

**Health and Wellbeing Board
Update on Priorities
January 2016**

<p>Title of Priority Giving every child the best start in life</p> <p>Responsible officers Gail Tolley and Dr Sarah Basham</p>	
<p>Summary of objectives</p> <p>The following objectives are outlined in the Brent Health and Wellbeing Strategy 2015-17:</p> <ol style="list-style-type: none"> 1. Evaluate our current parenting programmes with a focus on learning from best practice to inform the use of resources. 2. Agree and deliver a Child Oral Health Plan for Brent and NHS England. 3. To expand partnership working with schools, nurseries, playgroups and other early years settings to improve the wellbeing of children 4. Review our approach to childhood obesity and agree a revised strategy 5. Ensure that the council and partners is planning and ready for the transfer of health visitors and the Family Nurse partnership by 2015 to deliver our priorities for young people in Brent. <p>In addition to the objectives outlined in the Strategy, the Children's Trust are focusing on the following priority groups:</p> <ul style="list-style-type: none"> • Children under 5 • Children and young people with mental health problems • Children looked after • Children and young people with special educational needs and disability • Young Carers 	<p>Summary of key outcomes</p> <ul style="list-style-type: none"> • Families are enabled to support their children in having the best start in life through a 50 per cent increase in the number of parent champions • Outcomes across early years are above the London average
<p>Progress achieved to date</p> <ul style="list-style-type: none"> • Transformation groups established to deliver priorities set out in the Joint Commissioning Framework focusing on the 5 priority groups (<i>children under 5, children and young people with mental health problems, children looked after, children and young people with special educational needs and disability, and Young Carers</i>) 	

- Annual 2015 Public Health Report heard and noted at the 20 January Brent Cabinet meeting. Childhood obesity, tooth decay and vitamin D deficiency were identified as key concerns, but the report also detailed the following areas of progress:
 - The teenage pregnancy rate in Brent has fallen dramatically over the last seven years and has been consistently below that of London and England since 2006.
 - The numbers of women in Brent who are smoking at the time of delivery (3.2%) are very low in comparison to both London and England.
 - The uptake of childhood Immunisation in Brent is higher than London as a whole. (But still not high enough.)
 - In Brent the vast majority of women (88.8%) start breastfeeding their babies.
 - The numbers of infant deaths in Brent are small. The rate is higher than London and England but in the most recent data the difference is not statistically significant.

The report also highlighted case studies advocating successes in the following projects and ongoing work:

- Parent Champions
 - Healthy Smiles
 - Lullaby Trust
 - Smoking Cessation – ‘*Very Brief Advice*’ model
 - North West London Health Protection Team
- Healthy Weight event held in November 2015. The event was a first step in looking at the issues of obesity in the borough and develop a more strategic approach to prevention and intervention.
 - We are participating in a London Association of Directors of Public Health (LADPH) review of Obesity, which has an agreement to concentrate on Childhood Obesity.
 - A well attended Health Visitors event to review different models for 0-5 children public health identified a range of model options for consideration.
 - Joint SEND commissioning action plan agreed by Children’s Trust. Actions underway.
 - New model for children’s centres is now in place securing Brent Children’s Centres. We are now working in partnership with Barnado’s.
 - Roll out of Parent Champion role across the borough.

Planned actions for next quarter

- Set up working group of key delivery stakeholders (therapists, schools nursing, health visiting and early support workers, social care and school staff) to :- document and agree a co-ordinated pathway for the delivery of commissioned services (OT, SALT, PHYSIO, school nursing and community nursing) for CYP age 0-25 in all settings (nurseries and children’s centres, across all schools, units and FE providers).
- Complete mapping of pathways for 0 – 5 and 19 – 25.
- Agree clear protocols between health professionals (therapists and community nursing), school professionals (therapists and learning support assistant) and social care (0-13 CWD and Transitions) in delivering provision to children and young people with SEND.
- Establish links with Adult Health Commissioning.
- To scope and publish currently commissioned services between CCG, public

health, education and social care with timescales of contract renewal to enable planning for future joint commissioning of SEND.

- Development of a commissioning plan for children and young people, focusing on the five priority groups.
- Commence development of obesity strategy.
- Early Years and Family Support will be providing additional sessional support to support the emotional well-being of the most vulnerable
- Parent Champion training will continue to roll out in the next quarter with an emphasis on providing volunteers with structured opportunities to provide outreach in community settings moving towards increasingly independent outreach in the community.

Risks and mitigating actions

A newly formed Joint Commissioning Group will monitor risks and issues across commissioning priorities for children and young people.

Insufficient capacity in commissioning has been identified as a risk, but commissioning priorities for 2106/17 have been agreed with CYP and CCG.