

Better Start Bradford Partnership Board Minutes
Thursday 23 July 2020
Via Zoom

Meeting Started: 17:30

Meeting Ended: 19:40

Present:

Vipin Joshi	Community Board member (Chair)
Alex Spragg	Programme Director, Better Start Bradford
Josie Dickerson	Acting Director, Born in Bradford
Fareeda Mir	Ward Councillor, CBMDC
Adal Qureshi	Community Board member
Gwen Balson	Community Board member
Ishaq Shafiq	Community Board member
Karen Tetley	Community Board member
Ludmila Novosjolova	Community Board member
Salma Nawaz	Community Board member
Samina Begum	Community Board member
Satnam Singh	Community Board member
Shaheen Khan	Community Board member

In Attendance

Phil Hayden	Director of Programmes for Children's Services Innovation and Improvement, CBMDC items 1 to 6 only (in place of Mark Douglas)
Tabia Afsar	Strategy, Change and Delivery Senior Manager, Bradford District & Craven CCGs (in place of Ruth Shaw)
Jo Howes	Public Health Specialist, CBMDC (in place of Duncan Cooper)
Peter Horner	Voluntary and Community Sector representative (in place of Tracey Hogan)
Sara Ahern	Programme Manager, Innovation Hub
Emma Ansell	Evaluation Facilitator, Innovation Hub
Gill Hart	Funding Manager, The National Lottery Community Fund
Gill Thornton	Head of Programme, Better Start Bradford
Jill Duffy	Implementation Manager, Better Start Bradford
Shaista Ahmed	Finance Manager, Better Start Bradford

Nicola Hancock Programme Facilitator, Better Start Bradford
Michelle Everitt Leadership Fellow, Better Start Bradford
Liz Pal Leadership Fellow, Better Start Bradford
Guy Dove Programme Administrator, Better Start Bradford

Apologies for Absence:

Mark Douglas	Tracey Hogan	Duncan Cooper	Ruth Shaw
Sara Hollins	Michelle Smith	Olga Dolganiuc	Sarah Hinton

1. Welcome, Introductions and Apologies

Vipin welcomed everyone to the meeting and noted the apologies.

Everyone introduced themselves to each other.

2. Minutes of the Previous Meeting – 18 June 2020

The minutes were accepted as a true and accurate record.

3. Matters Arising actions table

Gill Thornton explained the timeline action will be covered by a separate workshop with Community Board members about the Better Start Bradford timeline. This would help the newer members to better understand the programme and she would be happy to bring the BSB timeline to the Partnership Board following this. It would need a ten minute slot on the agenda.

Action: Gill Thornton to arrange a workshop about the BSB timeline for the Community Board members.

The role of the Innovation Hub is on the agenda (item 6).

Alex confirmed there has been a meeting about the review of the role of community Board members, and the review will be reported on at the September Partnership Board.

Gill Thornton noted we are doing a workforce survey including BSB, projects and partners and we can report on ethnicity and BAME representation as part of that. She recalled that NatCen did an early years workforce survey a couple of years ago for us. This had a poor response so we will re-run the survey ourselves using direct contact with the workforce. It will help us to understand the reach of our programme into the workforce and what they know of Better Start Bradford.

Alex passed on the Partnership Board's thanks to the BSB staff team at a team meeting for their efforts and adaptability during the lockdown.

Guy sent details of the Commissioning Advisory Group to the new Community Board members, and one of them has joined the group.

4. Declarations of interest

There were no declarations of interest.

5. 'Getting to know you' session – Samina Begum

Samina said she has been a Community Board member for about a year. She was born in Bradford and her parents are originally from Kashmir, Pakistan. Samina was married at age 16 and has two children. She worked for the Inland Revenue for a long time and was in their Diversity Office. This involved travel to London and she liked the community side of the role which led Samina to do her degree.

Samina then worked with young people with mental health issues, in Early Intervention and Psychosis. Her daughter was born in 2012 and she got her into children's centres. Samina did the HENRY course in 2015 and then became a HENRY Champion. She is on the Parents in the Lead panel and volunteered for the Perinatal Peer Support project, helping women with mental health issues.

Samina became a grandmother in May and has set up a Play Netball group in BD5. In Dewsbury she has helped women going through Muslim divorce.

The Partnership Board thanked Samina for her presentation.

6. Innovation Hub annual update and the role of the Innovation Hub

It was agreed that this section should be recorded.

