

Directorate for People  
Commissioning Centre of Excellence  
**Early Years Health and Wellbeing Services**  
Service Specification

**Purpose:** To provide information about the scope, outcomes and operating requirements for the new Early Years Health and Wellbeing Service.

This service specification forms part of suite of documents. This service specification has been developed to enable us to deliver upon our stated commissioning intentions and to meet the needs of children and families living in Birmingham. As such it should be read in conjunction with the Early Years Health and Wellbeing Commissioning Strategy and Needs Analysis Documents.

## 1. Introduction and Context

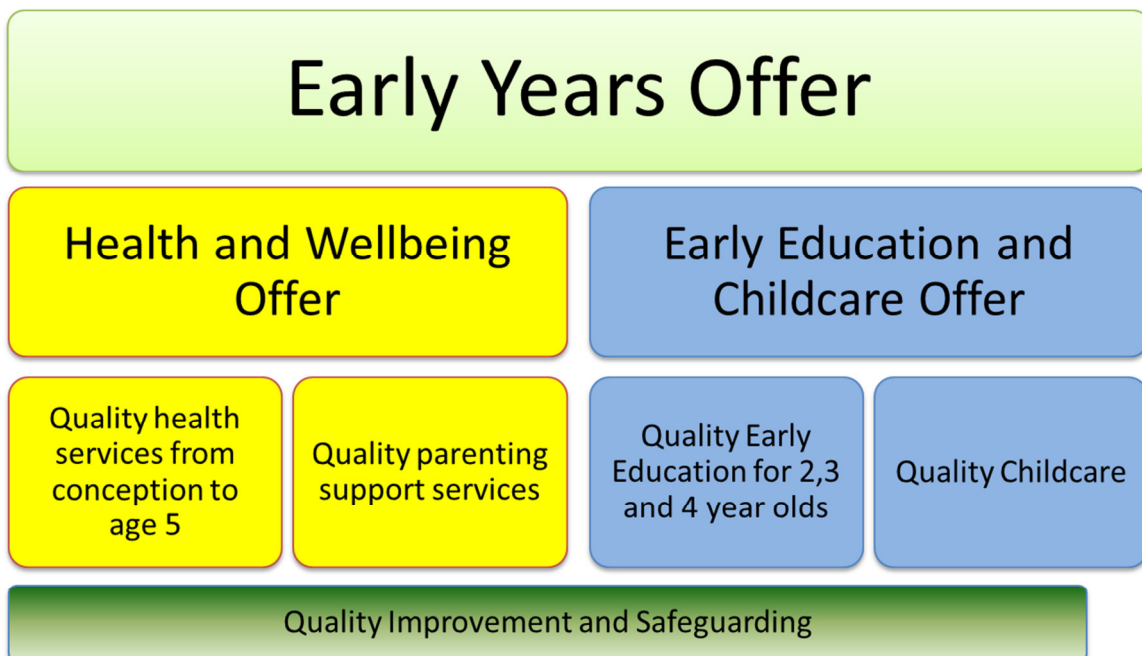
### a) Background.

Early Years Services support families from the point that a child is conceived until they start school. High quality Early Years Services have been shown to be extremely important in helping children to develop well and learn the skills they need to be ready for school.

The value of Early Years Services in helping children and families to thrive and develop the resilience they need as they grow is well evidenced.

A review of Early Years Services in Birmingham identified a significant opportunity for services to be improved via the development of a more integrated and consistent service offer. Delivery of this new offer is a key priority within the Children's Improvement Plan.

The essential elements of our new service offer are shown below



Our new Early Years Offer is comprised of two interconnected components. Within the health and wellbeing component we want to provide children and families with the support they need to develop well, establish healthy lifestyles and become confident skilled parents. We want to complement this via the provision of a high quality Early Education and Childcare Offer to support early learning and provide families with accessible childcare provision.

