

A Better Start – A Better Future for Blackpool's Children

Project Plan

Annex C: Project Implementation

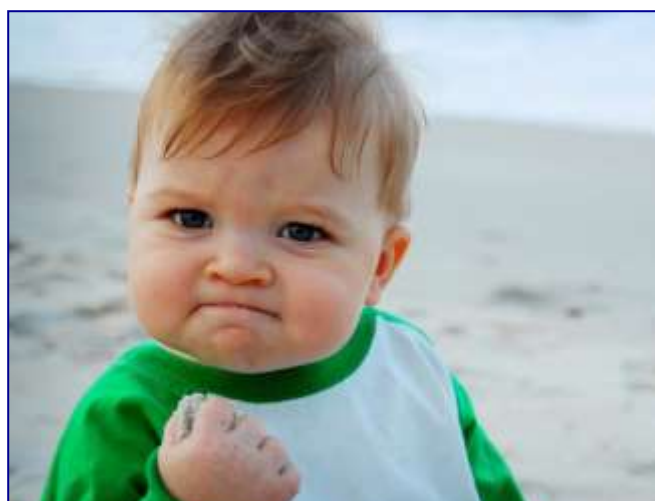
Our vision is to give every new baby in Blackpool a better start in life, helping them enjoy the early care and nurture they need for healthy development and to be ready for school

This section covers our 'blueprint for change' in Blackpool, describing the four pillars of our distinctive Better Start approach and setting out the detail of our plans for programme delivery.

Our community is united in our ambition to give every new baby in Blackpool a better start in life. We do not underestimate the scale of the challenges we face. But we are determined to seize this moment to make a decisive change and to transform the life chances of our youngest children and families.

OUR COMMITMENTS TO THE CHILDREN AND FAMILIES OF BLACKPOOL

- We will transform the way local services are delivered, putting children and families first
- Every expectant mum and dad will have access to high quality antenatal education
- Every new parent will have opportunities to meet other parents in safe attractive community spaces
- Every new parent will have the information and advice they need to foster good health and readiness for school
- Every mum under twenty will be able to access the Family Nurse Partnership
- We will increase access to early help services for babies in families affected by drug and alcohol, mental illness and domestic abuse problems
- We will radically reduce the risks of abuse and neglect of babies
- We will become a national beacon for early child development



"Babies born in Blackpool face some of the highest levels of adversity seen anywhere in the country. Yet there is a striking passion and determination in the local community to turn things around. I am excited and inspired by the possibility for change".

Peter Wanless, Chief Executive, NSPCC

"The only way we can change things is by working together."

Parent

"We are committed to developing innovations that can be scaled out across the world. We want to be a place where people come to see how things should be done."

Neil Jack, Chief Executive, Blackpool Council

A BETTER START FOR BLACKPOOL: OUR BLUEPRINT FOR CHANGE

Delivering our bold vision requires a **cohesive and committed partnership** and a **strategic programme of action**.

Our partnership brings together all players – voluntary, community, private and public - who can make a difference to young children's lives. We want to achieve change for a whole generation and we knew this could only be achieved by building a genuinely inclusive and cohesive alliance. Our approach started with the needs of children and families themselves and is underpinned by meaningful engagement with the community. We are in this together - for the long run.

Delivering the vision requires rigour and a strategic framework for prioritising those activities that will make most impact on the outcomes we most care about. It requires careful implementation and systems that help – not hinder - what we need to do. We have a strong track record of partnership working, but we also recognise we need to invest time in developing common understanding and a shared language. We need to build local capabilities and to develop the infrastructure for learning and sharing what we learn with others. Better Start provides us with an exceptional opportunity to make this transformation and we are determined to deliver real and sustainable change in the way we do things.

In Blackpool, we have developed a blueprint for our Better Start programme based around 4 pillars, which we believe provide exceptionally strong foundations for our work over the next ten years and beyond.



First of all, our programme of action is grounded in a **public health approach**, and starts with an understanding of needs across the whole population. Secondly, for those with additional needs, we have crafted a programme of science and **evidence based interventions** designed to provide more intensive services, focussed on achieving clear priority outcomes. The third pillar of our approach is **systems transformation**, which refers to the change we need to see at all levels of our local services and systems. We believe this type of reform can only be successfully implemented if it is underpinned by a shared understanding (or ‘framing’) of the problem we face and a cohesive approach that unites community and professionals from all agencies. And our fourth pillar – **the Blackpool Centre for Early Child Development** – provides the dedicated focus for driving the strategy, programme implementation and research. The centre will build local capacity and expertise and become internationally renowned as a centre of innovation and learning.

Pillar 1

PUBLIC HEALTH:
Change for a population

Blackpool Better Start takes a public health approach. This means we emphasise:

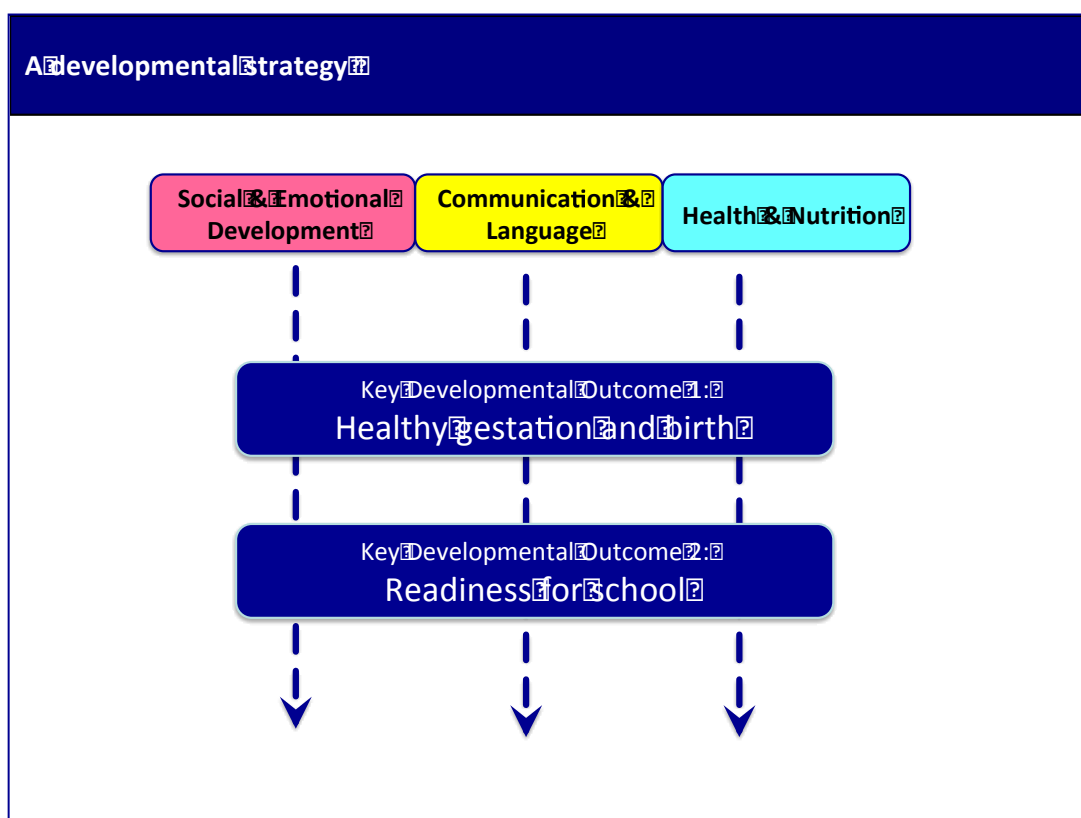
- the needs of the whole population
- the underlying socio-economic and wider determinants of children's outcomes
- collective responsibility and partnerships with all those who contribute to the wellbeing of young children and families.

A public health approach can be defined by a four step-process:

1. Defining the key outcomes of concern
2. Determining the key risk and protective factors
3. Developing and implementing interventions across the population
4. Measuring effectiveness and capturing learning

Defining the key outcomes

Our overall strategy for the Blackpool Better Start programme is a developmental one. Based on extensive analysis of local data and a careful review of the research literature on early child development, we have prioritised two key outcomes: **healthy gestation and birth**; and **readiness for school**



These outcomes were selected not only because baseline data show particular challenges for our community, but also because they pinpoint important developmental milestones and provide rich composite measures of developmental progress. We fully embrace the Big Lottery Fund's three domains of: social and emotional development; language and communication; and diet and nutrition. We see these as crucial 'golden threads' that run right throughout our programme and which will be instrumental to achieving 'healthy gestation and birth' and 'school readiness'.

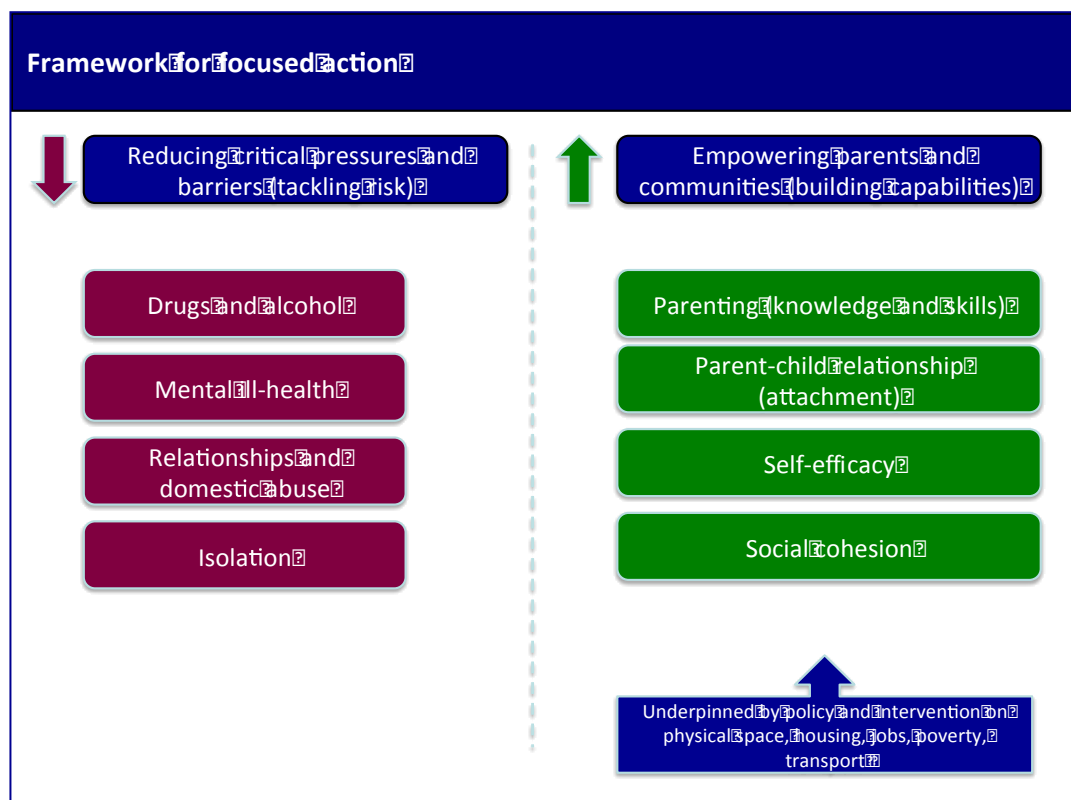
Determining the key risk and protective factors

In Blackpool, there is a high degree of consistency between the issues of greatest concern to the community and the areas that stand out most in our local needs analyses and the survey data from Dartington. We have combined these data about local needs and priorities with what research evidence tell us about the factors that matter most for achieving our desired outcomes for babies and young children.

