

Best Start in Life Plan



Newcastle Upon Tyne

2026-2029



Newcastle's Best Start in Life Plan

In July 2025 the government published its strategy aimed at 'Giving Every Child the Best Start in Life'. This important and ambitious strategy makes clear the government's commitment to the Early Years. It sets targets for local areas to demonstrate that more children are achieving a Good Level of Development at the end of the school reception year and requires local areas to develop their Best Start in Life Plan to describe how they propose to achieve those targets.

Newcastle shares those ambitions. The delivery of this Plan aligns with Newcastle's ambition to become a Marmot City, reflecting the long-standing Marmot principle that giving every child the best start in life is central to improving outcomes and reducing inequalities. Through Children and Families Newcastle, the Council and its partners are ready to ensure we deliver on our vision to give every child in Newcastle the Best Start in Life.

This Plan will complement the city's strategic developments to support the first 1001 Critical Days of life, for example Newcastle's Infant Mental Health Strategy and Infant Feeding Strategy.

This Plan sets out how we intend to put our vision into action and achieve our targets.

Section 1 will cover:

- Newcastle's vision for Best Start in Life
- What the data tells us about Newcastle and our children aged 0-5
- What our families are telling us about their experiences and what support they need.
- What we learn from our current services
- Our Priority Families
- Our targets

Section 2 will cover:

- What we will do: Our Best Start in Life priority action areas

Section 3 will cover

- Key enablers for success

Our city is vibrant and changing, and our families change with it. This Plan marks the start of the next four years of our Best Start journey. We will refine and add to our Plan as we learn from our delivery, as we hear from our families and as we respond to emerging government guidance.

Some important terms in this Plan:

Good Level of Development (GLD): This is measured at the end of the school reception year and looks at whether a child has achieved the expected level for the Early Learning Goals in the prime areas of learning (which are: communication and language; personal, social and emotional development; and physical development) and the specific areas of mathematics, literacy, understanding the world and expressive arts and design.

Free School Meals (FSM): Free School Meals (FSM) provide free school lunches for children from families on lower incomes. All children in reception and years 1 and 2 are entitled to a free meal. In this plan, FSM refers to children who would be eligible beyond year 2 based on family income.

Special Educational Needs and Disability (SEND): This term refers to children and young people (0-25) who have learning difficulties or disabilities that make it harder for them to learn and access education than their peers.

Home Learning Environment: the conditions, activities and resources available within a child's home that support their educational development and learning.

Section 1

Our Vision

Newcastle is proud of its children and ambitious for their futures. Giving a child the best start in life matters because it sets the foundations for health, learning and wellbeing that last into adulthood. The early years shape how children grow, communicate, and cope with challenges, influencing outcomes at school, work and beyond.

In Newcastle, supporting children early helps reduce inequality, strengthen families and create better long-term outcomes for communities across the city. Getting it right in their earliest years helps children build the resilience and stability they need, reducing the likelihood of crisis interventions later in life.

The strategy sets out the city's vision for our children and our plan to take action to ensure that our children finish their first year of school feeling:

- Safe – at home, at school and in their communities
- Healthy – protected from preventable disease and supported with positive health choices
- Happy – enjoying their childhood and feeling emotionally supported
- Learning – developing well, confident and ready to learn
- Engaged – valued, listened to and connected to their family and community

No single service can meet all the needs of a family during a child's early years. Working together across services helps ensure support is joined-up, easy to access and centred on families. This strategy sets out how health, education, early years, the local authority and Best Start Family Hubs will work together to provide consistent support that makes a real difference for children in Newcastle.

Our vision by 2028 is that:

- More children will achieve a Good Level of Development (GLD) measured at the end of their reception year of school.
- More children will receive their mandated health checks with a health visitor
- More families will have accessed our Best Start Family Hubs

Our longer term vision for 2030 is that

- We will have improved the achievement of GLD for boys and narrowed the gender gap
- We will have improved the achievement of GLD for children with special educational needs and disabilities
- We will see a reduction in the number of children requiring statutory children's social care
- We will see improvements in the dental health of our children

What the data is telling us:

In Newcastle upon Tyne, there are approximately 18,785 children aged 0-5.

The numbers of Newcastle children achieving a good level of development (GLD) at the end of the reception year at school has improved year on year since 2021.



