



**From policy to
implementation:
How to deliver on
the ambitions of the
Best Start in Life strategy**



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Introduction



Alongside many others across the children's sector, the National Children's Bureau (NCB) welcomes the Best Start in Life (BSIL) strategy as an important step in advancing the provision of services and support for babies, young children and their parents and carers.

Ahead of the publication of the BSIL strategy, NCB hosted a **'From Conception to Reception'** summit. The summit brought together senior representatives from across the sector and government to discuss a shared vision for improving outcomes for babies and young children. Bringing together this breadth of cross-sector knowledge provided an opportunity to identify clear points of consensus, send a unified message to government, and build a stronger, more united approach to delivering lasting change for children and families. A summary of the discussions is available [here](#).

The publication of the BSIL strategy marks an important policy milestone – but it is only when these policies are fully implemented that children and families will see their lives actually improve. Moving from policy to implementation requires the government to address some critical questions, to ensure that the strategy maximises its impact. Key considerations must include matching the ambitions in the strategy with long-term investment in the workforce,

clarifying lines of accountability, and ensuring robust systems for data collection and sharing. Plus, crucially, it will be essential to ensure that implementation is integrated with wider action on health, poverty, and inequality. Addressing these issues, which are outlined in further detail below, will be essential if the Best Start in Life strategy is to move beyond aspiration and translate into meaningful, lasting change.

This paper outlines NCB's analysis of the key discrepancies between what is set out in the strategy and the ambitions expressed by the sector at the summit. This paper presents a bird's eye view of key thematic areas which will need enhanced focus. Organised into ten thematic areas, it explores potential next steps for ensuring all babies and young children receive the best start in life.

First and foremost, however, it is important to highlight that race, racism and ethnicity are completely absent from the strategy. A 'colour-blind' approach leaves racialised children at significant risk, something data continues to highlight. Understanding the historical, current, and systemic inequalities faced by racialised children needs both a voice and concerted action. We have noted below specific opportunities for central government and local areas to actively name systemic barriers and incorporate anti-racist practices into implementation.

Summary of recommendations

- 1** To ensure consistent and coherent prioritisation of Best Start in Life, central government should implement a clear accountability framework and associated governance mechanisms, incorporating all relevant sectors. These should be underpinned by shared budgets across departments.
- 2** Local areas should be supported to develop locally adapted governance mechanisms to deliver on BSIL across all relevant sectors, harmonising and optimising local resources, with a focus on relational, partnership working and shared responsibility.
- 3** Central government should develop a comprehensive, fully funded early years workforce strategy (health and early years education and childcare) with a focus on inclusion and one which understands the needs of babies and very young children.
- 4** Structured parental co-production mechanisms should be introduced with national guidance and dedicated funding to recognise families and communities as co-creators of service design and delivery, not simply as service users.
- 5** Local areas should invest in outreach and peer support networks to strengthen their offer and enhance uptake of services and entitlements.
- 6** The voluntary and community sector (VCS) should be fully embedded as equal partners – at a local and national level – in planning, delivery and accountability, with the development of a structured approach to resource and measure this effectively.
- 7** Central government must ensure the Good Level of Development (GLD) target does not prioritise attainment over progress by enabling local areas to approach this target with flexibility and appropriate resources.
- 8** A more nuanced outcomes framework should be devised to supplement the GLD metric that takes a more holistic measurement of development and is tailored to different local contexts.
- 9** The government must invest in social security that directly increases family income as part of the upcoming Child Poverty Strategy, with an urgent focus on ending the two-child limit and benefit cap.
- 10** A digital offer should be developed for families to complement in-person support, that is robust, intentionally inclusive and fully integrated with local and national services.

Areas of focus

National government prioritisation and accountability

While the BSIL strategy expresses ambitions to align efforts across departments, these are not yet formalised through clear structures or shared budgets. Consistent prioritisation across government would help align this work, reduce fragmentation, and ensure that local systems receive coherent guidance and direction.

Joint ministerial oversight, coupled with clearly defined responsibilities, would further prevent siloed working and maximise the potential for real and lasting impact on babies, children, and families.

We also encourage the government to explicitly integrate the Best Start in Life milestone into wider frameworks and local implementation plans, including the Opportunity Mission, the NHS 10-Year Plan, and the Child Poverty Strategy.

