



SHROPSHIRE HEALTH AND WELLBEING BOARD

Report

Meeting Date	20 th April 2023			
Title of report	Early Intervention/Prevention across Shropshire: Integration & Transformation Programme; Children and Young People Test and Learn Site, Oswestry.			
This report is for (You will have been advised which applies)	Discussion and agreement of recommendations	✓		
Reporting Officer & email	Melanie France Melanie.france@shropshire.gov.uk			
Which Joint Health & Wellbeing Strategy priorities does this report address? Please tick all that apply	Children & Young People	✓	Joined up working	✓
	Mental Health		Improving Population Health	✓
	Healthy Weight & Physical Activity		Working with and building strong and vibrant communities	✓
	Workforce		Reduce inequalities (see below)	✓
What inequalities does this report address?	Differing life outcomes Health inequalities Poverty			
Report content – please see attached				
Risk assessment and opportunities appraisal (NB This will include the following: Risk Management, Human Rights, Equalities, Community, Environmental consequences and other Consultation)	<p>Local leaders from across the council, the NHS and Partners, have committed to an aspiration of working closely together as part of delivering an all-age Local Care Programme (LCP) agreed by system partners at SHIPP (Shropshire Integrated Place Partnership).</p> <p>In addition to ICS system aspirations, this approach aligns with the Shropshire Plan, Healthy People priority, focussing on strategic objective of a single system view to tackle inequalities, get in early yourself, supported by us or by our partners.</p> <p>The Integration and Transformation Programme's aim is to prevent escalation of need and to reduce the long-term impacts and effects that the pandemic has had on local people in Shropshire.</p> <p>The coproduced vision for the Integration & Transformation programme is <i>"For all Shropshire people to be happy, safe and healthy, and to develop skills, knowledge and attributes resulting in confidence and independence."</i></p> <p>The approach aims to create a more positive and promising future for people of all ages. The Integration and Transformation Programme is based on evidence and learning from successful integration programmes nationally, where a similar approach has been adopted.</p> <p>This work is being undertaken to reduce inequalities in our population and poverty in all its forms; providing early support and interventions that reduce risk and enable children, young people, adults, and families to achieve their full potential and enjoy life.</p> <p>Data and insight are being used to understand geographic and thematic areas of need within in our population, to work with practitioners to understand the unmet needs of infants, children and young people and supporting families from pre-birth.</p>			

	Use the learning to repeat the process in other areas of Developing an evaluation approach for this work, that would encompass both financial and non-financial benefits is underway.	
Financial implications (Any financial implications of note)	Delivering the Integration and Transformation Programme will help the Council to meet its aspirations for Healthy People as part of the Shropshire Plan. It will also help to deliver commitments in the Medium-Term Financial Strategy 2022-25. An approach to monitoring the financial benefits of the programme is being developed as part of a broader evaluation framework. At this stage, no additional costs are anticipated through the multi-disciplinary team approach. Cost savings are anticipated through this approach for the health and care system as the need for high-cost interventions in people's lives is reduced.	
Climate Change Appraisal as applicable	No significant effect, however, positive benefits could include less carbon footprint as people will have enhanced local provision to meet their needs, therefore may travel less as a result.	
Where else has the paper been presented?	System Partnership Boards	N/A
	Voluntary Sector	N/A
	Other	N/A
List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information)		
Cabinet Member (Portfolio Holder) Portfolio holders can be found here or your organisational lead e.g., Exec lead or Non-Exec/Clinical Lead Cllr Cecilia Motley, Portfolio Holder for Adult Social Care, Public Health & Communities Cllr Kirstie Hurst-Knight, Portfolio Holder for Children & Education		
Appendices (Please include as appropriate) N/A		

REPORT

Early Intervention/Prevention in Shropshire: Test and Learn Site, Oswestry

1. Synopsis

1.1 Providing early support and interventions is integral to improving outcomes for children and families, and for managing and reducing demand for children's social care provision. This report describes the Integration Test and Learn site at Oswestry; one of several projects in development alongside the draft All Age Early Intervention & Prevention Strategy.

2. Executive Summary

2.1 An ounce of prevention is better than a pound of cure. The Integration and Transformation Programme is one example of a more proactive multiagency approach to prevention and is part of the broader draft All Age Early Intervention Prevention Strategy which is being developed alongside. This Strategy will outline the vision and plans for a more systematic preventative/early intervention approach to support children, young people, families and adults as early as possible and prevent or reduce their need for more complex health and care support while improving their outcomes. A separate paper will come to a future HWBB meeting to introduce the Draft All Age Early Intervention Prevention Strategy.

