

**JOINT HEALTH AND WELLBEING STRATEGY ACTION PLAN
MONITORING REPORT - MARCH 2015**

Outcome One: Every Child in Suffolk has the best start in life

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Priority 1.1: Early Intervention and Prevention

Objectives:

- A. Implement 'Making Every Intervention Count'**
- B. Promote good early parenting and child development**
- C. Roll out Great Cornard pilot using asset-based approaches with communities to develop solutions**
- D. Improve access to services for children and young people with autistic spectrum disorders**
- E. Support the Board to meet their responsibilities towards disabled children, young people and their families**

AREA OF FOCUS 2014/15	TIMESCALE	PROGRESS	RAG RATING	ISSUES/BARRIERS
IMPLEMENT 'MAKING EVERY INTERVENTION COUNT'				
The development of local multi-agency teams around a geography made up of one or more of the 18 clusters related to school pyramids	June 2015 for early adopter	The Sudbury area has been chosen as an early adopter and a programme of work and governance has been established. 'Connect' brings together police, health and social care services, county and district councils, the voluntary sector and community organisations. It spans services to children, families and adults.	A	A staged approach is likely needed to reach the ambition of a culture and practice, supported by co-location and integrated processes and systems, associated with fully efficient and effective multi-agency working.

AREA OF FOCUS 2014/15	TIMESCALE	PROGRESS	RAG RATING	ISSUES/BARRIERS
		Restructuring and bringing together of multi-disciplinary CYP services Suffolk-wide with effect from 1 April 2015 is an important first step in establishing multi-agency teams. Options to take multi-agency working to the next stage of integration in Sudbury are being considered.		
The development of joint commissioning arrangements across services for children and families	April 2015	Two papers have been presented to the Suffolk Commissioners Group, with agreement to look at common principles. A joint commissioning work plan for 2015/16 has been drafted.	A	
PROMOTE GOOD EARLY PARENTING AND CHILD DEVELOPMENT				
Increase the uptake in breastfeeding	April 2015	<p>'Families and Babies' (FAB) has been successful at tender to provide a paid and voluntary breastfeeding support service at West Suffolk Hospital, Ipswich Hospital Trust and in the community to April 2016, funded by Public Health.</p> <p>Public Health to fund the development of Waveney Breastfeeding App to support mothers across Suffolk.</p> <p>Ipswich Hospital Trust awaiting confirmation of Stage 2 UNICEF accreditation and West Suffolk Hospital Stage 2 to be completed by April 2015.</p> <p>Our cumulative yearly breastfeeding performance at 6 weeks post-delivery sits at 48.2% (0.2% above our target).</p>	A	Due to funding the service will offer universal support to all mothers but home visiting will only be available in areas of concern.
Reach Stage 1 UNICEF accreditation for CYP community integrated service	February 2015	Initial UNICEF accreditation visit planned for 17 th February 2015. There is a group of Health Visitors	A	Will require a full breastfeeding coordinator post to be funded to

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		and County Council staff working on an action plan in preparation for an accreditation visit. A UNICEF representative has met with representatives from Health, CYP and Public Health to devise an action plan to prepare SCC for stage 1 UNICEF Baby Friendly accreditation. The action plan is now being worked on.		enable SCC to achieve level 1. Arranging a date for the accreditation visit has proved to be problematic as UNICEF are very busy.
Full implementation of the Healthy Child Programme (HCP), delivering against the new national health visiting specification	April 2015	HCP model fully developed and being implemented. Delivery is dependent on continuing training and full workforce. Through Making Every Intervention Count (MEIC), integration is being progressed between health visitors and children centre services and management.	G	Training will be required to support staff undertaking new roles.
Complete the development of the New School Nursing model	April 2015	School Nursing model is still being progressed. Pathway work under development in partnership with other organisations. Awaiting new service specification 2015/16 from Public Health as the commissioner of this service.	A	Large project that involves multi-agency pathway development. Launch has been postponed to June 2015. Delay is due to resourcing issues and the abandonment by the DoH of a national School Nursing Specification.
Ensure the Family Nurse Partnership (FNP) programme is being delivered at full capacity	Ongoing	FNP service is currently working at 80% caseload capacity. DoH is very pleased with progress. Annual review and first year service celebration events both were well attended and went well.	G	This is due to a new member of staff having to complete training and current level of safeguarding.
Improve support for children with speech and communication difficulties	Ongoing	Agreement to jointly commission the service with health (EWCCG).	A	Introduction of personal budgets.