Sara gave a Powerpoint presentation and noted that as there are some new Board members she should give some background. The Innovation Hub is hosted by Born in Bradford at the Bradford Institute of Health Research. Born in Bradford is a research project set up nearly 15 years ago as a response to high infant mortality in Bradford. It recruited pregnant women via the BRI and a birth cohort and described ill health and its causes.

Born in Bradford were involved in the BSB bid which included a research and evaluation element and so the Innovation Hub was set up as an evaluation partner. It will measure and monitor BSB's projects, do evaluations and put knowledge into practice.

Phase 1 of the Innovation Hub was for the first five years of the BSB programme (ending 31 March 2020) and had three main workstreams aligning with BSB's outcomes. A new BSB birth cohort was set up starting in January 2016 to measure the impact of the BSB programme – this will cover women and baby health and will eventually include education data. The Innovation Hub have set up an evaluation framework and have developed a service design process, logic models and evaluation plans.

A big challenge over the first few years was getting data systems and processes right. The Innovation Hub's role is to hold, clean and process data. They usually get spreadsheets from projects and some projects struggle to collect complete information which enables Sara's team to identify families. They help projects to improve their data so that families can be tracked as they move through the programme and the Innovation Hub can get a timeline and link to Born in Bradford.

The data is used to produce evaluation reports and contribute to wider reporting to the Commissioning Advisory Group, Partnership Board, local partners and the National Lottery Community Fund.

Sara moved on to the need to understand and involve the community. The Innovation Hub established CRAG (Community Readiness Action Group) which has been a real asset when planning qualitative work. It has given the community voice and shows what works and what does not. It indicates how ready the community is to engage with the BSB programme. The community readiness work has been recognised by the World Health Organisation and there have been over 20 CRAG meetings.

Over 2,000 families were recruited to the Born in Bradford (BiBBS cohort) during Phase 1, and now they have just reached 3,000. It is a very diverse cohort with dozens of languages spoken and includes two sets of triplets.

Sara's team have developed a monitoring strategy for BSB's projects' progression criteria, in consultation with the projects at workshops. They have done 21 evaluation plans and 13 evaluation reports. To integrate research into practice, toolkits are available on Born in Bradford's website and there are also videos about logic models and theory of change. The toolkits work has brought recognition by the Early Intervention Foundation who have asked Born in Bradford to partner up in national projects like the Early Years Transformation Academy.

Sara moved on to findings and explained that the BSB population is significantly different to what was thought at the bid stage. Research has shown high levels of low mood and anxiety among pregnant women and the benefit of continuity of care for midwifery. Messages of what has been learnt to date have been communicated to the community via birthday cards.

Sara turned to influencing systems change and the Innovation Hub have developed a measure for attachment and another for maternal mental health. They have promoted having a shared child record and there is a SystmOne pilot which feeds into the Team Bradford data capture.

Phase 2 started on 1 April 2020 for the last five years of the BSB programme. Sara said this has focussed the purpose of the Innovation Hub who are assessing what sort of evaluation they can provide for each BSB project. A workstream is systems change and knowledge dissemination and ensuring how the Innovation Hub has a legacy when BSB finish, embedding evaluation skills. Other priorities are community engagement (for which a new research fellow is being recruited), making sure research is relevant to the community, measuring systems change and organisational change and how BSB reacts to it and influences it.

Objectives for Phase 2 include monitoring project performance. Some projects will get standard implementation evaluations (which Emma will be leading on) but others will proceed to enhanced evaluations ('Before and After,' or even full effectiveness evaluations). The Innovation Hub will also contribute to the national A Better Start evaluation. They are aiming to have recruited 5,000 BiBBS families during Phase 2.

Finally Sara raised leverage and collaboration, the work within Better Start has contributed to other sources of funding and involvement in wider research such as Act Early and there are links with other research organisations like the Nuffield Foundation.

Sara invited questions and Adal raised data quality and asked what percentage has been achieved. Sara confirmed they do monitor the completeness of data and feed back to the projects and this will be formalised more in the new phase, with a risk log and more frequent feedback. The data needs to be as complete as possible.

Adal remarked that he is part of CRAG and said that a report showing what percentage of data is complete would help and Sara agreed with this.

Gwen thanked Sara for the report but was concerned that it was very academic and asked how this would translate into a grassroots level of understanding and outcomes. Also, Gwen asked which projects are actually working, how cost-effective they are and how they will be sustained after BSB finish. Sara noted the correspondence sent to BiBBS families as her team know where they are, and they do community-facing work and she mentioned their presence at the Science Festival, Family Festival and BiB events. They always try to find accessible ways to engage and it is a priority to improve this in the second phase.