2.2 The Integration and Transformation Programme supports the Healthy People priority in the Shropshire Plan and Shropshire Telford and Wrekin, Integrated Care Strategy. The programme is bringing expertise and knowledge together by working with practitioners and professionals across the Integrated Care System in Shropshire, identifying where individuals and communities need service offers and connectivity, and working together with the practitioners and community to provide preventative and early support to enable children and families to achieve their full potential and enjoy life (*The Shropshire Plan, Healthy People Priority, Early Intervention Strategic Objective*).

2.3 This report introduces a proposed new approach to integrated working for Shropshire, and describes the work undertaken to date to deliver a phase 1 test and learn site in Oswestry, for Board members to consider, challenge and comment as appropriate. The new approach reflects collective stakeholder aspirations for integration and integrated working which is a conscious move from a traditional separation of adult and children's wellbeing and health to a more ambitious and holistic model of wellbeing and health across all ages, working with families, children and young people and all other individuals as early as possible.

2.4 This report describes the first phase of the Integration programme to deliver a test and learn site in Oswestry. It describes the creation of the Integrated Practitioner Team and the Community Collaborative, as key mechanisms to deliver Integration and Early Intervention / Prevention in communities.

2.5 This report describes progress, challenges, and strengths of the Integration Project to date and the next steps to scale up and roll out the programme to other parts of Shropshire using a needs led approach.

3. Recommendations

3.1 Members are asked to consider, challenge and comment as appropriate on the contents of the report including the further development and scaling up of the Integration programme

3.2 A further report on the progress of the Integration Test and Learn sites is brought to a future meeting to endorse a proposed roll out plan for Shropshire

3.3 Strategic oversight of the Integration Programme is monitored by the HWBB for assurance

3.4 HWBB to receive a report to a future meeting on the Draft All Age Early Intervention Prevention Strategy

4. Background

4.1 “An ounce of prevention is better than a pound of cure.” Shropshire Council recognises the extensive evidence around this approach and is committed to this as the first priority within the Shropshire Plan to “providing early support and interventions that reduce risk and enable children, young people, adults and families to achieve their full potential and enjoy life.” This aligns to the priorities within the Shropshire, Telford and Wrekin Integrated Care Strategy around best start in life and tackling healthcare inequalities. This preventative approach will deliver both improved outcomes as well as reducing the demand for complex care and support including reducing the number of children who absolutely need to be brought into care in the medium and longer term. This will lead to clear financial and cashable benefits and efficiencies for the care system, alongside non-financial benefits for individuals and communities

4.2 More detail of the vision for this and the delivery plans to address this work will be outlined in 2023 in the Draft All-Age Early Intervention Prevention Strategy for Shropshire, however, work is already in progress to deliver on this ambition.

4.3 The integration project is one of eight projects underway, number one in the table below, along with integration expansion plans, that support the development of Shropshire’s Prevention and Early Help offer for Infants, Children, Young People (CYP), families and adults. The project was identified through a series of consultation events identifying gaps and pressures across the council and the end-to-end system, with NHS and wider partners. The goal is to develop a broader prevention offer for people and fits with ambitions of a number of national strategies and local ambitions for an all-age prevention strategy

