

Meeting: Children's Overview and Scrutiny **Date:** 19 January 2026

Report Title: 0-5s with School Nursing and Family Hubs - Update

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1. Purpose of Report

- 1.1 This report provides an overview of the newly commissioned 0–5 Service with School Nursing and Family Hubs, formerly known as the Torbay 0–19 Service.
- 1.2 The service, jointly commissioned by Public Health and Children's Social Care and launched in April 2025, is delivered by Torbay and South Devon NHS Foundation Trust with Action for Children as subcontracted supplier. It includes:
 - Health Visiting and School Nursing (Public Health Nursing)
 - National Child Measurement Programme
 - Early Help and Family Support
 - Child Development and School Readiness
 - Family Hubs
- 1.3 This paper focuses on Public Health Nursing and Child Development, excluding updates on Family Support and Early Help. It will not provide an update on Family First Partnership as this is closely aligned with the Early Help and Family Support arm of the new contract, overseen by Children's Services. The report covers:
 - The commissioning arrangements for the new contract.
 - Performance data for Public Health Nursing since contract commencement
 - An update on the enhanced universal School Nursing service
 - Discussion of Public Health Nursing's contribution to the government Best Start in Life agendas.

2 Recommendation(s) / Proposed Decision

- 2.1 It is recommended that Board notes the information within this report.
- 2.2 There are no proposals being put forward.

Supporting Information

3 Introduction

- 3.1 This section outlines the commissioning and service arrangements for the previous 0–19 (25 with SEND and care experience) contract and the newly commissioned 0–5 Service with School Nursing and Family Hubs. It also reviews Public Health Nursing performance since the contract began in April 2025 and describes the enhanced Universal School Nursing provision.
- 3.2 In addition, the section provides a high-level update on the government’s Best Start in Life agendas, specifically Best Start Family Hubs and the Best Start Plan, which set out how Torbay will achieve locally defined targets for children reaching a Good Level of Development (GLD) by the end of the Early Years Foundation Stage. Finally, it explains how the 0–5 Service with School Nursing and Family Hubs contributes to these agendas.

Commissioning and Service Arrangements

- 3.3 Torbay Local Authority, specifically Public Health and Children’s Social Care, are responsible for commissioning most of the services that sit within the Healthy Child Programme, also known nationally as the 0-19 provision.
- 3.4 The previous 0–19 Service contract, jointly commissioned by Torbay Public Health and Children’s Services and delivered by Torbay and South Devon NHS Foundation Trust (TSDT) with Action for Children and The Children’s Society (TCS) as sub-contractors, ended in March 2025.
- 3.5 For April 2025 onwards, services from the historic 0-19 (25 with SEND and care experience) provision were divided into three core strands:
 - 0-5s with School Nursing and Family Hubs
 - Young People’s Drug and Alcohol Service
 - Advocacy Services and Missing and Return Home Conversations
- 3.6 In April 2025, TSDT were directly awarded a joint contract by Public Health and Children’s Services to deliver the 0-5s with School Nursing and Family Hubs service, with Action for Children as sub-contracted suppliers. See appendix one.
- 3.7 Additionally, through a contract variation, TSDT delivers most elements of the government-funded Family Hubs programme, including Infant Feeding, Perinatal Infant Mental Health, Home Learning Environment, and Parenting, with Action for Children as partners.
- 3.8 The young person’s Drug and Alcohol service and separately the Missing and Return Home Conversation provisions were brought in house and sit in the Youth Service within the Authority and Advocacy services have been through an open market procurement process, with contract awarded on December 1st 2025.

0-5s with School Nursing and Family Hubs 2025/2026 Performance

- 3.9 The government mandates five universal health checks to be delivered by Public Health Nursing teams, and national performance is measured against these standards. The target is for 90% of families to receive each check at the specified intervals:
 - Antenatally – from 28 weeks after pregnancy- home visit
 - New Birth Visit (NBV) – at 10-14 days after birth – home visit
 - Six to eight weeks after birth – home visit
 - One Year after birth – home visit if preferable or at a Family Hub

- Two and a half years after birth - home visit if preferable or at a Family Hub

3.10 Overall, the Public Health Nursing teams are meeting the mandated health check targets (see Appendix two). The New Birth Visit can present challenges due to factors such as babies being cared for on the Special Care Baby Unit (SCBU), mothers remaining in hospital, and the short timeframe for delivery within a part-time workforce.

3.11 Commissioners and the provider respond to families' preference for continuity of care by prioritising named Health Visitors wherever possible. This approach may occasionally result in visits being slightly outside the target timeframe. However, for both quarters one and two in 2025/26, all families received a home visit within 18 days, unless the baby was on SCBU. If a home visit falls outside the 10–14 day target, families will receive a phone call within the timeframe to check for any immediate needs before the face-to-face appointment.