Recommendation:
To ensure consistent and coherent prioritisation of Best Start in Life, central government should implement a clear accountability framework and associated governance mechanisms, incorporating all relevant sectors. These should be underpinned by shared budgets across departments.

Enhanced support for local, integrated governance

The BSIL strategy rightly recognises that the national target for improving child development cannot be achieved by one sector alone. It commits to expanding Best Start Family Hubs as 'one-stop shop' models, co-locating health, education, childcare, and community support to foster collaboration between councils, schools, nurseries, childminders, and community partners. The sector warmly welcomes this expansion, as well as the significant investment behind it.

Local authorities have been tasked with developing plans to demonstrate how they will achieve the 2028 GLD milestones. For progress to be achievable, robust governance mechanisms are necessary at local level to support stronger integration between education, health, early years commissioning and social care services.

Systems must be able to communicate effectively, supported by joint accountability arrangements so that no single stakeholder bears sole responsibility for progress on the

BSIL milestone. The shifts in the NHS 10-year plan towards neighbourhoods' approaches need to be planned in coordination with Family Hubs locality-based approaches. The Families First Partnership transformation also provides great opportunities for achieving improved outcomes for babies and young children.

Aligning these various objectives would undoubtedly optimise local resources. However, there is currently no incentive to bring these initiatives together. As such, in addition to clear joint accountability, the government should provide dedicated funding to support the place-based partnerships needed to drive this work forward. Without this, there is a risk that locality-based approaches could enter into competition rather than be mutually reinforcing.

Recommendation:
Local areas should be supported to develop locally adapted governance mechanisms to deliver on BSIL across all relevant sectors, harmonising and optimising local resources, with a focus on relational, partnership working and shared responsibility.

A comprehensive, fully-funded workforce strategy

A comprehensive, fully funded workforce strategy is essential to address the current challenges in recruitment and retention. Without such a strategy, efforts to improve access and quality in early education will inevitably fall short.

We welcome the government's ambition to place a qualified early years teacher in every setting. However, uptake of this route remains limited. To truly raise the status of the profession and deliver the high-quality provision children deserve, there must be a broader commitment to creating Qualified Teacher Status-led (QTS-led) settings, supported by fair pay, professional recognition, and clear progression pathways.

High quality CPD for the sector is key to achieving the government's GLD target. We welcome the government's commitment in the BSIL Strategy to doubling the number of Early Years Stronger Practice Hubs across the country. Having been DfE Delivery Partner on this programme since inception, we have seen how the sector has welcomed this opportunity to access research and integrate evidence-informed approaches into their settings. However, through this programme we also

know that the sector wants further support and training, especially in working with disabled children and those with SEN and in working with children under two years of age. With the expansion of subsidised entitlements, more very young babies will be in settings, and an understanding of the importance of nurturing environments and attachment to support infant development will be key to forming the foundations that children need to reach a GLD at five.

Finally, the BSIL strategy points to improvements in maternity and health visiting services without clear commitments as to how and when action will be taken. More broadly, babies, children and young people make up around 25% of the population, yet they only account for 11% of NHS expenditure. The child health workforce must be expanded with an explicit focus on early intervention and health promotion. This means leveraging trusted relationships with families to develop meaningful practices and support babies, children, and young people.

Recommendation:

Central government should develop a comprehensive, fully funded early years workforce strategy (health and early years education and childcare) with a focus on inclusion and one which understands the needs of babies and very young children.

Involving families and co-production

In local areas, families and communities should be co-creators of services, recognised as essential stakeholders, not simply as service users. We welcome that the strategy notes the need for government to engage with parents and families so that their experiences and outcomes are central to reforms, citing this as a strength of the Sure Start programme. It is encouraging to see plans to apply this learning to the design of Best Start services.

However, the strategy contains no plans for structured co-production with parents and carers, nor any mandate for their voice in governance. We urge the government to think about how to further embed parents

as strategic leaders in programme design and delivery. The government should support local authorities to establish the infrastructure needed for parental consultation and meaningful participation that is reflective of the diversity of local communities.

Furthermore, strengthening the relationship between early years education and childcare settings and parents and carers is notably absent from the strategy. The home learning environment plays a pivotal role in babies and young children's development. Partnership working between settings and parents should be strengthened. Evidence-based interventions supporting the home learning environment (such as [Making it REAL](#)) should be prioritised.