We have used these data to create a 'Framework for focussed action' in our Better Start programme, based around:

- Reducing critical pressures and barriers (tackling risk)
- Empowering parents and communities (building capabilities)

The chart below sets out on the left-hand side the four key risks/barriers we aim to reduce through our programme. And on the right-hand side it lists the key ways in which we will empower parents and the community (our 'mechanisms for change'):

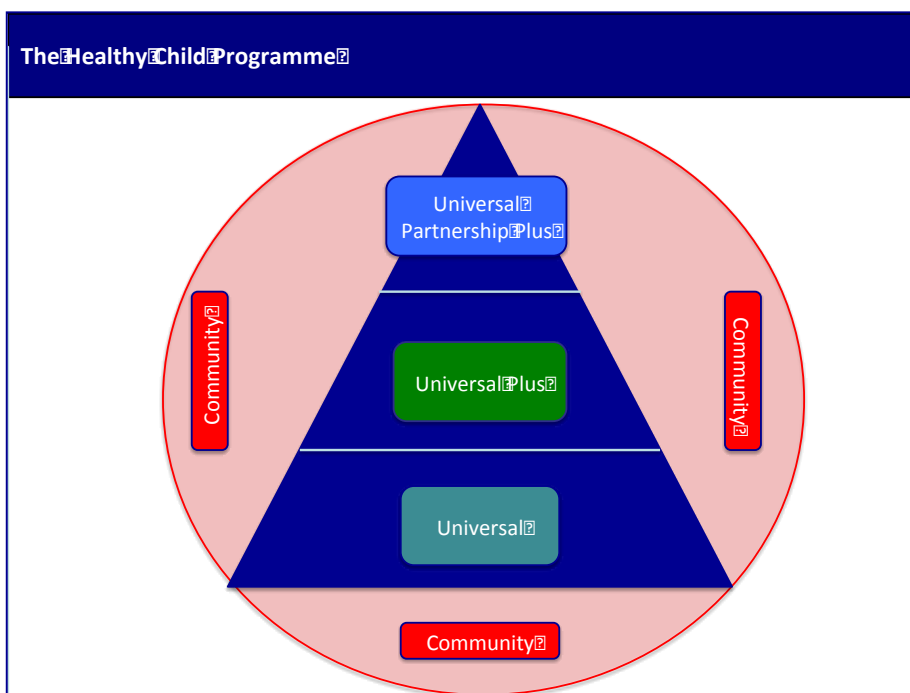


The Better Start programme is a once in a lifetime opportunity to turn things around for Blackpool's youngest children. We believe we have an important responsibility to ensure that this new investment is very carefully targeted where it can achieve greatest impacts. That is why we propose to use this framework to guide our commissioning, mapping activities against it to help maximise the prospects of achieving our desired goals.

We will also ensure that other Blackpool policies and initiatives (such as transport, unemployment, environment, housing and welfare) are carefully aligned with the goals of *A Better Start* and that there is an on-going forum for ensuring policy development that supports expectant and new families with babies. But we are absolutely clear that the Better Start investment must be explicitly focussed on addressing the risk and protective factors identified in this framework.

Developing and implementing interventions across the population

The Government's Healthy Child Programme (HCP) provides a well-established and highly respected framework for planning support across different levels of need within the population:

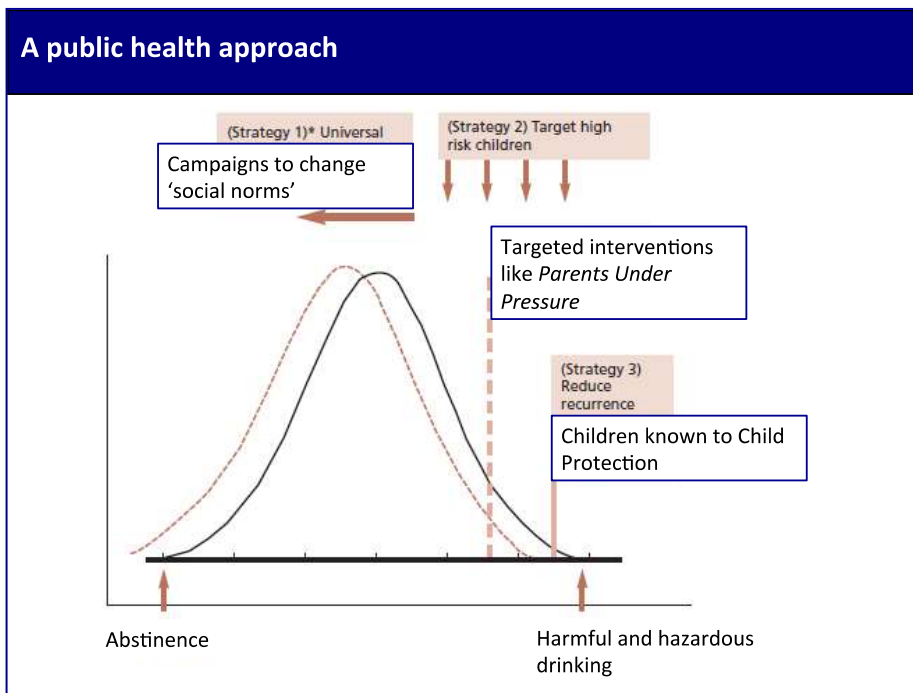


We have developed a robust programme of action, spanning each of these different levels.

Further details on the targeted interventions (at 'community' 'universal plus' and 'universal partnership plus') can be found in the following section of this proposal (Pillar 2 – Evidence based Interventions).

But first we set out our plans for universal level public health campaigning.

The public health approach emphasises that many outcomes of concern, such as harmful and hazardous drinking are the extreme ends of a distribution (in the case of alcohol spanning less serious levels of alcohol consumption right through to abstinence). The key insight here is that by influencing social norms and patterns of behaviour *across the whole population* of parents it may be possible to 'shift the entire curve'.



Our public health approach is important because changing social norms helps change the context even for those with the most complex problems requiring more intensive interventions. In this way, we change the social context and improve the chances of successful intervention with the most complex families too.

For Blackpool this type of population level approach is also important because many of our social

problems are widespread, affecting large proportions of local children.

Adapted from Woodman J & Gilbert R (2013) Child maltreatment: moving towards a public health approach. BMA

Track record in public health

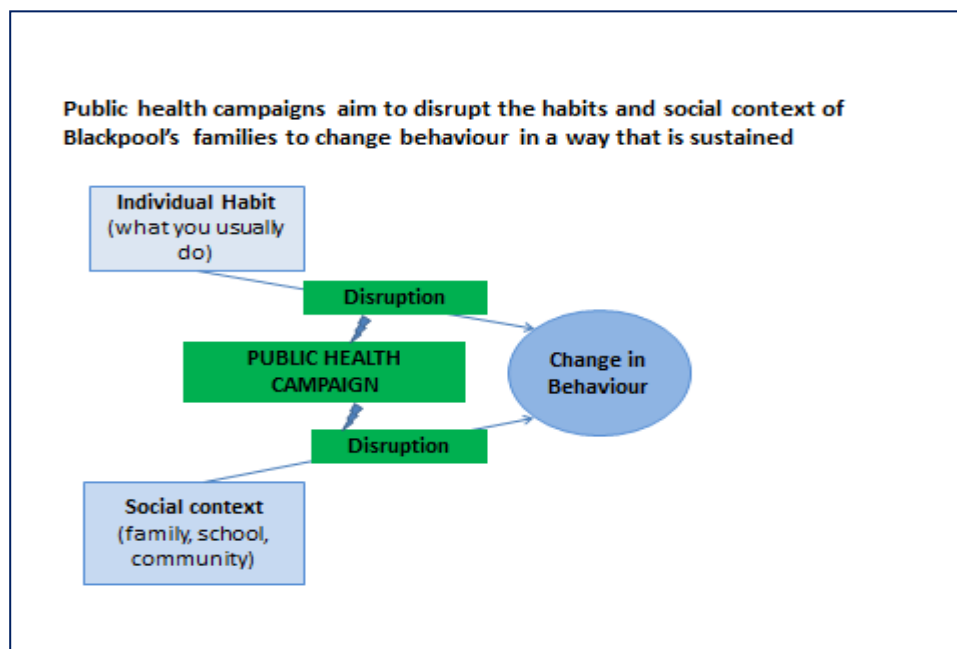
Blackpool already has solid foundations on which to build our public health work for the Better Start programme. For example, we have run successful programmes on **safe sleeping** (with the Lullaby Trust) and breastfeeding (we have UNICEF Baby Friendly Level 3 status) as well as a recent campaign 'What's your Number, Know your Risk', which resulted in a huge increase in people **taking up blood pressure tests**. All of these campaigns have involved strong partnership working between public health, the local authority and a range of partners in the private and voluntary and community sectors.

Blackpool is one of 22 maternity hospitals across the UK piloting an innovative parent education DVD designed to help new parents **cope with infant crying**. Developed by the NSPCC and experts from Great Ormond Street Children's Hospital, this programme draws inspiration from a similar public health intervention in North America that led to a 47% reduction in non-accidental head injury. A major study into the implementation and effectiveness of this intervention is underway with publication of early findings due later in the year.

NSPCC is also currently working with the Design Council on research into the information and advice needs of **expectant and new dads**. We aim to learn more about how to provide information to dads in a way that appeals to them and supports them in the transition to parenthood, and we'll also learn about how small changes to maternity services might influence dads' perceptions of their role and how valued they are. The resources designed as part of this programme will be made freely available to Blackpool to use with local dads.

Behaviour Change

We know that behaviour change is the product of changes in the social context and individual's habits and our activities will seek to influence both. This diagram illustrates our model of change.



