

# HEALTH AND WELLBEING BOARD PAPER FORMAL PUBLIC MEETING

Report of:	Greg Fell
Date:	23 <sup>rd</sup> June 2022
Subject:	Early Years Development Workshop – report to Board
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# **Summary:**

This paper summarises key themes from the Health & Wellbeing Board sponsored workshop focused on a Great Start in Life that took place on 28th April 2022, with a particular emphasis on points that will be of particular interest to the Board in its role as leader of the health and wellbeing system in Sheffield.

It also highlights a number of specific asks of and questions for the Board, and asks the Board for its view on how it would like to see this work proceed.

# **Questions for the Health and Wellbeing Board:**

- What should the role of the Board be in relation to the refreshing of the Great Start in Life Strategy?
- What support can the Board give to work addressing the issues highlighted in the workshop?

### **Recommendations for the Health and Wellbeing Board:**

The Board are recommended to:

 Agree to sponsor the development of the refreshed Great Start in Life Strategy, with a view of all partners' roles in delivering success in this area;

- Consider the Board's role in making the case for investment in early years at all levels, including the development of shared Sheffield narrative;
- Take responsibility for representing early years in city-level strategic development.

# **Background Papers:**

Health & Wellbeing Board: Great Start in Life Workshop Draft Report

# Which of the ambitions in the Health & Wellbeing Strategy does this help to deliver?

Ambition 1: Every Child achieves a level of development in their early years for the best start in life

Who has contributed to this paper?

Marie McGreavy

# **GREAT START IN LIFE WORKSHOP REPORT**

#### 1.0 SUMMARY

- 1.1 This paper summarises key themes from the Health & Wellbeing Board sponsored workshop focused on a Great Start in Life that took place on 28<sup>th</sup> April 2022, with a particular emphasis on points that will be of particular interest to the Board in its role as leader of the health and wellbeing system in Sheffield.
- 1.2 It also highlights a number of specific asks of and questions for the Board, and asks the Board for its view on how it would like to see this work proceed.

#### 2.0 HOW DOES THIS IMPACT ON HEALTH INEQUALITIES IN SHEFFIELD?

- 2.1 The evidence tells us that development in the early years sets the trajectory for many in life, with poor development having knock-on implications for school readiness, ability to benefit from the education system, and then into longer term health outcomes and whole life chances. An approach to early years development that delivers for everyone in Sheffield is a critical building block in the work to reduce inequalities in health across Sheffield.
- 2.2 We know from nursery and school settings that the COVID pandemic has had a significant impact on children's 'school readiness' including delayed language development, emotional behaviour, wellbeing and mental health and this will no doubt impact on inequalities in the city.
- 2.3 There is an opportunity for a system wide response which could include innovative and differently designed services focusing on prevention, early intervention for those in greatest need. The importance of analysing where need is greatest is being developed further with a 'Greatest Need Quilt' model reviewing children and young people's indicators to evidence where we may need to change how we deliver services for children, young people and families and increase our focus on early intervention and prevention.

## 3.0 WORKSHOP OUTLINE

- 3.1 The workshop was led by by Nicola Shearstone (Head of Commissioning Early Support and Prevention, SCC) and Marie McGreavy (Strategic Commissioning Manager, SCC). It began with a scene-setting presentation on the current context, leading into three break-out discussions sessions, each of which was preceded by a presentation aimed at generating relevant discussion. The three breakout sessions covered:
  - The short term challenge, looking at school readiness and the impact of COVID-19;
  - The longer term, looking at the need to refresh the Great Start in Life Strategy, and
  - What the Board and wider system can do to support delivery of the ambition.

3.2 These were followed by a plenary session to feedback and discuss key points from these discussions.

#### 4.0 KEY THEMES FOR THE BOARD TO CONSIDER

4.1 Discussion in the break-out sessions was wide-ranging, and covered issues of leadership, strategy and system working arrangements, and also detailed operational questions. This paper will focus mostly on the former as areas where the Board should be seeking to influence.