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Enhance opportunities to increase mobile working across health within the integrated teams		Progress is slow across health. Looking at opportunities to pilot mobile working such as the recent Sudbury relocation. System1 is now available on SCC computers and generally functioning well. Attempts to access the SCC desktop from an NHS computer without using a CITRIX token have stalled.	A	Funding available to health for not only initial equipment but ongoing maintenance. Lack of capacity at NSFT to address technical issues at their end continues. Some issues have re-emerged with regard to accessing System 1 on SCC computers and this is being addressed locally and corporately.
ROLL OUT GREAT CORNARD PILOT USING ASSET-BASED APPROACHES WITH COMMUNITIES TO DEVELOP SOLUTIONS				
Develop an asset-based approach in Ipswich		Public Health is working with CYP/ACS on working together on ABA.	A	This work has now been mainstreamed into the Connect Sudbury early adopter pilot, and will be reported by the Systems Leaders Partnership.
Develop an asset-based toolkit and training		Toolkit completed.	G	
Develop an action plan for rollout of the asset-based approach across the County		Public Health is working with CYP/ACS on working together on ABA.	A	
IMPROVE ACCESS TO SERVICES FOR CHILDREN AND YOUNG PEOPLE WITHY AUTISTIC SPECTRUM DISORDERS (ASD)				
Develop an integrated service hub on the Free School site if applicable		Bid submitted by National Autistic Society (NAS). Not successful at this round but have been urged to resubmit for the round scheduled May 2015. Site will be secured for this scheme until the outcome of this round.	A	Bid not agreed.
Publish the ASD integrated pathway as part of the 'Local Offer'		Mapped age-banded provision pathway across the county. The pathway is being developed to be delivered through the Access Unlimited website as a valuable information advice service.	A	Identifying suitable provider to web-enable the information.

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Explore opportunities for ASD educational provision in north Suffolk		Norfolk school have submitted a bid for an ASD Free School. They have attended the first round interviews.	A	Awaiting final decision.
SUPPORT THE BOARD TO MEET THEIR RESPONSIBILITIES TOWARDS DISABLED CHILDREN, YOUNG PEOPLE AND THEIR FAMILIES				
Adopt the Every Disabled Children's Charter		The Health & Wellbeing Board has agreed the Charter. Discussion scheduled to take place at Children's Trust Board.	A	
Keep the 7 commitments under review in the first year		Ongoing. An initial meeting of partners is to take place to assess current progress against the commitments in order to draft an improvement plan.		

UPDATE ON ISSUES AND BARRIERS AS REPORTED TO THE HEALTH & WELLBEING BOARD IN JULY 2014

ISSUE/BARRIER	PROGRESS	OUTSTANDING ISSUES
IMPLEMENT MAKING EVERY INTERVENTION COUNT		
Support the join up of work across Adult & Community Services (ACS) and Children & Young People's Services (CYP) around Building Resilient Families and Communities	In November 2014 ACS and CYP contracted jointly for an online services directory that can be used by all citizens in Suffolk to search for a range of services and support. This directory can be further developed with the addition of Personal Assistant finder and other functions that would benefit Suffolk's citizens.	
Key governance for Making Every Intervention Count (MEIC) programme as a whole	The MEIC Programme is progressing well. Key developments essential for the success of MEIC including the restructure of CYP services from April 2015, the implementation of the Signs of Safety programme, the Multi Agency Safeguarding Hub	What is the role of the Health & Wellbeing Board in relation to the governance of MEIC as a multi-agency programme?

ISSUE/BARRIER	PROGRESS	OUTSTANDING ISSUES
	<p>(MASH) and the development of Multi-Agency Teams (Connect in Sudbury Area), are progressing well. The increasing focus of the programme on multi-agency, cross-service, integrated working, some of which will be challenging to achieve, could benefit from additional support and drive that the Health and Wellbeing Board could provide.</p>	
ROLL OUT GREAT CORNARD PILOT USING ASSET-BASED APPROACHES WITH COMMUNITIES TO DEVELOP SOLUTIONS		
<p>Promote and support asset-based work and promote early years services to their staff, especially those who work with the more vulnerable families</p>	<p>An event took place organised between Suffolk County Council staff in the Early Years and Childcare service and Ipswich Borough Council (IBC) staff to share knowledge of the free early learning entitlement so IBC staff can promote the free entitlement to families with young children and assist with the take-up.</p>	

Priority 1.2: Promoting family focus across the work of all agencies including the Suffolk Family Focus initiative

