

Birmingham Best Start in Life Strategy

Local Plan 2026–2029

First Draft Strategy Document

March 2026



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1. Vision: What We Are Trying to Achieve

Birmingham's Best Start in Life vision is that every child has the strongest possible start, with the foundations to thrive and achieve a good level of development by the age of five.

To achieve this, the city is adopting a Competent System approach across the pre-birth to five system, recognising that outcomes for children are shaped by the combined strength of:

- families, as the primary influence on children's development
- professionals, who build trusted, skilled relationships with families
- services, which are joined-up, accessible and responsive
- localities, where support is delivered in and with communities
- governance, which provides shared leadership, accountability and strategic alignment

This whole-system approach brings together partners across education, health, care and the voluntary and community sector to prioritise prevention, early intervention and high-quality early education, ensuring that support is coordinated around the needs of babies, children and their families. This is underpinned by a deep commitment to listening to and acting upon Family Voice.

Through integrated, place-based delivery, centred on Family Hubs and neighbourhood teams, Birmingham will create a coherent and inclusive system where families can access the right help at the right time, inequalities are reduced, and every child is supported to be ready for school and to succeed in later life

2. National Context: Giving Every Child the Best Start in Life

The Department for Education's "Giving Every Child the Best Start in Life" strategy sets out a ten-year reform programme to improve outcomes for children from birth to age five. Birmingham has been set a target that 74% of children aged five will reach a Good Level of Development by 2028.

Birmingham City Council will lead delivery of the Best Start in Life programme locally, working in partnership across education, health, social care, community and voluntary sector services. The Council has commissioned the Centre for Research in Early Childhood (CREC) to support development of the Birmingham Best Start in Life Local Plan.

Birmingham has an allocation of £23.4 million for the period 2026–2029, funded by the Department for Education and the Department of Health and Social Care. Funding supports delivery of Family Hubs, parenting support, home learning environment initiatives, children with additional needs, perinatal mental health, infant feeding support and healthy baby offers.

3. Local Context

Birmingham has a large and diverse early years sector supporting children and families across the city. There are over 1,000 early years and childcare providers operating across Birmingham, including

childminders, day nurseries, out-of-school clubs, holiday provision, pre-school playgroups, maintained nursery schools and nursery classes within schools. These settings span the private, voluntary, independent and maintained sectors and play a critical role in supporting children's early learning, development and wellbeing.

Birmingham City Council's Early Years Service provides a city-wide programme of support to this sector, focusing on strengthening practice, promoting inclusive approaches, and supporting settings to understand and meet the needs of the children and families they serve.

Birmingham has a relatively young population, with approximately 326,966 children and young people aged 0–19 years. Of these, around 90,223 are aged 0–5 years. Children and young people make up approximately 29% of the city's population. The population is ethnically diverse, with 66.9% of children aged 15 and under from global majority backgrounds.

Levels of deprivation in Birmingham are high. Around 43% of residents live in neighbourhoods within the 10% most deprived areas in England, and 51% of children aged 16 and under live in these areas. An estimated 27.6% of children live in income deprived families, significantly higher than the national average. Eligibility for free school meals also exceeds national levels, with nearly 40% of children in Birmingham eligible.

Children aged 0–5 in Birmingham experience a number of health and wellbeing challenges. Infant mortality rates are significantly higher than the national average, and there is an ambition to halve this rate by 2030. Immunisation coverage for under-fives is consistently lower than national levels and has declined across most programmes.

Educational outcomes also present challenges. In 2024/25, 66.3% of children achieved a Good Level of Development (GLD) at the end of Reception, compared to 68.3% nationally. However, outcomes for children eligible for free school meals are stronger than the national average, indicating the impact of targeted support in the city.

4. Current Position

Our Competent System Approach

Birmingham believes that, in order to provide every child with the Best Start in Life that they deserve, it is essential to consider the whole system that contributes to children's early development and wellbeing.

When the whole system operates as a Competent System, all children and families benefit. A Competent System is made up of several interconnected layers which, individually and collectively, provide support to children and families:

1. Family layer
2. Individual professional layer
3. Setting and service layer
4. Locality/District layer
5. Governance layer

Each layer plays a distinct role, and the strength of the system depends on how effectively these layers work together to support children from pregnancy through to age five.

How we are co-producing this strategy

This strategy is being shaped through engagement with a wide range of partners and stakeholders, including:

- Parents, carers and community representatives
- Early years and childcare providers
- Health and family support services
- Early Years and Childcare professionals
- Operational and strategic service leaders

The strategy will be taken forward by the Best Start in Life (BSiL) Steering Group and is ultimately overseen by the Birmingham Children and Young People's Partnership Board, ensuring shared leadership, accountability and system-wide ownership.

Lines of enquiry informing the strategy

To support the development of the Birmingham Best Start in Life Strategy, a series of eight lines of enquiry have been explored. These lines of enquiry have helped to understand current strengths, challenges and opportunities across the system.