Our experience – and the research – teaches that successful public health activities are not simply a matter of providing information and sitting back and watching it work. We know that it is critical to work alongside parents to enable them to put into practice the information. Behaviour change comes about when people have the opportunity to practice new habits and learn by doing. There are 3 basic steps to achieving change:

1. Provide good, accessible information = increase awareness of a problem & solution
2. Ensure repeated exposure to the information = increase awareness of a problem & solution
3. Provide opportunities to practise using the new awareness & knowledge = increase understanding & capability

Our campaigns would move through each of these 3 steps so that people develop the capabilities they need to make sustained changes. By 'campaign' we mean everything from billboards and social media to targeted programmes to support high risk families. Our partnership has experience in this approach. For example, in our programme to help new parents cope with crying, we have ensured they receive the information at a time and place when they are receptive and able to form new habits. We have given them information in a way that is emotionally powerful. And we have made staff available to support parents in thinking about how they will respond to the messages.

Universal health promotion resources

Local needs analyses highlight widespread challenges around adoption of healthy behaviours in pregnancy and with new babies. The antenatal period is a critical moment of opportunity for

building awareness and understanding of healthy development for mums, dads and babies. It is also an important time for preparing parents to think about their own relationships with one another and with their new baby.

Through funding from Better Start and our network of maternity, community health and children's centre provision, we will ensure right from the start, that expectant and new parents know where to go and take advantage of a suite of high quality resources to support **physical health, diet and nutrition**:

- The Pregnancy Book, proving authoritative and comprehensive guide to health and development
- NHS Parent Information Service, providing online access to NHS educational films and advice
- NHS Diet resources
- Best Beginning's *Bump to Breastfeeding* DVD, promoting breastfeeding initiation
- Best Beginning's *Baby Buddy App*, helping parents get to know their baby and understand her development

Food Dudes

Many of our attitudes to health and food consumption patterns are established early in life and so it is very important that any attempts to produce long-term improvements in the nation's diet should start with young children. Food Dudes has been designed to increase consumption of fruit and vegetables in early years children and will be rolled out across all early years and childcare settings in Blackpool – as well as in the new 'Beach School'. Parents also receive Food Dudes packs with tips and materials to enable them to continue running the programme at home in an effective way, Better Start will fund the 7 target wards; and Public Health the others, ensuring a whole population approach to healthy eating across the town.

Maternal obesity is an issue in Blackpool as more overweight women become pregnant. Health professionals will help women to understand the health risks of being overweight or obese during pregnancy and the importance of achieving a healthy weight prior to pregnancy, but also advise them not to try to lose weight while they are pregnant the risk will be managed by the health professionals caring for them during their pregnancy. These women will also be offered a referral to a dietician for assessment and personalised advice on healthy eating and how to be physically active. After pregnancy there will be encouragement to lose weight.

In Blackpool every mother has their BMI screened at booking in for maternity care. This is between 10 and 12 weeks of pregnancy. If their BMI is over 30 they are tested for gestational diabetes. If the BMI is between 35 and 39 they are referred to Consultant led care and if the BMI is over 40 they are referred to a special obesity clinic which involves prescribing or monitoring of specific treatment required for the individual from anaesthetics, dieticians, medical consultants etc.

All of the above are reviewed at 36 weeks gestation in preparation for labour.

To support breastfeeding we will continue Star Buddies, volunteer breastfeeding champions who support new mums in the hospital and at home to initiate and continue breastfeeding. Since the introduction of this initiative initiation rates at 6-8 weeks have gone up from 15% in 2007/08, to 25%

in recent years. The initiative involves Maternity Services, Health Visiting and Children's Centres. The hard work and achievements were acknowledged by the achievement of the UNICEF stage 3 Baby Friendly Award jointly for the then PCT Community and Children's Centre staff. We are currently working with the acute trust to achieve the same status across the NHS Trust and Children's Centres.

In terms of **social and emotional development**, we will ensure parents have access to:

- Brazelton's *Neonatal Behavioural Observation (NBO)* training for midwives, helping midwives demonstrate new-born social and communication skills
- NSPCC's *Coping with Crying* DVD, providing expert and peer-to-peer advice on coping with infant crying and prevention of non-accidental head injuries
- Lullaby Trust, *Safe Sleeping* resources, helping to prevent infant deaths
- Warwick University's *Getting to know your baby* app, providing science-based information on child development and with films on reading babies' cues. Parents can also video their own baby in interaction and share this with their midwife, health visitor or children's centre worker
- One-Plus-One's *Couple Connection* game, a free online game helping new parents understand and enhance relationship skills
- Best Beginning's *Baby Express*, tailored specially for Blackpool's new parents and highlighting sources of information and advice as well as local events and groups and services

Without solid foundations in **language and communication skills**, children run the risk of school failure, low self-esteem and poor social skills. Yet many of Blackpool's young children are starting school without these vital skills.

Our **public health approach** to language and communication reflects:

- The scale of children's poor communication in Blackpool
- The need for earlier identification and response
- The importance of skills development for the entire children's workforce.
- The crucial role of parents themselves as agents of change

Our approach will include:

- *Supporting Speech, Language and Communication in the early Years*, our established Universal Communication training package will become mandatory across the Better Start workforce.
- *All Aboard*, a programme to support families where English is an Additional Language.
- *Tatty Bumpkins & Baby Bumpkins*, a multisensory approach to communication offered in children's centres.
- *Rhyme Challenge* and other reading programmes, run with Book Start
- *Dialogic Book Talk*, an evidenced based programme encouraging adults to prompt children with questions and engage them in discussions while reading.
- *ICAN*, parent resources and practitioner accreditation

Every child deserves the best possible start in life and the support that enables them to fulfil their potential. Children develop quickly in the early years and a child's experiences between birth and

age five have a major impact on their future life chances. A secure, safe and happy childhood is important in its own right. Good parenting and high quality early learning together provide the foundation children need to make the most of their abilities and talents as they grow up.

The Early Years Foundation Stage (EYFS) sets the standards that all early years providers must meet to ensure that children learn and develop well and are kept healthy and safe. It promotes learning and teaching to ensure children's 'school readiness' and gives children the broad range of knowledge and skills that provide the right foundation for good future progress through school and life. To ensure this is promoted in Blackpool we aim to ensure that our early years and childcare provision is of the highest quality. In Blackpool we are committed to developing the best quality early years settings in partnership with the parents. It is established in research that high quality provision leads to improved outcomes for young children and that poor quality provision add no value at all. By focusing on continued high quality improvement we will make sure that all young children in our settings get a high quality experience.

To do this we intend supporting the early years workforce to gain further qualifications and to update and develop their practice. In Blackpool we have an early years interactive learning environment where practitioners can put in to practice the theory they have learnt on the training. In this way they can learn from each other and see how to implement practice in a 'safe' environment. We also intend supporting the early years workforce with the core skills including child development.

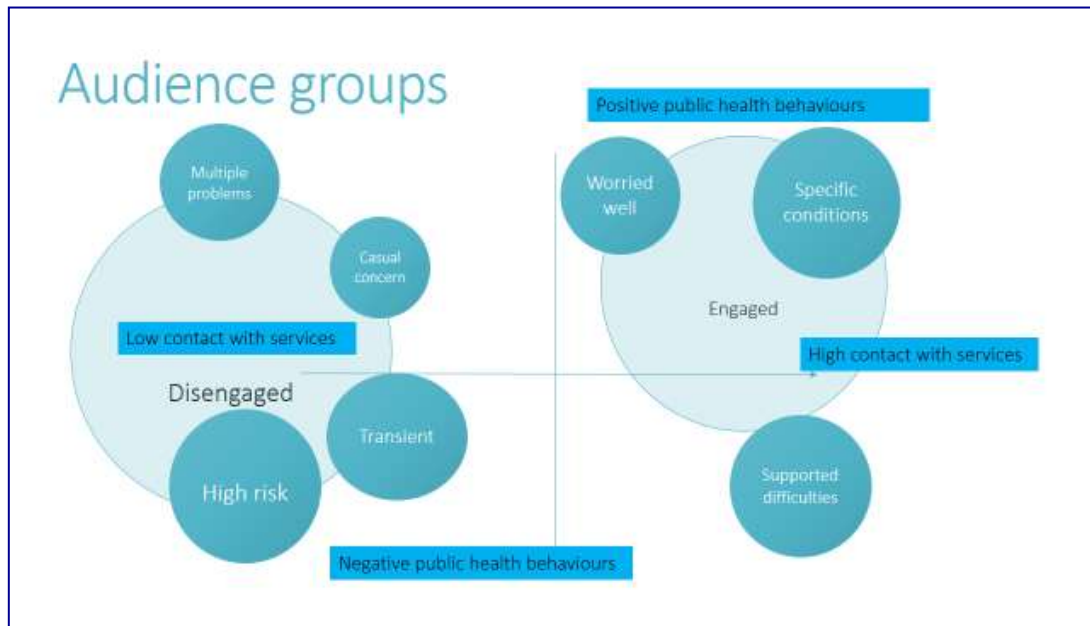
A series of new parent education campaigns

Given the scale and nature of some of the problems in our community, such as alcohol abuse, domestic abuse and perinatal mental ill-health, we believe there is a strong case for action to address these barriers at a population level. We will build a series of parent education campaigns focused on our priority risk factors and around key 'touch points' during the transition from pregnancy to age 3. Over the course of the ten years, we expect to develop and deliver four campaigns. The first in the series will be on the impacts of parental alcohol misuse. The choice of future public education campaigns will be shaped by the community's own concerns, which might include child protection. Our parent education campaigns will each have a clear theory of change based on latest scientific research and they will be designed to reinforce our direct services.

They will each be informed by ethnographic research and behavioural insight, helping us better understand local values and attitudes as well as the factors that inhibit and motivate behaviour change. We will adopt a simple research and development methodology underpinned by three basic principles:

- Involving parents in every step of the process is vital
- We don't want to reinvent the wheel and will build on expert knowledge
- We will start with a wide lens and narrow our focus

Research will also be used to segment our audience groups and to identify the most effective formats and channels for reaching and influencing local parents.



