



### **Supporting Children and Young People to be Healthy - Public Consultation**

**This document details the proposed approach to consulting with local residents on the future Leicestershire 0-19 Healthy Child Programme.**

The Healthy Child Programme (HCP) provides a service for children and families in Leicestershire and Rutland to improve their physical and mental health. It is available for children and young people aged 0-19 and young people up to age 25 who have SEND (special educational needs and disabilities) or who have left care at 18 years. The service is split into two areas, 0-10 years and 11+ age groups.

#### **The Engagement Activity to Date**

In May/early June this year the council engaged with local communities to get feedback on the current HCP and how it could be improved. There were over 70 responses to the online survey from a wide range of people including parents and carers, professionals working within the children and families service, family wellbeing centres, Youth Justice, Health Services including Maternity services and professionals working within the current service.

The service held workshops with schools and other professionals to hear their views. The questions used in the online survey were mirrored in the workshop activity to enable a broad basis of comparison. The service has also presented the completed engagement activity to the Leicestershire Equalities Challenge Group to get their suggestions on which community organisations, additional methods and channels can be used to broaden the reach for the next phase of activity.

Some of the key messages that the council heard from the engagement activity are stated below.

#### **On the 0-10 Service for Leicestershire, participants suggested that the service would benefit from:**

- more face to face contact
- support with referrals for children with additional needs or complex needs
- a named Health Visitor
- a named lead with access to Health records to work with schools
- support for staff in schools who work with most vulnerable children

The feedback from initial engagement also included that some women do not feel supported postnatally and concerns about the reduced availability of face to face support services were raised. These included missed checks, particularly as the two lockdown periods were approximately a year apart leading to some families not being seen at all since the 6-8 weeks check. This represents a lost opportunity to check for any developmental issues or safeguarding concerns as the focus was on most vulnerable known to services.

#### **On the 11+ service for Leicestershire, participants suggested that the service would benefit from:**

- a named health lead with access to health records
- a telephone/online support to seek advice
- specialists to talk to for specific areas of concern such as mental health and emotional wellbeing and special needs and disabilities

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- contributions from Health to Education and Health Care plans (EHCP)

**Local Priorities**

As a result of the survey and wider engagement with schools and professionals, additional local priorities were identified as follows:

- Emotional wellbeing; self-esteem and body-image
- Addressing inactivity and increases in obesity
- Delayed communication, i.e. problems with speech and language development
- Digital offer research and co-produced improvements

These priorities will be considered alongside the statutory and discretionary elements of the 0-19 service.

**The Proposed Approach to Consultation**

The council would like to publicly consult on the proposed future 0-19 Healthy Child programme across the Summer and Autumn 2021. There are two main factors influencing the content of the consultation: what the council has heard in the engagement exercise and how the service proposes to reflect this in future service delivery; and new guidance from the UK government within their '1001 Critical Days'.

**1001 Critical Days**

In developing our proposals, the service has taken into account the key recommendations from the government's national review; 1001 Critical Days.

<https://www.gov.uk/government/publications/the-best-start-for-life-a-vision-for-the-1001-critical-days> .

The key recommendations are:

**Ensuring families have access to the services they need**

1. Seamless support for families: a coherent joined up Start for Life offer available to all families.
2. A welcoming hub for families: Family Hubs as a place for families to access Start for Life services.
3. The information families need when they need it: designing digital, virtual and telephone offers around the needs of the family.

**Ensuring the Start for Life<sup>i</sup> system is working together to give families the support they need**

4. An empowered Start for Life workforce: developing a modern skilled workforce to meet the changing needs of families.
5. Continually improving the Start for Life offer: improving data, evaluation, outcomes and proportionate inspection.

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6. Leadership for change: ensuring local and national accountability and building the economic case.

**Proposed Changes to Service Delivery**

The tables below give an indication of how the council proposes to use the suggestions from the engagement activity and the recommendations from the national review to develop proposals for the council's 0-19 health provision (add in glossary). The proposals for the future service are still being developed and will be further refined through the consultation exercise. The table is intended to give an indication of the broad direction of travel, based on what the council has heard so far.

