

Title of report: Update to the Board on the Best Start in Life Implementation Plan

Meeting: Health and Wellbeing Board

Meeting date: Monday 11 March 2024

Report by: Public Health Principal

Classification

Open

Decision type

This is not an executive decision

Wards affected

(All Wards);

Purpose

To provide an update on the progress of the implementation plan for the Board's strategic priority of 'Best Start in Life' (BSiL) – attached as Appendix 1

To receive feedback and approval from the Board for the proposed Performance Monitoring Framework - attached as Appendix 2

To receive feedback on the Outcomes Dashboard – report attached as Appendix 3 and the dashboard as Appendix 4

Recommendation(s)

That:

- a) That the Board considers the reports and notes progress to date;**
- b) That the Board considers how to ensure that all partnership organisations are clearly sighted on the implementation plan and reference it across their own strategies and plans.**

Alternative options

1. The Board could choose not to adopt the performance monitoring framework and outcomes dashboard but these are key to demonstrating delivery of the actions set out in the implementation plan in both the shorter- and longer-term and alternate evidence for doing this would need to be developed.

Key considerations

2. The purpose of the BSiL implementation plan is to specify the actions and activity that will improve the lives of the 0-5s and their families in Herefordshire.
3. There has been a considerable amount of engagement and development since the last Board meeting in December, notwithstanding leave of absence over the festive period.
4. Leads from across a range of partners and including council colleagues have been identified and confirmed against the actions listed in the implementation plan.
5. Each action has been 'tightened' up or modified slightly to ensure that meaningful, measurable targets are able to be set.
6. Targets against each action have been set or are in the process of being set.
7. A comprehensive 'performance monitoring framework' has been developed and shared with the Early Years Partnership/Best Start in Life Group, which is the group responsible for driving forward the implementation plan.
8. The 'outcomes dashboard' has been refined and developed further, although additional work with partners is needed to ensure that the 'actions, targets and outcomes' sequence is aligned, with each of these being ambitious but realistic within specified timescales and measurable.
9. A revised schedule of meetings has been put in place to ensure effective oversight and governance (post March).
10. Cross-referencing of actions, targets and outcomes relating to other policies, strategies and delivery plans has been undertaken to ensure consistency and eliminate duplication. Examples of where there is potential or likely crossover are the ICB's Local Maternity and Neonatal System strategy; early help and prevention strategy; Herefordshire and Worcestershire CYP Emotional Health and Mental Wellbeing strategy.
11. There is continued commitment and enthusiasm for BSiL from partners and a desire to ensure that all partnership organisations are clearly sighted on the implementation plan and reference it across their own strategies and plans.
12. The Community Paradigm approach, now called 'Herefordshire Together', has requested submissions from across Third sector organisations to apply for funding from public health monies allocated to support the Board's BSiL and Good Mental Health priorities, adhering to the underlying principles of the Joint Health and Wellbeing Board's Strategy (JLHWBS).

Community impact

13. The purpose of the BSiL implementation plan is to specify the actions and activity that will improve the lives of the 0-5s and their families in Herefordshire. One of the key principles upon which the JLHWBS was developed was that of involving our communities in any actions that are proposed which will be enhanced by the Herefordshire Together initiative.

Environmental Impact

14. There are no general implications for the environment arising from this report; however the plan includes a commitment to promote healthier eating and increase levels of physical activity through active travel, which in due course could have a positive environmental benefit.

Equality duty

15. Under section 149 of the Equality Act 2010, the 'general duty' on public authorities is set out as follows:

A public authority must, in the exercise of its functions, have due regard to the need to –

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

16. The public sector equality duty (specific duty) requires us to consider how we can positively contribute to the advancement of equality and good relations, and demonstrate that we are paying 'due regard' in our decision making in the design of policies and in the delivery of services. Our providers will be made aware of their contractual requirements in regards to equality legislation.

17. The principles of equality and the reversal of health inequalities are key strands of the plan.

18. To be effective in delivering good population outcomes and helping those most in need, the plan calls for intervention by working together at system, place, and community levels to tackle issues reflecting whole system priorities as well as specific concerns at the right scale.

Resource implications

19. There are no resource implications associated with this report. However, the resource implications of any recommendations made by the HWBB will need to be considered

by the responsible party in response to those recommendations or subsequent decisions.

Legal implications

20. Health and wellbeing boards are responsible for encouraging integrated working between health and social care commissioners, including partnership arrangements such as pooled budgets, lead commissioning and integrated provision.
21. Their purpose is to establish collaborative decision making, planning and commissioning across councils and the NHS, informed by the views of patients, people who use services and other partners.
22. The functions of the Health and Wellbeing Board are set out in paragraph 3.5.24 of the constitution.
23. The production of a Joint Local Health and Wellbeing strategy and delivery plan is a statutory requirement and therefore its endorsement and support is required.

Risk management

24. There are no risk implications identified emerging from the recommendations in this report. However, the delivery of these plans require system and collaborative working across all partners. Where possible, we have identified where activity is funded, but given the fiscal position across partners these will need to be kept under review.

Consultees

25. Consultation on action planning and setting targets undertaken with the Early Years Partnership/Best Start in Life Group and 1HP and action leads identified. Actions and targets to be refined and developed through April and May with these groups and the Children and Young People Partnership Board to ensure continued engagement, agreement and delivery of the plan.

Appendices

- Appendix 1 – BSiL Implementation Plan
- Appendix 2 – BSiL Performance Monitoring Framework
- Appendix 3 – Outcomes Dashboard Covering Paper
- Appendix 4 – Outcomes Dashboard

Background papers

None identified

Report Reviewers Used for appraising this report:

Please note this section must be completed before the report can be published

Governance	Henry Merricks-Murgatroyd	Date 29/02/2024
Finance	Karen Morris	Date 29/02/2024
Legal	Click or tap here to enter text.	Date Click or tap to enter a date.
Communications	Luenne Featherstone	Date 01/03/2024
Equality Duty	Harriet Yellin	Date 01/03/2024
Procurement	Lee Robertson	Date 29/02/2024
Risk	Click or tap here to enter text.	Date Click or tap to enter a date.

Approved by Hilary Hall Date 01/03/2024

Please include a glossary of terms, abbreviations and acronyms used in this report.