

Public Document Pack



Health and Wellbeing Board

Wednesday, 15 January 2025 2.00 p.m.
Board Room, Municipal Building, Widnes

S. Young

Chief Executive

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The next meeting of the Committee is on Wednesday, 12 March 2025

**ITEMS TO BE DEALT WITH
IN THE PRESENCE OF THE PRESS AND PUBLIC**

Part I

Item No.	Page No.
1. APOLOGIES FOR ABSENCE	
2. MINUTES OF LAST MEETING	1 - 6
3. ORAL HEALTH	7 - 12
4. INFANT FEEDING	13 - 20
5. UPDATE ON THE PROGRESS MADE ON THE DFE & DHSC FUNDED FAMILY HUB PROGRAMME	21 - 58
6. ADULT SOCIAL CARE ANNUAL REPORT (2023-2024)	59 - 87

HEALTH AND WELLBEING BOARD

At a meeting of the Health and Wellbeing Board on Wednesday, 9 October 2024 at Karalius Suite, Halton Stadium, Widnes

- Present: Councillor Wright (Chair)
 Councillor Ball
 Councillor Woolfall
 I. Baddiley, Public Health
 P. Brown, Cheshire Constabulary
 L. Byrne, Liverpool University Hospitals NHS Foundation Trust,
 D. Nolan, Adult Social Care
 L. Gardner, Warrington & Halton Teaching Hospitals
 S. Patel, Halton, St. Helens & Knowsley Local Pharmaceutical
 Committee
 J. Rosser, Public Health
 K. Stratford, Halton Borough Council
 J. Wallis, Bridgewater Community Healthcare NHS Foundation Trust
- Apologies: Councillor T. McInerney, H. Crampton, A. Leo, W. Longshaw,
 I. Onyia, W. Rourke and S. Yeoman
- Also in attendance: None

Action

HWB10 MINUTES OF LAST MEETING

The Minutes of the meeting held on 10 July 2024 having been circulated were signed as a correct record.

HWB11 SEXUAL HEALTH SERVICES ANNUAL REPORT 2023/24

The Board received a presentation and report from the Assistant Divisional Director of Nursing – Sexual Health and HIV, which provided an overview of the Axess Sexual Health Service Halton Annual Report 2023/24 and a copy of this was also attached to the report.

Axess was the service commissioned by the Council to provide Halton's Integrated Sexual Health Service. The annual report highlighted the service's work and achievements over the past 12 months, key data and benchmarking across all areas of the service, as well as emerging challenges and areas for development.

The presentation outlined the services available across the five local authorities; HIV treatment and care for Wirral and Cheshire West & Chester and partnership working with the Wirral Community Trust to provide senior medical staff for leadership and governance of their sexual

health services, as well as provision of their electronic patient records and laboratory support.

It was noted that services were delivered through three main hubs at Bath Street in Warrington, Widnes Health Resource Centre and Halton Hospital, Runcorn.

The presentation also summarised the following key data:

- number of patients who had accessed the service during 2023-24;
- number of gonorrhoea diagnoses by age group between 2014 and 2023;
- number of new diagnoses of infectious syphilis among England residents accessing services between 2014 and 2023;
- Halton attendances by age;
- Halton positive testings, by age, for chlamydia, gonorrhoea, syphilis and HIV;
- number of implants fitted/renewed in Halton; and
- number of intra uterine contraception's fitted/renewed in Halton.

Members of the Board were informed that the largest age group in the North West of England was those between 50-54 years old and 46% of the total population in Halton were over 45 years.

Members of the Board noted some examples of future aims to improve the service further:

- utilise new opportunities of the Women's Health Hubs to work collaboratively across multiple areas within the Borough;
- continue to grow clinical outreach services and attend events, services and care settings to reach these older age groups;
- continue partnership working with GP and Pharmacy enhanced services; and
- increase 'walk in' access/services at better times i.e. evenings/early mornings.

Following discussions and arising questions from the Board, it was confirmed that :

- The reasons why the take up of the services was lower in Halton was that not only is Halton the smallest area in the region but the service had struggled to engage with schools, education

institutions and GP's and this had impacted on the throughput of services;

- the service undertake a range of procedures/services which included minor surgery, scans and dermatology and all of these would be available at the Widnes Walk-in Centre;
- HIV testing had increased nationally, due to higher rates of gonorrhoea and syphilis across all age ranges; and
- the introduction of the Sexual Health Service at the Widnes Walk-in Centre had been announced on social media.

RESOLVED: That the Board note the contents of the report.

HWB12 WARRINGTON & HALTON INTEGRATION PROGRAMME

The Board received a report and presentation from the Director of Strategy and Partnerships at Warrington and Halton Hospitals on the Warrington and Halton Integration Programme.

It was noted that a £5 million savings target had been set against the Integration Programme by the Integrated Care Board. In order to try and achieve this target, significant opportunities had been identified to improve things for both patients and staff working at the front line. A programme of work had been launched with an aim to deliver integrated and collaborative models of care between Warrington and Halton Hospital NHS Foundation Trust and Bridgewater Community NHS Foundation Trust.

The programme of work contained eight different workstreams and six month deliverables and the details of these were outlined in the presentation.

The presentation also provided a summary of progress to date; a strategic case for change; what the priority services were; and the key next steps which included a draft milestone plan.

RESOLVED: That the Board note the report.

HWB13 JOINT STRATEGIC NEEDS ASSESSMENT

Members of the Board considered a report from the

Deputy Director of Public Health which provided an update on the Joint Strategic Needs Assessment (JSNA).

The Board were updated on the Joint Strategic Needs Assessment (JSNA) which analysed the health needs of the population to inform and guide commissioning of health, well-being and social care services within local authority areas. The JSNA underpinned the Health and Wellbeing Strategy and commissioning plans. The main goal of a JSNA was to assess the health needs of a local population in order to improve the physical and mental health and wellbeing of individuals and communities.

Since the first executive summary of the JSNA in 2012, the approach had continued to receive good feedback from various partnerships and stakeholders. As a consequence, the revised annual summary had used broadly the same approach to provide updated data and information since the previous version.

The report set out the key changes since the previous summary and the developments for the JSNA during 2024/25. It was noted that the process for agreeing and developing a work plan for the remainder of 2024/25 and into 2025/26 would be managed in collaboration with key stakeholders and members of the Health and Wellbeing Board.

Members of the Board were encouraged to share the JSNA within their respective teams.

RESOLVED: That the report be noted and the draft summary document be approved for publication.

HWB14 LONELINESS AND SOCIAL ISOLATION IN HALTON

Members of the Board received a report which provided an overview of the results of the One Halton loneliness survey and the outcome of an insight focus group session, with local people of the Borough.

The report stated that evidence showed that loneliness could increase the risk of mortality by 26% and was a significant factor for poor mental health and physical health. Evidence also showed that it had a strong association to depression, cognitive decline and dementia, in addition to hypertension and cardiovascular disease risk.

Since Spring 2020, loneliness levels in the UK had increased. From October 2020 and February 2021, results

from the Opinions and Lifestyle Survey showed that people's perceptions of being lonely increased to 7.2% in the adult population with the equivalent in Halton being 7.4%.

Halton Borough Council and One Halton (Ageing Well workstream) commissioned a survey to ask local people about their experience with loneliness. A focus group was then set up from a selection of people who responded to the survey to explore the reasons and risk factors for loneliness in Halton.

The report summarised the results and key findings of the survey and focus group, and set out the recommendations for the next steps to help residents of the Borough.

The Board noted that Halton had been committed to tackling the underlying issues of loneliness, as identified in the survey, for some time, including the Halton Loneliness Conference in 2019. The Halton Loneliness Steering Group meets bi-monthly and the next four meetings would focus on the priority themes from the survey results and continue to build on the loneliness action plan.

Lucy Gardner reported that information and communications about this topic had been a challenge in Warrington and Halton, both for professionals and members of the public. Following discussions it was suggested that it might be worth exploring a virtual hub option, similar to the St. Helens model and Sally Yeoman would be able to offer some advice. It was also suggested that access points in public venues be explored as a means of getting information out to the public.

RESOLVED: That the Board note the report and recognise the need for a systemic partnership approach to loneliness in Halton.

HWB15 COST OF LIVING AHEAD OF WINTER

The Board received a report from the Deputy Director of Public Health, which provided an updated on the state of the cost of living crisis compared to last winter and some of the recent policy changes that would impact residents in the coming months.

The report provided an overview on:

- changes compared to last winter;
- fuel price cap changes;

- fuel allowance changes;
- the Autumn Statement;
- the Winter Programme; and
- Government support.

The Board noted the report and echoed the importance of residents accessing the benefits and support entitled to them. The Board were assured that every effort was made to reach as many people in the Borough as possible via public events. Halton Housing Trust also had a dedicated welfare benefits team that support their tenants. It was noted that in the last year 900 people were identified as being eligible for pension credit.

RESOLVED: That the Board:

- 1) Endorse the work taking place in Halton; and
- 2) Note the expected impact of recent policy changes and possible changes following the Autumn Statement.

HWB16 BETTER CARE FUND (BCF) PLAN 2024/25 - QUARTER 1 UPDATE

The Board received a report from the Executive Director – Adult Services, which provided an update on the Quarter 1 Better Care Fund (BCF) Plan 2024/25, following its submission to the National Better Care Fund Team in June 2024.

In line with the national requirements, the quarter 1 report focussed on reporting on the spend and activity funded via the discharge funding allocated to the local authority and NHS Cheshire and Merseyside (Halton Place).

The Board noted that the schemes funded via the discharge funding were:

- Oakmeadow Intermediate Care Beds;
- Reablement Service;
- Halton Intermediate Care and Frailty Services; and
- Halton Integrated Community Equipment Service.

RESOLVED: The Board note the report.

Meeting ended at 3.10 p.m.

REPORT TO:	Health & Wellbeing Board
DATE:	16 January 2025
REPORTING OFFICER:	Director of Public Health
PORTFOLIO:	Health & Wellbeing
SUBJECT:	Oral Health
WARD(S)	All

1.0 PURPOSE OF THE REPORT

1.1 To provide members of the Board with an update on child oral health programmes including planned next steps.

2.0 RECOMMENDATION: That:

- 1) The report be noted; and
- 2) The Board supports ongoing participation in regional and local plans.

3.0 SUPPORTING INFORMATION

3.1 Good oral health is important for children because it supports speech and language development, lets them eat, drink and smile with confidence and helps maintain the space for the eruption of adult teeth. Despite tooth decay being an almost entirely preventable disease, it is still the most common reason for hospital admissions in the 5 to 9-year-old age group¹.

3.2 A study in the North West found that 1 in 4 children had missed days from school because of dental pain and infection with an average of 3 days of school were missed. Almost 4 in 10 children had sleepless nights because of pain². As well as the immediate impacts of poor oral health, decay in baby teeth is a strong predictor of decay in adult teeth.

3.3 Halton has some of the poorest oral health amongst 5 year olds in the North West with over a third (33.9%) of 5 year olds surveyed in 2021/22 had experience of dentinal decay which is significantly higher than the national prevalence of 23.7%. Children living in the most deprived areas almost 3 times as likely to have experience of

¹ [Hospital tooth extractions in 0 to 19 year olds: short statistical commentary 2023 - GOV.UK](#)

² [Health matters: child dental health - GOV.UK](#)

dentinal decay compared with those living in the least deprived areas³.

3.4 Local authorities are responsible for oral health improvement (2012 Health and Social Care Act). An oral health steering group has been established, chaired by Public Health, bringing together partners to focus on opportunities to improve oral health across the life course however this report focusses on actions planned for child oral health improvement. It does not include oral health improvement delivered at 'chair side' as part of NHS commissioned dental practices.

3.5 Existing work includes integration of oral health into the 0-19 programme across both Health Visitors and School Nursing teams.

3.6 Supervised toothbrushing schemes involves children brushing their teeth supervised by staff whilst at school or nursery. Evidence from Scotland has shown that supervised toothbrushing schemes cost approximately £15-17 per child per annum and pay for themselves within three years through improvements in children's oral health and reduced need for dental treatment or the need for dental care under general anaesthetic⁴. This excludes wider societal benefits of children and parents not missing school and/or work. Programmes in nurseries and schools have been rolled out as part of national oral health promotion programmes in Scotland (*Childsmile*) and Wales (*Designed to smile*). In England, the most recent survey of local authorities published in 2023⁵, showed just under half of all local authorities had at least one supervised toothbrushing programme which were predominantly in more deprived areas although the number of sites and children varied widely. A previous supervised toothbrushing scheme across Halton was paused before covid and plans are now underway to reintroduce the scheme.

3.7 The public health team has developed a Halton Supervised Toothbrushing programme, based on national guidance and recently underwent a 'train the trainer' session, delivered by a senior oral health improvement practitioner. Unlike neighbouring areas, who commission oral health improvement teams, Halton is to embed the offer of a supervised toothbrushing programme to early years settings as part of the Halton Healthy Early Years Settings Award to those settings who wish to take part. This helps to ensure that oral health is seen as an integral part of general health. Over time, it is anticipated that the scheme can be rolled out to childminders and schools (up to age 7). Ideally, the scheme is delivered across Halton but will be limited by funding so will work

³ [Oral health survey of 5 year old children 2022 - GOV.UK](#)

⁴ [How to implement toothbrushing programmes for children](#)

⁵ [A national survey of supervised toothbrushing programmes in England | British Dental Journal](#)

with those settings willing to participate in the most deprived areas first.

3.8 The scheme is to be supplemented with funding from NHS Cheshire and Merseyside's 'Beyond Children and Young People's Transformation programme' as part of the 'Core20plus 5' child programme. This 3 year oral health programme includes a supervised toothbrushing scheme targeting children aged 2-7 years living in the 20% most deprived areas of the region. Halton has recently been identified as a 'trail blazer' and current plans are that there will be a regional offer of training as well as a contribution to the costs of consumables to expedite the roll out of the local programme. Schemes will be monitored to ensure effectiveness and improvements in oral health will be expected to follow in subsequent years as the number of children participating in the scheme increases over time.

3.9 Distribution of fluoride toothpaste and toothbrush packs is an evidence informed initiative⁶ that is ongoing in Halton. This has also been supplemented by the regional oral health programme. This year, to date, around 1800 out of 15000 packs have been distributed via to family hubs, libraries, Daresbury Hotel, foodbanks and children in contact with social care including foster care. Packs suitable for children with special educational needs are also due to be delivered to Halton early next year. These will bolster the supervised toothbrushing programme and will increase access to toothbrush and toothpastes to support a wider group.

4.0 **POLICY IMPLICATIONS**

4.1 Local authorities are responsible for oral health improvement (2012 Health and Social Care Act)

Core20plus5 is a national NHS England approach to support the reduction of health inequalities at both national and system level. Oral health is included as an area of focus for children for Integrated Care Board and Integrated Care Partnerships to achieve system change and improve care for children and young people.

4.2 Like many other non-communicable diseases (such as obesity) the prevalence of dental decay follows a socio-economic gradient with those living the most deprived areas suffering from highest levels of tooth decay. It is recognised that an integrated approach is needed to address non-communicable diseases which includes both 'upstream' policy decisions affecting whole populations (i.e. changes to advertising rules or water fluoridation) as well as 'downstream' policies targeting specific communities (e.g.

⁶ [Local authorities improving oral health: commissioning better oral health for children and young people: an evidence-informed toolkit for local authorities](#)

supervised toothbrushing) or individuals to reduce health inequalities.

- 4.3 Limiting action to downstream policies targeting individuals only also suggests that the causes of non-communicable diseases are only due to individual choice. This does not account for the impact of ecological factors or the wider determinants of health. The Halton oral health strategy, which is currently in development, will therefore identify both 'upstream' and 'downstream' opportunities to advocate or introduce new programmes or embed (where appropriate) into existing programmes of work.

5.0 **FINANCIAL IMPLICATIONS**

- 5.1 The scheme is to be funded from the monies within the public health grant allocated to child oral health improvement whilst being supplemented by the regional programme (from 2024 to 2027) to enhance roll out.

- 5.2 At the same time, the Government has committed to rolling out a supervised toothbrushing scheme for 3 to 6 year olds, possibly via breakfast clubs. However, the duration, extent and funding of this programme has not yet been confirmed.

6.0 **IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

6.1 **Improving Health, Promoting Wellbeing and Supporting Greater Independence**

The oral health programmes are evidence informed and cost effective means to improve child oral health as well as supporting good oral health habits to maintain into adulthood.

6.2 **Building a Strong, Sustainable Local Economy**

Reducing the burden of oral disease in children will reduce the need for carers and parents to take time from work to look after children suffering from oral disease (on average, children may have around 3 days missing school due to dental issues).

6.3 **Supporting Children, Young People and Families**

The oral health programmes as described will help to improve oral health and also introduce children to daily oral health habits to help maintain good oral health throughout their lives.

6.4 **Tackling Inequality and Helping Those Who Are Most In Need**

For most protected characteristics, there is inconsistent evidence on associations between oral health, care services and protected

characteristics. For vulnerable groups, including looked after children, the available evidence is limited however studies seem to suggest that these populations have considerably poorer oral health across all outcomes⁷. There is a focus to ensure delivery of toothpaste packs to those children known to social care.

Halton has some of the poorest oral health amongst 5 year olds in the North West with over a third (33.9%) of 5 year olds surveyed in 2021/22 had experience of dentinal decay which is significantly higher than the national prevalence of 23.7%. Children living in the most deprived areas almost 3 times as likely to have experience of dentinal decay compared with those living in the least deprived areas. By targeting supervised toothbrushing schemes to those living in the most deprived areas, it is anticipated that there will be the improvement in oral health outcomes in those who can benefit the most.

