all families in order to ensure service provision matches needs.
- 1.20 Consultation with stakeholders re-affirmed that the following outcome areas identified in the original strategy remain appropriate:
- Babies and young children are safe and in good health
  - Parents are resilient and any mental health issues are addressed at the earliest opportunity
  - Brain development in the early years is optimised by secure attachment and quality relationships
  - Children are ready for school and life
- 1.21 Ongoing work will continue on the areas of action already in place, many of which are embedded in other existing strategies including support for children with special educational needs, learning disabilities and children on the edge of care.
- 1.22 Particular priorities will include:
- Increasing continuity, quality and choice in line with 'Better Births'
  - Reducing key health risk factors –smoking in pregnancy, maternal healthy weight, perinatal mental health
  - Offering evidence led early intervention in the first 1001 years of life
  - Establishing an infant mental health therapeutic offer
  - More integrated workforce development
  - Developing trauma informed practice
  - Increasing take up of early learning – 2 year FEL
  - Improving Speech and Language Therapy
  - Developing a high quality SEND offer for Early Years
  - Increasing referrals from PVI to early help services and 0 – 19 services

- 1.23 To manage the progress of the strategy, a board has been formed with wide representation including CCG, midwifery, 0 – 19 health service, early years' education and childcare providers, CAMHS, Perinatal Mental Health Services and early years' SEND. The Board is jointly Chaired by SCC and 0 – 19 Health representatives. The Board will report to the ACP and to the Children's Health and Wellbeing Board.
- 1.24 New detailed delivery plans for 'A Great Start in Life' will be developed including measurable targets and indicators to monitor progress and show that meaningful changes are being achieved.
- 1.25 'A Great Start in Life' will also be considered by the Children, Young People and Family Support Scrutiny and Policy Development Committee in the next few months to review progress.

## **2. HOW DOES THIS DECISION CONTRIBUTE ?**

- 2.1 'A Great Start in Life' will contribute directly to the following priorities in our Corporate Plan:
- **Better health and wellbeing** – through the ambition to ensure all children in Sheffield have the opportunity for a healthy start from birth and are supported to achieve their potential at school and into adulthood
  - **Tackling inequalities** – for example by improving early identification and of need and referral to support and reducing unwarranted variation in access to services
  - **Thriving neighbourhoods and communities** – by working collaboratively with all partners to build places and deliver services which support and sustain our communities

## **3. HAS THERE BEEN ANY CONSULTATION?**

- 3.1 The strategy review took place over a 12 month period beginning in September 2018 with workshops designed to promote discussion, debate and consultation with stakeholders across the city. A summary of the process and findings is attached to this report (Appendix A).
- 3.2 Further consultation with Health and Education partners, parents and carers of under 5s and community/voluntary sectors took place in Family Centres across the city in September 2019. Achievements and progress was reviewed and gaps identified. The final strategy reflects the views and ambitions shared during those events. The revision of the strategy has been a collaborative venture and as a result the Strategy "belongs" to all.

## **4. RISK ANALYSIS AND IMPLICATIONS OF THE DECISION**

### **4.1 Equality of Opportunity Implications**

4.1.1 Decisions need to take into account the requirements of the Public Sector Equality Duty contained in Section 149 (1) of the Equality Act 2010. As part of documenting the meeting of the requirements of the duty, we have carried out an Equality Impact Assessment (EIA). Section 149 (1) identifies the need to:

- eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Act
- advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it
- foster good relations between persons who share a relevant protected characteristic and persons who do not share it

4.1.2 The Equality Act 2010 Section 149 (7) identifies the following groups with a protected characteristic: age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion and belief; sex and sexual orientation.

4.1.3 An EIA has been completed and highlights that 'A Great Start in Life' will bring positive benefits for Sheffield's communities and staff working across the city delivering early years' support.

4.1.4 By developing one single delivery model providing locality based services including universal and targeted/specialist support, key opportunities will be made available to identify families at risk or in need of greater support and ensure the care provided is timely, accessible and appropriate.