We're ambitious for our 0-19 service. Our vision for this service is to create an accessible, universal and targeted service to improve and health and wellbeing and reduce health inequalities within Leicestershire communities.

**0-10 Service for Leicestershire**

There will not be significant changes for the 0-10 service age group because many services in this area are statutory. Instead, the council intends to look for ways to achieve more consistent practice and an improved offer to families and professionals.

**Table 1: 0-10 Service**

<b>Element of the existing 0-10 Service</b>	<b>The current level of service delivery</b>	<b>Feedback from the engagement activity</b>	<b>Potential proposals for adjusting the existing service delivery</b>
Five mandated checks	Currently provided	Not full-service offer	Provided but with an additional check between age 3-4 months (digitally) and 2-2 ½ and school age as recommended in the national review.
Six High Impact Areas - Parenthood and early weeks <ol style="list-style-type: none"> <li>1. Maternal mental health;</li> <li>2. Breastfeeding;</li> <li>3. transition to parenthood;</li> <li>4. Healthy weight;</li> <li>5. Minor illnesses and accidents;</li> <li>6. Healthy 2 year old and getting ready for school.</li> </ol>	Provided plus one on oral health as a local priority	Additional support around speech, language and communication needs and those with special needs.	The 6 high impact areas were reviewed nationally and are now as follows: <ol style="list-style-type: none"> <li>1. Supporting Maternal and Family mental health (New)</li> <li>2. Supporting the transition to parenthood (current)</li> <li>3. Supporting breastfeeding (Current)</li> <li>4. Supporting healthy weight and Nutrition (New)</li> <li>5. Improving health literacy; reducing accidents and minor illnesses (New)</li> <li>6. Supporting health, wellbeing and development: Ready to</li> </ol>

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			learn, narrowing the 'word gap' (New) Local priorities are Oral Health and Obesity
Early prevention and intervention support (Early Help)	Provided	More engagement with: <ul style="list-style-type: none"> <li>- Early years settings</li> <li>- Children's &amp; Families Wellbeing service</li> <li>- 0-2 pathway</li> <li>- Maternity Services</li> </ul>	Better joined up working with Early years settings and Children and Families Wellbeing services to deliver a holistic offer.
Safeguarding	Provided	Missed or delayed checks impact on most vulnerable as potential opportunities not picked up.	To continue providing safeguarding
Support to Leicestershire Families	Not provided or limited provision	Engagement and partnership working to improve offer to families.	More joined up work with Children and Families Services, e.g. closer working between early years settings and Health Visitors.
Joined Up Offer (prenatal)	Provided through work with maternity and midwifery	Better communication with Maternity services and Children and Families Wellbeing service	Improved working as per 1001 Critical Days recommendations
Joined Up Offer (postnatal)	Provided through work with Children's Centres	Mental health support – low level anxiety and breastfeeding support.	Improved working with Children's Centres and 0-2 Pathway 1001 Critical Days review recommendations
Digital offer	Chat Health Health for Under 5s, health for kids; Health for Teens webpages	Face to Face to continue Additional 3-4 months check to be provided digitally.	Improved digital communication for both children, parents and carers and support to school professionals
NCMP <sup>ii</sup>	Provided		To continue

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The 11+ age group services will be targeted to support children and young people transition into school and ensure appropriate support is available focussing on the six high impact areas and defined local priorities as a result of the consultation. The council intends to look for ways to achieve more consistent approach to practice and an improved offer to families and professionals.

