



# A Better Start through place-based partnerships

Insights from The National Lottery Community Fund  
A Better Start Programme

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# About A Better Start

A Better Start is a ten-year (2015-2025), £215 million programme set up by The National Lottery Community Fund, the largest community funder in the UK. Five A Better Start partnerships based in Blackpool, Bradford, Lambeth, Nottingham and Southend are supporting families to give their babies and very young children the best possible start in life. Working with local parents, the A Better Start partnerships are developing and testing ways to improve their children's diet and nutrition, social and emotional development, and speech, language and communication.

The work of the programme is grounded in scientific evidence and research. A Better Start is place-based and enables systems change. It aims to improve the way that organisations work together and with families to shift attitudes and spending towards preventing problems that can start in early life. A Better Start is one of five major programmes set up by The National Lottery Community Fund to test and learn from new approaches to designing services which aim to make people's lives healthier and happier.

Learning and evidence from A Better Start enables The National Lottery Community Fund to present evidence to inform local and national policy and practice initiatives addressing early childhood development.

The National Children's Bureau (NCB) is designing and delivering an ambitious programme of shared learning and development support for A Better Start, working within, across and beyond the five partnership areas. The programme is funded by The National Lottery Community Fund.

Our aim is to amplify the impact of A Better Start:

- Embedding a culture of learning within and between the partnerships.
- Harnessing the best available evidence about what works in improving outcomes for children.
- Sharing the partnerships' experiences in creating innovative services far and wide, so that others working in early childhood development, policymaking or place-based systems change can benefit.

[www.tnlcommunityfund.org.uk/funding/strategic-investments/a-better-start](http://www.tnlcommunityfund.org.uk/funding/strategic-investments/a-better-start)

## Contents

Introduction	4
Defining place-based partnership working	5
Relevant policy context	7
Benefits, challenges and best practice in place-based partnership working	7
Examples of place-based partnership working elsewhere	11
Place-based partnerships within A Better Start	12
Learning from the ongoing national evaluation of the ABS Programme	12
Summary	14
The place-based partnership approach within A Better Start: Case studies of good practice	15
Lambeth Early Action Partnership (LEAP): Using collective impact analysis to demonstrate outcomes of a place-based programme	15
Better Start Bradford: Better Place Project	19
A Better Start Southend: Establishment of City Family CIC as successor to ABSS	24
Small Steps Big Changes (SSBC) Nottingham: Room to Play - a town centre ‘front door’ unlocking engagement with underserved families	27
Blackpool Better Start: Family Hub Triage	31
References and resources	34

## Introduction

A Better Start (ABS) Programme Insights aim to collate and share learning emerging from the work of ABS partnerships to inform others' work to improve babies' and young children's outcomes.

This is issue eleven in the series, focusing on how A Better Start services have at their core a place-based, partnership approach to best support families and communities.

In this report, you will read:

- An introduction to place-based partnership working, including its history, what it means in practice, and why it is different.
- The relevant policy context and how/where place-based partnership approaches to service delivery fit.
- What works? Examples of best practice in place-based partnership working, including the key elements of working that lead to success.
- The benefits of place-based partnership working: for services, families, communities and importantly, for systems change?
- An introduction to the partnership approach taken within ABS, setting the scene for detailed case studies of local practice across the five partnerships.

The five ABS partnerships were established with the central aspiration to change systems for the better in the funded areas, building on existing services rather than starting new. Place-based partnership working is therefore at the heart of ABS. While the ABS areas were selected because they were areas of high deprivation and high levels of need, they were also chosen because they demonstrated strong, collective commitment to change, with parents and communities at the heart.

[Five overarching domains](#) have informed systems change across the partnership model, including:

- A collective shift of resources towards prevention
- Upskilling the workforce right across the partnership
- Integration across the statutory and community sectors
- Parent and community-led services
- Putting the family at the centre of services

The funding approach taken by the Fund towards the ABS work has required the establishment of partnerships and governance structures that include representatives from across all sectors with a role to play in improving outcomes for young children and families, with a commonly owned strategy and joint accountability for implementation. This has laid the foundations for true collaborative working, with and for communities.



## Defining place-based partnership working

According to [The Non-Profit Finance Fund](#) place-based partnership working means organisations in the same geographical area collaborating and cooperating to improve outcomes for the people living in this area, achieve shared goals and sometimes, to change systems. The geographical area may be a region, town or city, or neighbourhood. Almost all commentators (e.g. [Hoole, 2024](#)) state that they usually involve alliances between and across different organisations, sectors, communities and stakeholders and similar to the themes of ABS tend to focus on neighbourhoods, improving outcomes and involving people.

The [Institute for Voluntary Action Research](#) (2017) defines place-based approaches to funding as:

*“A range of approaches, from grant-making in a specific geographic area to long-term, multifaceted collaborative partnerships aimed at achieving significant change. In most cases, it is more than just a term to describe the target location of funding; it also describes a style and philosophy of approach which seeks to achieve ‘joined-up’ systems change.”*

[Renaissi](#) notes that often, the partnership is driven by a voluntary sector organisation that already has deep-rooted connections with the people and organisations in the area, and therefore in an ideal position to build on and strengthen relationships and roles.

## The purpose of partnerships

[The King’s Fund](#) proposes that the purpose of place-based partnerships is to improve the effective use of the resources of each of the individual parties in the partnership, so that the sum of these resources is greater than their individual parts. Doing this requires understanding and working *with* communities so that services are combined and coordinated to meet needs. Improving service delivery can help address social and economic issues and result in more sustainable services. Others, (e.g. [The Non-Profit Finance Fund](#)) have echoed these points and added organising and advocacy for systems change which goes beyond the initial efforts to coordinate actions for local service delivery. This is an attempt to embed the change so that it is sustainable and has potential to inform change on a wider basis than just the original area which was the focus of the place-based work.

According to [Lankelly Chase](#), place-based approaches are not new, and encompass processes such as community development, neighbourhood improvement/renewal and regeneration. They have been in existence in the UK since the 1960s, initially focussing on economic growth, urban planning and public administration and more laterally in the pursuit of better health and care through [Integrated Care Systems \(ICS\)](#). They have almost always focused attention on areas of deprivation (e.g. [New Deal for Communities](#); [Neighbourhood Renewal](#)).

## **Partnership make-up and structure**

Place-based partnerships typically involve local statutory agencies, such as local authorities, NHS Trusts, voluntary, community and social enterprise (VCSE) sector organisations (e.g. housing associations; parenting groups) in the planning and delivery of services. [Evidence](#) shows that key to place-based partnerships is the involvement of service users, local community stakeholders and residents.

Key to the effectiveness of place-based partnerships is what have been referred to as '[Backbones](#)'. Backbones are defined as organisations (single or multiple) which provide core functions for the partnership (e.g. community engagement, measuring impact, advocacy, aligning funding). It is the backbone that is responsible for holding the whole partnership accountable. For the ABS partnerships, the 'backbone' organisations include The National Children's Bureau in LEAP; NSPCC in Blackpool; Bradford Trident in Bradford; Nottingham CityCare Partnership in Nottingham and The Early Years Alliance in Southend.

