

# **CYPP - Improvement Programme Highlight Report**

This highlight report updates the Somerset Children's Trust Executive (SCT) about the project's progress to date. It also provides an opportunity to raise concerns and issues with the SCT, and alert them to any changes that may affect the project.

Complete all fields where applicable and state 'nil return' where there is nothing to report in this period

Programme:	2 Promoting healthy outcomes and giving children the best start in life		
Delivery Group:	Children & Young People Health & Wellbeing Group	Year:	2017/18
Delivery Group Chair:	Alison Bell, Consultant in Public Health, Somerset County Council	Report 29/09/2017 Date:	
Scrutiny Committee Champion:	Mrs Eilleen Tipper		

1. Overall Improvement Programme Status			
Current Status:	This Programme is currently rated as being on track to meet target dates for all actions by March 2018	Status Trend: (delete as appropriate)	1
Reason for current status:	Work progressing according to the action plan – not yet seeing impact of actions on outcomes		

# 2. Progress since last Highlight Report

Include evidence of how the plan has incorporated the voice and needs of children

#### Achievements:

- Launch of the public consultation on development of the family support service
- Since May 2017, 200 professionals trained on perinatal and infant mental health pathway. 4 new Better Births posts in maternity with a focus on perinatal and infant mental health
- Continued decline in the proportion of women smoking at the time of delivery (now 13.2%)
- Breastfeeding volunteer champion training has been completed in all Somerset districts. There
  are 37 trained champions across the county. The recruitment drive from the world
  breastfeeding week and campaign has secured further applicants. All volunteer champions are
  registered at Somerset You Can Do a process to ensure the volunteers are being utilised
  efficiently includes recommending other volunteer opportunities to those with greater availability
  i.e. getset volunteer opportunities. The scheme is working really effectively in Mendip
- Case studies to show the impact of a systems approach to providing parenting support



attached:
Case Study Prog 2 Parent support EC

• Choices for life strategy co-produced which is a document to lay out how we will prepare children for adulthood

#### Slippage (give reasons and remedial actions)

• Timeline for submissions of bids to NHS England for specialist perinatal services has been moved back to November 2017

# 3. Actions and outputs for the next period:

- Q3 get sign up to plan for actions on addressing speech and language delay from early years providers and schools and then implement during Q4
- Clinical Commissioning Group (CCG) undertaking review of maternity and paediatric services which will result in recommendations that will be consulted on
- The Public Health contract for Healthy Eating, Physical Activity and Weight Management with Somerset Partnership (Zing Somerset) is coming to an end at the end of December 2017. To inform the new approach Somerset County Council undertook a consultation on a proposed model that focuses on healthy eating and physical activity advice. A lot of feedback focused on the absence of weight management support to severely obese children (Tier 3 services). This issue has been raised in the past by primary and secondary care clinicians. The pathway and support available remains unclear and falls outside the remit of Public Health. The healthy eating and physical activity support model from 1<sup>st</sup> January 2018 will be an offer to the whole population to inform, enable and support all families to lead healthier lives according to their needs. It will not provide the intensive multi-disciplinary support that more complex obese requires – this information has been fed into the CCG review.

# 4. Most significant current risk/s:

• Getting whole system action to improve the health and well-being of children and young people

# 5. Most significant current issue/s:

nil return

# 6. Variances:

nil return

# 7. Decisions required from Somerset Children's Trust:

nil return



Outcome measure/Performance Indicators	Target	Current performance	Direction of travel (delete as appropriate)	
(A) Deliver The Healthy Child Programme (0-19 years) consisting of integrated pathways across maternity, health visiting, school nursing, children's centres, early years settings and schools				
Children aged 5 years with one or more decayed missing or filled teeth	24.8%	23.1% 2014/15	1	
New birth visits conducted by Health Visitor by day 14	90%	85%	75%	
Perinatal & infant mental health – indicator in development	To be developed			
(B) Improve breastfeeding deprivation	(B) Improve breastfeeding uptake and develop peer support programmes in areas of deprivation			
Breastfeeding prevalence at 6-8 weeks	England average 43.2%	46.4% (Q1)	44% Q4 (2016/17)	
(C) Ensure all children and information and activity	l young people and the	eir families have access	to health promoting	
Children in reception classified as very overweight	9.3%	8.4%	1	
Children in year 6 classified as very overweight	19.8%	15.3%	1	
Percentage of new mothers smoking at the time of delivery	10.6%	13.2%	12.9% Q4	
Hospital admissions of 0- 14 year olds following injury	104.2/10,000 (2015/16)	120.6 per 10,000 1078 children (2015/16)		



Outcome measure/Performance Indicators	Target	Current performance	Direction of travel (delete as appropriate)
(D) Identify and work with children and young people engaged in multiple risky behaviours and engage them in meaningful activity to boost self esteem			
Percentage of schools engaging in health and wellbeing survey	To be developed	Next survey to be undertaken in 2018	57 Infant and Primary schools and 26 Secondary schools and FE's
Percentage of schools undertaking an intervention to improve the health and wellbeing of their children – based on survey findings	To be developed	Next survey to be undertake in 2018	Not previously reported
Chlamydia detection rate among 15-24 year olds	National Target 1,900/100,000	1,815 per 10,000 1,056 people (2016)	1,523 per 100,000 904 people (2015)
E) Improve health and well Education Needs & Disabi		hildren and young peop	ole with Special
Number of young people at year 9 identified as requiring support through transition	To be developed by Choices for Life Panel and reported in due course		
Number of young people allocated to Adult Social Care from 16	To be developed by Choices for Life Panel and reported in due course		
Percentage of young people successfully transitioning to adult services at the appropriate time	To be developed by Choices for Life Panel and reported in due course		

KEY			
Shows improvement	1	Stayed the same	Has deteriorated