
**Bath & North East
Somerset Council**

Improving People's Lives

Bath & North East Somerset Council

Best Start in Life Plan

April 2026



 **BEST
START
IN LIFE**

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1. Foreword

In Bath and North East Somerset (B&NES), we are committed to improving people's lives and ensuring every child has the best start in life. Our Best Start in Plan reflects the council's values that guide everything we do, we are bold in our ambitions for children, empowered to innovate and collaborate, supportive of families and professionals, and transparent in our commitment to equity. These values shape how we work with our communities, and how we deliver services that are inclusive, responsive and developed through trusting relationships.

We know the early years are a critical foundation for lifelong wellbeing, learning and opportunities and that the first five years of life are a crucial period for development. For this reason, our focus is on prevention and supporting families to be able to enjoy and support the early years with their children. We want to ensure every child has access to nurturing environments, high-quality education and the necessary resources to promote healthy growth.



Cllr Paul May,
Lead Member for Children

Every child deserves the best possible start in life, and the experiences of pregnancy and the early years play an important role in shaping health, learning, wellbeing and future opportunities. As Director of Children's Services for Bath and North East Somerset, I am pleased to introduce our Best Start in Life Plan, which sets out a shared commitment to supporting babies, children and their families.

Bath and North East Somerset benefits from strong partnerships, a skilled workforce and generally positive early years outcomes, but we recognise that these are not experienced equally and that some families face challenges in accessing the right support at the right time. This plan brings together partners across health, education, children's services and the voluntary and community sector around a shared vision, grounded in local evidence, lived experience and the voices of families. By working together, focusing on prevention, early support and quality, we want to make a positive and lasting difference for children and families across our communities.



Jean Kelly,
Director of Children's
Services and Education

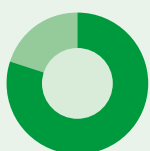


2. Introduction

Bath and North East Somerset is a mixed city, market town and rural area with around 6,300 children aged 0-4 with generally strong early years outcomes compared to national averages. Despite this, inequalities are widening with children experiencing disadvantage significantly less likely to achieve a good level of development by the end of reception (Bath & North East Somerset Council, 2025).

Closing this attainment gap is a long-standing strategic priority both locally and nationally and in July 2025, “Giving Every Child the Best Start in Life Strategy” was published setting the ambition that 75% of 5-year-olds in England have a good level of development by 2028 and that disadvantaged children have benefited at least equally from this improvement.

Our local targets in B&NES are:



The proportion of children in B&NES achieving a good level of development at the end of 2027/28 academic year is at least **80%**; and



Disadvantaged children have benefited at least equally from this improvement; that is, that the proportion of children eligible for Free School Meals (FSM) and achieving a good level of development at the end of the 2027/28 academic year is at least **52.4%**

The Best Start in Life Plan sets out Bath and North East Somerset’s shared vision, priorities and commitments for improving outcomes for babies, children and their families. It brings together partners from health, education, children’s services and the voluntary and community sector to deliver a co-ordinated, whole-system approach and provides the framework through which we will align local priorities with national policy whilst responding directly to our local needs, strengths and challenges of our communities.

The plan focuses on three areas:

1. Better support for families.
2. Accessible early education and childcare.
3. Improving quality across the early years including reception.



3. Our vision

Every child and their parent/carers can access high-quality early childhood services —including healthcare, education, and family support—no matter their background or circumstances, to ensure they can have the **best start in life**.

Why are the early years so important?

The early years, from pregnancy to age five are a critical period of rapid brain development that lays the foundations for lifelong learning, health, and wellbeing. Experiences during this time shape children’s communication, social and emotional development, behaviour, and readiness to learn.

Strong early relationships and a supportive home learning environment are central to building trust, emotional security, and resilience.

Working with parents to enable them to provide a safe nurturing environment is crucial for their children to thrive and we know this is more difficult for families who may be experiencing financial insecurity, physical and/or emotional mental health issues, relationship breakdown, isolation, or housing concerns.

We know in B&NES that some families are overwhelmed and experience barriers or confusion when trying to access help. Our local data shows that outcomes for children and young people are not equitable and those experiencing disadvantage are less likely to be ready for school or achieve a good level of development by age 5. We therefore need to work together with families, our partners, and communities to break down these barriers to access services and ensure all families receive the right help at the right time by the right services.