The eight lines of enquiry are:

1. **Vision, outcomes and priorities** - What success looks like locally for children and families from pregnancy to age five, and how lived experience is continually reflected in strategic planning.
2. **System design and integration** - How well Best Start in Life services work together, and how easy they are for all families to navigate, regardless of who they are or where they live in the city.
3. **Early childhood health and development** - How well the system supports children's physical health, development and prevention from pregnancy to age five.
4. **Workforce capacity, skills and culture** - Whether the workforce is equipped, supported and sustainable enough to deliver the strategy.
5. **Early relationships, perinatal and parental mental health** - How effectively the system supports attachment, bonding and parental and family wellbeing.
6. **Early learning, childcare and school readiness** - How early education and childcare support development, inclusion and transitions into school.
7. **Equity, targeting and inclusion** - How the system reduces inequalities and reaches all families across the city, particularly those least likely to access support.
8. **Leadership, governance and accountability** - How decisions are made, ownership is defined and progress is assured across the system.

Family voice as a golden thread

The voice of babies, children and families is a golden thread woven through this work and across every key line of enquiry. Engagement and analysis have been designed to:

- Centre lived experience, including parents, carers, expectant families and children
- Capture the voice of babies and young children through practitioner and parent insight
- Evidence co-production, not just consultation
- Show how feedback influences priorities, design and delivery at every layer in the system

This is not a separate line of enquiry. Instead, it acts as a test of quality across the whole system, layer by layer, ensuring that family voice informs how services are planned, delivered and improved.

What we have learnt so far:

Families: Families across Birmingham consistently describe a best start in life as children being healthy, safe, loved and supported within stable family environments. While many parents value individual practitioners, experiences of services and movement through the system are variable, with challenges around navigation, awareness, affordability and continuity of support.

Professionals and Service Leaders: Professionals demonstrate strong commitment to child-centred, relational practice and early intervention. However, integration often relies on informal relationships rather than embedded design, leading to duplication, gaps and inconsistent pathways. Workforce capacity pressures limit the ability to intervene early and reach underserved communities.

Strategic Leaders: Strategic leaders view Best Start in Life as a whole-system, prevention-led approach spanning pre-conception to age five. Fragmented governance, inconsistent commissioning and rising complexity at school entry are recognised as key barriers to delivering ambition at scale.

5. Strategic Priorities (Draft)

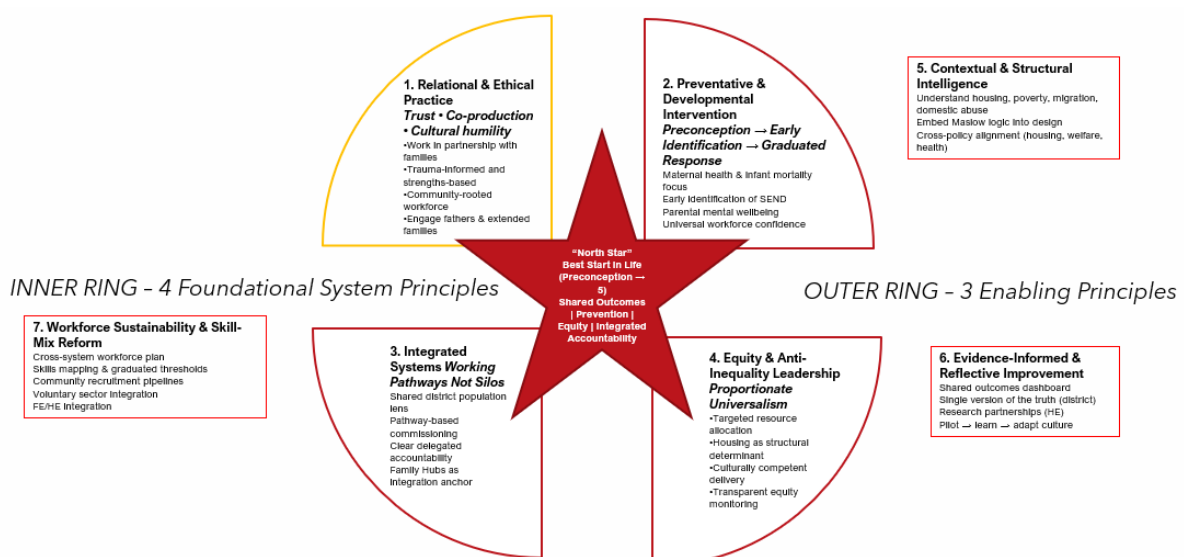
1. Develop a clear BSIL outcomes, accountability, and governance framework centred around a relaunched Children & Young People's Partnership Board.
2. Align BSIL Birmingham as the early years pillar of the Birmingham Families First agenda to unify early help and prevention system *and to* strengthen locality-based governance and place leadership models.
3. Utilise the recommissioning of Health Visiting and Family Hubs (2027) as a major system reset opportunity.
4. Position Family Hubs as integrated delivery model, with a clear and widely understood role, not just as buildings.
5. Simplify access for families through a "no wrong door" adopting a Make Every Contact Count (MECC) approach across all services.
6. Align BSIL with wider city strategies (mental health, wellbeing, 2035 vision P&P Mental Health Strategy).
7. Expand BSIL scope to include pre-birth and pre-conception pathways.
8. Develop a positively framed universal parenting offer from pre-birth to 5.

