

Committee: Children and Young People's Scrutiny Panel

Date: 24th March 2015

Agenda item: 7

Subject: Progress Report on Priorities for Children and Young People's Health

Lead officer: Dr Kay Eilbert, Director of Public Health

Lead member: Cllr Maxi Martin

Contact officer: Julia Groom, Consultant in Public Health (C&H),

Reason for Urgency: The Chair has agreed the late circulation of this report

RECOMMENDATIONS:

- To note and consider progress on the development and delivery of the Health and Wellbeing Strategy 2013/15 Priority 1: Giving Every Child a Healthy Start.
- To note priorities for the refreshed Health and Wellbeing Strategy for 2015/16-2017/18
- To consider opportunities for further integration and partnership work to progress the development and delivery of Priority 1 outcomes.

1. PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1 The purpose of this report is to update the CYP Scrutiny Panel on the Health and Wellbeing of Children and Young People and development of refreshed priorities for the Health and Well-being Strategy 2015/16 to 2017/18.
- 1.2 Merton has made good progress on a number of health outcomes including, maintenance of a low number of babies born with low birth weight, a downward trend in overweight or obesity in 4-5 year olds which is better than London and England averages; and continuing reduction in teenage conceptions.
- 1.3 The report highlights areas for improvement including immunisation rates, halting the upward trend in overweight and obesity rates in 10-11yr olds and narrowing the gap in school readiness and educational achievement..
- 1.4 Finally the report provides an overview of next steps for 2015/16 that will enable us to improve outcomes for children and young people's health in Merton.

2. DETAILS

2.1 Introduction

2.1.1 Merton Health and Wellbeing Strategy 2013/14 included Priority 1: 'Giving every child a healthy start'. This reflected evidence set out in the Marmot Review

'Fair Society, Healthy Lives (2010)' which set out the case for focusing investment on early years and advocated a life-course approach to tackling health inequalities, demonstrating that giving every child the best start in life is crucial to reducing health inequalities across the life-course.

2.1.2 The Strategy included a commitment to further strengthening our partnership approach to preventative strategies for health and wellbeing, across all universal services and settings, and ensuring the earliest identification of health and wellbeing issues to better target services to those families that are in greatest need of support, particularly for residents living in the east of the borough.

2.1.3 The Strategy complements Merton's Children and Young People's Plan, which focuses on improving outcomes for a number of key groups of children vulnerable to poorer outcomes including safeguarding children, looked after children, youth offending/youth inclusion, and children with special educational needs and disabilities, alongside our focus on Early Intervention and Prevention.

2.1.4 The Health and Wellbeing Strategy is currently being refreshed, including outcomes for Priority 1: which has been refocused: **Good start in life – early years and achieving a strong educational base for children and young people**

The refreshed strategy takes a sharper focus on inequalities in outcomes, where we face the biggest challenges for children, young people and families, and recognises the importance of educational achievement on future health and wellbeing.

The following outcomes are proposed for 2015/16 – 2017/18:

- All babies have the best start in life
- All children and young people have good emotional wellbeing and resilience
- Children and young people make healthy lifestyle choices
- Children and young people fulfil their educational potential

The Children's Trust Board lead on the delivery of outcomes within the Health and Well-being strategy related to children and young people. The process involves priorities within the Strategy being reported to the Children's Trust Board throughout the year and high level outcomes are part of the Trust's performance indicators, which are reviewed quarterly. An annual report goes to the Health and Wellbeing Board.

In addition the Joint Strategic Needs Assessment is available online and provides detailed information on all areas of the Strategy: <http://www.merton.gov.uk/health-social-care/publichealth/jsna.htm>

2.2 Progress to Date and Plans for 2015/16 onwards

OUTCOME 1.1: All babies have the Best Start in Life

This outcome aims to provide every baby with the best start in life setting a foundation that helps reduce health inequalities across the life course.

Current Progress

Progress has focussed on the delivery of the Healthy Child Programme (0-5 years) Children's Centres interventions; the Family Nurse Partnership and improving Childhood Immunisations.

