## Cwm Taf Well-being Objectives -Delivery plan - Healthy People



### **Update on Progress**

Despite a really challenging time throughout the pandemic, there has been significant progress on this work stream, due to dedicated resources to support this work both from Welsh Government and the Prevention and Early Years grant to Health Boards.

#### **Vulnerability Profiling**

The purpose of this programme of work is to enable information sharing between partner organisations to identify pregnant women and children who would benefit from early interventions to prevent poor outcomes from them and their children. This is required for safeguarding purposes and this project extends this principle to all pregnant women and children. The scope was originally from preconception to age 2, that is the First 1000 days of life, but has been extended to age seven to ensure that profiles are developed that promote school readiness and transition into and through the foundation phase of education. Progress to date is summarised below:

- Data fields of interest identified by multi agency partners, including all LAs.
- Information sharing protocols signed by CTMUHB, RCTCBC and South Wales Police
- Early win includes electronic transfer of birth data from the Health Board to the Council which was manually input from published pdf documents previously, risking errors.
- Swansea University engaged as a key partner using SAIL (Secure anonymised information linkage). This work has included an evidence search for risk factors associated with our agreed priorities to confirm that the data field selected were correct:
  - low birth weight,
  - being taken into care,
  - subject to adverse childhood experience(s) and
  - school readiness
- In addition Swansea University has used SAIL to verify and check the outcomes of children from 2000 across RCT and Wales by linking these fields along with outcomes fror children. This will enable weighting of the risk factors by importance to prioritise action locally.
- Qualitative research has been undertaken by EMPOVA funded by the PSB to gain the views of families and professionals in sharing data across organisations to inform future practice and confirm risk factors as seen by a range of partners in their work. This research was particularly challenging during the pandemic. Responses were received from 96 professionals a broad range of agencies including NHS, Local Authorities, third sector, FRS, police and Welsh Government. In addition semi structured interviews were undertaken with 13 senior managers. Families were engaged through online surveys and promoted by key professionals. There were 209 responses with 169 fully completed. The findings suggest that the public agree that information sharing between agencies providing support and services is acceptable. However, in common with professionals

- who took part in this study there was recognition by the members of the public who completed the survey of the importance of personal rights and privacy and further comments highlighting that it is much better if parents agree for information to be shared.
- In addition to the above work, the project attracted KESS2 European funding following a successful application between CTMUHB and Swansea University. This enabled a Masters programme student to be employed to specifically identify where vulnerable families were located geographically to compared against the financial distribution to the more deprived areas provided by Families First. This work is near completion and evidence suggests that there as many vulnerable families living outside families first areas as inside. This indicates a potential for more intelligent targeting of anti-poverty funding.

#### **CHOICE Pilot**

When this project was initiated Local Authorities in Cwm Taf Morgannwg had among the highest numbers of babies taken into care at birth or before the age of 2 years, with associated poorer outcomes for both the parents and children along with associated costs to the LAs. The most important risk factors for going into care at this stage are mothers with poor mental health, victims of domestic abuse, misusing substances or having previously had a baby taken into care. This pilot aims to promote contraceptive choice to these women to prevent unplanned pregnancies. Progress to date is summarised below:

- Research was carried out with focus groups involving women and their partners who use services for substance misuse, domestic violence, the reflect programme for those who have had babies taken into care. The feedback was that women found it difficult to access contraception, with getting GP appointments and not knowing where family planning services were on different days. The stressful nature of their lives meant that they did not pursue this further.
- Prevention and Early Years funding was allocated to fund a pilot service model with a small team of four sexual health nurses to provide an
  outreach service for women in these risk groups, with referral from the services they use, as well as maternity, health visiting and pregnancy
  termination services. The service promotes and provides long acting reversible contraception as well as providing screening for sexually
  transmitted diseases and cervical cancer.
- The service was established in 2020 and went live in September 2020. Early uptake is encouraging having 344 referrals between September and June. Rhondda= 36, Cynon= 34, Taf= 5, Merthyr= 106, Bridgend= 117. The highest number of referrals have been received for clients living within the Merthyr/Cynon area; 41%; followed by Bridgend; 33% and Rhondda/Taf; 26%.
- Referrers information: Barnardo's/ Reflect= 18, CASH= 32, YOT=6, Domestic Abuse= 31, Drug & Alcohol= 95' Education= 11, Family Health and Wellbeing Programme= 1, Mental Health Services= 2 Integrated Autism Services= 1 Welsh Ambulance Services- 1 Health visitors= 8 Maternity= 98 Housing & Homelessness= 10 Youth Partnership= 8 Body wise/ PAS= 19
- Of the referrals clients have received: 170 Long Acting Reversible Contraception, 121 Sexual Health Screenings, 20 Cervical Smears 8 requiring Direct referrals to specialist colposcopy services