However, Newcastle children do not achieve GLD at the same rate as the England average. In 2024/25 66.4% of children achieved GLD (1.9% below national).

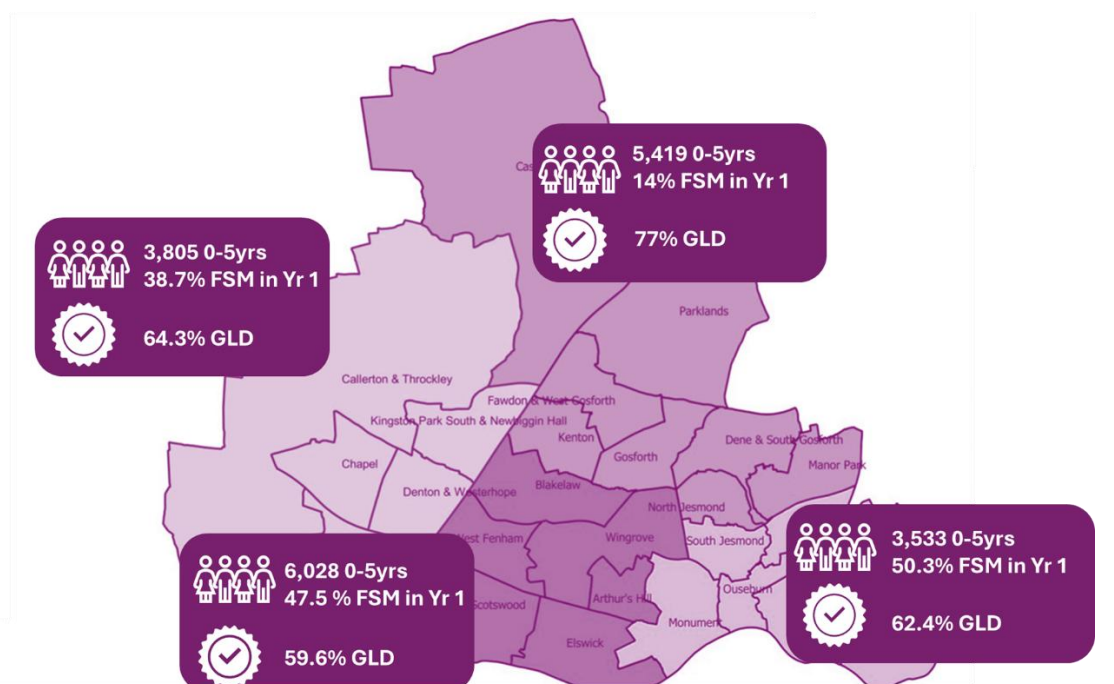
51.5% of children accessing free school meals (FSM) in Newcastle achieved GLD, although this is 0.3% above national averages.

There are significant differences between localities and wards which result in unequal health outcomes and variation in achievement of GLD across the city.

Economic Disadvantage

Financial pressures can affect family life and children's early development in different ways, including wellbeing, housing and health. This Plan recognises the challenges some families face and provides support for everyone, with extra help for families facing greater pressure.

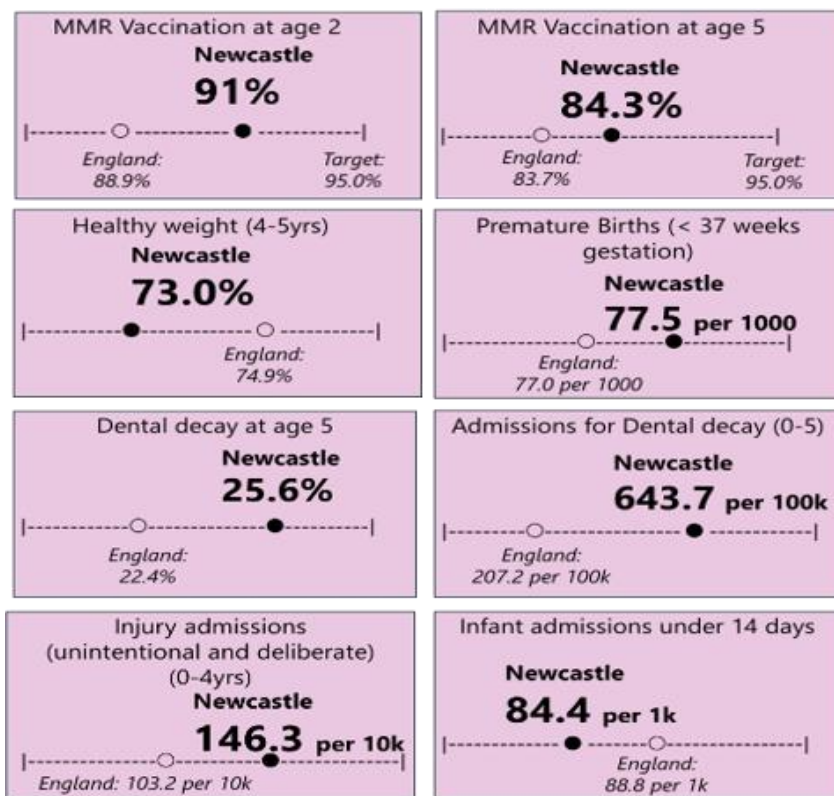
In Newcastle 43% of the population live in the 30% most deprived areas nationally. Our communities in the Inner West and the East of the city face high levels of economic disadvantage. Almost 51% of our children aged 0-5 live in the East or Inner West of the city.