We believe that this service offer will enable us to deliver upon our ambitious vision:

***“To give every child in Birmingham an equal chance to have the best start in life so they can achieve their full potential”.***

## b) Scope

This service specification relates to the new Early Years Health and Wellbeing Offer. It sets out our future requirements for the integrated Early Years Health and Wellbeing Service providing information about

- How we wish to see health services delivered from the point a child is conceived until they start school
- How we want to work alongside parents, including the most vulnerable and resistant, to enable them to develop the skills, confidence, support networks and resilience to parent well and achieve financial independence and stability for their family.
- How we want to put the child and family at the centre of our new service offer and deliver flexible services that are able to respond well to changing need.

For clarity this service specification relates to the remodelling of the following services into a single integrated system.

- Health Visiting and Family Nurse Partnership
- Children's Centres
- Pregnancy and Breastfeeding Support Services
- Early Years parenting support services

A detailed list of current services in scope for remodelling has been provided at Appendix A to this specification.

This service specification does not cover the entire breadth of our new vision for Early Years Services as Early Education and Childcare services are not in scope. The specification does however set out our requirements for integration, collaboration and partnership working both within Early Years and with the broader system.

This service specification provides information about how we wish to see services provided to all children and families during their Early Years.

### **2.0 Aims and Objectives of the Early Years Health and Wellbeing Service**

The Early Years Health and Wellbeing Service model described within this specification has been developed to enable us to deliver upon our vision:

*"To give every child in Birmingham an equal chance to have the best start in life so they can achieve their full potential".*

Through the creation of a high quality service for every child that promotes healthy lifestyles, effective parenting and resilient families.

In our Commissioning Strategy we set out the following commissioning intentions, the delivery of which, are the key objectives for this service specification:

- ✓ To create a service model which puts children at the heart, and parents at the helm of it.

- ✓ To create a service model which is well connected to local communities, which utilises and builds upon community capacity and assets and reflects well local issues and need.
- ✓ To create an integrated service model within which services work in collaborative partnership for the benefit of children and families
- ✓ To create an inclusive service model, which promotes access for all children and families to the universal services available to them
- ✓ To create a preventative service model which identifies and responds to needs at the earliest opportunity and builds resilient families able to grow and thrive without the need for statutory support services.
- ✓ To create a targeted service model which ensures that the level of resources each service component receives is in line with their level of need and which works proactively to promote take up of services by the most vulnerable and hard to reach groups.
- ✓ An accessible service model which is valued by children and families and operates in locations children and families use the most and at times to promote choice and maximum service uptake
- ✓ To create a service model which is focused on and delivers real outcomes for children and families, ensuring that no child is lost to the system either during their early years or in transition to the broader network of support services.
- ✓ To create a service model which reflects good practice at a local and national level, ensures compliance with relevant professional, technical and legal guidance and promotes innovation
- ✓ To create a service model which is sustainable and cost effective, which reduces duplication, maximises resources for direct delivery and provides financial stability for service providers within the constraints of the available budget.

### **3.0 Outcomes**

The vision for the Early Years is “To give every child in Birmingham an equal chance to have the best start in life so they can achieve their full potential”.

To reflect this vision we have developed an outcomes framework for the new service that is clustered around the following key areas:

- ✓ Reach and service uptake

- Every child is engaged in the universal offer
- Every child is registered with GPs and Dentists
- Eligible 2 year olds are supported to access their Early Education Entitlement
- All 3 and 4 year olds are supported to access Early Education
- Children are transitioned effectively to primary school
- Vulnerable families are provided with help that prevents escalation of need

✓ Child development

Children are developing well and are ready for school

Children are developing age appropriate comprehension of spoken and written language.

