

**Better Start Bradford Partnership Board Minutes
Thursday 21st June 2018
Bowling Park Primary School, Usher Street**

Present:

Rosie McEachan	Programme Director, Born in Bradford - Chair
Michaela Howell	Programme Director, Better Start Bradford
Sara Keogh	Head of Midwifery, Bradford Teaching Hospitals
Rashida Latif	Community Board member
Kev Taylor	Inspector, West Yorkshire Police
Ruth Hayward	Head of Commissioning (Women and Children, Bradford & Airedale CCGs)
Peter Horner	Voluntary Sector Representative, Bradford District Assembly
Gemma Priestley	Community Board Member
Amanda Braithwaite	Community Board Member
Satnam Singh	Community Board Member
Ludmila Novosjolova	Community Board Member
Zuhair Bashar	Community Board Member, Item 6 onwards

In Attendance

Sarah Benioff	Deputy Director, Strategic Funding, Big Lottery Fund
Samantha Southern	Funding Officer, A Better Start, Big Lottery Fund
Gill Hart	Funding Manager (Investment), Big Lottery Fund
Josie Dickerson	Programme Manager, Better Start Bradford Innovation Hub
Gill Thornton	Head of Programme, Better Start Bradford
Kerry Bennett	Quality Health & Innovation Lead BDCFT (in place of Julia Elliot)
Jo Howes	Programme Change Manager, Better Start Bradford
Lizzie Hughes	Community Engagement Specialist, Better Start Bradford, Item 6 onwards
Jill Duffy	Implementation Manager, Better Start Bradford
Shaista Ahmed	Finance Manager, Better Start Bradford
Sophie Eveleigh	Programme Administrator, Better Start Bradford

Apologies for Absence:

Gwen Balson	Jenny Cryer	Talat Sajawal	Sarah Muckle	Shaheen Khan
Christy Bischoff	Nasim Qureshi	Michael Jameson	Vipin Joshi	Nahed Akhtar
Phillipa Hubbard	Rachel Wild	Sarah Hinton	Shaza Omer	Shirley Brierley
Julia Elliot	Nasreen Khan			

1. Welcome, Introductions and Apologies

Rosie started the meeting by asking everyone to introduce themselves and welcoming the new board members. Rosie also welcomed Sarah and Sam from the Big Lottery Fund.

Michaela also wanted to thank those board members who are stepping down; Nahed, Nasim, Nasreen and Rashida. Rashida thanked the board on behalf of the stepping down members for the opportunity to be involved with the programme.

Rosie spoke about the current GDPR guidelines which has mean that all board members are no longer on the mailing list. Peter added that there is another route according to the data protection rules and that we have legitimate interest for all board members to be automatically signed up.

Action: Sign up all current board members to the newsletter and make a note of the legitimate interest.

Michaela also introduced the rubber ducks in front of everyone on the table which can be used if anyone uses jargon or technical language recognising the different specialisms in the room.

2. Minutes of the Previous Meeting – 17 May 2018

The minutes were accepted as a true and accurate record.

3. Matters Arising actions table

Michaela noted that Lizzie Hughes is leading the neighbourhood support work. This will be brought back to the board once this has been drafted.

A report will come to Board in the near future regarding our response to the revised Public Health service specification for 0-19s.

Presentation from Parents in the Lead is on a future agenda.

Michaela will redraft the buddying scheme and will be in touch regarding pairings.

There is a workshop planned regarding the Innovation Fund and how it will work including incorporating our social value objectives.

4. Declarations of Interest

Rosie declared that she is the co-director of the Innovation Hub. Gemma declared that she is jointly working with HENRY – with the Cook and Eat programme. Ruth declared that she is the main commissioner of maternity services, Sara added that she is the Head of Midwifery.

5. Getting to know you' session

Michaela asked for volunteers for the getting to know you agenda item. Sarah asked what the section was for and Michaela explained the section allows us to get a greater understanding of what each member of the board brings to the table and it allows encourages openness and sharing. Action for Michaela to follow up the getting to know you segment and identify those that haven't completed it yet.

6. Annual update – Innovation Hub

Presentation by Josie, the presentation covered the objectives for the next year and evaluation plans for the project.