There are big differences across the city's wards. GLD attainment is 31.4% higher in the North Jesmond ward than in the Elswick ward.

Health Outcomes

The health of our children has seen improvements, with MMR vaccinations up and less infant admissions to hospital than the national average. However, we still see issues with healthy weight, dental decay and injury related admissions to hospital for our youngest children.



Special Educational Needs and Disabilities (SEND)

In 2025 there were 497 pupils with identified SEND in the Newcastle school reception year.

21.1% of Newcastle children with any identified support for special educational needs or disabilities (SEND) achieve GLD, whereas the rate is 75.8% for children without SEND. Although this rate is slightly higher than the national average (20.6%), through this Plan we want to improve outcomes for our children with SEND.

Achievement of GLD for Newcastle children with SEND varies across the Localities.

All SEND pupils	Good Level of Development
Locality	
East	15.0%
Inner West	21.5%
North	27.6%
Outer West	20.2%

We recognise that many children with SEND are also eligible for free school meals.

- 42.6% of pupils are eligible for FSM in Newcastle
- 60.2% of pupils with SEND are eligible for FSM in Newcastle
- 43.7% of the 497 pupils with SEND in the 2025 Reception cohort are eligible for FSM
- Only 18.9% of pupils with SEND who are also eligible for FSM attained GLD

We want to continue to improve the GLD achievement rates for our children with SEND and to improve the rates of attainment in the East of the city.

Gender affects GLD attainment.

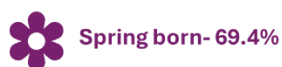


There is a 13.4 percentage point difference between boys and girls.

This gap in attainment is seen across the country and in Newcastle the gap is smaller than in some other areas of the country. We want to better understand the ways in which boys engage with the prime areas of learning in their early years.

We want to raise the attainment of boys and close the gender gap.

When you are born affects your GLD attainment.



This is understandable: a child born in the autumn term is about to turn 5 as they start school, whereas a child born in the summer has not long turned 4 years old.

We want to make sure our youngest school starters have additional support to help them be ready to learn.

Healthy Child Programme

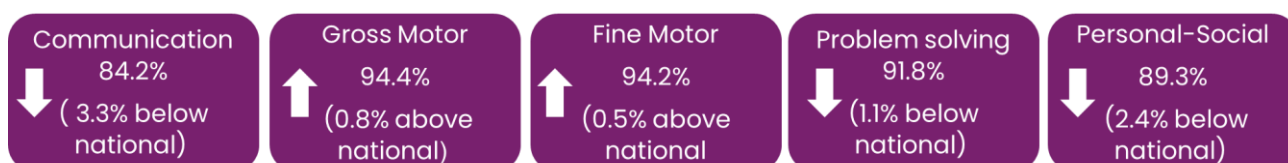
Health visitor reviews help check how young children are developing and make sure families get support early if it's needed.

Each of the mandated health checks plays an essential role in monitoring and reviewing a child's development. The 2–2.5-year review is a particularly important opportunity to assess developmental progress and is the final routine health check before a child starts school. In Newcastle's most recent published data 75.7% of children access this important check. This is 5.2% below national average.