In terms of scale, place-based partnerships may be large, such as those in the [Integrated Care Systems](#), which cover populations up to 500,000 people. Sometimes large partnerships may be the same as local authority boundaries. However, there are plenty of [examples](#) of smaller place-based partnerships across England. Unlike Integrated Care Systems however, there are no legal requirements for place-based partnerships, which means there is flexibility to adapt to local

need (see policy context below for more information).

Place-based partnership working is distinct from top-down 'national' programmes of work (e.g. government-funded early-years places) that may be rolled out by local authorities. It is also different from community initiatives that operate with total independence from statutory services. Partnership is the key word, bringing together voluntary and community sector organisations operating at a local level with those who have statutory responsibilities to deliver services for the population in a given area. Theoretically, at least, the sum of the collective efforts should be greater than that which might otherwise be achieved.

## **Place-based change versus systems change**

While place-based change and systems change differ, place-based change is often the starting point for systems change. [Renaissi](#) note that working towards change in a local context is a useful way to 'contain' often complex issues with many players. A 'test and learn' approach in a smaller locality allows solutions to be identified, which may then be applied on a bigger scale, by the partnership themselves, or by others. In addition, attempts at place-based change can often identify challenges at a systemic level, such as policies or structures which are hindering change, therefore prompting the partnership to identify their possible role in changing the system.

## Relevant policy context

Since the introduction of the Health and Care Act (2022) place-based partnership working has received greater attention in terms of policy and [guidance](#). Guidance documents such as [Thriving Places](#) and a raft of other documents to support [Integrated Health and Social Care](#) have sought to strengthen place-based partnerships in terms of expectations, governance and accountability and emphasise the ‘[principle of subsidiarity](#)’ (i.e. promoting local decision making). In addition, guidance for [Integrated Care Boards](#) encourages the delegation of some responsibilities and resources to place-based partnerships.

The [NHS Long-Term Plan](#) set out an ambitious 10-year strategy for safer and more joined-up care, tackling health inequalities, shifting to a prevention-focused approach, upgrading technology, and tackling workforce pressures. This strategy claims to *balance national direction with local autonomy*, indicating place-based approaches for system improvement. As there is now a new Labour Government, a [consultation](#) on the NHS plan has been published. This will provide a key opportunity to highlight how ABS partnerships have been enabling place-based systems to thrive.

The recent UK General Election has created an opportunity for renewed focus on place-based service delivery. Labour’s missions-led approach enables cross-governmental collaboration and the possibility of new ways of working when creating and delivering national services and programmes. Based on the

evidence from ABS, government missions should recognise and prioritise place-based approaches for supporting families. This means:

- being responsive to local need;
- co-producing outcomes frameworks with communities;
- poverty aware and antiracist approaches;
- pooled funding.

This will contribute to improved outcomes for babies, children and families and improved multi-agency working.

Further, parent, carer and baby and child voice should be meaningfully integrated in service development and delivery, beyond parent carer panels. Authentic sharing of power leads to better more accessible services, empowered communities, increased social value, increased confidence and connection of families to services.

It will be crucial for the success of Labour’s ambitious goals to create an NHS fit for the future and break down barriers to opportunity to develop programmes led by the communities that they serve.

## Benefits, challenges and best practice in place-based partnership working

Place-based working has been shown to have a wide range of benefits, but the approach can be challenging to embed effectively. The following section summarises some of the key evidence in relation to the benefits of these approaches, and practical

considerations for implementation.

## **Benefits of place-based partnership working**

A range of benefits on economic, social and environmental development from place-based partnership working have been identified, including benefits for services, families, communities and systems change. For example, [Hoole](#), identified eight potential impacts including:

- collaborative decision-making: place-based partnerships promote more transparent and inclusive decision-making through the involvement of several stakeholders in a given geographical location, which should lead to greater trust in the organisations within the partnerships and more acceptance of decisions taken.
- resource sharing: there is usually greater sharing of resources, expertise and knowledge, which should mean more effective and efficient use of these resources.
- strategic planning: partnership-working can build confidence, trust and stability within a locality and consequently promote enhanced strategic planning.
- Innovation: partnership-working stimulates new and innovative ways of working as ideas from differently partners with different expertise are shared.
- community engagement: place-based partnerships engage members of the community in decision-making, which means that

plans and actions are more likely to meet the needs of local people.

- social inclusion: collaborating with diverse local community groups in the planning and implementation of programmes can promote social inclusion.
- emergency preparedness: community resilience can be enhanced through greater local collaboration, meaning that in an emergency situation, efforts to address the crisis are more likely to be better coordinated and more effective.
- crisis recovery: if there is an emergency situation, place-based partnerships are often key to the management of local recovery efforts.

Ultimately, place-based approaches are focused on improving outcomes for the community. Many organisations and services working together towards shared goals, pooling budgets and efforts, with the flexibility to tailor services towards local needs, maximises the potential for positive impact.

## **What works? Best practice in place-based partnership working**

The key elements of place-based partnership working that lead to success are well [documented](#). These include

- having common aims and a workable strategy: shared goals and aspirations are essential if the efforts of the partners are to be



effective, as is a practical way to reach those goals.

- engaged partners with established levels of trust: partners cannot be just partners in name - they need to be fully involved with each other. Working together over time will build trust as a commitment to achieving the common goals is demonstrated.
- effective leadership: there needs to be agreement among the partners about which organisation is the lead (or backbone as mentioned earlier). While the designated backbone then needs to have effective leadership, so too do all of the partners involved, with each understanding their roles and responsibilities.
- strong governance arrangements: the partners need to agree to robust governance arrangements, which the backbone then needs to implement.
- access to resources and skills: each partner organisation needs to be able to both offer and access each other's resources and skills so that they are used efficiently and to maximum effect.
- partnership history and capacity for collaboration: effective partnerships do not happen overnight. Most are built up over time, sometimes over decades and by multiple staff/volunteers in each organisation. Each organisation within the partnership also needs to be able to collaborate and not be constrained

by their own mission, vision or governance rules.

Additionally, there is a need to build capacity among partner organisations, to develop skills for collaboration, analysing data and strategic planning. Partnership actions and activities need to be supported by policies and by flexible multi-year funding systems. It is essential that local voices are heard in decision making and that local people help shape the direction of place-based programmes. Doing this means creating an environment that supports and encourages new approaches to collaboration and innovation, which are robustly evaluated to help share learning and inform future actions.

### **Challenges to place-based partnership working**

Place-based partnership working is not without its challenges. These have been identified by some (e.g. [Hoole](#)) as:

- the highly centralised system of governance in the UK: most decisions on policy and allocation of money to implement such policies are taken by central and devolved governments, not at a local level.
- complicated regional governance structures and unstable funding: different devolved nations and local authorities within these operate differently with varying levels of power and accountability. When there is a need to 'bid' for funding, place-based strategies may develop according to the bids that are won, rather than those

which meet local needs. Such a method of funding can also lead to short-term rather than long-term planning, prevent collaboration and increase competitiveness between organisation and result in fragmented rather than cross-sector policymaking.

