Priority	Progress/Action Planning already underway
Top Priority	
Support for the first 1001 days, especially for vulnerable communities	 The new Healthy Child Service integrated within Local Area Teams (early help) arrangements in August 2017. The Healthy Child Service Vision and Strategy has been updated and reflects the wider strategic landscape of children's services and health. Mandated review points within the Healthy Child Service from the antenatal period, through to 2.5 years of age means that the Healthy Child Service are able to provide support and signposting in the crucial period of the first 1001 days, leading to better outcomes across the life-course. We have seen significant improvements in relation to the number of families seen by the Healthy Child Service. For example in 2015/16 Quarter 1 23% of families received a new birth visit within 14 days. In 2017/18 Quarter 4 this had risen to 86%. When including families receiving a new birth visit outside of 14 days the figure rises to 96% for 2017/18 Quarter 4. The percentage of families who receive a 12 month development review has risen from 18% (2015/16) to 72% (2017/18 Quarter 4).
Other Priorities	
Reduce inequalities in outcomes for particular groups of children	The profile of educational performance across the City remains inconsistent with some schools successfully narrowing the gap and it widening in other schools. Analysis of the data shows that this pattern shifts year on year at school level, indicating that the results achieved

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	at individual school level tend to be cohort dependent. During 2016-17 a headteacher led project has been commissioned to improve the use of in-year data to build an accurate achievement profile for disadvantaged children. The project has focused on using a process of focused peer review to identify the most significant barriers to learning for each child and will help in the design of targeted interventions to address: 1. Poor attendance 2. Low attainment in English (particularly writing) and mathematics
	Following evaluation, the findings of the project will be shared with all schools in September 2017 and a toolkit of resources will be developed to support sustainable improvement.
	During 2017-18 a programme of school visits conducted by a former York headteacher who is an Ofsted inspector and pupil premium reviewer has focused on capturing information about the actions taken by York schools that are successfully narrowing the gap in attainment outcomes for disadvantaged pupils. The findings from this research are being shared at the Social Mobility in Education conference taking place at West Offices on 13 th July 2018.
	The conference will launch the social mobility pledge which will identify

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	actions that all schools will be asked to adopt to improve the attainment of disadvantaged pupils. During 2018-19 cross city work to narrow the gap will have a specific focus on the early years and school readiness. • Local Area Teams have worked with partners throughout York to develop Local Area Outcome Plans. These are underpinned by data in conjunction with on the ground intelligence to provide clear priorities for narrowing outcome gaps. The priorities identified have informed city wide commissioning, community groups accessing ward funding, locality problem solving meetings (e.g. in relation to anti-social behaviour, exploitation, risky behaviour, attendance issues etc)
	 Oral Health – Work is being undertaken by a multi-agency group (Oral Health Improvement Advisory Group), led by Public Health, to improve oral health outcomes across all age groups with a focus on 0-5 year olds, especially those who are at risk of oral health inequalities. Work is being undertaken to re-orientate services to prevention, for example exposure to fluoride through supervised tooth-brushing and attendance at general dental practices. One aim is to reduce hospital admissions for dental extraction in children and young people.
Ensure children and young people are free from all forms of neglect and abuse	 A new citywide multi-agency neglect strategy was developed through the Safeguarding Children Board (December 2016). Development of a

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	 multi-agency delivery plan and outcomes framework in relation to the Neglect Strategy has been completed and outcomes reviewed regularly by the Safeguarding Board's Neglect Sub-Group Delivery of multi-agency training by Safeguarding Children Board including: neglect; domestic abuse; working together to safeguard children; child sexual abuse & exploitation; safeguarding children with disabilities
	 Safeguarding Children Board has heard directly from children and young people in the care of the local authority about what the experience is like for them Reviewed child deaths across York and North Yorkshire via the Child Death Overview Panel (CDOP) to ascertain if there are multi-agency lessons to be learnt or potential modifiable factors Safeguarding Children Board organised Safeguarding Week 2016
	jointly with Safeguarding Adults Board and Safer York Partnership (plus counterparts in North Yorkshire) to raise public awareness of Domestic Abuse – resulting in increased enquiries to Children's Social Care and to Independent Domestic Abuse Services. Safeguarding Week 2018 too place in the week commencing 25 June 2018 and raised awareness of all safeguarding issues and that safeguarding is everybody's business.
	 A City of York Safeguarding Children's Board report from a 12 month Domestic Abuse Task and Finish Group looking at the impact of