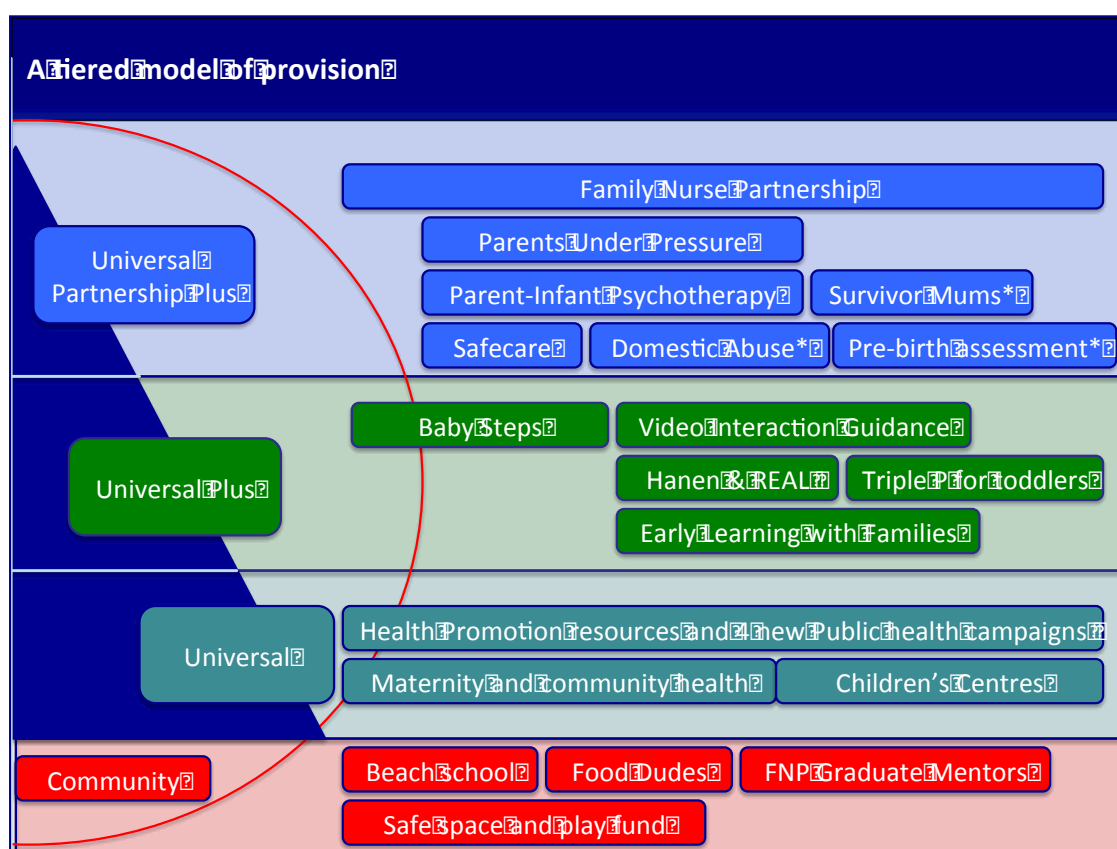
Campaign executions will be carefully designed and pre-tested locally. As well as extensive local expertise in public health, we will also have the benefit of advice from the NSPCC's national Communications and media department. Evaluations of awareness, recall and attitudinal and behavioural change will help us to measure the impacts of these campaigns across the town. More on 'measuring effectiveness and learning' can be found on page X (Pillar 4 – Blackpool Centre for Early Child Development).

Pillar 2

EVIDENCE BASED INTERVENTION:
Change for those with additional needs

Our ultimate aim for this pillar of the programme, is to build outstanding science and evidence based support for families with additional needs - what the Healthy Child Programme calls the **'Universal Plus'** and **'Universal Partnership Plus'** levels. Our local needs analyses and community consultation point to clear gaps in current specialist provision. In particular, the Blackpool Better Start programme aims to build our capacity to respond effectively to issues such as parent education for disadvantaged groups, drug and alcohol misuse, mental ill-health and domestic abuse.

The chart below provides an overview of the range of direct service provision we propose to develop through our Better Start programme, based around the different levels of need in the Healthy Child Programme¹.



In this section we focus primarily on describing the portfolio of science and evidence based interventions we propose at the levels of **Universal Plus** and **Universal Partnership Plus**.

* projects marked with an asterisk are 'innovation' projects, involving original research and development to design and develop new interventions, rather than the introduction of services already developed elsewhere

We have already described - under Pillar 1 - how we will build on the foundation of our strong **universal** maternity, community health and children's centre services, through a programme of public health campaigns and resources.

Later – under Pillar 3 – we describe the specific **community led programmes** we believe will be essential to building social cohesion, tackling isolation among new parents and breaking down the barriers to effective engagement that is such a challenge in Blackpool. [More details on our approach to community engagement can be found in Annex N]

UNIVERSAL PLUS SERVICES

Universal Plus

	Drugs and alcohol	Relationships tips and domestic abuse	Mental ill health	Infection	Parenting knowledge and skills	Attachment	Self-efficacy
Expand/Develop:							
Baby Steps – expand to all not receiving FNP	✓	✓	✓	✓✓	✓✓	★	✓
Triple P for toddlers					★	✓	✓
Introduce:							
Video Interaction Guidance		✓	✓		✓✓	★	✓✓
Hanen & REAL					✓✓	★	✓✓
Research and innovate:							
Early Learning with Families				✓	★	✓✓	✓

Big Lottery outcomes:

- Social and emotional development
- Communication and language
- Diet and nutrition

Risk & protective factors:

- Primary focus
- Strong focus
- Moderate focus

Baby Steps

Maternity services in Blackpool have been working with the NSPCC since 2011 to provide this innovative parent education programme. We propose to roll out the Baby Steps programme to be available to all expectant parents in Blackpool, who are not enrolled on the Family Nurse Partnership.

Originally developed by the NSPCC in partnership with Warwick Medical School, Baby Steps is a new science-based programme that helps mums and dads to make a successful transition to parenthood. The programme aims to:

- support men and women to negotiate the **emotional and physical transition** to parenthood;
- nurture **healthy relationships** by encouraging listening and conflict resolution skills;
- encourage the development of **sensitive, reflective relationships with the infant** from the ante-natal period onwards;
- promote **healthy child development** within a network of supportive relationships

Baby Steps is a 9 session group-based programme designed explicitly to engage parents who might not respond well to traditional 'didactic' antenatal education. Home visits are used to build trust and programme activities and materials have been carefully co-designed to be engaging and support reflection and learning. For example, video of parents' interactions with their new-borns is used to identify sensitive caregiving and promote secure attachment.

Formative evaluation shows that this programme is very successful in achieving its goals around engagement of disadvantaged mums and dads and quantitative results are expected later this year from a multi-site evaluation study. Practitioners delivering this service in Blackpool will be part of a national community of practice involving colleagues from other locations across the country.

Support from the Big Lottery will allow us to take this important prevention service to full scale across Blackpool. The expansion process will be carried out in two cohorts, given the need to train twenty-eight practitioners in total (though it should be noted that for most of these practitioners, delivery of the groups will only be a relatively small part of their roles).

Triple P for toddlers

The Area Wellbeing data showed that child behaviour was an issue with over 27% of children having poor social and emotional development, including self regulation, compliance and empathy for others. There was also quite high incidence of early onset of poor behaviour, which will affect a child's readiness for school. Blackpool's nationally renowned 'Springboard' Families in Need service has been delivering the Triple P Parenting Programme for over ten years. Triple P is positive parenting programme that uses practical parenting strategies. There is a strong body of evidence to support the efficacy of the Triple P programme in a wide range of different settings and across a range of different population groups. Triple P has been chosen in Blackpool because of its success in providing parenting and family support for behavioural and emotional problems in children.

We intend building on this successful track record of delivering Triple P, by extending our remit to work with parents of 2-3 year olds. We will fund 2 new posts to deliver Triple P and training for 6 staff in total.

Video Interaction Guidance

VIG is a powerful approach for enhancing communication within family relationships. VIG is a particularly powerful tool in increasing parental sensitivity in families where there are attachment difficulties. It works by capturing short pieces of video of a parent interacting with their child. In the process of standing back and looking at themselves on screen, parents are able to analyse what they were doing when things were going 'better than usual'. Parents are supported to become more sensitive to children's communication attempts and to develop greater awareness of how they can respond in an attuned way. VIG is a particularly good fit with Blackpool's goals of empowering parents and communities, because it is built on a conviction that the power and responsibility for change resides within families themselves.

VIG has solid scientific foundations, building on the rich legacy of Professor Colwyn Trevarthen and on rigorous intervention studies in Holland [Ref]. The NSPCC has experience of implementing the programme in other locations across the UK and will be able to facilitate training, accreditation and supervision through our established collaboration with the programme's developer Dr Hilary Kennedy. Practitioners working on this service will be able to benefit from being part of a community of practice with other VIG practitioners across the country.

We will create a multi-agency team comprising practitioners from NSPCC (2FTE) and the Families in Need team (1FTE). Better Start will fund 2 of these posts and the costs of clinical supervision. NSPCC will fund 1 post.

Targeted communication and language services (Hanan and REAL)

Effective oral language skills are the building blocks on which subsequent literacy and numeracy development are based. We intend to provide a comprehensive programme of evidence and science based programmes to promote communication and language skills. Our targeted provision will be delivered through the Speech and Language Health Service and – as described earlier - this will be underpinned by a public health approach including strong links health visiting and children's centres. Targeted provision will comprise:

Hanan

- *It Takes Two to Talk* – a programme designed specifically for parents of young children (birth to 5 years of age) who have been identified as having a language delay
- *More Than Words* – a programme designed for young children from 18 months who are identified as a late talker and will support the children to develop vocabulary

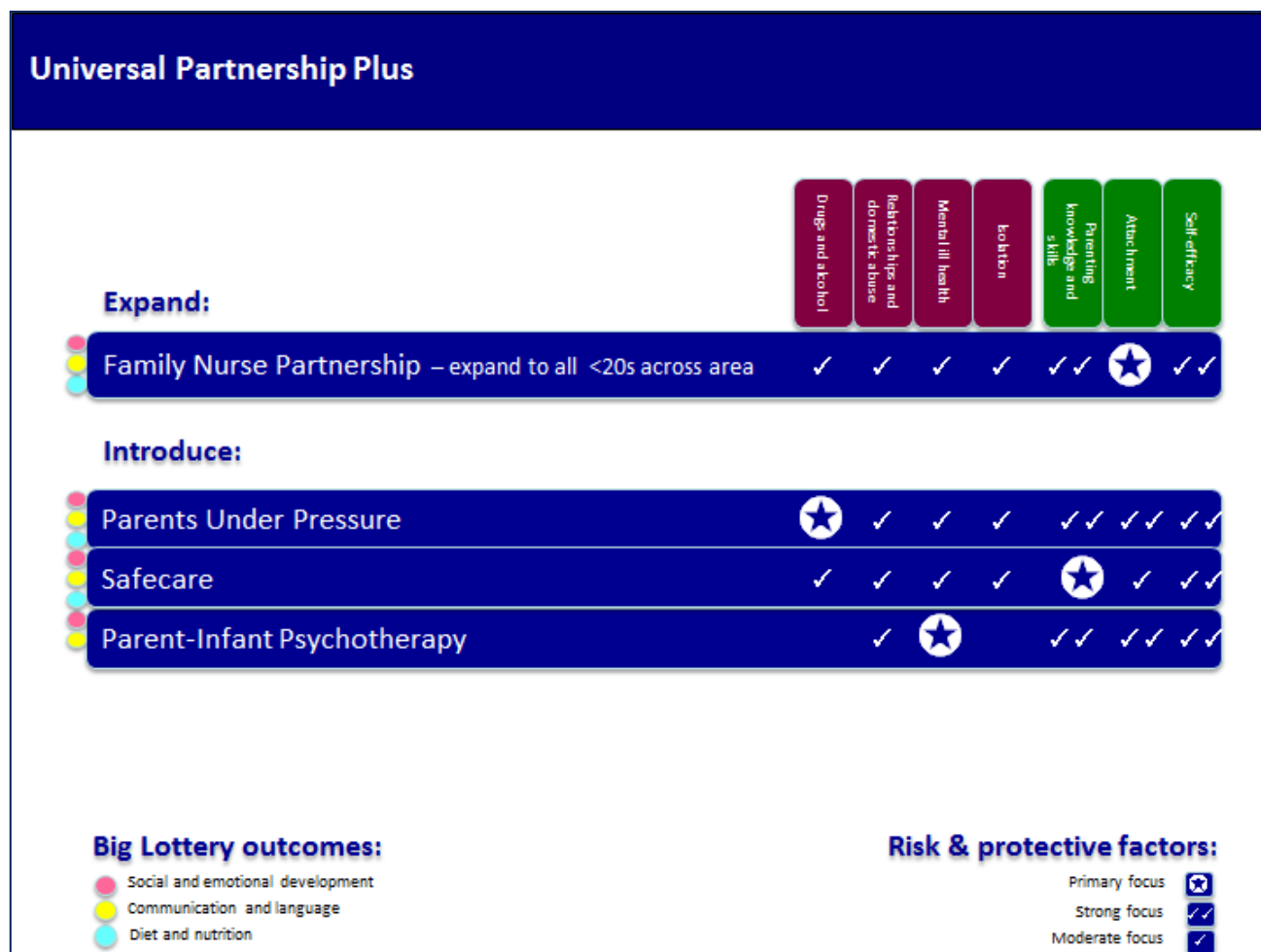
Raising Early Achievement in Literacy (REAL)