3.12 In relation to developmental reviews, a high proportion of children receive both their 1-year and 2–2½-year reviews, with the majority taking place within a Family Hub setting. These reviews play a critical role in identifying children who may have developmental needs. Public Health Nurses are well positioned to ensure that families are referred to appropriate support services and, where necessary, are supported in accessing Early Years settings to promote optimal development.

3.13 Breastfeeding rates in Torbay have shown consistent improvement since 2022 and exceed the national average, reaching 61% at the 6–8 week review in quarter two. This upward trend reflects the success of the targeted Infant Feeding support offer, led by Public Health Nurses.

3.14 Commissioners have worked with the provider to establish effective mechanisms for monitoring the child development offer delivered by Action for Children, particularly where evidence-based interventions (EBIs) have been implemented. Although this approach is still in its early stages, it enables us to assess which EBIs are delivering positive outcomes and to consider alternative strategies if a child's developmental progress appears to be stalling.

Universal School Nursing

3.15 The School Nursing Service provides universal and targeted support for children aged 5–19 (and up to 25 for those with SEND or care experience). Universal support includes triage and advice on issues such as continence, nutrition, sleep, emotional wellbeing, and behaviour, while targeted support focuses on safeguarding concerns.

3.16 Historically, financial constraints within the Public Health Ringfenced Grant limited the universal school nursing offer. However, an uplift in April 2025 enabled the Director of Public Health to prioritise improvements, ensuring coverage across all primary and secondary schools. An additional £120,000 was allocated to enhance the universal offer, supplementing the core contract and supporting future service development

3.17 The enhanced universal offer aims to make school nursing visible and accessible in every Torbay school and to support children not in education settings, addressing previous resource limitations. The service will improve access to health advice and early intervention, strengthen integration with education and health services, and expand its reach while maintaining core functions.

- Continuation of the triage system for referrals on issues such as sleep, neurodiversity, behaviour, continence, and mental health.
- Ongoing parent-led drop-in sessions in all primary schools, which have significantly increased engagement.

- Introduction of confidential, fortnightly 1:1 drop-ins in all secondary schools, led by qualified SCPHNs, available without referral.
- A stronger role in improving school attendance through collaboration with education, health, and local authority partners.
- Participation in Elective Home Education (EHE) sessions to ensure home-educated children have access to health support.

Best Start in Life – Family Hubs and Good Level of Development Targets

3.18 This section provides a high-level overview of the Best Start Family Hubs and Torbay's specific target, as set by the Department for Education, for children to achieve a Good Level of Development (GLD) by the end of the Early Years Foundation Stage (age five).

3.19 In the autumn of 2025, the Department for Education (DfE) set local targets for children to achieve at the end of the Early Years Foundation Stage (age five). These targets focus on achieving a Good Level of Development (GLD), a key measure used to assess whether children are ready for learning. The targets aim to improve school readiness and tackle barriers that may hinder early development.

3.20 On 7th November, the DfE confirmed provisional Best Start Family Hub funding allocation for financial years 2026 – 29 for Torbay. The grant is received and overseen by Children's Services with most of it transported through the 0-5s with School Nursing and Family Hubs contract.

3.21 Provisional Best Start Family Hubs allocations for Torbay Council total £3,420,900 over three years (2026–2029). Funding is distributed across six strands, including:

- Best Start Family Hubs (delivery grant and capital)
- Parenting support
- Home learning environment
- Perinatal mental health and parent-infant relationships
- Infant feeding support
- Healthy babies offers and parent/carer panels.

3.22 Funding for Infant Feeding and Perinatal Mental Health, now collectively referred to as Healthy Babies, is only available to the 74 local authorities that previously received Family Hubs funding which includes Torbay. Healthy Babies is considered the health arm of the programme and is jointly funded and overseen by the Department of Health and Social Care (DHSC) and DfE.

3.23 The government has extended funding to all local authorities for Best Start Family Hubs delivery and capital, Parenting and Home Learning Environment strands, as part of the Best Start and Good Level of Development (GLD) agendas and is also jointly funded and overseen by DHSC and DfE.

Delivering Best Start in Life: 0-5s with School Nursing and Family Hubs Implementation

3.24 Public Health Nurses, supported by the wider service team and Action for Children, are responsible for delivering most of the grant funded Family Hubs programme as an extension of the core 0-5s with School Nursing and Family Hubs contract.

3.25 Their role is pivotal in ensuring that Torbay meets the government's targets for children achieving a GLD by the end of the Early Years Foundation Stage and are central to the development and implementation of the Best Start Plan. This includes:

- Coordinating delivery of core services within Family Hubs.

- Embedding national guidance and local priorities into practice.
- Driving improvements in early childhood outcomes through integrated working with health, education, and social care partners.
- Supporting workforce development and community engagement to ensure families can access timely, high-quality support.

3.26 Government-mandated developmental checks by Public Health Nurses identify needs early, ensuring children are school-ready and on track for GLD. The team works closely with early years settings, Family Hubs, and Children's Social Care as part of the wider Early Years pathway.