Children are building age appropriate use of spoken and written language

Children have age appropriate self-management and self-control

Children are engaging in age appropriate play

✓ Healthy Lifestyles

Children are born to mothers who don't smoke

Children live in smoke free homes

Non first born children are born at a healthy weight

Children are breastfed at birth and at 6 weeks

Children are a healthy weight

✓ Effective parenting:

Parents are increasing their knowledge and application of good parenting

Parents are regularly engaging positively with their children

Improved parental responsiveness and secure parent-child attachment

Parents are setting and reinforcing boundaries

Parents are regularly talking to their child using a wide range of words and sentence structures, including songs, poems and rhymes

Parents are reading to their child every day

Parents are improving their basic skills, particularly in literacy and numeracy (including ESOL).

Parents are working without the need for additional benefits

Parents have good mental wellbeing

Parents are experiencing lower levels of stress in their home and in their lives

✓ Safeguarding

All children are protected from significant harm and therefore welfare is promoted

Due consideration will need to be given to the delivery of these objectives within the forward service model and a comprehensive performance management framework will need to be developed and implemented to underpin service delivery and enable strategic reporting.

#### 4.0 Legislative Requirements

This Early Years Health and Wellbeing Service will provide the current and any future required statutory duties of Birmingham City Council in respect of:

- ✓ **The Healthy Child Programme (HCP 0-5)** which is a programme that sets a framework for the delivery of universal and more targeted or progressive services. It supports a schedule of health and development reviews at key stages giving extra or targeted support if need, risk factors or issues are identified. The HCP aims to support parents,

promote child development, reduce inequalities, contribute to improved child health outcomes and health and wellbeing, ensuring that families at risk are identified at the earliest opportunity. There are five mandated universal health visiting assessments within the Healthy Child Programme, which are the antenatal health promoting visits, new baby review, 6-8 week assessment, one year assessment and an integrated 2 year old review (Using ASQ3 and ASQ SE).

- ✓ **Children's Centres Statutory Guidance 2013** which defines a Children's Centre as a place or a group of places where early childhood services are made available in an integrated way (either on site, or by providing advice and assistance on gaining access to services elsewhere); and at which activities for young children are provided. The core purpose of Children's Centres is described as "To improve outcomes for young children and their families, with a particular focus on families in greatest need of support in order to reduce inequalities in: child development and school readiness; parenting aspirations, self-esteem and parenting skills; and child and family health and life chances". The guidance also makes it clear that "children's centres are as much about making appropriate and integrated services available, as it is about providing premises in particular geographical areas" and in Birmingham we have virtual Children's Centres.

## **5.0 Service Eligibility and Access Arrangements**

The Early Years Health and Wellbeing Service is available to all children and families living in Birmingham from the point that a child is conceived until they start school. The service will need to develop robust procedures and processes to ensure that all those eligible are engaged in services.

Due consideration must be given to ensuring that the service is accessible and appropriate to the diverse range of needs within Birmingham. Within this consideration will need to be given to groups with protected characteristics such as age, disability, gender reassignment, pregnancy and maternity, race, religion, gender and sexual orientation. The service provider will be required to set out how they will:

- Eliminate unlawful discrimination, harassment and victimisation
- Advance equality of opportunity between different groups
- Foster good relations between different groups

Children and families who do not have a permanent residence in Birmingham, such as newly arriving families placed by the Home Office, those in temporary accommodation or those from travelling communities are eligible to receive service. The service will need to make arrangements to ensure that these children as well as other families who are new to the area with children aged between 0 - 5 are proactively engaged with services.

In line with the service objective to ensure effective integration the Early Years Health and Wellbeing Service will be required to work with children up until a successful transition to school has been secured. It is acknowledged that for some children and families this may mean that service delivery

extends beyond age 5. It is additionally an expectation of the new service that for some of the most vulnerable families contact will be maintained for a transitional period to ensure effective hand off.

The Early Years Health and Wellbeing Service will work in a family centred way and where it is beneficial to the broader family unit older siblings will be able to access services.

The Early Years Health and Wellbeing Service will offer a graded response which relates the level of service received to the level of need, in line with the Right Service Right Time Framework. More information about the services at the different levels is provided below, however this means that some components of the new service offer will be targeted and only available to those families assessed as requiring them.