**Table 2: 11+ Service**

<b>Element of the existing 11+ Service</b>	<b>The current level of service delivery</b>	<b>Feedback from the engagement activity</b>	<b>Potential proposals for adjusting the existing service delivery</b>
Transition into secondary school and appropriate adult services	Transition into secondary schools and into adult services through health needs assessments	Ongoing support Support with Education Health Care Plans	Service continues at a universal level but with strengthened provision to investigate and then address gaps resulting from Covid  Services have a universal reach for all children and services are personalised to meet individual need and the early identification of additional and/or complex needs.
Current Six High Impact Areas  <ol style="list-style-type: none"> <li>1. Resilience and wellbeing</li> <li>2. Keeping Safe</li> <li>3. Healthy Lifestyles</li> <li>4. Maximising learning &amp; achievement</li> <li>5. Supporting complex and additional health &amp; wellbeing needs</li> <li>6. Transitions</li> </ol>	Provided service, somewhat limited.	Lack of support in referral processes for children with complex needs.  Additionally, local priorities should include:  <ol style="list-style-type: none"> <li>1. Mental Health and Emotional Wellbeing (building resilience) body image/self - esteem,</li> <li>2. Healthy Relationships</li> <li>3. Healthy Lifestyles (physical activity and Nutrition)</li> <li>4. Substance</li> </ol>	The 6 high impact areas were reviewed nationally and are now as follows:  <ol style="list-style-type: none"> <li>1. Supporting resilience and wellbeing (Current)</li> <li>2. Improving health behaviours and reducing risk taking (New)</li> <li>3. Supporting healthy lifestyles (Current)</li> <li>4. Supporting vulnerable young people and improving health inequalities (New)</li> <li>5. Supporting complex and additional health and wellbeing needs (Current)</li> <li>6. Promoting self-care and improving health literacy</li> </ol>

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		misuse/Alcohol	(New)  We will also address the local priorities identified through the engagement
Training of school staff	Training provided online but limited to epilepsy and asthma	Supervision for school pastoral support staff.  Supporting needs of children with complex needs.	A programme of training based on school health profiles which is specific to each school
Provision to children and YP excluded from school or home schooled	Not provided or limited service	Health offer for children who are home educated or excluded from school.	The same level of support will be provided but in the place of learning
Provision to Looked After Children	Not provided - Health offer for children in care is the same universal offer.	Understand the needs of children on EHCP and contribute to plans to ensure Health input.	Ensure staff undertaking IHA and RHA know what the offer from Public Health is so that they can then signpost children and YP to appropriate services
Digital offer	ChatHealth and Health for Teens webpages.	ChatHealth not widely used by children and young people would prefer face to face.  Understand the varying needs of those most vulnerable and appropriate support in place.	Co-produce improved digital communication for both children and YP and support to school professionals with Children and Family Services
Support to children and young people with Special Needs aged 19 and over	Currently digital offer only.	Supporting needs of children with complex needs.	Provide the same offer as other 11+ but more personalised to reflect the place of learning
Healthy child programme offer in Special Schools	Limited service provided.	Supporting needs of children with complex needs.	Provide the same offer as other 11+ but more personalised to reflect the place of learning
Roles providing support are dedicated to 11+	School nursing provided as part of	Recruitment and retention	11+ children and YP will receive support from a range of

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age group	overall contract for 0-19 services	concerns Named H/V Skill mix	professionals based on need. Some of this will be universal and some through targeted specialists, e.g. low level mental health and emotional wellbeing counselling
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**Transitions into school and adult services**

Supporting transition for school aged children is a key element of the Healthy child programme, for example there is a focus on children ready to learn at the age of two and ready for school at age 5.

It is expected that the service provider will work with adult services to ensure smooth transition for more vulnerable children, those who are in care or have additional needs and require adult services.

Commissioning clinical support for children with additional health needs or long-term conditions and disabilities, including clinical support for example incontinence or diabetes, lies with NHS England and clinical commissioning groups, to ensure co-ordinated support across the life course.

**The target groups for the consultation exercise will include:**

- Children and Young people and their families
- Professionals working with children and their families

**The proposed method for consulting with these groups will include:**

- Online questionnaire
- Focus groups
- School Staff survey

The results from the public consultation are due to be presented to Cabinet in October 2021. The service proposes to go present the consultation activity to Scrutiny in September 2021.

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<sup>i</sup> Start for Life or Start4Life is a government campaign to support a better **start in life** for infants from birth, by providing healthcare professionals with accessible, concise information about the recommendations on breastfeeding, appropriate introduction of solid foods and active play.

<sup>ii</sup> The National Child Measurement **Programme (NCMP)** measures the height and weight of children in Reception class (aged 4 to 5) and year 6 (aged 10 to 11), to assess overweight and obesity levels in children within primary schools. This programme will continue in line with government guidance.

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