- Feedback from women who did not take up LARC: 8 moved out of area, 6, no contact, 4 pregnant, 2 sterilization, 2 deceased, 2 in prison, 14 declined LARC but 10 had STO screening and 3 cervical smears
- Has engagement with the CHOICE Project benefited your service users?

'Yes absolutely, fast and thorough services and women report that they know where to go now and who to call. Choice is a non-judgemental one-stop shop that is breaking down barriers for the women who need it the most'

'Service users who may not have engaged previously, have had access to sexual health and contraception. We have had more clients who have requested a referral to the project as they have heard positive feedback'

• The CHOICE team have engaged with extremely vulnerable clients including individuals that were homeless, drug users, sex workers, those experiencing severe anxiety, depression, multiple personality disorders, clients that had been the victims of grooming and vulnerable young people under the age of 16.

## **Childhood Obesity:**

A number of key areas of service development are now coming to fruition to address this important issue:

- The Henry Programme has been commissioned, utilising Prevention and Early Years grant funding. This is a franchised service where locally employed staff will be trained to deliver the programme to families of children up to the age of five. This 'HENRY approach' brings together support for parenting efficacy, family emotional wellbeing and behaviour change with information about nutrition, physical activity, and oral health. The programme will commence in September, initially online, but with individual and groups as Covid-19 restrictions allow.
- Public Health Wales is also funding the development of targeted services for children and families up to seven years, with support from Healthy Weight Healthy Wales grant funding. Three pilot areas across Wales have been selected, including Merthyr Tydfil. This will enable a tailored programme to be developed with the involvement of local families to meet local need.
- In addition Jamjar have been commissioned to delivered family social media campaign, survey 400 families to co-produce content.

Well-being Objective 2.1a	The first 1000 days (F1000D)
Lead Officer	Angela Jones
Immediate step: 2.1a	
Why do we need to do it?	Information shows a need

To be informed by Well-being plan, Well-being and any other Assessments and Future Trends	<ul> <li>To reduce high number of Children Looked After (CLA), particularly in 0-2 years.</li> <li>To reduce high number of vulnerable people of child bearing age/pregnant/parents.</li> <li>To break the cycle of vulnerability through exposure of children to ACEs.</li> <li>To improve school readiness of children.</li> <li>To reduce high levels of obesity in children aged 4-5 years and dental caries.</li> <li>To target resources more effectively to facilitate early identification of need, early intervention and prevention to improve outcomes.</li> </ul>	
What difference will delivering this Objective make to the people and communities in Cwm Taf?	<ul> <li>The Outcomes that will demonstrate a difference are</li> <li>Effective sharing of information across organisations on risk factors for Early Years vulnerability</li> <li>Improving health and well-being for pregnant women and their infants</li> <li>Reducing the number of CLA</li> <li>Reducing exposure to ACEs</li> <li>Mitigating and reducing the impact of exposure to ACEs</li> <li>Improving school readiness of children</li> </ul>	
What are the quick wins that the Partnership can complete in the first year?	<ul> <li>Agree an Information Sharing Protocol (ISP) to replace current Data Disclosure Agreements (DDA's) to share evidence based risk factors to target early identification, early intervention and prevention to improve outcomes.</li> <li>To target more effectively vulnerable women to prevent unplanned pregnancies through promotion and easy access to long acting reversible contraception (LARC)</li> </ul>	