The impact of positive early relationships



4. Our strategic priorities

To deliver our vision that every child in B&NES can have the Best Start in Life, we will focus on three priorities:

1

Better support for families: through Family Hubs; strengthening family resilience and early relationships, ensuring families feel supported, confident, and connected from pregnancy onwards.

2

Improving access to high-quality early education and childcare, particularly for children experiencing disadvantage or with additional needs.

3

Raising quality across early years services, so every child can experience nurturing, inclusive and developmentally informed environments.

Through these priorities, we aim to achieve the following outcomes:



Increase the proportion of children achieving a good level of development at the end of reception.



Narrow the development gap for children facing disadvantage.



Improve parental confidence, wellbeing, and engagement with services.



Ensure children experience consistent, joined-up support across services and settings.

These outcomes will guide delivery, decision-making and evaluation across the B&NES Best Start in Life system.



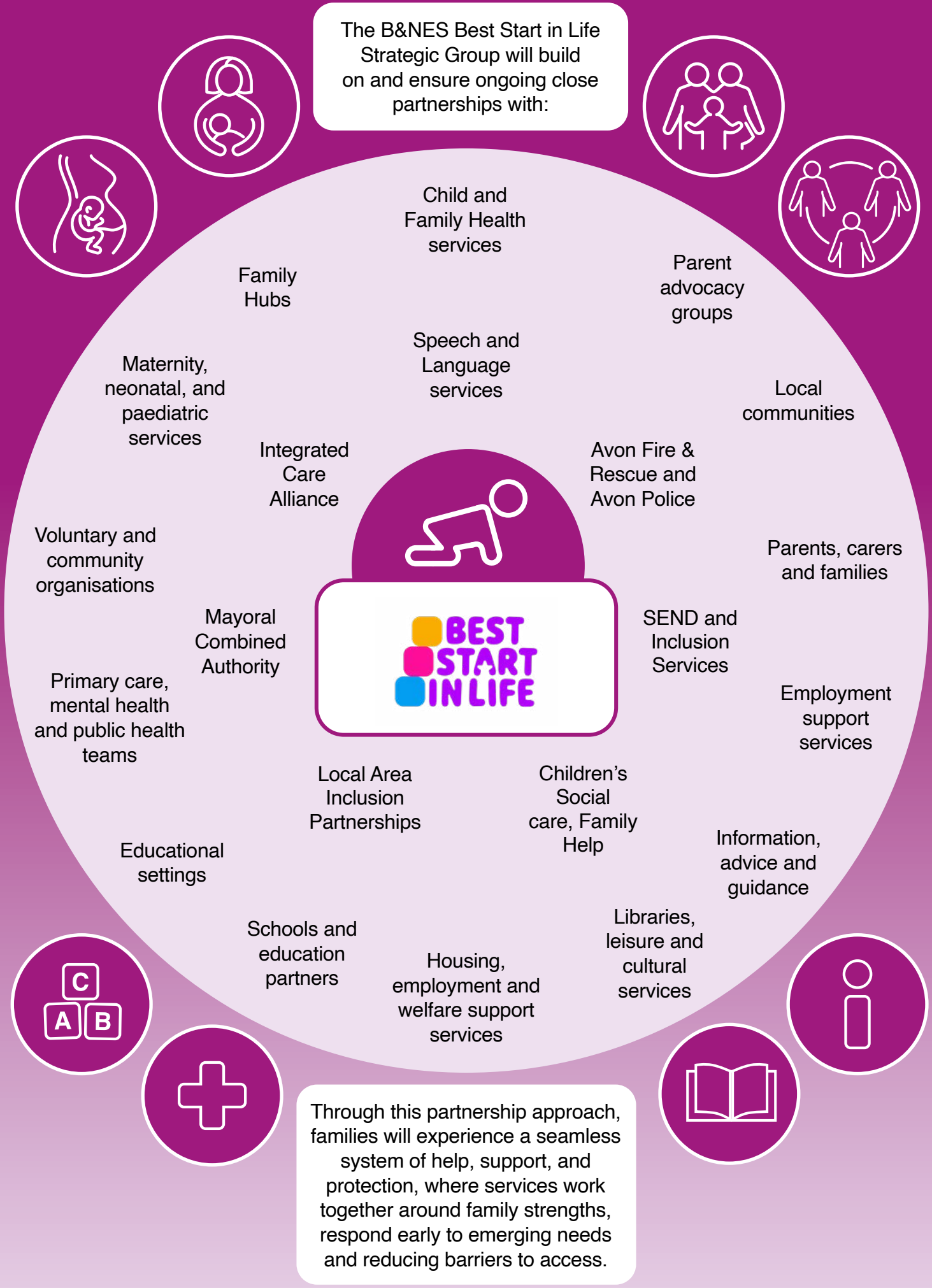
5. Our Best Start in Life system

Delivering the Best Start in Life Plan requires a strong, coordinated partnership across the whole local system. In B&NES, we are committed to working collaboratively with families, communities, and services to ensure children and parents experience a joined-up, accessible, and supportive system from pregnancy through early childhood.

Our Best Start system brings together partners across health, education, children's services, community and voluntary organisations, employment and welfare support, housing, and cultural and community assets.



The B&NES Best Start in Life Strategic Group will build on and ensure ongoing close partnerships with:



Through this partnership approach, families will experience a seamless system of help, support, and protection, where services work together around family strengths, respond early to emerging needs and reducing barriers to access.

6. Working in partnership with families and communities

Children's outcomes are shaped not only by services, but by the quality of relationships, environments, and support around them. In B&NES, we recognise that parents, carers, and wider family networks are experts in their own lives and essential partners in shaping how support is designed and delivered.

Our Best Start in Life Plan is underpinned by a commitment to co-production. This means working with families and communities, rather than for them, sharing power and decision-making wherever possible. Parent and carer voices will inform priorities, service design, delivery, and evaluation, ensuring support is accessible, culturally appropriate, and responsive to local need.

We will embed lived experience through:



A Best Start in Life Family Hub Parent and Carer Panel, representing diverse communities and experiences.



Ongoing engagement with parents, carers, and community groups, including those who may face barriers to accessing services and taking up their early year's entitlements, and our local Parent/Carer Forum.