6.5 Working Towards a Greener Future

The oral health programmes will ultimately reduce the need for dental services minimising the carbon costs associated with patient transport, consumables and service delivery.

6.6 Valuing and Appreciating Halton and Our Community

None identified.

7.0 RISK ANALYSIS

None identified.

8.0 EQUALITY AND DIVERSITY ISSUES

8.1 For most protected characteristics, there is inconsistent evidence on associations between oral health, care services and protected characteristics. For vulnerable groups, including looked after children, the available evidence is limited however studies seem to suggest that these populations have considerably poorer oral health across all outcomes⁷.

8.2 Halton has some of the poorest oral health amongst 5 year olds in the North West with over a third (33.9%) of 5 year olds surveyed in 2021/22 had experience of dentinal decay which is significantly higher than the national prevalence of 23.7%. Children living in the most deprived areas almost 3 times as likely to have experience of dentinal decay compared with those living in the least deprived areas.

⁷ [Inequalities in oral health in England](#)

9.0 **CLIMATE CHANGE IMPLICATIONS**

9.1 Please describe any environmental and climate implications that will be generated by the recommendations or advice you are intending to present through this report. How does the recommendations of this report support the Council's response to the environment and climate emergency e.g. by promoting energy efficiency; limiting/eliminating fossil fuel use for heat, power and transport; limiting/eliminating waste and encouraging re-use of resources and encouraging procurement of local suppliers.

9.2 The oral health programmes will ultimately reduce the need for dental services minimising the carbon costs associated with patient transport, consumables and service delivery.

10.0 **LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

[Hospital tooth extractions in 0 to 19 year olds: short statistical commentary 2023 - GOV.UK](#)

[Health matters: child dental health - GOV.UK](#)

[Oral health survey of 5 year old children 2022 - GOV.UK](#)

[How to implement toothbrushing programmes for children](#)

[A national survey of supervised toothbrushing programmes in England | British Dental Journal](#)

[Local authorities improving oral health: commissioning better oral health for children and young people: an evidence-informed toolkit for local authorities](#)

[Inequalities in oral health in England](#)

REPORT TO:	Health & Wellbeing Board
DATE:	15 January 2025
REPORTING OFFICER:	Director of Public Health
PORTFOLIO:	Health and Wellbeing
SUBJECT:	Infant Feeding
WARD(S)	Borough-wide

1.0 **PURPOSE OF THE REPORT**

1.1 This report is to provide the Board with an update on the development of the Infant Feeding services and subsequent outcomes in Halton, as a result of investment from the Department of Health and Social Care through Family Hubs.

2.0 **RECOMMENDATION: That:**

1) The report be noted; and

2) The Board recognises continued partnership working in infant feeding services across Halton is vital.

3.0 **SUPPORTING INFORMATION**

3.1 The World Health Organisation (WHO) recommends that babies are exclusively fed breastmilk for the first 6 months of life.

3.2 Breastfeeding gives babies the best start in life and offers health benefits to both the child and mother, both in the short-term and protects against ill-health throughout life.

Breastfed babies are less likely to have chest and gastro-intestinal infections, constipation, develop asthma, eczema, and are less likely to become obese. Benefits to mum include reduced risk of breast and ovarian cancer. These benefits can be particularly impactful for infants in lower socioeconomic groups.

3.3 Increasing breastfeeding rates in Halton among lower income families can do much to address inequalities. Financially, families can save hundreds of pounds in the first year alone if they breastfeed.

3.4 It is estimated that if all UK infants were exclusively breastfed, the number hospitalised each month with diarrhoea would be halved,

and the number hospitalised with a respiratory infection would be cut by a quarter. In the longer term it saves money through reducing childhood obesity. Moderate increases in breastfeeding would translate into cost savings for the NHS of many millions of pounds with initial investments paying off within just a few years (UNICEF).

3.5 Breastfeeding rates in Halton have slowly but steadily increased over the past 10 years. However, rates are significantly lower than the England average. Between 2014 and 2023, breastfeeding at 6-8 weeks increased from 21.8% to 25.7% in Halton. The England average in 2023 was 49.2%.

3.6 The current infant feeding service in Halton comprises the Infant Feeding Team within the Health Improvement Team (HIT) and the Infant Feeding Specialist Lead in NHS Bridgewater 0-19 Team. The team within HIT is led by the Start Well Practice Manager and operationally led by a Health Improvement Specialist. The team of Infant Feeding Support Workers deliver antenatal infant feeding workshops, contact and visit new parents upon discharge from hospital, facilitate breastfeeding groups and introducing solid foods workshops.

The Specialist Lead provides clinical supervision for the HIT Infant Feeding Team; offers specialist support for families; and works closely with the service lead in HIT to provide a joined-up service. Family Hub leads and Senior Early Help Officers are also key to the partnership - integrating the service in to the Family Hubs offer; providing staff to jointly facilitate groups and activities promoting and supporting breastfeeding; and completing audits for Breastfeeding Friendly Initiative (BFI) status (see 3.10).

3.7 Halton was awarded Family Hubs funding, which commenced in 2022/23. The ethos of Family Hubs is to provide comprehensive support to families to improve the lives of children. Family Hubs are a place-based way of joining up services and improving access for families.

3.8 One of the four funded workstreams was Infant Feeding, which had a set of core requirements to fulfil, plus 'go further' options to enhance the infant feeding offer. These requirements have been gradually implemented over the past two years, during which time the service has seen significant growth and development.

3.9 The core Infant Feeding service has developed in line with Halton's delivery plan, which includes:

- Further staff training to increase their skills and knowledge on more infant feeding issues.
- Tongue tie training for a number of practitioners for early identification of tongue tie.

- Addition of more breastfeeding groups which coincide with Health Visitor clinics on site.
- Co-location with health teams at Family Hubs sites
- Purchase of additional equipment, such as breast pumps and demonstration resources.
- Increased out-of-hours support using the Anya infant feeding and early parenting app, with expert specialists available during extended hours and intuitive AI support available 24/7.
- Funding of breastfeeding support on the postnatal ward at Warrington Hospital to increase maintenance of breastfeeding between birth and discharge.

3.10 Renewal of the Breastfeeding Friendly Initiative (BFI) accreditation of Halton Family Hubs, Infant Feeding Service and 0-19 service, will be completed in Summer 2025. BFI accreditation demonstrates that settings meet the evidence-based standards for supporting optimal infant feeding.

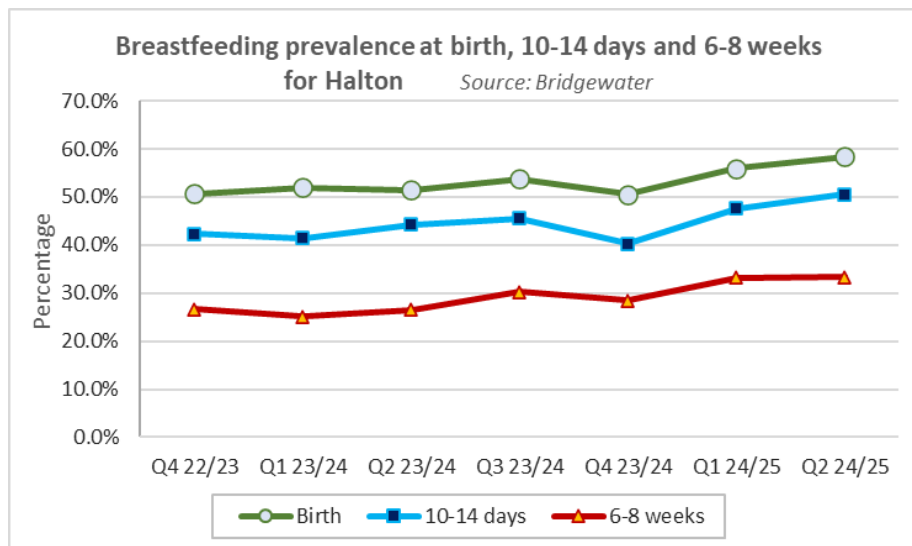
3.11 In addition to this, a significant focus has been on overcoming cultural barriers to breastfeeding. In Halton, breastfeeding is not the norm and a number of approaches are working to change this.

Over the past year a number of initiatives have been commenced:

- Completed insight work with local parents (mums and dads) and pregnant people to understand the local barriers to breastfeeding, and subsequently developed a campaign highlighting the benefits of breastfeeding in small steps and using personal stories to further promote these to parents in Halton.
- Re-introduced a Breastfeeding Welcome scheme for local venues and workplaces
- Offered small grants to local community venues and small businesses to enable them to accommodate and promote breastfeeding for service users and staff.
- Held an event at Norton Priory in July 2023 to celebrate world breastfeeding week; over 300 local parents, children and practitioners attended. The event saw the launch of the Holding Time audio trail, which is an art project in which women tell their unique breastfeeding stories to normalise talking about the realities. This included an art installation at Norton Priory, and portraits at Family Hub sites.
- Offered creative writing workshops in conjunction with the perinatal mental health workstream for women to process their challenging breastfeeding journeys and connect with others.
- Added a 'Mammals and their milk' session to the Health Improvement Team Healthy Schools programme.
- Recruited and trained 25 breastfeeding volunteers, managed by a Health Improvement Specialist at Health Improvement. They will support the core infant feeding service, and increase the

reach and utilisation of community assets in creating organic breastfeeding-friendly spaces.

3.12 Data throughout 2023 and 2024 is showing a steady increase above the target of 0.5% per year at all three recorded touchpoints.



Breastfeeding at birth:

2022/23	50.9%
2023/24	52%
2024/25 to date	57.2%

Breastfeeding at 10-14 days:

2022/23	42.1%
2023/24	42.9%
2024/25 to date	49.1%

Breastfeeding at 6-8 weeks:

2022/23	25.7%
2023/24	27.5%
2024/25 to date	33.3%

These rates are the highest ever recorded in Halton.

4.0 POLICY IMPLICATIONS

4.1 The Halton Infant Feeding Strategy is in development, and will reflect the Cheshire & Merseyside Infant Feeding Strategy, which has been co-produced by a range of stakeholders and service users. The Halton strategy will incorporate local priorities to promote breastfeeding; support breastfeeding parents; normalise and protect breastfeeding; and include a focus on poverty and inequalities.

4.2 Breastfeeding has a strong evidence-base for improving health and wellbeing outcomes for both mum and baby, and as a result can

reduce health inequalities, particularly if parents from lower socioeconomic backgrounds are encouraged and supported to breastfeed. Breastfeeding is one of the most fundamental ways that a child can be given the best start in life and reduce the impact of poverty in the first few months of life.

- 4.3 The emotional wellbeing benefits of breastfeeding are also well-known, which can impact on the parent-infant bond, attachment and healthy emotional development of the child, which again is particularly valuable for infants born in to low-income households. This is relevant for wider partners outside of health and infant feeding, with knowledge of the benefits of breastfeeding and how to offer basic support and signposting being essential.

5.0 **FINANCIAL IMPLICATIONS**

- 5.1 As part of the Family Hubs programme, Halton was awarded around £504,000 to promote breastfeeding and support parents to meet their infant feeding goals. This funding was allocated across three years between April 2022 and March 2025, although delays in funding approval and receipt of funds meant that implementation commenced from early 2023.

- 5.2 Further funding has been made available for the continuation of Start for Life services in 2025/26, which should enable the continuation of expanded services and wider outreach to improve the culture of breastfeeding in Halton for a further 12 months.

- 5.3 Longer-term funding is required to continue the growth of the local support offer, maintain momentum to enable a cultural shift in Halton and to see breastfeeding rates continue to increase. As it stands, this is dependent on the Departments for Education and Health and Social Care. The ambition is that we can continue to close the gap on the breastfeeding rates between Halton and the rest of England.

6.0 **IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

6.1 **Improving Health, Promoting Wellbeing and Supporting Greater Independence**

The short-term and life-long health benefits from breastfeeding are well known. The recommendation is that babies are exclusively breastfed for 6 months to give them the best immune protection and reduce risk of certain illnesses such as gastrointestinal infections, ear infections and respiratory illness, and longer-term conditions such as obesity and type 2 diabetes. The nutrients in breastmilk support brain development, and the skin-to-skin contact during breastfeeding strengthens the emotional bond between mother and baby.

Breastfeeding also improves health outcomes for mum, including reduced risk of breast and ovarian cancer and reduction risk of post-natal depression.

Supporting families to breastfeed is one of the most valuable ways we can give children the healthier start in life.

6.2 **Building a Strong, Sustainable Local Economy**

Breastfeeding reduces the incidence of childhood illnesses, which in turn lowers healthcare costs and demand on primary care.

Healthier children mean parents are less likely to miss work due to their child's illness.

Supporting breastfeeding mothers returning to work promotes gender equality by enabling mothers to maintain optimal infant feeding whilst continuing with their careers.

6.3 **Supporting Children, Young People and Families**

As long as mum is well and able to breastfeed, and there are no contraindications to breastfeeding, a baby can have all its nutritional needs met for the first six months of life, with benefits continuing when breastfeeding is continued beyond the introduction of solid foods. In the UK, only 1% of mothers exclusively breastfeed for the first six months. Most women discontinue breastfeeding before they want to, which can lead to sadness, anxiety and depression, as well as guilt.

Key to successful breastfeeding initiation and maintenance is timely support, which includes emotional support and practical assistance. Support of trained practitioners, peer supporters and lactation specialists are vital for mothers experiencing difficulties with feeding, whether that be challenges with complex feeding issues, emotional or other difficulties.

6.4 **Tackling Inequality and Helping Those Who Are Most In Need**

Mothers are less likely to breastfeed if they are:

- Low income
- Less educated
- Aged under 24
- Single mothers
- White ethnicity

Therefore, the wider work to address the cultural barriers to breastfeeding is crucial for the current and next generations of parents so that breastfeeding can be the norm for all parents, irrespective of their background.

In addition to this, targeted work with these populations in the antenatal period to encourage informed choice is vital, as well as tailored support to initiate and maintain breastfeeding.

6.5 **Working Towards a Greener Future**

Breastfeeding offers several environmental benefits that can help mitigate climate change. The production and transportation of formula involves significant energy use and greenhouse gas emissions. There is increased waste as a result of formula packaging. Formula production involves dairy farming, which contributes to methane emissions, as well as water consumption.

Breastfeeding can help reduce the environmental impact of formula production and distribution globally, as well as reducing waste in Halton.

6.6 **Valuing and Appreciating Halton and Our Community**

Support of one's peers is beneficial when someone is in need. Growing the network of breastfeeding support in Halton, which is led by local people with lived experience is incredibly valuable. Using stories from local parents who can encourage others like them to consider breastfeeding, is an approach we are using to engage those less likely to breastfeed. Also, identifying breastfeeding advocates within the community will help with our mission of making breastfeeding welcomed and encouraged by all.

7.0 **RISK ANALYSIS**

7.1 Without continued investment for infant feeding, there is a risk that health inequalities will continue to grow, leading to increased prevalence of chronic diseases and health issues in disadvantaged communities.

7.2 The wider work to overturn cultural barriers to breastfeeding are critical to ensure that future generations of parents are informed and supported to breastfeed, irrespective of their background. Without this, we are likely to continue to see mostly educated, affluent and older mums choosing to breastfeed and access support services.

8.0 **EQUALITY AND DIVERSITY ISSUES**

8.1 Work to overturn cultural barriers to breastfeeding includes the role of dads/male carers, as they play an important role in encouraging and supporting a woman to breastfeed, which can increase initiation and duration of breastfeeding. Consideration should be made to the role of dads in breastfeeding, as there can be a tendency for dads to be overlooked when a baby is breastfed. Bonding with a new baby

is just as important for dads, but can be more challenging when they are not directly involved with feeding baby. There is a focus on dads through Halton Family Hubs, and there are plans to develop resources for dads around breastfeeding, as well as including boys in the school education workshops through the Healthy Schools programme.

9.0 CLIMATE CHANGE IMPLICATIONS

9.1 Breastfeeding offers several environmental benefits that can help mitigate climate change:

- Breastfeeding produces no carbon emissions, unlike the production and transportation of formula, which involves significant energy use and greenhouse gas emissions.
- Breastfeeding eliminates the need for formula packaging, which often ends up in landfills or oceans. This reduces plastic and metal waste.
- Breastfeeding requires minimal water and land resources compared to dairy farming, which is necessary for formula production. Dairy farming is a major consumer of water and contributor to methane emissions.
- Promoting breastfeeding supports a more sustainable food system by reducing the demand for industrially produced milk substitutes.
- Breastfeeding improves health outcomes for mothers and infants, reducing the burden on healthcare systems and enhancing community resilience to climate impacts.

10.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972

None under the meaning of the Act.

REPORT TO:	Health & Wellbeing Board
DATE:	15 January 2025
REPORTING OFFICER:	Director of Public Health
PORTFOLIO:	Children and Young People
SUBJECT:	Update on the progress made on the DFE & DHSC Funded Family Hub Programme
WARD(S)	All

1.0 **PURPOSE OF THE REPORT**

- 1.1 To provide an update to the Health and Wellbeing Board on the progress to date in implementing the DFE & DHSC funded Family Hub Programme including a focus on perinatal mental health and parent infant relationship.

