

Best Start Sheffield Lottery Bid

Governing Body meeting

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7 November 2013

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| Author(s)/Presenter and title | Tim Furness, Director of Business Planning and Partnerships |
| Sponsor | Tim Furness, Director of Business Planning and Partnerships |
| Key messages | |
| <p>Sheffield has reached the second stage of bidding against the Big Lottery Fund's Fulfilling Lives a Better Start fund, which could bring very substantial resources into Sheffield to improve the outcomes of children in three of Sheffield's most deprived wards. As well as improving life outcomes for children in these areas, the proposal needs to demonstrate how public services will be transformed as a result of the work.</p> <p>The attached documents describe the work to date to develop the detailed proposal from Sheffield and the terms of reference for the Partnership Board established to oversee development of the bid and implementation of the proposal, if the bid is successful.</p> <p>The CCG should be involved both to support and hopefully therefore increase the strength of the bid, and to ensure that the proposal reasonably reflects the opportunity to transform healthcare as a result of the preventative work proposed.</p> | |
| Assurance Framework (AF) | |
| <p>Assurance Framework Number: 3.2 Budgetary constraints faced by Sheffield City Council result in actions by a key partner which adversely impact on CCG's ability to implement its priorities</p> <p>How does this paper provide assurance to the Governing Body that the risk is being addressed? Although addressing the above risk is not the main reason for CCG involvement, there is a risk that without our involvement the proposal could make inaccurate assumptions about the impact on health care, leading to the above risk. Therefore this paper provides assurance against that risk.</p> <p>Is this an existing or additional control: Additional</p> | |
| Equality/Diversity Impact | |
| <p>Has an equality impact assessment been undertaken? NO</p> <p>Which of the 9 Protected Characteristics does it have an impact on? All, potentially. However this report is for information and the recommendations for Governing Body do not impact on the protected characteristics.</p> | |

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| Public and Patient Engagement |
| To be undertaken by the project team |
| Recommendations |
| <p>That the Governing Body:</p> <ol style="list-style-type: none">1. Notes the ambition and opportunity of this work and its alignment with wider strategies for reducing health inequalities, mitigating poverty and integrated commissioning across CCG and the Local Authority.2. Supports forward communication to primary care and partners about this work and identify links or dependencies.3. Notes the challenges and risks outlined in the paper.4. Notes that any future implications in terms of integrated commissioning and pooled budgets arising as the programme develops, would be the responsibility of the Area Partnership Board and would be channelled through and determined by CCG and SCC's existing partnership and commissioning arrangements.5. Delegates authority to make urgent decisions regarding the CCG's contribution to the programme to the Accountable Officer, as the CCG representative on the Partnership Board, who will consult with the CCG Chair and the CCG Children and Young People's lead in making such decisions. |

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1. Introduction / Background

This report seeks to update the CCG on the opportunity this Bid presents for the city, the Local Authority and health partners linking more strongly with the Voluntary, Community and Faith (VCF) sector, the timelines, progress to date, risks and challenges.

2. Background

In October 2012 BIG Lottery announced they had earmarked up to £165m to invest in an ambitious initiative called Fulfilling Lives: A Better Start. This is Lottery's largest grant to date and is focused on delivering a step change in preventative approaches in pregnancy and the first three years of life to improve life outcomes for children. **The aim is to improve the physical, emotional and psychological foundations built during a child's early years, improving outcomes and reducing demand for specialist interventions and support across sectors throughout life.**

BIG Lottery has determined the key features of this programme to be:

- Investment of £30-£50 million through the VCF sector in 3-5 areas of the UK for up to 10 years. These funds cannot be used for to pay for statutory services.
- Investment in each of the 3-5 areas will be targeted in three wards (selected by a basket of indicators including health, education and child poverty)
- Each area will deliver a variety of initiatives that are shown to reduce health inequalities, improve social and emotional development; language development and diet and nutrition of children.
- Areas will design a whole system change programme involving health, local authority and voluntary sector services for children and families in pregnancy and the first three years of life. This will focus upon evidenced based primary prevention in early life around a whole-family approach.
- Senior level engagement and sponsorship with this programme across the LA, CCG and the VCF sector is essential.
- The whole system change will shift of investment from specialist services into early intervention and prevention (help and support for parents, carers and families) across health and LA provision, aligned to additionally delivered by the VCF sector.
- Strong and genuine community engagement in the design and delivery of the programme will be a central feature.

The Fund wants to demonstrate that it is possible to:

- Give disadvantaged and vulnerable children a better start in life.
- Reduce the costs of dealing with later health and social problems.
- Provide effective and sustainable preventive approaches in very early life by harnessing the skills, commitment and resources of the voluntary, health and local authority sector leaders and practitioners working together.