Josie explained that they use the Early Intervention Foundation's evidence ratings, level 4 means strong evidence base, evaluated in more than one way, randomised control and shows

benefit, level 3 is for a short-term positive impact from at least one high-quality evaluation, level 2 is a promise of evidence and showing some benefit that cannot be assumed to be unintentional and NL2 is the level below level 2.

She explained where the projects sit on the ratings and how we are trying to produce additional evidence to help the projects move up the ratings. For some projects, we are able to do more than that through using the cohort study and demonstrate effectiveness, if the project is able to recruit the numbers needed and is delivered as it is meant to be.

She also reported that Born in Bradford had hosted an international conference recently of child health researchers who were really excited about the work we're doing.

Michaela thanked Josie for a really clear presentation and Sarah asked Josie what the international colleagues were particularly interested in. Josie explained that other researchers do not often work with local partners in this way and it is one of the first models of working like this in the world.

7. End of Contract Review for HENRY

Jill started by introducing HENRY, and explained that, since HENRY started, the restructure in children's centres and another one that is ongoing has had a serious impact on the project. The restructure has affected the targets but overall we are pleased with what they have achieved.

She presented three options to the Board. One is to decommission. The impact of decommissioning is losing the ability to learn more from the project both pre and post evaluation and would reduce the provision in the area. The second option to consider is to continue the project with the existing budget. HENRY has made changes to work with schools and the voluntary sector but they still have issues with capacity given the changing context. The final option puts £39,000 into the project to recruit more staff to run engagement activities that encourage people to get into the programme. Rosie asked if the figures are based on a more realistic recruitment target. Josie replied that some of the courses did not run which is why the recruitment figures are impacted rather than lack of recruitment. Gill Thornton asked if the impact of the new family hubs had been looked into and Talat added via email that he thought HENRY would still be funded as part of the core offer if we stopped funding. Jill and Jo noted that a lot of things are still up in the air so Children's Services' core offer isn't set yet but HENRY have provided a paper with their assumptions. Rashida understood that the project lost lots of facilitators but the restructure impacted delivery.

Vipin, also via email, said that he was happy to vote for option 3 to protect the project against the cuts. Michaela explained that the additional money could come from their own year 10 allocation. Rosie asked the board if the extra money made the board feel more confident that it would achieve the targets. Jo shared that the Better Start Bradford engagement team and national HENRY findings are that the engagement activities did lead people into the 8 week programme.

Gemma spoke about her personal experience with HENRY and felt that HENRY changed her life during her 1:1 sessions. Gemma said that she loved HENRY and that it changed the whole family for the better. Sarah said that she was really happy that Gemma shared her experience and thanked her for sharing. The parental experience is important to remember and bring to the board. Gemma is also helping make an allergy friendly programme and Gill added the HENRY champions are past attendees and they also help with recruitment.

Josie explained that whether the board chose option three or two, that the model is delivered the same, the only difference being that option 3 affects the engagement. Jill added that option

3 also reduced the risk around recruitment and would bring in more capacity to reduce that risk.

Decision: To accept the recommendations in the report, including the increase in the budget.

8. End of contract review for the Personalised Midwifery pilot

Jill started by explaining that the Personalised Midwifery pilot has been testing continuity of care in midwifery. It has been operating with a broader context that has shifted since the pilot started and there is now a national push towards the continuity model. This project has tested continuity in antenatal and post-natal care but not during the birth. Part of government transformation plans around maternity, is that it is a requirement, a national mandate, to have continuity of care covering antenatal, birth and post-natal.

The three options proposed were, first to decommission the project and take the learning at this moment in time which we can use to work with partners and help to shape what things could look like under transformation. The second option is to continue with the model that we have but start to cascade what we have learnt with other midwifery teams in BSB area and look at other adaptations to broaden out the model. The final option is to bring in the birth element into the model, in addition to cascading learning to other teams and thus bring us in line with the national direction of travel.

The Innovation Hub mentioned that there is evidence of burn out for the midwives in full continuity models and we do not know if all 3 parts (antenatal, birth and postnatal) make the continuity effective or whether the elements we include currently are the most effective. Our outcomes focus on maternal mental health but we did not get enough data to identify any impact. There is qualitative work showing that women in this project were more satisfied with their care and the midwives had higher levels of satisfaction and better workloads. The key components are caseload size, flexible working, longer appointment times, and admin and maternity support were important to the midwives.