	<ul> <li>Reviewing sex and relationships education (SRE) and personal social education (PSE) in secondary school. To focus on the importance health and well-being</li> </ul>
	prior to conception for males and females.
	Other actions are
	<ul> <li>Identify and implement effective targeted support to vulnerable women and their partners during pregnancy</li> </ul>
	<ul> <li>Identify and implement effective targeted support for vulnerable families during early parenthood; to mothers, partners and their infants</li> </ul>
Who will be involved in contributing towards this Objective?	<ul> <li>PSB to agree actions, priorities and sign off InformationSharing Protocols</li> <li>Welsh Government to support the co-construction of the early years system and funding flexibility of relevant grants</li> </ul>
This will include Cwm Taf PSB partners, people and communities, and new contributors who can help	<ul> <li>Health, Local Authorities, Education, Sexual Health Advisory Board, Public Health Team to directly deliver or commission services</li> </ul>
	<ul> <li>Communities and target groups being involved in the design of services to tailor delivery to best meet their needs</li> </ul>
	<ul> <li>All stakeholders who support vulnerable people e.g. probation, police, Health Board, schools, local authorities, third sector</li> </ul>
How does this Objective also contribute to the	Support to vulnerable people and families will help address issues of loneliness
delivery of another Cwm Taf well-being objective?	and isolation (Cross-cutting Objective).
	Potential to pilot interventions in Community Zone areas (Objective 1.1).
	<ul> <li>Targeting of support to vulnerable people could include access to training skills,</li> </ul>
	volunteering and employment (Objective 3.1)
How does this Objective align with the delivery of	
other local or national plans or strategies?	Pre-conception to First 1000 days; Systems Group
	Prosperity for All
	Health Child Wales Programme
	All Wales Maternity Strategy
	Social Services and Well-being Act, Area Plan
	Welsh Government Early Years Co-construction – Partnership with Cwm Taf

## How have you considered the Sustainable Development principles i.e. five ways of working in delivering this objective:

- Thinking and planning for the Long term
- Preventing problems before they happen
- Integrating with other strategies
- Collaborating with others
- Involving people and communities

# How will work towards this Objective contribute towards the seven national well-being goals:

- A prosperous Wales
- A resilient Wales
- A healthier Wales
- A more equal Wales
- A Wales of more cohesive communities
- A Wales of vibrant culture and thriving Welsh language
- A globally responsible Wales

- Long Term: breaking the cycle of family vulnerability through identifying and reducing exposure to ACEs
- **Prevention:** identifying early years vulnerability risk factors to effectively target preventative action
- Integration: actively involving all partners of the PSB;
- Collaboration: Pre-conception to First 1000 days; Systems Group linked to the Children and Young People's strategic group, delivering the area plan: integrated in to the Welsh Government Early Years Co-construction – Partnership with Cwm Taf and Bridgend PSB
- **Involvement:** target groups will be involved with the development of effective interventions e.g development of the CHOICE programme.
- A prosperous Wales the support will include targeting to the most vulnerable women, children, families, including linking in to additional skills, volunteering and employment to reduce poverty, the effects of poverty and support prosperity
- A resilient Wales targeting early identification, intervention, prevention and support to and with vulnerable groups to promote their resilience to start/expand their family supporting their children to achieve their potential in the first 1000 days.
- A healthier Wales promoting the development of healthy children from preconception to age 2 years
- A more equal Wales directly addressing inequalities by targeting vulnerable people with the poorest outcomes
- A Wales of more cohesive communities providing knowledge and skills to communities to prevent ACEs and help nurture children in a community setting.
- A Wales of vibrant culture and thriving Welsh language using local cultural influences in designing interventions including play and music and the provision of services through the medium of Welsh

A globally responsible Wales – providing services as close to the home as
possible to reduce the need for transport and through the sustainable use of
the local environment.