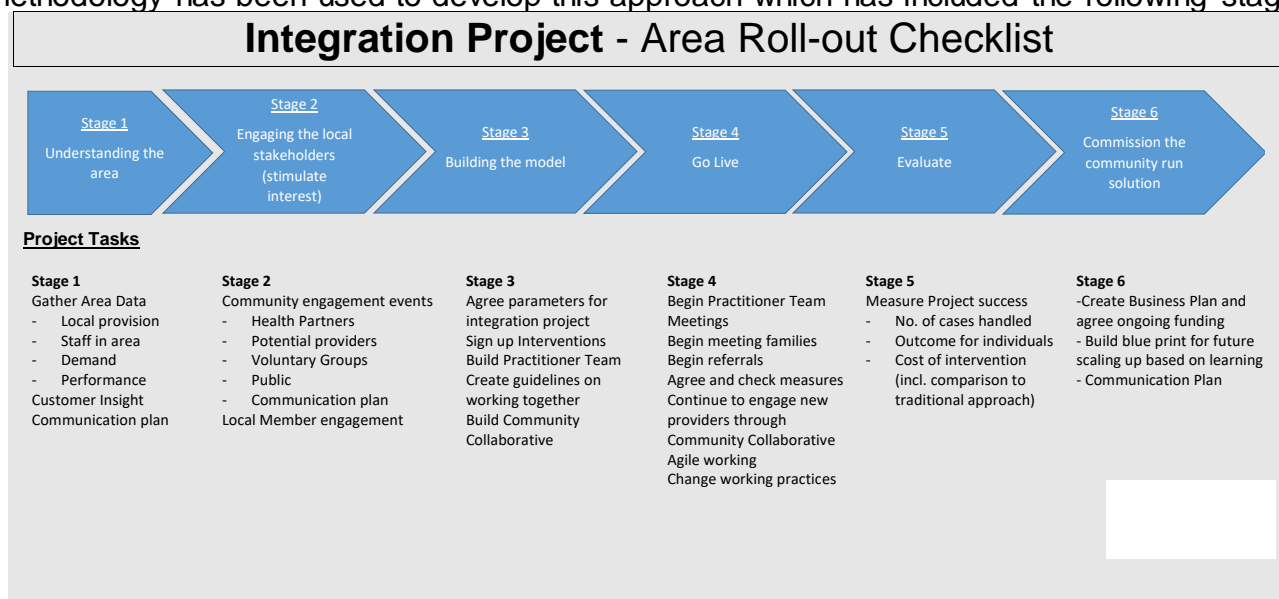
Range of Projects: Children and Young People

Short term 0 – 12 months	Medium term 1-2 years	Longer term – 3-5 years
1.Integration test site– Oswestry – April 2022 onwards Practitioner team and community collaborative	1.a. Collaborative work across health and care – continuation of integration pilot Oswestry and roll out to other areas, prioritised by need.	1.c. Full-service integration
2. 1001 Days/best Start Vast programme of activity across health, care, education, early years, early help, oral health, and community services (libraries)	1.b. Promotion of existing initiatives and development of new initiatives to support prevention and early intervention for children, families and adults. Workforce development – creation of new roles and testing ways of working, improved multiagency and integrated working with one place to access training – e.g., Parental Conflict joint working	1.d. Preventative programmes delivered in an integrated way supported across all services areas working with infants, children, young people, and families.

3. CHAST (COMPASS Help and Support Team) – creation of team to support referrals into COMPASS – speed and response	6.Full CYP Needs Assessment Predictive Analytics	
4. Stepping Stones – business case, modelling, expansion of service model	7.Strategy Development vision, principles, ambitions	
5. Improved and co-ordinated offer in schools	8. Embedding Trauma informed practice through the projects and supporting system trauma informed work	

4.4 The approach taken has been collaborative, underpinned by population health data, (including CYP Mental and Emotional Health, input from multiple service managers, needs identified by practitioners, service managers including a strong VCSE element, an increase in CYP entering social care and builds on the initial Moorhouse review completed by the ICS (Integrated Care System) in 2021).

A methodology has been used to develop this approach which has included the following stages:



5. Additional Information – Programme Approach to Delivering Integration

5.1 The Integration and Transformation Programme is currently working at an initial site in Oswestry and has taken a two-part approach that runs concurrently:

- 1) Creation of a multi-disciplinary **Integrated Practitioner team**, to support infants, children, young people, and families that covers ante-natal, school age and teenage years in the Oswestry area.

- 2) Development of a **community collaborative** to re-establish a strong community led prevention offer that initially supports infants, children, young people in the Oswestry area, initially starting with the most vulnerable.

Oswestry Integration Test and Learn

Creating a multi-disciplinary team to support CYP and families in the Oswestry area that covers the ante-natal period, school years and teenage years.

Development of a community led offer that supports children and their families, initially starting with the most vulnerable



6. Progress – Integrated Practitioner Team

6.1 The project, operational since June 2022, consists of practitioners from across public health nursing (health visiting, school nursing, Family Nurse Partnership), midwifery, substance misuse, mental health support teams in schools, Early Help, Children’s Social Care, housing, the police, gypsy liaison, education exclusion and social prescribing. The team meet fortnightly face to face, in a community-based venue in Oswestry. The meetings are action focused with detailed recording.

6.2 The approach taken to develop the team, and the site chosen, has been based on a sound methodology, using a mix of evidence base, population health need and action learning/facilitation. A series of indicators and measures have been identified of both qualitative and quantitative measures to support the evaluation of the team’s impact and the community collaborative. A sample of case studies to illustrate the needs of families that have been supported through the programme to date follows.

