


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 Date:	04/01/2018
Scrutiny Committee Champion:	Mrs Eileen 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: <i>(delete as appropriate)</i>	
Reason for current status:	We were green last quarter, we continue to be on track to deliver all actions and so remain green for delivery.		

2. Progress since last Highlight Report

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

Achievements:

- The consultation on the future delivery of the Family Support Service has been completed and will be used to inform decision making going forward – the report will be shared with the multiagency Early Help Board in and Children's Scrutiny in January 2018 and Somerset County Council (SCC) Cabinet in February 2018
- Somerset Partnership leading the skill mixing of the Health Visiting workforce
- Further training on 'Tuning into Kids' had been delivered to a further 22 staff across schools, SHARE and health visiting. Between September and October there were 893 hits on the parent / carer toolkit
- The Yeovil Hospital specialist midwife for stop smoking has now taken on the same role at Musgrove to fill the gap present last quarter.
- Quarter 3 – 'Start the conversation' events/survey around the county led by SCC promoted to primary care and Clinical Commissioning Group (CCG) participated.

- Council for Disabled Children Multi-agency workshop 4.12.17 for staff to understand how to contribute to a good Education, Health and Care Plan (EHCP) e.g. writing appropriate and quality outcomes.
- Speech and language resources for parents and professionals have been posted onto the parent toolkit.

Slippage (give reasons and remedial actions)

- Data on Mums2B quitters in Q2 not yet available due to change of database provider delaying reporting – aim to be resolved by Q4

3. Actions and outputs for the next period:

- Engagement with partners regarding the findings of the Family Support Service (FSS) consultation and how they can be involved in the development of the offer.
- Decisions to be taken by SCC cabinet regarding the future delivery of the Family Support Service.
- Further training of volunteer breastfeeding champions.
- Mapping of Tune into Kids / Tune into Teens facilitators to be published on parenting website in April by geography, to enable planning of local courses. 103 CYP staff are trained to deliver this programme across the partnership.
- Follow up General Practitioner (GP) pilot of providing information to EHCP application process, with Taunton Deane GP Federation and Harry Yoxall, LMC.
- LW organised Council for Disabled Children multi-agency workshop on joint commissioning for SEND/children.
- To undertake the Health & Well-being survey among children in years 6,8,10 and 12.

4. Most significant current risk/s:

- Skill mixing the Health Visiting (HV) workforce has happened more rapidly than planned, which is causing some pressure on service delivery.

5. Most significant current issue/s:




- Maintaining service delivery within getset and public health nursing, at a time of great change for all the teams.



6. Variances:



Nil Return

7. Decisions required from Somerset Children's Trust:

Nil Return

Outcome measure/Performance Indicators	Current performance	Direction of travel <i>(delete as appropriate)</i>
(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 <i>England average = 24.8%</i>	Data will be available Q1 2018	23.1% 2014/15
New birth visits conducted by Health Visitor by day 14 <i>Target = 90%</i>	Q3 data available in January 2018 post reporting deadline	85% (Q2)
Perinatal & infant mental health: Number of mothers pre and post-natal receiving support from specialist community mental health services	Reporting timeline being established	Not previously reported
Perinatal & infant mental health: Number of mothers admitted to a specialist psychiatric unit without their baby	Reporting timeline being established	Not previously reported
Perinatal & infant mental health: Number of mothers reporting a positive experience of mental health support during maternal period	Reporting timeline being established	Not previously reported
Perinatal & infant mental health: Number of pregnant /postnatal women supported by IAPT (Improving Access to Psychological Therapies) service	Reporting timeline being established	Not previously reported
(B) Improve breastfeeding uptake and develop peer support programmes in areas of deprivation		
Breastfeeding prevalence at 6-8 weeks <i>England average 43.2%</i>	Q3 data available in January 2018 post reporting deadline	47% Q2 (2017/18) 
(C) Ensure all children and young people and their families have access to health promoting information and activity		
Children in reception classified as very overweight <i>England 9.3% (2015/16)</i>	8.7% (2016/17)	8.4% (2015/16) 
Children in year 6 classified as very overweight <i>England 19.8% (2015/16)</i>	16.3% (2016/17)	15.3% (2015/16) 

Outcome measure/Performance Indicators	Current performance	Direction of travel <i>(delete as appropriate)</i>
Percentage of new mothers smoking at the time of delivery <i>England = 10.6% (2015/16)</i>	Q2 12.4%	13.2% Q1 (2017/18) 
Hospital admissions of 0-14 year olds following injury <i>England = 104.2/10,000 (2015/16)</i>	Data will be available Q1 2018	120.6 per 10,000 1078 children (2015/16)
(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	Next survey to be undertaken in 2018	
Percentage of schools undertaking an intervention to improve the health and wellbeing of their children – based on survey findings	Next survey to be undertaken in 2018	Not previously reported
Chlamydia detection rate among 15-24 year olds <i>National Target 2,300/100,000</i>	1,845 per 100,000 (Q1 to Q3 2017)	
E) Improve health and well-being outcomes for children and young people with Special Education Needs & Disabilities		
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 	Stayed the same 	Has deteriorated 