Detailed service access criteria are not being specified within this document however service providers are required to establish and implement clear, transparent and consistent access criteria. These access criteria should be developed with reference to the Early Years Needs Analysis and should consider the needs of the child, parent and community. A robust assessment framework should be developed to complement the service access criteria which enables need to be identified and responded to at the earliest opportunity.

Additionally pathways will need to be established to enable children assessed by other partners such as Think Family teams or Children's Social Care to have access to the services that would be of benefit to them without the need for unnecessary additional assessment.

## **6.0 Service Description and Service Delivery**

### **a) Service Description**

In line with the vision, aims and objectives for the Early Years Health and Wellbeing Service a framework has been developed which describes the service as operating at 5 levels. These levels enable an alignment to be achieved with the Right Service Right Time Framework

Community – Connecting with communities is a key objective for the new service and consideration should be given to developing approaches which:

- Strengthen community and family resilience
- Promote co-production of services with communities and service users
- Develop intergenerational volunteering
- Create local employment opportunities through apprenticeship/trainee programmes
- Improve access to activities and services
- Support local childcare and early years settings in delivering high quality early learning
- Encourage innovation e.g. Holiday Kitchen
- Maximise the use of community assets e.g. parks

- Engage locally based voluntary and community sector organisations in the delivery of services.

Universal: all families receive this service and this offers the opportunity for early identification of need, this would include:

- Undertaking the five mandated universal health visiting assessments within the Healthy Child Programme, which are the antenatal health promoting visits, new baby review, 6-8 week assessment, one year assessment and an integrated 2 year old review (Using ASQ3 and ASQ SE).
- Ensuring all families are registered with a GP and dentist
- Promoting 'school readiness', this includes cognitive development, communication and language, social and emotional development and physical health.
- Maximising the uptake of Healthy Start vitamin supplements both for women and children
- Implementation of the Startwell programme. The programme is based around 7 key messages to support early years settings, parents and health professionals to create a healthier environment for children and families and includes the nutritional and physical activity components.
- On-line advice and information, to include digital platforms.
- Engagement in the Bookstart programme to promote early language development.
- Universal groups, such as stay and plays, as a means to engage parents and to bring in those in need of extra support.
- Assessment/identification of need for all children and families, as necessary, across the offer
- Routine Breastfeeding support
- Routine Maternal mental health assessments
- Early identification of additional needs, with timely and appropriate access to specialist services through the Right Service, Right Time model.
- Early identification of children who have, or are likely to have, special educational needs and /or disability.

Universal plus: when a child and their family have needs that require support and interventions above and beyond normal universal services. This would include:



- Providing responsive support when families have problems or preventative interventions in response to predicted, assessed or expressed need.
- Undertaking a targeted 3.5 year health and development review (using ASQ3 and ASQ SE) for children who are not accessing Early Education Entitlement
- Facilitation of parent support groups and drop-ins.
- Provision of targeted groups for children, such as sensory/speech and language support
- Delivering targeted evidence based interventions e.g. Triple P, Incredible Years and the Solihull Approach, where published evaluation demonstrates that particular interventions can help those families at greatest risk of falling furthest behind to make accelerated progress in improving outcomes.
- More information
- Ensuring a family focus adopting a whole family approach and developing close partnership working with early intervention services for families, including the support of step up and step down transitions.
- Delivery of a Breastfeeding peer support service, using both paid and volunteer peer support workers – especially targeting those groups least likely to breastfeed.
- Giving rapid telephone response/access to clients during normal working hours. Families getting access to quicker health visiting advice means that they don't have to make use of another NHS service – such as GP consultations or treatment and care from Emergency Departments as frequently. This may include nurse prescribing.
- Support for families to access early education and good quality childcare
- Transition support; both from home to nursery/school and from nursery to school
- Identification of children eligible for targeted two year Early Education Entitlement and encouragement to families to access and take up this entitlement
- Identification and delivery of training and education opportunities for parents in local partnerships.
- Delivery and partnership with local delivery partners, specifically Job Centre Plus, of access to employment advice, support and opportunities
- Supporting antenatally for mothers with maternal mental health issues