- different working cultures across organisations: there may be a ‘culture clash’ between staff in different organisations who are used to working in very different ways from each other. Some organisations may afford staff greater autonomy to make decisions while others may be much more hierarchical, for example.
- inequalities in the power balances between organisations: depending on the size of each of the partner organisation, the resources they command and the level of designated authority they hold, there may be significant imbalances in power between partners. At times of conflict or stress, there may be a tendency for the more powerful to ‘pull rank’ within the partnership.
- a lack of accountability: it may be difficult for the backbone to hold other partners to account, especially if accountability mechanisms are not as robust in some organisations, or in a very small organisation with few staff when a key staff member leaves or is ill.

Lack of integrated data systems continues to be a challenge. A key enabler in place-based partnerships is

the ability to share data seamlessly to ensure informed decision-making for all involved - this cannot happen if each holds only a small part of the picture. The Health and Care Act committed to potential introduction on a Consistent Child Identifier (CCI) to bring together each child’s data from across a range of services into one place. [Evidence from ABS partnerships](#) has already informed this work, with examples of data linkage projects, shared outcomes frameworks and innovative use of data to determine local need (further detail is available [here](#)).

Other sources ([e.g. The King’s Fund](#); [The Non-Profit Finance Fund](#)) have cited additional challenges such as:

- how place-based partnerships operate in reality, when legal accountability lies with others (e.g. with Integrated Care Boards or local authorities);
- the extent to which each of the partners can be influential given the inequalities in power;
- the extent to which partners can persuade service providers to deliver on a place-based basis, especially if this is a new way working;
- how they can be held responsible for service delivery by those in the partnership who do not have designated authority;
- the need for properly funded qualified and experienced staff who will be attracted to work in the partnership which may be in competition for staff from larger organisations with more career

opportunities and more stable funding;

- the need for succession planning in the partnership - many partnerships are started by very dedicated individuals. There is a need to plan for the day these individuals retire or move on from the partnership, so that it is not weakened by such a change.

The ultimate test for place-based partnerships is the extent to which they can assist in the delivery of improved local services.

## Examples of place-based partnership working elsewhere

The [Thriving Places](#) initiative in Govan, Glasgow is a place-based partnership between statutory, community and voluntary sector organisations which aims to improve the quality of life for people who live and work in the area. Started in 2017, it is part of a 10-year commitment from Glasgow Community Planning Partnership.

Local priorities were decided through consultation and discussion within the community. Working groups to address each priority consist of organisations from across voluntary and community sector organisations, faith organisations and ‘grassroots’ groups who see themselves as assets for their community. These priorities include Food for Good, Arts, Heritage and Wellbeing, Learning for Life and Work, Children and Families, Young People and (building a) Positive Community.

Another example of place-based partnership working was the TNLCF-

funded [HeadStart](#) Programme which ran from 2016-2022 in six areas of England. HeadStart aimed to explore and test new ways to improve the mental health and wellbeing of young people aged 10 to 16 and prevent serious mental health issues from developing. HeadStart worked with schools, families, charities, community and public services to build young people’s emotional resilience; respond to the early signs of common mental health problems and provide additional joined-up support when and where it is needed.

By raising awareness of young people’s mental wellbeing, the HeadStart partnerships also supported adults to know how to spot the early signs of problems, know what they can do to provide support, and where to go to get more specialised help.

Key to the HeadStart approach was that young people who had experience of the mental health and well-being issues were in the lead in the design, commissioning, delivery and evaluation of the services developed in each of the partnerships.

Similarly, The [Fulfilling Lives](#) programme, also funded by TNLCF, was a place-based partnership approach, over an eight year period across 12 areas of England that worked to support people experiencing multiple disadvantage. It aimed to test new ways of ensuring individuals receive joined up and person-centred services which work for them.

In this context, multiple disadvantage was defined as people who experience two or more of homelessness, a record of current or historical offending,

substance misuse, and mental ill-health.

Again, a key element of this programme was that people who had experience of such issues were regarded as experts by experience and were part of a people in the lead group, called The National Expert Citizens Group. This group used their knowledge to improve the design and delivery of the services that were available to them, collaborating with local leadership and decision makers across the partnerships to create solutions that worked for them.

### **Place-based partnerships within A Better Start**

All five A Better Start partnerships were established with a common goal to build partnership models which can improve outcomes for the local communities. There are common elements within each, as well as examples of innovative practice. These include:

- Establishing data-sharing agreements locally, ensuring that all those working with families can see the full picture of need, rather than only their individual parts. This is essential for truly holistic support which meets families' wide-ranging needs.
- Grass-roots community funding opportunities, with community development driven by local people and supporting innovation.
- Developing physical environment (for example parks and shared outdoor space) and making exciting use of disused space,

strengthening the resources available to the whole community.

- Embedding parents as partners in governance and planning from the beginning, ensuring their voice is heard in decision making and in equal standing to the 'usual' voices.
- Legacy planning approaches which have built on 10 years of ABS work to establish partnership vehicles to take forward the learning.
- Building a shared outcome framework and common indicators, which lead to an understanding of collective impact. This allows individual services within the partnership to see how they contribute to shared goals and collective impact.

Case studies focused on these areas are included in the next section of this report.

### **Learning from the ongoing national evaluation of the ABS Programme**

The [National Evaluation of the ABS programme](#) is aiming to identify collective learning, including the contribution ABS has made to the life chances of children in the five areas, using a using a range of research activities that include the gathering of qualitative, quantitative and economic evidence. Given the central commitment to place-based partnership working across ABS, this has been explored in depth in one of the thematic reports produced during the evaluation. Findings reflect the



views of a range of stakeholders, including those working in ABS partnerships, those working in non-ABS early years services, and the Fund representatives. Some of the key findings are highlighted below.

- Placed-based working was seen as distinct from other ways of working as it emphasises understanding the community and those who live in it. Places can differ significantly, even within a shared programme. The community is an asset available to the partnership.
- Services in the ABS partnerships were tailored to take account of different local needs, different languages used by families and the transient nature of some populations in some areas.
- Factors that helped the ABS partners be effective included employing local staff, ensuring local people were involved in decision making, establishing parent champions who were representative of the community and working collaboratively across voluntary and statutory sectors.
- The outcomes of this led to the building of trust between service users and practitioners, better representation of communities and the celebration of diverse cultures within communities.
- Challenges identified by the partnerships included the number of resources needed for placed-based work, which led to this approach being more costly; community needs changed often, making it difficult to continually meet changing needs; it was challenging to adapt evidence-based programmes to local circumstances; and the inability to address wider systemic issues such as poor housing.
- Working at a ward level (therefore smaller areas within the wider partnership) brought several benefits, including the ability to really get to know the area, the people (both service users and practitioners) and to gain their trust; a better understanding of locally available services, which has helped to improve access; and the ability to adapt services to local needs, which can change significantly from ward to ward given the diverse populations of the ABS partnerships.