9. Build on the work of “Single View of a Child” to create a shared data and performance dashboard across partners.
10. Redesign Family Voice into a closed-loop system influencing decision-making and communicating back to families how their voice has been used.
11. Develop a shared workforce development plan and invest in cross-disciplinary workforce development (trauma-informed, relational, inclusive practice).
12. Further strengthen integration of Council and Birmingham Children’s Trust services with health (maternity and neonatal, perinatal mental health).
13. Develop clear family journeys (Start for Life → early years → school readiness).
14. Better leverage and integrate Voluntary, Community and Social Enterprise (VCSE) to reach underserved and marginalised communities.
15. Use and co-ordinate Birmingham Early Years Networks, Early Years Consultants and Stronger Practice Hub resource to scale best practice and drive consistency across Early Years settings.

6. Service Design to ensure delivery of priorities

Birmingham Best Start in Life: Core System Principles

The Birmingham Best Start in Life Strategy is underpinned by a set of core system principles that describe how the local system will work together to improve outcomes for babies and young children from pre-conception to age five. These principles provide a shared framework for design, delivery and accountability across the whole system.



At the centre of the system is **a shared ambition**: Best Start in Life (Pre-conception to 5), supported by a common focus on prevention, equity and integrated accountability.

The strategy is grounded in **four foundational principles** that shape how services engage with children and families and how support is delivered:

1) Relational and ethical practice: The system is built on trust, co-production and cultural humility. This includes working in partnership with families, adopting trauma-informed and strengths-based approaches, developing a community-rooted workforce, and actively engaging fathers and extended families.

2) Preventative and developmental intervention: Support is designed across the full pathway from pre-conception through early identification and a graduated response. This includes a strong focus on maternal health and infant mortality, early identification of SEND, parental mental wellbeing, and building confidence and capability across the universal workforce.

3) Integrated systems and pathways: Services are designed to work through shared pathways rather than silos, using a shared population lens at district and locality level. This includes pathway-based commissioning, clear delegated accountability, and positioning Family Hubs as the anchor for system integration.

4) Equity and anti-inequality leadership: The system applies the principle of proportionate universalism, ensuring that resources are targeted according to need. This includes recognising housing as a key structural determinant, delivering culturally competent services, and embedding transparent monitoring of equity and inequality.

Enabling principles - These foundational principles are supported by three enabling principles that strengthen delivery and sustainability across the system:

5) Contextual and structural intelligence: The system actively considers the wider context in which families live, including housing, poverty, migration and domestic abuse. This includes embedding Maslow-informed thinking into service design and aligning policies across housing, welfare and health.

6) Evidence-informed and reflective improvement: Delivery is supported by shared outcomes and data dashboards, a single version of the truth at district level, and partnerships with research and higher education institutions. The system promotes a culture of piloting, learning and adapting to drive continuous improvement.

7) Workforce sustainability and skill-mix reform: A cross-system workforce approach is adopted, including skills mapping, graduated thresholds of support, community-based recruitment pipelines, integration of the voluntary and community sector, and stronger links with further and higher education.

Together, these principles provide a shared foundation for how Birmingham designs, delivers and improves its Best Start in Life system. They support consistent decision-making across governance, commissioning and practice, while ensuring that prevention, equity and family experience remain central at every layer of the system.

7. Deliverables and Performance Management

[To be developed – shared outcomes framework, KPIs and outputs]

8. Risks and Challenges, and Mitigation

[To be developed – shared outcomes framework, KPIs and outputs]

9. Next Steps

The next phase of work will focus on moving from strategy development into delivery and implementation. This will include the development and agreement of a set of clear Strategic Priorities, alongside a detailed Strategic Action Plan that sets out how partners across the system will work together to deliver the shared ambition of Birmingham’s Best Start in Life.

To support effective monitoring and accountability, a set of Shared Outcomes will be developed to track progress against the Strategic Action Plan. These outcomes will be underpinned by the creation of a shared data dashboard, enabling partners to access consistent, transparent information to support implementation, performance monitoring and continuous improvement.

Engagement and co-production will remain central to the approach. Work will continue to actively involve families, communities and professionals in shaping, testing and refining priorities and actions, ensuring that the strategy remains grounded in lived experience and professional insight.

Alongside this, a Communication and Engagement Strategy will be launched to support the rollout of Birmingham BSIL. This will ensure clear, consistent and accessible communication with partners, providers, families and stakeholders, building shared understanding, ownership and momentum across the system.

The updated and finalised strategy and action plan will be published by **15 May**, providing a clear framework to support coordinated delivery and improved outcomes for babies, young children and families across Birmingham.

10. Feedback on the Draft Strategy

This draft strategy is intended to support ongoing co-production. Feedback is welcomed on the vision, priorities, service design, risks and gaps. Feedback will inform the next iteration of the strategy and the development of a detailed Strategic Action Plan. If you have feedback or wish to contribute to the draft strategy, please complete the feedback form provided: [Birmingham Best Start in Life - Local Plan \(version: March 2026\)](#).