Gwen commented that we are still trying to get engagement right after four or five years and asked when it will happen. Josie said it is good to be challenged like this and the Innovation Hub does need to work more closely with the Community Board members about how to best get messages out there. Gill Thornton confirmed that we are discussing bringing these matters more regularly to the Partnership Board. Sara added that the idea that everything will be right after ten years is wrong and we will always be striving to do a better job. Gwen said she would like to help to plan getting messages to the grassroots level.

Shaheen raised community readiness and asked if the BSB programme is an accepted part of the community. Sara said she would see if her team needs to revisit the community readiness work. Hopefully a new community engagement research fellow will be recruited tomorrow and they will work on the strategy for the next five years. Josie confirmed that this will tie in with the engagement strategy that Fiona Saville has led.

Vipin asked when we will be able to say if a project is working and noted we have been waiting for this for some years now. Josie confirmed that for each project we have an evaluation plan and we know which ones may proceed to an effectiveness evaluation or a before and after evaluation and which will not. She could share the plans and timelines for each project but this would need another session.

Josie thought Family Nurse Partnership was a good example of when we replaced a project that was not working well with something else. Gwen asked how cost-effective the projects are as this must have been done for FNP and if we could have a plan to transfer all this from the academic level to the grassroots. Josie suggested that the plan could be developed through CRAG, or Gwen and a couple of others could do this and the plan would not work without Community Board member input. Gwen confirmed she would be happy to help and said there should be a few other people initially to help.

Ishaq noted that he appreciates the effort to monitor the projects and agreed that some Community Board members should meet up with the Innovation Hub. This group should come up with a lay person's guide to how a project is doing. He felt there should also be a quarterly summary.

Ishaq also remarked that we need to understand ethnicity and Josie confirmed her team do have this data and they always report on reach and if projects are reaching targets. The

Innovation Hub were about to share all their information and launch the data dashboard in the Story So Far event but this was postponed due to the Covid pandemic. Hopefully this work will be back on track over the next two months.

Ishaq raised learning and that people do not understand BSB in Bradford Moor and we need good news to be given out to the community. Gill Thornton said she was aware of the issue in Bradford Moor and she has invited Cllr Iqbal to meet with BSB and also Mr Yaqoob from Bradford 4 Better. She suspected people do not know details of our programme and she will clarify this. Gill Thornton noted the BSB programme is not ward-focussed – it is based on neighbourhoods and where need is. She is happy to share this information and we need to direct people to where this information is. We do put our newsletter through local peoples' doors twice a year but better communication is needed with community partners.

Vipin commented that he and Jo Howes have been to many meetings with local ward councillors and there remains a lack of understanding about BSB.

Vipin thanked Sara for her presentation and confirmed we will sort out a way forward involving the Community Readiness Action Group.

Action: BSB/Innovation Hub to set up a working group via CRAG involving the Innovation Hub and the Community Board members to help transfer learning to the grassroots and get messages across.

Josie said thanks to the Community Board members and confirmed that the Innovation Hub need to hear their views.

7. Little Minds Matter contract extension

Gill Thornton said the Little Minds Matter project was designed from scratch by Jo Howes and it took two years to design. It started two years ago and is still being developed as it is a brand new service. There was nothing like it in the district before, and indeed infant mental health projects are uncommon in the whole country.

Gill Thornton noted that if the parent-infant relationship is right in the first few months of life, it will set the child up for life. Unfortunately the opposite is also true and the parent-infant relationship does not always go right, so this is an important part of the Little Minds Matter project. All A Better Start sites have a parent-infant relationship project, but there is nothing else specific to infant mental health.

August 2018 was the start date of full delivery of Little Minds Matter project, with 31 July 2021 being the current end of contract date. The theory of change shows how the intervention leads to the outcome we expect to achieve.

Little Minds Matter is already a strong service and we have been offered additional funding from the local NHS Clinical Commissioning Group to extend the project into the central CCG area. Also, Bradford District Care Trust have developed Little Minds Matter as part of wider age 0-5 provision. The project has a good prospect of becoming embedded in the district and services will be aligned and not duplicated.

Gill Thornton outlined the case for extending the project's contract. This is to develop stability, demonstrate feasibility if projects are extending beyond BSB, to see if a redesign is needed

and to develop innovative partnerships. For example, there are discussions with Children's Social Care about seconding a social worker into the Little Minds Matter team. Extending the project would allow more people to be trained which would add capacity and continue the test-and-learn element of the project (which is also part of the CCG funding).

Extending the Little Minds Matter contract would also help with stability, reducing staff turnover and having a larger team, with higher staff retention and morale.