**These findings are summarised from the report ‘Place-based Approaches: the thematic focus for the ABS national evaluation’ (NatCen, May 2023). [You can read the full report here.](#)**

## Summary

- Placed-based partnership working means cooperating and collaborating across the statutory, voluntary, community and social enterprise sectors to identify the needs of people living and working in an area, explore how those needs might be best met, and take action to address such needs.
- Place-based partnerships are not new - they have been part of community development work for decades. However, there is now a new policy impetus promoting such an approach, and in addition funding from TNLCF has supported place-based partnerships for over ten years now.
- For place-based partnerships to be effective, there needs to be a sharing of resources, responsibilities, and a shift in the power dynamics within the partnership area.
- Other key elements include having common aims and a workable strategy, engaged partners with established levels of trust, effective leadership, strong governance arrangements, access to resources and skills and knowledge of the partnership history. Additionally, there is a need to build capacity among partner organisations, to develop skills for collaboration, analysing data and strategic planning.
- Challenges include the highly centralised system of governance in the UK and complicated regional governance structures; unstable funding; different working cultures across organisations and inequalities in the power balances between those organisations; the extent to which each of the partners can be influential; the need for properly funded, qualified and experienced staff, and recognising the importance of succession planning.
- Benefits of place-based partnerships include collaborative decision-making, resource sharing, strategic planning, innovation, community engagement, social inclusion, emergency preparedness and crisis recovery.
- For ABS, placed-based partnerships are part of the DNA of the funding programme. No two areas of the five are identical, so it follows that no two partnerships will have identical programmes. There are, however, common areas of challenge, benefit and impact as detailed by the ABS National Evaluation.

## **The place-based partnership approach within A Better Start: Case studies of good practice**

As already noted above, the five ABS partnerships have embedded their place-based approaches in quite individual ways, meeting the needs of local families and working to build on local strengths and skills. The following case studies present a variety of effective practices observed in the work of ABS partnerships over their 10 years of funding, highlighting the implementation of place-based partnership models

### **Lambeth Early Action Partnership (LEAP): Using collective impact analysis to demonstrate outcomes of a place-based programme**



Understanding the impact of place-based programmes is inherently challenging due to the iterative, transformational and unique nature of such programmes. LEAP delivered services in a focused area of Lambeth, and funded and improved more than 20 local services to meet the needs of families from pregnancy through to age four.

LEAP was a place-based collective impact initiative - which means all services and activities were linked together and worked towards shared goals to improve outcomes for very young children. LEAP's approach to understanding how a collection of services can improve outcomes for children and their families involved the creation of a shared measurement system. This involved services working on similar issues, and towards similar goals, reaching a mutual understanding of what to measure, and collaboratively developing the tools to do so.

A shared measurement approach enabled LEAP to pool and compare information across the programme, build a substantial evidence base, and achieve greater efficiency and consistency with data collection, analysis and learning processes. In turn, this contributed to our understanding of how we can best improve outcomes for children and families.

The shared measurement system was based on programme and service-level theories of change. For each service, LEAP collected six types of data: inputs, user data, feedback data, engagement data, and outcomes data.

The LEAP Integrated Data Platform was designed to enable the collection of LEAP service level data and administrative data sets which provided a rich stream from which to extract learning and insights into the LEAP population. This platform was developed to bring together pseudonymised data from across LEAP's different services and enable a programme level view of user characteristics, engagement, and feedback data.

## **What difference is it making for children and families?**

**Outcomes for children:** As part of LEAP's programme evaluation, analysis was undertaken using data sets linked to statutory assessments of child development and health visiting data. This analysis enabled a deeper understanding of the impact a joined-up set of services has on a target population. Understanding which services are likely to improve outcomes for families and their children offered a deeper insight into the impact of place-based working.

Using well-established administrative datasets, a cross-sectional secondary analysis approach was taken to understand how child outcomes may have differed for children who engaged with LEAP services compared to those who did not.

These datasets provided localised information on the following assessments:

- The Ages and Stages Questionnaire (ASQ-3) for 2.5-year-olds
- The Early Years Foundation Stage Profile (EYFSP) for children at the end of the reception year

### **Findings from the analysis**

The analysis found that children from the LEAP area were significantly more likely to reach expected levels of development overall, in communication and language and in personal-social development at 2.5 years old, if their family engaged with relevant LEAP services than if they had not. The more services a child's family engaged with, the greater the odds of reaching at least expected levels of development overall.

Headline findings showed that:

- 84.4% of children with relevant LEAP family engagement reached at least expected levels of development overall, compared with 81% of their peers without LEAP engagement.
- 93.4% of children with relevant LEAP family engagement reached at least expected levels of communication and language development, compared with 89.1% of their peers without engagement.
- 90.4% of children with relevant LEAP family engagement reached at least expected levels of personal and social development, compared with 83.3% of their peers without engagement.

**Outcomes for Parents and Carers:** This study aimed to assess how the LEAP programme contributed to changes in parental mental wellbeing and knowledge, and the application of positive, sensitive and responsive parenting for its participants.

As part of the shared measurement system, a variety of measures were introduced across the services aimed at measuring specific outcome domains for parents and carers. The two domains examined in relation to parental outcomes were:



## Parental Mental Wellbeing

Measures:

- Clinical Outcome Routine Evaluation (Core-10)
- Short Warwick Edinburgh Mental Well-being Scale (SWEMWBS)

## Parental Knowledge and application of positive, sensitive and responsive parenting

Measures:

- Mothers Object Relation Scale (MORS)
- Prenatal Attachment Inventory (PAI)

## Findings from the analysis

Headline findings showed that parental mental health and wellbeing improved by 12%, and parenting knowledge, skills, and behaviour improved by 5%.

The analysis was able to demonstrate differences in changes in wellbeing and knowledge, skill and behaviours using a number of variables.

- Service user ethnicity
- Language spoken at home
- Lone parent status
- Local level of deprivation
- Dosage received by service user.

Overall, engagement with LEAP services was associated with positive changes to mental wellbeing and knowledge and application of positive, sensitive and responsive parenting. This change was larger for mental wellbeing than knowledge and application of positive, sensitive and responsive parenting, but in both domains positive changes were more consistently observed than neutral or negative impacts for parents.

## **What works? Challenges, successes and lessons learned.**

**Challenges:** Data linkage limitations are underpinned by the lack of a nationally recognised single unique identifier for children. LEAP developed an approach to consistently identify individuals as part of the development of the data platform to enable data linkage.

**Successes:** Lambeth has set an ambitious goal to achieve a data-safe-haven status, positioning itself as a trusted research hub that brings together complex datasets. This initiative aims to create a framework for collective measurement that enhances local service delivery and supports backbone investments across the community.