Additional Needs: when a child and their family have needs that may require an intensive or substantial package of support. This would include:

- Support in partnership with local services to help families with additional needs that may require an intensive or substantial package of support eg where a child has a long term condition.
- Ensuring a family focus and close partnership working with Children’s Social Care and BCC family support including step up and step down transitions.
- Ensuring a family focus, adopting a whole family approach and developing close partnership working with early intervention services for including the support of step up and step down transitions.
- Ensuring a family focus and close partnership working with universal and specialist services to provide holistic support for families of children with special educational needs and disability (SEND). This may include children with Education, Health and Care (EHC) plans.
- Support for families with complex needs, to include parental mental health issues or parental neurodevelopmental needs such as LD.
- Identification of children and families who would benefit from corporate childcare. The service will co-ordinate (but not provide) the corporate childcare.

Complex/significant Needs: when a child and their family have needs that are so significant that they need statutory social work intervention or highly specialist services. This would include:

- Supporting families where there is a child protection plan through close partnership working with Children’s Social Care
- Ensuring a family focus, adopting a whole family approach and developing close partnership working with early intervention services for families with multiple and complex needs such as Think Family, including step up and step down transitions.
- Supporting families where there are children in need through close partnership working with Children’s Social Care
- Ensuring a family focus and close partnership working with universal and specialist services to provide holistic support for families of children with complex special educational needs and disability (SEND). This may include children with Education, Health and Care (EHC) plans.

## **b) Service Delivery**

The Early Years Health and Wellbeing Service is a city-wide service. However to reflect the objective of connecting with local communities the service delivery model should be designed to operate at a district level.

The district model is co-terminus with other interdependent services within the city for example Team around the Family panels (TAF) and the Birmingham Education Partnership (BEP).

The lead provider will be responsible for ensuring that the resource will be distributed according to the needs across the districts. Robust processes will need to be put in place to respond to changing need across the district delivery units. These procedures should cover both how support can be maintained to individual children and families when they move and how resources will be reallocated in the event of population change.

Within the delivery model consideration must be given to creating a service offer which operates across the full range of channels to include digital, telephone and face to face and includes a combination of one to one and group based support options.

The service provider will be required to ensure that universal services have sufficient reach to enable all families to access services. It is a clear expectation within this contract that a level of service delivery is provided to children and families in their own home. This should be complemented by the provision of services from a number of locations within each district.

Parents should be offered a choice of locations and times for visits which best deliver the outcomes, e.g. GP surgeries, community health services, the home, health centres, children's centres, libraries and other community settings. Locations, availability and opening times must meet the needs of families in their area (as per guidance), children and young family friendly, suitable for integrated delivery of services in both individual and group sessions and be conducive to flexible availability (e.g. early mornings, after school, evenings and weekends).

Services should be provided at a time to promote maximum access to children and families. Consideration must be given to the needs of working parents and parents with other caring responsibilities. Flexibility should be provided within the service model to ensure that services can be accessed between 8am and 8pm Monday to Friday, some options for weekend access should also be provided.

In the selection of operating locations and times the provider must consult with local communities to ensure that services are provided in locations that are relevant to children and families.

In the service map providers should seek to maximise choice for children and families by providing a range of access points.

Additional and targeted support services should be developed to reflect local need.

Due consideration should be given within the service model to identifying and responding to the needs of particularly mobile or transient groups such as families from travelling communities or families in temporary accommodation.

## **7.0 Workforce Issues**

The workforce for the new service model should be developed to reflect the requirements of the new service. The level of skills, knowledge and experience that workers in the system should have should be related to the role that they are playing.