There were 102 initial Expressions of Interest made in February, 44 sites were selected to make a Stage 1 Submission in June and 15 selected to make a Stage 2 Final Application originally on 3 January 2014 (this has been accompanied by a £400K grant to the Lead Organisation to support Stage 2 activity). Lottery confirmed on 15 October that final submission date has been changed to 28 February 2014. Following a period of detailed evaluation, the final decision will be communicated in early June 2014.

The final 15 areas are:

| | | | | |
|----------------|-----------|------------|----------------|---------|
| Blackpool | Lewisham | Newcastle | Bradford | Luton |
| Northumberland | Haringey | Manchester | Nottingham | Lambeth |
| Medway | Sheffield | Leicester | Middlesborough | |

Southend on Sea

Given the size of the award, the Lottery has engaged the Dartington Social Research Unit to manage and support sites through the Stage 2 process in a structured and somewhat prescriptive process, so specific milestones and activities have to be met.

The final submission will include: Executive Summary, Strategy Document and Project Plan. The project plan should include: detailed implementation for the first 18 months, with higher level detail for the following years, project delivery sites, risk analysis, resource profile, finances and funding, the approach to monitoring and learning, equalities impact, marketing and communications plan, organisation and partnership summary and detail on the ongoing engagement of service users / community in the work.

3. Sheffield's approach

Initial invitation for Expressions of Interest was sent through to Chief Executives of LAs in November 2012 requiring that work at this stage be jointly led by Directors of Children Services and Public Health. This included a process to appoint the VCF sector Lead Organisation and Accountable Body. Given the cross sector nature of the work, this activity was overseen by the Children's Health and Wellbeing Partnership Board (chaired jointly by Jayne Ludlam and Simon Morrill, Sheffield Children's NHS Foundation Trust (SCHFT)).

An open and transparent process, that sparked interest from both local and national VCF sector organisations, led to the appointment of the **Sheffield Well-being Consortia (now Sheffield Cubed)** as the Lead Organisation for Sheffield. The three wards (based on a basket of health and deprivation indicators) are **Darnall, Manor Castle and Shiregreen / Brightside**.

As far as governance is concerned, a **Steering Group (chaired by Jayne Ludlam)** is in place and this is accountable to the **Area Partnership Board (APB), chaired by John Mothersole and including Ian Atkinson)** which met for the first time on 14 October. The cross sector APB retains the overall accountability and governance for the design and delivery of the programme, with delegated authority from member organisations. Members are Accountable Officer CCG, Chief Executive SCC, Director of Public Health (DPH), Interim Director of Children's Services (DCS) and Cabinet Member

Children and Young People's Forum (CYPF) and Elected Director, Sheffield Cubed. **The Terms of Reference for this Board are included at Appendix A.**

Sheffield's Stage 1 application completely aligned with the vision and outcomes of the Children's Health programme and the Good Start in Life programme being led by the Children's Health and Wellbeing Partnership Board. The concept of shifting investment into early intervention and prevention, working in a whole family, whole system way considering integrated commissioning and pooled budgets is also aligned to current strategy.

Our submission focused on a whole system approach to the development of a healthy relationship between children and their parents and carers in the first three years of life, primarily based on the concept of attunement and attachment. There is also a strong link to early help and support and reducing health inequalities.

The funding will be from the Lottery to the VCF sector, but seen very much as leverage to deliver longer term and sustainable system change. This bid presents a unique opportunity to align and leverage spend and commissioning activities across sectors and access up to £50m additional funding for the city.