**Learning:** It is important to maximise opportunities for collaboration by bringing

together existing assets – people, information, experience, and budgets – across various sectors. By creating spaces where stakeholders can pool these resources, foster collective problem-solving and better utilise what is already available within the community, a place-based approach can grow and develop. This collaborative approach ensures that even with financial constraints, efforts are more impactful and aligned with the needs of the community.

## **Conclusions**

LEAP's use of a collective impact approach to identifying outcomes in the local population embraces many of the key principles for place-based working:

- The creation of a shared measurement system which facilitated the use of common tools and methods to measure and evaluate progress towards shared goals.
- The support of a backbone team which enabled collective endeavour and encouraged and facilitated connections between families, communities and services.
- The building and maintenance of trusted relationships across the system and within communities.
- Convening the workforce to maximise collaboration and joined up working.

For more information, please contact Sophie Woodhead, Assistant Director [swoodhead@ncb.org.uk](mailto:swoodhead@ncb.org.uk)

## Better Start Bradford: Better Place Project



The Better Place project, part of Better Start Bradford (BSB), is an innovative place-based partnership focused on improving the physical environment to promote the health and wellbeing of young children in some of Bradford's disadvantaged communities. Recognising the strong link between early childhood development and the environments in which children grow up, Better Place aims to create child-friendly outdoor spaces, work closely with parents and the community and promote active lifestyles.

This project exemplifies place-based partnership working by bringing together a diverse group of stakeholders, significantly local parents, and also including local government (Bradford Council), environmental groups, health services, housing providers, and other community members. Key elements of this partnership approach include:

- Community-led design: Families and local residents play an integral role in identifying and designing outdoor spaces, ensuring that the improvements reflect their children's and community's needs and align with the nature of the places they are located in. This builds community ownership of public spaces, fostering long-term sustainability.
- Environmental and health integration: The project focuses on designing spaces that not only improve safety but also enhance developmental outcomes, particularly the ABS outcome areas of communication, health and nutrition and social and emotional development. This includes creating natural play spaces, improving access to green areas, and addressing environmental risks like air pollution.
- Cross-sector collaboration: A steering group made up of professionals from environmental health, urban planning, early years services, and local parents originally governed the project. In recent years this accountability was sustained through our Neighbourhoods Project, local friends' groups and the council Neighbourhoods Service; landscapes and conservation; and parks services.
- Evidence-based approach: The project is grounded in research showing the impact of the environment on early childhood outcomes, from cognitive development to physical health. Monitoring and evaluation systems have been set up to measure the impact of environmental changes on our children's wellbeing.

### What works? Challenges, successes and lessons learned

**Transforming public spaces:** One of the standout successes of Better Place has been the transformation of several previously neglected or underused areas into vibrant, child-friendly spaces. These include parks with sensory play areas, nature trails, and community gardens that promote outdoor activities and social interaction. Walking routes, areas around schools and school play areas, woodlands and pocket parks have

been opened up and made accessible to our children and families.

*A lovely example is the story trail in Bowling Park which includes wooden sculptures of the 3 bears from the Goldilocks story. The figures are loved by children and adults, and we see them often being photographed with little ones holding their hands.*



**Cross-sector relationships:** The collaborative approach has fostered strong relationships between organisations, practitioners and community members that historically did not work together, such as urban planners, health professionals, researchers and parents. This has enabled more rounded and sustainable solutions to emerge, benefiting both the physical environment and the health of the community.

**Increased outdoor activity:** There has been a noticeable increase in families using the new play spaces. Parents report that the changes encourage them to spend more time outside with their children, fostering better physical activity levels for both parents and children. SOPARC (System for Observing Play and Recreation in Communities) evaluations have shown evidence of greater usage.

### **Challenges**

**Complex project management:** Bringing together different sectors, each with its own goals and operational processes, created challenges in maintaining momentum. Coordinating the timing and resources for large-scale environmental changes, such as park redevelopment, required extensive planning and communication. With such a wide range of local voices it was important to ensure they were all heard and taken into account. This was where our community engagement team, Neighbourhoods workers and the Better Place project worked together really effectively.

**Securing long-term funding:** While the improvements have been well-received, ensuring long-term maintenance and upkeep of the new spaces remains a challenge. The project's success depends on local authority, community organisations and the



project provider, Bradford Trident, continuing to collaborate in sustaining the improvements once the initial funding from Better Start Bradford concludes.

**Community engagement in formerly neglected areas:** Although there has been significant community input, engaging some groups, particularly those living in areas of high deprivation, has proven difficult. This is a persistent challenge in ensuring that the benefits of the project are truly inclusive.

**COVID-19:** The Better Place Project was more affected by COVID-19 than many others because of the difficulties of getting work done on-site, delivering coproduction remotely and overcoming parental fears of being outside. It also prevented the programme from completing the Randomised Controlled Trial (RCT) style evaluation planned.

### **Lessons Learned**

**Collaboration is key:** Successful outcomes of Better Place have relied on strong collaboration between sectors that traditionally may not work closely, such as environmental health and early years services. This multidisciplinary approach has ensured changes are deliverable, practical and aligned with child development goals.

**Continual community engagement:** Regular engagement and partnering with families and community groups is essential for creating spaces that are well-used and valued. Community involvement in the design and implementation processes has meant meaningful changes that reflect local needs.

### **What difference is it making for children and families?**

The Better Place project has had a significant and measurable impact on children and families in Bradford. Key outcomes include:

- **Enhanced child development:** Research shows that access to safe, stimulating outdoor environments enhances cognitive, social, and physical development in young children. The new play spaces are designed with these developmental outcomes in mind, providing children with opportunities for creative play and physical activity. Our SOPARC evaluations have shown increased use of parks and play spaces by our target groups.
- **Improved family wellbeing:** Parents report that the improved spaces have positively impacted their mental health, bringing accessible, safe environments where they can relax and engage with their children. This has also led to stronger family bonds, as families spend more time together in these environments.
- **Increased social cohesion:** The shared spaces have become community hubs where families from diverse backgrounds come together. This has helped to break down social barriers, fostering a greater sense of community and belonging among residents.

- Environmental benefits: The project has improved environmental quality in the area. Greener, cleaner spaces reduce local pollution and create more sustainable, eco-friendly urban environments.

### **How have families and communities supported the work?**

Families and communities have been integral to the success of the Better Place project, involved in both the design and ongoing oversight of the new outdoor spaces. Specific ways in which communities have been involved include:

- Co-design of public spaces: Community members, including parents and children, were actively involved in the design phase through a series of workshops and consultations. Their input ensured that the new spaces reflect their preferences, from sensory gardens to safe play equipment.
- Volunteering and local leadership: Parents have been encouraged to take on leadership roles in maintaining and promoting the use of the new spaces. Community-led initiatives such as gardening clubs, park maintenance groups, and parent-and-toddler outdoor play sessions have created a sense of ownership among local residents.
- Effective 2-way communications: Continuous feedback is gathered through surveys, community meetings and user groups, ensuring that any necessary improvements reflect evolving needs of the community.