Objectives:

- A. Agencies to give 'Troubled Families' priority access to services**
- B. Monitor the use of A&E for troubled families**

AREA OF FOCUS 2014/15	TIMESCALE	PROGRESS	RAG RATING	ISSUES/BARRIERS
AGENCIES TO GIVE 'TROUBLED FAMILIES' PRIORITY ACCESS TO SERVICES				
To ensure by maximising multi-agency working that as many families as possible are turned round to hit a Payment by Results outcomes (central government target of 1,150 families turned around by May 2015)	May 2015	The Suffolk Family Focus Team continues to perform very well and on 23 February completed processing the final 200 families to hit the required number of 1,150 families to be claimed for by 31st March 2015.	G	Completed.
To complete and start to use the new SFF family database to allow better interrogation of family data to ensure that wherever possible families are turned around in the next 12 months	May 2015	The SFF data team have been able to deliver the required performance to reach the target number of families set by Department of Communities and Local Government. The use of the new SFF data base has allowed this process to be much more efficient.	G	Completed.
To develop a system of family mentoring for SFF families so that when they are turned around and statutory services withdraw from the family, the family has access to support that will help them not to come back into statutory services and make them self-sustainable for the long term	May 2016	It has been agreed that the mentoring project will now be a major commissioning process for Phase 2 of the SFF programme, which starts in April 2015. The process will be open competition for voluntary and community sector organisations. The provision of family mentors provided by the Voluntary and Community Sector (VCS) will provide a process of early	G	To be completed as part of Phase 2 (1 April 2015 to 31 March 2020).

AREA OF FOCUS 2014/15	TIMESCALE	PROGRESS	RAG RATING	ISSUES/BARRIERS
		intervention that will stop them coming back into the statutory system and provide a demand reduction tool that will benefit all agencies long-term.		
MONITOR THE USE OF A&E FOR TROUBLED FAMILIES				
To continue to explore a process with CCGs and families that is not linked to safeguarding issues, so that consent from individual families is granted where appropriate so data can be obtained	May 2015	Discussions have been ongoing and in consultation with the NHS it has been agreed that SFF will have a System One terminal within SCC for use by the SFF team. Access to family data will only be by consent and this process is currently still to be agreed.	A	None
To review the current SSF consent forms to include an agreement to share limited health information of a non-personal update	May 2015	The consent forms are still under consideration and future work has to take place with Health staff to ensure that the consent is appropriate and families understand what they are consenting to. The data team leader for SFF is leading this work.	A	None
To deliver an outcomes plan for Suffolk that is linked to the new national troubled families criteria	April 2015	A draft Outcomes plan has been produced after 6 workshops with partners to identify the best way to measure a sustainable outcome and what it may look like. The outcomes plan is to go out for wider consultation in March.	A	None

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ISSUE/BARRIER	PROGRESS	OUTSTANDING ISSUES
AGENCIES TO GIVE 'TROUBLED FAMILIES' PRIORITY ACCESS TO SERVICES		
All agencies and organisations agree to provide and share data (with the appropriate safeguards, via data sharing agreements) with the Suffolk Family Focus team	This work is ongoing and with the help of the new SFF Board, which includes all main partners, this work should be progressed. This work is also linked to the Outcomes plan as data to demonstrate the sustainable outcomes will be needed to provide evidence of progress.	None
The Clinical Commissioning Groups (CCGs) and the Norfolk & Suffolk Mental Health Trust provide a nominated person to explore how SFF families can be highlighted on health systems so better joint working with families can take place	The SFF team have now a lead link (Steve Painter) from the NHS who has provided a good level of communication and allowed progress to be made.	Completed
All agencies, where they are involved with an SFF family, are asked to prioritise their interventions with these families to ensure that multi-agency working is at its best to provide the best outcomes for the family and support the drive for positive Payment by Results outcomes	The completion of the target for Phase One is evidence that the multiagency approach has worked.	Completed
MONITOR THE USE OF A&E FOR TROUBLED FAMILIES		
CCGs provide a nominated person to work with the Suffolk Family Focus team to explore how SFF families can be highlighted on A&E systems so data can be shared where consent is agreed with the families	The SFF team have now a lead link (Steve Painter) from the NHS who has provided a good level of communication and allowed progress to be made and to understand how this data may be collected in the future.	Completed

Priority 1.3: Supporting parents to improve their own circumstances

Objectives:

- A. Ensure effectiveness of parenting support in Suffolk
- B. Reduce risks associated with hidden harm
- C. Support development of parenting led hubs and networks

