

**REPORT TO:** Health and Wellbeing Board

**DATE:** 7 May 2014

**REPORTING OFFICER:** Director of Public Health

**PORTFOLIO:** Children, Young People and Families

**SUBJECT:** Health and Wellbeing Strategy- Child Development action plan update

**WARDS:** Borough wide

## 1.0 PURPOSE OF THE REPORT

1.1 The purpose of this report is to provide the Health and Wellbeing Board with an update on progress with the Health and Wellbeing Child Development action plan.

**2.0 RECOMMENDATION: That the Board note the contents of the report and the appended action plan.**

## 3.0 SUPPORTING INFORMATION

3.1 A child's experience during the early years is critical to their physical, cognitive and social development. During this development phase the foundations are put in place for the rest of that child's life and is a once in a lifetime opportunity to give that child the 'best start in life'. Both the Allen report (2011) and the Marmot review (2010) recognised the importance of giving every child the optimum conditions, and how investing in this period of a child's life influences their school readiness, educational attainment, economic participation and long term health. It also makes good economic sense to invest in this period of development.

3.2 Improving levels of child development is one of the five key priority areas covered by Halton's Health and Wellbeing Strategy. The overall target set for the action plan was a 2% year on year increase in children achieving a good level of development at age 5 (Baseline 2011- 49.9%).

3.3 Unfortunately due to changes in the Early Years Foundation Stage (EYFS) curriculum and assessment the measure of child development in 2013 is not comparable to previous years, and therefore we cannot identify if there has been a year on year increase. DfE states that: ***'As the content of the Good Level of Development measure has changed, it is not possible to compare results for the new Profile with previous years.'***<sup>1</sup> When

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benchmarked against other areas level of child development in Halton ranked 150/152.

3.4 As the action plans have now been in place for over 12 months a recent review took place to gauge progress on each of the outcomes covered. In order to do this action plan leads were asked to rate each outcome using the Red, Amber, Green (RAG) system. The results of this exercise can be found attached to this report (Appendix 1). In order to provide a summary on progress a list of key developments is outlined below:

### 3.5 **Key developments**

- 100% of families have access to antenatal sessions
- 92% of women book in to see a midwife by 12 weeks and 6 days
- 100% of women are screened for mental health issues after birth, and vulnerable women are targeted through the offer of home visits
- Targeted work is underway for vulnerable women, through specialised midwives and developing health visitor pathways for specific groups, such as care leavers.
- The increase in Health visitors numbers is on target and in line with the Department of Health trajectory
- Breastfeeding rates have increased to 21.2% and Bridgewater Community Health Care trust has achieved UNICEF's Baby Friendly initiative stage 2.
- Improvements have been seen in Infant mortality, the rate is now similar to the England average (4.1 per 1000 births)
- Improvements have been achieved in the number of babies born with a Low birth weight, and the rate is similar to the England average (6.8% of babies less than 2500g. This is important because low birth weight babies have a higher risk of long and short term poorer health, disability and lower educational outcomes.
- Immunisations ( 96.4%- 1 dose at five years above England)

3.6 In addition to the above a new Family Nurse Partnership (FNP) service is being commissioned and will start in Halton in October 2014. The programme is a maternal and early years public health programme that provides intensive support to first time young mothers and their families. It is a targeted programme that builds a strong relationship between the nurse and the family and includes regular home visits and uses a psycho- educational approach.

3.7 The main aims of the FNP programme include:

- To improve pregnancy outcomes, so that their baby has the best start in life
- To improve their child's health and development by developing knowledge, skills and confidence in parenting.
- To improve parents' economic self-sufficiency, by helping them to achieve their aspirations (such as employment or returning to education)

There is strong evidence that the FNP is an effective programme that will improve a range of short and long term outcomes for both child and mother.

## **4.0 POLICY IMPLICATIONS**

- 4.1 The implementation of Health and Wellbeing action plans will directly contribute towards the successful implementation of the Health and Wellbeing Strategy.

## **5.0 OTHER/FINANCIAL IMPLICATIONS**

- 5.1 None identified at this time.

## **6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

### **6.1 Children and Young People in Halton**

All of the considerations outlined within this report directly contribute to improving outcomes for Children and Young People.

### **6.2 Employment, Learning and Skills in Halton**

Improving health outcomes for children and young people will contribute towards improving educational attainment, skills and maximising employment opportunities.

### **6.3 A Healthy Halton**

All of the areas outlined within this report focus on improving the health and wellbeing of Children and Young People.

### **6.4 A Safer Halton**

Reducing the incidence of crime, improving Community Safety and reducing the fear of crime has an impact on health outcomes particularly on mental health. There are also close links between partnerships on areas such as alcohol and domestic violence. It therefore remains a key consideration for the Health and Wellbeing Board.

### **6.5 Halton's Urban Renewal**

The environment in which we live and the physical infrastructure of our communities has a direct impact on our health and wellbeing. It should therefore be a key consideration when developing strategies to address health and wellbeing.

## **7.0 RISK ANALYSIS**

- 7.1 There is no direct risk associated with this report, however, failure to implement Health and Wellbeing action plans will mean that the commitments set out within the Health and Wellbeing Strategy would be unlikely to be met.

## **8.0 EQUALITY AND DIVERSITY ISSUES**

This is in line with all equality and diversity issues in Halton.

## **9.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

None under the meaning of the Act.