Recent targeted work has contributed to an increased uptake of the 2-year review in Newcastle, which now exceeds the 85% target. The key priority moving forward is to ensure this improvement is sustained and that take-up remains at this level.

Uptake of this check is different across the Localities, with the highest uptake in the North & Outer West, and the lowest uptake in the East & Inner West.

Among children who received the check, 79.2% in Newcastle were at or above the expected level across all five areas of development (listed below). This is 2.2% below the national average of 81.4%.



A recent review of health visitor identified needs showed that communication is the main developmental need for children in Newcastle.

English as an Additional Language

In Newcastle, 69.7% of children with English as their first language achieve a Good Level of Development, compared with 58.4% of children with English as an additional language, highlighting the importance of early language support.

GLD attainment also varies by ethnicity, with lower achievement among children recorded as 'Other ethnic group' (59.4%) or with ethnicity unknown (58%), compared with higher attainment among White and Mixed ethnic groups (around 68%).

Early Education and Childcare Entitlement Uptake

There is a strong link between taking up early education and childcare and achieving GLD at the end of school reception year. We need to ensure that families in Newcastle have access to high quality childcare in a location that works for their family life.

In Newcastle 89.6% of children have taken up early education. The data shows that there is an overall surplus of 1909 early years places across the city. However, availability of places varies according to child age and locality. This means that whilst many families will be able to find a childcare place, some will have to travel to access it.

- Across all four localities, there is a surplus of places for 3-4-year-olds
- There is no shortfall of places for any age group in the East
- The shortfall in places for under-twos and 2-year-olds is most prevalent in the Outer West, shortly followed by the Inner West.

What our families are telling us:

There needs to be more support in local communities for families of children with SEND

It's not that easy to walk into a new place and ask for support

Its nice to access support with people who are going through the same things you are

As a dad I sometimes feel out of place at activities that seem aimed at supporting mothers.

The village where I live seems well connected but is quite isolated. There is nothing in the village to support new parents, nothing for the kids to do and there's no footpaths to push a buggy ,so I can't walk to the nearest community centre.

Some parents like groups, others prefer one-to-one support. There needs to be a mix of both.

I want support resources that feel relevant to me , that show life in the UK for parents. Then I can relate to it.

Family life is busy and complicated. We need more support outside 9-5.

Self help and digital resources are important.

It can be difficult to know what support is out there and how to get to it.

I don't want to tell my story over and over.

I have lots going on in my life. Accessing support is important but is one of things I have to do.

I want to access support locally

Wait lists are too long for some support

Having a family friendly culture is key

I need to feel that professionals are listening to me



What we learn from our current services

Some of our areas with lowest GLD achievement have the highest concentration of services and support – it is as much about connections between services as it is about how many services there are.

We need to strengthen the ability of our Family Partners to act as connectors between GPs, Schools and our Best Start Family Hubs, to promote the early identification of needs and connections to support.

Data flows between NHS and Voluntary and Community Sector organisations to enable the earliest access to community support can be challenging.

HLE interventions can't make assumptions about parental literacy. This is particularly important where English is an additional language in the household.

Links between Early Years Childcare providers and the Best Start Family Hubs could be strengthened.

Repeated communication about the Best Start Family Hub offer is essential to mitigate the impact of staff turnover in partners like education and health services.

Parents often find it difficult to make a confident commitment to programmes and courses that are too lengthy.

Our communities are often hyper-local: facilities that look close on a map do not always feel accessible to people. An outreach offer is essential to ensure our Best Start in Life offer reaches people across the city.

Best Start in Life messaging and intervention's need to be bespoke to different communities. For example, young people respond to breastfeeding messaging that addresses issues of stigma and embarrassment as much as traditional health messaging.

For some families, accessing support alongside peers is more important than accessing support locally. Examples include teen parents or families with children on neurodiversity pathways. It is important to recognise this and consider travel barriers when designing city-wide services.