This active involvement has helped strengthen community bonds and ensure spaces are not only well-used but also valued and protected by the community.

### **How is ABS adding value to the wider system?**

The Better Place project has added value to Bradford's wider system in several important ways:

- Bridging the gap between health and environment: This is one of the most significant contributions of the Better Start Bradford programme, showing that place-based environmental interventions can play a critical role in improving health outcomes for young children. We have regularly shared the work of the project with MSc Urban Planning Students, Natural England, the National Trust and many other groups.
- Influencing urban planning policy: The success of Better Place has influenced local urban planning, with local government officials now recognising the importance of child-friendly environments. The project has served as a model for how urban design can be more inclusive of young children's needs. The Landscapes Team won a national award in 2023 which included the Better Place work.

- Integrating environmental health into early years strategy: By demonstrating the impact of environmental factors on child development, ABS has influenced the wider system to consider environmental health as a key component of early years strategies in Bradford.

### **Future priorities regarding place-based partnership approaches**

Looking ahead, Better Place will hopefully continue and will focus on several key priorities:

- Sustaining and expanding the green spaces: Ensuring the long-term maintenance of the new spaces remains a priority. Better Start Bradford is working with the council to secure funding and resources to maintain and expand the green spaces created under the project.
- Deepening engagement with under-served communities: The project will seek to further engage families from the most deprived areas to ensure inclusivity and equitable access to the improved spaces.
- Scaling and replication: There is interest in replicating the Better Place model in other parts of Bradford and beyond. Sharing the lessons learned and developing best practices for other communities will be a priority.

Through Better Place, Better Start Bradford has shown that improving the physical environment can have a profound and lasting impact on children's development and family wellbeing. By continuing to build on these successes, the partnership aims to create a lasting legacy for Bradford's children and families.

For further information, please contact Gill Thornton, Director, Better Start Bradford [gill.thornton@betterstartbradford.org.uk](mailto:gill.thornton@betterstartbradford.org.uk)

## **A Better Start Southend: Establishment of City Family CIC as successor to ABSS**



When the ABSS partnership considered what might follow the A Better Start programme, an ambition quickly emerged to ensure the principles, learning and relationships developed by ABSS not only continued to have impact across Southend, but also expanded into other areas of Essex and beyond. Establishing a new social enterprise that could take on the baton of the existing partnership was vital to this, but it was quickly identified that this should not be 'ABSS Mark Two'. Instead, it should apply the principles and learning from ABSS and forge these into something new. City Family Community Interest Company (CIC) was established as a proof of concept, using the scaffolding of ABSS to support the development of a new organisation that could flex to suit the environment it would work within.

Although City Family CIC is a new organisation, the partnerships and relationships established by ABSS were key components in its development. In its founding year, City Family CIC maintained close relationships with ABSS and was driven by support and scrutiny from the ABSS partnership. Support from individual partners came in different forms. Southend Association of Voluntary Services (SAVS) helped City Family CIC to identify parents who might be interested in applying for Non-Executive Director roles and supported those parents to apply. Partners within the health sector ensured there was strong representation from that sector on the Board of City Family CIC. Other partners took the opportunity to broaden the notion of 'place' to bring in Non-Executive Directors who had key experience in Early Years, policy and organisational development, and this wider pool provided key learning to the whole ABSS partnership. Partners also helped City Family CIC to secure physical locations for delivery and to renew partnership agreements once services transferred from being delivered directly by ABSS to being delivered by City Family CIC.

The importance of rebuilding and reshaping relationships as ABSS withdraws is clear to all involved. How City Family will stand in the wider voluntary and community ecology, and how it will build relationships with other organisations on its own terms are key challenges for the future. As City Family CIC has evolved, however, it has grown into its unique role as a larger specialist Early Years organisation from Southend working in Southend. This is testament to ABSS and the recognition of the importance of the ABSS baton being carried forward.

### **What works? Challenges, successes, and lessons learned**

City Family CIC is still in the early stages of a long journey, with the exact details of its direction being worked out as it travels. Many of the challenges it has faced are to do with the newness of that journey: undertaking the enormous task of setting up a new organisation while also carrying the expectations and scrutiny of partners. City Family CIC has quickly taken on responsibilities for staff and for delivering ongoing services, with expectations from partners that City Family CIC will match the high

standards of performance already achieved in the delivery of those ongoing services. Alongside these organisational challenges, City Family CIC is building independent relationships with existing partners and identifying potential new partners. Communicating the complexities of these developments and the overall strategic direction to those who are not within the 'inner circle' that observes the changes in real time can be difficult to manage.

At the same time, there have been significant successes. Support and commitment have been strong and ongoing from the ABSS programme team, and from key partners such as the Early Years Alliance, Southend City Council Public Health and other members of the ABSS Partnership Board. Decisions made early in the development of City Family CIC have proved to be good moves. By starting the process of establishing the CIC in 2022, the ABSS partnership allowed City Family CIC to develop within the supporting scaffolding of ABSS, giving it space and time to strengthen its own foundations. The centring of voices of lived experience that has been so important to ABSS is a real asset for City Family CIC, with the CIC Board including three lived experience parents, and other local parents attracted to fill volunteer roles.

Lessons learned from the process so far arise from the challenges of setting up a new organisation that was expected to deliver established services from the start. Delivering services in-house as a direct delivery element gave ABSS a greater level of flexibility than was possible when the same services were delivered as contracted work by a delivery-focused organisation. Having fuller specifications and outputs in place prior to the transfer of services to City Family CIC would have made the process smoother. It is clear, too, that more lessons will be learned as City Family continues its journey, particularly now it is becoming more independent of ABSS as an organisation and venturing out beyond the boundaries of the ABSS programme.

### **How have families and communities supported the work?**

In keeping with the importance of centring the voices of lived experience, families and communities have been a vital part of the ABSS partnership and have been central to City Family CIC from the start. Parent Champions were key drivers for the ABSS Legacy and Sustainability Strategy and worked alongside start-up business specialists to develop the remit, direction and principles that underpin both the new entity and the wider legacy activities. The make-up of the City Family CIC Board was designed from the outset with the inclusion of parents and voices of lived experience in mind. This means that community voices have been fundamental to shaping the CIC.

In addition, key services delivered by City Family CIC have also been shaped by families. City Family's flagship YourFamily programme, which takes the idea of 'community' as the model for a supportive network and service provision that can be tailored to individual families' requirements, was coproduced with parents and community members. The way that YourFamily delivers support to families has changed over time in response to the needs and feedback of the families who engage



with it. The delivery of support has flexed in response to developing needs identified within the community, including initiatives such as offering support to families when they attend Food Banks and Baby Banks in Southend.