2.0 **RECOMMENDED: That**

- 1) **the report be noted; and**
- 2) **the Board approves and adopts the Halton Family Hub Perinatal Mental Health and Parent Infant Relationship Strategy.**

3.0 **SUPPORTING INFORMATION**

- 3.1 The Government's 2019 Manifesto pledged to champion Family Hubs across England. In December 2020 the then Minister for Children, Vicky Ford, outlined plans to create a National Centre of Excellence for Family Hubs, funded by the Department for Education (DfE). The Best Start for Life Review: A Vision for the 1,001 Critical Days outlined a programme of work to ensure the best support during those crucial first 1001 days, setting babies up to maximise their potential for lifelong emotional and physical wellbeing.

The DfE and DHSC announced in April 2022 the 75 local authorities who would become pilot areas for the Family Hubs and best start in life scheme. Halton was part of this selection and since December 22 we have been working hard to develop the principles of the Family Hub Model

- 3.2 "Family hub" is a system-wide model of providing high-quality, joined-up, whole-family support services. Hubs deliver these

services from conception, through a child's early years until they reach the age of 19 (or 25 for young people with special educational needs and disabilities). There are three core principles of the family hub programme;

- Access
- Connection
- Relationships

3.3 Family hubs aim to make a positive difference to parents, carers and their children by providing a mix of physical and virtual spaces, as well as outreach, where families can easily access non-judgmental support for the challenges they may be facing. Family Hubs will provide a universal 'front door' to families, offering a 'one-stop shop' of family support services across their social care, education, mental health and physical health needs, with a comprehensive Start for Life offer for parents and babies at its core.

3.4 The family hub programme guide sets out ways in which it intends services to be available to families in the following three ways:

- Face to face at a family hub
- Through the family hub but received elsewhere in the network (for example, via outreach, at a youth centre, a clinical setting such as a maternity hub, a voluntary and community sector (VCS) organisation or a faith setting)
- Virtually through the family hub, including static online information and/or interactive virtual services

3.5 Halton has launched 6 family hub sites since December 2022. These include 3 sites in Runcorn and 3 sites in Widnes. They are;

- Windmill Hill
- Brookvale
- Halton Lodge
- Kingsway
- Warrington Road
- Ditton

3.6 We are now further developing our 'network' offer which will be referred to as 'Family Hub Community' and will involve strengthening the integration and partnership arrangements amongst the voluntary sector as well as further utilising additional local authority outreach sites

3.7 On July 3rd 2024, Halton Family Hubs has launched 'Family Hub Online'. Through collaboration with Beebot AI, Family Hubs online is a digital automation solution that delivers a digital Family Hubs experience accessible to the entire community. It consolidates all national and local content and services in an engaging way into one application in only a few clicks helping families self-serve their own support.

Family Hubs Online offers a single point of access via any device, 24/7 on-demand using conversational Artificial Intelligence, robotic process automation and data driven analytics.

3.8 As of 12th December, after only 5 months of launching, [Halton Family Hub Online](#) had seen 7,080 users, browse 13,500 sessions and accessed 114,000 pages of content. Users browse the platform for an average of 2.2 minutes. The top 5 most popular pages viewed are

- Family hubs home
- Events
- HENRY – Healthy Families
- Start for Life
- Adults

The top 5 most accessed content are

- Widnes Autumn timetable
- Runcorn Autumn timetable
- Runcorn Summer timetable
- Widnes Summer timetable
- HELPS @ Kingsway Family Hub

3.9 Ongoing developments of the platform involve

- incorporating the SEND Local Offer which will be due to go live in February
- All activities as part of Halton's Holiday Activity Fund being available to view and book through Family Hub Online
- Automated Care Pathways (digital interventions) that send automated, personalised messages of information, advice and support on a variety of different topics and themes such as perinatal mental health support for dad, advice on how to stop smoking, and information regarding childhood immunisations.
- Chat bots and bot workflows such as one that explains what the EHCP process is

3.10 Halton were awarded around £2.8m to transform services across 6 funded strands. These were

- Transformation
- Parenting
- Infant feeding
- Perinatal mental health and parent infant relationship
- Early language and Home learning environment
- Start for life and parent carer panels

3.11 Four of the funded strands had a completed 'theory of change' identifying the necessary activities and resources to achieve each step of the change process aligned to the overarching principle as per the guidance. It provided a roadmap for implementing the initiative, ensuring that activities are aligned with the overall goals.

- 3.12 **Parenting** - As part of the programme, Halton were awarded around £396,000 for the provision of an offer which will help make the transition to parenthood as smooth as possible and which stresses the importance of sensitive, responsive caregiving. This should include both universal provision and some more targeted programmes available for parents/carers with further needs. The long term change Halton wanted to see was the increase in the number of people accessing evidence based parenting support interventions so there is an improvement of parents' wellbeing and parenting skills, resulting in a reduction in requests at a higher level of need. Halton wanted to improve the access and awareness of the support needed to make the transition to parenthood as smooth as possible in order to stress the importance of sensitive, responsive caregiving
- 3.13 **Infant feeding** - As part of the programme, Halton were awarded around £504,000 to promote breastfeeding and support parents to meet their infant feeding goals. The long term change Halton wanted to see was that breastfeeding initiation and maintenance at 6-8 weeks steadily increases and that breastfeeding is practised by the majority of birthing parents in Halton. Breastfeeding data at birth, 10-14 days and 6-8 weeks has been increasing slowly over the past 10 years. However, a noticeable increase can be observed which coincides with the development and expansion of the Halton infant feeding offer through Family Hubs. Data throughout 2023 and 2024 shows a steady increase above the target of 0.5% per year at all three recorded touch points.
Breastfeeding at birth was **50.9%** in 2022/23. So far in 2024/25 the rate at birth is **57.2%**.
Breastfeeding at 6-8 weeks was **25.7%** in 2022/23. It is currently averaging **33.3%** in 2024/25.
These are the highest breastfeeding rates ever recorded in Halton.
- 3.14 **Perinatal mental health and parent infant relationship** - As part of the programme, Halton were awarded around £861,000 to support parents / carers, including dads, with mild-moderate mental health needs or who would benefit from universal parent-infant support. This would allow parents to be seamlessly connected to all services set out in the expectations via their family hub. The long term change Halton wanted to see was to intervene early to reduce the risk of more severe mental health. We wanted to reduce the stigma attached to mental health for parents to open up about their feelings through wider use of a toolkit. Halton wanted to bridge the gap in services within the mid to moderate mental health arena by upskilling and improving the confidence in managing and assessing mental health as part of the family hub model.
- 3.15 There was also a requirement of the programme to produce a perinatal mental health and parent infant relationship strategy. This is part of the appendix for further discussion

- 3.16 **Early language and home learning environment** - As part of the programme, Halton was awarded around £209,000 to implement targeted, evidence-based interventions that train practitioners to support parents with the Home Learning Environment. The aim of this was to support educational recovery and the school readiness of children who were babies during the pandemic. The long term change Halton wanted to see was that all children develop good foundations for language and strong self esteem. We wanted to ensure that parents are confident and knowledgeable about the importance of a strong home learning environment due to there being a lack of confidence, knowledge and awareness of parents being their child's first educators.
- 3.17 Halton have been ambitious in its approach and as a result has received local, regional and national acknowledgement of the successes. Some of these successes include;
- November 2023 – Introduced a new service offer known as a baby shower which has now been replicated across other areas of the North West and was recently shortlisted for a national award in the partnership category
 - January 2024 – Hosted a visit by the then Secretary of State for Education, Gillian Keegan MP
 - September 2024 – Invited to the Jubilee Room in Parliament buildings to deliver a short talk on how Halton were using Artificial Intelligence and Intelligent Automation in its communication approach with families.
 - Autumn - Presented 3 national webinars on behalf of the Local Government Association on how to adopt artificial intelligence and intelligent automation across Children's Services
 - November – Presented at the national conference for family hubs in Derby on the Halton Digital Front Door Solution
- 3.18 Whilst the funding predominantly supports the integration of service delivery for children aged 0-5, a lot of transformative work has also been undertaken to support families with children 5-19. Some examples include;
- Integration with the Cradle to Career Right to Succeed programme in Halton Lea allowing Vibe to deliver a youth club for 3 nights per week from a local authority outreach site (Glendale, part of the Family Hub community)
 - A self assessment audit compiled and completed by a group of young people at Brookvale Family Hub and Glendale to ascertain how welcoming and inclusive the environments were for young people
 - Development of a community café on the site of Brookvale Family Hub, initially for one morning per week, overseen and delivered by the children and young people of Cavendish Academy High School
 - Supporting the Youth Justice Service with some restorative

work at Halton Brook

4.0 **POLICY IMPLICATIONS**

4.1 The DFE recently announced a further investment for 12 months of £67m to all 75 local authority areas currently on the family hub and start for life programme.

4.2 The DHSC recently announced a further investment for 12 months of £57m to all 75 local authority areas currently on the family hub and start for life programme.

4.3 The 2024/2025 funding allocation is still to be confirmed.

5.0 **FINANCIAL IMPLICATIONS**

5.1 The family hub steering group have a financial sustainability plan to determine the activity that requires onward investment from future funding streams. The group will convene at the earliest opportunity to make the necessary and appropriate decisions once the funding allocation has been determined.

5.2 Any additional funding, over and above, and in line with the programme guide, will be added to a 2024/2025 delivery plan based on future priorities and needs.

6.0 **IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

6.1 **Improving Health, Promoting Wellbeing and Supporting Greater Independence**

Family Hubs offer vital early intervention services, including health visiting, midwifery, and infant feeding advice. This helps identify and address potential health issues early on, leading to better health outcomes for children and families.

6.2 **Building a Strong, Sustainable Local Economy**

Family hubs can help to break the cycle of poverty by providing support and resources to families in need. This can lead to improved educational outcomes, increased employment opportunities, and reduced reliance on social welfare programs.

6.3 **Supporting Children, Young People and Families**

Family hubs provide a wide range of support services to children, young people, and families.

6.4 Tackling Inequality and Helping Those Who Are Most In Need

Family hubs can identify families facing challenges early on, allowing for timely intervention and support. Family hubs can tailor their services to meet the specific needs of vulnerable families, such as those experiencing poverty, domestic abuse, or mental health issues.

6.5 Working Towards a Greener Future

None identified.

6.6 Valuing and Appreciating Halton and Our Community

Family hubs can significantly contribute to valuing and appreciating Halton and its community by fostering a sense of belonging, pride, and shared identity. This has included hosting events like family fun days and community workshops. These events bring people together, fostering a sense of community and shared experiences.

The family hub programme has also been involving local businesses and organisations which has helped to create opportunities for collaboration and support local initiatives.

7.0 RISK ANALYSIS

7.1 None identified.

8.0 EQUALITY AND DIVERSITY ISSUES

8.1 None identified.

9.0 CLIMATE CHANGE IMPLICATIONS

9.1 Please describe any environmental and climate implications that will be generated by the recommendations or advice you are intending to present through this report. How does the recommendations of this report support the Council's response to the environment and climate emergency e.g. by promoting energy efficiency; limiting/eliminating fossil fuel use for heat, power and transport; limiting/eliminating waste and encouraging re-use of resources and encouraging procurement of local suppliers.

10.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972

None under the meaning of the Act.

Start for Life Family Hub Perinatal and Parent Infant Strategy

Together for babies in Halton



October 2024

FORWARD

We (the parents of Halton) have put this together, on behalf of parents with young children - now and in the future. We want people to be proud to parent in Halton, and access the support they need, when they need it. Thinking about babies and parents struggling is difficult. If you would like support - please speak to someone you trust, which may be someone in your community, in a Family Hub, a midwife or health visitor. We want everyone to hear the message **“reaching out about your wellbeing is important and doesn’t mean you’ll be seen as a bad parent.”** There is a lot of detail in the strategy about how we would like professionals to support us. This is necessary, as it helps us all to understand the process, and importance of getting support in a timely way. This may be too much detail for families, so we have created a one page summary to share key messages, and direct people to support (Appendix 2).

Through the strategy you will see quotes from babies. This is a strategy for understanding babies, and therefore, it is important to try to hear their voice. Whilst babies can’t use words, putting words to their experience helps us gain a richer understanding of their world.



“My mummy is my lifeline and gives me all I need!”

Sophie and Robin

The quote (above) captures how important parents are to their children. This can feel overwhelming for parents.

Parenting is difficult, and this has been captured beautifully in a poem by Halton resident, Anna. Despite the challenges, joy can be found, especially when support is there when you need.

Three

Three times I’ve grown life, being pregnant I could do,
Never fully appreciating what my body went through.

Three births followed suite, not one going to ‘plan’,
Left feeling like a failure even though I’d given all that I
am.

Three breastfeeding journeys, each one a different tale
Births I couldn’t do, at this I must not fail.

Three feeding stories, each a different struggle for me
Who cares about the mother, the baby is all they want to
see.

Three times I’ve felt the overwhelming wave of
responsibility grow,
Must not let my children down, even if I am feeling low.

Must carry on with a mental load no-one can see,
Rarely getting any praise for raising my beautiful three.

A lot more than three times I’ve longed for a hot cup of
tea,
Or just simply going to the toilet on my own to have a wee

Three children’s needs come before washing my hair,
Whilst my friends are downing prosecco as I scroll their
insta in despair

When will I stop classing my shop to Aldi as a treat,
Wondering why I have three pairs of mop slippers for my
feet.

Three minutes is sometimes all I want on my own,
But when I get it, I just look at pictures of them on my
phone.

Three times I’ve become a superhuman mum,
No longer able to play the beat to my own drum.

No longer able to put my needs first,
But when I look at their three little faces, my heart could
burst.

Three little faces watching my every move,
Over time I’ve started to embrace our new little groove

Three new stories start to intertwine with mine
Look how far I’ve come, look how they all shine.

I have lost myself, most definitely.
But I’ve also found myself in my wonderful three.

By Anna

TABLE OF CONTENTS

<i>Forward</i>	2
<i>Key Points</i>	4
<i>The Need for a Strategy</i>	5
<i>Co-production</i>	5
<i>The importance of support in the perinatal period and strengthening parent-infant relationships</i>	7
Early experiences lay the foundations for life.....	8
First relationships are really important	10
Caring for a baby can bring joy and challenge at the same time.	10
The cost of not supporting perinatal mental health.....	11
Intervening can offer babies the best start for life.....	12
<i>The need for support with perinatal mental health and parent-infant relationships across Halton</i>	13
<i>Vision for Halton</i>	14
<i>Intervention</i>	16
<i>Service offer</i>	18
<i>Review</i>	25
<i>Appendices</i>	26
Appendix 1 Definitions.....	26
Appendix 2 One page summary	27
Appendix 3 Example of the digital offer	28
Appendix 4 Key contacts	29
Appendix 5 Useful Resources	30
<i>References</i>	31

KEY POINTS

Halton’s Perinatal and Parent-Infant Strategy 2024- 2027 is a collaboration between the parents and stakeholders in Halton.

“I’m really humbled to see this research being done in our area and even more so that it’s coming from the ground up. Surveys like this are so important because other than thanking my support directly I really want to share what helped me for the next parent” (parent from Parents In Mind survey).

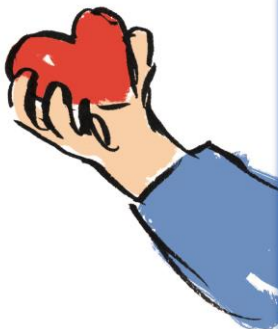


This strategy has been informed by the North West Coast Clinical Network ‘PIERS Strategy’. It needs to be read alongside other key documents, which are referenced, but detail has been kept to a minimum to make this strategy more accessible.

The first 1001 days in a child’s life (from conception to 2 years old), are a time of vulnerability, and a window of opportunity. Whilst change is possible later, Halton’s vision is to support all families to have the very best start in life. Three priorities have been identified to help achieve this:

- Strengthen resilience in the community,
- Increase knowledge around the perinatal period, and
- Working together.

Despite the challenges faced by many children and families across Halton, there is a desire and motivation for professionals to work together to support them. The NHS Long Term Plan and Start for Life Programme are national drivers, which have helped to increase the speed of change. This strategy details the change we want to see aiming higher for babies and their parents.



I am a boy. My mummy must have loved her brother, who passed away just before I was conceived, as she is so upset and I hope she loves me just as much.

Mummy, do not feel guilty for being upset, because when I arrive I will try to help you get better. You are doing a good job, eating better and taking vitamins to help me with my development.

That feeling of concern that you’re hurting me when you’re upset? It means that you do have feelings for me and I’m glad about that.

Emma and Bump

Throughout this document there are beautifully drawn pictures by Toni-Louise Carter TLC Illustration. www.tlcillustration.co.uk

This strategy will be reviewed in 2027.

THE NEED FOR A STRATEGY

Halton Family Hubs commissioned the Parent Infant Foundation to write a Perinatal and Parent-Infant Strategy, as part of the Perinatal Health and Parent-Infant Relationship strand of the Family Hub and Start for Life Programme. This was a collaboration between the parents and stakeholders of Halton. Ideas Alliance and NCT Parents in Mind supported parents to be involved in the process of shaping this strategy. Several workshops and consultation events were held with professionals, working across Halton, to understand what was working well, the gaps and how to move forward.

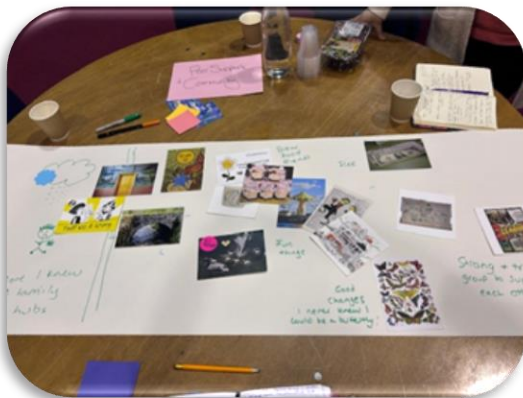


This strategy is backed by national initiatives and evidence, which emphasise the importance of supporting families during the perinatal period.