Our Priority Families

All families in Newcastle will benefit from the support offered through our Best Start in Life vision. But the data and feedback tells us that there are families in the city who need us to strengthen our support offer:



Families in the Inner West

- Continuing increased uptake of health visitor reviews
- More Early Childhood Education & Care places
- Bespoke HLE pathways



Families in the East

- Continuing increased uptake of health visitor reviews
- Increase reach of Best Start Family Hub



Families with children with SEND

- Strengthen support offer in Best Start Family Hubs
- Strengthen universal SALT offer



Families with English as an additional language

- Bespoke pathways for Home Learning Environment support offer



Families with summer born babies

- Language and communication Pathway from universal health into Best Start Family Hubs

Our Targets

Our target is that by 2028:

- 74.6% of children reach a good level of development. This equates to 244 more children than today.
- 61.6% of children accessing free school meals achieve a good level of development. This equates to 84 more children than today.

These targets are ambitious and challenging. Newcastle has higher levels of child poverty than many other areas, meaning many children grow up facing additional barriers from an early age. The percentage of children accessing free school meals continues to rise in Newcastle. Where families are experiencing multiple pressures and facing financial hardship there is a strong link to poor GLD attainment.

We are ambitious for all our children. By 2030 we want to see a reduction in inequalities of attainment:

- A reduction of the 13.4% gender gap, with an improvement in GLD attainment for boys
- A reduction of the 45.3% SEND attainment gap, with an improvement in GLD attainment for pupils with Special Educational Needs and Disabilities.
- A reduction of the 15.4% birth term attainment gap, with an improvement in GLD attainment for those with a birthday in the school summer term
- A reduction of the 11.3% attainment gap, with an improvement in GLD attainment for those for whom English is not their household's first language

Our additional targets are:

- Maintaining the uptake rate of 2–2.5 year mandated Health Visitor check at 85%+.
- Reducing the numbers of 0-5 year hospital admissions for dental decay
- Increasing the reach of our Best Start Family Hubs in the East of the city

Section 2

What we will do: our Best Start in Life priority action areas

Home Learning Environment and Parenting Evidence-Based support

Our children start learning as soon as they are born. Being a parent or carer of a pre-school aged child is rewarding and challenging. We want all parents to have access to the support they need to boost their confidence and help their children with language and emotional development.

We will expand our parenting and home learning environment offer by embedding evidence-based programmes and shaping outreach and delivery using family feedback, to improve access for our priority families.

Priority actions:

1. Commission Togetherness: Understanding your Child and Togetherness: Understanding your Baby programmes for parents/carers, focused on language and communication, behavioural regulation and relationship building outcomes.
2. Commission 'Early Words Together' from the National Literacy Trust, focused on communication, language, and early literacy outcomes of young children aged 3 to 4, with a particular focus on summer-born children.
3. Commission Incredible Years Autism focussed on improving social-emotional skills, communication, and emotional regulation while reducing challenging behaviours and parental stress.
4. Prioritise outreach and engagement activity for
 - a. Families in the Inner West locality and particularly the Elswick ward
 - b. Families in the East and particularly the Byker and Walker wards
 - c. Fathers and male carers
 - d. Young Parents
 - e. Families for whom English is an additional language
 - f. Families with children with special educational needs and disabilities (SEND) particularly those in the Inner West and East localities
5. Increase the take up of the free-to-access Togetherness digital programmes for parents/carers available through the Children and Families Newcastle website, through strengthened multiagency promotion and a communications campaign.

Measures of progress

- Enrolment, impact and completion rates of programmes for parents/carers
- Participation rates amongst prioritised families
- Sign-ups to digital programmes for parents/carers
- Family Feedback

Early Childhood Education and Care access and quality

We know that young people who access child care have a better start in life. Being alongside other children in a childcare setting helps with communication and social development and helps a child be ready for school. There are some areas in the city, particularly in the West, where access to places is limited.

We will expand the availability and quality of early education and care settings in areas of high need.

Priority actions:

1. Complete detailed supply-and-demand mapping referencing planned housing growth), then run a market engagement programme to encourage more high-quality provision in areas of greatest need.
2. Conduct a detailed audit of SEND place sufficiency and prepare a plan to build workforce capacity.
3. Use statutory powers and financial support to help school-based nurseries open in the Inner and Outer West localities of the city.
4. Embedding Togetherness © The Solihull Approach across the early years workforce, providing foundation of relational practice and shared language of support.

Measures of progress

- Take up of childcare entitlements
- Workforce access to high quality training
- Increase in number of ECEC spaces for 2 years and under in Inner and Outer West Localities
- Family Feedback on placement availability and satisfaction

Transition to school and reception year

Moving into school is a big moment for children and their families. We know that where schools have a clear understanding of a child's needs they are better able to tailor learning to help a child settle into their reception year.