Case Studies

Name	Summary of case	Impact
Family X	Work in a targeted community re: child at risk – Domestic violence Information being shared by the family to Children’s Social Care inaccurate Additional information provided by Gypsy Liaison Officer	Change has had positive impact on child safety and welfare Live case, family engaging with Practitioner Team

Family B	Mum enrolled on Family Nurse Partnership (FNP) programme Unborn baby placed on Child Protection Plan Historic Domestic Abuse between parents	Both parents engaged well with all agencies and continue to engage with the FNP Discussion between FNP and Targeted Early Help Team (TEH) Continued work around healthy relationships reducing parental conflict
Child K	Referral to school nursing via TEH Health concerns in school and attendance issues School Nurse requested information from TEH providing a fuller picture and helping the School Nurse be more prepared	School attendance improved
Family D	Parenting and parent-child relationship concerns Challenging behaviour of child History of domestic abuse Parenting support provided Support from domestic abuse team Play practitioner input New pregnancy Requested support from Health Visiting Team (HV) as also 1 year old baby Support requested around weaning Single Point of Access Team (SPOA), Shropshire Community Health Trust (SCHT) referral made	Mum engaged well with parenting support Communicates well with school Child D responds well to school staff Both school age children in household have good school attendance
Family E	Mum has diagnosed learning needs Child has suspected speech delay Play practitioner showing mum how to play with child Cooking and healthy eating support also in place Referred to SPOA HV attending TEH meeting Speech and Language Therapist monitoring progress	Mum has greater understanding of child development Joint visit planned

6.3 Changes Seen Include:

- Early signs of positive impacts on reduction in both contacts and referrals to Children's Social Care, Compass and Targeted Early Help, which require further validation
- Small number of cases stepped across from Targeted Early Help Team to the Integrated Practitioner Team to test the approach, through demand management monitoring progressing
- Cases stepped across are being discussed and work progressed with the families which would not ordinarily happen due to the separation of data on partner systems which disable the sharing of information
- Targeted Early Help identifying cases which are being held by the Targeted Early Help Team which need health practitioner input to progress – referred across to the Single Point of Access team at Shropshire Community NHS Health Trust

- Internal and improved processes in the council, such as, members of different teams working more closely together
- Changes to safeguarding strategy meetings
- Practitioners taking a proactive, collaborative approach, working more closely together resulting in improved communication, increased knowledge of the multidisciplinary team and individual functions, improved understanding of complexity of cases held within Targeted Early Help and increased understanding of the families, i.e., Children's Social Worker attending Early Help triage meetings
- Live case discussions to identify improvements and build fuller pictures of families – not reliant on partner systems talking to each other
- Cases being stepped across from Targeted Early Help to the Practitioner Team
- Insight and learning about 'specific' cultural differences for families where translation is an issue
- Access to wider training opportunities and resources for families
- Supportive, protected time, resulting in qualitative and holistic pictures of family situations
- System 'time lags' reduced due to regular and on-going connections and conversations between practitioners
- Wider availability of services/projects for families to access
- Practitioners have access to a wider prevention offer
- Increased confidence in practitioner workforce

6.4 Challenges:

- Current partner data collection systems do not facilitate timely responses for practitioners or families
- Internal referral systems do not facilitate joint conversations – they often hinder
- Support and commitment across the system from Health, Local Authority, and wider partners, however, it has been recognised there are capacity issues in some teams with improvement action plans in place
- Post-natal support for parents especially mental health
- Access to CAMHS for families, partners and the Practitioner Team has proved challenging, and ongoing work is taking place to establish issues and solutions
- GDPR
- Identification of a dedicated practitioner lead within each site to co-ordinate and lead on an ongoing basis. This will be considered with partners as part of the roll-out plan.

6.5 Evaluation

Evaluation of Site 1 is currently underway by an independent, in-house Consultant in Public Health and an experienced Public Health Research Practitioner

Evaluation techniques being considered include:

- Case Studies and chronology
- Data – impact on referrals and contacts validation
- Financial savings and non-financial benefits
- Interviews with Schools to understand how their relationship with the system has changed
- Change readiness questionnaires for the Practitioner Team
- Interviews with the individual Practitioner Team members
- Interviews with Families

6.6 Progress – Community Collaborative

6.1.1 The purpose of the Community Collaborative is to re-stimulate the response from the VCSE (Voluntary, Community and Social Enterprise) and local community groups, seen during the pandemic, and to re-establish a strong community-based prevention offer for infants, CYP and families, which has reduced considerably over a period of time. Additionally, since the pandemic there has been a marked reduction in the offers available

6.1.2 An initial event was held in July 2022 and followed up in October and January 2023, to test out the feasibility, interest, and commitment from the Community to this project. This has attracted over 50 community groups, and partners. The opportunity to re-engage across groups, to network and identify solutions to some of the challenges being seen by the practitioners, has been extremely positive.