- An evidenced programme working with early years settings and parents in the home to support young children's oral language, early reading and writing and awareness of environment print

Early Learning with Families (ELF)

Public Health Public Health

UNIVERSAL PARTNERSHIP PLUS SERVICES



Family Nurse Partnership

We see full expansion of the Family Nurse Partnership programme to reach all under-20s in the town as a cornerstone of our Better Start programme. The Family Nurse Partnership in Blackpool is one of the earliest established FNPs in the country and has an excellent track record and reputation both locally and nationally. This nurse led home visiting programme has a very strong evidence base, pinpointing outcomes that are central to the goals of our programme; and its established position within local maternity services provides a strong backbone to our pathway of provision for vulnerable young mothers and their families.

Blackpool Clinical Commissioning Group has already committed to increasing the number of family nurses from 4 to 6. With investment through our Better Start programme, we will increase this to 10

nurses in total by 2017, ensuring we have the capacity to offer this vital service to **all eligible mothers across Blackpool**.

Parents Under Pressure

We propose to introduce Parents Under Pressure (PUP), a twenty-week intensive parenting programme, which specifically targets parents in receipt of drug or alcohol treatment. Originally developed in Australia, the programme was shown as part of a randomised controlled trial [Dawe & Harnett, 2007] to achieve reductions in parenting stress, in child behaviour problems and in the risks of child abuse.

PUP has been transported to the UK by the NSPCC and is currently being evaluated in a multi-site evaluation led by Professor Jane Barlow at Warwick University. The programme is delivered in the home. It addresses the psychological functioning of family members, the parent-child relationship and social contextual factors such as social isolation, accommodation and financial issues. The key mechanisms for achieving change are a holistic approach, therapeutic relationship with parents and a focus on mindfulness to help parents to manage their emotions.

This PUP programme fits really well with Blackpool's identified priorities around tackling drug and alcohol misuse. The Blackpool Better Start team will be able to benefit from NSPCC's experience in implementing this evidence based service in eleven other locations across the UK. We have well established working relationship with the programme's developer, Professor Sharon Dawe. Practitioners delivering the programme will have the benefit of access to high quality training and accreditation, expert clinical supervision, an established programme database and membership of a national community of practice alongside the other NSPCC service centres across the UK.

In order to ensure strong referral levels and sustainability, we will make this service available to parents of 0-5 year olds. We will create a multi-agency team comprising practitioners from NSPCC (2FTE) and the Local Authority Families in Need Team (1FTE). Better Start will fund 2 of these posts and the costs of clinical supervision. NSPCC will fund 1 post.

Safecare

Safecare is a programme that works with parents of children aged 0-5 at risk of, or reported for, maltreatment. Given the very high level of babies in Blackpool who are taken into care, we believe it is particularly important to include this evidence based safeguarding programme in our portfolio of services.

Delivered in the home over twenty weeks by trained family support workers, Safecare comprises 4 modules: Parent-Child Interaction; Home Safety; Child Health Care; and Counselling and problem solving skills. Evidence from a large-scale trial in Oklahoma demonstrates the programme's positive impacts on reducing repeat referrals to child protection services and the programme has also demonstrated a strong benefit-to-cost ratio of 2.07:1.

The NSPCC has experience of implementing this home visiting programme in a range of UK settings and will be well placed to facilitate training, coaching and on-going connections with the programme developers at Georgia State University. We will create a multi-agency team comprising practitioners from NSPCC (2FTE) and Families in Need (1FTE). Better Start will fund 2 of these posts and the costs of clinical supervision. NSPCC will fund 1 post.

Parent-Infant Psychotherapy

As part of the development of the Blackpool perinatal mental health pathway, we want to enhance the level of specialist provision for mothers during pregnancy and following the birth of their child in order to address critical mental health and attachment needs. We propose to introduce Parent-Infant Psychotherapy, a model which focuses on restoring ruptured bonds between mother and baby.

The therapist's role is as an observer and an interpreter of the interaction between the infant and the parent. He might share some of his thoughts about the behaviour of the child with the parent and by doing so offering the parent an alternative way of experiencing the child. This technique helps the parent to resolve issues with his or her own infancy-experiences in order to restore secure attachment with the infant. And it helps lower the risk for psychopathological developments of the child in the future.

Overseas evidence on the use of parent-child psychotherapy is promising and results from a UK-based trial are awaited later this year [Sleed & Fonagy]. We will work closely with partners at OXPIP and the Anna Freud Centre who have been successfully delivering this service for a number of years in the UK; and we will work with the national replication charity PIPUK, to develop proposals for implementation in Blackpool. We believe that there are reasonably good prospects of attracting matched funding from PIPUK to support replication of the service here. It will be important to ensure that this service is well integrated within the perinatal mental health pathway; and that there are strong links with existing psychiatry services for addressing the most acute needs.

We will work carefully to plan and prepare implementation of this new component of the perinatal mental health pathway and we do not anticipate this service going live until at least year 3. It is envisaged that Better Start funding will be used to fund a Clinical Director (parent-infant psychotherapist) and 3 infant mental health specialists.

UNIVERSAL PARTNERSHIP PLUS – RESEARCH AND INNOVATION

Universal Partnership Plus – Research & Innovation

Research and innovate:

	Drugs and alcohol	Relationships and domestic abuse	Mental ill health	Isolation	Parenting knowledge and skills	Attachment	Self-efficacy
Domestic abuse in pregnancy and infancy	✓	★	✓	✓	✓	✓	✓
Pre-birth risk assessment	✓	✓	✓		✓	✓	✓
Survivor Mums Companion (PTSD)		✓	★	✓	✓	✓	✓
Alcohol in pregnancy	★				✓	✓	✓

Big Lottery outcomes:

- Social and emotional development
- Communication and language
- Diet and nutrition

Risk & protective factors:

- Primary focus ★
- Strong focus ✓
- Moderate focus ✓

Nationally, the NSPCC has made pregnancy and babyhood one of its priority themes. Over the past four years the charity has embraced evidence-based practice and is collaborating with leading experts from around the world on the development and evaluation of new services, designed to tackle key gaps in practice.

In Blackpool, our close partnership with the NSPCC means the opportunity to help inform and shape these new services as they are being co-designed; and it means opportunities to pilot and test those services which are most relevant to our needs here in Blackpool.

Below we describe examples of the service development work already underway, which Blackpool will help to shape and which we might pilot as part of our innovation work stream. Through this process of collaboration with the NSPCC and their partners, we will build expertise and capacity for undertaking research and development work locally through the *Blackpool Centre for Early Child Development*.

Domestic abuse in pregnancy and infancy

Domestic abuse is a major priority in Blackpool. Domestic abuse often begins in pregnancy and is associated with premature labour and low birth weight. International research suggests that 4-8% of all pregnant women are victims of domestic abuse, with homicide by a spouse or partner being the number one cause of death for pregnant women.

The limited evaluation material available for the UK suggests that existing perpetrator programmes have high rates of recidivism and attrition. There is no evidence in the UK of effective intervention with women who are pregnant and no services that specifically target intervention at this life stage, other than screening during antenatal procedures. Interventions with children are usually post separation to help children recover from adverse effects of domestic abuse. There are particular knowledge gaps and a lack of service provision around the options for effective child protection where the mother, child and perpetrator remain together

The NSPCC nationally has recently agreed a new project to research, develop and pilot test a new home-based model of intervention to reduce domestic abuse. The service will focus on the pregnancy-5 age range and it will seek to build on best available research from a range of models internationally.

This development project will dovetail neatly with local research in partnership with the charity CAADA (Coordinated Action Against Domestic Abuse) following up the experiences of Blackpool families subject to MARAC (Multi-Agency Risk Assessment Conference) procedures. We will also liaise with Professors David Olds and Harriet McMillan to monitor findings and implications from their current Canadian trial looking at the impacts of new components of the Family Nurse Partnership designed to better address domestic violence within that programme.

Pre-birth assessment

Analyses of Serious Case Reviews have repeatedly shown that high proportions of cases of serious abuse involve babies. A recurrent finding is that babies may not have died or been seriously injured if a protection plan had been formulated prior to birth. Ofsted has highlighted concerns about failure to conduct pre-birth assessments, as well as serious shortcomings in the timeliness and quality of many assessments that were carried out.

This project is funded by the Department for Education and is being carried out in a partnership between the NSPCC, Loughborough and Warwick Universities. The aim of the project is to develop a robust new model for undertaking Pre Birth Assessments where the risk of significant harm is identified about an unborn child.

Given the very high numbers of babies taken into care in Blackpool, this new assessment services is likely to be of particular value to practitioners here. We hope that Blackpool could be involved as a partner in wider testing of the model.

Survivor mums companion

During pregnancy, women with a childhood maltreatment history have a 12-fold increased risk of Post-Traumatic Stress Disorder (PTSD). Although awareness of the need for trauma-informed care

is increasing, there are no front-line programmes for the childbearing year that address maltreatment-related PTSD.

The Survivor Mums Companion is a ten-module self-study programme that aims to disrupt the intergenerational cycle of abuse and psychiatric vulnerability. It works by improving affect regulation; reducing interpersonal reactivity; and supporting PTSD symptom management, despite the presence of triggers. Mums are recruited through maternity services (at booking with midwifery) and they work through the self-study modules (either in workbook, online or MP3 formats) and then after each session they receive the support of a tutor/counsellor to help them process the materials they have gone through. A rigorous pilot study led by Professor Julia Seng at the University of Michigan in the US has demonstrated positive results of the programme.