We will work across agencies to strengthen transition pathways into reception year and ensure teachers have the information and support needed to meet children's learning needs

Priority actions:

1. Introduce a consistent 'early years passport' to ensure key information about each child's strengths and needs is shared effectively between childminders, early years providers and schools
2. Provide universal and targeted support for settings and schools, with local authority and regional improvement teams working together to offer:
 - universal support for all settings, and
 - targeted assistance for schools with lower-than-expected GLD outcomes (identified through the *View Your Education Data* platform)
3. Embed the Early Years Foundation Stage Assessment Support Package to build practitioner confidence, strengthen assessment practice and promote consistency across all early years settings.

Measures of progress:

- Percentage of schools/settings using the early years passport
- Numbers of practitioners taking up of Assessment Support training
- Child and parent feedback (particularly from priority families),
- Setting and school feedback

SEND Support

Children with special educational needs and disabilities often have to deal with a complicated system to get the support they need. This support is important to help them be ready for school. Many families also face financial pressures, so it's even more important that help is easy to find and available close to home

We will put processes in place to help ensure that families can access high-quality, joined up care when special educational needs and disabilities are identified.

Priority actions:

1. Recruit specialist SEND practitioners for every Best Start Family Hub
2. Complete the audit of accessibility across the expanding network of Best Start Family hub sites
3. Conduct data deep dive into numbers of children identified with SEND needs in early years.
4. Establish clear referral routes to wider community health, education and wellbeing support for those identified during early detection screenings.
5. Co-produce a refreshed Local Offer providing an easy to navigate, single point of access for education, health, and social care information.
6. Offering free-to-access ELKLAN training to staff across our primary schools and early years settings to empower settings to support the speech, language and communications needs of children.
7. Integrating our neurodiversity pathway welcome events into our Best Start Family hubs to ensure a routine and simple connection to parenting and home learning environment support.
8. Remodel our Speech and Language Therapy service to ensure a robust, tiered support model, helping families access the right support for their child at the earliest opportunity.
9. Ensure all early years settings, nursery and Reception classes are supported to fully embed and make effective use of the Launchpad for Literacy toolkit, enabling practitioners to identify emerging needs, gaps in children's language and early literacy development and plan targeted, high-quality support.

Measures of progress

- Family Feedback on ability to access quality SEND advice
- Family feedback on ability to access inclusive activities within our Best Start Family Hubs
- Uptake of Best Start Family Hub support through neurodiversity pathway
- Uptake of ELKLAN training
- Use of Launchpad for Literacy toolkit in educational settings

Maternal and early years health services

The care that families get before, during and after pregnancy can affect a child for the rest of their life. The bond between a baby and their parents or carers helps them learn how to build healthy relationships and cope with emotions. Supporting families in the early years is a key part of our Best Start in Life vision. Health visitors play an important role in spotting needs early and helping families find the right support. However, we know that not all children are getting all of their required health visitor appointments.

We will strengthen the integration of health services and our Community Family Offer to improve access to support, including feeding, nutrition, oral health and maternal wellbeing.

Priority actions:

1. Increase the take up of key health visiting contacts, particularly the 2-2.5year review, with a focus on priority families and in underserved communities.
2. Promote take up of Healthy start and healthy nutrition practices
3. Embed oral health promotion across the Best Start Family Hub offer, linking in with the specialist NHS delivery and workforce training
4. Commission Little Minds in Mind, a specialist Parent Infant relationship service supporting parents of babies and infants with attachment and bonding.
5. Commission VCSE delivery of Breast-Feeding Peer Support, linking with maternity services and focusing on priority families and underserved communities.
6. Maintain Newcastle's accreditation as a Unicef Baby Friendly city
7. Promote Newcastle as a breast feeding friendly city through co-produced campaign aimed at younger parents and their family networks.
8. Commission infant feeding training for our Best Start Family hub workforce and awareness-raising training for wider stakeholders and businesses.

