

# Health and Wellbeing Board

15 July 2015

# Report of the Acting Director Of Public Health and Director of Children's Services, Education and Skills

## Update on the Healthy Child Programme 0-19 years

## Summary

 The purpose of this report is to provide the Health and Wellbeing Board with an update on the transfer of the Healthy Child Programme 0-5 years from NHS England to City of York Council on 1 October 2015 and the proposal to establish an integrated 0-19 Healthy Child Service for York.

## Background

- 2. The Healthy Child Programme <sup>1</sup>(HCP) was published in 2009 and sets out the recommended framework of services for children and young people aged 0-19 years to promote optimal health and well-being, prevent ill-health and provide early intervention when required.
- 3. The HCP delivers universal services to all children and families, including routine screening and developmental checks. Through the programme, families in need of additional support and children who are at risk of poor outcomes can be identified and the appropriate support provided; a key aim of the HCP is to reduce health inequalities.
- 4. Effective implementation of the HCP 0-5 years contributes to a range of health and well-being outcomes such as:
  - Strong parent-child attachment and positive parenting; resulting in better social and emotional wellbeing and improved

<sup>&</sup>lt;sup>1</sup> The HCP comprises three guidance documents: HCP – pregnancy and the first 5 years of life; HCP – the 2 year review: HCP – from 5 to 19 years. The documents include a programme schedule of age appropriate health and development reviews.

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
- 5. The HCP 5-19 years aims to improve a range of public health outcomes including:
  - Improved sexual health and a reduction in rates of sexually transmitted infections in young people
  - Reduced numbers of teenage pregnancies
  - Healthy diet and exercise contributing to a reduction in obesity
  - Improved learning and educational outcomes
  - Smoking prevention and cessation
  - Alcohol and substance use prevention and awareness
  - Improved emotional health and well-being and improved resilience
  - The programme also incorporates the mandatory function of the National Child Measurement Programme (NCMP).

# Main / Key Issues

- On 28 January 2014 the Department of Health confirmed the transfer of 0-5 child public health services commissioning. The transfer on 1 October 2015 completes the transfer of public health responsibilities to local authorities.
- 7. The scope of the transfer includes the 0-5 Healthy Child Programme specifically:
  - Health visiting services (universal and targeted)
  - Family Nurse Partnership services (targeted services for teenage mothers)
- 8. The following commissioning responsibilities will remain with NHS England (NHSE):

- Child Health Information System (CHIS)
- The 6-8 week GP check (Child Health Surveillance)
- NHSE are also responsible for the antenatal and newborn screening and childhood immunisation programmes.
- 9. The Government has announced that certain universal elements of the HCP will be mandated in regulations in the same way it has for sexual health and some other public health services. The universal elements that are mandated are:
  - Antenatal health promotion review
  - New baby review by a health visitor usually around 10-14 days after birth
  - 6-6 week assessment
  - 1 year assessment
  - 2 to 2.5 year review (this is to be a joint review carried out by the health visiting service and the early years provider where a child is accessing early years provision).
- 10. NHSE issued guidance in October 2014 to support local areas with contract transition for health visiting and Family Nurse Partnership (FNP). York does not have a FNP service; for health visiting, in order to ensure a smooth transition of responsibilities and sustainability of services, CYC has approved a Deed of Novation to confirm the contract with York Hospital Teaching NHS Foundation Trust will transfer to the Council on 1 October 2015.