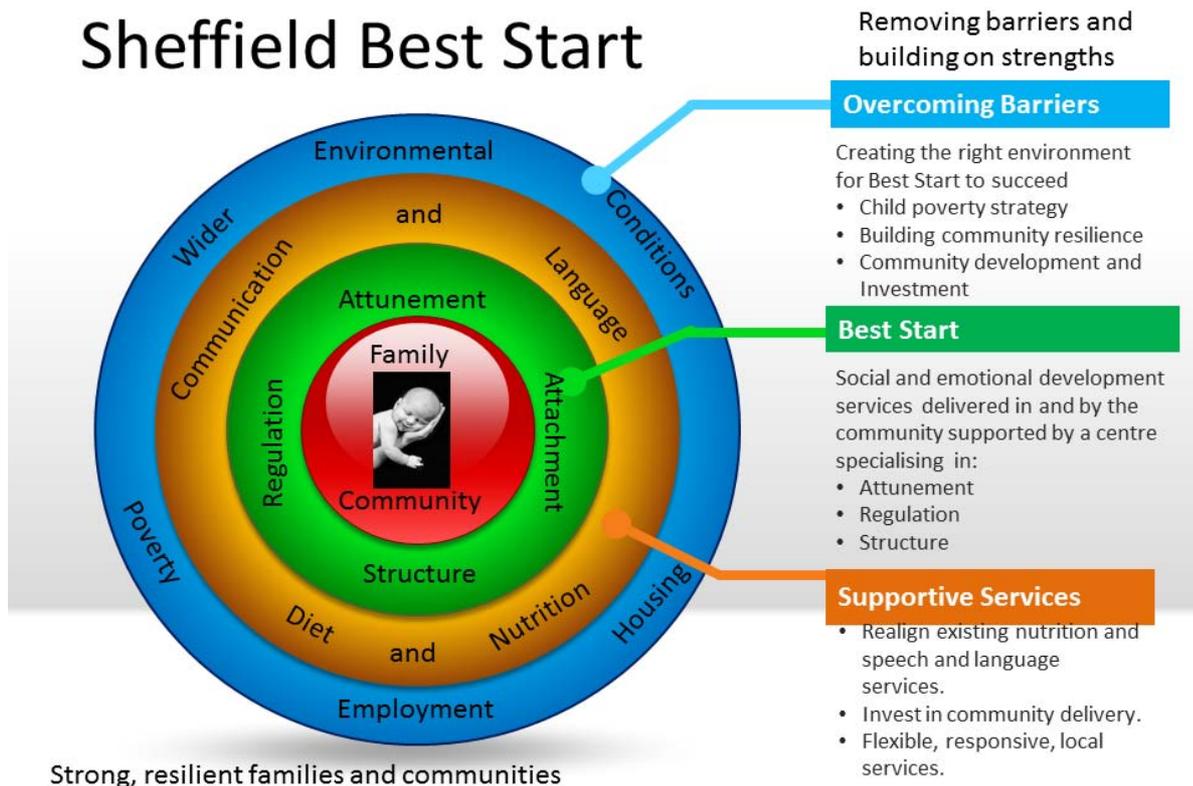
The bid makes clear the expectation that spend will be aligned across sectors but does not explicitly require match funding.

4. Proposed Model

Work is ongoing to refine the outcomes this programme will deliver and the indicators and measures that will determine impact. Outcomes submitted at stage 1 were:

1. Children are supported to develop improved social and emotional adjustment, and cognitive skills improving their life chances, early attainment and relationships with others through confident, resilient and supported families.
2. Children have improved social skills, high quality interactions and higher attainment through families having enhanced understanding and skills in supporting and developing communication.
3. Children's emotional and physical health is improved, reducing future health problems through families having the knowledge and resource to provide a nutritious daily diet from conception through childhood.
4. Sheffield will have and deploy an integrated holistic and improved model for systems change, and effective partnerships between families, communities and organisations, ensuring infants and their families receive the best possible support in all the contacts they receive.

Sheffield Best Start



The concept of attunement, regulation and structure will be at the core of all services and settings working with families in Darnall, Manor Castle and Shiregreen Brightside. All services and settings will utilise the latest research and evidence based approaches to work towards improvements in the **three key outcomes - social and emotional development; nutrition; and speech and language development**

The model will include community capacity building to support families, increase resilience and improve outcomes based on strengthening the relationship between parents, carers and children. This will complement changes and redesign of universal services and the creation of a culture of excellence. This will support the whole system to develop targeted interventions and understand and implement the latest research and evidence based practice.

In the medium term it is anticipated that savings across the health and social care system generated by the impact of improved early support and community based capacity building, could be redirected into additional capacity to provide targeted interventions for the most vulnerable families.

5. Challenges and Risks

Capacity and resilience within the VCF sector. This has been discussed at length within the project team and Steering Group. Support to develop grass roots community capacity is being led by Sheffield Cubed as part of this Stage 2 process.

Relations with the VCF sector. The perception of the VCF sector is that current activity by SCC has had an adverse impact on relations with the sector overall. This is an ongoing issue which the Interim Director CYPF, SCC's programme team and lead officers are seeking to address.