3.27 Action for Children, sub-commissioned to support the 0–5s and School Nursing service, delivers evidence-based speech and language groups, one-to-one interventions, and child development sessions. They are a key partner with strong links across the Early Years sector.

3.28 Within the broader Best Start Family Hubs programme, operational leads for Infant Feeding, Perinatal Infant Mental Health, and Parenting, all experienced Public Health Nurses, provide specialist expertise and act as resources for the workforce, ensuring evidence-based, consistent practice across services.

5. Financial Opportunities and Implications

5.1 This section outlines the finance for the 0-5s with School Nursing and Family Hubs, as well as outlining the Best Start Family Hubs

5.2 The total contract value for the 0-5s with School Nursing and Family Hubs for the period 2025/26 to 2029/30 is approximately £20.48m.

5.3. 86% of the contract is funded through the Public Health Ringfenced Grant, with additional finances coming from Children's Services.

5.4. The Best Start Family Hubs grant for 2026–2029 totals £3,420,900. This funding is allocated across six key workstreams, as outlined above. Delivery and implementation of the Best Start Plan and GLD targets will be covered by this grant, which has been uplifted to support these priorities.

5.5. 75% of the Family Hubs grant for 2025/26 was transported through the 0-5s with School Nursing and Family Hubs contract by means of a Change Control Notice. The same is expected for the following three years of funding.

6. Engagement and Consultation

6.1 Community engagement for commissioning of services included working alongside service users to hear their experiences when accessing 0-19 provision. Insights were gathered with support from the community and voluntary sector, the Children's Social Care participation team and through the 0-19 service-user feedback exercises. All of which have been taken into account and considered when developing the model.

6.2 Both the 0–5s with School Nursing and Family Hubs, as well as the Family Hubs grant-funded services, are subject to ongoing monitoring. This is carried out through digital surveys and engagement with parent connectors, peer supporters, and parent carer panels, and findings are reviewed during contract monitoring to ensure consistently high standards and positive feedback.

Appendices

Appendix 1:

Current 0-5s with School Nursing and Family Hubs Service

Core 0-5s with School Nursing and Family Hubs Services	Service Provider	Lead Department	Source of Grant/ Funding Arrangement
Health Visiting (Public Health Nursing)	TSDFT	Public Health	Public Health ring-fenced grant
School Nursing (Public Health Nursing)	TSDFT	Public Health	Public Health ring-fenced grant
National Child Measurement Programme	TSDFT	Public Health	Public Health ring-fenced grant
Early Help and Family Support	Action for Children	Children's Social Care	Children's Services
Child Development and School Readiness (including speech, language, and communication support)	TSDFT/ Action for Children	Children's Social Care	Children's Services
Family Hubs (Buildings)	Action for Children	Public Health and Childrens Social Care	Children's Services/ Public Health ring-fenced grant
Additional Services			
Family Hubs Start for Life Programmes	TSDFT/ Action for Children	Children's Social Care	Department for Education, Department of Health and Social Care to Children's Services

Appendix 2:

0-5s with School Nursing and Family Hubs performance

0-5s with School Nursing and Family Hubs 2025/2026	National Target	Quarter 1	Quarter 2
Public Health Nursing			
Antenatal - national target	90%	87.23%	90.87%
Antenatal - including lates	90%	99.15%	99.54%
NBV- national target	90%	78.23%	87.19%
NBV - including lates	90%	92.34%	96.00%
6-8 weeks - national target	90%	93.16%	94.49%
6-8 weeks - including lates	90%	99.62%	98.73%
12 weeks - national target	90%	94.33%	96.60%
12 weeks - including lates	90%	95.95%	98.30%
1 year - national target	90%	89.63%	90.12%
2-2.5 year - national target	90%	96.81%	90.38%
%Breastfeeding at New Birth Visit			
i) Fully		125 (50.40%)	129 (53.31%)
ii) Partial		51 (20.56%)	43 (17.77%)
iii) Not at all		71 (28.63%)	63 (26.03%)
% Breastfeeding at 6-8 week visit			
i) Fully		105 (39.92%)	102 (43.22%)
ii) Partial		43 (16.35%)	37 (15.68%)
iii) Not at all		113 (42.97%)	94 (39.83%)

Action for Children	
No. of Early Help panel referrals in quarter	24
Number of cases open to family support on the last working day of the quarter	88
No children receiving support for SLCN through 1:1's	81
% of children receiving support for SLCN from priority LSOA's- 1:1's	56%
No of children being supported with a S&L targeted intervention and requiring further specialist SALT intervention.	8
% of children completed 1:1 or group intervention who meet age related expectations for S&L development.	14%
% of children completed 1:1 or group intervention who have made some progress in relation to S&L development	50%
% of children completed 1:1 or group intervention who have made no progress in relation to S&L development	36%
	21
	87
	56
	48%
	17
	14%
	37%
	49%