Clear ongoing feedback so families can see how their views have influenced change.



This approach reflects our commitment to equity, trust, embedding a trauma informed approach and being transparent, to support better outcomes for children by ensuring services meet families where they are.



7. Local context and data – our current position

Currently 72% of all children and 38% of children receiving free school meals are achieving a good level of development at the end of reception (Department for Education, 2026). Whilst this is a national and regional challenge, B&NES has consistently been an outlier and addressing the educational attainment gap is a strategic priority in B&NES with an existing cross-service action plan in place overseen by the Be Well B&NES Children’s Network. The Best Start in Life Plan ensures alignment with wider council strategies already committed to addressing this inequality including the Corporate Strategy (one of nine priorities) and the Economic Strategy.

Where are we now?


- Worse compared to England
- Similar compared to England
- Better compared to England
- No comparison

7,271 0-4 year olds
(excludes 4 year olds of school age in primary education)




6.9 per 1,000
under 18’s
conception rate


16.7%
5 year olds
with visually
obvious dental decay





19%
obesity in
pregnancy



8%
Prevalence
of obesity (inc
severe) aged 4-5




82% achieving a good level
of development at 2-2.5 years





65 per 10,000 emergency hospital
admissions caused by unintentional and
deliberate injuries in children under 15

68.6% Breastfeeding
at 6-8 weeks




89% of eligible 2 year olds benefit from
funded Early Years education




% of children
achieving a good
level of
development
at 5 years



73% of all
children are
achieving a
good level



38% of Free
School Meal
children are achieving
a good level



8. Parent and carer feedback

A key action and commitment of the Best Start in Life Plan is to continually empower children and their parent/carers and families to tell us their experiences, good or bad, to inform what works and what may need to be improved. Their opinions are always valued and so far in developing this plan we have heard the following from parent/carers in relation to accessing services.

“I ask my family if I need help because I find it hard to get information online and like coming here to see people and get out of the house”

“More signposting to community groups - so glad my health visitor told me about MNVP padlets and got me to use my own phone as it meant I look at them more”

“More guidance for accessing mental health support groups / parent fitness and weight support”

Young fathers have told the Family Nurse Partnership that they have sometimes felt overlooked by some services and not recognised as vital in contributing to their child’s health, wellbeing, and development. Comments from other dads accessing parenting courses specifically tailored to fathers and male carers included:

“I’m going to try to implement the things we talked about. Subtle changes might make a big difference . . . Would recommend to others.”