It is a vulnerable time for families and support needs to be easily accessible, for both adult mental health, and the parent-infant relationship. The needs of babies are often overlooked, and this is commonly known as

‘the baby blind spot’. It is recognised that only by increasing awareness, and making it a priority for everyone that things will change.

This strategy aims to support commissioners, and ensure the vision is incorporated into contracts. It will also enable practitioners to understand the range of services available to support families, and increase joined up working. In terms of families, the aim is for them to feel supported in raising their child, accessing help when needed.



CO-PRODUCTION

Consulting with people who use services is now seen as good practice, but is often tokenistic. We were determined that this strategy be a true co-production, sharing power and decision making, in recognition that we all bring skills and knowledge to the relationship. We have

co-produced this strategy involving 147 parents across Halton, to get the opinions of people who are currently parenting in Halton.



An appreciative inquiry approach was used to develop the strategy. This is a strengths based approach for creating change, rather than fixating on problems to solve. We adopt the mantra of ‘what’s strong’ and not ‘what’s wrong’. The approach looks at what is working well, and what we want to see more of.

Ideas Alliance conversation tool: Prototype version of tool to guide kick off and review conversations with partners, clients and project teams.



Figure 1 Model of Appreciative inquiry

Creating ‘communities of practice’ helped increase our understanding of what was working well, and then develop ideas for change.



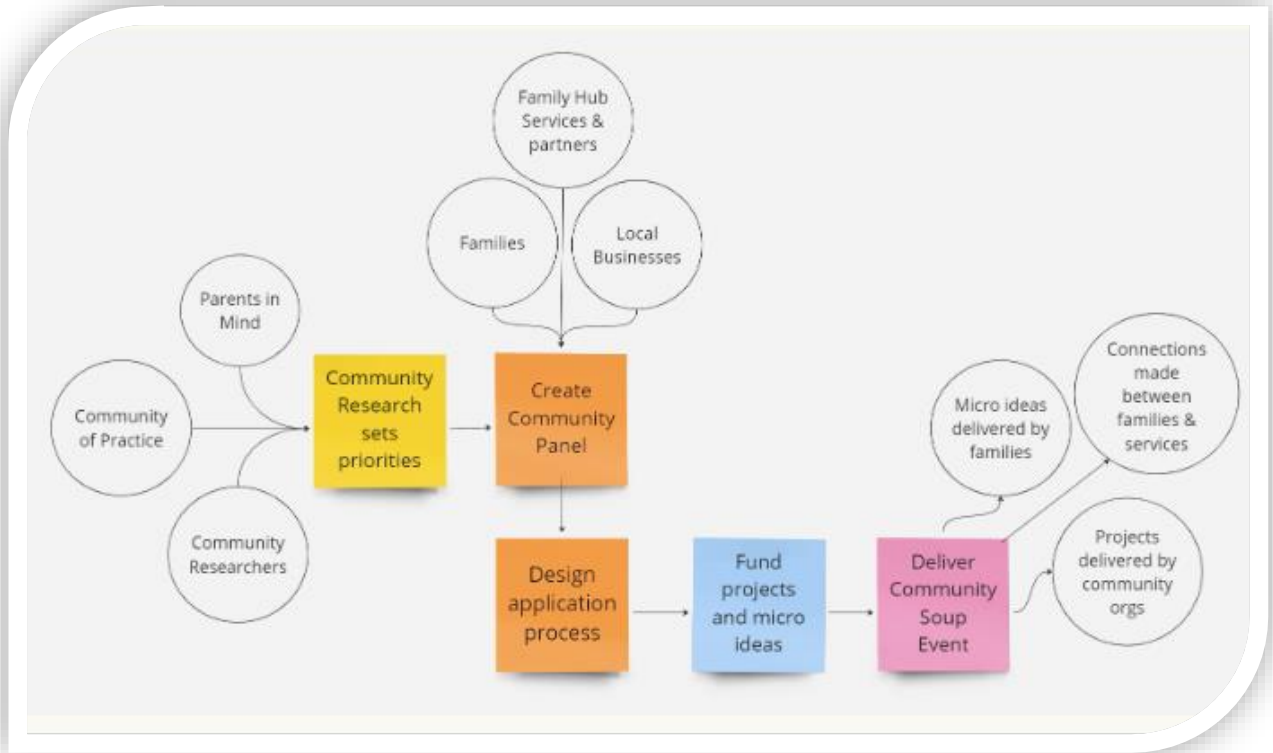
Families were involved from beginning to end in the strategy. Communities of Practice, Community Researchers alongside Parents in Mind who created the survey, set the priorities for the strategy.

In addition, some funding was ringfenced, and a participatory budget model

was applied to decide how to best utilise this. Community organisations were invited , through a co-produced application process, to apply for micro and small grants that demonstrated their project could meet the priorities identified by families. Projects were awarded to test and pilot their ideas and subsequently connected to parents and stakeholders, through a community connection event.

Figure 2 Halton's participatory budget model

This strategy was also reviewed by parents, and a one page summary was produced to highlight the most important information for parents. (See Appendix 2).



THE IMPORTANCE OF SUPPORT IN THE PERINATAL PERIOD AND STRENGTHENING PARENT-INFANT RELATIONSHIPS

Early experiences lay the foundations for life

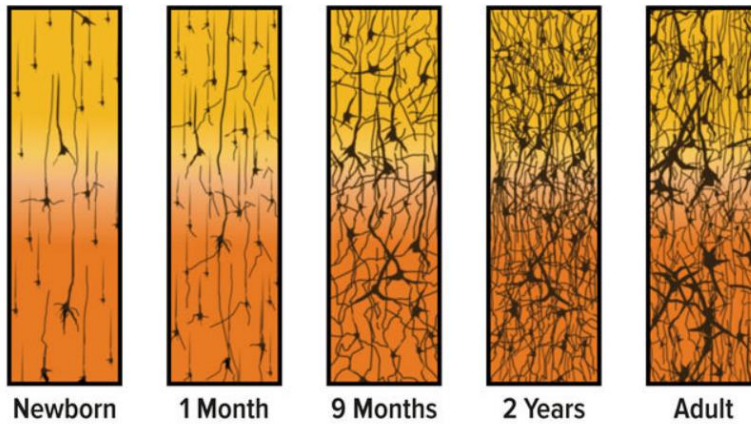


Figure 3 the development of the brain across time. Coral, J.L. The postnatal development of the cerebral cortex. Cambridge, MA. Harvard University Press

From conception to the child’s second birthday is **1001 days**. This is recognised as being a critical period for brain development.

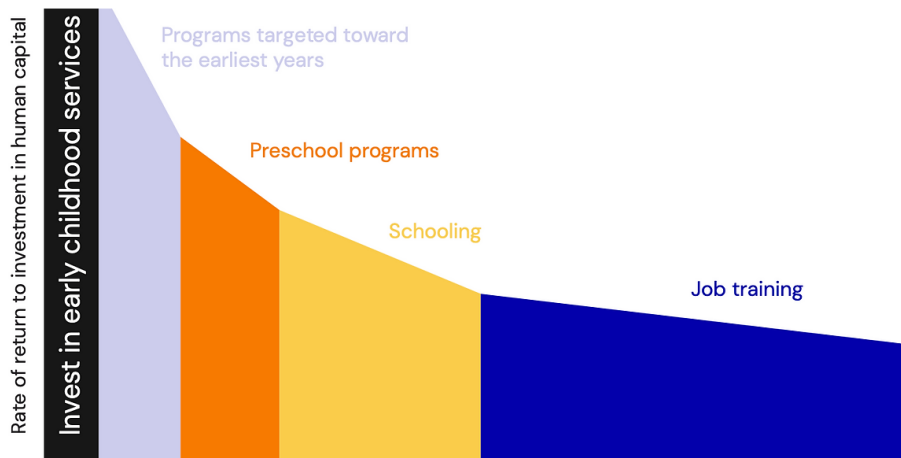
Soon after conception, brain development begins. Babies are born with all their brain cells, but only 20% are connected. Neuroscience has shown that sensitive, responsive, consistent care is associated with healthy brain development, and better long term outcomesⁱ. Children who receive ‘good enough’ care are more likely to have better outcomes.



"Stay here with me mummy. I know you have lots to do, but playing with you is my favourite and I'm happiest when I'm with you".

Francesca and Lenn

However, those who experience adversity are more likely to struggleⁱⁱ. Whilst it is never too late for change, this 1001 days period offers an opportunity to give babies the best start for life. The Heckman Curve shows the economic argument for investing in early childhood for the highest rate of economic returnⁱⁱⁱ.



Source: The Heckman Equation, heckmanequation.org

Peekaboo

Peekaboo you, Peekaboo me,
Oh, what a journey we're on; us as a family.

A miracle is happening (ME) I'm growing bigger and stronger every day,
My home here on the inside is meeting my needs in every way.
I'm one in a million (like you!)... there's no one else like me,
I'm a tiny human being, with unique thoughts and personality.
Very soon I'll be ready to bounce from bump to baby in your arms,
I will amaze you with my cuteness, my cries and my cheeky charms.
Make room in your heart and your home, I'll fill up any free space,
I don't need fancy toys or gadgets... I much prefer your face.
You'll soon learn all about me, it's going to take some time,
Then pretty soon, and without a handbook, we'll find our rhythm and rhyme.
I'll tell you what I need alright, you'll soon recognise my cues so clearly,
And everything you lovingly do for me will grow my love so dearly.
Every time you meet my needs; you feed me, cuddle me and soothe me when I cry,
My layers of love, trust and feeling safe helps my clever brain cells grow and multiply.

We will do so many things, you and I, for the first time together,

We are sure to experience rainy days and puddles, but we will always find that sunny weather.

There is so much we can explore you and I, and so much we can do,
And you can look after me, as well as looking after yourself too!

So... make that cuppa, listen to that favourite song and relax when you get that chance,
Show me you're just as important as me, in our special Peekaboo dance.
Take each day in our stride, we don't need to rush or sprint,

The steps in my stride grow bigger every day, you'll see, if you paint my footprint!

Take pictures, of you as well as me,
I want to see us grow together, our very own family history.
From singing me sleepy nursery rhymes and splashing in the tub,
To helping me play and learn lots and lots, in our fun and friendly Family Hub.
I don't come with any handbook, but I trust us, and I know you'll find a way,
And remember, our Family Hub can help bring that sunshine to any rainy day.

I Peekaboo you, I love and trust you so, so much,

And when you Peekaboo me, our heads, hands and hearts will forever touch.



By Clare Gouldson.

First Relationships Are Really Important

Babies are born ready to relate. Babies are dependent on those around them to get their needs met. In this strategy, we will use the term ‘parent’, but it can be interchanged to refer to the person who is the main caregiver for the baby.



Figure 4 Benefits of secure parent – infant relationships

Babies can’t tell us in words about their experiences, but it can be helpful to consider what words they may use. For a baby who gets their needs met they might say:
“Mummy notices when I am sad and cuddles me, I can trust she will look after me”.

In contrast, if a baby does not get their needs met, they might say:
“I cry but sometimes, no one comes, I am not sure there is someone who can look after me”.

These relationships lay the foundation for how babies view themselves, others, and the world. The benefits of a secure parent-infant relationship are in Figure 4^{iv}



Arthur: “I was upset and we were cuddling. I stopped crying and I reached my hand out to my mummy and I fell asleep because I felt so safe, warm and loved. I felt content”.

Sarah: “Those moments are special, if it is just him and I, we just sit down and watch everything”

Sarah (Mum) and Arthur (baby)

Caring For a Baby Can Bring Joy and Challenge at the Same Time.

Babies have physical, social, and emotional needs, the same as all of us. There are lots of reasons why parents struggle which may include: poverty, racism, food insecurity, birth trauma, domestic abuse, poor adult mental health, stigma.

One parent put it like this *“Maybe it’s that no one wants to scare you or unclot the unhappy side of parenting, but it would have been so much easier to have known feeling lonely or low doesn’t make you an ungrateful parent, doesn’t make you abnormal and support is readily available.”*

"My mummy is as a source of comfort, a provider for food, hugs and kisses, cleans me when I'm dirty, and makes me feel better when I feel sad. She gives me everything I want and need".

Nicola (Mum) and Molly (baby)



When parenting, our own experiences of being parented can have an impact^v. If someone did not receive sensitive care as a child, they might struggle to offer this to their children. In addition, COVID -19 put additional stressors on families, and many continue to find it hard with the cost of living crisis^{vi}.

We understand parenting does not occur in a vacuum, and families need to be thought about in a wider context. When assessing need, the whole families’ emotional and social needs should be considered, as research suggests adverse community experiences can lead to adverse childhood experiences^{vii}

The Cost of Not Supporting Perinatal Mental Health

The perinatal period is an important transitional period, which brings a vulnerability to mental illness. It is common - with one in five women experiencing mental health difficulties. However, this may be much higher, as for many their difficulties may not be identified. For men, evidence suggests paternal perinatal depression affects around 10% of new fathers (Paulson, 2010), making new fathers during perinatal period significantly more likely to suffer from depression and anxiety than the average for men (Freitas et al., 2016).

Adverse outcomes can include: impact on the birthing persons long term physical health; the birth weight of the infant; brain development; bonding; difficulties breast feeding. Not supporting parents’ mental health also has a cost to the social and emotional development of the baby.

However, there are additional social and financial costs if parents are left unsupported. Suicide can be an unfortunate option for people who see no other solution to their difficulties. Whilst routine data is not collected for men, suicide is the most common cause of death for women in the perinatal period^{viii}.

We also know suicide rates are three times higher in men, suggesting both groups need more support^x. One study has estimated the cost of perinatal illness to be £8.1 billion for each one year cohort^x. The majority of the long term consequences are associated with the impact on the child^{xi}. Investing in the perinatal period is a cost-effective way to build a better future for Halton^{xii}

Intervening Can Offer Babies The Best Start For Life

Halton has been offering support to families in the perinatal period, to strengthen the parents mental health, and the parent-infant relationship. That support has traditionally been more focused on those families with more severe mental health difficulties or issues with the parent-infant relationship (PIR). Through the Start for Life Programme, Halton Family Hubs have increased resources - to support families with mild to moderate mental health & PIR difficulties^{xiii}. This strategy captures this vision of reaching even more families across Halton earlier. See Appendix 1 - for a note on definitions.

THE NEED TO SUPPORT PERINATAL MENTAL HEALTH AND PARENT-INFANT RELATIONSHIPS

One Halton's, the local Health and Wellbeing Partnerships for both Children and adults, ambition is:

“To improve the health and wellbeing of the population of Halton, by empowering and supporting local people from the start to the end of their lives, by preventing ill health, promoting self-care and independence, arranging local, community based support, and ensuring high quality services for those who need them”^{xiv}

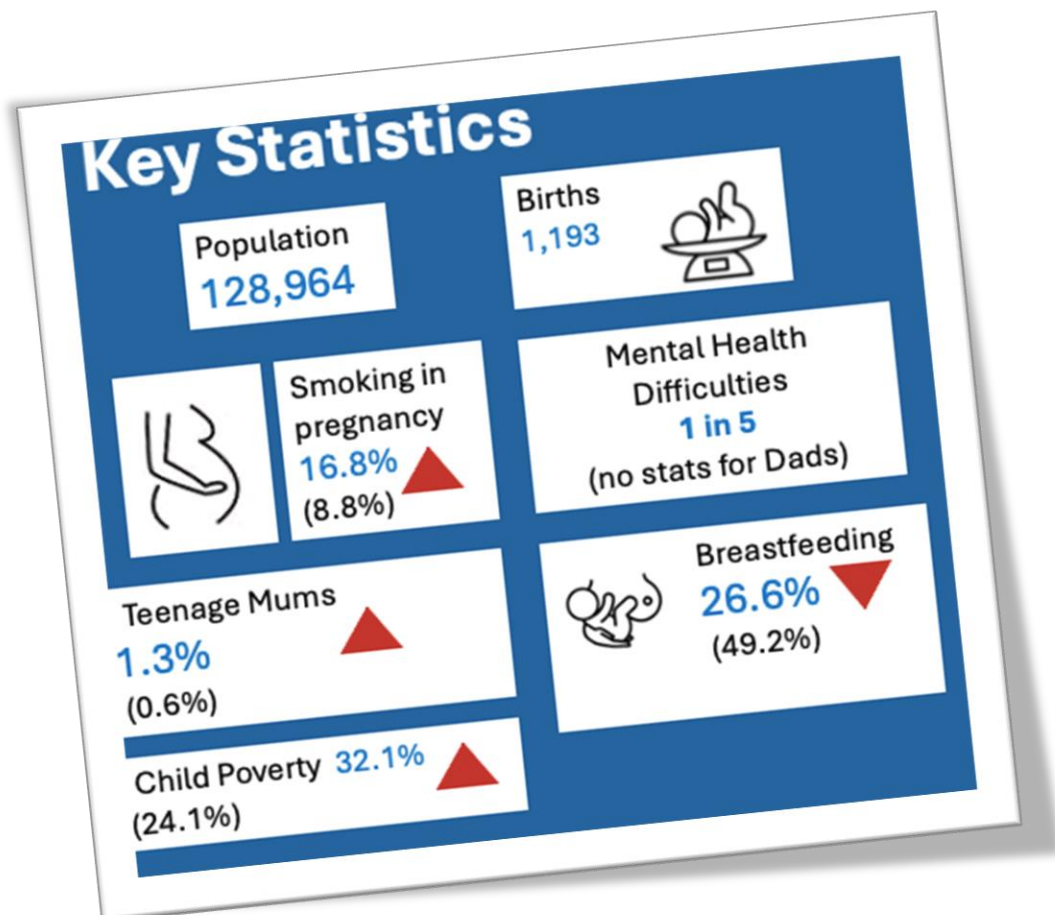


Figure 5 Key statistic for Halton. Percentages are shown for prevalence in Halton. (Percentage in brackets refers to national averages). ▲ Denotes how this compares to the national averages for England.