The Early Years Health and Wellbeing Service will be delivered by integrated teams with appropriate skill mix to reflect local need i.e. languages, cultural sensitivity and communication.

The paid workforce should be complemented by volunteers, apprentices or trainees working alongside paid staff. Within the paid workforce there should be qualified and unqualified staff. Statutory child:staff ratios must be adhered to.

An intergenerational model of volunteering should be developed to enable local parents and grandparents to support the delivery of services at a local level.

An apprenticeship or trainee scheme should also be developed to provide career pathways for local parents.

The additional support hours secured through volunteering and apprenticeships should be used to increase the level of universal support provided to children and families.

Effective systems for support, supervision, learning and development should be put in place to cover the entire workforce.

## **8.0 Engagement and Participation**

The new Early Years Health and Wellbeing Service has been framed to put children, parents and families at the centre of service provision. Effective systems for consulting, engaging and involving children and families in the design of services will be key to this and due consideration should be given to securing the voice of the child and parent in the service design.

Additionally we want to put parents at the forefront of delivery, enabling them to develop the skills, resilience and social networks to parent effectively and with confidence. To achieve this we want to see robust plans for engaging parents in the management and delivery of services. Plans which utilise community resources and voluntary sector services as enablers are particularly welcomed.

## **9.0 Integration, Collaboration and Partnership**

A key responsibility of the provider organisation is to create cohesiveness:

- Within the local Health and Wellbeing offer
- Across the broader Early Years Offer
- With the broader network of services

The service will be required to demonstrate strong partnerships and referral protocols with early education and childcare providers, nurseries and schools

The service will additionally be required to work in partnership with a wide range of health care providers (including mental health providers). In particular there will be a named Health Visitor for each GP practice (to include cross-boundary principles) and midwifery team, with an agreed schedule of regular contact meetings for collaborative service delivery. This will include linking to the pioneer for the sustainability transformation programme.

The service will work in partnership with Children's Social Care and the locality Family Support and Safeguarding Hubs and Troubled Families. In particular there will be partnership in regard to child protection (CP) planning, children in need planning, care plan reviews.

Strong links will need to be developed with services that support children with SEND to ensure that the needs of children with disabilities are proactively assessed and met. Active participation in Pre-School Liaison Groups (PSLG) will be required.

In addition to forming strong collaborative working across education, health and social care the new Early Years Health and Wellbeing Service will need to identify and maintain partnerships with a range of other providers to include those related to housing, employment, domestic violence etc.

## **10.0 Quality and Safeguarding**

The delivery of consistently high quality services is central to our ambition to ensure that every child receives an equal chance of a good start in life. Robust processes to monitor and promote quality will need to be embedded into the new Early Years Health and Wellbeing Service alongside procedures to respond quickly where problems are identified.

The system lead will be responsible for complying with Ofsted inspection frameworks relating to children, young people and families, as well as any other external evaluation or audit arrangements (regulatory or otherwise). As all Ofsted inspections are unannounced, the Provider, any sub contracted providers and staff are expected to be familiar with such frameworks. The Service Provider will be required to contribute to any Ofsted inspections in regard to the core purpose of Children's Centres and achieve at least a "Good" rating (or equivalent in any new inspection framework) Safeguarding inspection as part of the single inspection framework and to any CQC review.

The Provider will ensure that it has appropriate clinical governance arrangements and procedures and will be required to demonstrate that these are consistently complied with across relevant parts

of the service. Furthermore the Service Provider will be required to evidence that they are aware of relevant local and national practice standards and have plans in place to ensure compliance.

Key consideration should be given to compliance with Procedures and Codes of Practice as they relate to SEND and Safeguarding

The Early Years Health and Wellbeing Service will work in partnership with other key stakeholders to safeguard and protect babies (including unborn babies) and children from harm across Birmingham, by adopting the Early Help Strategy and working within the Right Service, Right Time framework. This includes:

- young people who are legally minors and who are parents.
- parents who are adults at risk of harm or whose ability to parent safely may be compromised by their own health and wellbeing needs

The service will work collaboratively to support children and young people in the child protection system, providing interventions for the child and family.