Healthy Child Programme 0-4 Years: the Healthy Child Programme 0-4 years (HCP) is a universal service that sets out an integrated approach to improving health and wellbeing and supporting families. In 2013 a review was undertaken of Children's Centres and Early Years, to review the effectiveness of current delivery models and services and the extent to which the integrated working practices between the key agencies deliver the core purpose of Children's Centres. This identified a range of good practice where health and children's centres are working together. This includes:

- Borough wide delivery of the Healthy Child Programme via Children's Centres – includes child health clinics, development reviews and health promotion
- Co-delivery of evidence based parenting programmes (Baby Incredible Years)
- New birth visit by Health Visitor includes registration with local Children's Centre
- Health Visitor attendance on Children's Centre Locality Advisory Board and participation in multi-agency targeted family work
- Specialist Health Visitor working with Early Years Integrated Service for Children with SEN and Disabilities

An Early Years Pathway Development Manager has been appointed who will also take forward some of the recommendations from the review as well as developing more integrated pathways between Health Visiting, Midwifery, Children's Centres and GP Practices provide a more seamless service.

Family Nurse Partnership (FNP): the Family Nurse partnership is now established with a team in place delivering an evidence-based preventative early intervention programme for vulnerable first time mothers under 20 years old. There are currently 17 active cases in Merton. The programme is based on a strong evidence base from a US programme and has strict eligibility criteria.

Health Visiting Services: In October 2015 responsibility for commissioning Health Visiting Services and the Family Nurse Partnership will transfer from NHS England to the Local Authority. In addition Community Health Services, including Health Visiting, are being re-procured from 2016/17. In order to inform both the safe and effective transition of services to LB Merton and the re-procurement process, Public Health, in partnership with Children, Schools and Families undertook a review of the service. Work is currently underway on both transfer and re-procurement of services.

Childhood Immunisation: NHS England has been the new commissioner for childhood immunisations across the country since April 2013. Public Health has an assurance role. LBM Scrutiny Committee have identified Childhood Immunisations as a key focus area for improvement. Scrutiny has undertaken a review including a number of engagement sessions with partners as well as commissioners to review how coverage could be improved. We are awaiting the report and recommendations. Merton CCG is working with GP practices to improve coverage. Public Health works

with the 3 GP localities to review childhood immunisation rates and share best practice to improve performance.

Breastfeeding: In September 2014 a Sutton and Merton Breastfeeding Strategic Group was established improve partnerships on breastfeeding and develop an action plan to improve sustained breastfeeding in areas of lower prevalence. The local Maternity units at St George's and Epsom and St Helier have been successful in achieving level 3 UNICEF Baby Friendly accreditation, which aims to improve breastfeeding rates. Sutton and Merton Community Services are working towards UNICEF level 3 accreditation.

The Health and Wellbeing Strategy 2015/16 to 2017/18 will focus on improving:

Childhood Immunisation as measured by MMR2 at age 5 years: There have been some increases in childhood immunisation coverage, but this is still below London and England levels and remains a priority.

- MMR2: Latest Q2, 2014/15 Merton: 76.2% which is lower than London (80.8%) and England (88.5%). Latest annual figures for 2012/13 Merton 68.9% which is again lower than London (80.8%) and England (87.7%).

OUTCOME 1.2: All children and young people have good emotional wellbeing and resilience

This outcome aims to develop a proactive approach to child mental health, wellbeing and resilience, with the provision of prompt support and early interventions to promote good mental health.

Current Progress

Parenting Strategy: Merton Parenting Strategy is currently being refreshed, setting out our approach to parenting support including the need to signpost our parents to a range of universally available services to which all parents are entitled, provide targeted services for parents who need specific support at particular times and provide mandatory interventions for those parents who are unable to seek out or engage with existing support services. The targeted parenting offer includes a range of evidence based accredited parenting programmes. The need for a targeted parenting programme is identified using a Common and Shared Assessment (CASA) or Single Assessment as part of the multi-agency support provided at the enhanced and specialist levels of our Merton Child Well Being Model (MCWBM). 78% of parents that commenced a programme during 2013-2014 completed the course.

Targeted mental health support in schools (TAMHS): This aims to transform the way that mental health support is delivered to children, to improve their mental wellbeing and tackle problems in a timely way. 23 Primary Schools and 1 Secondary school directly commissioned TAMHS in 2013/14. Tier 2 level mental health support commissioned by schools also includes learning mentors, home-school link workers, nurture groups and emotional literacy support advisors.

Specialist mental health support to children and young people: Following the NHS changes in April 2013; Tier 4 CAMHS is now commissioned by NHS England. Tier 3 CAMHS is part of the overall mental health contract provided by South West London and St George's Mental Health NHS Trust. This is commissioned through a collaborative commissioning arrangement led by Kingston CCG on behalf of Merton CCG (and other sector CCGs).

