

## Start Well - Actions & Measures

High Level Action for year 1	Measures	Outcomes	Lead	Partner organisations
<b>Priority Area: We will work with our partners to help children and young people (particularly the most vulnerable) to reach their full potential</b>				
Targeted support to vulnerable families over winter 2020/21	% of families engaged with the family support service (FSS) achieving a successful outcome Note: FSS is a demand led service responding to families in need of additional support. No targets are set.	FSS performance year April 20- March 21. Successful outcomes achieved = <b>76%</b>	Gareth Morgan, Children's Services	Children's Services, Public Health and Localities, BC CCG BHT OHFT
Focus to recover backlogs and implement a Single Point of Access into Community Paediatrics through a Multi-disciplinary Team approach.	Review current waiting lists and ensure appropriate interventions for all children being directed to the most appropriate service.  Number of children directed to the right pathway for assessment and diagnosis of health needs.	Delivering continuity of care for Children Looked After.	Deputy Divisional Director for CYP	BHT
For the academic year 2020-21, all Providers in Partnership groups (PiPs) whose cohort is made up of a high percentage of vulnerable children, will focus on a parental engagement project to ensure all families, including the most vulnerable are supported to promote family health and well-being.	Number of PiPs that are/have undertaken a parental engagement project (x number out of y PiPs)  % of children and young people accessing Kooth virtually	All PiPs (a total of 141 settings) undertook bespoke parental engagement projects to meet identified need in the PiPs parent cohort. All had a focus on support to the most vulnerable families during the various periods of national restrictions, beginning in March 2020 and continuing throughout this academic year. Each PiP identified a key area of need and devised a project to address this. As an example, improving communication & language and interaction, the outcome of which was increased participation from parents in story telling with their children and access to a larger variety of books for vulnerable families.	Sue Bayliss, Early Years Manager	Children's Services, BC

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	(Kooth is a digital mental health & wellbeing company)	93.2% of the young people who accessed the service reported that the service had helped	Sue Hadwin	OHFT
	% of schools accessing the CAMHS link worker roles for all schools	All schools receive termly updates and resources	Sue Hadwin	OHFT
	Implementation of the keyworker trailblazer to meet the needs of the most complex families	Reduced admissions and shorter hospital stays. Evidence of collaboratively created enhanced packages of community care	Sue Hadwin	OHFT
	Support wellbeing of families by engaging parents at virtual coffee mornings	Early Years' Service (EYS) supported settings to engage with parents in order to provide support to vulnerable families that felt isolated or did not have a support network in place. For example, parents were invited to virtual coffee mornings, where less confident families were paired up with more confident parents. Relationships were supported to develop.	Sue Bayliss, Early Years Manager	Children's Services, BC
	Activities aimed at increasing family's level of confidence in supporting their children who were learning at home. For example, Learning at Home Cards created by EYS (cascaded weekly from May 2020) were shared across all Early Years provision as a tool to build parental engagement and support early years children's play based learning at home.	128 settings supported 1175 parents to use the home learning cards, which were shared weekly. Parents engaged in increasing the range of vocabulary they used with children during play-based activities. Children's wellbeing was supported and play based learning helped parents gain an understanding in how children learn. This enabled them to support their child's learning using daily routines, and playful activities, and supported parental confidence and wellbeing.	Sue Bayliss, Early Years Manager	Children's Services, BC
	School readiness – Increase % of children 'ready for school' by introducing a 3.5-year development review in Bucks.	Challenging the current two-year framework will improve children's readiness to learn and preparation for school.	Deputy Divisional Director for CYP	BHT
Learning Disability team to introduce a Single Point of Access service in	Promote early identification of children requiring support, continuity of care, child independence,	Deputy Divisional	BHT	