The Commissioning Advisory Group looked at the proposal earlier this month. They recommended extending the Little Minds Matter contract to March 2024. Little Minds Matter could be seen as an important trailblazer for the BSB programme in terms of sustainability. The Commissioning Advisory Group asked for more detail about performance to date which is why the insight report was included in our meeting pack. Tabia said that the Commissioning Advisory Group had recognised the importance of qualitative and quantitative work.

Gill Thornton confirmed that performance issues will be addressed at quarterly meetings or earlier in the event of urgent matters. There would be a review at the end of Year 2 (which is in the CCG contract) which BSB will take part in. We would also bring a detailed report to the April 2021 Partnership Board as was the original plan.

Gill Thornton turned to the insight report and noted the project has four strands to it. Parents have been really responsive to the community engagement part of the project. 421 practitioners have attended the Little Minds Matter training, with 100 per cent of them reporting that the training is useful or very useful to their role. 390 practitioners have attended the consultation service, again with a 100 per cent recommendation rate. Also, direct clinical work has supported 61 families and two therapeutic group sessions have been delivered. Feedback has been very positive.

In conclusion, Gill Thornton said that Little Minds Matter has been a considerable success, driving up standards and spreading knowledge. The project has also won a number of awards, has international recognition and has presented at national conferences.

Adal said he would have liked to have seen a timeline, showing if goals are being met and when the feedback was received. Nicola explained that families are usually referred by a health visitor and are seen very quickly due to the nature of the work. The average intervention by the project is six months as it is quite intensive therapeutic work. The family is assessed at the beginning and the end of the support and the project can demonstrate that it does make a difference.

Karen commented that Little Minds Matter is a really good project but she would like a little more detail as to what 'situation much better' means. Nicola noted there are case studies but some of the detail would make families identifiable.

Ludmila queried reach into EU communities and Nicola confirmed the project has worked with eastern European families, though numbers are smaller than for some other ethnicities and they are doing engagement work to address this.

Fareeda asked if the project helping 61 families represents value for money with a £300k annual contract value. Gill Thornton replied that the four strands of the project add up to the £300k but the therapeutic element is the most expensive part. There is also the training and the consultation provision is clinical supervision – making sure that practitioners are supported

when working with families where challenges with the parent-infant relationship are evident. Josie said that it is wrong to look at the cost per person or family. A successful intervention might save the NHS and other agencies much more money over the long term and Jo agreed interventions may not be needed in later life as well as contributing to significantly better life chances for the child. Jill mentioned that there is also wider added value in terms of driving up standards across practice and raising awareness in the community.

Gwen commented that Little Minds Matter is very innovative. She noted that case studies are being done but asked what other evidence will be collected. Gill Thornton explained that clinicians can measure the quality of the parent-infant relationship at the beginning and at the end of the intervention. Also, the families are matched to the BiBBS cohort and we expect to see improvements regarding school readiness and eventually, more mentally healthy adults.

Sara observed that Little Minds Matter were finding their feet for a while, and the Innovation Hub will be able to look at what kind of evaluation will be possible but it is too early to say at the current time.

Jo said that as a commissioner of the health service, the clinical strand is not the one with the greatest impact. Instead it is vital for Public Health to learn more over the next few years from Little Minds Matter. There are not many other examples in the whole country and the opportunity to extend the contract should be taken as the project needs more time and it has had some good successes.

Decision: The Partnership Board decided by a majority to extend the Little Minds Matter contract to the end of March 2024 to align with the proposed CCG funding whilst amending the service level agreement to incorporate the proposed CCG contract review at 2 years.

8. Year 5 final accounts

Shaista went through the main variances for the full year to 31 March 2020. There was an underspend of £951k and explanations for this are given on the spreadsheet in the meeting pack and in the written report. She noted that the Finance & Audit Sub-Committee have already reviewed these.

There was an underspend of £49k on the Learning Together budget. Shaista explained that the 'Story So Far' event had to be postponed.

Due to BSB deciding to do a complete overhaul of our IT, there was an overspend of £40k on Computers and Software. Management Overheads were overspent by £15k as Bradford Trident had not charged us enough for IT support for the last two years.

Shaista noted that increases in projects' budgets had been approved by the Partnership Board.

Adal raised the high IT costs and licensing costs and noted there are alternatives to Microsoft. Gill Thornton confirmed that Zebunnisa who did this work was aware of that and tried to get the best deals but we were restricted by Bradford Trident and Hollinbay the IT support provider. Vipin added that Bradford Trident are Better Start Bradford's accountable body. This means BSB need to have the same IT provider and systems.