“Very much appreciated it being only dads, as the way things are discussed is quite different and all the guys are able to contribute and talk openly.”

“Great to be able to share experiences and wins / fails with other dads”

We will ensure ongoing communication to share how parent/carers feedback is informing the support available and working to enable their children to thrive.

9. Our Workforce and Culture

Delivering the Best Start in Life Plan depends on a confident, skilled, and supported workforce across health, education, children's services, and the voluntary and community sector.

We will promote a shared culture that is:

- Relationship-based and family-centred.
- Trauma-informed and inclusive.
- Grounded in a strong understanding of child development.

We will work across the system to support continuous professional development, shared learning, and consistent practice, recognising that improving outcomes for children requires collective responsibility and alignment across all partners.



10. Our Best Start in Life Plan

Priority 1:

Better Support for Families, delivered through Family Hubs

Pregnancy, birth and the first 1,000 days

The period from conception through pregnancy, birth, and a child's first two years is critical in shaping lifelong health, wellbeing, and development. Evidence shows that early relationships, maternal health, and early environments have a profound and lasting impact.

In B&NES, we will strengthen our focus on pregnancy and the first 1,000 days through close partnership working between maternity services, health visiting, early years services, settings, schools, and wider community organisations to ensure families receive the right support at the right time.

Our priorities include:

- **Supporting early engagement with maternity and antenatal services.**
- **Promoting maternal mental health and emotional wellbeing.**
- **Strengthening early parent–infant relationships.**
- **Reducing inequalities in early health outcomes.**

Family Hubs will play a key role in connecting expectant and new parents to information, peer support, and services, creating clear, welcoming pathways from pregnancy through to early childhood. They will act as key connecting points, supporting co-ordination between services, and ensuring families can access the right help at the right time by the right service. This includes supporting families to access their early years entitlements. This approach complements and enhances the B&NES Neighbourhood Health plan through strengthening community networks and access to local place-based support.

Better Support for Families aligns with the Families First Partnership vision for Family Help, providing a continuum of support that responds to families' needs as they change over time. Support will be coordinated, relationship-based and proportionate, building on family strengths and networks wherever possible.

Priority 2:

Improving access to high-quality early education and childcare

We want to ensure that all families and services working with them know what is available locally and how to access it. This is where Livewell B&NES “Best Start in Life” is a critical part of our offer through providing up to date, accurate and accessible information, including a calendar of events which help underpin and complement services available.

High quality early education and childcare forms a vital role in improving outcomes for children and reducing inequalities in Bath and North East Somerset. We will prioritise promoting the importance of early interactions and play for parents/carers ensuring they have access to services that support positive home learning environments and consistent transitions from home to setting from setting to school.

B&NES has strong foundations in place, including expanded early education entitlements, investment in school-based nursery provision and an increased Early Years Pupil Premium.

Our priorities include:

- **Focus on information, advice, and guidance** (IAG) available to families, particularly financially disadvantaged families, and families where English is an additional language.
- Ensure that there are a range of delivery options of IAG available, including brokerage where applicable, to help families navigate the sources of information around **early years entitlement to increase take up** beyond the minimum requirement and to reach the stretch target of 85.7%.
- Ensure access to high-quality early years providers can happen at the **earliest available opportunity**. This should also maximise funding available to providers due to a focus on applications for Early Years Pupil Premium (EYPP).
- **Focus on speech, language and communication needs** from pregnancy, birth through to reception.
- **Engaging with families early and supporting key transitions** from early years settings to reception.
- **Identifying early and supporting families** where there may be additional needs.
- **Increasing access to funded entitlements**, ensuring sufficient places where they are needed the most and removing practical and social barriers to take-up to ensure children benefit from early learning environments.

Priority 3:

Raising quality in the early years

Early education and childcare settings are central in supporting families and children to thrive. They provide trusted environments where families can access advice, guidance, and early help.

Bath and North East Somerset takes a multi-stranded, evidence-informed approach to raising quality with a strong emphasis on inclusion, workforce development, early identification of need and smooth transitions to schools.

