

## **Health and Wellbeing Board**

2 December 2015

Report of the Interim Director of Public Health

## **Healthy Child Service**

#### **Summary**

1. The purpose of this report is to provide the Health and Wellbeing Board with an update on the development of the new Healthy Child Service.

## **Background**

- 2. On the 27 August 2015, the City of York Council Executive made the decision that the new Healthy Child Service be developed as a Council directly provided service from 1 April 2016. This will involve the TUPE transfer of health visiting and school nursing staff from York Teaching Hospital NHS Foundation Trust, as the current provider, to the Council.
- On 1 October 2015, commissioning responsibility for health visiting successfully transferred from NHS England to the Council. This completes the final phase of the transfer of public health responsibilities to local authorities under the Health and Social Care Act 2012.
- 4. A project group has been established to implement the transfer to the Council and a Healthy Child Service Steering Group has also been established with wider stakeholder engagement to drive the development of a new operating model for the service. The project group is accountable to the Council Management Team; the Healthy Child Service Steering Group is accountable to the YorOK Board.

## Main/Key Issues to be Considered

5. The vision for the new service is to give every child in York the best start in life and enable young people to achieve their full potential through supporting them to make healthier life choices. A key priority is to tackle health inequalities and narrow the gap in health and

- wellbeing outcomes experienced by children and young people living in different areas of the City.
- 6. The new model for the service will include the provision of universal, targeted and specialist interventions, based on the model of progressive universalism in the Healthy Child Programme 0-5 and 5-19 and associated NICE guidelines.
- 7. Some of the key outcomes the new service is expected to deliver include:
  - Strong parent-child attachment and positive parenting; resulting in better social and emotional health and wellbeing and improved resilience
  - Care that helps to keep children healthy and safe
  - Healthy eating and increased physical activity contributing to a reduction in childhood obesity
  - Prevention of some serious and communicable diseases through promoting uptake of immunisation programmes
  - Increased rates of breastfeeding
  - Improved readiness for school and improved learning and educational outcomes
  - Improved oral health and a reduction in decayed teeth
  - Improved sexual health and a reduction in rates of sexually transmitted infections in young people
  - Reduced numbers of teenage pregnancies
  - Reduced numbers of young people smoking, misusing alcohol and taking drugs
- 8. A number of work streams have been established to drive forward key elements of the work programme. A key priority is to ensure that there is continuity of service provision beyond 1 April 2016 and that the staff land safely in the Council.

#### Consultation

9. Consultation took place earlier in the year on the vision and model for the new Healthy Child Service. Formal consultation is taking place with the staff as part of TUPE and there are also programmed staff briefings with those affected by the change. Further consultation is planned and a communications strategy is being developed to facilitate this, including consideration of mechanisms to communicate and engage with parents and young people about the changes.

#### **Options**

10. There are no specific options for the Board to consider other than to note the preparations for the transfer of services to the Council

#### **Analysis**

11. There are no specific options for the Board and therefore no analysis is required.

#### **Implications**

- 12. In order to ensure seamless delivery of the 0-19 Healthy Child Programme to children, young people and families in York it will be imperative that commissioners of children's services work together to shape integrated models of service provision, agree shared priorities and outcomes and make decisions on the most effective allocation of resources.
- 13. The YorOK Board will provide the vehicle for this to happen.

## **Risk Management**

14. A risk register is currently being prepared, this will identify any risks for this project.

#### Recommendations

15. The Health and Wellbeing Board are asked to note the contents of the report.

Reason: To keep the Health and Wellbeing Board appraised of the progress being made on plans for the establishment of an integrated 0-19 Healthy Child Service.

# **Contact Details**

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| Specialist Implications Officer(s) None  |   |      |            |
| Wards Affected:  |   |      | All 🔽      |
| For further information please contact the author of the report  |   |      |            |
| Background Papers:<br>None   |   |      |            |
| Annexes<br>None  |   |      |            |
| Glossary<br>NHS- National Health Service   | Δ   |      |            |
| NICE- National Institute for Health and Care Excellence TUPE Transfer of Undertakings (Protection of Employment) |   |      |            |