Measures of progress

- Uptake rates for Health visiting mandated checks, particularly the 2-2.5year review.
- Healthy Start take-up rates
- Reduction in admissions for dental decay
- Family Feedback

Section 3

Key Enablers of Success

Service integration and Best Start Family Hubs

We will make sure all Best Start Family Hubs are welcoming places where families can get the help they need in one place. By working closely together, we will join up support around children and families and improve people's experience of early years services

Priority actions:

1. Convert more Children and Families Newcastle connected sites into Best Start Family Hubs so that there is at least one Best Start Family Hub in each locality.
2. Prioritise outreach and engagement for the following group:
 - a. Families in the East of the city
 - b. Families living in the city's 'Northern Villages'
 - c. Families with English as an additional language
 - d. Teen and young parents (under 25years)
 - e. Fathers and male carers
3. Co-locate specialists, including SEND practitioners and community health services in Best Start Family Hubs
4. Establish routines and training to enable smooth transitions between Best Start Family Hub(s), health settings, childcare settings and schools that enable seamless support and a 'one team' Children & Families Newcastle approach
5. Expand the multi-agency membership of Children & Families Newcastle Locality Leadership networks
6. Embed Newcastle's 'Think Dad' approach across all agencies
7. Promote multiagency access to Newcastle's digital Best Start Family hub (via lanyard QR code, QR stickers on child health records etc.)

Measures of progress:

- Percentage of families in target group accessing Best Start Family Hubs
- Family feedback on join-up between services
- Numbers of partners delivering services through Best Start Family Hubs
- Monitoring data about referrals and waiting times for key services
- Expansion of representation at Locality Leadership networks
- Increase in numbers of Dad's Champions across the city

Workforce capacity and capabilities

We will focus on:

- Ensuring sufficient capacity in universal and targeted Best Start services
- Building a workforce with the right skills to support families in the early years
- Promoting consistency, continuity and high-quality practice across services
- Supporting workforce wellbeing and resilience
- Ensuring opportunities for connection and relationship building between locality teams.

Priority actions:

1. Work with partners to strengthen recruitment and retention in key services.
2. Provide a joined-up training and development programme so staff have a shared understanding of Best Start priorities and how we work—especially Togetherness © the Solihull Approach—and to build skills in trauma-informed practice and leadership.
3. Support joined-up working by learning together, making roles and responsibilities clear across services, and embedding a strengths-based, family-centred approach across the workforce.
4. Regularly review workforce capacity, skills and wellbeing through Best Start governance. We will use data on recruitment, retention, training take-up and staff feedback to support ongoing improvement and future workforce planning

Measures of progress:

- Vacancy rates
- Numbers of applications received in recruitment
Turnover and retention of staff
- % of workforce completing core multi-agency training
- Staff reported confidence in joint working
- Staff satisfaction and engagement

Family Involvement

We will build on current family involvement (like parent panels) and set up regular opportunities for parents and carers to share their views and priorities. We will improve how we work with voluntary and community organisations and other partners, so families' views shared with trusted partners are heard by the Council. We will design our processes with more built-in ways for family feedback to shape our decisions.

Priority actions:

1. Strengthen our current parent carer panel, and enhance the digital element of the panel to enable an increase in contributions from lesser heard voices.
2. Ensure that parent views are present in decision-making forums
3. Explore possibilities to consolidate more feedback sources across the system into the Children & Families Newcastle (CFN) quarterly family feedback report
4. Ensure our quarterly CFN family feedback report feeds into the Locality Profiles that are used to help service development
5. Embed our Parent Carer Panel involvement in our commissioning processes
6. Explore the role of families in the formal quality monitoring of our Best Start Family hub services.

Measures of progress:

- Number of parent panel members recruited: physical panel & digital panel
- Attendance and retention rates over 12 months
- Diversity of parent carer panel compared to local demographics
- Evidence of service changes in response to parental feedback
- Parental engagement with services
- Parental feedback showing increased confidence in the support offer

Monitoring evaluation and learning

We will use a test-and-learn approach, working with families and practitioners to refine what we do based on outcomes data and family experience. Ongoing co-production will help shape our priorities and ensure our work reflects what matters to families.

Priority actions:

1. Develop a shared outcomes framework across services, co-produced with partners and informed by test-and-learn activity
2. Standardise information sharing across health visiting, family hubs, early education settings and schools
3. Expand the scope of the Children & Families Newcastle (CFN) quarterly family feedback report to reflect the collection of family feedback across multi-agencies
4. Develop mechanisms for the routine collection and analysis of practitioner feedback across Best Start in Life partner agencies.
5. Develop a shared data dashboard and information flows linked to our Best Start in Life Plan and shared outcomes framework.