This is easily transferable, as an ambition, to the Perinatal Period. Key statistics for Halton are shown in Figure 5 above^{xv}. As can be seen, there are lots of challenges for babies in the perinatal period and beyond. Smoking in pregnancy, teenage pregnancies and child poverty are all higher in Halton, compared to averages across England. Children are less likely to be breastfed, vaccination rates, and in the longer term, educational attainment are lower^{xvi}.

Halton does not have a Birthing Hospital (Maternity Hospital) - but working from the estimated birth rate, it is suggested at least 536 babies a year could benefit from enhanced emotional support. Many families in Halton face health inequalities, so this number could be much higher.

VISION FOR HALTON

Halton’s vision is to support all birthing people, and their families to have the best start.

We have identified three priorities to help achieve this. Parents have shared that they have resilience and resources within their community. We want to strengthen these. Part of that work is knowing that being involved in the strategy, and making decisions about investments, keeps parents involved in developments in their community – physical, emotional and social.



KEY PRIORITY 1: In Figure 6, the North West Coast Clinical Network highlights the wider system around the family. It demonstrates the whole system community approach, with a focus on strengthening family relationships. The baby is supported by their parents and wider family. We understand that relationships and family makeup vary across families, but the wider system focuses on the resources within local communities.

Universal services (including GPs, health visitors, nursery) should act as the ‘Professional Village’ for families and will offer to support families. One of the roles of the Family Hubs is to enable families to access additional support as needed. If families raise questions or experiences that require further support, they will be directed to more specialised services. On the rare occasions that families need further, additional support - professionals can arrange this. Figure 6, on the next page, provides a visual representation of services supporting families

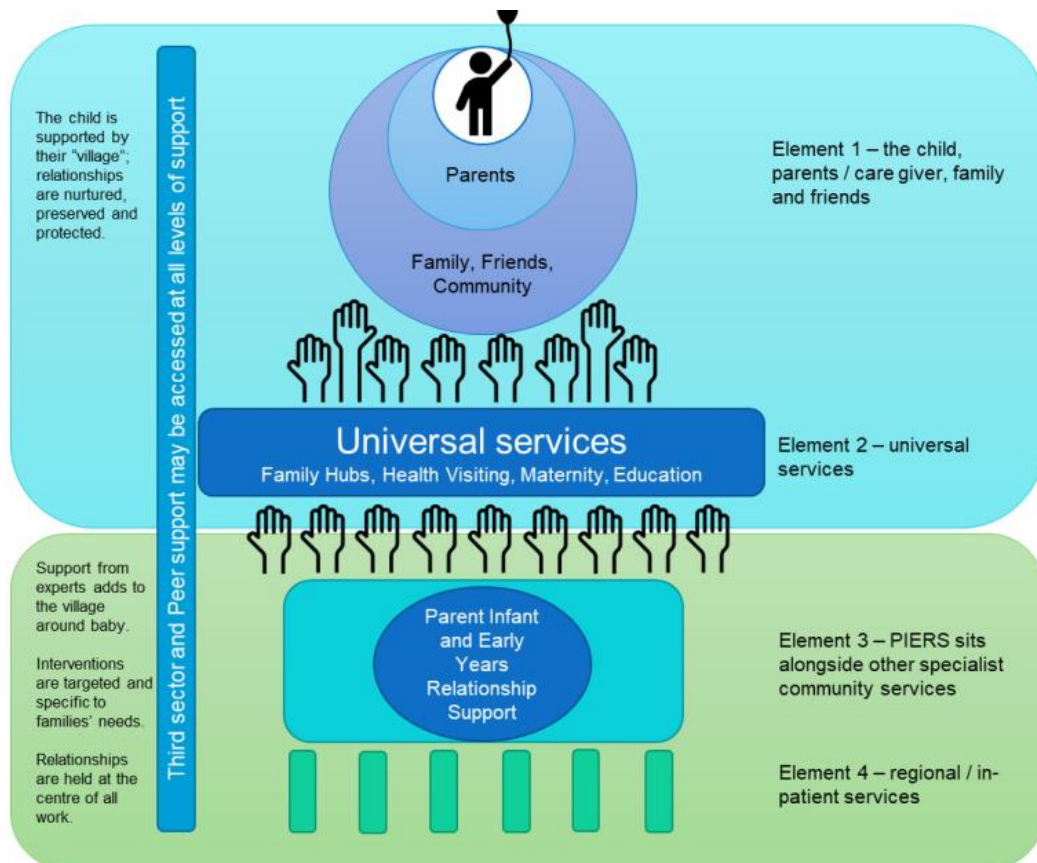


Figure 6 representation of services supporting families

KEY PRIORITY 2: The second priority is to increase knowledge about perinatal and parent-infant difficulties. Left undetected, mental health difficulties have major consequences, as discussed previously. There is a current plan to increase training to the workforce. This training has run alongside the strategy, as workshops, Baby Showers (which offer the bonus of enabling professionals to learn more about the range of services on offer, beyond its main function of providing information to families), and a conference to increase knowledge in the wider community, and professionals. The Family Hubs Digital Platform (an AI enabled website) will provide additional education for all users, (families and professionals).

KEY PRIORITY 3: Finally, the third priority is to work together so families get the support they need in a timely way. The Baby Shower (as mentioned above) is a key event for families to hear about the services available across Halton. The digital platform (website) will be a vital resource, as it will recommend services to professionals and families, based on need. To be truly effective, relevant services will need to populate the digital platform, and keep the information updated.

Using primarily evidence based interventions, offered in a timely way, has been shown to reduce distress; have the potential to make interventions shorter; and consequently, make them more cost effective. Creating clear pathways, sharing information appropriately, working together through a perinatal and parent-infant steering group, and professional interactions will help families get the help they need - without having to do multiple assessments.

INTERVENTION

We are ambitious in wanting to improve the lives of all families during the perinatal period.



Families require different levels of support at different times. The ‘Thrive Framework’ identifies five different needs based groups^{xvii}.

Thriving refers to families where the prevention and promotion strategies are working to maintain their wellbeing. ‘**Getting Advice**’ refers to families who have mild or temporary distress, and may need advice or signposting. For some families, ‘**Getting Help**’ indicates when specific interventions are needed to improve mental health. ‘**Getting More Help**’ represents families who need

specific, more extensive support. There are some families who may not benefit from or make use of help, but demonstrate risks, ‘**Getting Risk Support**’.

We understand cultural background has an influence on seeking help. Therefore, supporting families requires practitioners to be culturally curious in building relationships, and this may help families to be more honest about their needs.

When meeting with families, it is helpful for practitioners to think about how they ‘appear’ to families. Families have said that they are put off sharing if professionals are too smartly dressed, or overuse clinical language. An example given by a parent was *“using the word ‘suicide’ made me feel I was not suffering enough.”*

In all contacts with families, we need to be gathering information, and recognise things can change quickly in the perinatal period. Only half of families surveyed said they were asked about their mental health, even though they would have liked the opportunity to talk about it.



Ideas for conversation starters include:

- *Voice of the baby* – is the baby developing physically and emotionally? It might be helpful to write a statement on behalf of the child. For example, for a 20 week old foetus “*I am growing well as mummy is providing me with the nutrients I need. I can hear and feel her heart beating, which makes me feel safe. I love it when she sings to me and it makes me more excited to meet her.*”
- *Interactions between parents and baby* – what have you observed? In pregnancy, is mum stroking her bump? Once born, is there eye contact? Do parents respond sensitively to baby’s needs? Ask how they would describe their relationship with their babies ^{xviii}
- *Voice of parents* – are there parental mental health, and/or couple relationship difficulties? Are there intergenerational relationship factors?
- *Risk* – do you have any concerns the family may not be safe?
- *Support* – have a conversation about what the family feel they need, and come up with a plan. This may require professionals to seek further advice.



Families are keen to learn new information. Nearly all parents, who contributed to this strategy, felt they would have benefitted from knowing about the emotions they may experience in pregnancy and afterwards.

Providing this information within a trusted relationship, with a professional, may help families share their worries, and be more likely to get the support they need.

Of those attending the Baby Showers events at Family Hubs, a marketplace for services and support - 85% of attendees were there by invitation. This shows practitioners need to tell

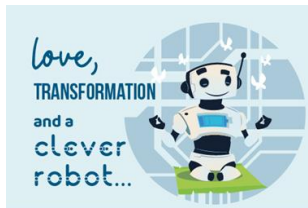
families about events, inviting them to see and hear about support, so they feel they have the opportunity to discover further help.

It is important people’s partners feel supported too. We have aspirations for partners to be seen as integral to care. We celebrate each family as unique, with some solo parenting, same sex couples, and some with a large extended family. Dads have been a specific focus for the Start for Life Programme (see Early Help Strategy). In the survey, the main emotions for Dad’s were ‘anger’ and ‘hopelessness’. Partners told us they want to be given information and support, so they can feel more useful. There are initiatives to increase their involvement, for example getting contact details at the booking appointment, and then sending out regular information thereafter.

Fatherhood Champions, across Halton, help to share the message of the important roles Dad's fulfil. In November 2024, Dad Matters was officially launched in Halton, a programme jointly funded through the Start for Life and Supporting Families Fund. One of the core principles of the Family Hub programme is 'Access', so for dads to now have a specific offer in Halton, to support throughout the perinatal period is really important. It is expected that this offer will currently be available for up to 2 years. Complementing Dad Matters will see a Peer Support and digital offer for dads being delivered in partnership with Parents in Mind, again launched in November 2024.



Family Hub Online



Families want to have access to a digital offer (website/digital Family Hub) as part of the support^{xix}. In Halton, this is called:

Haltonfamilyhubs.co.uk

All families have the opportunity to access the digital platform, which provides information about the services available to them. Using artificial intelligence and intelligent automation, it has simple search functionality and personalised and tailored content, which brings back high quality information from trusted and reliable sources.

The platform provides education and suggestions of support, which parents have shared they struggle to find. This is designed to help families feel more supported outside the hours of 9-5, which was something noted from the survey. Families have also shared they would like more opportunities to meet with other families. This can be accessed via the physical Family Hubs and linked projects. The Digital Hub contains information on the activities offered at each Family Hub, and the how and where to access them.

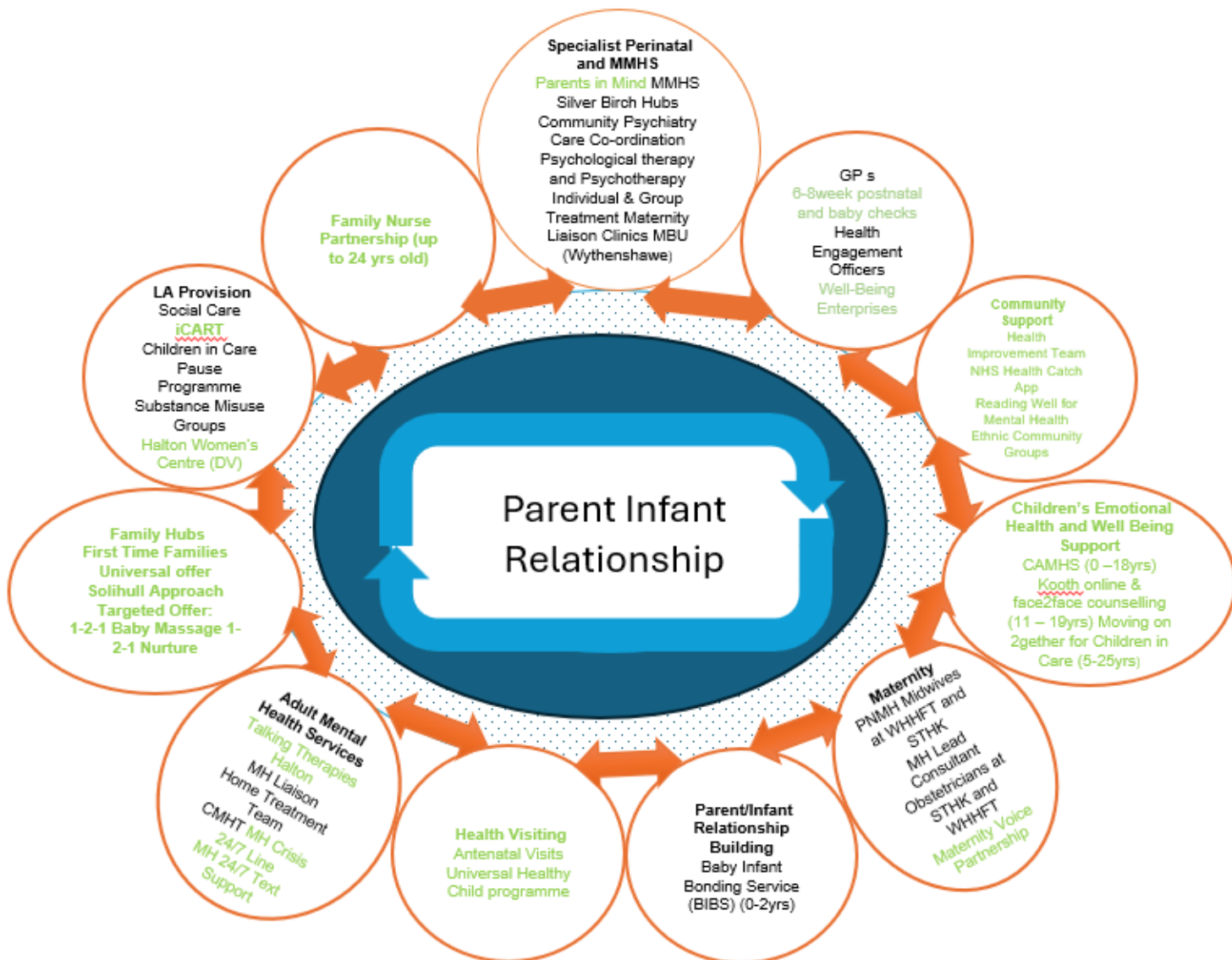
Internet address: www.haltonfamilyhubs.co.uk or via searching for 'Halton Family Hubs', 'Widnes Family Hubs' or 'Runcorn Family Hubs'.

SERVICE OFFER

The North West Coast Clinical Network is a group of commissioners, service providers and families with lived experience who come together to share ideas and develop best practice. This is used to inform the Local Offer. Supporting families in the perinatal period requires a whole systems approach. There are a range of services to support families in Halton (see figure 7).



Figure 7 Services across Halton



The services related to this strategy are noted in the diagram above, with an emphasis on a whole systems approach, which is needed to support perinatal mental health and strengthen parent-infant relationships. 'Green' indicates services accepting Self-Referral. On the following page are some of our services in more detail.

Start for Life Emotional Wellbeing Team

Across England, the Start for Life programme (via Family Hubs) is funding 75 local authorities - to increase the perinatal and parent-infant offer. Halton chose to invest the money into creating a specialist team, as a joint enterprise with Halton Local Authority and the Bridgewater 0-19 health visiting team, to support families with mild-moderate difficulties. Informed by psychology, this team helps to support families from the earliest opportunity in pregnancy, when difficulties present themselves.

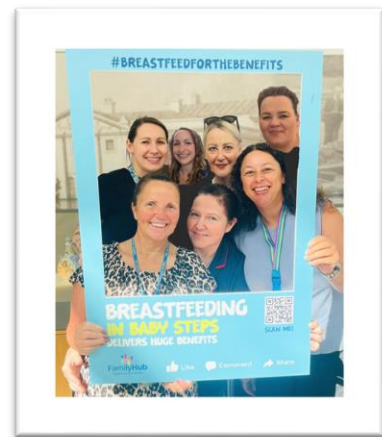
The team are experienced in supporting babies, and their parents mental health.

Team Members 2024/25

Michelle, as operational manager of the 0-19 team oversees the shape of the service. **Clare** leads the team and co-ordinates the support offered to families.

Lyndsey is a clinical psychologist and is involved in specialist assessments, working closely with her colleagues in the Specialist Perinatal Service.

Sonia, as wellbeing health visitor, **Amy and Pauline** as wellbeing early years workers, and **Karen and Katie**, as wellbeing child and family health practitioners, all provide individualised support, as needed, through group programmes (Lighthouse, Welcome to the World, Time for Me, Mindful Me, Circle of Security), and individual sessions - targeted Family Hub visits at 18 weeks gestation, baby massage, support prebirth assessments, emotional wellbeing visits, NBO, Solihull Approach, Ready to Relate. They are developing pathways for pre-term babies and birth trauma.



The team also head the monthly 'Baby Shower' marketplace. Information events that provides a universal and targeted offer, for all families, at the earliest of their parenting journey.