Recommendation:

To ensure consistent and coherent prioritisation of Best Start in Life, central government should implement a clear accountability framework and associated governance mechanisms, incorporating all relevant sectors. These should be underpinned by shared budgets across departments.



Creating peer support networks and hyper-local community engagement

We welcome the commitment to fund outreach work, enabling Family Hubs to connect with families who may not typically engage with such services, as well as the pledge for Best Start Family Hubs to work with Parent Panels to help ensure services meet local needs effectively.

We know that community peer support networks have the capacity to strengthen service delivery. Important lessons can be learnt from the [A Better Start](#) (ABS) partnerships in Blackpool, Bradford, Nottingham, Lambeth and Southend, which demonstrate the transformative impact

of embedding community outreach and engagement at every stage of service design and delivery.

Services alone are not sufficient. Meeting families where they are is crucial for success. Connecting families into services and support, via trusted peer networks or community connectors, has the potential to accelerate engagement. Yet we know that outreach is often perceived as a 'nice to have' rather than a core component of delivery.

Recommendation:

Local areas should invest in outreach and peer support networks to strengthen their offer and enhance uptake of services and entitlements.

Voluntary and community sector (VCS) engagement

Strengthening collaboration with voluntary and community sector (VCS) organisations is essential to delivering joined-up, community-based support for babies and young children. The VCS plays a vital role in engaging directly with local families and supporting progress toward the GLD milestone. The strategy does acknowledge this contribution, noting for example that Family Hubs should work with local charities and community groups to extend reach and build trust with families.

However, its treatment of the VCS is framed largely in general partnership terms, without the deeper integration arrangements that the sector strongly supports. Fully embedding the VCS would expand the strategy's reach and

ensure that services are grounded in the lived experience and strengths of local communities.

The absence of a structured approach to resourcing, measuring, and embedding VCS contributions risks losing the reach, expertise and relationships these organisations offer, particularly in areas facing high deprivation. Without such recognition, collaboration with the VCS may remain under-utilised and ad hoc, rather than becoming a strategic, sustained component of the Best Start in Life vision.

Recommendation:

The VCS should be fully embedded as equal partners – at a local and national level – in planning, delivery and accountability, and develop a structured approach to resource and measure this effectively.

'Good Level of Development' without losing sight of inequalities

The strategy reaffirms the Good Level of Development (GLD) as the core national milestone, with a stated aim for 75% of children to reach GLD by the end of the reception year by 2028.

An excessive focus on whether children meet a single, standardised milestone risks prioritising attainment over progress. We are aware that GLD targets will reflect local realities, with statutory targets set for each local area.

Whilst we must be ambitious for all children, the reality is that not every local area will be able to reach the 75% GLD target. We encourage the government to adopt an intersectional approach to inequalities and

to empower local systems to respond flexibly to their communities' needs. For example, by helping them identify babies and young children who face challenges in reaching the GLD milestone and providing the resources necessary to deliver targeted support. These children's development should be no less supported, recognised and celebrated. Particular attention to how the data suggests the historical, and systemic, inequalities facing racialised children may be reproduced through GLD should also be considered.

Recommendation:

Central government must ensure the GLD target does not prioritise attainment over progress by enabling local areas to approach this target with flexibility and appropriate resources.

Use of data

The Children's Wellbeing and Schools Bill will create a duty for organisations to share safeguarding-relevant information across the agencies interacting with a child. The piloting of the Single Unique Identifier, which will enable more effective and accurate data sharing by linking data sets, provides an opportunity to better use data to inform service design and implementation.

A nationwide rollout of this identifier could significantly strengthen our ability to understand what works for children, helping to ensure that the right services and programmes are commissioned at the right time. We recommend that the government commits to timely implementation of this change to ensure that this generation of babies and young children benefit.

The strategy stops short of committing to a national framework for consistent, high-quality data collection across education, health, and social care. We need to focus on outcomes data to cover a comprehensive range of early childhood development indicators, including

health, emotional wellbeing, and speech and language, using standardised collection methods and supported by robust national infrastructure.

The government's plan also fails to address how data will be used strategically to inform commissioning decisions, or to commit to reviewing which data is collected and why. Equally, the role of family voice in shaping services is overlooked.

Consistent with earlier calls for greater parental involvement, we advocate for embedding parent and carer voice into data systems so that services are informed not only by numbers, but also by lived experience.