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Review asthma admissions and pathways to see if children are affected by second-hand smoke in the home to try and reduce readmission	<p>Ongoing audits could include seeking information on effect of second-hand smoke.</p> <p>Commissioning Support Unit to review what is available on smoking status of parent from children that have been admitted.</p>	Health Visitors and Family Nurse Partnership visits.	<p>Deputy Divisional Director for CYP</p> <p>Tony Kinsella</p>	<p>BHT</p> <p>CCG</p>
Children and Young People's Substance Misuse Service is able to flex provision according to the prevailing circumstances at the time to provide a range of harm reduction	<p>Number of children and young people accessed substance misuse support</p> <p>Maintaining multiagency communications (social care, youth offending service, child and adolescent mental health service) with regard high risk young people</p> <p>Considerations for safe face-to-face at Round house, schools, designated areas</p> <p>Improved digital offer to young people.</p>	The service is currently enhancing its online website offer to include news feed and potentially chat function		
<b>Priority Area: With our partners we will make sure we provide support to children and families with mental health needs</b>				
Implementation of multiagency mental health plans to address vulnerable children and young people	<p>Number of mental health plans implemented in 2021-22</p> <p>Neurodevelopmental (ND) pathway– continuation of pathway and system collaboration review to address the process gaps and promote joined up multi-agency working</p>	<p>% of multi- agency plans completed</p> <p>Improved access times for diagnosis and treatment, continuity of care and referrals for children and families to other services through collaboration.</p>	<p>Gareth Morgan, BC</p> <p>Deputy Divisional Director for CYP</p>	<p>Children's Services, BC</p> <p>Public Health, BC</p> <p>OHFT</p> <p>BHT</p> <p>CCG</p> <p>BHT</p>

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	Review the pathway for attention deficit hyperactivity disorder (ADHD) /autistic spectrum disorder (ASD).	Improve care provided for children with ADH/ASD.	Head of service CAMHS ,Sue Hadwin  Sally Parkinson Jack Workman	OHFT  CCG
Providing holistic family support for a range of issues including mental health	Family Support Service Performance year April 20- March 21. Investigations underway to identify if it is possible to extract data relating to incidences of mental health within families receiving support. Similarly, at level 2, Youth Workers provide support on a 1:1 basis for young people, some of which relate to emerging mental health issues. Enquiries in hand to determine the viability of reporting on this to inform the Board.		Gareth Morgan	Children's Services, BC
Expansion of mental health support team (MHST) offer – national target of 25% coverage by 23/24	Expansion of MHST in Bucks from 32 to 47 schools. Formal launch to additional schools on 3/3/21. Bucks now at 29% county coverage	Improved awareness of mental health within the school setting  Additional young people accessing support for their low to moderate mental health needs	Sally Parkinson / Jack Workman  Sue Hadwin	Integrated Commissioning Buckinghamshire CCG  OHFT
Achieve children and young people's mental health national access target	20/21 access target is 35% of population prevalence. Actual end of Q3 performance 40% in Bucks	Year on year increase in numbers of young people accessing mental health services in line with the national target	Sally Parkinson / Jack Workman Sue Hadwin	Integrated commissioning / OHFT / Buckinghamshire CCG



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Support schools to implement the new compulsory Relationships, Sex and Health Education (RSHE) curriculum from September 2021	Number of schools participating in RSHE training  Number of schools taking part in Aspire/DfE Wellbeing for Education return programme	Children receive high quality RSHE curriculum to support their emotional health and wellbeing	Carol Stottor	Public Health Children's Services Schools
<b>Priority Area: As part of our COVID-19 recovery work, resources will be targeted appropriately at those children and families whose circumstances have been affected</b>				
Delivery of resilience training and peer support programmes to schools	50 staff to be offered resilience training sessions in 2021-22  14 peer support programmes to be put in place in 2021-22	Penn-based resilience for schools training programme commissioned and training timetable agreed and available to schools  Peer support programme commissioned and available for schools	Anita Hazel	Children's Services, BC Public Health, BC
Self-help resources on Child and Adolescent Mental Health Service (CAMHS) website (anxiety, depression, sleep)	% of the number of times the CAMHS and Kooth site is accessed (an average of 306 times a month in 20/21)		Sue Hadwin	OHFT
Contribute towards the emotional health and wellbeing programme being provided via ASPIRE	Number of training sessions provided by CAMHS staff		Sue Hadwin	OHFT
Ensure vulnerable pupils have access to IT equipment to assist their online learning	<u>Infant devices</u> 1,136 devices (£113,600) and 226 sims (£4,520) allocated to schools  <u>All age devices</u> 442 devices (£44,200) and 104 sims (£2,080) allocated to schools	475 devices (£36,279) & 7 sims £105) claimed to date for distribution to infant class pupils (Reception - Year 2)  284 devices (£26,380) and 41 sims (£820) claimed for distribution to pupils across all age ranges who could not access home learning but were outside of DfE parameters <b>Note:</b> The schools that did not take up the scheme may have already purchased / lent devices to pupils.	Gareth Drawmer	Rothschild Foundation  Children's Services, BC
Support schools to provide effective online learning to its pupils	Provide all schools access to resources in a secure manner.	Schools have accessed resources. Ofsted monitoring visits have identified remote	Gareth Drawmer	Children's Services, BC