Our priorities include:

- **Strengthening inclusive practice and accountability** – to ensure early years settings are able to meet the needs of all children, including those with special educational needs and/or disabilities, social, emotional, and mental health needs, or emerging development delay.
- **Workforce development and evidence-based practice** – building on the Stronger Practice Hubs offer, to deliver evidence based continuing professional development (CPD) for the early years workforce to support consistent, high-quality practice across settings and build staff confidence.
- **Focus on early language and communication** – adopting whole setting approaches and training all educators to use systematic screening and intervention toolkits and embedding interventions into everyday practice, which can then be transferred and compliment the home learning environment.
- **Improving transitions into school** – through dedicated early tailored support for children with social, emotional, behavioural and communication needs and strengthening partnership working between early childhood services, early years settings and schools to improve continuity for children and their families.
- **Targeted early identification and health input** – through introducing an additional health visitor contact for children age 3 where additional needs have been identified to strengthen early identification and ensure children and families receive timely, targeted, coordinated support.



11. Measuring success and learning

We are committed to using data, evidence and lived experience to understand what is working and where we need to adapt.

Progress will be tracked through a combination of:

- Child development outcomes, including good level of development.
- Service access and engagement data.
- Feedback from families and practitioners.

The Best Start in Life Strategic Group will use this information to support learning, share good practice, and drive continuous improvement. This will ensure the Best Start in Life plan remains responsive, focused on impact, and aligned to the needs of children and families over time.



12. How will we know we've made a difference?

This page sets out how we will evidence the Best Start in Life priorities and actions have made a measurable difference for children and families. It focuses on outcomes, equity, early intervention, and effective system working, supported by clear governance and continuous learning.

We will know we have made a difference when:

- ★ Children experience improved early development outcomes, including good level of development (GLD) with inequalities narrowing over time.
- ★ Families access support earlier, feel confident and experience joined-up, relationship-based help from pregnancy onwards.
- ★ Children experiencing disadvantage benefit at least equally from improvements in access, quality, and outcomes.
- ★ Services work together effectively around families across pregnancy and the early years into reception.

Outcomes and measures by priority

Priority 1:

Better support for families (Family Hubs)

Intended impact

- Earlier engagement from pregnancy onwards
- Improved maternal wellbeing and early parent–infant relationships
- Reduced inequalities in early health outcomes

Evidence used

- Engagement and access data across maternity, antenatal, health visiting and Family Hub services
- Evidence of timely, coordinated Early Help and proportionate support
- Parent and carer feedback showing improved confidence, wellbeing and feeling supported
- Early health and development indicators monitored by level of disadvantage

12. How will we know we've made a difference?

Priority 2:

Improving access to high-quality early education and childcare

Intended impact

- Increased access to early education, particularly for children experiencing disadvantage
- Improved school readiness and smoother transitions into reception

Evidence used

- Take-up of funded early education entitlements, including disadvantaged two-year-olds
- Maintenance of the minimum expectation and progress towards the stretch target of 85.7%
- Uptake of Early Years Pupil Premium
- Evidence (and feedback from families) that they understand what is available and how to access it
- Transition data and practitioner feedback on continuity into school

Priority 3:

Raising quality across early years services

Intended impact

- Consistently high-quality, inclusive early years provision
- Earlier identification and support for additional needs
- A confident, skilled, and evidence-informed workforce

Evidence used

- Evidence of strengthened inclusive practice and early identification
- Workforce development activity and engagement with evidence-based practice
- Practitioner feedback on confidence, consistency, and shared approaches
- Indicators of improved transitions between settings and into school