NSPCC has joined with the researchers from the University of Michigan, who developed the Survivor Mums Companion and with researchers from Australia to put forward a research bid to the US National Institute of Health to replicate the programme in UK settings as part of a three-country research study. If the bid is successful, then Blackpool could be considered as one of the UK research sites.

Alcohol abuse in pregnancy

Blackpool has established links with internationally renowned alcohol expert Prof Barry Carpenter. We propose to work with Professor Carpenter to develop and test an early intervention service to address alcohol misuse in pregnancy. This will run alongside the public health campaigns and work on alcohol across the town as well as our preventative work in schools. It will complement our intensive home visiting programme Parents Under Pressure. This project will feed directly into the Health & Wellbeing Board as a major contribution to the Blackpool Alcohol Strategy.

A staged approach to implementation

Above we have outlined a sophisticated multi-level programme of science and evidence based interventions as well as setting out our ideas for innovation and new service development. We have extensive experience of implementation of new services and we know the importance of a very carefully staged approach and of rigorous programme management, monitoring and communications.

From an operational and implementation perspective, we have categorised our science and evidence based interventions into three broad types of activity, mapped in the table below:

1. Development or expansion of existing services and 'quick wins'

Universal Partnership Plus

- full expansion of the *Family Nurse Partnership* programme to reach all under-20s in the town

Universal Plus

- full expansion of the *Baby Steps* group parent education programme to reach all those not on FNP
- increasing access to *Triple P* parenting programme, for parents of 2-3 years olds
- development of *Early Learning for Families*, supporting language development and learning

Our community-led programmes, *Beach School* and *Safe Space & Play* (described under 'Pillar 3'), will also fit under this category of activity, demonstrating swift and visible changes to the community

2. Introduction to Blackpool of interventions successfully developed elsewhere*

Universal Partnership Plus

- *Parents Under Pressure*, for families with drug and alcohol problems
- *Safecare*, structured home visiting for families at risk of, or reported for, maltreatment
- *Parent Infant Psychotherapy*, addressing critical mental health and attachment needs

Universal Plus

- *Video Interaction Guidance*, increasing parental sensitivity in families with attachment problems
- *Hanen & REAL*, improving language and communication skills

3. Innovation projects[§]

Universal Partnership Plus

- *Domestic abuse in pregnancy and infancy*, attachment based service where families stay together
- *Pre-birth assessment*, a new model where harm is suspected about an unborn child
- *Survivor mums companion*, tackling abuse-related trauma triggered in pregnancy
- *Alcohol abuse in pregnancy*, developing an early intervention service with Prof Barry Carpenter

Pillar 3

REFRAMING AND SYSTEM TRANSFORMATION:

Building shared understanding and shared action

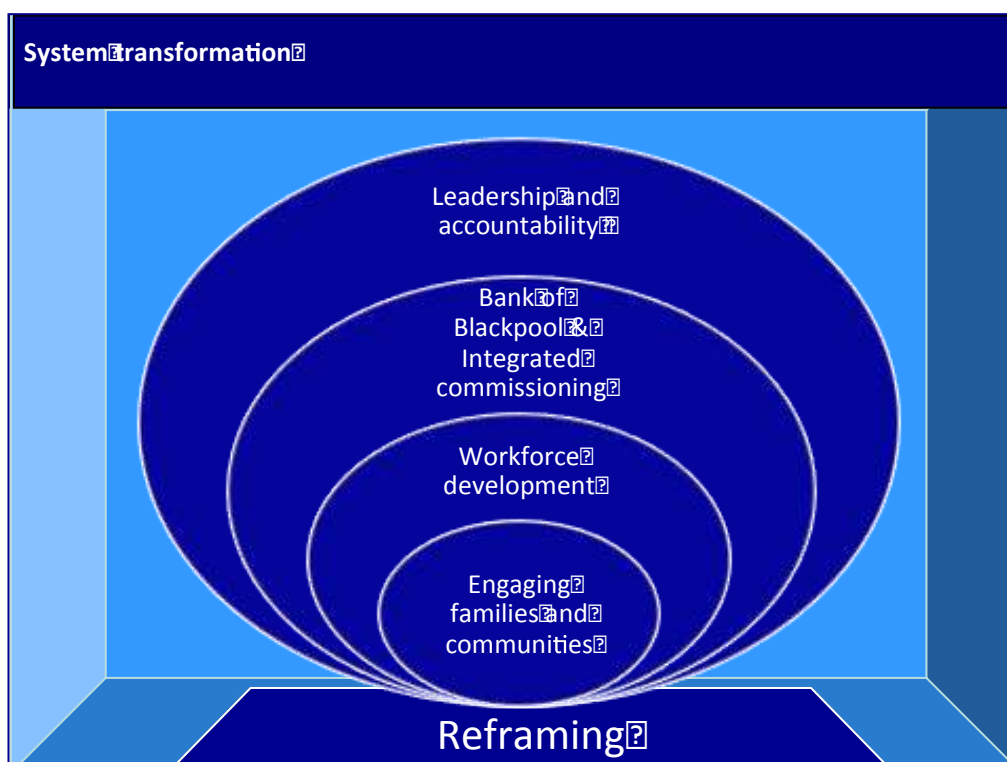
Children in our target wards make up two thirds of the conception-to-threes in the town. We can't re-design part of the system for such a large proportion of children, so we are ready to completely reform public services for all pregnancy to threes. We have already started the work of transforming our local systems, in part stimulated by large cuts in public expenditure, but also because we recognise the strategic importance of investing in the early years and prevention.

We will not achieve the step-change in outcomes we desire, through evidence-based interventions alone. A key pillar of our blueprint is systems reform, which means **change at all levels**. Below we describe our model for reforming local services and systems.

It is an approach that starts with the need to **'reframe' the problem** we face and pull everyone together behind a **shared understanding** of:

- Child development and local children's needs
- The critical barriers we face in Blackpool
- The roles we can each play
- The work we need to do together to turn things around.

It is only by building this shared frame of understanding across everyone – families, community and professionals from all agencies – that we will be able to achieve sustainable change in the way we work together at all levels of our system. The diagram below illustrates the different levels of our model for systems transformation – each of which is underpinned by this essential 'reframing' work.



'Reframing': building shared understanding

We want to give everyone: families, the community, volunteers and professionals a common language for communicating about children's needs. Inspired by the success of the *Alberta Child Wellbeing Initiative* in Canada, we plan to deliver a cross-workforce training and development programme in partnership with the US based *FrameWorks Institute*.

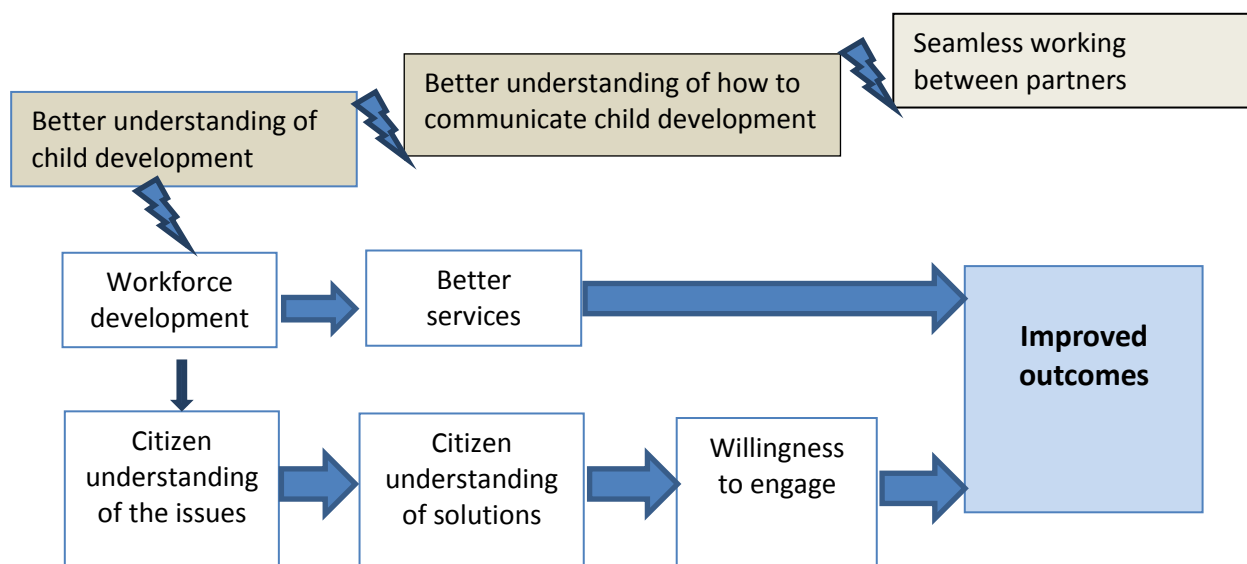
In Alberta, the Initiative has worked with a range of leading child well-being experts and the *FrameWorks Institute* to build an effective integrated, collaborative workforce bound by a common language and shared experiences. This is delivering real benefits for the people of Alberta. They have achieved this through a structured long-term programme that incorporates content and communications learning.

The purpose of reframing programme is to:

- Develop a shared understanding of child development across the community and across the children's workforce – a key explanatory tool in describing what children need and how we can help them
- Develop a shared understanding and competence in talking about child development
- Through sharing the experience of learning, break down professional and professional-citizen boundaries and build trust and confidence, creating a culture of integrated working

The NSPCC and its partners are uniquely well placed to deliver this programme, having worked with the Frameworks Institute since 2011 to pioneer a set of tools to support professionals to talk about child development in the UK. These tools have already been empirically tested for use in the UK. We will build on this pioneering partnership to put into practice the latest findings from child development and the science of communications.

Our model, illustrated in the diagram below, has been developed from the Alberta approach. It will be integral to our systems reform programme and it will be a central plank of the Workforce Development Strategy.



The Reframing programme will run throughout the duration of the Better Start project: it is not a one-shot solution, but an on-going programme of continuous improvement and partnership building. It will involve significant numbers of professionals from a wide range of backgrounds and across all levels of seniority and community members (up to around 150 people at one time).

This initiative will be led and coordinated through the Blackpool Centre for Early Child Development. Key activities will be to:

- Identify a cohort of interested people
- Hold an annual residential symposium to share latest thinking on this life stage. Drawing on the NSPCC network of national and international experts
- Support professionals to work differently and hold an annual follow up event.