AREA OF FOCUS 2014/15	TIMESCALE	PROGRESS	RAG RATING	ISSUES/BARRIERS
ENSURE EFFECTIVENESS OF PARENTING SUPPORT IN SUFFOLK				
Extend the Early Home learning service to benefit a wider range of vulnerable children and their families, and incorporate this with a childcare brokerage service to help the most vulnerable families take up their free early learning entitlement	September 2014	A new service: 'Early Learning Together' was introduced to provide a home-based early education service for the families of pre-school children with two areas of delay <u>plus</u> concern around the parent/carer's ability to engage effectively with the child's early learning. The early learning takes place in the parent/carer's own home and uses the principles of the Early Years Foundation Stage (EYFS) and Portage* strategies in order to help the child and family develop skills to learn together, play together, participate and be included in the community. The worker will then support the parents to access appropriate free early learning when the child is eligible.	G	Cross training staff remains a priority and various plans to make sure links with social care teams during the MEIC are underway.
Improve access to information online for parents in order to improve access to Early Help, including self-help and a		Further improvements and developments through the parenting hub have been made including new promotional materials and a	A	Further work to improve online access for families is planned, including the development of web statistics

AREA OF FOCUS 2014/15	TIMESCALE	PROGRESS	RAG RATING	ISSUES/BARRIERS
range of services through the Family Service Directory		development of a Parenting Hub logo. In November we launched an online checker so parents could check if they were entitled to free early education for their two year-old child. Between November 2014 to 18 th Feb 2015, 865 applied for 2 year-old funding and 598 of these were found to be eligible.		reporting dashboards so we can closely monitor the use of the site by citizens.
Ensure the Family Service Directory is 'Local Offer' compliant so that families with children with special educational needs and disabilities (SEND) can access a range of services, guidance and information online	September 2014	The Family Service Directory has been updated to include a section for service providers to add their local offer information. In addition, a "widget" has been created which can be deployed onto the Access Unlimited website which will allow users to search for services that are part of the local offer.	A	Progress has been slow due to the complexities of partnership working and the requirement for coproduction. But progress is being made. It remains a priority to get all service providers especially schools and early years setting to comply with the local offer requirements by adding their details to the Family Service Directory and keeping relevant information about SEND on their own websites.
Deliver training and workforce development opportunities for the early years and childcare sector that enable them to more effectively meet the needs of the most vulnerable children and their families, i.e. supporting families in the universal services	February and March 2015	Completed. 3 'Improving outcomes for children in the EYFS' courses have been fully booked. The training has focussed on working effectively with vulnerable and disadvantaged children and their families. 3 'Early Help' events will take place in March 2015 and will focus on the vital role Suffolk early years providers play in enabling early help for our youngest children and their families.	G	Poor take-up for the Early Help event in Lowestoft.

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		As a result of the planned opportunities providers are demonstrating improved knowledge and skills in this important aspect of their work as providers of a universal service.		
With the Workforce Development team, identify training and development needs to practitioners working with parents and organising appropriate training and support (e.g. peer mentoring networks)	September 2015	Parenting team being expanded as part of MEIC, final composition of team will not be known before May 2015. Planning underway for facilitator training for new members of team as required. Continuing work with workforce and area teams to identify training needs of other practitioners. Parenting team offering facilitator training and mentoring for Strengthening Families, peer mentoring for Triple P, developing this for Webster Stratton. Network day being planned for Caring Dads staff in April – parenting team continues to coordinate multi-agency facilitators for this programme. Local programme planning and network meetings continue to be run by Area Parenting Coordinators. Plans for offering workshops for practitioners working with parents July – August 2015.	A	Uncertainty expressed by practitioners about future capacity to deliver parenting interventions in new structure means fewer programmes planned for summer term 2015.
Parenting Co-ordinators work with other teams and agencies to offer workshops and drop-ins for parents which complement the core offer of parenting programmes	Ongoing	Parenting team offer Triple P seminars for parents of 0-11s and teenagers in schools and other venues – parents do not need to book, and all receive a detailed ‘tip sheet’ on aspects of positive parenting. Family workers running drop-ins in several areas in West Suffolk.	G	