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		learning as secure.		
Identify the emerging needs of families in order to provide them with the right support at the right time	Use baseline (demand) for services for the past 12 months.  Detailed analysis of demand profiles, risks and needs is undertaken by the service and can be reported at bi-annual intervals, including service responses.	Understanding demand as part of COVID-19 recovery, will only develop as society re-opens and evidence emerges.  FSS has both the capacity to respond to anticipated fluctuations in demand volume and the flexibility/skills to respond effectively to emerging needs as the shape of recovery becomes apparent.	Gareth Morgan	Children's Services, BC
Ensure vulnerable families get access to food vouchers	Development of a scheme for schools to access vouchers for Free School Meals (FSM) families during the period of restricted school opening.	84 schools placed at least 1 order for term time vouchers. Issued 11,322 vouchers at £15 each - £169,830 which was recovered from schools. <b>Note:</b> Take up figures do not reflect families that went without as other subsequent schemes were established therefore schools may have opted to use the national scheme or their own caterers.	Gareth Drawmer	Children's Services, BC
Support the safe return of all pupils to school and the effective rollout of Lateral Flow Testing	Regular meetings of representative group of head teachers and professionals to support testing setup.	Best practice shared with schools Learning from university sector applied to schools Early mitigation of issues No issues raised	Gareth Drawmer	Public Health & Children's Services, BC Bucks New University
Delivery of Active Movement pilot programme in schools to reduce sedentary behaviour	Number of schools engaged in and delivering Active Movement	4 schools started 12-month pilot in Sept 20 2 remaining schools start postponed to September 21 due to COVID-19	Sarah Preston	Public Health, BC
<b>Priority Area: Working with early years providers, Health Visitors and schools we will make sure that the individual needs of children are identified at the earliest opportunity. Ensuring we can collectively respond at the right time. We will carry out targeted work with our settings and schools in order to improve outcomes and make a difference.</b>				
A robust Continual Professional Development (CPD) offer delivered for all Buckinghamshire settings to support them to recognise children's individual needs.	Number of schools which had the CPD offer delivered to them in 2021-22		Sue Bayliss	Children's Services, BC CCG Public Health, BC

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<p>Our early years team will also work with managers to ensure that training is updated for all early years practitioners to ensure they have the knowledge and skills to identify, and effectively support, all vulnerable children and those with special educational needs and disabilities (SEND) within their setting.</p> <p>Through a variety of strategies, including weekly contact, virtual visits and self-evaluation meetings, advice and guidance is given to early years settings to ensure there is a consistent approach to early identification and intervention for all children, in particularly those who are vulnerable and/or have SEND.</p>	<p>Number of training sessions delivered to early years practitioners in 2021-22</p> <p>Number of early interventions that were put in place for children in 2021-22</p>			

**Priority Area: We will work with our partners to implement Better Births for all pregnant women and birthing people**

<p>Deliver more personalised, safer care through a variety of strategies including implementation of continuity of carer, better postnatal and perinatal mental health care, multi-professional working.</p>	<p>Improving safety - at least 51% of pregnant women booked on a continuity of carer pathway particularly vulnerable, high risk groups, or those living in areas of social deprivation.</p> <p>Improving prevention - 75% of women from Black, Asian and Minority ethnic groups booked onto a continuity of carer pathway.</p> <p>Reduce stillbirths, neonatal deaths, neonatal brain injury and maternal deaths incrementally towards a 50% reduction by 2025.</p>	<p>Improve health outcomes for pregnant women in areas of high deprivation and for those in Black, Asian and Minority Ethnic (BAME) groups</p> <p>Improving pregnant women's health &amp; wellbeing</p> <p>Improving access to care</p> <p>Improving access to specialist support</p> <p>Provide equity across the County by increasing teams where the need and complexity is greatest</p>	<p>Head of Midwifery (HoM) BHT</p>	<p>BHT CCG BC MVP (maternity voices partnership) Public Health Bucks perinatal mental health team</p>
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	<p>100% of women smoking in pregnancy offered referral to smoking cessation services; have carbon monoxide monitoring at booking, 28 weeks and 36 weeks as a minimum, and reduce number of women smoking at time of birth &lt;6%.</p> <p>Reducing health inequalities - reduce preterm births and optimising care when preterm birth not preventable - 100% of women in pre-term labour given antenatal corticosteroids, 100% of appropriate women in preterm labour given magnesium sulphate for neuro protection, 100% of extreme preterm babies born in a maternity unit with required level of neonatal intensive care</p>			