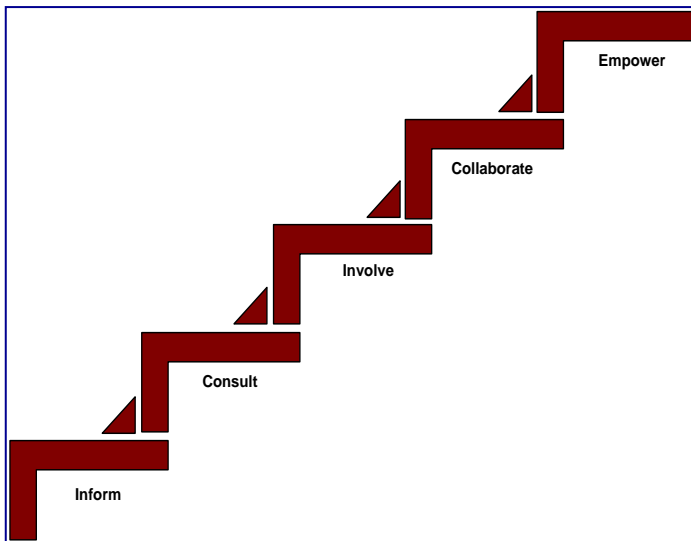
Introducing and assessing the impact of this innovative approach across an integrated workforce will be a key and the learning will be used to influence and direct the on-going systems change.

Engaging Families & Communities

Effectively engaging with our service users, or potential service users, is a significant challenge for Blackpool's Better Start. It is an area where we know there is lots of scope to innovate and opportunity to improve. Through our community consultation work we have pinpointed a number of **key challenges in engaging families and communities:**

- Many families in Blackpool are poorly connected to their communities
- Parents want safe space to meet other new families
- Service access and engagement is often poor
- Trust in professionals is often low
- Parents want more say in the design and delivery of services
- Parents would like to be more informed about child development
- Parents would like to be more in control and to have greater agency to help children themselves

In response to this challenge we have begun the process of developing a different approach to involving citizens and we plan to develop and build on this through Better Start to radically change the way we work with Blackpool's children and families. Our ambition is **to go on a journey with our service users and – over time – increase the role that they play in the decision making processes so that we reach a point where we have genuine and sustained engagement with increasing number of Blackpool's citizens** as shown in the final two columns of the diagram – collaboration and empowerment. We will know we have succeeded when future waves of Area Well-Being data are produced (Year 3) and instead of doors being shut in the face of the researchers, we get begin to get signs of greater engagement and trust.



We have no romanticism about the challenges of meaningful community engagement, particularly in a community facing such stark levels of deprivation and fragmentation as ours. We therefore believe it is necessary to put in place a robust infrastructure to support the process of building confidence and capability. We recognise that this will be a long term endeavour. We know the importance of being able to demonstrate swift and visible impacts early on, so that local parents can see they are being heard and that their concerns are being addressed.

We have therefore developed a number of key strands to our programme of engagement:

1. **Strengthening our understanding and skills**

Building on the Well-Being data, we will work with researchers to get a deeper understanding of how Blackpool's families think about children and how they see their needs. This research will feed directly into the Child Development 'Reframing' work; and it will provide important insight for our public health campaigns described earlier.

2. **Delivering our pledges on service accessibility**

In our community consultation, parents asked us to make services more accessible by putting them in places where people currently go, like their GP clinics and children's centres, at times that suit the community, not just between 9am and 5pm. Parents also want our services to have 'one front door' so that families' needs are met without multiple referrals and so that information is shared in a way that means families need only tell their story once.

3. **Nurturing community champions**

A Volunteer Academy will be established to recruit, mentor and support a renewing group of community champions. Building on and expanding the community champion initiative in Blackpool. They will work in communities to actively promote the use of services and highlight to the partnership where changes are needed.

4. **Creation of 'FNP Mentoring Service'**

Building on the local success of the Family Nurse Partnership, we will work with the FNP National Unit to develop a new mentoring service, provided by local graduates of the programme. Building trust and engagement are major challenges for public services in Blackpool. We believe that by training and supporting FNP graduates as mentors/befrienders to other parents, we will not only overcome barriers to service engagement, but also be help to build the skills, confidence and work-readiness of the graduate volunteers themselves.

5. Empowering 'Community Voice'

Our community engagement board provides a solid foundation on which to build a group of empowered service users from all parts of the community with formal structural links to the governance of the Better Start Partnership. [Further details on how we will ensure they have meaningful influence in our governance arrangements can be found in Annex M.] We will coach and support this group through the stages of engagement. They will be our touchstone for when we're getting things right – and wrong.

6. Targetting known weaknesses

We have identified areas where our current user engagement is particularly poor and we will target these areas for special attention: engaging Dads, take-up of free nursery places for two year olds and help in a crisis. We have included budget for specialist workers, employed from the community, whose role will be to address these critical issues, drawing on research and development insights brought together by the Centre for Early Child Development.

7. Real projects with budgets and impact

Community Voice and other bodies that will be developed over time will be given control of budgets and have real decision making authority. We have already identified two totemic projects that Community Voice will take lead responsibility on: **Beach School** and **Improving safe space and play**, and we expect the Community Voice will develop other projects.

Beach School

Blackpool has 11 miles of coastline and beach, which is an unexplored environment for many of our young children. Taking inspiration from the successful 'Forest Schools' approach, local parents have set out their ambition to create their own Beach School. There is scope for outdoor play and learning on the shore and the beach offers a unique environment for children's discovery and learning. That could mean getting in the water, living out desert island fantasies, creating amazing sand sculptures, lighting fires, driftwood structures or just as simple as feeling the sand between your toes! We've always got our fair share of pirates and smugglers too. This would link in with the Heritage Lottery bid project *Creative People and Places* which is developing activities around Blackpool's coastal and marine past.

As well as building strong social networks, a key focus of the Beach School will be on building communication and language skills, promoting healthy nutrition and building social and emotional skills. We intend working very closely with parents to encourage talk in everyday activities to promote effective communication skills and sensitive interaction with new babies and toddlers. Responding to parents requests to help other parents, we will set up a group of 'Community Communication Champions', trained parents and volunteers who will promote communication to other parents in their community. The beach school will be an important setting for our broad public health approach, allowing parents to access information, support and advice and helping to build their confidence and sense of self-efficacy.

Improving safe space and play (community fund)

A consultation with the community has already taken place about the development of the green spaces in Blackpool. These projects will not only enable young children and their families enjoy the outdoors more but also encourage physical exercise (an important issues highlighted in our

wellbeing data). Our needs analysis highlighted social isolation as a very salient issue in Blackpool and a core role of this fund will be about helping to build social networks and places where new families can meet.

These projects are not about expensive equipment, but about making the most of available space and resources.

They will take in to account the need to reclaim the space for positive community use. Many of these projects are to join up with other projects across the parks to ensure best value for money but also that the longer term maintenance costs and implications have been taken in to account. The spaces will be used to grow flowers, trees, fruit and vegetables and play areas. The community will be starting a birth tree scheme where each month a tree is planted for the new babies born that month. All new-borns will be notified about their tree and encouraged to visit it at least once a year!

Management of both the Beach School and Improving safe space and play (community fund) will be supported by Groundworks, a local charity with great expertise in community engagement and delivering successful community development projects. Better Start will fund a community development worker from Groundworks to support these projects and ensure local parents have real ownership.

Workforce Development

We have pinpointed our **key challenges around workforce development**:

- We have a partial picture of development needs across the Better Start workforce as a whole
- Professionals want tools and approaches for better engaging families
- Professionals want access to evidence based methods of practice and opportunities to share learning
- Some practitioners need specialist training in evidence based programmes
- There are opportunities for increased multi-agency working
- They want more opportunities for reflective practice
- Opportunities to increase professional confidence and autonomy for decision-making

Generally we have a wide definition of the 'Better Start workforce', encompassing parents and volunteers – as well as professionals to ensure we connect with the widest range of providers. Our approach to building the capacity and capabilities of parents and volunteers is described in the preceding two sections on 'reframing' and on 'engaging families and communities' (and also in Annex N). In this section we focus primarily on the development of the professional workforce.

In Appendix G8 we set out our draft workforce strategy, which will be refined and finalised during the first six months of the Better Start programme, giving us more time to capture crucial baseline data. The key planks of our workforce development strategy will be:

1. Establishment of the 'Better Start Workforce Development Group'

This inter-agency body will oversee the production and delivery of the workforce development strategy. It will bring together senior managers from the partner agencies with the authority to

reshape workforce development opportunities according to a common Better Start design. They will ensure that professional development and training opportunities are prioritised and that staff are rewarded for their commitment to the Better Start programme (for example through end of year appraisals).

2. Core values, competency framework and skills audit

This Better Start Workforce Development Group will lead on the development of a set of ‘*core values*’ which will help to guide professional practice and provide a common frame of reference between staff from different professional disciplines. The group will also develop a shared ‘*competency framework*’ for staff and volunteers. They will also undertake an audit of the current skills, experience and competencies of the workforce and use this data to prioritise needs and to plan specific training and development activities.

3. ‘Core training’ programme

Building on the work with the *Frameworks Institute*, training in child development will be the central component of the ‘core training’ programme for all of the Better Start workforce. Definition of the core training programme is also likely to include roll out of successful approaches for engaging families (such as Motivational Interviewing, which has already been widely adopted in our FNP and Health Visiting teams) as well as issues such as safeguarding, perinatal mental health awareness, domestic abuse, drug and alcohol misuse and data protection.

The NSPCC has developed ‘*Breakdown or Breakthrough?*’ a series of five ground-breaking films with Dr Amanda Jones which cover key topics all professionals working across the perinatal period need to be aware of, such as ‘the social brain’, ‘the forgotten father’, ‘emotional breakdown’ and ‘domestic abuse.’

Delivery of the ‘core training’ programme will be a priority across the entire Better Start workforce and will require careful programme management and senior level buy-in.

4. Specialist training for specific professionals

The Workforce Development Strategy will also capture the specialist training needs identified by individual services or professions. For example, maternity services have committed to training midwives in the Brazelton *Neonatal Behavioural Observation*. And Children’s Centre workers will be trained in *Supporting Speech, Language and Communication in the early Years*.

5. Specialist training in evidence based programmes

The Centre for Early Child Development will oversee the planning and delivery of specialist training in our newly-introduced evidence based programmes such as Video Interaction Guidance and Safecare. Many of these new programmes will involve increased multi-agency and inter-professional working. Given the multi-agency nature of many of the interventions, the Centre will need to liaise very closely with all partner providers. We have designed a staggered approach to implementation to avoid bottlenecks when large amounts of training are going on at the same time. We have also anticipated the need for back-fill training when practitioners leave or go on maternity leave. The Centre will also hold the relationships with new external programme developers, providing a clear and single point of contact between frontline practitioners and the organisations who originally developed the interventions.