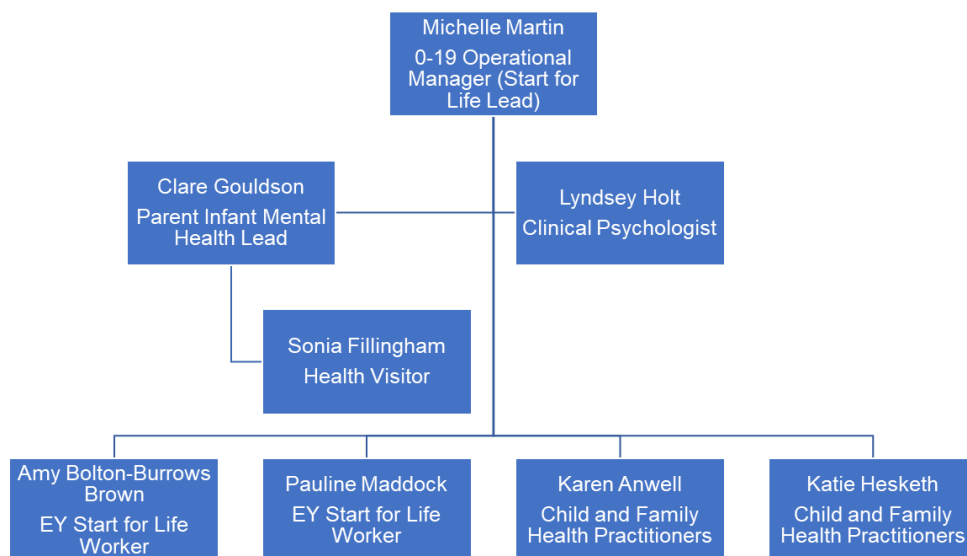


Figure 8 Start for Life Emotional Wellbeing Team Structure

Chloe & Douglas

I'm doing it!

I was pregnant when I first received a Family Hub phone call from Clare. The call came at the right time; I was living in an environment that wasn't appropriate for my baby and I was really worried about my own mental health and wellbeing and uncertain about so many things like my housing situation, as I was on the verge of homelessness.

I struggle with anxiety, but receiving the invite to the baby shower was my queue to step outside my comfort zone and be brave. I knew that I needed more information about being a mum and caring for a baby, and I felt clueless and didn't know anything about being a parent. I had already made some healthier choices, and wanted to be the best mum for my baby, and needed help to get there at that point.

I attended the baby shower and was grateful for friendly faces, a warm welcome, a cup of tea and a chat about me, my baby and my situation. I learned lots of important information that helped keep Douglas healthy and safe. I was also able to share my worries and concerns with Clare, who supported me with my housing issue and emotional wellbeing. I felt relieved that I was not alone in this journey.

I was 36 weeks pregnant when I secured a supported housing place and I was grateful to be able to move into a more suitable environment for my baby. It was really hard, I was sleeping on my own in a property for the first time in my life and at first it was not nice. I worked hard, and made it feel like a home for Douglas, and we had our first Christmas visiting my partner's family. I managed to make it feel special. He felt real to me when he arrived, and other than offering to babysit Douglas for me (ha-ha), I don't know of any improvements that I would make to the service that I have received to support me. I breastfed Douglas until he was four months old.

During that time my mum became unwell with a serious condition and there were some family issues that impacted on my wellbeing, but the information that I had learned through the Family Hub helped me. Having the offer of 1-1 baby massage at home was so lovely and I appreciate the support I have received, and I have been working with the team on video interactive guidance.

I now feel ready to start going to groups and I have signed up for Time for Me, and I want to complete the first aid course to help me with Douglas.

I feel like I am a good mum, I'm doing it! The manual downloaded in my brain and it stuck and I love Douglas very much. I know that I am the best for him and there would be nobody else that could be his mum better. Becoming a mum has helped me feel more confident in myself; I know that I am kind and creative and I have even managed to take Douglas on his first holiday to Scotland! My belief in myself has grown.

I am now in my own home! I love it, we are settling in and I am decorating it to how we want it to be. I was in denial about my new home at first; I was so desperate to secure my own property that I couldn't let myself believe. My supported housing experience

was not negative; they helped me and they had sessions on to support their residents and Douglas had his first moments in that placement. Douglas has a perfect personality, he is sitting up strong and is just a little me, he is a part of me. I live near to my friends and my mum isn't too far away. My partner drives and he can come to visit me. My journey has inspired me to continue my previous work as a carer, and I will return to that career, once Douglas is ready for a nursery place. I would love to own a home eventually and I am now a different person. I feel that I have matured as a person through becoming Douglas's mum.

Pauline: I am really proud of Chloe. I have visually watched her grow as a person and as a mum.

Clare: Chloe was one of our first parents to attend our baby showers when they were introduced. When I first met Chloe i could see how much she already loved her baby and wanted to change her world so much. She wanted to make sure that it was a world where she could provide a stable and safe, loving home for Douglas. We worked together as team to make those changes that allowed her to do just that, and I knew that she would be an absolutely amazing mum. Douglas is just as amazing and to see them in their own home, feeling happy and content in their world is just perfect. Well done Chloe and Douglas!

Building Attachment and Bond Service (BABS)

Across the UK, there are specialist parent-infant relationship services or infant mental health services. Halton's service is called BABS, and they offer a range of interventions to support families - where there are difficulties in the parent-infant relationship. Figure 9 highlights the breadth of families they support directly, and through consulting with partners. A case study has been written to show a family's experience of BABS, and the difference it made.

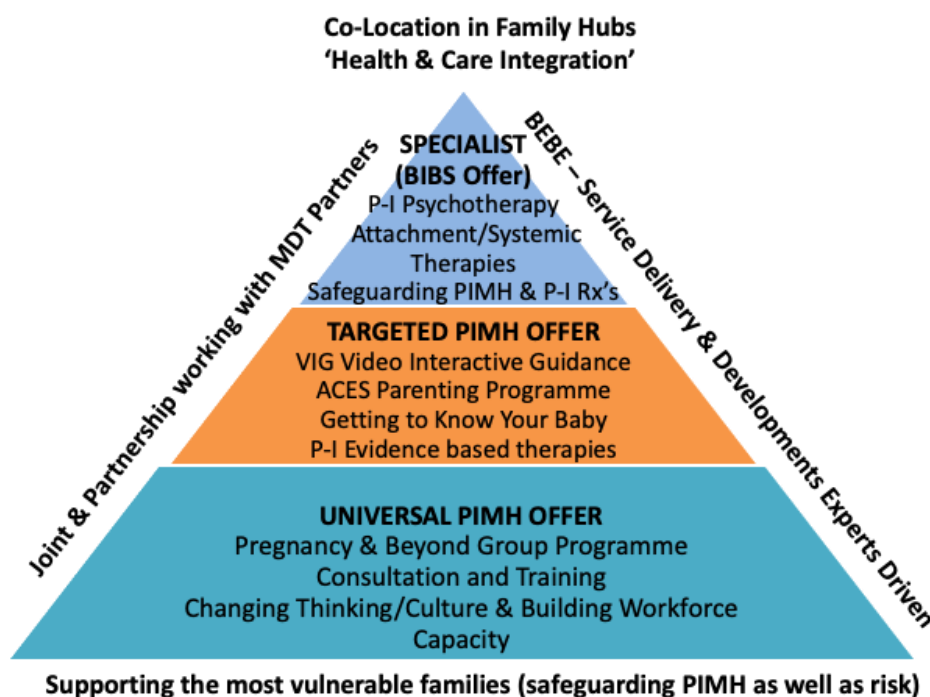


Figure 9 - BABS interventions offered based on the difficulties in the parent-infant relationship

Case Study 2 – family supported by BABS

Sarah and Jay-Jay

Supported to be Mum

An absolute godsend, that's the only way I can describe what BABS means to me. We've been through the worst time but we're out the other side. We're all together and it's because of the help I got from them. Life was good, I was settled with my partner and my two children. But the relationship ended and then my Mum died, which absolutely floored me. I started a relationship and became pregnant. The relationship wasn't right but I was pregnant.

I'd been struggling with depression and anxiety for 15 years. Becoming pregnant sent me into 'fight or flight' mode. I was having a mental health crisis and I just needed help. Social services got involved and I was told that Jay-Jay would be going into foster care as soon as he was born. There was even talk of adoption. When he was six days old, they picked him up and my tiny baby was taken to live with foster carers. I couldn't believe what was happening.

I'd been referred to BABS by my health visitor while I was pregnant. With their help I fought to get Jay-Jay back home with me. They gave me the support and confidence to carry on. Even more than that – I feel that BABS gave me the chance to be called 'mum' again. Jay-Jay was in care for nine months and I fought to see him every day. We're all back together now, just as we should be. BABS offered support to Jay-Jay's dad too so they could build a bond.

Jay-Jay is clever and funny, a little ray of sunshine who never stops chattering. I'm grateful BABS exists and I was referred by my health visitor. BABS have changed my life and Jay-Jay's. I'm not sure where we'd be without them." I now volunteer for BABS to help other parents who are dealing with tough times.

Specialist Perinatal Service

The Specialist Perinatal Service, delivered through MerseyCare, supports women and their partners with moderate -severe mental health difficulties. They can work with families up to the child's second birthday. They offer Video Interactive Guidance, baby massage, Watch Me Play, Ready to Relate, antenatal support, clinical psychology, Circle of Security, NBO, Lighthouse.

Case Study 3 – Specialist Perinatal Service

The work undertaken by our 'Start for Life Emotional Wellbeing Team' to date, on mild to moderate mental health:

- has reduced waiting times for Specialist Perinatal (moderate-severe) mental health assessment,

- improved access rates and allowed families to be seen where, and when they need help.

The collaborative working between the Specialist Perinatal Service and the Family Hubs has meant that initial assessments for the Specialist Perinatal Service are arranged by the staff member that the families already have a relationship with.

In the six months since this offer has been live, all families have attended their appointments. This has improved the service for the families, and reduced administration time and DNA (did not attend) rates, allowing staff to spend more time working directly with families in Halton.

Talking Therapies

They offer of online therapy through the Silvercloud system - a skills Wellbeing Course, and one to one therapy to adults experiencing mild-moderate mental health difficulties.

They run a six week perinatal course with the following themes;

- Introduction to Anxiety and low mood in the perinatal period
- Setting goals and behavioural activation
- Anxiety management and relaxation
- Routines and sleep
- Addressing unhelpful thoughts
- Transition to parenthood
- Coping with worry and learning how to solve problems
- Looking after yourself in the future and next steps

Parents In Mind

NCT Parents In Mind provides safe, sensitive, impactful perinatal mental health ‘peer support’, delivered by local parent volunteers. Support is available to expectant parents or those with a child under the age of two. More suited to those with mild difficulties, it can make a huge impact. A case study is shown below to highlight the support Parents in Mind can have, and encourage other families to reach out.

Case Study 4 – Family who were supported by Parents in Mind

Amelia & Frankie

We aren't meant to do this alone

I longed to be a Mum. Nothing else seemed to matter. I spent hours thinking, my life would be complete with a baby.

When it didn't happen naturally, I started fertility treatment. This had to be stopped, as they found abnormal cells which needed medical intervention. Having a baby got put on hold. Receiving then, I started trying again. I had a miscarriage and then had to end another pregnancy due to the baby not being strong enough.

I got pregnant again, then 6 months into my pregnancy, I felt sad and alone. I felt so guilty for feeling this way, I couldn't share it with anyone. People would think I was ungrateful. I was pregnant, I had waited so long for this life inside of me! Thanks to a kind midwife who took the time to ask twice, 'Really, are you alright?' I felt safe to share my loneliness.

She told me about Parents in Mind. They changed everything! I felt I could share the difficult feelings I had kept to myself. I changed my working hours so I could go to the group every week. We walked the journey of pregnancy, birth and newborn days. Through the ups and downs, there was someone who understood. Mum guilt is hard but talking to my friends makes it a little easier. My son is pretty amazing, there are hard moments but I am strong and love being a Mum!

In the words of Frankie "I am loved more than I will know. I am glad my Mummy got the support she needed, as we aren't meant to do this alone. When she feels supported, it helps her to be there for me. Whenever there is music on, I put my arms in the air and wiggle. It makes me happy hanging out with my mummy and my friends. I want other babies to have this".

REVIEW

Key stakeholders and parents were consulted in pulling together this first local strategy. During the process there was a change in government, and when the strategy was published there was economic uncertainty around the future of the Start For Life Programme. Data has been used to give a means of comparison when the strategy is reviewed in 2027.

Together we can aim higher for babies and their parents in Halton.

APPENDICES

Appendix 1: Definitions

Co-production - “a way of working that involves people who use health and care services, carers, and communities in equal partnership; and which engages groups of people at the earliest stages of service design, development and evaluation.”
<https://www.england.nhs.uk/always-events/co-production/>

Health inequalities - “avoidable, unfair and systematic differences in health between different groups of people.” (Kings Fund, 2020)

Infant Mental Health – the young child’s capacity to experience regulate and express emotions and form secure relationships. This underpins the social and emotional wellbeing, and development of children^{xx}. Having a good enough relationship with a caregiver means their physical, social and emotional needs are being met (infant mental health).

Mild – moderate mental health difficulties – is a way of describing the extent to which the difficulties are impacting on a person. Mild suggests the difficulties are just beginning or small. Moderate is used to describe when a person is experiencing more difficulties, which are having a negative impact. This strategy has focused on people who would fit this description as we know life is challenging for them, and it is often more straightforward - the earlier babies and their families access support. We never want to underestimate the challenges faced by people in this term. There is recognition that different interventions are recommended, depending on the severity of the difficulties.

Perinatal period – is from conception to the end of the first postnatal year, however, some now consider it to be end of the second year.

Perinatal mental health – refers to the way parents or carers may think or feel, when expecting or caring for a baby under two. This can be a particularly vulnerable time for adults, and support is required as soon as a need arises.

Parent – infant relationships – is a term used to describe the quality of the relationship between a baby and their caregiver in the perinatal period. ‘Caregiver’ can refer to any adult responsible for meeting the needs of a baby for example, mother, father, grandparent or foster carer. We think about both how a caregiver feels towards their baby and how the baby feels towards the caregiver.

Appendix 2: One page summary

- Are you finding it hard to connect with your baby?
- Are you finding it hard to calm your baby?
- Are you feeling sad or worried?
- Difficult birth?
- Don't know who to speak to?

The first 1001 days

The first 1001 days, from conception (start of pregnancy) to age 2, is a critical stage when our brain develops faster than at any other time in our lives.

Babies learn from all interactions and the most important thing is that they feel you are with them.



Having a baby is a big change and can be challenging for lots of reasons



Our Family Hub Team are here to help.

It's OK to ask for help

Parents have told us it can be hard to ask for help. We want you to know that most parents need help sometimes, our friendly and professional Family Hub team are here for you.

Please find someone you feel comfortable speaking to. We care about you and your family.

Your baby may show they are struggling by:

- Being very difficult to soothe
- Sleeping or feeding problems
- Crying for long periods of time
- Making little eye contact with you
- Being passive and not expressing their needs



Appendix 3: Halton Start for Life 0-1yr pathway



www.haltonfamilyhubs.co.uk



Funded by UK Government

Appendix 4: Key contacts

Service	Contact information
Building Attachment and Bond service	01928 568162
Dad Matters	Tom Byrne, Dad Matters Co-Ordinator (Halton) Home-Start Warrington & Cheshire 07856 916685 tom@homestartwarringtonandcheshire.org.uk https://homestartwarringtonandcheshire.org.uk/
Family Hubs in Halton	https://www.haltonfamilyhubs.co.uk/
Mental Health Helpline (Merseycare NHS – crisis service)	0800 051 1508 Text Support text SHOUT to 85258 NHS 111
Parents in Mind	Parents in Mind Pregnancy Padlet - Warrington & Halton
Specialist Perinatal Service	01925 275 303 https://www.merseycare.nhs.uk/our-services/professionals/halton/specialist-perinatal-service-halton-referrals
Start for Life Emotional Wellbeing Team	0151 495 5065 Email: bchft.startforlifewellbeingteam@nhs.net
Talking Therapies	https://www.merseycare.nhs.uk/our-services/halton/talking-therapies

Appendix 5: Useful Resources

1. Cross Party Manifesto, 1001 Critical Days: <https://www.nwscnsenate.nhs.uk/files/8614/7325/1138/1001cdmanifesto.pdf>.
2. Dad Matters <https://dadmatters.org.uk/>
3. DoH (2022) Family Hubs and Start for Life Programme Guide https://assets.publishing.service.gov.uk/media/62f0ef83e90e07142da01845/Family_Hubs_and_Start_for_Life_programme_guide.pdf (August 2022).
4. Fatherhood Institute <https://www.fatherhoodinstitute.org/NHS>, NHS Long Term Plan <https://www.longtermplan.nhs.uk/publication/nhs-long-termplan>.
5. NHS, Five Year Forward View for Mental Health: <https://www.england.nhs.uk/wp-content/uploads/2016/02/Mental-Health-Taskforce-FYFV-final.pdf>.
6. NICE (2021) Antenatal Care <https://www.nice.org.uk/guidance/ng201/resources/antenatal-care-pdf-66143709695941> Accessed 28/06/24

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REPORT TO:	Health & Wellbeing Board
DATE:	15 January 2025
REPORTING OFFICER:	Executive Director, Adults Services
PORTFOLIO:	Adult Social Care
SUBJECT:	Adult Social Care Annual Report 2023/24
WARD(S)	Borough Wide

1.0 PURPOSE OF THE REPORT

1.1 To present to the Executive Board the Adult Social Care Annual Report for 2023-2024.

2.0 RECOMMENDED: That the report be noted.

3.0 SUPPORTING INFORMATION

3.1 Attached to this report is the ASC Annual report for 2023-2024, also known as 'The Local Account'. An Easy Read Version is also attached.