A range of Tier 2 services is available in Merton for young people and a number of CAMHS workers are embedded within the London Borough of Merton's Looked after Children's Team, Youth Offending Team and our Special Schools, working with some of most vulnerable children and young people.

The provider is currently in the process of implementing young people's IAPT (improving access to psychological therapies) and Merton CCG has identified resources to develop a single point of access (SPA) to improve access to services and reduce waiting times.

A needs assessment of CAMHS in Merton will be undertaken jointly with LBM, Merton CCG and local providers in 2015, led by Public Health. This review will inform the development of a strategy as well as identifying gaps in services and best practice for implementation.

Health and Wellbeing Strategy 2015/16 to 2017/18 will focus on improving:

- **Emotional well-being of Looked After Children** – Average strengths and difficulties score for all LAC 5-16 who have been in care for at least 12 months. A normal score is under 14. The average Merton score for 2012/13 is 14.5, however the trajectory is upwards.

OUTCOME 1.3: Children and young people make healthy lifestyle choices

This outcome aims to help young people feel confident and informed to make healthy lifestyle choices as they move into adulthood and to ensure that their parents and carers are fully informed to encourage and support them.

Current progress

Progress has focussed on delivering the National Child Measurement Programme and targeted services for child weight management; the Healthy Child Programme and School Nursing; and healthy schools:

Healthy Weight: The National Child Measurement Programme is a mandatory service that measures children in Reception and Year 6 in order to monitor trends in weight and offer support to children and families. Merton has a targeted service for child weight management, with a 12 week programme for children between ages 4-19 years. In 2013-14 in addition to the core service a number of workforce training sessions were delivered, and a 6 week obesity prevention programme focused on schools in central and east Mitcham.

In 2015 Weight management services for children and their families are being re-commissioned with an increased focus on prevention, and a Merton Healthy Weight Strategy for adults, children and families will be developed which will take a multi-agency approach to prevention and early support.

The Healthy Child Programme (HCP) 5-19 Years: a review of School Nursing Services took place in 2013, in order to inform service development and future commissioning. This included reviewing data and engaging with staff, schools, parents and young people. Service developments have included a move to a needs-based model of service allocation, reflecting the different levels of needs in schools across the Borough; addressing service pressures including the increasing demand to undertake work on safeguarding; additional investment by Public Health to fund an additional school Nurse in order to increase preventative work with schools. The service continues to deliver the National Child Measurement Programme.

The School Nursing Service together with the Health Visiting service is currently being re-procured for 2016/17, as part of wider Community Health Services re-procurement led by Merton CCG in partnership with LB Merton. This provides an opportunity for service modernisation, such as introducing enhanced mobile IT.

Healthy Schools: A Merton Healthy schools programme has been developed, which focuses on supporting the 20 schools in east of the borough. Two coordinators have been recruited to support the 2 school clusters in the east (Mitcham Town and East Mitcham) and a range of projects have been commissioned to support school in improving the health and well-being of their pupils, staff and families e.g. Healthy Eating, gardening and food growing, physical activity etc. Commissioned programmes have been based on an audit undertaken to identify gaps and support needs.

Smoking: 70% of smokers begin before their 18th birthday and vulnerable young people are more likely to smoke. Stop smoking services for young people are integrated with the LiveWell service.

In 2013/14 66 young people set a quit date and 18 were successful, which is a 27% quit rate, below London and England levels. Work is underway to increase referrals to the service by increasing links with other health professionals, schools and partners. The new priorities for 2015/16 will be to embed support in other services by training more frontline staff to provide stop smoking advice to children and young people; and to focus support on vulnerable groups more likely to smoke.

Substance Misuse: A new 'Risk and Resilience' service for young people has been commissioned which recognises the links between the use of drugs, alcohol and sexual activity and will integrate substance misuse treatment and prevention, detached youth outreach service and some sexual health promotion services. The new service will commence 2015.

Health and Wellbeing Strategy 2015/16 to 2017/18 will focus on:

- **Narrowing the gap in excess weight between east and west:** Gap between % of 10-11 year olds with obesity weight between east and west Merton 6.2% (2010/11-2012/13).