### **What difference is this making for children and families?**

As an independent organisation led by a Board that is rooted in the local community, City Family CIC is able to shape its activities to meet identified needs or to take advantage of local opportunities that will support its overall direction of travel. For families, this means that City Family CIC is offering them something that meets their needs with fewer geographical or age restrictions on access. The offer is simpler for families to understand, with services delivered by one organisation on the ground rather than commissioned from a range of organisations, as is the case for ABSS. Being a smaller organisation, City Family can respond in a more agile way, with simpler recruitment of staff and volunteers than some larger organisations can manage. City Family is also able to deliver its offer in a modularised way for different areas and age ranges.

### **How ABS is adding value and improving the wider system, and future priorities regarding place-based partnership work.**

As a dedicated advocate for early intervention with families and children, the development of City Family CIC is an important addition to the ecosystem of support available to families in Southend and beyond. By playing an active role in local partnerships, City Family CIC can complement existing statutory and community/voluntary provision, ensuring that the learning and ways of working developed by ABSS continue to have influence in Southend and beyond. City Family CIC is also able to extend the reach of the work started by ABSS, by delivering services to wider age groups, geographical areas, and levels and topics of need than were within the remit of ABSS.

How City Family CIC services are provided is as important as the types of services that are delivered. As well as delivering services that addressed the three main workstreams (Diet and Nutrition, Language and Communication, and Social and Emotional Development), ABSS also focused on cross-cutting themes of Community Resilience and Systems Change. By embodying ways of working that were developed through ABSS, which focus on partnership working, integration of services and the centring of the voices of lived experience, City Family demonstrates the importance of coproduction and the deep understanding of families' lives that enables services to be designed and delivered effectively. This also ensures that a vocal advocate for children and families will continue to be present in local systems and partnerships.

**For further information, please contact Dr Clare Littleford, Head of Research, evaluation and Impact [clare.littleford@eyalliance.org.uk](mailto:clare.littleford@eyalliance.org.uk)**

## **Small Steps Big Changes (SSBC) Nottingham: Room to Play – a town centre ‘front door’ unlocking engagement with underserved families**



In 2015, Small Steps Big Changes (SSBC) launched the Family Mentor service which was developed in consultation with local parents and unique to Nottingham. Family Mentors, a paid peer workforce, deliver an evidence-informed, manualised programme called Small Steps at Home to parents and caregivers of 0–4-year-olds, alongside community groups such as Baby Massage and Story and Rhyme Time. Internal (Otting, 2024) and external evaluations (Lushey *et al.*, 2023) have evidenced positive impacts of the service for children, families and the Family Mentor workforce.

As a universal service offer in the SSBC target wards, three well-established community and voluntary sector (CVS) organisations are commissioned by SSBC to deliver the Family Mentor service in their locality. With funding from the 2023 Health Inequalities and Innovation Investment Fund, the Family Mentor service has been expanded citywide for families by referral. This expansion reflects a collaborative approach to tackling health inequalities across Nottingham, with longevity beyond the SSBC programme ending in March 2025.

In Bulwell, a market town in the north-west of Nottingham, The Toy Library is the Family Mentor service provider. SSBC commissioned an extension of their service offer in October 2022 in the form of a pilot ‘shop front’: Room to Play. This innovative drop-in service aims to engage families who might benefit from additional support but are currently underserved. It offers families the opportunity to meet the Toy Library Family Mentor team, find out about Small Steps at Home, chat through parenting challenges, and get information on other child and family services.

### **What works? Challenges, successes, and lessons learned**

SSBC has undertaken an evaluation of Room to Play (Shaw, 2024) by means of a paper questionnaire (94 unique adult attendees) and subsequent interviews with ten attendees who were identified as belonging to underserved groups.

Conducting the survey during Ramadan in March 2024 may have affected its reach, limiting the generalisability of the findings throughout the year. This highlights the importance of considering cultural and religious events in evaluation activities.

The evaluation showed various strengths of Room to Play in terms of it being an accessible community asset.

- The central location in Bulwell contributed to families discovering Room to Play, nearly one in five attendees (19%) found out about the service by chance. Good public transport links enable parents from beyond the local area to attend. Only 38% of attendees lived in Bulwell.

*“...the trams and buses only being around the corner, and there's even the train because like, we've had to come on the train before because the trams haven't been running.”*

- Open six days a week, Room to Play is an accessible service for those who work or need to prioritise what they attend in the week.

*“Most groups that you find only do weekdays or, and like most services that you find, they do weekdays, like health is really open Monday to Friday, if they're even open.”*

- The flexibility of the free drop-in service allows parents to attend Room to Play without cost or prior commitment.

*“You don't have to really commit, and then if you can't commit to it, then you've lost your space or something.”*

- Families experience Room to Play as an inclusive environment due to the diversity of people attending Room to Play and the welcoming staff.

*“I'm black, my [child] is black, and we come here and we don't feel left out.”*

*“I was struggling a bit to get out, find groups because I was such a young mum, but as soon as I came here, I was welcomed in.”*

*“They point out father groups, there's things on the wall as well, so it's nice to reassure you that you're welcome back.”*

Room to Play's accessibility and inclusivity are reflected in the service's reach and engagement. Room to Play successfully engages underserved groups.

- 44% were in receipt of benefits.
- 17% belonged to an ethnic minority group.
- 17% were unemployed.
- 10% had mental health concerns.
- 10% were living with a disability.

Half of attendees had attended Room to Play for over a year, with the majority attending for at least a few months.

### **How have families and communities supported the work?**

Room to Play was developed with an understanding of local needs, such as the lack of early years support available on weekends for working parents, which led to the decision to open on Saturdays. Although a formal consultation with families wasn't possible due to COVID-19 restrictions at the time, Family Mentors played a key role in shaping the service. Family Mentors work, and many also live, in Bulwell. They contributed valuable insights based on their trusting relationships with local families. Their input highlighted existing community needs such as a lack of provisions for

children with undiagnosed additional needs. As a result, a Special Educational Needs and Disability (SEND) group was welcomed into the venue.

Room to Play continues to listen to families' needs and suggestions. In response to family feedback, the original Story and Rhyme sessions for 0-4-year-olds were adjusted to serve different age groups separately. Parents were also consulted during the development of the evaluation survey and interview questions, ensuring that community perspectives were reflected in the Room to Play evaluation.

### **What difference is it making for children and families?**

Benefits of Room to Play for parents and caregivers included reduced isolation for 70% of attendees, improved wellbeing for 66% and having more ideas of activities to do at home to support child development for 67%.

*"It's really good for my mental health cause, like, cos I know if I stayed in all week at home, I would go a bit crazy."*

Parents also indicated benefits to babies and children, including increased play opportunities (92%), opportunities to socialise (80%) and children growing in confidence (73%).

*"There's always lots of activities, activities that I don't wanna do at home. You know, like your painting and your messy play and the water and everything."*

*"It gives me enjoyment watching her doing something or even independently going off and doing her own thing that she wouldn't normally do at home."*

Despite 43% of attendees expressing neutral or negative trust in statutory services, 52% were signposted to and accessed professional support elsewhere. Interviewees attributed this uptake to their relationships with Room to Play staff and volunteers.