13. Governance

Governance and use of evidence

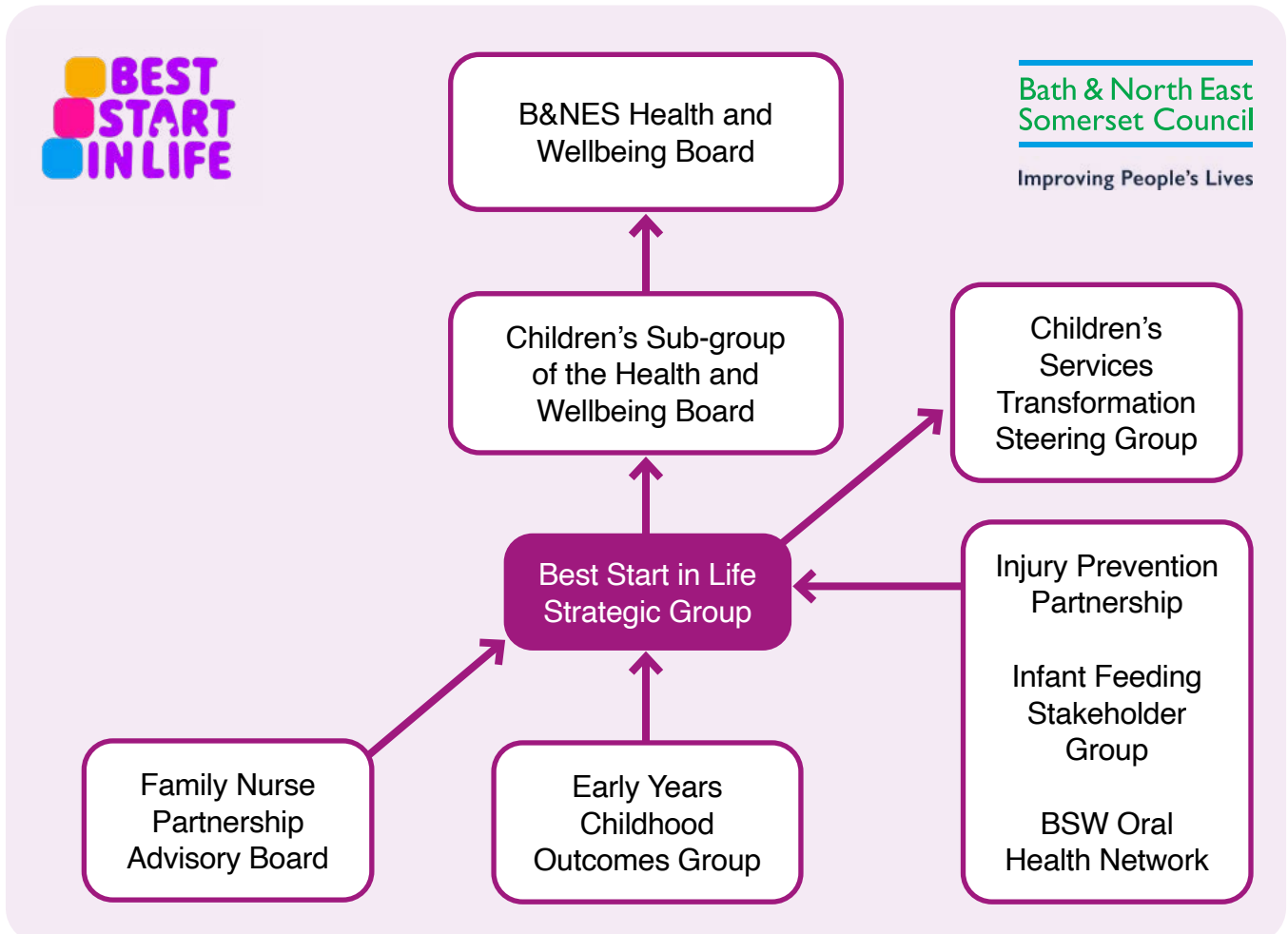
National data, service intelligence and lived experience will be reviewed through the Best Start in Life Strategic Group to:

- track progress against priorities and actions
- identify gaps or emerging inequalities
- adapt delivery and scale effective practice
- maintain shared accountability across partners

This ensures the Best Start in Life plan remains focused on impact and responsive to families' needs.

Reporting structure

The B&NES Best Start in Life Strategic Group will report to the Health and Wellbeing Board via the Children and Young People's Group, provide exception reports to other relevant groups and stakeholders, and receive updates from dedicated local working groups focusing on child health and development including the Injury Prevention Partnership and Infant Feeding Group, as shown in the structure below.



13. Governance

The Best Start in Life Strategic Group oversees, implements, and contributes to the following:

B&NES Health and Wellbeing Board (Priority 1)

Ensure Children and Young People have the best start in life and are ready for education and learning:

- 1.1 Strengthen family resilience to ensure children and young people can experience the best start in life.
- 1.2 Timely access to appropriate family and wellbeing support.
- 1.3 Reduce the existing educational attainment gap for disadvantaged children and young people.
- 1.4 Ensure services for children and young people who need support for emotional health and wellbeing are needs-led and tailored to respond and provide appropriate care and support (from early help to statutory support).

Be Well B&NES Health Improvement Framework (Childrens & Young People Network)

1. Good food for all.
2. Live free from harms of tobacco, drugs, and alcohol.
3. Good emotional wellbeing for all.
4. Achievable active lifestyles.