AREA OF FOCUS 2014/15	TIMESCALE	PROGRESS	RAG RATING	ISSUES/BARRIERS
		Excellent attendance for some themed workshops e.g. around autism. Workshops and talks are also offered through parenting hubs depending on parent choice.		
REDUCE THE RISKS ASSOCIATED WITH HIDDEN HARM				
Produce a Suffolk Hidden Harm Strategy to reduce the negative consequences for children and families experiencing hidden harm, with the aim of changing practice to facilitate early identification and access to support	December 2015	Hidden Harm Needs Assessment will commence April 2015 covering the three factors of parental substance misuse, parental poor mental health and domestic abuse within the family setting. The findings of the needs assessment will inform the development of a strategy.	G	Access to data and availability of data across the system may prove difficult in some cases.
Explore how best to work with all partners in raising awareness with their staff about hidden harm and what to do when it is identified, and implement a campaign in relation to this	August 2015 June 2015 As per action plan	A publicity campaign on the consequences of parental alcohol use is planned for mid -year – working with partners to ensure messages are appropriately worded for intended audiences. A conference is planned for the 8 th June for practitioners working with children and adults on foetal alcohol syndrome, impact and good practice in service response. The Hidden Harm Steering Group has renewed the vision and action plan for 2015 to 2017, included within which is the responsibility to raise awareness within Group member’s organisations.	G	The prevalence of foetal alcohol syndrome in Suffolk is unknown but the Hidden Harm needs assessment will hopefully give us information on this.
Launch the revised ACCORD protocol, establish sustainability of its use and monitor its effectiveness	May 2015	The Protocol has been agreed by the organisations cited within the documentation. A series of briefings is now in progress across all	G	None

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		staff groups to raise awareness. The Protocol will also be promoted through practitioner forums and associated training on an ongoing basis.		
SUPPORT DEVELOPMENT OF PARENTING LED HUBS AND NETWORKS				
Work with providers of parenting support both inside and outside the County Council to coordinate provision and publicity via the County Council's parenting-hub website	Ongoing March 2015	Programmes offered by CYP and other agencies inside and outside SCC are advertised on the programme calendar on the parent hub website. Parenting team liaise with other providers at local and county level, including in planning meetings to ensure best use of resources and avoid duplication. Update on range of parenting services across Suffolk due to be circulated March. Working groups continue with Borough and District Councils to support parental engagement in schools as part of Raising the Bar, and with other providers of programmes to further coordinate and ensure parents as aware as possible for range of support available.	A	Capacity issues due to restructure and demands of current evaluation on impact of parenting programme have meant less time spent on this at a county level Dec 2014- Feb 2015, but this will be addressed from March.
Develop parenting hubs in other localities	Sept 2015	Parent hubs led by Area Parenting Co-ordinators (APC) with other staff from integrated teams and schools running in Felixstowe (day and evening), Gt Cornard, Saxmundham. Hub led by IBC run in West Ipswich. APCs developing new hubs in several schools in partnership with school staff. These complement parenting programmes, for	G	

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		example providing a sense of ongoing support when programmes are completed so that gains are more likely to be maintained, or providing an accessible alternative for parents who don't need more intensive group support. As well as the social/networking aspect, the hubs offer talks and discussions on topics chosen by parents and encourage greater parental involvement in schools.		

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ISSUE/BARRIER	PROGRESS	OUTSTANDING ISSUES
ENSURE EFFECTIVENESS OF PARENTING SUPPORT IN SUFFOLK		
The Board can support the positive promotion of parenting programmes and other parenting interventions to increase awareness among parents and professionals, and to reduce negative attitudes about seeking information and support, by referring professionals and parents to the online information at www.suffolk.gov.uk/parents	Professionals using online information as evidenced by feedback and queries to the parenting inboxes. Some parents also using email for queries about support available.	Recent focus groups reveal lack of parent awareness of the range of information available on the website – more signposting is still needed. Current evaluation of impact of parenting programmes by external consultant commissioned by Public Health will include relevant recommendations.
REDUCE THE RISKS ASSOCIATED WITH HIDDEN HARM		
Develop a cross-agency mechanism for collecting evidence about the prevalence of hidden harm and impact of interventions to inform future service development and integrated working. Board members can share information about what their organisation offers in relation to Hidden Harm, the level of activity and outcomes achieved	The Hidden Harm Needs Assessment will inform this development.	

ISSUE/BARRIER	PROGRESS	OUTSTANDING ISSUES
Have more people trained to deliver the M-PACT programme from different agencies to foster sustainability of delivery and to increase referrals to the programme	This has not progressed.	The procurement of an integrated drug and alcohol service for Suffolk has resulted in a new provider taking over the contracts from April 2015. The potential for delivery of M-PACT or equivalent is under discussion.