

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's Health & Well Being Group	Year:	2018/19
Delivery Group Chair:	Alison Bell, Public Health Consultant, Somerset County Council	Report	
Scrutiny Committee Champion:	Mrs Eilleen Tipper	Date:	12 th October 2018

Current Status:		Status Trend:	
	AMBER	(delete as appropriate)	
Reason for current status:	Work is progressing, but we are not seeing an improvement in child health in all areas as a result of these		
2. Progress since	e last Highlight re	port	
Include evidence of h	ow the plan has incorp	oorated the voice and needs	of children

- NHS England has awarded funding for a specialist perinatal and infant mental health service for Somerset
- The health and well-being survey has been completed, gaining views from over 7000 children across schools in Somerset
- 42 schools are signed up to the Somerset well-being framework adopting a whole school approach to health and well-being, focusing on emotional health and well-being

Slippage (give reasons and remedial actions)

- The development of Family Support Services will need to be rescoped, following a decision around reduction in SCC early help services
- There are still difficulties ensuring timely input to Education Health Care Plan (EHCP) from health partners
- Work has stalled on the 0-5 Speech & Language and Communication Strategy, as it is not clear this will have the desired impact and lead is leaving the Council



3. Actions and outputs for the next period:
Publication and publicising the health and well-being survey results to promote schools and
partners to take action as a result of findings
4. Most significant current risk/s:
nil return
5. Most significant current issue/s:
nil return
6. Variances:
nil return
7 Desisions required from Somerest Children's Trust

7. Decisions required from Somerset Children's Trust: Health partner inputs to EHCPs, particularly for Children Looked After and from primary care – Designated Medical Officer requested escalation.

Outcome measure/Performance Indicators	Current performance	Direction of travel (delete as appropriate)
	thy Child Programme (0-19 years) o , health visiting, school nursing, cl	consisting of integrated pathways hildren's centres, early years settings
5 mandated 0-4 years checks (as per last year)	Q1 New Birth Visit = 97% (Q4 = 95%) 6-8 week check = 94% (Q4=96%) 12 month review = 82% (Q4=94%) 2 year review = 85% (Q4 = 88%)	
% of children not reaching the expected level for development at 2.5 years, as measured by the ASQ3 tool	16% of all children 30% of children with an ASQ score recorded	
B. Improve breastfe deprivation	eding uptake and develop peer su	pport programmes in areas of
6-8-week breastfeeding prevalence	Q1 = 50% (Q4 50%)	



Current performance	Direction of travel (delete as appropriate)
en and young people and their fam activity	ilies have access to health promoting
1 breastfeeding campaign	
with children and young people e n in meaningful activity to boost se	ngaged in multiple risky behaviours If esteem
2017 Teenage Conception rate per 1000 15-17 year olds was 15.6 (England = 18.5; South West = 14.3). There was a 6.6% decrease in teenage conceptions for 2016-2017	
iving with a long term condition to nd where they go to help when thei	• •
In Development – due Q3	
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KEY			
Shows improvement	Stayed the same	Has deteriorated	
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