OUTCOME 1.4: Children and young people fulfil their educational potential

This is a new outcome in the refreshed Health and Wellbeing Strategy and it reflects the critical importance of educational attainment on employment opportunity, material prosperity and long term health outcomes. Although educational outcomes in Merton are improving rapidly, there is a need to continue to reduce the gap in attainment, especially improving educational outcomes for those pupils eligible for pupil premium.

Current Progress

We know that if a child is well supported in early years, the outcomes for education and life chances are significantly improved. We will therefore continue to work in partnership with parents and our Private, Voluntary and Independent sector providers to promote the values of early education; ensuring young children have had the opportunity to develop the social and emotional skills, independence and curiosity that prepares them for school. We will support families to take up the services they are entitled to, including funded places for two year olds and to register their eligibility for the new Early Years Pupil Premium.

National statistics show that children on free school meals, or those with special educational needs, are around three times more likely to be persistently absent and there is clear evidence of a link between poor attendance at school and low levels of achievement. We will work with families to improve school attendance where this is an issue and continue to work with our schools to ensure that children and young people that require more intensive targeted support receive it.

Health and Wellbeing Strategy 2015/16 to 2017/18 will focus on::

- School readiness: narrowing the gap between % of **Pupil premium** children achieving a good level of development in early Years Foundation stage and children not eligible for pupil premium (15.5% 2013/14)
- School achievement: narrowing the gap in % children achieving 5 **GCSE's** A-C including English and maths between pupil premium children and children not eligible for pupil premium (24.8% 2013/14)

2.5 Next Steps and priorities for 2015/16

2.5.1 This report has provided an overview and update on current activity to deliver priorities in the Health and Wellbeing Strategy and has set out proposed refreshed priority outcomes for 2015/16 – 2017/18. All partners, including LB Merton, Merton CCG, NHS England and the Community and Voluntary sector must work together to continue to deliver joint priorities. The following activity highlighted in this report is being undertaken in 2015/16:

- Preparation for transfer of commissioning responsibility for Health Visiting and Family Nurse Partnership from NHS England to the Local Authority (October 2015)
- Procurement of Health Visiting, Family Nurse Partnership and School Nursing services for 2016/17
- Development of Early Years integrated pathways to ensure there is effective communication and transition across services.
- Development of Multi-agency Breastfeeding Action Plan.
- Work with NHS England and GPs to increase Childhood Immunisation coverage lead by the Scrutiny focus report.
- Development of training and support for staff in children's centres in addressing parental mental health in Children's Centres
- CAMHS review to inform the development of a Strategy for Merton in line with local needs.
- Delivery of Healthy Schools Programme to 20 schools in the east of the Borough.
- Launch of Healthy weight strategy and re-commissioning of Children's Healthy Weight Management Services
- Rollout of training for front line staff on stop smoking support for children and young people
- Mobilisation of integrated 'Risk and Resilience' service of young people.

2.5.2 Changes to commissioning responsibility, potential changes to commissioning arrangements and the development of a new health infrastructure provide important opportunities to build on and strengthen Merton's approach to improving health and tackling health inequalities, working in partnership with the Health and Well-being Board and health partners in the NHS, Community and Voluntary sector. The refresh of the Health and Wellbeing Strategy in 2015 is providing an opportunity to take a more integrated approach and focus on prevention and early intervention for children and young people.

3. ALTERNATIVE OPTIONS

None

4. CONSULTATION UNDERTAKEN OR PROPOSED

Consultation with Stakeholders and HealthWatch on the refresh of the Health and Wellbeing Strategy took place January-February 2015.

5. TIMETABLE

Children's Trust Board to report to Health and Wellbeing Board on Priority 1 in Health and Wellbeing Strategy on an annual basis.

6. FINANCIAL OR RESOURCE IMPLICATIONS

7. LEGAL AND STATUTORY IMPLICATIONS

None

8. HUMAN RIGHTS, EQUALITIES AND COMMUNITY COHESION IMPLICATIONS

None

9. CHILDREN & YOUNG PEOPLE'S PLAN IMPLICATIONS

The activities identified in this report will contribute to delivery of priorities for prevention and early intervention.

10. RISK MANAGEMENT AND HEALTH AND SAFETY IMPLICATIONS

None

11. APPENDICES – THE FOLLOWING DOCUMENTS ARE TO BE PUBLISHED WITH THIS REPORT AND FORM PART OF THE REPORT

None

This page is intentionally left blank