# Actions that will deliver this Objective 2021-22

Actions (from first year plan)		Milestones		Delivery	Lead
Ref	Description	Ref	Description	date	Leau
1	System-wide approach		1. Sharing the system mapping with the Cwm Taf and Bridgend PSB, Regional Partnership Board, professionals, community hubs, service users to:  a. promote better understanding of the complexity of pathways and determine the governance of planning and service delivery  b. initiate innovative ways to simplify the system  c. promote easier access to service  d. Ensure effective governance  2.	Jun – Nov 2018 – still ongoing 2021	Angela Jones/Zoe Lancelot ICE Sub Group

Actions (from first year plan)		Milestones		Delivery	Lead
Ref	Description	Ref	Description	date	
2	Vulnerability Profiling Agree an Information Sharing Protocol (ISP) and implement to:  • Early identification of risk factors for vulnerability • to target action for early		<ol> <li>Complete Vulnerability Profiling workstream and share findings with PSB and Welsh Government.</li> <li>Publish work for wider dissemination</li> </ol>	March 2021-22	Angela Jones with PSB leads for services with support from the CTM/WG Early Years Strategic Group
	<ul><li>intervention/prevention</li><li>identify appropriate outcome measures</li></ul>			March 2021-22	
3	Preventing unplanned pregnancies To target more effectively vulnerable women to prevent unplanned pregnancies through promotion and easy access to long acting reversible contraception (LARC)		<ol> <li>Identify and implement appropriate contraceptive outreach, working with "trusted key workers" in targeted services, having regard to current good practice by engaging partners working with priority groups.</li> <li>Continue to develop the CHIOCE programme and maximise referral pathways</li> <li>Develop a range of performance measures and evaluate effectiveness and acceptability of the service.</li> <li>Identify opportunities for sustained</li> </ol>	March 2021-22 March	Sexual Health Advisory Board with LA Children's Services All PSB Partners
			funding. 5.	2021-22	

Actions Miles (from first year plan)		Milest	Milestones		Lead
Ref	Description	Ref	Description	date	
				March 2021-23	
4	Increasing School Readiness		Early identification of early years     vulnerability risk factors for lower school readiness to effectively target		Midwives/Health Visitors
			preventative action 2. Promote attachment of infant:parents		Health Visitors
			3. Optimise support/referral to interventions to support healthy growth, play and development through the		Health Visitors
			Healthy Child Wales Programme		Speech and
			4. Early identification of speech and language: timing of health visitor		Language Therapists
			assessment		Health Visitors,
			5. Engagement and knowledge of parents with 'school readiness'		schools, early years settings
			6. Review transition in to schools		
5	Improving Education		1. Undertake review to include content,		Sexual Health
	Reviewing sex and relationships		delivery, timing of delivery and		Advisory Board,
	education (SRE) and personal social		uptake by vulnerable groups and		School Nurses and
	education (PSE) in secondary school. To		having regard to the		Schools
	focus on the importance healthy		recommendations in <i>The Future of</i>		
	relationships, health and well-being		the Sex and Relationships Education		
	prior to conception for males and		Curriculum in Wales		
	females.		Recommendations to be implemented		

## Information that will help to monitor the delivery of this Objective

# **Quantitative Evidence – including Performance Indicators**

PI ref	Local/ National	PI description	Direction of travel	Frequency	Responsible partner
	Local and	Percentage of vulnerable clients with active LARC (data development	Increase		Various
	National	need)			
	Local	Risk factors in pregnancy	Decrease		Midwives (MITS)
	Local and	Low Birth Weight rates	Decrease		Midwives (MITS)
	National				
	Local and	Initiation of Breastfeeding	Increase		Midwives
	National				
	Local and	Breastfeeding at 6 months	Increase		Health Visitors
	National				
	Local and	Children Looked After at Birth, Year 1 and Year 2	Decrease		Children's' Services
	National				
	Local and	Children meeting their development goals e.g. weight, language	Increase		Health Visitors
	National	development, physical development			

Data and targets will be	e required for	all identified	<b>Performance</b>	<b>Indicators</b>
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## **Qualitative Evidence**

Activity	What will/does it demonstrate?	When/how often
		will this be
		available?

# Risks that will affect the delivery of this Objective

Risk	Ref to existing action above, if relevant	Other mitigating actions if required
If a Information Sharing Protocol is not agreed then		
information to target services to the most vulnerable		
people cannot be implemented effectively		
Ifthen		

# Support required to progress this Objective, including any associated financial contributions

From PSB support Team	In respect of engagement/involvement	In respect of data or analyses