The service will ensure that policies and procedures relating to safeguarding of children are followed and staff undertake training appropriate for their professional role. This will include liaison and attendance at meetings with social care and other partners, advising other agencies and writing reports for court proceedings and providing witness evidence at court proceedings. This will include all processes covered by BCSB which will include LADO procedures, Ofsted notifications, Section 11 audit requirements, Team Around the Family meetings (TAF) and Multi-Agency Sexual Exploitation meetings (MASE), MARAC and DSL network.

The Provider will engage and support with Serious Case Reviews, support Internal Management Reviews and implement the recommendations arising from these and provide evidence of their implementation to the Designated Professional Team and the Birmingham Safeguarding Children Board as requested.

The provider will engage and support with the Child Death Overview Panel providing information and attendance at multi agency meeting and implementing the appropriate and relevant recommendations that are identified from the child deaths reviewed.

The provider will engage with Domestic Homicide Reviews (DHR) where appropriate.

All Staff engaged in the delivery of this service and who have direct contact with children and families must have the appropriate DBS / Barring Checks.

### **11.0 Systems and Record Keeping**

Providers will ensure that robust systems are in place to meet the legal requirements of the Data Protection Act 1998 and the safeguarding of personal data at all times.

The Early Years Health and Wellbeing Service will operate a single shared electronic record which is part of information system to enable data collection to support the delivery, review and performance management of services.

The system needs to link into other electronic systems

In line with the above, BSCB data sharing agreement and following good practice guidance, the provider will have agreed data sharing protocols with partner agencies including other health care providers, education and early learning providers, children's social care and the police to enable effective holistic services to be provided to children and their families..

The Provider and its partners must ensure that there is at all times a secure and safe method of electronic data recording and transfer / exchange of information.

The Provider must be assured at all times that it has a robust security and back-up system to negate any risk to the loss of data or security breaches.

The Provider must ensure that any referred or transfer of information is not sent by paper, post or fax. All information and communications will be transmitted electronically, with the appropriate level of encryption

## **12. Contract Period and Terms**

The contract to be tendered will be for a period of 5 years from the 1<sup>st</sup> September 2017. Subject to satisfactory performance and budget availability an option to extend for a further period of 2 years is also proposed. A break clause will be inserted after 3 years in case there is a significant change in national policy or central funding. In addition the contract document will provide for possible future reductions in budget allocated to these services because of reductions in Government grant or other reductions in funding which the Council may need to manage.

The contract will run on a fixed fee model with payments being triggered by satisfactory delivery of specified targets. The outcomes required from the new contract are detailed in this service specification. To promote innovation in service design key performance indicators will be confirmed through the tender negotiation process. Where appropriate some elements of payment by results may be included into the final contracting model.

Compliance with the Birmingham Business Charter for Social Responsibility is a mandatory requirement that will form part of the conditions of this contract. Tenderers will submit an action plan with their tender that will be evaluated in accordance with the tender assessment framework. The action plan of the successful tenderer will be implemented and monitored during the contract period.

The Birmingham Living Wage will apply to this contract and those tendering for the new contract will be required to confirm that all providers within the system will pay their employees at this rate or above.

The provision of apprenticeships and employment opportunities for local people will be a key requirement within the new contract. Those tendering for the contract will be required to detail how they intend to engage local parents to help deliver the new model in exchange for training and employment opportunities.

This contract will fall under the TUPE legislation where the outcomes of procurement mean that employees will move from one provider to another.

The contract will be managed by a senior officer from the Commissioning Centre for Excellence within the People Directorate. Contract issues will be managed within the Governance structure of the Children's Joint Commissioning Board.