4.1.5 Health for women before, during and after pregnancy sets the foundation for pregnancy and the lifelong health of their children. Poor maternal health increases the risk of birth complications, stillbirths, low birth weight and poor mental health for the child, with the risk of ongoing problems throughout adult life. By developing evidence based, joined up services during pregnancy which include targeted support for women at risk of poorer outcomes, we can ensure the best start for a woman and her child.

4.1.6 Evidence shows that the early caregiving environment, and in particular parenting mitigates around 50% of the impact of many of the contextual factors (for example, poverty) which influence children's early development. Seeing mothers, fathers and carers as partners is key, they are the experts about their child/children lives and parenting is the key factor influencing children's social and emotional development. Parental confidence and engagement is important in terms of early speech, language and learning.



4.1.7 Social stresses including poverty, poor housing and unstable employment, increase pressures on parents and families which act against their ability to create a safe, healthy and nurturing environment for their children. In Sheffield 35.2% of the population live in areas classified as amongst the most deprived in England (the average is 20%) and the 0 – 5 years age group has high levels of vulnerability . Children exposed to these factors are less likely to get off to a healthy start from birth and are more likely to experience poorer outcomes by the time they start school, compared with children living in less deprived circumstances. One of our main objectives is to understand what role everyone can play in seeking to reduce inequalities, so that we can mitigate adverse risk factors for vulnerable groups and improve wellbeing across the city.

4.1.8 There are wide variations between Sheffield's 28 wards with regard to ethnic diversity and the breakdown of the various ethnic groups. We will engage with and listen to our different communities, and use population data to improve outcomes for all our babies, infants, young children and their families. Early years' services will be developed to be culturally competent and sensitive to the needs of different communities to ensure a positive care experience. Models of care will be designed to improve access to services for families from disadvantaged communities or with complex social factors.

#### 4.2 Financial and Commercial Implications

4.2.1 There is no specific budget attached to the strategy and work under the strategy principles is being delivered within existing resources. Partner organisations continue to resource ongoing activity and services to support families with children aged 0-5.

#### 4.3 Legal Implications

4.3.1 There are no direct legal implications in adopting the strategy. Whilst there is no legal requirement to have a strategy, there is a Government expectation that progress will be made. Any recommendations or activity from the detailed work plans of the strategy will consider potential legal implications as part of the usual organisational processes, as required.

#### 4.4 Other Implications

4.4.1 There are no specific other implications for this report. Any recommendations or activity from the detailed work plans of the strategy will consider potential implications as part of the usual organisational processes, as required.

## **5. ALTERNATIVE OPTIONS CONSIDERED**

- 5.1 **Not have a strategy** – Although it is not a legal requirement to have with a strategy 'Building Great Britons. Conception to Age 2: First 1001 Days All Party Parliamentary Group' provides clear recommendations for local partnerships to promote optimal development in the first 1001 days to give every baby the best possible start in life. Doing nothing would represent a reputational risk to Sheffield City Council with fundamentally adverse consequences for the health of children and their families.

## **6. REASONS FOR RECOMMENDATIONS**

- 6.1 'A Great Start in Life' is integral to Sheffield's wider health priority of enabling good health and wellbeing throughout life. It is aligned with our vision for a fairer, inclusive city and one that builds on the strengths of communities and citizens to create the best environment for all our children. It has major implications for the city's long term outcomes including educational attainment and community cohesion.

**Consultation activities to support the development of the Sheffield's Great Start Strategy**

**August 2018**

An initial workshop was held to review the 2015 Best Start Strategy. Attendees were people who were originally involved in the development of the overarching BEST Start Strategy. The group membership was made up of leads from the following services:

- Midwifery
- 0 – 19 Health Services
- Child and Adolescent Mental Health Services
- Community Early Years Providers
- Early Years Quality Team
- Early Years ( Family Centres)
- SCC Parenting Team
- Public Health
- Sheffield NHS Clinical Commissioning Group

The group were tasked with collectively considering the following questions;

- What were our achievements under this strategy?
- How did the strategy impact positively on under-fives in Sheffield?
- What needs to change?
- What is new or emerging in terms of policy or practice for under-fives and their families ?
- What are our key outcome ambitions for under 5s and their families in Sheffield?