3.2 The Adult Social Care Annual report is now an embedded part of the reporting cycle for Halton Borough Council. Whilst it is not a mandatory requirement, it is viewed as good practice by ADASS.

3.3 The Annual report demonstrates an open approach to our successes, challenges and where we can develop further, in order to improve outcomes for people with care and support needs and their unpaid carers within Halton.

3.4 As agreed by SMT in July 2024, the theme of this year's report is 'prevention and wellbeing'. The focus of the report is to highlight the work that has taken place across the Directorate in recognising and responding to the National and Local drivers of prevention as a catalyst for change in how services are delivered to prevent or delay the need for statutory services.

3.5 The report is structure around the following areas:

1. Ensuring prevention and wellbeing is a priority across everything we do
2. Supporting prevention and wellbeing by understanding our residents needs
3. Supporting prevention and wellbeing through our services

3.6 The report also highlights what the local provision of ASC looks like, along with some high level data on service usage, spend, customer care and safeguarding.

3.7 This year a new section '*The Year Ahead – Priorities for 2024-2025*' has been included. The aim of this section is to provide a structure to the report that will allow progress against priorities to be measured year on year.

3.8 The report will also be circulated to:

- Health, Policy and Performance Board
- Adults with Learning Disabilities Board
- Newsletters (Adult Social Care News Bulletin; ASC Monthly Mashup)

4.0 **POLICY IMPLICATIONS**

4.1 Whilst the Annual Report is not mandatory it is good practice, as endorsed by ADASS, and supports communication, information sharing and transparency between adult social care, the people who use our services and our stakeholders. It also serves as a review mechanism for Adult Social Care to consider as part of ongoing, continuous service improvement measures.

5.0 **FINANCIAL IMPLICATIONS**

5.1 The Adult Social Care Annual Report is published online, incurring no print costs.

6.0 **IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

6.1 **Improving Health, Promoting Wellbeing and Supporting Greater Independence**

The work of the Adults Directorate is essential to support the most vulnerable members of the community. This report sets out some of the key work undertaken across adult social care over 2023/24 to support people's wellbeing.

6.2 **Building a Strong, Sustainable Local Economy** None.

6.3 **Supporting Children, Young People and Families** None.

6.4 **Tackling Inequality and Helping Those Who Are Most In Need**

As 6.1.

6.5 **Working Towards a Greener Future**

None.

6.6 **Valuing and Appreciating Halton and Our Community**

None.

7.0 **RISK ANALYSIS**

7.1 As the report will be a publicly available document this may prompt challenge, comment or enquiry from the community and stakeholders.

8.0 **EQUALITY AND DIVERSITY ISSUES**

8.1 An Equality Impact Assessment (EIA) is not required for this report.

9.0 **CLIMATE CHANGE IMPLICATIONS**

9.1 None.

10.0 **LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

None under the meaning of the Act.

Adult Social Care Annual Report (2023-2024) Briefing Note for the Health and Wellbeing Board

The Adult Social Care Annual Report is now an embedded part of the reporting cycle for Halton Borough Council. Whilst it is not a mandatory requirement, it remains viewed as good practice by The Associate of Directors of Adult Social Services (ADASS).

The Annual Report demonstrates an open approach to our successes, challenges and where we can develop further, in order to improve outcomes for people with care and support needs and their unpaid carers within Halton. It is an opportunity to showcase the breadth of work the directorate undertakes and supports communication, information sharing and transparency between adult social care, the people who use our services and our stakeholders.

The focus of the 2023-2024 report is '*prevention and wellbeing*'. The report highlights the work that has taken place across the Directorate in recognising and responding to the National and Local drivers of prevention as a catalyst for change in how services are delivered to prevent or delay the need for statutory services, and to empower adults with care and support needs to have more control over their wellbeing and the services they access.

The report is structured around the following areas:

1. Ensuring Prevention & Wellbeing is a priority across everything we do
2. Supporting prevention and wellbeing by understanding our residents needs
3. Supporting prevention & wellbeing through our services

This year a new section 'The Year Ahead – Priorities for 2024-2025' has been included. The aim of this section is to provide a structure to the report that will allow progress against priorities, outlined in the Adult Directorate Business Plan 2024/25 to be measured year on year.

The report also highlights what the local provisions of ASC looks like, along with some high level data on service usage, spend, customer care and safeguarding.

Please contact frances.alecock@halton.gov.uk for any further information relating to the report or its contents.



Adult Social Care Annual Report 2023/24

Foreword

Welcome to the Adult Social Care Annual report for Halton Council 2023-24

This annual report provides an opportunity to share with you the progress we have made and the challenges we face in providing care and support to adults and their carers across Halton.

In 2023, Halton Borough Council made a commitment to provide opportunities for meaningful consultation to everyone who lives or works in Halton. The 'Big Conversation' gives people a chance to have a say in how we can create an improved borough in all aspects of everyday life and was the basis for the development of the Council's Corporate Plan, which is totally unique and meaningful to the people of Halton.

'Improving Health, Promoting Wellbeing and Supporting Greater Independence' was one of the themes to emerge as important to the residents of Halton, and is now one of the Council's priorities. While prevention, wellbeing and delaying the onset of ill-health and dependence on support has always been a priority for Adult Social Care in Halton, this renewed focus has given us the opportunity to ensure that we have the foundations in place to deliver on our commitments.

Adult Social Care is an area of significant investment for the Council. In 2023/24, the Adult Social Care net budget was £57,668,210, which represents 40.7% of the overall Council budget.

We've done some important work this year in ensuring that our vision and focus for Adult Social Care's role in prevention and wellbeing is embedded in everything we do. This report showcases just some of the ways we are transforming how we support people so that they have more control over their own health and wellbeing, from their first point of contact with the Council to empowering them to remain independent for as long as possible in their own homes.

We want local people at the heart of what we do so that they can decide what's best for themselves and how they choose to live their lives. While we still have plenty to do, I am confident that if we continue to build on our commitments to prevention and wellbeing, and in building meaningful partnerships with the people and local services of Halton, we can improve the long-term health and wellbeing outcomes for all of our residents with care and support needs and their carers.

I would also like to take this opportunity to thank all of our partner agencies and stakeholders for their contribution in helping Adult Social Care achieve what we have over the last year. It is through this co-ordinated approach that we are able to help people achieve the health and wellbeing outcomes they want effectively and efficiently.

Councillor Angela Ball

Portfolio Holder for Adult Social Care



Adult Social Care in Halton

Working together to prevent ill health and support wellbeing

The Adult Social Care Teams in Halton are committed to improving the health and wellbeing of local people so that you can all live **longer, healthier and more independent lives**. We know that good physical and mental health is key to everyone's happiness. It enables you to engage fully with your communities and with the things that matter to you most.

We believe that every person in Halton should be able to access the **right information at the right time** so you can feel empowered to make the right choices to **live the life you want, doing the things you like in a place you call home**.

This **Adult Social Care Annual Report** highlights some of the work we are doing in Halton to help you achieve this with a focus on prevention and wellbeing. It showcases how Adult Social Care in Halton is working to make a difference that matters to you and how you live your life. Helping you to stay healthy, happy and independent for as long as possible and supporting you to manage any problems that may arise is our priority.

This report also identifies **areas of focus for the future** and how we will continue to work with you to provide the **services that will make a difference to your everyday lives**.

Investing in prevention and wellbeing during 2023-2024 is the foundation of our longer-term vision and we are grateful to our partner organisations in health, social care and beyond for their contributions and collaborative working for the people of Halton.

The areas highlighted in this report represent just a small amount of the work undertaken by the Adult Social Care Teams. For more information on the work we do please contact ASCServiceDevelopment@Halton.gov.uk.



Adult Social Care in Halton

What we do

Working in partnership with the people of Halton and a variety of local and national organisations, Adult Social Care offers a wide range of services to enable and support adults and carers to **live well, live independently and to achieve the outcomes that matter to them.**

In-line with the [Care Act 2014](#), Adult Social Care has a responsibility to make sure that people who live in Halton and appear to have needs for care and support will:

- ✓ Have a care assessment to see if they are eligible for a care package.
- ✓ Get the information and advice they need to make good decisions.
- ✓ Receive services that prevent their care needs from becoming more serious.
- ✓ Be supported to make decisions about how they want their needs to be met and in preparing their care and support plan.
- ✓ Be offered other things beside care services that can help them stay healthy and happy.

Some of our key Adult Social Care services include:

Prevention and Wellbeing Service

Not everyone who is assessed for care and support will be eligible for a care package, however the Prevention and Wellbeing Service can still play an important role in helping you to stay independent and healthy for as long as possible. By directing everyone who comes through our doors to the most appropriate information, community resources or services, we can all work together to prevent or delay the need for more in depth care so that you can keep your skills and confidence and live the live you want to.

Community Services

This service aims to help people live a fulfilling life, retain their independence, learn new skills and avoid social isolation through undertaking meaningful activities that they choose. The service offers a wide range of opportunities for people with health conditions, learning or physical disability to engage in voluntary work, training and social activities.

Care Management

Registered Social Workers, Occupational Therapists, and other care staff work with individuals and families to help people maintain a good quality of life. Through connecting people to support in their communities to arranging appropriate social care support because of frailty, illness, disability or a mental health condition, people's needs can be met in a holistic way.

Halton Intermediate Care and Frailty Service (HICaFS)

Integrated with health, this service supports the hospital discharge process and reablement of patients after a hospital stay. It also supports people through social care, occupational therapy, and nursing where they can be cared for at home, avoiding unnecessary hospital admission or re-admission.

Mental Health Services

Offer prevention, identification of mental ill health, early intervention, and access to support, treatments and recovery. Working closely with local partners such as health, education and employers, our mental health teams look to improve the wider services that affect poor mental health, such as housing, to create a place-based approach to improving mental wellbeing.

Independent Living Services

This service helps people maintain their dignity and independence to remain living in their own home. The Housing Solutions Service helps people who are homeless or threatened with homelessness under the Council's statutory duties. The Integrated Safeguarding Unit works with services, providers and the public to ensure that people are safeguarded against abuse.

Quality Assurance Team

Supports adult social care services that are commissioned by Halton Borough Council to ensure that they deliver services in line with legal, contract and quality requirements. The Team work closely with providers that deliver care at home and residential care (in a care home or in a supported living environment) as part of the council's commitment to continuous quality improvement to make sure that people who use those services are getting the best service and outcomes for them.



What we achieved from April 2023 to March 2024

Ensuring that prevention and wellbeing is a priority in everything we do

What we set out to do: Embed prevention and wellbeing into our long-term plans

We all want longer, healthier, more independent lives - for ourselves, our families and our friends. Prevention is about helping people stay healthy, happy and independent for as long as possible. This means reducing the chances of problems arising in the first place and, when they do, supporting people to manage them as best as possible so that they can continue to enjoy the things they like to do.

We want everybody who lives in Halton to feel able to make healthy choices and have more control over how they want to live their lives.

To do this we want to make sure that prevention and wellbeing are part of our long-term plans so that we can focus on new ways to provide opportunities for people to determine what they need to live their lives well.

How will this improve people's lives?

We want the plans we have put in place this year to help everybody in Halton to:

- Live as independently as possible.
- Live in their own homes for as long as possible.
- Have a better quality of life and improved wellbeing.
- Feel supported and part of their community.
- Make their own decisions on the care they receive.
- Feel able to do the things that they want to do and live the lives they want to live.
- Have access to clear, concise and meaningful information and advice at the right time.

What we will do next...

We will work in partnership with the people of Halton and local partners so that prevention and wellbeing is at the heart of everything that we do. We will talk to people that use our services, and their carers, to make sure that what we are doing is having a positive impact on people's lives and we are aware of where we can improve.

What we achieved from April 2023 to March 2024

Supporting prevention and wellbeing by understanding our residents' needs

What we set out to do: Engage our communities and people who use services

We know that people with 'lived experience' are best placed to advise on what support and services will make a positive difference to their lives.

Coproduction is a way of working that involves people who use health and care services, their carers and communities in equal partnership to develop solutions to best meet their needs. A local Coproduction Charter was developed with people with lived experience and which sets out how we want to work with them to identify gaps in services and how we can make decisions together to create better services across Halton.

We want to use the Charter in all areas of our work to :


- Engage people who live in Halton to be part of developing our services and feel able to suggest ways in which we can improve what we do.
- Ensure all of our Adult Social Care workers are trained so that they have the skills, knowledge and understanding of how best to work with those who need our support to enable them to determine their own wellbeing outcomes.


What we set out to do: Listen to our communities and people who use services

We encourage people to share feedback, compliments or complaints about our services, as that provides us with valuable opportunities to learn and improve.

Please contact ssdcustomercare@halton.gov.uk or telephone Halton Borough Council's contact centre on 0303 333 4300 and ask for the Adult Social Care Customer Care Team.

If you would like help to speak to your health or social care service to make your views and wishes known, then you may benefit from having an advocate. An advocate can support you to express your views and wishes and help you stand up for your rights. Healthwatch Halton Advocacy Hub offers free, confidential and independent advocacy support to Halton residents who need help with this. Their contact details are:

 **Telephone:** 0151 347 8183

 **Email:** advocacy@weareecs.co.uk

How will this improve people's lives?

People will feel listened to, involved and understood and help us to understand: ***“What does a good life look like for you and how can we work together to achieve it?”***

What we will do next...

We will use the Coproduction Charter to guide how we work with our communities and people who use our services. We will look for opportunities to speak to our communities and listen to what matters to them.

Adult Social Care Survey – what you said...

Each year, we conduct a survey of a random selection of people in receipt of adult social care services. The survey asks people about the services and support they receive as well as some questions about their general quality of life.

These surveys are conducted nationally by all local authorities and the information is used by NHS England to provide a national picture of adult social care services.

Here are some quotes from our most recent survey:

"I wouldn't be where I'd be without the help I get from my psychiatric team and my amazing social worker. I'm on my own completely. After losing one of my sons in 2021. The support I receive, the hours to get me by so that I have a good quality of life. My home will be suitable once I get a wet room. I know there's procedures and waiting lists. My case gets reviewed on a 3 month basis and know if I need more it will be reviewed."

"I love my PA
[Personal Assistant]
Alan – he makes me
happy."

"I enjoy going to my
voluntary day care as
I socialise with other
people and I see
different places."

"I receive a direct payment and
have four Personal Assistants
who take me out and about
when I am not at college. I
really enjoy my time with them I
do all the activities I like."



What we achieved from April 2023 to March 2024

Supporting prevention and wellbeing through our services

What we set out to do: Improve our prevention and wellbeing services

Working together and making the best use of all available resources across Halton, including the Council, private sector, voluntary sector, community sector and the health services, will ensure that we can meet the needs of our residents now and in the future.

2023 to 2024 was an exciting time for Adult Social Care in Halton with the development of the following services that focus on health, wellbeing and staying independent:

Halton Borough Council Prevention and Wellbeing Service

This service is the first point of contact or “*Front Door*” for anybody seeking information about wellbeing or the support that is available to them.

The Prevention and Wellbeing Service offers support, information and signposting to other relevant services to provide people with the knowledge, skills and confidence to make healthy choices. The aim of this service is to make sure that people are directed to the right level of support and information for their needs and circumstances.

Wellbeing Officers are trained in providing relevant information about community services, for example welfare and benefits advice, local activity and social groups and support for carers.

Social Care Workers and Occupational Therapists are also available for those who have more complex needs and are eligible for more in-depth support and a social care or carers assessment.

Community Reablement Service: supporting independence at home

Some people need a period of recovery from illness or a hospital stay to help them regain their independence and return back to their home safely and this is called ‘reablement’.

This year we have focused on building our community based service, alongside the Halton Intermediate Care and Frailty Service (HICaFS), so that our care and support workers can provide short-term reablement services closer to people’s homes.

Working closely with therapists, community care workers and social workers our care and support workers can now enable people to retain or regain their independence or provide evidence to support assessments of longer-term needs without having to leave their own homes.

How will this improve people’s lives?

Having access to the right information and services that support health, wellbeing and independence, will help stop problems from arising in the first place and can support you to stay in your own home for longer, living the life you want and in the way you want to live it.

If you would like more information about wellbeing, care and support available in Halton please contact the Prevention and Wellbeing Service on 0151 907 8306 or visit www.halton.gov.uk and search 'Adult Social Care'.

What we will do next...

We will develop an information guide designed to bring together all relevant local services and to signpost people to existing services that can support them to stay independent and well.

What you've told us about the Prevention and Wellbeing Service...

"The service with the Occupational Therapist was first rate. He gave me confidence to carry out tasks on my own. I am most grateful for this service. Thank you for this service."

What you've told us about the Reablement Service...

"We would like to take the opportunity to thank everyone in the reablement team for all their care and attention. Carers have been kind, cheerful and respectful in aiding with washing and dressing. The OT and physio have made a huge difference in regaining strength and mobility and also confidence. The equipment provided was helpful and much appreciated. The team have helped both Reg and the family in keeping him safe and well at home."

"I have been VERY HAPPY with the carers who have helped me to get and feel better. They have been, kind, gentle and caring with really good humour and stimulating conversation. THANKS TO ALL OF THEM."

"I would like to say a big thank you to all that helped me get back on my feet after my stay in hospital. The girls was all lovely and wanted to go that little bit beyond."

"HiCaFS, I write with many grateful thanks for your team who attended me at home recently after an infection. I had never heard or known about the work which you undertake. So kind, thoughtful and very professional. Many thanks once again."