Financial Risk: Clarification is being sought from the Lottery around any financial risk that may result for either SCC or CCG if this Bid is successful. The current understanding is that all monies will be paid to Sheffield Cubed. Guidance from the Funding Officer (Investment) at the Lottery is as follows:

'The lead VCS (Sheffield Cubed) has legal responsibility for the grant. If they were unable to continue as the lead organisation we would look to transfer the grant to another VCS organisation. If no other VCS organisation was able to take on the grant and there was unspent funds that were paid to the Local Authority or any other partner we would require this to be returned. In terms of any capital, we would require an asset transfer to be carried out and would need to ensure that it would be used for a similar purpose. We do not have this formally written in any of our guidance, however, I have attached a copy of the terms and conditions of the development grant'.

In relation to the length of the programme and the ongoing challenging financial environment, it will be a guiding principle that the Council and CCG would be able to restructure or exit the programme if agreed outcomes were not delivered. This would be monitored by the Area Partnership Board (chaired by John Mothersole).

6. Recommendations

That the Governing Body:

1. Notes the ambition and opportunity of this work and its alignment with wider strategies for reducing health inequalities, mitigating poverty and integrated commissioning across CCG and the Local Authority.
2. Supports forward communication to primary care and partners about this work and identify links or dependencies.
3. Notes the challenges and risks outlined in the paper.
4. Notes that any future implications in terms of integrated commissioning and pooled budgets arising as the programme develops, would be the responsibility of the Area Partnership Board and would be channelled through and determined by CCG and SCC's existing partnership and commissioning arrangements.
5. Delegates authority to make urgent decisions regarding the CCG's contribution to the programme to the Accountable Officer, as the CCG representative on the Partnership Board, who will consult with the CCG Chair and the CCG Children and Young People's lead in making such decisions.

Paper prepared by Sarah Homer, Programme Manager CYPF

On behalf of Tim Furness, Director of Business Planning and Partnerships

24 October 2013

**Best Start Sheffield
Area Partnership Board
Terms of Reference
Final Draft V2**

1. Purpose

This document describes the terms of reference, membership and methods of communication for the Area Partnership Board (APB) established to deliver the Best Start Sheffield programme (funded through the BIG Lottery Fulfilling Lives: A Better Start Grant).

2. Vision

To develop and implement a transformational programme to improve the outcomes for infants and small children across Sheffield through partnership working with communities, families and partner organisations. The Vision for this programme is that all babies and small children live in a nurturing and healthy environment with a strong and positive relationship with their families and care givers, so that they have good levels of speech and language acquisition, good social and emotional development and are well nourished.

3. Values underpinning the programme

Enhance the quality of parent / carer - child relationships.

Collaborative working.

Enable systems change.

Recognise the value of communities.

Transformational.

Sustainable

4. Underlying Principles

Openness and robust partnership working – all work is carried out in an open and genuinely collaborative manner

Respect – all members will be treated with respect, ensuring their voices are heard in an environment that enables equitable contribution, engagement and dialogue.

Honesty – all members demonstrate honesty in their contributions.

Transparency – all members present themselves using simple language.

Commitment to the model – all members would ensure their organisation's work is aligned to the agreed future model in these wards

5. Membership - Current Members

The members of the Area Partnership Board (APB) are outlined in Appendix 2.

Chief Executives have the delegated authority of their organisations to make decisions.

The length of term per member is 3 years and will then be reviewed and/or re-elected

6. Powers and Responsibility

The APB has been established as the decision-making body to oversee the development of Sheffield's Stage 2 bid to Big Lottery Fund's Fulfilling Lives: a Better Start and to ensure the successful delivery of the proposed Sheffield programme.

Sheffield Cubed is the named lead organisation for the Big Lottery Fund and has a legal responsibility for the process and contract with Lottery. The Sheffield Cubed Director sitting on the APB will have the delegated authority of the Sheffield Cubed Board as the legal accountable body.

The APB possesses overall decision-making powers and is charged with managing the development of, and providing complete governance for, the programme. The APB is charged with ensuring that all partners are aligning their strategies to ensure that the Vision and outcomes of the programme will be delivered. It takes into account the contractual relationship between BIG Lottery and Sheffield Cubed.

The APB ensures shared accountability for the delivery of this programme and impact on outcomes and systems including:

Final Approval on the future model and final submission for the Best Start Lottery Bid

Financial accountability - ensuring that any Big Lottery Fund investment is spent and monitored accordingly. Recognising the contractual relationship between Sheffield Cubed and the BIG Lottery Fund.

Outputs accountability - ensuring accurate monitoring of provision for families and its quality

Outcomes accountability - ensuring that the expected impact on child wellbeing is achieved and if strategies are not achieving results, the Area Partnership makes appropriate strategic changes. Appendix 1 outlines the outcomes documented in the stage 1 application.