*"Seeing a familiar face sometimes makes people more easier - you know - (people) don't feel so shy or not 'I won't say' or scared."*

So, in addition to directly providing a range of benefits for both adults and babies and young children who attend, Room to Play acts as an effective 'front door' for connecting underserved families with needed early years support.

### **How is ABS adding value to the wider system?**

Room to Play, described by a parent as "*clean, warm and welcoming*", welcomes the use of their space by other services, including the parent-infant relationship team Healthy Little Minds, the Early Years SEND Team and the Early Intervention Speech and Language Therapy Team. Their staff find the venue welcoming and accessible, praising features such as offering the use of toys and resources, privacy shutters for Baby Massage, air conditioning for warmer months, convenient nearby parking, adequate toilet facilities and good accessibility for walking frames and children's specialised equipment.

To share learning with the wider system, The Toy Library hosted a stand at the 2024 SSBC Early Learning Intervention Conference. The Room to Play evaluation findings

have been shared via the multidisciplinary SSBC Research, Evaluation and Learning Steering Group and will be presented in the upcoming SSBC shared learning webinar on community-based commissioning, with the evaluation report publicly available on the SSBC website.

### **Future priorities regarding place-based partnership working**

The Toy Library continues to adapt Room to Play to meet the needs of local families and align with system priorities, such as promoting public health messaging. Evaluation findings from Room to Play offer evidence of its impact, with the ambition to secure future funding to sustain the service.

In line with the SSBC's systems change ambition, SSBC continues the promotion of successful place-based partnership working. Room to Play is an example of good practice when it comes to the value that working with locally based CVS organisations has in reaching underserved families and enabling access to other child and family services.

For further information, please contact Dr Nadine Otting, Research and Learning Officer [Nadine.otting1@nhs.net](mailto:Nadine.otting1@nhs.net)



Blackpool has a high rate of Looked After Children, especially under the age of one, which is over four times the national average (Blackpool Joint Strategic Needs Assessment, 2023). Early intervention can prevent the separation of infants from their parents at birth, leading to lifelong positive outcomes and preventing more serious health and social issues later in life. Pregnancy and early years are the most effective times to intervene, as families are more receptive to change and motivated to adopt healthier lifestyles.

Blackpool Better Start combines early years science with frontline services to reach families at the right time. Blackpool Better Start is committed to working with communities and delivering true co-production.

Despite a wealth of support services, families reported difficulties in navigating care. In response, the Family Hub Triage was developed to collectively identify the right support at the right time for families with babies in the first 1001 days.

### **What works? Challenges, successes, and lessons learned**

One of Blackpool Better Start's pledges is that families will have the right support at the right time and feel seen, heard, and cared for. The Family Hub Triage helps families navigate services and support positive change.

Every fortnight, operational leads from a multitude of organisations (health visiting, Early Help, midwifery, early parenthood service) come together to triage the request for support forms (RfS) that come into the Family Hub Triage. During these meetings, RfS information (with consent) is discussed and each organisation shares information in the moment to create a rich picture of current and past family experience. The offer of support for the family is jointly decided, including with the family themselves and has increased the number of cases receiving Early Help Support or Evidence Based Intervention whilst families are pregnant or in those earliest of weeks after their babies are born. Sharing of information and coming together as a collective has been a huge success of the triage and continues to be an integral part of the process that is celebrated. Referrals can be received from anyone, and it has been positive to see the numbers of requests for support coming from organisations across the town who may not consider themselves to be early years services. This demonstrates the true partnership approach in Blackpool, where babies' and children's wellbeing is everyone's business, with a clear understanding of the wider social determinants of health.

Since its inception, the Triage Panel has jointly explored and considered 410 unique individuals (parents and children), including unborn babies, and helped families access a range of services. The Family Hub Triage recognises the high number of unborn babies who have social care involvement. Early discussion about these babies at Family Hub Triage increases the chances that families access support which compliments any social care intervention. Many of the services that then wrap around families support positive parent-infant relationships and promote emotional

regulation for parents. This aligns with the Blackpool Better Start model of change - increasing capacity and capabilities and reducing key stressors.

Lessons learnt include:

- **Information sharing:** Real-time sharing of information from midwifery, community health, and social care systems has improved understanding of families' needs and facilitated appropriate support.
- **Multi-agency commitment:** Submitting requests for support on behalf of families has been beneficial, with requests coming from a wide range of services, enabling early intervention.
- **Focus on antenatal period:** Most support requests have been made during the antenatal period, highlighting the importance of early intervention, though postnatal support remains an area for development.

### **What difference is it making for children and families?**

**Positive Outcomes:** The Family Hub Triage is supporting families in accessing a wide range of evidence informed services in a timely manner, such as Baby Steps, Changing Futures, Children's Social Care, Early Help, Early Parenthood Service, Family Hubs, For Baby's Sake, Health Visiting, Horizon, Midwifery Health Trainers, Parent-Infant Relationship Service, Parenting Team and Perinatal Mental Health Service. Without this co-ordination, families may be at greater risk of falling through the cracks of provision, not receiving timely support, or not having a holistic understanding of their needs.

**Feedback:** Families have fed back that they appreciate services that meet their needs without overwhelming them, indicating that the Family Hub Triage is effectively supporting families to access the right support at the right time.

The Family Hub Triage is changing systems in Blackpool and making services and processes more cohesive and joined up. Partnership working in this way enables services to be more effective, ensuring they are not duplicating efforts and developing joint solutions so outcomes for children and families are improved.

### **How have families and communities been involved in partnership working?**

**Partnership and Integration:** Blackpool Better Start uses systems thinking, partnership working, and integration of lived experience. The Family Hub First 1001 Days Triage Panel was designed with input from professionals and parents. Families are treated as equal partners, valuing them as equal partners, expert in their own lives and the town in which they live.

**Parent Involvement:** Parents with lived experience contributed to the design of these services through focus groups, local events, and direct communication with commissioners. Their input was crucial in shaping the initiatives.

## **How is ABS adding value to the wider system?**

The Family Hub First 1001 Days Triage Panel are enhancing local and national systems, and their models can be applied elsewhere. These initiatives foster collaboration among local organisations, ensuring families receive timely and appropriate support. The triage panel exemplifies place-based collective impact by improving service access, reducing duplication, and increasing awareness of available services.

## **Future priorities regarding place-based partnership working**

After celebrating over 18 months of the Family Hub Triage, the next steps are to collate more data on the impact of specific interventions offered at the triage and to ascertain, if possible, ideal time points for support requests. In addition to this, the methodology and practice of the triage is being considered for other areas of the system such as services that work with children at risk of involvement with the youth justice system.

For further information, please contact Victoria Morgan, Senior Development Manager [vicki.cecd@nspcc.org.uk](mailto:vicki.cecd@nspcc.org.uk)

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