Shaista noted that graphs showing spend over five years and projected to ten years are in the meeting pack.

Decision: The Partnership Board notes and accepts:

- **The revisions made to the Year 5 budget**
- **The accounts for the year ending 31 March 2020.**

Vipin thanked Shaista for her presentation.

9. Adverse Childhood Experiences (ACEs) Strategy

Michelle presented the definition ACEs and explained that they are really common. Nearly half of adults have experienced at least one and one-tenth of adults have experienced four or more ACEs. There is a significant link with deprivation and to future health outcomes, both physical and mental. Resilience is the ability to overcome the effect of ACEs, in order to develop this young children need to have a positive attachment to at least one adult in their life.

Michelle moved on to trauma-informed practice and explained that early trauma can have an impact on how someone behaves. Replacing the question 'What's wrong with you?' with 'What's happened to you?' demonstrates how practitioners can adjust their approach acknowledging the behaviour observed is a product of earlier experiences. Michelle showed a diagram showing how preventing ACEs, resilience and trauma-informed care all fit together and these are the district's three key strategic aims.

District-wide work has gone on for some time and Michelle said that on 17 June a district-wide multi-agency workshop was held. The workshop was well attended and there is now a district-wide action plan for which steering groups have been created. A paper will be going to the next Children's Systems Board. There will be recruitment to the steering groups and we have committed to jointly funding an ACEs co-ordinator for the district.

BSB have delivered an ACEs awareness session and set up a community steering group but Covid has delayed its first meeting. We have an internal ACEs, trauma-informed care and resilience strategy and Michelle went through its aims which are the same three key strategic aims as the district's. There are cross-cutting techniques such as building knowledge and awareness, commissioning projects that address children's needs and recording information about ACEs by area.

BSB have a leadership role in the steering group and will inform and support projects to contribute to the ACEs strategy.

Michelle invited questions and Ishaq asked who had been engaged so far and consulted. Michelle confirmed that one event had been held per ward. Ishaq then asked about membership of the steering groups and Michelle advised that uptake had not been great for some of them. They had decided to start with small numbers who would then try to recruit themselves. All the volunteers at the moment are women and Michelle wants the steering group to be more representative. Ishaq suggested that some women might not attend if men were there for cultural reasons. Gill Thornton noted we are also working with Sharing Voices who are developing a Resilient Men project via the Innovation Fund.

Jo said that the steering groups will talk about what they will do in the community and will need to appreciate how to reach communities. She will be looking after Michelle's work in the interim once Michelle leaves BSB at the end of next month but a permanent lead will be needed and things are at a very early stage.

Gwen asked for more details about the co-ordinator role and it was confirmed this will sit in Public Health. Michelle said the role would involve overseeing the Bradford Council/BSB ACEs strategy and getting it off the ground and will involve project management and leadership skills.

Shaheen said she attended an event with 124 people about Holme Wood alongside the Alan Turing Institute. She successfully suggested ACEs as a project having previously attended a BSB event. The project is in its early stages and an issue is collecting ACEs data. Michelle commented that this was encouraging and she would like to find out more about this outside of this meeting.

10. Programme Strategic Objectives

Action: Due to lack of time, Alex will arrange to email the report to the Partnership Board instead of discussing it at this meeting.

11. Programme Monthly Report

Gill Thornton noted that this month the report includes more case studies in response to feedback from board members.

Peter remarked that the text of the report shows lots of significant changes to the plan although the relevant items are mostly still RAG-rated as Green. He felt that significant changes should be highlighted. Gill Thornton agreed that maybe these should have been rated as Amber and she will talk to Zebunnisa about them. She also said that there should have been more contextual information i.e. in item 3.3.2, we are helping to encourage higher childhood immunisation rates.

Action: Gill Thornton to discuss the RAG-rating in the programme monthly report with Zebunnisa.

Shaheen asked about numbers for early education for two year olds being down (also item 3.3.2). Gill Thornton explained that the number of sign ups for the two year old offer had fallen, not the actual number of two year olds.

12. Any other business

Adal asked about contacting other Community Board members and it was confirmed they can be emailed via Guy. Shaheen will add Adal to the WhatsApp group.

Finally Vipin asked if everyone had felt they had an opportunity to contribute to this meeting and all agreed that they had. The next meeting is not until September and Vipin wished everyone to have a wonderful summer and to stay safe.

13. Date of next meeting

The next meeting is provisionally on Thursday 10 September 2020, starting at 9.30 am.

The meeting closed at 7.40 pm.