Recommendation:

A more nuanced outcomes framework should be devised to supplement the GLD metric that takes a more holistic measurement of development and is tailored to different local contexts.

Family income and child poverty

Poverty underpins every challenge that families face, making it difficult to deliver meaningful, lasting change for babies and children whose basic needs are unmet. When families cannot afford essentials such as food, heating and housing, the foundations for healthy child development are severely weakened. Poverty is not a peripheral issue but a primary barrier to progress across all domains for the [4.5 million children growing up in poverty in the UK today](#).

As a member of the End Child Poverty Coalition, we welcome the government's commitment to an ambitious Child Poverty Strategy. Based on our collective insights from children and families who are living in poverty, the Coalition has developed '[Eight Tests](#)' against which we will test the Strategy when it is published, including that targeted action must be taken for children most likely to experience poverty.

We welcome recent measures, including the expansion of funded childcare hours and free school meals for families receiving Universal Credit. However, sustained investment in social security that directly increases family income, embedded within the Child Poverty Strategy, is essential to achieving the BSIL milestone. No policy lever available to central government would have as immediate, measurable, and

transformative an impact on child development and outcomes as lifting children and families out of poverty. The quickest route to doing so would be to end the two-child limit and the benefit cap, two of the leading drivers of child poverty in the UK. It has been estimated that scrapping the two-child limit would [lift 350,000 children out of poverty and mean 700,000 children are in less deep poverty](#).

Providing an adequate level of social security should be viewed as a fundamental investment in children's early development. By largely overlooking the devastating impact of poverty as a critical determinant of early development, any government strategy risks being undermined at its core.

We also call for targeted reforms to financially support families during the crucial period from pregnancy through infancy. These include providing access to Child Benefit from the third trimester of pregnancy to help parents prepare for the costs of a new baby, and doubling the child element of Universal Credit, or equivalent support, for babies under the age of one.

Recommendation:

The government must invest in social security that directly increases family income as part of the upcoming Child Poverty Strategy, with an urgent focus on ending the two-child limit and benefit cap.

Digital offer for families

Providing parents of babies and young children with digital access to personalised, evidence-based support along with signposting to local services has been shown to deliver meaningful improvements in children's early development.

Digital channels can empower families to access the right information at the right time, particularly those not already in contact with professionals or Family Hubs, thereby supporting greater reach and inclusion. We therefore welcome the government's shift from analogue to digital, as outlined in the 10-Year Health Plan.

We support plans for a new Best Start digital service that will integrate community-based services with a digital platform, giving parents quick access to trusted advice on parenting and child development, as well as a clear route to check eligibility for childcare entitlements and connect with their local hub.

We also welcome the planned "My Children" function in the NHS App, announced in the 10-Year Health Plan, to create a secure, portable health record as a digital alternative to the Red Book. This innovation will enable continuity of care across education, health, and social care.

A robust, inclusive digital offer, integrated with existing services, has the potential to be a powerful tool. A well-designed digital platform can improve outcomes for babies, children, and families by providing timely access to evidence-based advice, clear pathways to childcare entitlements, and seamless connections to local services. and language, using standardised collection methods and supported by robust national infrastructure.

The government's plan also fails to address how data will be used strategically to inform commissioning decisions, or to commit to

reviewing which data is collected and why. Equally, the role of family voice in shaping services is overlooked.

Consistent with earlier calls for greater parental involvement, we advocate for embedding parent and carer voice into data systems so that services are informed not only by numbers, but also by lived experience.

Recommendation:

A robust digital offer should be developed for families to complement in-person support, that is robust, intentionally inclusive and fully integrated with local and national services.

In conclusion

The Best Start in Life strategy is an encouraging signal of the government's ambition.

For the strategy to achieve its full potential, and for meaningful change to the lives of babies, young children and their parents and carers, we must optimise the conditions for success. The 10 recommendations shared in this paper seek to draw attention to these conditions, which, if not addressed, may prevent the progress we are all, collectively, hoping to achieve.

NCB will continue to work with partners across the sector and families, to ensure that every child has the best start in life.



For over 60 years, the National Children's Bureau has worked to champion the rights of children and young people in the UK. We interrogate policy and uncover evidence to shape future legislation and develop more effective ways of supporting children and families. As a leading children's charity, we take the voices of children to the heart of government, bringing people and organisations together to drive change in society and build brighter futures.

We are united for a better childhood.



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