6. Video enhanced reflective practice (VERP)

As part of our Workforce Development Strategy, we will explore the potential to pilot the use of Video Enhanced Reflective Practice. This approach has been successfully pioneered in a range of different contexts, including a small local pilot among NSPCC practitioners already delivering Video Interaction Guidance in Peterborough. This approach involves the use of video technology to film supervision sessions; and joint discussion of the films between managers and practitioners to help review interaction and promote reflective practice.

The 'Bank of Blackpool' and integrated commissioning

We have identified several significant **challenges to resourcing** of support from conception to three, as well as **barriers to integrated commissioning**:

- Need to redirect investment towards early years intervention and prevention
- Little outside investment in services from pregnancy to three
- Competing priorities between different agencies
- Gaps between systems (between health and children's services; adults' and children's services; maternity and child health; voluntary, statutory and private; and between prevention and protection).
- Need to inform commissioning decisions on the basis of 'what works' and 'what doesn't' – as well as evidence of value for money

Blackpool Better Start is committed to whole system change and the development of the **Bank of Blackpool** and **pooling of budgets** for conception to 3 are central to this change. Partners are committed to creating a pooled budget for Big Lottery money, with £30 million of funds leveraged from the public system.

In addition to the Big Lottery funding, the Partners agree to ring fence and make available over the ten years of the Better Start programme £30,000,000 (thirty million pounds) from existing budgets. During the first 12 (twelve) months of the term, the Partners will obtain legal and financial advice as to the most appropriate vehicle for holding such funds. This could be holding the monies in a joint bank account, on trust, or in accordance with any other structure as may be agreed by the parties.

The Bank is expected to have three elements:

- **Effective governance** – delivered through the structure outlined above – crucially the community have a clear, consistent and robust voice into this through the newly developed community partnership and also through the more established and embedded Fairness Commission (terms of reference attached).
- **A pooled budget** – partners have committed to pooling £30 million of resources to enable re-design of service delivery and expansion of services which are demonstrated to be effective and provide good value for money. The current commitments are based on financial projections, which are based on known resource allocations. Partners have the right to revise this if their resource allocation changes.

- **An integrated commissioning framework**, which ensures that the Executive sets the strategic direction and that commissioning is delivered in an effective and legal way. This process will include a joint commissioning sub group that will manage the mechanics of any commissioning process and ensure conflicts of interest are effectively managed. It will also include a critical friend role from the *Blackpool Centre for Early Child Development*, helping ensure that commissioning draws on the best and most current evidence and science base.

Blackpool Local Authority has a history of pooling and aligning budgets to improve outcomes, create economies of scale, and work in closer partnership with other organisations. Most recently the Local Authority have pooled budgets with health and local voluntary organisations on Learning Disabilities and created a joint NHS commissioning pooled budget for substance misuse services. In addition the Families in Need team have aligned budgets from health (mental health and substance misuse) and the Police to create a multi-agency team of professionals together all line managed by the Local Authority. This has led to families receiving a holistic response to their needs. We intend to build on this track record of managing pooled resources.

Our governance arrangements have been designed to support community commissioning. By this we mean parents and residents having a central role in the commissioning of local services, making collective decisions on how to get the very best outcomes from available resources. This could include, integrating services, participatory budgeting and personalisation.

We will build local evaluation expertise located within the new *Blackpool Centre for Early Child Development*, and we will ensure that evidence is central to decisions about commissioning, decommissioning and expansion of services.

Leadership and accountability

We aspire to be recognised leaders in combining the power of local communities and public systems to radically improve outcomes for babies and young children. Delivering our vision requires governing in a different way with families and communities to reshape services.

The key **challenges for leadership and accountability** are:

- Early Intervention and prevention require a long-term and sustained commitment
- Policy silos
- Giving the community real power and influence over outcomes

Our **new approach will be characterised** by:

- Strong leadership and clear accountability
- Authentic partnerships built around shared outcomes
- Building relational public services

To achieve this, in Blackpool we are building on strong foundations with an established track record for partnership working across the local authority, health and voluntary sectors. The community is at

the heart of the Better Start Partnership with representatives on each of the boards. Our governance arrangements are designed to enable parents, residents and services to tackle shared problems together through systems that are interconnected and decentralised. By working in this way we aim to build more relational public services.

We will ensure that Better Start is a long-term priority and ensure wider policy developments are based on the needs of families by:

- Building cross party, long term consensus on the Better Start goals.
- Senior Officers and Political Leaders sharing accountability and leadership of the change agenda by prioritising, championing and being accountable for the delivery of outcomes for pre-birth to 3 years,
- Policy development based on the needs of families to ensure their needs are taken into account in other initiatives (e.g. economic development, environment and housing)

A Community Partnership Board is responsible for developing and implementing the Better Start strategy for Blackpool. Sitting alongside this is *Community Voice* – a group of parents with an elected member sitting on the Operational Board. As *Community Voice* grows in confidence it is hoped that other members will take a more active role in developing Better Start. Through the governance arrangements, community and voluntary groups, parents and residents will participate at a range of levels – from providing advice to co-designing the process and from undertaking some aspects of the engagement to delivering projects to meet some of the outcomes.

To give the community real power and influence over outcomes they be supported by the *Blackpool Centre for Early Child Development* and will have their own budgets for particular projects such as the Beech School and developing play spaces. Further engagement activity, detailed in Section N, will support community collaboration and empowerment.

While we are ambitious, we recognise there will be challenges. We have taken a staged approach at a pace that is realistic based on the NSPCCs experience of implementing evidence based programmes. We will support implementation of the programme through the *Blackpool Centre for Early Child Development* described below.

Pillar 4

BLACKPOOL CENTRE FOR EARLY CHILD DEVELOPMENT

Building and sharing learning

The final pillar of our distinctive Better Start approach will be establishment of the *Blackpool Centre for Early Child Development*. The centre will play a crucial role in driving Better Start strategy and overseeing delivery and learning from the programme. Our ambition is that the centre should become an internationally recognised and renowned source of expertise and innovation in services and systems from pregnancy to three.

Functions of the Centre

- Leadership and strategic direction for the Blackpool Better Start programme as a whole
- Planning and implementation of the public health campaigns and new evidence based interventions, working in partnership with other providers
- Managing the part
- Communications and marketing, including the Child Development 'reframing' approach
- Managing community development contracts and projects
- Research and development of new services
- Support and challenge to the Executive around systems transformation
- Support and challenge to the Workforce
- Local evaluation of process, impacts and costs to inform service improvement and commissioning
- Central IT systems and data capture for the programme
- Support and challenge to the Bank of Blackpool and commissioning board on quality of evidence
- Capturing and sharing learning

How it will work

We will establish a **dedicated and expert local team**:

- **The Director** of the Centre will provide overall leadership of Better Start in Blackpool and be accountable to the Executive Partnership Board. He/she will be a key ambassador for the programme across the partnership and externally. The Director of the Centre will be a high profile role and we expect this to be filled by a recognised expert in the sector.
- **Development Managers** will each be responsible for leading implementation of several evidence based programmes, liaising as appropriate with other partners and providers. They will also have a role in managing research and innovation projects and in workforce development and training.
- **Evaluation Officers** will be responsible for local evaluation at individual and population levels.
- A **Community Development Officer** will manage the community engagement contracts and projects, support the *Frameworks* project and be the key link between the Centre and the *Community Voice*.

- A **Senior Communications Officer** will manage all marketing and communications activities, including materials for new services and management of the *Frameworks* project.

There will also be a dedicated and experienced **Business Manager** to oversee day-to-day operations of the programme. There will also be **Administrative** posts, a **Data Analyst** and a part time **Finance Officer** to ensure smooth running of the programme and business operations, to organise events and to meet reporting requirements expected by partners, funders and the accountable body.

We will develop a '**special relationship**' with the **NSPCC's programme on pregnancy and babyhood**, led by Chris Cuthbert (Head of Strategy & Development at the NSPCC) and his team, providing:

- **Communities of practice** with practitioners from over thirty other NSPCC service centres providing evidence-based interventions specifically for pregnancy to three
- **Local opportunities to collaborate** with NSPCC's established and fully staffed local service centre in Blackpool
- **National experience** and advice on developing, implementing and rigorously evaluating science and evidence based programmes
- **Policy and influencing** at national level, such as NSPCC's *All Babies Count* campaign and Spotlight reports on issues such as perinatal mental illness, drug and alcohol misuse, homelessness and babies in the criminal justice system
- **Opportunities for 'buddying'** with Development Managers, Evaluation Officers, Policy & Public Affairs Officers, Communications Specialists and Fundraisers at the NSPCC's national offices
- **Advice on replication and dissemination**
- **Advice on research ethics**

The NSPCC has a unique contribution to bring to the *Blackpool Centre for Early Child Development*. The pre-birth to 3 life stage is a strategic priority nationally for the NSPCC and over the past two and a half years the NSPCC has invested £11.5 million in evidence based programmes specifically focussed on this life stage. We have a track record of implementing programmes as well as undertaking rigorous, science based innovation, including robust experimental evaluation. This capacity will have direct benefit for Blackpool as the only site supported by the NSPCC in the Better Start programme. Furthermore, any learning from Better Start will have a wider benefit, since NSPCC operates in 42 sites across the UK and has a strong influence in national policy.

The Blackpool Centre for Early Child Development will create a **virtual network of national and international experts** to keep abreast of latest research, policy and practice and to share findings from our own programme. Below are examples of the kinds of expertise we will seek to bring into the network:

- Implementation Science: Michael Little, David Olds, George Hosking
- Child Development: Pasco Fearon, Lynne Murray
- Perinatal Mental Health: Alain Gregoire, Susan Pawlby, Tessa Baradon
- Drugs and Alcohol: Sharon Dawe; Paul Harnett; Barry Carpenter

- Domestic Abuse: Gene Feder; Harriet McMillan; Gwynne Rayns
- Parent Education: Angela Underdown; Sally Hogg; Mary Nolan
- Children's Centres and Child Care: Naomi Eisenstadt; Kathy Sylva
- Language and communication: Jean Gross; AN OTHER
- Child Health and practice: Kate Billingham; Cathy Warwick; Cheryll Adams
- Public Health: Mitch Blair; Jane Barlow
- Child protection: Ruth Gilbert; Julie Taylor; Phillip Noyes
- Community engagement; Nesta
- Research and evaluation: Richard Cotmore; Leon Feinstein
- Finance and fundraising: Elly Decker; Paul Farthing

The *Blackpool Centre for Early Child Development* will become part of a wider community of learning that includes other successful Better Start wards across the country, the Early Intervention Foundation, Dartington Social Research Unit, WAVE Trust and other centres of expertise in this important field.

We fully recognise the importance of recruiting a high calibre team and that we will require excellent business infrastructure if the Centre and its staff are going to be able to deliver on our ambitious programme. We will invest time in bringing in the right team and establishing robust systems. We fully expect the Director to be a recognised expert in the sector. And our work plan is carefully staged, recognising the kind of pace that will be realistic based on our previous experience of implementing evidence-based programmes.