Prevention and Wellbeing Service: John's Story

John was initially referred to the Prevention and Wellbeing Service (PWS) for a carers assessment, however, it became apparent that his own social care needs were of paramount importance as he was struggling with most aspects of daily living, wellbeing and finances. John was also facing eviction due to rent arrears. John was low in mood following the loss of his wife.

A PWS Wellbeing Officer visited John and spent time with him developing a relationship so that John felt comfortable to open up and identify goals to help him.

Over a short period of time John was supported to attend the Citizen's Advice Bureau to get a benefits check, and support with his finances and debts. He was able to set up direct debits to ensure payments were made on time and was able to get his rent back on track.

Through these initial steps, John then began to access the community more and the Wellbeing Officer linked him into a group which was of interest to him.

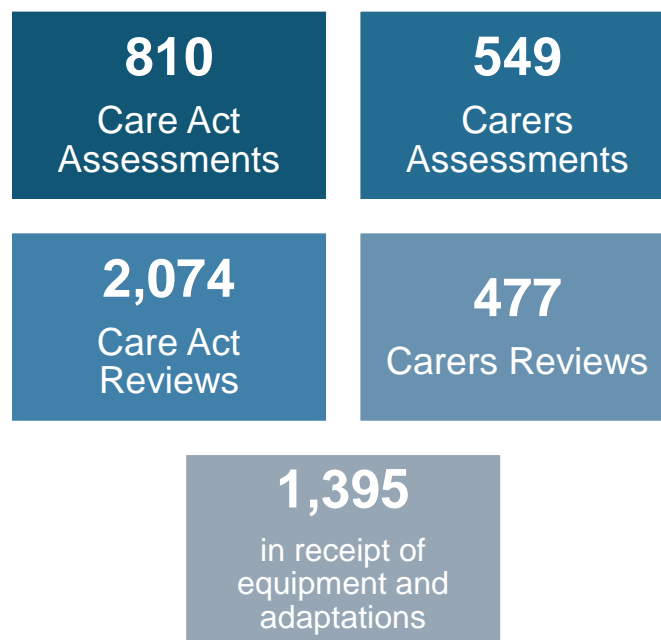
John became more open about his mental health struggles and the Wellbeing Officer was able to signpost and support him to appropriate mental health services that John could access if/when he wants to.

With the support received John has started to develop his own resilience and complete tasks himself which had become too much for him. By focusing on his community networks and own strengths he has not needed the input of formal statutory services.

Key Facts & Figures

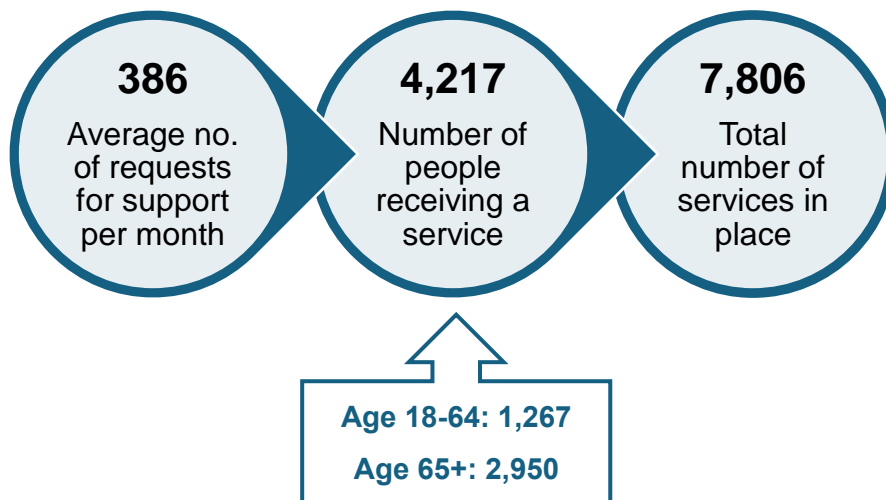
Collecting and analysing data helps Adult Social Care services in Halton to monitor capacity, pick up on changes in demand for services, provide evidence to direct future service development and help allocate resources across the range of services we offer. The figures below show the demand for Adult Social Care and across which services. It also includes data from our Adult Social Care Customer Care Team that helps us to act where experiences have fallen short of a person's expectations.

Assessment of needs



Services in place

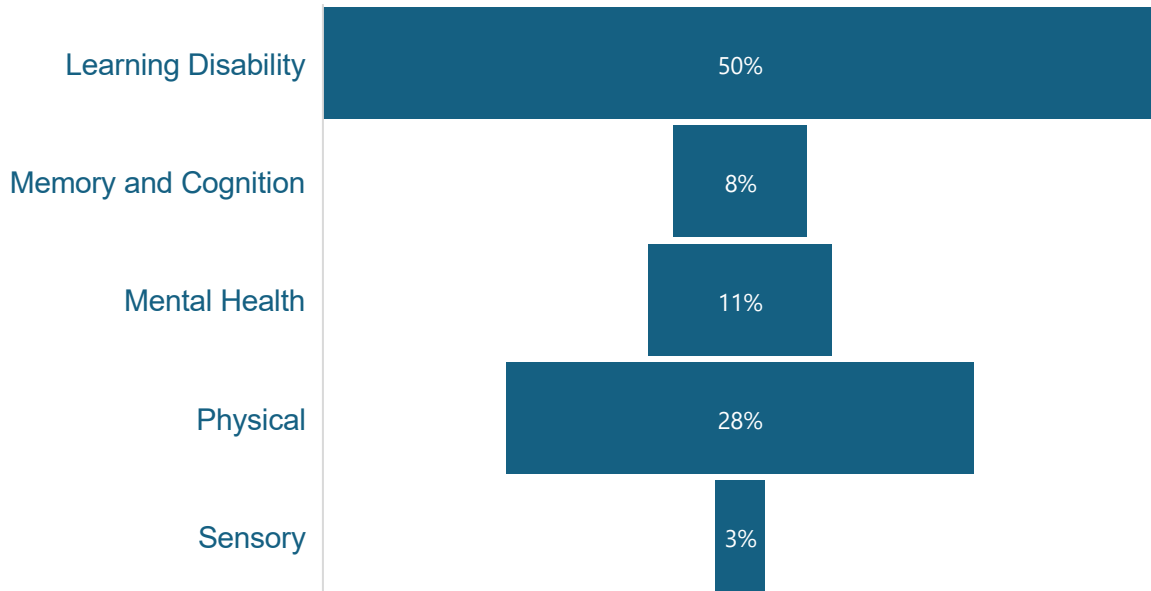
On average, there are **1,227** people a month in receipt of Telehealthcare



How much did we spend?

In 2023/24 Halton Borough Council spent almost **41%** of its total expenditure on Adult Social Care.

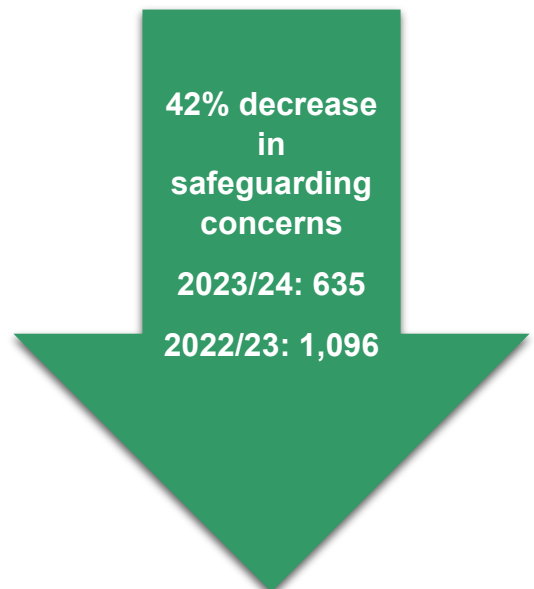
Percentage of funding allocation by support need:



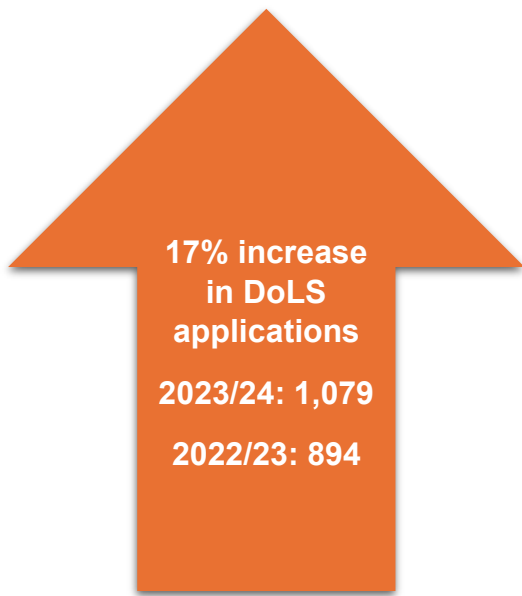
Safeguarding

Adult safeguarding is about preventing and responding to concerns of abuse, harm or neglect of adults. Adult Social Care takes a person-centred approach so that adults, their families and carers are working together with agencies to find the right solutions so that everybody is:

- Safe and able to protect themselves from abuse and neglect.
- Treated fairly and with dignity and respect.
- Protected when they need to be.
- Easily able to get the support, protection and services that they need.



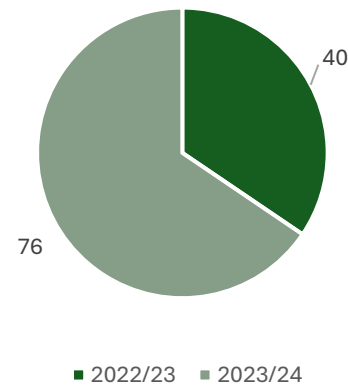
Deprivation of Liberty Safeguards (DoLS)



The Deprivation of Liberty Safeguards (DoLS) ensure that adults lacking mental capacity are properly represented and not deprived of their liberty unless it is in their best interests. Arrangements must be assessed to check they are necessary and in the person’s best interests.

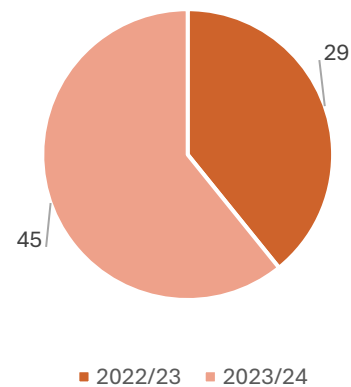
Customer Care Compliments

During 2023/24 Adult Social Care Services received 76 compliments, this an increase of 36 from 2022/23. Compliments received are in the main from people who use services, their families or carers, to thank workers and or teams for their support that has gone above the realm of their daily role; they can also come via other teams, providers and partner agencies.



Customer Care Complaints

45 complaints were received between 1 April 2023 and 31 March 2024. This is an increase of 16 from the previous year. This equates to 1.09 per cent of the people who Adult Social Care provide support for. Since the introduction of the Resolving Complaints and Improving Services Policy in 2019/20, complainants now have the opportunity to have their complaints resolved without going via the formal complaints process, resulting in a quicker resolution timeframe and outcome. Should this not be the case, they can progress to a formal complaint.



The Year Ahead

Priorities for 2024-2025

We have made good progress this year in laying the foundations for working even more closely with people with lived experience to gain insight into what matters to them and how we can work together to improve our services in the future, to ensure everyone is living the life they want. However, there is still lots more to do and our aims and priorities for next year will continue to be about delivering high quality services and information to improve health, promote wellbeing and support greater independence for the people of Halton throughout their lives.

Some areas of focus for next year include:

Universal Prevention and Wellbeing

We will continue to develop services that connect people with their communities.

Independent at home

We will continue to identify an individual's needs early so that people can remain independent and stay in their own homes longer.

Care in the home

We will continue to focus on "home first" and providing care at home.

Good, local, affordable, quality care

We will work in partnership with local organisations and community services to ensure residents have access to all relevant services.

Confident and skilled workforce

We will continue to invest in our staff so that they can support people to live the lives they choose.

Talk to us...

If you would like to give us feedback on any aspect of this report and what we have said or if you would like further information about this report, we would love to hear from you:

- Please email: ascservicedevelopment@halton.gov.uk or telephone Halton Borough Council's contact centre on 0303 333 4300 and ask for Adult Social Care Policy, Performance and Customer Care Team.



If you would like to speak to someone about having an assessment for social care:

- Please call our dedicated Social Care telephone line or call into one of our Halton Direct Link 'one-stop shops' and speak directly to one of our staff.
- Website: www.halton.gov.uk
- Telephone: 0151 907 8306 (Halton Adult Social Care 24 hours)

Ever considered a career in care?

There are many diverse and rewarding roles and professions in the care sector. If you would like to know more visit the Skills for Care '[Think Care Careers](#)' website or Halton Borough Council's Careers Website (<https://haltoncouncilcareers.co.uk/>) for more information and our current opportunities.



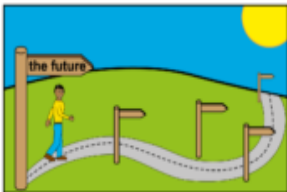
Adult Social Care Annual Report 2023-2024

report



This report tells you what Adult Social Care in Halton has done in the last year to make peoples lives better.

the future



It also tells you what we will do next year.

thank you



Along with our hardworking social care staff we work with lots of different people and organisations to make sure our services meet your needs.

We would like to thank them all !

What does Adult Social Care in Halton do?

quality care



We provide different types of care and support to help people live the life that they want.

safe home



We help people to live safely and independently in their own homes.

healthy and well



We help people to stay well and healthy so they can do the things they enjoy and live longer, healthier, and more independent lives.

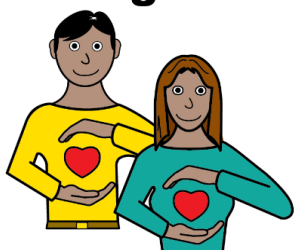


We point people in the right direction for other services and support that is available in their community.

What has Adult Social Care done in 2023-2024 to improve people's lives?

1. We looked for new ways of helping people to stay well:

being well



We have spent time this year looking at how we can help you to stay well instead of only helping when you are struggling. This is called **Prevention**.



PLANNING

We made sure prevention and helping people to stay well was part of all of our plans.

body and mind healthy



What this means for you:

We want the plans we have put in place to help everybody in Halton to

Live the life they want, doing the things they like in a place they call home !

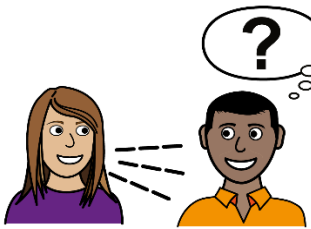
2. We looked for new ways to listen to you:

your say



We wanted to understand what is important to you and what you think you need to live the life you want.

ask you what you think



We looked for ways to make sure that you can have your say about how we can improve our services in the future.

better care



We trained our social care workers so that they know how to work with you and to listen to what is important to you so that you can help yourself to stay well.

my care



What this means for you:

Listening to what you think is important can help us to work together to make your life better.

3. We launched new services to offer the best care for you:

assessment and referral team



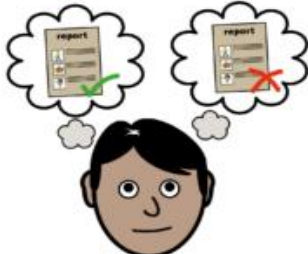
Our new *Prevention and Wellbeing Service* is the first place you can go to get support and information about staying well and where to find more support in your community.

care at home



The Community reablement service helps people who have been ill or in hospital to be able to recover in their own homes.

choice



What this means for you:

Our services can help you access the right information and services at the right time so that we can stop problems before they are too serious.

In Halton in 2023-2024 we also:

support



Helped **4217** adults to get extra support with their everyday lives.



Helped **1395** adults to get equipment or adaptations to make it easier to live in their own homes.

assessment



We completed **810** Care Assessments to make sure you had the right care and support.

And **549** Carers had their needs assessed

review of your care plan



We completed **2074** Reviews to make sure your care was still right for you.

And **477** Carers also had a review.

What we plan to do in 2024-2025:

told about community services



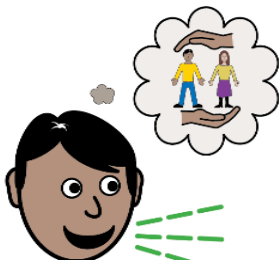
We will make sure you know about the support you can get from Adult Social Care and other services in your community.

safe home



We will help you to stay in your own home for as long as possible.

your say



We will help you be more involved in planning our services.

training



We will make sure our staff are trained so they know how to listen to what people want to live a happy life.

Talk to us:



If you have any comments about our services – good or bad - we would love to hear from you.

Please email:

ssdcustomercare@halton.gov.uk

Or Telephone Halton Borough Council on **0303 333 4300** and ask for the Adult Social Care Policy, Performance and Customer Care Team.



Sometimes people need some extra help talking to their health or social care services to make sure that that everyone understands what they want.

Healthwatch Halton Advocacy Hub is free and confidential and can help with this.

You can email them at:

advocacy@weareecs.co.uk

or Telephone: 0151 347 8183



If you would like to speak to someone about having a **social care assessment** please call our dedicated Social Care telephone line or call into one of our Halton Direct Link 'one-stop shops' and speak directly to one of our staff.

Website: www.halton.gov.uk

Telephone: 0151 907 8306 (Halton Adult Social Care 24 hours)



Ever Considered a Career in Care?

There are many different roles in the care sector.

If you would like to know more visit the:

['Think Care Careers'](#) website or [Halton Borough Council's vacancy page](#) on our website for our current opportunities.