The results of the consultation informed the first draft of the strategy and provided agreement to the key outcome areas for the refreshed strategy.

**25<sup>th</sup> September 2018**

A further Stakeholder event was held with the above Stakeholders to consult and agree on priorities in the key outcome areas of

- Babies and young children are safe and have good health
- Parents are resilient and any mental health issues are addressed at the earliest opportunity
- Brain development in the early years is optimised by secure attachment and quality relationships
- Children are ready for school and life

**29<sup>th</sup> May 2019**

A follow up meeting was held to consult on developing strategy with the above Stakeholders which informed further development of the strategy content.

**23<sup>rd</sup> September 2019**

City Wide locality based events were held based in all 7 Family Centres across the city. These were full day events including activities for children taking an "Open day, drop in" approach to maximise on the opportunities to showcase the centres to families and professionals whilst gaining views on the strategy and key priorities. Attendees were asked to comment on the key priorities and also tell us what they would like to see happening in Sheffield to help and support under-fives and their families.

The sessions were informal using post its, flip charts, comments tress etc. and so actual numbers were not gathered. We were able to gather a great deal of comment and ideas from Parents,

Carers, Social Workers, Employment Specialists, Midwifery, Health Visitors, Intervention Workers and community workers.

A snapshot of views gathered from the open days:-

- Very long waiting lists for CAHMS / Ryegate for child mental health e.g. 3 years for child psych, lack of support during the waiting time.
- Having a child with SEND can put extra strain on a family and sometimes we need more help and support. ( Parent)
- Let's make systems easier to navigate – keep things simple ( professional)
- Information at the right time. Really helped me not to feel isolated ( parent)
- The Parenting Team would relish more opportunities to work with Early Years families.
- 10 out of 10! My first chat today with an infant feeding peer support worker. (Parent)

### **Summer 2019**

In addition we sought input from parents and carers throughout the summer of 2019 via conversations in Family Centre groups such as the Light Group, baby massage groups and Preparation, Birth and beyond to canvas opinion on the strategy priorities and what they would like to see in place for parent in Sheffield.

A snapshot of views gathered from parent groups:-

- Improved signposting for support including benefits advice
- More toddler groups
- We have good services, very supportive doctors, Health Visitors and schools
- Please Improve mental health support for parents with children aged 2+ years
- Groups later in the day would be good. My baby is lazy☺
- I would like a back to work group and Support applying for jobs

Similarly we consulted with professional groups throughout this period via a professional's questionnaire which asked for opinions on the key priorities and their commitments to help to address the priorities.

A snapshot of views gathered from professional groups:-

- Ensure pre pregnancy advice and information is widely available. ( Midwifery )
- Great that we are being consulted, always need to review what we are doing as the demographics and needs of Sheffield change.
- Really good work happening but communication and planning between services still needs to improve.
- Early Intervention is improving in the city, and will hopefully continue to do so.
- There are lots of services provided to families in Sheffield. We all still have difficulties engaging hard to reach families, isolated families etc.
- I feel that Sheffield currently delivers a good service to children & families, but there is more to be done in reaching more children & families
- We will plan with our partners to make Sheffield aware of (ACE's) Adverse Childhood Experiences and the impact this has on a child as they grow and learn

The key themes emerging from all consultation activities support the stated objectives of the Strategy and its key outcome areas:-

- More and earlier support for good mental health of parents and under fives.
- A commitment from professionals to collaborate and innovate.
- A desire for earliest help and support.
- Accessibility of services – more of what works.
- Sheffield delivers good services to the Early Years and their families but can always do better – a view shared by parents and professionals alike.