Early Childhood Outcomes Group Priorities

Multiagency operational leads. Focus on communication and language and personal, social, and emotional development through.

1. Partnership and Integrated Working.
2. Early identification and intervention.
3. A Focus on the Family.
4. Getting it right for funded 2-year-olds.
5. High quality provision in Early Years Setting.
6. A skilled workforce.

Injury Prevention Partnership

1. Supporting children and young people in B&NES to be free from unintentional injury, while leading active and fulfilling lives.

(Priority 1 of the Health and Wellbeing Strategy 2023- 2030 “increase the proportion of children and young people living in safe supportive families and communities”).

Infant Feeding Stakeholder Group

(Overarching vision and shared aims, objectives and key actions for BSW Infant Feeding Strategy)

The vision “for breastfeeding to be normalised within the communities of B&NES, Swindon and Wiltshire and to ensure families feel supported in their choice of infant feeding to give their babies the best start in life.”

Family Nurse Partnership* Advisory Board

To bring local community partners as champions for the programme and to oversee programme quality and sustainability.

**Supports young parents to improve early childhood outcomes from pregnancy until the child is up to two years old.*

Local Area Inclusion Partnership (LAIP)

Provides strategic direction and leadership for monitoring and quality assuring the local area’s effectiveness in identifying and meeting the needs of children and young people who have special educational needs and/or disabilities, or who require access to Alternative Provision. Accountable to the Health and Wellbeing Board, ratified by the Local Authority Executive Team and the Integrated Care Board and in consultation with Schools Forum and the Schools Standards Board.

The Best Start in Life Strategic Group will ensure alignment with Families First Partnership (2025) delivery, supporting a coherent local system of Family Help, safeguarding, and early intervention. This includes close working with safeguarding partners and relevant agencies to promote joined-up decision-making, shared accountability and consistent thresholds of support in line with national expectations.

We will also ensure delivery aligns with Neighbourhood Health Plans (2025), supporting community-based networks, improving access to local trusted services, and ensuring families experience clear joined-up pathways to support them from pregnancy through to the early years.

By embedding Best Start in Life priorities within wider neighbourhood-level planning and decision-making, B&NES will continue to develop a responsive, equitable and relationship-based system that enables parents and carers to feel supported, confident and connected, and ensures every child is given the foundations to thrive and have the best start in life

13. Governance

Best Start in Life in B&NES also operates within the following legislative frameworks:

- Working Together to Safeguard Children 2026
- Children Act 1989, 2004 & 2026
- Childcare Act 2006 & 2016
- Children and Families Act 2014
- Childcare and Early Education Entitlements
- Equality Act 2010
- Ofsted framework for inspecting local authority Children's Services (ILACS), the thematic Ofsted framework and the new Ofsted SEND inspection framework.

Glossary

Below is the full list of the B&NES Best Start in Life Strategic Group partnerships from page 8:

- Parents, carers and families, whose lived experience shapes priorities and service design.
- Local communities and the wider environment.
- Maternity, neonatal, paediatric services and the Maternity & Neonatal Voices Partnership.
- Child and Family Health services (Health Visiting 0–4, Family Nurse Partnership, School Nursing 5–19).
- Primary care, mental health and public health teams supporting prevention and early identification.
- Early years settings, childminders, nurseries, pre-schools, schools and reception classes.
- Family Hubs providing best start in life services with Bright Start Children and Family services providing welcoming, community-based access to information and parenting support and access to co-ordinated early and family help.
- Family Help services offering proportionate, relationship-based support for families experiencing complex or additional needs.
- Libraries, leisure and cultural services promoting early language, social connection and inclusion.
- Voluntary, community, charity and faith-based organisations providing trusted, local support.
- Information, advice and guidance (e.g. LiveWell B&NES, SENDIAS).
- Housing, employment and welfare support services, including DWP and the Community Wellbeing Hub.
- Schools, Bath College and education partners contributing to skills and workforce development.
- Mayoral Combined Authority, including RISE teams and the Child Poverty Strategy.
- Integrated Care Alliance aligning with the Integrated Neighbourhood Plan.
- Parent advocacy groups.
- SEND services (e.g., Rainbow Resource, Parent Carer Forum).
- Speech and Language services.
- Children’s Social care.
- Avon Fire & Rescue and Avon Police delivering targeted prevention programmes.
- Employment support services.

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