Measures of progress:

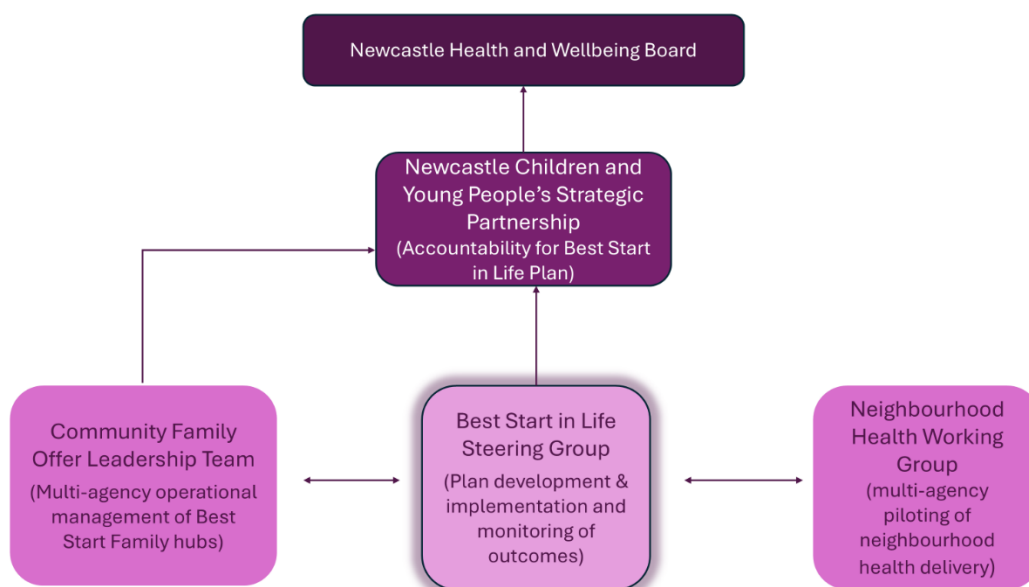
- Outcomes framework signed off by partners
- Regular reporting on measures to Board
- Routine collection of parent and practitioner feedback
- Evidence of decisions made in response to insights from feedback and outcomes data

Accountability and Governance

We will strengthen our governance and accountability arrangements to support consistent, high-quality delivery of the Best Start in Life plan, with a focus on shared ownership and coordinated multi-agency action.

Priority actions:

1. Vest the strategic oversight of the Best Start in Life Plan in the Newcastle Children and Young People's Strategic Partnership, with clear links to the city's Health and Wellbeing Board.
2. Establish a Best Start in Life steering group to drive the delivery of the Plan and report to Newcastle Children and Young People's Strategic Partnership and with clear links to the Community Family Offer Leadership Team and the Newcastle Neighbourhood Health working group, to ensure clear links between the Board and operational delivery managers.



3. Ensure Steering Group are regularly engaging, hearing from and informing wider stakeholders

Measures of progress:

- Regular meetings of Board and Steering group with consistent attendance
- Evidence that partnership decisions are informed by insights from feedback and evaluation of outcomes data
- Evidence of read-across of Best Start in Life into local implementation of strategies such as the Neighbourhood Health Framework, the Local SEND Reform Plan and the Families First Partnership Programme
- Family voice formally embedded in governance.

Funding

We will make sure that how we use funding and resources matches our priorities and the outcomes we want to improve for children. We will be transparent in our choices about how we apply our available resources and decisions will be based evidence of needs and insights from our outcomes data. In the first year, we will look at how shared budgets and joint commissioning could work across services, and use this learning to shape plans for subsequent years.

Priority actions:

1. Develop a clear funding approach that reflects our priorities and supports services to embed and be sustainable.
2. Review existing commissioned services to check alignment with priorities and plan, and ensure that this is considered in any recommissioning.
3. Explore opportunities for pooled budgets and joint commissioning through our governance and partnership arrangements.
4. Use Newcastle's Social Value Commitment to bring in additional resources that support our Best Start in Life priorities

Measures of progress:

- Monitoring of value for money considering service costs against both service engagement and target outcomes,
- Availability and longevity of pooled funding streams
- Number and type of jointly commissioned services
- Amount of additional resource secured through social value commitments.