# Consultation

- 11. The transfer of responsibility for the HCP 0-5 to the local authority provides a unique opportunity for CYC, together with our partners, to think about how we want to transform and integrate health, education and children's social care services and improve quality health and wellbeing outcomes for our children and young people.
- 12. Some of the opportunities already identified include:
  - Joining up commissioning for children's public health services, early help and wider family services

- Streamlining universal access to the HCP with early intervention and targeted programmes for families needing more help
- Better integration of services at the point of delivery with improved access and improved service user experience helping to lead to improved outcomes for children, young people and families and reduced health inequalities
- 13. CYC is intending to take advantage of the opportunity by developing a new Healthy Child Service that will offer an integrated child and family centred approach and deliver the HCP 0-19 years.
- 14. A public consultation was recently undertaken, targeted at a wide of stakeholders through the YorOK network and using different approaches including local media, web-based survey using Survey Monkey, newsletters, presentations to different groups and discussions at a range of professional meetings. The views of young people were sought via the Youth Council.
- 15. There were 178 responses to the online survey, with 90 of these from parents. 92% of respondents agreed with the proposed vision and strategic framework for the new 0-19 Healthy Child Service set out as annexes 1 and 2 to this report. Some of the gaps in provision and priorities emerging from the consultation include:
  - The importance and increasing demand for help with issues related to emotional wellbeing and mental health
  - Lack of advice and practical help after children have been weighed and measured as part of the National Child Measurement Programme
  - Lack of provision for young people aged 16 and over
  - Insufficient focus on the needs of children and young people who are at higher risk of poor health outcomes
  - Lack of clarity and publicity about what the services provide
  - Inconsistency of services being offered in different settings, particularly education settings

- The importance of having effective screening and health checks to identify problems that may be impacting on the child's development and identifying these problems early
- Better integration of services universal, targeted and specialist

#### **Recommended Model for a New 0-19 Healthy Child Service**

- 16. The new service is intended 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.
- 17. Some of the challenges that the new delivery model will need to address include:
  - Ensuring the accessibility and visibility of the service and better communication about the role
  - Ensuring that there is a standard operating framework in place to ensure consistency of quality of care across all settings where the service is offered and measurement of outcomes
  - Establishing a seamless HCP 0-19 including having due regard to key transition points such as on entering school, leaving care and transition to adult provision
  - Effective partnership working with NHSE and CCG commissioned services including screening, childhood immunisation, maternity, primary care and paediatric services for children and young people with long term health conditions and complex health care needs
  - Meeting unmet need including outreach work with children and young people not in mainstream school including those being educated at home, those in Pupil Referral Unit and alternative education as well as 16-19 years old who may be in need or at risk of unhealthy behaviours
  - Prioritising important public health action such as breastfeeding, emotional health and wellbeing, smoking prevention, alcohol and substance misuse, healthy weight and improved sexual health and reduction in teenage pregnancies and stopping work that is not included in the service specification.

• Ensuring appropriate data collection and reporting systems are in place across the service, to collect evidence of activity and impact as well as routine feedback from service users, partners and stakeholders.

# Options

18. There are no specific options for the Board to consider other than to note the preparations for the transfer of 0-5 services from NHS England to City of York Council and the strategic intentions to develop an integrated 0-19 Healthy Child Service.

# Analysis

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

# **Associated Implications**

- 20. 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.
- 21. The YorOK Board will provide the vehicle for this to happen.

# Recommendations

- 22. 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 to prepare for the transfer of the Healthy Child Programme 0-5 to City of York Council on 1 October 2015 and plans for the establishment of an integrated 0-19 Healthy Child Service.

## **Contact Details**

Author:	Chief Officers Responsible for the report:
Sharon Stoltz	
Interim Consultant in Public Health	Jon Stonehouse Director of Children's Services, Education and Skills
Tel No. 01904 553224	Julie Hotchkiss Acting Director of Public Health
	Report Approved✓Date01.07.2015

Specialist Implications Officers: None

All	Х

Wards Affected: List wards or tick box to indicate all

# For further information please contact the author of the report

# **Background Papers:**

https://www.gov.uk/government/publications/healthy-child-programmepregnancy-and-the-first-5-years-of-life

https://www.gov.uk/government/publications/healthy-child-programmereview-of-children-aged-2

http://webarchive.nationalarchives.gov.uk/+/www.dh.gov.uk/en/publications/publicati

#### Annexes

**Annex 1** - Vision and Strategy: an approach for health visiting and school nursing

Annex 2 - Life Course Healthy Child Programme 0-19