Leveraging and aligning funding and resourcing across the partnership – ensuring investment has long term impact on child wellbeing and future models are sustainable within whole system change such that new ways of working are embedded beyond the eight to ten year span of the programme.

Sharing accountability – ensuring that appropriate stakeholders are involved in the work and that the local community feel ownership of, and share accountability for, the strategy.

Sponsorship - ensuring that the Programme Vision and outcomes are at the core and aligned to strategies across partner organisations and ensure links to other Governance structures and Bodies recognise the role of the Area Partnership Board in the future strategy planning for Early Years provision.

Problem Resolution – ensuring that any system wide or programme issues impacting delivery are resolved through decisions made at Board or through sponsorship of discussions at other Boards.

Escalation – if there are conflicts of interest that cannot be resolved by the APB, these will be escalated by the Chair to the Health and Wellbeing Board.

7. Scope

The Area Partnership Board will consider within its remit all health and wellbeing services focused on pre-birth through to 3 years old (early years) the commissioning of which is the responsibility of its partners. And all voluntary, community and faith sector initiatives focused on support to children 0-3 years old. This will include but is not exclusive to:

- Multi agency support teams
- Children's centre activity
- Safeguarding services
- 0-5 children's health services
- Community therapies including physiotherapy, occupational therapy, speech and language,
- Emotional wellbeing and mental health services focused on early years
- GP services for children
- Universal services to children with special education needs and/or disabilities
- Universal services to vulnerable children e.g. travellers, homeless families, asylum seekers and the newly arrived
- Maternity services
- Health visiting
- VCF sector initiatives focused on early years
- Domestic Abuse services
- Links to housing services and providers
- Links to services supporting employment and skills development

8. Process for New Members

New members may join the APB but only with the agreement of current members. The process for joining the partnership includes:

By the invitation of the APB.

Completion of a register of interest pro forma

The decision as to whether it is appropriate for the organisation to join the partnership is taken at the next APB meeting

9. Meetings

Initially, the frequency of the Area Partnership Board meetings is in accordance with the requirements for the development and submission of the Big Lottery Fund bid. The frequency of meetings will be monthly for the first 12 months of the programme and reviewed thereafter.

The minimum number of members for a quorate meeting is 7 with a minimum of 2 from the VCF sector

The meetings will be chaired by the Chief Executive SCC. The Vice Chair will be the elected Director, Sheffield Cubed.

Members cannot delegate attendance

The Senior Programme Manager is responsible for organising the meetings.

There will be a standing agenda for each meeting to include Minutes and Actions arising, Programme Update including risks and issues for escalation together with items proposed from Best Start Sheffield Steering Group and Ward Community Panels

Non-members will be invited to meetings for specific agenda items as required

The Senior Programme Manager will provide secretariat for the group

Meeting papers will be circulated one week in advance by email.

10. Relationship with the Community Partnerships

The APB comprises representatives from the three Community Partnerships representing Darnall, Manor and Castle and Shiregreen and Brightside wards.

11. Methods of Communication

The papers and minutes for the meetings will be placed on the Best Start website, unless their contents are commercial and in confidence. In addition, the key points from the meetings will be summarised for the website and included in the Best Start newsletter, which will be produced fortnightly.

The APB will receive regular reports on communications, engagement and community engagement activity, including key themes identified, outputs and outcomes

12. Confidentiality

Confidential issues discussed at any meeting are not to be discussed outside of the meeting.

Non-confidential reports in whole or in part, of any steering group meeting can be circulated at the Area Partnership Board's discretion, if they are considered relevant to a particular member of the Area Partnership Board organisation, or if it will assist in the work of the programme.

13. Review Date

This Terms of Reference will be reviewed in April 2014.

Appendix 1: Best Start Sheffield Outcomes (These were documented at Stage1)

1. Children are supported to develop improved social and emotional adjustment, and cognitive skills improving their life chances, early attainment and relationships with others through confident, resilient and supported families.
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Appendix 2: Voting Area Partnership Board Members

| Position | Organisation / Representation |
|---------------------------------|--|
| Chief Executive | Sheffield City Council |
| Accountable Officer | CCG |
| Cabinet Member, CYPF | SCC |
| Director of Children's Services | SCC |
| Director of Public Health | SCC |
| Chief Executive | Sheffield Children's Hospital Foundation Trust |
| District Commander | S Yorks Police |
| | Representative from Darnall Ward Community Panel |
| | Representative from Shiregreen and Brightside Ward Community Panel |
| | Representative from Manor and Castle Ward Community Panel |
| Elected Director | Sheffield Cubed |
| Individual | Subject Matter Expert at invitation of the Board |