6.1.3 As a result, there are a number of projects emerging in response to the needs identified. This includes an early intervention pilot led by The New Saint FC Foundation (TNSFC) to ten secondary level young people on the verge of exclusion, based on co-design principles and invitation criteria agreed in partnership with Marches Academy Trust, Bright Star Boxing and West Mercia Local Policing Team, using a central theme of sport/physical activity to engage young people. This initiative has one completed cohort which showed very positive results for the young people involved and has the potential to expand further.

6.1.4 The council is working to provide further support to the projects, including funding. The community collaborative offer is crucial to the success of the integration project, as the practitioner group would not have the capacity and/or resources to respond to some of the multiple needs of families and supports the wider ambitions

6.7 Performance Data

6.7.1 Anecdotally, Practitioners support signposting children and families to a wider prevention offer in the past year

6.7.2 Practitioners report a greater awareness and use of a wider prevention offer in the local community

6.7.3 Data capture exercise completed quarterly to create a picture of local community prevention offers available. This has seen an increase from 15 initial offers to over 30 with new initiatives being added on a regular basis

6.7.4 Participation at the Community Collaborative face to face events has seen an increase from 26 original participants in July 2022 to 41 participants currently

6.8 Changes Seen

- New community-based initiatives for families available locally, and delivered by partners working together, accessing funding, and considering inequalities and target populations
- Increase in membership and participation by 60%
- Stronger connections made across projects
- Renewed energy and enthusiasm across the VCSE and partners
- Increased partnership opportunities resulting in a wider offer for families and practitioners

8.7 Challenges

- Gaps in service offers have increased since the pandemic
- Identifying potential funding streams
- Level of leadership support required to facilitate the community collaborative and practitioner team
- Supporting community to access funding and to develop and submit funding bids

- Gaps in specific areas such as Mental Health provision

7 Next Steps

7.1 Co-Production workshop to review lessons learned, reconfirm commitment, agree roles/responsibilities and to establish branding for the Integration and Transformation Programme

7.2 Continued co-production development of the approach with Practitioner Team

7.3 Co-production of integration approach to be developed with local residents

7.4 Key milestones for the development of an all-age integration site 2 in North Shrewsbury:

Objective	Date to be Achieved
Population Health Data collection and analysis	Mar-23
Scope site 2 including a site for practitioners and the development of the community prevention offer	Mar-23
Engage Senior System Partners	Mar-23
Identify workforce provision	Apr-23
Data sharing	Ongoing
Practitioner Team Development	Apr-23
Identification of complex families/individuals to step across from Targeted Early Help and other teams/partner agencies to the Practitioner Team	Ongoing
Deliver evidence-based interventions to local residents	Ongoing
Create a community prevention offer for local residents that is led by the VCSE and involves wider partners	Jun-23
Support residents to access local support offers both statutory and from within the wider community and VCSE	Ongoing
Evaluation	Apr-24
Continued Scale Up and Roll Out	Ongoing

7.5 Detailed roll out plan to cover the County to be created by end of April 2023. This will include plans to scale up both the coverage and pace of work, building on the learning from the test and learn site in Oswestry. Wider system leadership will continue to be essential to be able to move at pace through delivery phases and expansion into new sites alongside the broader Public Health leadership to the programme overall

7.6 Evaluation of site 1 to be completed along with the development of a fuller evaluation framework to capture clear financial and non-financial benefits through the programme's roll out.

7.7 Detailed handover plan for site 1 to enable the Integration and Transformation Team to exit support with the Integrated Practitioner Team and Community Collaborative self-functioning and able to continue to function, thrive and grow independently in their local area. Detailed Shropshire wide roll out plan developed with an aim to have 5 sites across the County in operation by the end of 23/24. Site 2 at North Shrewsbury due to go live on 20th April 2023, with further reports to be presented to HWBB in due course.

8.Conclusion

20 April 2023

Early Intervention/Prevention – Test & Learn Site, Oswestry

The learning from the test and learn site at Oswestry is being used to inform the development of further roll out across Shropshire with an ambition for the system to sign up to this model and way of working, delivering improved outcomes for infants, children, young people, families and adults in Shropshire. This work will be underpinned by a new Early Intervention and Prevention Strategy that will deliver evidence based transformational programmes for Shropshire residents of all ages.