# 4.2 There was focus on the importance of building partnership working and collaboration:

- Better joining up across services was highlighted, with Health Visitors identified as key contacts. Specific points included the need for better joining up between Health Visitors and nursery staff around two year integrated reviews, and the need to reduce the divide between health services and education, both in early years settings and schools.
- The importance of working through natural partnerships at local level was discussed and recognition that this will look different in different areas. Physical colocation was identified as important in this, with some noting that the pandemic and associated remote working has impacted working relationships. It was suggested that there are opportunities in estate programmes to look at supporting, for example in work looking at GP centres.
- There was desire to broaden the range of partners involved in this work, with a view that statutory organisations don't need to always have the answer and recognition that others may be better placed to deliver or respond.
- This linked to a discussion around the role of services in supporting the development of community resilience and the role of VCS organisations in this. There were also points made about the importance of building links with BAME communities.

# 4.3 Groups also talked about the **development of strategies**:

- In relation to the refresh of the Great Start in Life Strategy, and reflecting the discussion above, there was agreement that it would be good to have more partners involved in writing it;
- There was discussion of the importance of having a common narrative on the critical importance of early years development in the wider context of Sheffield's future, its economic strength and ability to thrive; and also to tell our success stories such as work on infant mortality;
- The importance of joining up and aligning with other strategies was noted, with particular reference to the Great Start in Life Strategy as the principal delivery mechanism for Ambition One in the Joint Health & Wellbeing Strategy;

- Relatedly, there was discussion of the link with the forthcoming City Strategy, and the importance of a specific role for the Board in this to act as voice of early years in these discussions.
- 4.4 Related to the above there was discussion around **funding and investment**:
  - Groups talked about the need to make a purposeful shift towards early help and prevention investment, and to reframe the narrative around the social benefits of investing in early years;
  - Linked to this, they talked about the need to keep faith in that investment and that it will pay off over the long term, with this linked to the need for a strong common story to be owned by all in this area.
- 4.5 Linked to the points above about joined up working there was discussion around **data** and intelligence:
  - Groups talked about the benefits of developing one single data system, with shared records to cover all of the 0-5 period;
  - This is linked to the importance of data sharing agreements and our ability to communicate across services.
- 4.6 There were specific concerns raised around **SEND and Mental Health support**:
  - The need for investment in this area was highlighted with a particular focus on staffing;
  - This area came up specifically in relation to data and intelligence, with suggestions that better data and intelligence, and sharing of this, could be helpful in earlier identification of issues;
  - There was discussion of the importance of understanding Adverse Childhood Experiences and build trauma informed approaches to working.
- 4.7 Finally there were a set of specific asks of the Board:
  - It was suggested that the Board have a role in campaigning to central government around the value of investing in early years;
  - There was a request for the Board to "start at [the early years] end of the telescope" in all their work in order to make a difference;
  - The Board were asked to take responsibility for the idea that short term measures are not a solution and influence change with this in mind;
  - To focus on city-level strategy and around making investment together, including the voluntary sector in this and recognising the difference communities can make;
  - To take a role in ensuring there is shared buy-in across the partnership in this work.

#### 5.0 QUESTIONS FOR THE BOARD

5.1 In response to the above the Board are asked to respond to the above points and consider the following questions:

- What should the role of the Board be in relation to the refreshing of the Great Start in Life Strategy?
- What support can the Board give to work addressing the issues highlighted in the workshop?

# **6.0 RECOMMENDATIONS**

- 6.1 The Board are recommended to:
  - Agree to sponsor the development of the refreshed Great Start in Life Strategy, with a view of all partners' roles in delivering success in this area;
  - Consider the Board's role in making the case for investment in early years at all levels, including the development of shared Sheffield narrative;
  - Take responsibility for representing early years in city-level strategic development.