

# **Title of report: Update to the board on the Best Start In Life Action Plan**

**Meeting: Health and Wellbeing Board**

**Meeting date:**

**Report by: Public Health Lead**

## **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'.

## **Recommendation(s)**

**That:**

- a) **That the Board considers the reports and notes the progress to date including the outcomes dashboard.**
- 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 outcomes dashboard, but this is 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 outcomes for children 0-15 years across the county.
3. There has been a considerable amount of engagement and development since the last update to the Board in December.
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, measureable targets are able to be set.
6. Targets for each action have been set and leads feedback on progress through the Early Years Partnership Group.
9. A comprehensive 'performance monitoring framework' has been developed and shared with the Early Years Partnership Board. This is the board with oversight of the plan
10. The 'outcomes dashboard' has been refined and developed further, although additional work with our 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 measureable.
11. A revised schedule of meetings has been put in place to ensure effective oversight and governance.
12. Cross-referencing actions, targets and outcomes relating to other policies, strategies and delivery plans has been undertaken to ensure consistency and eliminate duplication.
13. There is continued commitment and enthusiasm for the 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.
14. The action plan (Appendix 1) has been RAG rated, with 32 actions on track, 19 with some delays/further work identified, 1 at risk and 3 complete.

## Community impact

15. The purpose of the BSIL implementation plan is to specify the actions and activity that will improve the outcomes of children 0-5 years. The plan support the Children Transformation work and ambitions in the Council plan.
16. The purpose of the BSIL is to collect and review data on the outcomes of 0-5 year olds, engage with and map local stakeholders, and produce recommendations that will support the improvement of improved health and outcomes in the early years and reduce inequalities. These recommendations will be reflected in updates to the action plan.

## Environmental Impact

17. There are no general implications for the environment arising from this report, however the plan includes support to increase physical activity through the healthy schools programme including through active travel which may have a positive environmental benefit.

## Equality duty

18. 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.

21. 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.

22. The principles of equality and the reversal of health inequalities are key strands of the plan. The MHNA will provide an assessment of our system need and our ongoing engagement with a wide range of partners will also support this. The completion of an Equality Impact assessment will be considered as we progress the plan.

23. 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

24. 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

25. In accordance with Health and Social Care Act 2012, 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.

26. The functions of the Health and Wellbeing Board are set out in paragraph 3.5.24 of the constitution.

## Risk management

<u>Risk</u>	<u>Mitigation</u>
That the community wellbeing survey and children & young people survey is not continued in order to monitor impact	Continue to raise awareness of the importance of these surveys
The children & young people's Mental Health & Emotional wellbeing partnership does not meet	The infrastructure to support childrens wellbeing and the activity within this plan will need to be reviewed

27. 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

28. Consultation on action planning and setting targets were undertaken with a range of stakeholders, the Early Years Partnership Group and 1HP with action leads identified.

### Appendices

Appendix 1 – BSIL implementation plan  
Appendix 2 – Outcomes Dashboard

### Background papers

'None identified'.

### Report Reviewers Used for appraising this report:

<b>Please note this section must be completed before the report can be published</b>		
Governance	John Coleman	Date 23/05/2024
Finance	Click or tap here to enter text.	Date Click or tap to enter a date.
Legal	S Evans	Date 22/05/2024
Communications	Click or tap here to enter text.	Date Click or tap to enter a date.
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**Please include a glossary of terms, abbreviations and acronyms used in this report.**

GMW – Good Mental Wellbeing

JLHWBS – Joint Local Health and Wellbeing strategy

1HP – One Herefordshire Partnership

MHNA – Mental Health Needs Assessment