Rosie firstly asked for the commissioner's point of view and Ruth shared that the government requirement for continuity of care will eventually be 100% of women (including birth) but this will be done through incremental raises by 20% per year. Ruth's opinion was that the second option is not the best option as they may have to redesign service the service around our project. She also added that national pilots had tried to get the initial 20% continuity figure but could not achieve it. Better Start has helped our region get close to that figure and our way of working will help them design the way forward.

Jill then ran through the risks at the request of the board. With option one we would lose a significant amount of influence and the ability to shape the transformation agenda. On option two we could lose some influence but we would still be involved in what is happening and we would still be involved with our partners around transformation in the district. We would, however, be working towards evaluating something that is not what will be used in the future. We could learn and cascade the learning but that would be slightly out of step. There is a risk that we will invest in a model that is not taken up by the government and health service. The final option increases the risk of burn out from midwives and it brings its own operational challenges. There are ways to reduce the burn out but it is a risk. Josie queried the value of the birth element and the research may not support its inclusion. Sara responded that the evidence shows that knowing your midwife adds confidence and increases the chances of normal birth without intervention.

Michaela noted that there are tensions in the debate with the need for us to rely on evidence as part of the programme, but also to respond to the local context. She also added that the Finance & Audit sub-committee looked at the proposals and requested that a conversation be

had with the Trust about their management fees and overheads and whether some of this could be moved into direct delivery.

Peter asked what is the added value to BSB is if we are funding the model already (if we chose option three). Jo answered that we have the ability to learn quickly because our BSB women will be the first 20% and will eventually be part of the journey. Gill added that the district's model will be influenced by what we do and so we need to understand what the benefits are to the babies and which option benefits the babies.

Ludmila shared her experience, which is that a personalised midwifery approach is crucial to new families especially those that do not have family close by. Amanda added that for her first two births she had the same midwives and felt confident and ready. For her third child she was an older mum and did not feel as confident and feels strongly not necessarily about the birth element but about the continuous care.

Gill Hart said that option three would mean we will need to identify which part of the service is enhanced and funded from the programme. Michaela added that the support worker and the administrator will still be part of the enhanced service.

Peter added that the board need reassurance that the money would not just disappear into the hospital. Ruth responded that it has to be delivered with no change to money but the BSB enhanced funding allows for the support. Talat via email also had concerns over sustainability and Gemma asked whether we could stop the current provision and use the learning from what we have. Rosie noted that we understand the policy context and the board would need to decide the timings for any transition plan.

Ruth suggested that Local Maternity System and CCGs are included in any discussions if moving forward. Rosie asked whether the board make a decision today or whether they could come back to it. Michaela said we need to make a decision today as the current contract is coming to an end. Ruth asked what point the team would stop recruiting women and Rosie said they would carry on as they are for as long as they can for data and evaluation purposes. Jo said they'd need to consider the staffing and set a timeline for when they could move into the new model. Rosie added we would need a working group.

Sara left the room for the vote on the options.

Decision: The majority decided in favour of the third option and asked for a detailed report on the model in 6 months' time and agreed an 8 month transition period.

9. Finance

The Finance & Audit sub-committee have considered the accounts in detail which Shaista presented. She commented on the areas where there are variances and explained why some of the projects were not spending their allocation. The board were reminded that our tender process invites the applicants to give us a budget but that it is refined after award of contract. Gill added that regarding the Better Place capital there is a meeting this afternoon to discuss this financial year.

Rosie queried the Area Wellbeing survey. Gill and Josie have looked at ethnographic research and want to understand the community better such as who receives the projects and what differences bring to that consideration. There is a provision potentially in year 7 to redo the wellbeing survey.

The People in the Lead national project gave us a baseline for how the community feels about the programme and engagement but the workforce part did not get enough responses. Michaela asked that we invite the Board to the event feeding back the results of the community survey.

Rosie thanked Shaista for the budgets and asked the Board to note and accept the accounts.
All agreed.

10. Information item

Michaela congratulated everyone for all their hard work with the programme and for their contributions towards our positive feedback from the Big Lottery Fund. The board have played a huge part in this feedback and we will be organising a celebration. Ruth added that the board is easy to attend and take part in because everything is well prepared.

Rosie thanked everyone for attending and for getting through a packed agenda. Michaela thanked Rosie for chairing.

11. Date of next meeting

The next meeting is on Thursday 19 July 2018 at the Mayfield Centre, starting at 5.30 pm.