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	Domestic Abuse on children and young people has been to the Safer York Partnership, with actions recommended on the sustaining of funding for services for children and young people and suggestions of where services could be provided or enhanced. A report s anticipated from the Safer York Partnership to the Safeguarding Board in October 2018 giving assurance on the action which have taken place in response. • Strengthened response from CYC Safeguarding team through the appointment of a new Safeguarding Nurse Practitioner working with the Lead Nurse for Safeguarding within the Children's Front Door service. Multi-agency working has led to sharing of information on children, young people and their families (where appropriate) and contributing to better informed responses. • Safeguarding is an integral part of the Healthy Child Service and all staff have enhanced training to respond to this. • Working with social care colleagues, the Lead Nurse for Safeguarding has rolled out the NSPCC 'Graded Care Profile' training across Children's Social Care, the Healthy Child Service an the Local Area Teams, which helps professionals work with families to identify areas within their lives where more support may be required and enables professionals to provide an appropriate response. • A new neglect screening tool has been produced which will support practitioners to identify neglect and when making use of a Graded Care

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	profile assessment would be beneficial
Improve services for students	 A student health needs assessment has recently been completed and will be presented to the Health and Wellbeing Board in July 2017. Health and Wellbeing Board will be asked to support the formation of a multi-agency partnership to lead the ongoing work around improving health and wellbeing for York students
Improve services for vulnerable mothers	 The introduction of Local Area Teams supports the improvement of outcomes for vulnerable mothers in a number of ways. Although we can demonstrate a number of individual examples of how this has improved outcomes it will take time for this to be fully reflected within performance data: The creation of multi-agency teams based within localities improves our ability to identify vulnerable mothers and understand their needs. Local Area Outcome Plans reflect on the needs identified in localities by reviewing data and by drawing upon the "on the ground" intelligence held by communities. This allows Local Area Teams to work collaboratively with any relevant partner to address identified needs, including those of vulnerable mothers. By bringing together the local authority (including healthy child service), police and the voluntary and community sector we have created a forum to share information and take an outcomes focussed approach to problem solving. Key to the approach of Local Area Teams is work to build capacity

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Priority	within communities themselves and in partners. Examples of this following the launch of Local Area Teams are: • The creation of volunteer parent mentors that are recruited and trained by Local Area Teams. Parent mentors come alongside parents to provide them with meaningful support often as part of a broader plan of support. • The commissioning of voluntary and community sector partners to engage and support families that may otherwise face isolation and lack readily accessible services. For example support to isolated mothers has been extended to include parents of children aged up to six years old. New parenting programmes have been commissioned to help parents take a strengths based approach to parenting. • Link work with schools has proved to be exceptionally productive. Schools play a key and valued role in supporting families at an early help level. The link work model means that Local Area Teams come alongside schools in this work. This can take the form of providing assurance, coaching and advice on how to support families. It can also take the form of drawing in other partners that may have already positive established relationships with families to help improve engagement. Although it is too early to judge the outcomes impact of this work the feedback provided by schools and practitioners has been very positive.
	 Work is being done regionally to establish robust clinical pathways for

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	women identified as having mental health problems during pregnancy or within the first year of the baby being born. This is being done in a collaborative way, working with partners across the region and from relevant organisations. This group is keen to bid for central funding (from the NHS) to enhance the perinatal mental health secondary care services across the region, which would include training for professionals such as health visitors, midwives etc, to be better able to support women with these problems.
Ensure that York becomes a breastfeeding friendly city	 An Infant Feeding Strategy Steering Group has been established brining together partners from across the city to create an Infant Feeding Strategy which will support maternal and child nutrition to give every child the best start in life. Breastfeeding support and wider feeding support is a corner stone of the work carried out by the Healthy Child Service, ensuring that families are supported to feed their infants and give them the best start in life.
Make sustained progress towards a smoke free generation	 An audit is currently being undertaken to better understand 'smoking in pregnancy'. The smoking cessation service in York is now provided by CYC's Wellbeing Team and work is ongoing to understand how to better engage with pregnant women who smoke and to support them to quit smoking. This work is also being picked up through the North Yorkshire and York Maternity Network, where partners are involved to

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	ensure that every contact with a pregnant woman who smokes is an opportunity to support them to quit.